Glassboro Board of Education 2023 Contract Rates

SHIF		
AmeriHealth		
<u>7/1/23-6/30/24</u>		
PPO 10 with \$5/\$15 rx vision rider		
single parent/ch(n) couple family dep 31	\$1,376.00 \$2,721.00 \$2,887.00 \$3,574.00 \$926.00	
PPO HDHP w/Rx vision rider		
VISIOII	rider	
single parent/ch(n) couple family dep 31	\$958.00 \$1,896.00 \$2,011.00 \$2,491.00 \$645.00	
EDUC PLAN \$10/\$15 with \$5/\$10 Rx		
single parent/ch(n) couple family dep 31	\$1,312.00 \$2,594.00 \$2,751.00 \$3,407.00 \$881.00	
Garden State Plan with \$5/\$10		
single parent/ch(n) couple family dep 31	\$1,276.00 \$2,525.00 \$2,678.00 \$3,316.00 \$858.00	

Dental		
	Horizon	150
7/1/23-6/30/24		
Group 00-01-04		
single		\$39.39
parent/ch(n)		\$95.64
couple		\$95.64
family		\$103.63
Group 10-11-13		
single	•	\$21.42
parent/ch(n)		\$52.09
couple		\$52.09
family		\$56.44

Vision		
NVA		
<u>3/1/21-2/28/25</u>		
single	\$3.74	
parent/ch(n)	\$8.22	
couple	\$7.10	
family	\$11.58	

NOTE: These rates are illustrative. Please refer to actual proposal/renewal.