



## 2021 CUMBERLAND COUNTY SCHOOLS

HEALTH INSURANCE **MONTHLY** PREMIUMS JANUARY 1, 2021 - DECEMBER 31, 2021

NETWORK BLUE CROSS PPO AND CIGNA LOCAL PLUS			CERTIFIED <u>MONTHLY</u> COST		NON-CERTIFIED <u>MONTHLY</u> COST	
	COVERAGE LEVEL	<u>MONTHLY</u> PREMIUM			CC-BOE RATES	EE RATES
			CC-BOE RATES	EE RATES		
PREMIER PLAN	EMPLOYEE	640.00	640.00	0.00	640.00	0.00
	EMPLOYEE + CHILD(REN)	1055.00	1055.00	0.00	640.00	415.00
	EMPLOYEE + SPOUSE	1247.00	913.15	333.85	640.00	607.00
	EMPLOYEE + CHILD(REN) + SPOUSE	1663.00	1328.60	334.40	640.00	1023.00
STANDARD PLAN	EMPLOYEE	599.00	599.00	0.00	599.00	0.00
	EMPLOYEE + CHILD(REN)	988.00	988.00	0.00	599.00	389.00
	EMPLOYEE + SPOUSE	1169.00	855.50	313.50	599.00	570.00
	EMPLOYEE + CHILD(REN) + SPOUSE	1557.00	1244.05	312.95	599.00	958.00
LIMITED PPO	EMPLOYEE	548.00	548.00	0.00	548.00	0.00
	EMPLOYEE + CHILD(REN)	903.00	903.00	0.00	548.00	355.00
	EMPLOYEE + SPOUSE	1068.00	782.00	286.00	537.00	531.00
	EMPLOYEE + CHILD(REN) + SPOUSE	1423.00	1137.00	286.00	537.00	886.00
CDHP/H.S.A.	EMPLOYEE	465.00	465.00	0.00	465.00	0.00
	EMPLOYEE + CHILD(REN)	766.00	766.00	0.00	465.00	301.00
	EMPLOYEE + SPOUSE	907.00	663.90	243.10	465.00	442.00
	EMPLOYEE + CHILD(REN) + SPOUSE	1208.00	964.90	243.10	465.00	743.00

CIGNA OPEN ACCESS			CERTIFIED <u>MONTHLY</u> COST		NON-CERTIFIED <u>MONTHLY</u> COST	
	COVERAGE LEVEL	<u>MONTHLY</u> PREMIUM			CC-BOE RATES	EE RATES
			CC-BOE RATES	EE RATES		
PREMIER PLAN	EMPLOYEE	<b>680.00</b>	680.00	0.00	680.00	0.00
	EMPLOYEE + CHILD(REN)	<b>1095.00</b>	1095.00	0.00	680.00	415.00
	EMPLOYEE + SPOUSE	<b>1327.00</b>	971.15	355.85	680.00	647.00
	EMPLOYEE + CHILD(REN) + SPOUSE	<b>1743.00</b>	1386.60	356.40	680.00	1063.00
STANDARD PLAN	EMPLOYEE	<b>639.00</b>	639.00	0.00	639.00	0.00
	EMPLOYEE + CHILD(REN)	<b>1028.00</b>	1028.00	0.00	639.00	389.00
	EMPLOYEE + SPOUSE	<b>1249.00</b>	913.50	335.50	639.00	610.00
	EMPLOYEE + CHILD(REN) + SPOUSE	<b>1637.00</b>	1302.05	334.95	639.00	998.00
LIMITED PPO	EMPLOYEE	<b>588.00</b>	588.00	0.00	588.00	0.00
	EMPLOYEE + CHILD(REN)	<b>943.00</b>	943.00	0.00	588.00	355.00
	EMPLOYEE + SPOUSE	<b>1148.00</b>	840.00	308.00	588.00	560.00
	EMPLOYEE + CHILD(REN) + SPOUSE	<b>1503.00</b>	1195.00	308.00	588.00	915.00
CDHP/H.S.A.	EMPLOYEE	<b>505.00</b>	505.00	0.00	505.00	0.00
	EMPLOYEE + CHILD(REN)	<b>806.00</b>	806.00	0.00	505.00	301.00
	EMPLOYEE + SPOUSE	<b>987.00</b>	721.90	265.10	505.00	482.00
	EMPLOYEE + CHILD(REN) + SPOUSE	<b>1288.00</b>	1022.90	265.10	505.00	783.00