## ADEL DESOTO MINBURN COMMUNITY SCHOOLS

## **CLASSIFIED - 10 MONTH EMPLOYEES**

Effective July 1, 2024

Payroll deduction October through June payrolls



Info below is based upon the number of hours you currently work. If your hours for next school year change, your benefit deduction for medical insurance may also change.

Medical -			Blue Advantage HMO	
Wellmark Blue Cross & Blue Shield	Blue Choice 750 Point-of-Service	Copay 1250 PPO		
	Monthly Payroll Deduction	Monthly Payroll Deduction	Monthly Payroll Deduction	
EMPLOYEE ONLY COVERAGE				
6 00 - 7 00 hours daily Mon-Thurs	\$ 50.08	\$ 102.95	\$ 108.55	
7 25 - 7 50 hours daily Mon-Thurs	\$ free	\$ 48.68	\$ 54.28	
7 75 hours daily Mon-Thurs	free	\$ 21.53	\$ 27.13	
8 00 hours daily Mon-Thurs	free	free	free	
TWO PERSON COVERAGE				
6 00 - 7 00 hours daily Mon-Thurs	\$ 803.59	\$ 908.73	\$ 919.87	
7 25 - 7 50 hours daily Mon-Thurs	\$ 749.32	\$ 854.47	\$ 865.60	
7 75 hours daily Mon-Thurs	\$ 722.17	\$ 827.32	\$ 838.45	
8 00 hours daily Mon-Thurs	\$ 695.04	\$ 800.19	\$ 811.62	
FAMILY COVERAGE				
6 00 - 7 00 hours daily Mon-Thurs	\$ 1,591.68	\$ 1,751.51	\$ 1,768.44	
7 25 - 7 50 hours daily Mon-Thurs	\$ 1,537.41	\$ 1,697.24	\$ 1,714.17	
7 75 hours daily Mon-Thurs	\$ 1,510.27	\$ 1,670.09	\$ 1,687.03	
8 00 hours daily Mon-Thurs	\$ 1,483.13	\$ 1,642.96	\$ 1,659.89	

Voluntary Dental	Employee only	<u>Two Person</u>	Family Monthly Payroll Deduction	
Delta Dental	Monthly Payroll deduction	Monthly Payroll Deduction		
Preventative	\$ 15.33	\$ 30.61	\$ 58.16	
Catastrophic	\$ 18.37	\$ 35.23	\$ 38.27	
Comprehensive	\$ 33.68	\$ 65.81	\$ 96.80	

Voluntary Vision -  Avesis	Employee only Monthly Payroll deduction	Emp. + Spouse Monthly Payroll deduction	Emp + child(ren) Monthly Payroll deduction	Family  Monthly Payroll  deduction
P/\$1 \$ - Materials Only	\$ 10.35	\$ 19.59	\$ 21.33	\$ 27.45
P/\$1 % - Comprehensive	\$ 14.04	\$ 26.88	\$ 29.28	\$ 37.69