

**GLASSBORO PUBLIC SCHOOLS
GLASSBORO, NEW JERSEY**

TO: Mark Silverstein
 FROM: Scott Henry
 DATE: May 1, 2018
 RE: Agenda Item – Medical/Dental Benefits 2018-19 Renewal

Recommend approval of the 2018-2019 medical and dental insurance monthly premiums as detailed below:

		SINGLE			PARENT/CHILD		
VENDOR	PLAN	2017-18	2018-19	INCREASE	2017-18	2018-19	INCREASE
Amerihealth	PPO 10	1,050.33	1,115.36	65.03	2,078.51	2,207.21	193.73
	PPO HDHP	645.41	694.42	49.01	1,276.74	1,373.73	96.99
Horizon Dental	Dental Option	34.89	37.48	2.59	84.72	91.00	6.28
	Dental Choice	21.42	21.42	-	52.09	52.09	-
		2 ADULTS			FAMILY		
VENDOR	PLAN	2017-18	2018-19	INCREASE	2017-18	2018-19	INCREASE
Amerihealth	PPO 10	2,205.05	2,341.56	136.51	2,732.16	2,901.27	169.11
	PPO HDHP	1,354.71	1,457.61	102.90	1,679.33	1,806.81	127.48
Horizon Dental	Dental Option	84.72	91.00	6.28	91.80	98.60	6.80
	Dental Choice	52.09	52.09	-	56.44	56.44	-