



## 2023 CUMBERLAND COUNTY SCHOOLS

HEALTH INSURANCE **MONTHLY** PREMIUMS JANUARY 1, 2023 - DECEMBER 31, 2023

NETWORK BLUE CROSS PPO AND CIGNA LOCAL PLUS	COVERAGE LEVEL	MONTHLY PREMIUM	CERTIFIED MONTHLY COST		NON-CERTIFIED MONTHLY COST	
			CC-BOE RATES	EE RATES	CC-BOE RATES	EE RATES
PREMIER PLAN	EMPLOYEE	683.00	683.00	0.00	683.00	0.00
	EMPLOYEE + CHILD(REN)	1126.00	1126.00	0.00	683.00	443.00
	EMPLOYEE + SPOUSE	1469.00	1036.70	432.30	683.00	786.00
	EMPLOYEE + CHILD(REN) + SPOUSE	1692.00	1380.70	311.30	683.00	1009.00
STANDARD PLAN	EMPLOYEE	635.00	635.00	0.00	635.00	0.00
	EMPLOYEE + CHILD(REN)	1046.00	1046.00	0.00	635.00	411.00
	EMPLOYEE + SPOUSE	1364.00	963.05	400.95	635.00	729.00
	EMPLOYEE + CHILD(REN) + SPOUSE	1649.00	1317.35	331.65	635.00	1014.00
LIMITED PPO	EMPLOYEE	600.00	600.00	0.00	600.00	0.00
	EMPLOYEE + CHILD(REN)	990.00	990.00	0.00	600.00	390.00
	EMPLOYEE + SPOUSE	1291.00	910.95	380.05	600.00	691.00
	EMPLOYEE + CHILD(REN) + SPOUSE	1561.00	1246.95	314.05	600.00	961.00
CDHP/H.S.A.	EMPLOYEE	523.00	523.00	0.00	523.00	0.00
	EMPLOYEE + CHILD(REN)	863.00	863.00	0.00	523.00	340.00
	EMPLOYEE + SPOUSE	1125.00	793.90	331.10	523.00	602.00
	EMPLOYEE + CHILD(REN) + SPOUSE	1360.00	1086.65	273.35	523.00	837.00

OPEN ACCESS And BCBST Network P	COVERAGE LEVEL	MONTHLY PREMIUM	CERTIFIED MONTHLY COST		NON-CERTIFIED MONTHLY COST	
			CC-BOE RATES	EE RATES	CC-BOE RATES	EE RATES
PREMIER PLAN	EMPLOYEE	748.00	748.00	0.00	748.00	0.00
	EMPLOYEE + CHILD(REN)	1191.00	1191.00	0.00	748.00	443.00
	EMPLOYEE + SPOUSE	1599.00	1130.95	468.05	748.00	851.00
	EMPLOYEE + CHILD(REN) + SPOUSE	1905.00	1512.30	392.70	748.00	1157.00
STANDARD PLAN	EMPLOYEE	700.00	700.00	0.00	700.00	0.00
	EMPLOYEE + CHILD(REN)	1111.00	1111.00	0.00	700.00	411.00
	EMPLOYEE + SPOUSE	1494.00	1057.30	436.70	700.00	794.00
	EMPLOYEE + CHILD(REN) + SPOUSE	1779.00	1411.60	367.40	700.00	1079.00
LIMITED PPO	EMPLOYEE	665.00	665.00	0.00	665.00	0.00
	EMPLOYEE + CHILD(REN)	1055.00	1055.00	0.00	665.00	390.00
	EMPLOYEE + SPOUSE	1421.00	1005.20	415.80	665.00	756.00
	EMPLOYEE + CHILD(REN) + SPOUSE	1691.00	1341.20	349.80	665.00	1026.00
CDHP/H.S.A.	EMPLOYEE	588.00	588.00	0.00	588.00	0.00
	EMPLOYEE + CHILD(REN)	928.00	928.00	0.00	588.00	340.00
	EMPLOYEE + SPOUSE	1255.00	888.15	366.85	588.00	667.00
	EMPLOYEE + CHILD(REN) + SPOUSE	1490.00	1180.90	309.10	588.00	902.00