

BILLINGS PUBLIC SCHOOL 2024/2025 BENEFITS PREMIUM BREAKDOWN

Rates Effective July 1, 2024

BEA/ ADMINISTRATION

SELECT ONLY ONE PLAN BELOW.

Qualified High Deductible Plan MED-\$1600 ind/ \$3200 fam	Emp Only: \$976	Emp + 1: \$1554	Emp + Children: \$1610	Family: \$1876
Standard Plan MED-\$1000 ind/ \$2000 fam	Emp Only: \$1061	Emp + 1: \$1689	Emp + Children: \$1750	Family: \$2039
Dental Plan (No Contribution)	Emp Only: \$59	Emp + 1: \$100	Emp + Children: \$113	Family: \$132
Vision Plan (No Contribution)	Emp Only: \$10.38	Emp + Spouse: \$20.79	Emp + Children: \$22.20	Family: \$35.48

Employees working 1.0 FTE will receive the full employee medical contribution of \$976 towards the medical plan of their choosing. Employees with less than a 1.0 FTE will receive a prorated medical contribution. In place of a dental contribution BEA/ADMIN/ CONTRACT SUPPORT employees will receive \$75 per plan year in either an HSA, FSA or limited FSA

BCEA/ LOCAL #7770 STAFF/ CONTRACT SUPPORT

SELECT ONLY ONE PLAN BELOW.

Qualified High Deductible Plan MED-\$1600 ind/ \$3200 fam	Emp Only: \$976	Emp + 1: \$1554	Emp + Children: \$1610	Family: \$1876
Standard Plan MED-\$1000 ind/ \$2000 fam	Emp Only: \$1061	Emp + 1: \$1689	Emp + Children: \$1750	Family: \$2039
Dental Plan	Emp Only: \$62	Emp + 1: \$105	Emp + Children: \$119	Family: \$139
Vision Plan (No Contribution)	Emp Only: \$10.38	Emp + Spouse: \$20.79	Emp + Children: \$22.20	Family: \$35.48

Employees working 20 + hours a week qualify for the employee medical contribution of \$1061 & employee dental contribution of \$62 per month. Employees working 17-20 hours per week are eligible for benefits on a self-pay basis