

Pelham School District - Insurance Rates

July 1, 2023 to June 30, 2024

Status	Status	Coverage Type	Cov Type/Description	Plan Type	Prescription Copays (R-Retail; M-Mail)	Enrollment Type	Monthly	Annual	District Amount	District Annual	District Monthly	Employee Annual	Employee Monthly	PESPA Equal Pay		PESPA Act
														EE 20Pays	Dist 20Pays	
PESPA	30+ HRS/WK	Medical	Access Blue New England (HMO)	AB20	R10/25/40 M10/40/70	S	975.62	11,707.44	\$7,500	7,500.00	625.00	4,207.44	350.62	210.38	375.00	247.50
PESPA	30+ HRS/WK	Medical	Access Blue New England (HMO)	AB20	R10/25/40 M10/40/70	2P	1,951.23	23,414.76	\$7,500	7,500.00	625.00	15,914.76	1,326.23	795.74	375.00	936.17
PESPA	30+ HRS/WK	Medical	Access Blue New England (HMO)	AB20	R10/25/40 M10/40/70	F	2,634.16	31,609.92	\$7,500	7,500.00	625.00	24,109.92	2,009.16	1,205.50	375.00	1,418.24
PESPA	30+ HRS/WK	Medical	Access Blue New England with Deductible (IPDED)	AB15/40 1K	R10/25/40 M10/40/70	S	839.64	10,075.68	\$7,500	7,500.00	625.00	2,575.68	214.64	128.79	375.00	151.52
PESPA	30+ HRS/WK	Medical	Access Blue New England with Deductible (IPDED)	AB15/40 1K	R10/25/40 M10/40/70	2P	1,679.28	20,151.36	\$7,500	7,500.00	625.00	12,651.36	1,054.28	632.57	375.00	744.20
PESPA	30+ HRS/WK	Medical	Access Blue New England with Deductible (IPDED)	AB15/40 1K	R10/25/40 M10/40/70	F	2,267.03	27,204.36	\$7,500	7,500.00	625.00	19,704.36	1,642.03	985.22	375.00	1,159.08
PESPA	30+ HRS/WK	Medical	Access Blue New England Deductible Site of Service	ABSOS25/30 3K	R10/25/40 M10/40/70	Single (S)	571.10	6,853.20	\$7,500	6,853.20	571.10	-	-	-	342.66	-
PESPA	30+ HRS/WK	Medical	Access Blue New England Deductible Site of Service	ABSOS25/30 3K	R10/25/40 M10/40/70	2-Person (2P)	1,142.20	13,706.40	\$7,500	7,500.00	625.00	6,206.40	517.20	310.32	375.00	365.09
PESPA	30+ HRS/WK	Medical	Access Blue New England Deductible Site of Service	ABSOS25/30 3K	R10/25/40 M10/40/70	Family (F)	1,541.97	18,503.64	\$7,500	7,500.00	625.00	11,003.64	916.97	550.19	375.00	647.28
PESPA	30+ HRS/WK	Dental	Delta Plan	OPTION 1A		S	45.56	546.72	0%	-	-	546.72	45.56	27.34	-	32.16
PESPA	30+ HRS/WK	Dental	Delta Plan	OPTION 1A		2P	88.13	1,057.56	0%	-	-	1,057.56	88.13	52.88	-	62.21
PESPA	30+ HRS/WK	Dental	Delta Plan	OPTION 1A		F	159.42	1,913.04	0%	-	-	1,913.04	159.42	95.66	-	112.54