FY2024 PLAN RATES	FY 2024 Monthly Rate 9/1/2023	FY 2024 District Rate 70%	FY 2024 Employee Rate 30%	FY 2024 24 Pay Deduction	FY 2024 21 Pay Deductions	FY 2024 Retiree Deduction 50%	FY 2023 COBRA 102%
Blue Care Elect							
Individual	\$1,307.23	\$915.06	\$392.17	\$196.08	\$224.10	\$653.62	\$1,333.37
Family	\$3,429.17	\$2,400.42	\$1,028.75	\$514.38	\$587.86	\$1,714.59	\$3,497.75
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Blue Choice NE							
Individual	\$1,245.80	\$872.06	\$373.74	\$186.87	\$213.57	\$622.90	\$1,270.72
Family	\$3,267.91	\$2,287.54	\$980.37	\$490.19	\$560.21	\$1,633.96	\$3,333.27
HMO Blue NE	ć1 000 00	¢700.60	¢200.20	6450.45	ć474.60	¢500.50	¢4 024 04
Individual Family	\$1,000.99 \$2,647.36	\$700.69 \$1,853.15	\$300.30 \$794.21	\$150.15 \$397.10	\$171.60 \$453.83	\$500.50 \$1,323.68	\$1,021.01 \$2,700.31
i allilly	32,047.30	\$1,633.13	3/94.21	\$397.10	Ş4J3.63	Ş1,323.06	\$2,700.51
Retiree Supplement Plans 50%							
MEDEX II 1/1/2023	\$353.94					\$176.97	
Managed Blue for Seniors 1/1/2023	6242.00					6474.00	
101 Semors 1/1/2023	\$342.00					\$171.00	
Supplements change on Jan 1st							
			Daniel Data	F00/			
Dental Blue Freedom							
Individual	\$40.29	\$20.15	\$20.15	\$10.07	\$11.51	\$20.15	\$41.10
Family	\$107.81	\$53.91	\$53.91	\$26.95	\$30.80	\$53.91	\$109.97
	7-37.01	700.01	700.01	7-0.00	755.00	700.01	Ţ = 00.07