# 2022 Employee Per Pay Rates

## **Anthem Health**

### 24 Pay Rates (Required for Employees with 24 Pay Option)

	<u>HDHP</u>	POS (80/20)	HMO (90/10)	<u>PPO</u>
Employee Only	\$ 0.00	\$ 33.08	\$ 171.91	\$ 223.68
Employee Plus One	\$ 87.33	\$ 181.40	\$ 461.15	\$ 565.58
Family	\$ 156.62	\$ 290.47	\$ 683.79	\$ 830.61
Family Dual*	\$ 78.31	\$ 145.24	\$ 341.90	\$ 415.31

#### 20 Pay Rates (Required for Employees with 20 Pay Option)

	<u>HDHP</u>	POS (80/20)	<u>HMO (90/10)</u>	<u>PPO</u>
Employee Only	\$ 0.00	\$ 39.70	\$ 206.29	\$ 268.42
Employee Plus One	\$ 104.80	\$ 217.68	\$ 553.38	\$ 678.70
Family	\$ 187.94	\$ 348.56	\$ 820.55	\$ 996.73
Family Dual*	\$ 93.97	\$ 174.29	\$ 410.28	\$ 498.37

## **Anthem Dental**

#### **24 Pay Rates** (Required for Employees with 24 Pay Option)

	<b>BASIC</b>	<u>HIGH</u>
Employee Only	\$ 4.79	\$ 12.94
Employee Plus One	\$ 10.74	\$ 25.38
Family	\$ 21.44	\$ 47.64
Family Dual*	\$ 17.48	\$ 42.89

#### 20 Pay Rates (Required for Employees with 20 Pay Option)

	<b>BASIC</b>	<u>HIGH</u>
Employee Only	\$ 5.75	\$ 15.53
Employee Plus One	\$ 12.89	\$ 30.46
Family	\$ 25.73	\$ 57.17
Family Dual*	\$ 20.97	\$ 51.47

<sup>\*</sup> The "family dual" options apply when a married couple are both employed by Suffolk Public Schools, are both eligible for insurance benefits and are both on the same plan.

Rates above are for the actual month of coverage. Employees should refer to the **Insurance** - **Separated from Employment** section of the Employee Handbook located later in this booklet for information on insurance benefits upon separation from employment.

Questions concerning these plans should be directed to the Benefits Technician in the Finance Department at benefits@spsk12.net, extension 668220 or 925-6756. For additional information regarding these plans or specific benefit questions, you may contact **Anthem** at 1-833-592-9956.