

MONROE #1 BOCES**2024 MONTHLY MEDICAL INSURANCE RATES - for full time employees.****BUP (Teachers, Nurses)**

	Single	Sponsor	Head/House	Family
RASHP 2 Select	\$329.68	\$791.24	\$758.22	\$874.91
RASHP 2 Value	\$138.18	\$331.64	\$317.82	\$366.21
Signature Blue High Deductible	\$0.00	\$0.00	\$0.00	\$0.00

BUSS (Transportation, Maintenance, Food Services, Security)

	Single	Sponsor	Head/House	Family
RASHP 2 Select	\$329.68	\$791.24	\$758.22	\$874.91
RASHP 2 Value	\$138.18	\$331.64	\$317.82	\$366.21
Signature Blue High Deductible	\$0.00	\$0.00	\$0.00	\$0.00

BPA (Para)

	Single	Sponsor	Head/House	Family
RASHP 2 Select	\$306.65	\$735.96	\$705.25	\$813.88
RASHP 2 Value	\$115.15	\$276.36	\$264.85	\$305.18
Signature Blue High Deductible	\$0.00	\$0.00	\$0.00	\$0.00

PSP/MISC (Prof Support - Clerical, Technology; Miscellaneous)

	Single	Sponsor	Head/House	Family
RASHP 2 Select	\$320.47	\$769.13	\$737.03	\$850.50
RASHP 2 Value	\$128.97	\$309.53	\$296.63	\$341.80
Signature Blue High Deductible	\$0.00	\$0.00	\$0.00	\$0.00

BASA (Administrators)

	Single	Sponsor	Head/House	Family
RASHP 2 Select	\$329.68	\$791.24	\$758.22	\$874.91
RASHP 2 Value	\$138.18	\$331.64	\$317.82	\$366.21
Signature Blue High Deductible	\$0.00	\$0.00	\$0.00	\$0.00

**Please note July-August deductions for medical are taken out of the 12 pay periods from January-June.

DENTAL INSURANCE

2024 **monthly** rates for full time employees for Dental Insurance. **Taken the 2nd check of each month.

	Single	Family
	\$5.47	\$15.16