

## WEBT Trust / Blue Cross & Blue Shield

### Health Insurance Plans July 1, 2024 - June 30, 2025

Option to change plans will be each May to be effective the following July 1st

Open enrollment to add dependents will be each November to be effective the following January 1st

PLAN B WEBT Plan 4		Employee Share Per Month	District Share Per Month	Total Premium Per Month	Deductible \$1,500.00 / \$3,000.00
Deductible \$1,500.00 Per Person	Single	\$1224.00 year/ \$102 month	\$16,584 year/ \$1382 month	\$17,808 year/ \$1484 month	Office co-pay \$40.00 20% of next \$7,500.00 for \$1,500.00
	Family	\$3360 year/ \$280 month	\$26,448 year/ \$2204 month	\$29,808 year/ \$2484 month	Total out of pocket is \$3,000.00 / \$6,000.00
	Family 2 Emp	\$0.00	\$29,808 year/ \$2484 month	\$29,808 year/ \$2484 month	**RX card & Wellness

PLAN C WEBT Plan 5		Employee Share Per Month	District Share Per Month	Total Premium Per Month	Deductible \$2,500.00 / \$5,000.00
Deductible \$2,500.00 Per Person	Single	\$0	\$15,096 year/ \$1258 month	\$15,096 year/ \$1258 month	Office co-pay \$45.00 20% of next \$7,500.00 for \$1,500.00
	Family	\$2544 year/ \$212 month	\$23,220 year/ \$1935 month	\$25,764 year/ \$2147 month	Total out of pocket is \$4,000.00 / \$8,000.00
	Family 2 Emp	\$0.00	\$25,764 year/ \$2147 month	\$25,764 year/ \$2147 month	**RX card & Wellness

\*\*Prescription Drugs for both above plans

Retail 30 day supply—\$15 generic, \$40 listed brand, \$60 non-listed brand, Specialty RX 20%. \$1500 out of pocket max for RX. Mail Order 90 day supply—\$30 generic, \$80 listed brand, \$120 non-listed brand, Specialty RX 20%. \$1500 out of pocket max for RX.