

2023 Health Premiums

Medical Plans

- **Full-Time Employees hired before January 1, 2016:** The Diocese/Parish shall pay 100% of the annual medical rate (premium) PLUS the annual deductible for the **Standard Plan, any tier (ie. Single, Employee plus one, Family).**
- **Full-Time Employees hired after December 31, 2015:** The Diocese/Parish shall pay for the **Standard Plan:**
 - 100% of the Single annual medical rate (premium) PLUS the Single annual deductible (Single Premium \$874/month, Single Deductible \$1,500).
 - 75% of the Employee + 1/Family Plan annual medical rate (premium) PLUS the annual deductible
 - i.e. – Family Premium \$2,447 minus Single Premium **\$874** = \$1,573. 75% x \$1,573 = **\$1,179.75**. Family Deductible \$3,000 minus Single Deductible **\$1,500** = \$1,500. 75% x \$1,500 = **\$1,125**.
 - The Diocese/Parish would pay \$2,053.75 (\$1,179.75 + \$874) in premiums and \$2,625 (\$1,500 + \$1,125) deductible.
- **Part-Time Employees:** Diocese/Parish would pay as above except at a percentage equal to the percentage of time in Letter of Agreement (Clergy) or time scheduled (Lay).
- **Alternate Plans:** An employee who chooses an Alternate Plan shall be responsible for any additional costs.
- **Employees 65 or older:** Please contact Cathy Hobart at (315) 474-6596 x131 or chobart@cnyepiscopal.org for information on Anthem BlueCard MSP PPO 100plan.

Medical Plan / Monthly Rates	Single	Employee + 1	Family
Anthem BCBS CDHP-15/HSA (Standard Plan) Premium (monthly)**	\$874.00	\$1,573.00	\$2,447.00
Deductible (annual)	\$1,500.00	\$3,000.00	\$3,000.00
Anthem BCBS CDHP-20/HSA (Alternate Plan) Premium (monthly)	\$773.00	\$1,391.00	\$2,164.00
Deductible (annual)	\$2,800.00	\$5,450.00	\$5,450.00
Anthem BCBS BlueCard PPO 100 (Alternate Plan) Premium (monthly)	\$1,139.00	\$2,050.00	\$3,189.00
Anthem BCBS BlueCard MSP PPO 100 (ages 65+ with prior authorization)	\$911.00	\$1,640.00	\$2,551.00