# Delran Board of Education Health Benefit Plan Options - <u>Employees Hired Before 7/1/2020</u> (Rates Effective 7-1-2023 to 6-30-2024)

### **MEDICAL PLAN OPTIONS - SHIF/AETNA & AMERIHEALTH**

	*NJEHP	*Garden State Plan	POS/PPO \$10	POS/PPO \$15/\$25	POS/PPO \$20/\$30	HNO/EPO \$20/\$35
	Monthly Rates	Monthly Rates	Monthly Rates	Monthly Rates	Monthly Rates	Monthly Rates
Single	\$893.00	\$859.00	\$942.00	\$851.00	\$799.00	\$623.00
Parent/Child(ren)	\$1,659.00	\$1,595.00	\$1,748.00	\$1,582.00	\$1,486.00	\$1,159.00
Member/Spouse	\$1,783.00	\$1,716.00	\$1,878.00	\$1,700.00	\$1,596.00	\$1,248.00
Family	\$2,550.00	\$2,453.00	\$2,687.00	\$2,431.00	\$2,285.00	\$1,782.00

### **PRESCRIPTION - BENECARD/Rx ALLIANCE**

	*NJEHP/GSP	Retail: \$10/\$20/\$30 Mail: \$20/\$40/\$60	Retail: \$1/\$1 Mail: \$0/\$0
	Monthly Rates	Monthly Rates	Monthly Rates
Single	\$252.83	\$274.24	\$283.42
Parent/Child(ren)	\$393.79	\$427.81	\$442.17
Member/Spouse	\$505.62	\$548.48	\$566.90
Family	\$647.11	\$702.04	\$725.64

## **DENTAL - HORIZON**

	Dental Option Plan	Dental Choice Plan A	Total Care
	Monthly Rates	Monthly Rates	Monthly Rates
Single	\$38.29	\$21.20	\$45.91
Parent/Child	\$79.48	\$43.97	\$95.26
Member/Spouse	\$79.48	\$43.97	\$95.26
Family	\$126.39	\$69.92	\$151.49

\*Please note, the NJ Educator Plan and GSP for medical and prescriptions benefits must be selected together. Employee contributions for this plan are based on the new Chapter 44 Contribution Scale. All other options apply to the Chapter 78 and/or Collectively Bargained employee contributions.

# Delran Board of Education Health Benefit Plan Options - <u>Employees Hired On or After 7/1/2020</u> (Rates Effective 7-1-2023 to 6-30-2024)

### **MEDICAL PLAN OPTION - SHIF/AETNA & AMERIHEALTH**

	*NJ Educators Plan	
Coverage Level	Monthly Rates	
Single	\$893.00	
Parent/Child(ren)	\$1,659.00	
Member Spouse	\$1,783.00	
Family	\$2,550.00	

### PRESCRIPTION PLAN OPTION - BENECARD/Rx ALLIANCE

	*NJ Educators Plan/GSP
Coverage Level	Monthly Rates
Single	\$252.83
Parent/Child(ren)	\$393.79
Member Spouse	\$505.62
Family	\$647.11

DENTAL PLAN OPTIONS	- HORIZON		
	Dental Option Plan	Dental Choice Plan A	Total Care
Coverage Level	Monthly Rates	Monthly Rates	Monthly Rates
Single	\$38.29	\$21.20	\$45.91
Parent/Child	\$79.48	\$43.97	\$95.26
Member Spouse	\$79.48	\$43.97	\$95.26
Family	\$126.39	\$69.92	\$151.49

\*Please note, the NJ Educator Plan and GSP for medical and prescriptions benefits must be selected together. Employee contributions for this plan are based on the new Chapter 44 Contribution Scale. Employee contributions for the dental plan are based on Chapter 78 and/or Collectively Bargained employee contributions.

	*Garden State Plan	
Coverage Level	Monthly Rates	
Single	\$859.00	
Parent/Child(ren)	\$1,595.00	
Member Spouse	\$1,716.00	
Family	\$2,453.00	

# **Delran Township Board of Education**

# 2023 Open Enrollment Plan Selections

Open Enrollment Begins Monday, April 24th to Friday, May 12th

All Plan Changes Become Effective 7/1/23

## Employees Hired <u>Before 7/1/20</u>

### Medical Options

NJ Educators Plan \$10/\$15 copay Garden State Plan \$10/\$15 copay POS/PPO \$10 POS/PPO \$15/\$25 POS/PPO \$20/\$30 HNO/EPO \$20/\$35

### **Prescription Options**

NJ Educators Plan/GSP Rx Retail Copays \$5/\$10 Garden State Plan Rx Retail Copays \$10/\$20/\$30 Rx Retail Copays \$1/\$1 (Admin.) **Dental** Dental Option Plan Dental Choice Plan A Total Care

### **EMPLOYEE CONTRIBUTIONS**

Chapter 44 Salary Based Contribution Applies to-NJ Educator Plan/GSP - Medical and Prescription

**Chapter 78 Contributions or Collectively Bargained** 

Applies to-POS/PPO \$10 POS/PPO \$15/\$25 POS/PPO \$20/\$30 HNO/EPO \$20/\$35

Rx Retail Copays \$10/\$20/\$30 Rx Retail Copays \$1/\$1 (Admin.)

> Dental Option Plan Dental Choice Plan A Total Care

## Employees Hired On or After 7/1/20

Medical Option NJ Educators Plan \$10/\$15 copay Garden State Plan \$10/\$15 copay

Prescription Option NJ Educators Plan/GSP Rx Retail Copays \$5/\$10

> Dental Dental Option Plan Dental Choice Plan A Total Care

### **EMPLOYEE CONTRIBUTIONS**

**Chapter 44 Salary Based Contribution** Applies to-NJ Educator Plan/GSP - Medical and Prescription

Chapter 78 Contributions or Collectively Bargained Applies to-Dental Option Plan Dental Choice Plan A Total Care

Please Contact the Business Office for Questions Regarding Your Employee Contributions. Please Visit Your BenePortal for Additional Information <u>https://www.delranboebenefits.com/</u>