

## Non Represented – School Year

### 21 - 22 Anthem Plan Options

		Bi-Weekly RATES	Employee 1.0 FTE Bi-Weekly Premium Deduction	Employee .75 FTE Bi-Weekly Premium Deduction	Employee .50 FTE Bi-Weekly Premium Deduction
<b><u>Choice Plus Plan</u></b>	Single	\$506.82	<b>No Cost to Employee</b>	\$126.71	\$253.41
	2 Person-No Doc	\$1142.28	\$ 635.46	\$762.17	\$888.87
	2 Person-W/ Doc*	\$1142.28	\$ 285.57	\$499.75	\$713.93
	Family-No Doc	\$1390.31	\$ 493.35	\$717.59	\$820.28
	Family W/ Doc*	\$1,390.31	\$ 250.26	\$535.27	\$941.83
	Adult/Child	\$896.96	<b>No Cost to Employee</b>	\$224.24	\$228.48
		Bi-Weekly Rates	Employee 1.0 FTE Bi-Weekly Premium Deduction	Employee .75 FTE Bi-Weekly Premium Deduction	Employee .50 FTE Bi-Weekly Premium Deduction
<b><u>Standard 200 Plan</u></b>	Single	\$547.30	\$40.48	\$167.19	\$293.89
	2 Person-No Doc	\$1233.65	\$726.83	\$853.54	\$980.24
	2 Person-W/ Doc*	\$1233.65	\$376.94	\$591.12	\$805.30
	Family-No Doc	\$1,501.53	\$604.57	\$828.81	\$1053.05
	Family W/ Doc*	\$1,501.53	\$361.48	\$646.49	\$931.50
	Adult/Child	\$968.71	\$71.75	\$295.99	\$520.23

\*In order to receive Benefit Dollars based on Two-Person or Family status, the employee must provide evidence to the Board that his/her legal spouse/domestic partner is not eligible to receive insurance through his/her employment, and must notify the Board of any changes to the spouse's/domestic partner's eligibility.

- Spouse Documentation Options:
  1. Letter from current HR Dept verifying ineligibility
  2. [Notarized Documentation](#)

[Domestic Partner Affidavit](#) - required for all Non Legal Spouse's

\*(INC) Bi-weekly Taxable Income due to the employee from Benefit Dollars