Poughkeepsie City School District 2024-25 Health Insurance Rates Non-Represented Category 4

	N
	<u>Single</u>
2024-25 Premium	\$ 15,876.00

Employee Contribution: Mandatory 10% of premium

Less:DEHIC Holiday Premium

Net 2024-25 Premium

+ Premium in excess of DEHIC Premium

= Total Employee Contribution

12 month employee1/24th payroll deduction

MVP			
	Single		<u>Family</u>
\$	15,876.00	\$	37,308.72
l <u> </u>	<u>-</u>	<u> </u>	<u>-</u>
\$	15,876.00	\$	<u>37,308.72</u>
\$	1,587.60	\$	3,730.87
\$	<u>-</u>	\$	<u>-</u>
\$	1,587.60	\$	3,730.87
\$	66.15	\$	155.46

	CDF	PHP	
	<u>Single</u>		<u>Family</u>
\$	14,407.80	\$	33,858.24
l —			
\$_	14,407.80	\$	33,858.24
\$	1,440.78	\$	3,385.82
\$		\$	<u>-</u>
\$	1,440.78	\$	3,385.82
\$	60.04	\$	141.09

Anthem BCBS				
	<u>Single</u>		<u>Family</u>	
\$	14,991.96	\$	33,432.00	
	(1,249.33)		(2,786.00)	
	13,742.63		<u> 30,646.00</u>	
	1,374.26		3,064.60	
\$	-	\$	-	
<u>\$</u>	1,374.26	<u>\$</u>	3,064.60	
\$	57.26	\$	127.69	