

Washington County Public Schools
Anthem BCBS and Delta Dental Option Benefit Sheet
2016 - 2017 School Year

Full-Time, Contracted Employees:

TIER I KeyCare 25 \$500 Deductible				TIER II KeyCare 30 \$1,000 Deductible				TIER III KeyCare 30 \$2,000 Deductible				Lumenos HSA-3000 Deductible				
MEMBERSHIP	PAID BY EMPLOYEE	PAID BY SCHOOL BOARD	TOTAL COST PER MONTH*	MEMBERSHIP	PAID BY EMPLOYEE	PAID BY SCHOOL BOARD	TOTAL COST PER MONTH*	MEMBERSHIP	PAID BY EMPLOYEE	PAID BY SCHOOL BOARD	TOTAL COST PER MONTH*	MEMBERSHIP	PAID BY EMPLOYEE	PAID BY SCHOOL BOARD	TOTAL COST PER MONTH*	*\$500 HRA
Employee Only	\$66	\$ 590	\$655	Employee Only	\$ 20	\$ 613	\$633	Employee Only	\$5	\$ 593	\$598	Employee Only	\$ -	\$ 542	\$542	\$500 HRA
Employee/Child	\$345	\$ 768	\$1,113	Employee/Child	\$ 305	\$ 770	\$1,075	Employee/Child	\$250	\$ 762	\$1,012	Employee/Child	\$ 163	\$ 756	\$919	\$500 HRA
Employee/Children	\$388	\$ 864	\$1,252	Employee/Children	\$ 344	\$ 865	\$1,209	Employee/Children	\$277	\$ 863	\$1,140	Employee/Children	\$ 192	\$ 845	\$1,037	\$500 HRA
Employee/Spouse	\$427	\$ 951	\$1,378	Employee/Spouse	\$ 378	\$ 950	\$1,328	Employee/Spouse	\$304	\$ 950	\$1,254	Employee/Spouse	\$ 207	\$ 933	\$1,140	\$500 HRA
Employee/Family	\$641	\$ 1,191	\$1,832	Employee/Family	\$ 571	\$ 1,199	\$1,770	Employee/Family	\$527	\$ 1,141	\$1,668	Employee/Family	\$ 385	#####	\$1,516	\$500 HRA

***\$500 Health Reimbursement Account (HRA) for each employee enrolled in the Lumenos High Deductible Plan 3000.**

Guide for Part-Time, Food Service Employees:

	MEMBERSHIP	PAID BY EMPLOYEE	PAID BY FOOD SERVICE FUND	TOTAL COST PER MONTH*	MEMBERSHIP	PAID BY EMPLOYEE	PAID BY FOOD SERVICE FUND	TOTAL COST PER MONTH*	MEMBERSHIP	PAID BY EMPLOYEE	PAID BY FOOD SERVICE FUND	TOTAL COST PER MONTH*	MEMBERSHIP	PAID BY EMPLOYEE	PAID BY FOOD SERVICE FUND	TOTAL COST PER MONTH*
5 Hr/day	Employee Only	\$213	\$ 442	\$655	Employee Only	\$119	\$ 514	\$633	Employee Only	\$101	\$ 497	\$598	Employee Only	\$78	\$ 464	\$542
	Employee/Child	\$469	\$ 644	\$1,113	Employee/Child	\$427	\$ 648	\$1,075	Employee/Child	\$373	\$ 639	\$1,012	Employee/Child	\$267	\$ 652	\$919
	Employee/Children	\$528	\$ 724	\$1,252	Employee/Children	\$480	\$ 729	\$1,209	Employee/Children	\$416	\$ 724	\$1,140	Employee/Children	\$308	\$ 729	\$1,037
	Employee/Spouse	\$582	\$ 796	\$1,378	Employee/Spouse	\$528	\$ 800	\$1,328	Employee/Spouse	\$457	\$ 797	\$1,254	Employee/Spouse	\$335	\$ 805	\$1,140
	Employee/Family	\$835	\$ 997	\$1,832	Employee/Family	\$759	\$ 1,011	\$1,770	Employee/Family	\$710	\$ 958	\$1,668	Employee/Family	\$537	\$ 979	\$1,516
4 Hr/day	Employee Only	\$352	\$ 303	\$655	Employee Only	\$211	\$ 422	\$633	Employee Only	\$191	\$ 407	\$598	Employee Only	\$151	\$ 391	\$542
	Employee/Child	\$586	\$ 527	\$1,113	Employee/Child	\$541	\$ 534	\$1,075	Employee/Child	\$488	\$ 524	\$1,012	Employee/Child	\$365	\$ 554	\$919
	Employee/Children	\$659	\$ 593	\$1,252	Employee/Children	\$609	\$ 600	\$1,209	Employee/Children	\$547	\$ 593	\$1,140	Employee/Children	\$418	\$ 619	\$1,037
	Employee/Spouse	\$727	\$ 651	\$1,378	Employee/Spouse	\$669	\$ 659	\$1,328	Employee/Spouse	\$601	\$ 653	\$1,254	Employee/Spouse	\$455	\$ 685	\$1,140
	Employee/Family	\$1,016	\$ 816	\$1,832	Employee/Family	\$936	\$ 834	\$1,770	Employee/Family	\$882	\$ 786	\$1,668	Employee/Family	\$680	\$ 836	\$1,516

***Note: Twelve-Month Rates/Coverage**