



NORTH EAST INDEPENDENT SCHOOL DISTRICT

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INFORMATION FOR THE COMMUNITY

Health Plans

Benefit information for 2015

Click on a link below to review your Health Insurance Options

- [2015 Get to know your health plans brochure](#)
- [2016 Get to know your health plans brochure](#)
- [SBC - Summary of Benefits and Coverage - PPO High Option](#)
- [SBC - Summary of Benefits and Coverage - PPO Low Option](#)
- [PPO High Option Plan Booklet](#)
- [PPO Low Option Plan Booklet](#)
- [Online resource for Pharmacy Benefit *Brochure](#)
- [When a Provider Leaves the BCBSTX Network: Facts you need to know](#)
- [Urgent Care Clinics](#)

- [Click here to find an In-Network Provider through Blue Compare](#)

- [Medicare Part D Notice to all employees](#)
- [HIPAA-Important Notice of your right to documentaion of Health Coverage](#)

Health Insurance Comparability Compliance Statement

- [Health Insurance Enrollment Form--for New Employees and Family Status Changes only.](#)
***All requests for changes to benefits must be received within 31 calendar of the qualifying event. In the event that the 31st day falls on a weekend or holiday, (including closed business days), request must be received on the last working day prior to your 31st day.*

***2015 & 2016 Premium Rates-rates will remain the same**

2015 Deductions	Blue Choice Low Option PPO			Blue Choice High Option PPO		
	Total Premium	District Contribution	Employee Pays	Total Premium	District Contribution	Employee Pays
Employee Only	\$474	\$377	\$97	\$614	\$377	\$237
Employee/Spouse	\$652	\$377	\$275	\$845	\$377	\$468
Employee/Children	\$600	\$377	\$223	\$773	\$377	\$396
Employee/Family	\$777	\$377	\$400	\$1,001	\$377	\$624

Deduction Rates as follows: Annual Premiums will be divided evenly and will apply to all benefits.

Monthly - divided into 12 payments

Bi-weekly, 10 month - divided into 20 payments

Bi-weekly, Year Round - divided into 26 payments

2015 & 2016 Deduction Schedule for Blue Choice PPO Low Option			
Category	12 Payments	20 Payments*	26 Payments
Employee Only	\$97.00	\$58.20	\$44.77
Employee + Spouse	\$275.00	\$165.00	\$126.92
Employee + Children	\$223.00	\$133.80	\$102.92
Employee + Family	\$400.00	\$240.00	\$184.62

2015 & 2016 Deduction Schedule for Blue Choice PPO High Option			
Category	12 Payments	20 Payments*	26 Payments
Employee Only	\$237.00	\$142.20	\$109.38
Employee + Spouse	\$468.00	\$280.80	\$216.00
Employee + Children	\$396.00	\$237.60	\$182.77
Employee + Family	\$624.00	\$374.40	\$288.00

***Actual deductions may differ due to rounding**

[[NEISD Homepage](#)] [[Risk Management](#)]

Any questions or comments should be directed to the **Webpage Coordinator**.

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