New Hampshire Teachers & Educational Support Personnel (ESP)

6/27/2017

MEDICAL INSURANCE BENEFITS

Rates as of July 1, 2012, rounded to the nearest dollar. District contribution shown for "full time" employees.

(MC=Managed Care; C=Comprehensive Plan; HMO=Health Maintenance Organization; POS=Point of Service; POS-OA=Point of Service, Open Access; OAP+ = Open Access Plus; PPO=Preferred Provider Organization

n/a= Plan has changed from last year or information not available from previous yea

Region\SAU\Alpha Sort	Carrier Code	SAU	District/Local			Did Not	Rate Change	Total Monthly Premium			Sch District Contribution			IRS/IRC	Reimburse	Retiree	Marrieds	Dom. Partner	Comments:
	HT, SC, IL, O	#	Name	Medical Plan(s)	Type	Report	over 2011	(rounded to the nearest dollar)			% or $ of Premium Cost			Sec 125	No Med Ins	Ins Paid	Full Ins Pd	Coverage	
Region\SAU\Alpha Sort								Single	2-Person	Family	Single	2-Person	Family						
AM-37-Manchester ESP-P1	*O*	37	Manchester ESP	Access Blue	HMO		6.4%	$866	$1,689	$2,265	$806	$1,571	$2,107	Y	Y*				District self-insures. Lumenos new for 2010. *$1500
AM-37-Manchester ESP-P2				BlueChoice	POS		6.5%	$935	$1,825	$2,450	$799	$1,501	$2,095						
AM-37-Manchester ESP-P3				PPO High Deductible	PPO		6.5%	$607	$1,183	$1,586	$564	$1,100	$1,475						
AM-37-Manchester ESP-P4				Lumenos	HDHP		6.4%	$729	$1,430	$1,832	$678	$1,330	$1,703						
AM-37-Manchester-P1	*O*	37	Manchester	Access Blue	HMO		6.4%	$866	$1,689	$2,265	$806	$1,571	$2,107	Y					District self-insures. Lumenos new for 2010.
AM-37-Manchester-P2				BlueChoice	POS		6.5%	$935	$1,825	$2,450	$799	$1,501	$2,095						
AM-37-Manchester-P3				PPO High Deductible	PPO		6.5%	$607	$1,183	$1,586	$564	$1,100	$1,475						
AM-37-Manchester-P4				Lumenos	HDHP		6.4%	$729	$1,430	$1,832	$678	$1,330	$1,703						
CAP-08-Concord (CEAA)-P1	*SC*	8	Concord Educ	SchoolCare	POS-OA		7.7%	$798	$1,595	$2,368	85%	**	**	Y		***Y			Sept. 1, 2002. **District pays dollar equivalent of its contribution for single
CAP-08-Concord (CEAA)-P2			Assistants		HMO		7.7%	$725	$1,450	$1,958	85%	**	**						coverage toward a two-person or family plan.
CAP-08-Concord (CEAA)-P3				New	OA+		N/A	$671	$1,341	$1,811	95%	**	**						***Retiree Insurance=30% of single plan, age 55-65.
CAP-08-Concord (CEOPA)-P1	*SC*	8	Concord (CEOPA)	SchoolCare	POS-OA		7.7%	$798	$1,595	$2,368	*	*	*	Y	**Y	***Y		Y	**$700 single; $1,000 2-person; $1,400 family. *Same dollar amount as HMO
CAP-08-Concord (CEOPA)-P2			office personnel		HMO		7.7%	$725	$1,450	$1,958	85%	85%	85%						***65% of single or two-person coverage to age 65.
					OA+		N/A	$671	$1,430	$1,832	95%	95%	95%						
CAP-08-Concord-P1	*SC*	8	Concord EA	SchoolCare	OA100		7.7%	$877	$1,628	$2,198	95%	95%	95%	Y	**Y	*** Y		Y	Switch to SchoolCare 7/1/10. *Available only to employees hired before July 1, 2002.
CAP-08-Concord-P2					POS		7.7%	$798	$1,595	$2,154	85%	85%	85%						**$700 single; $1,000 2-person; $1,400 family.
CAP-08-Concord-P3					HMO		7.7%	$725	$1,450	$1,958	89%	89%	89%						***65% of single or two-person coverage to age 65. No contribution to OA+.
CAP-08-Concord-P4				New	OA+		N/A	$671	$1,341	$1,811									
CAP-19-Dunbarton-P1	*HT*	19	Dunbarton	BlueChoice	POS		4.8%	$855	$1,711	$2,310	72%	72%	72%	Y					*District will pay up to 72% of the BlueChoice premium toward other plans.
CAP-19-Dunbarton-P2				BlueChoice (2-tier)	POS		4.4%	$813	$1,626	$2,195	*	*	*						
CAP-19-Dunbarton-P3				Matthew Thornton Blue	HMO		1.5%	$762	$1,523	$2,057	*	*	*						
CAP-24-Henniker-P1	*HT*	24	Henniker	Anthem Blue Cross	C 100-MC		10.0%	$890	$1,780	$2,403	85%	85%	85%	Y	*Y		Y		*District pays $1000 single; $2000 two person; $3,000 family.
CAP-24-Henniker-P2				BlueChoice	POS		4.4%	$743	$1,486	$2,005	85%	85%	85%						
CAP-24-Henniker-P3				Matthew Thornton Blue	HMO		1.2%	$673	$1,347	$1,818	85%	85%	85%						
CAP-24-Henniker-P4				Lumenos	CDHP		New	$491	$982	$1,325	85%	85%	85%						
CAP-24-John Stark Regional E	*HT*	24	John Stark	Lumenos	CDHP		New	$491	$982	$1,325	$491	$982	$1,325	Y	**Y		Y	Y	*Maximum dollar amount per year paid by the district for health
CAP-24-John Stark Regional ESP-P2			Regional	BlueChoice	POS		4.4%	$743	$1,486	$2,005	$673	$1,010	$1,454						insurance for certain full time support staff.
CAP-24-John Stark Regional ESP-P3			ESP	Matthew Thornton Blue	HMO		1.2%	$673	$1,347	$1,818	$673	$1,010	$1,454						**Up to $5,580 cash back for any unused funds.
CAP-24-John Stark Regional-P	*HT*	24	John Stark	Lumenos	CDHP		New	$491	$982	$1,325	90%	85%	85%	Y	**Y	***Y	Y	Y	
CAP-24-John Stark Regional-P2			Regional	BlueChoice	POS		4.4%	$743	$1,486	$2,005	90%	85%	85%						**Receive $2000
CAP-24-John Stark Regional-P3				Matthew Thornton Blue	HMO		1.2%	$673	$1,347	$1,818	90%	85%	85%						***District pays single plan up to $4,000 per year for five years.
CAP-24-Weare-P1	*HT*	24	Weare	Anthem Blue Cross	C 100-MC		10.0%	$890	$1,790	$2,403	$845	$1,602	$1,705	Y	*Y		Y		*$2000 single; $5000 two-person or family.
CAP-24-Weare-P2				BlueChoice	POS		4.4%	$743	$1,486	$2,005	$706	$1,337	$1,705						
CAP-24-Weare-P3				Matthew Thornton Blue	HMO		1.2%	$673	$1,347	$1,717	$640	$1,212	$1,637						
CAP-46-Andover-P1	*SC*	46	Andover	SchoolCare	HMO		6.2%	$636	$1,272	$1,717	100%	90%	85%	Y	*		Y	Y	*50% of single HMO
CAP-46-Andover-P2					POS-OA		6.3%	$713	$1,425	$1,924	100%	90%	85%						
CAP-46-Merrimack Valley ESP	*SC*	46	Merrimack Valley	SchoolCare	HMO		3.7%	$621	$1,242	$1,677	97%	92%	82%	Y	$750			Y	
CAP-46-Merrimack Valley ESP-P2			ESP		POS-OA		3.7%	$696	$1,391	$1,878	97%	92%	82%						
CAP-46-Merrimack Valley ESP-P3					OA+		3.8%	$575	$1,149	$1,551	97%	92%	82%					Y	Open Access + New for 2008
CAP-46-Merrimack Valley-P1	*SC*	46	Merrimack Valley	SchoolCare	HMO		3.7%	$621	$1,242	$1,677	100%	93%	87%	Y	**Y		Y	Y	*District contribution equal to HMO amount.
CAP-46-Merrimack Valley-P2					POS-OA		3.7%	$696	$1,391	$1,878	100%	*	*						**45% of HMO single premium.
CAP-46-Merrimack Valley-P3					OA+		3.8%	$575	$1,149	$1,551	100%	93%	87%	Y	**Y		Y	Y	
CAP-53-Allenstown Paras-P1	*SC*	53	Allenstown Paras	SchoolCare	HMO		8.9%	$761	$1,522	$2,055	90%	75%	75%	Y	$500				
CAP-53-Allenstown Paras-P2			(ESP)		POS		8.9%	$853	$1,705	$2,302	90%	75%	75%						
CAP-53-Allenstown-P1	*SC*	53	Allenstown	SchoolCare	HMO		8.9%	$761	$1,522	$2,055	80%	80%	80%	Y	$500	*Y			*$3,077 per year for five years or to Medicare Eligibility, whichever occurs first.
CAP-53-Allenstown-P2					POS		8.9%	$853	$1,705	$2,302	80%	80%	80%						
CAP-53-Chichester-P1	*SC*	53	Chichester	SchoolCare	HMO		8.9%	$761	$1,522	$2,055	80%	80%	80%	Y	$2,000				
CAP-53-Chichester-P2					POS		8.9%	$853	$1,705	$2,302	80%	80%	80%						
CAP-53-Deerfield Paras-P1	*SC*	53	Deerfield	SchoolCare	HMO		6.4%	$652	$1,304	$1,761	90%	75%	75%	Y					
CAP-53-Deerfield Paras-P2			Para Educators		POS-OA		6.3%	$730	$1,460	$1,971	90%	75%	75%						
CAP-53-Deerfield-P1	*SC*	53	Deerfield	SchoolCare	HMO		6.4%	$652	$1,304	$1,761	90%	75%	75%	Y	$700			Y	
CAP-53-Deerfield-P2					POS-OA		6.3%	$730	$1,460	$1,971	90%	75%	75%						
CAP-53-Epsom ESP-P1	*SC*	53	Epsom ESP	SchoolCare	HMO		8.9%	$761	$1,522	$2,055	100%	80%	80%	Y	*Y				*Single=$850; 2-person=$900, Family=$1000
CAP-53-Epsom ESP-P2					POS		8.9%	$853	$1,705	$2,302	100%	80%	80%						
CAP-53-Epsom-P1	*SC*	53	Epsom	SchoolCare	HMO		8.9%	$761	$1,522	$2,055	100%	80%	80%	Y	*Y				*Single=$850; 2-person=$1,000; family=$1,200
CAP-53-Epsom-P2					POS		8.9%	$853	$1,705	$2,302	100%	80%	80%						
CAP-53-Pembroke-P1	*SC*	53	Pembroke	SchoolCare	HMO		6.4%	$652	$1,304	$1,761	80%	80%	80%	Y	$1,200	* Y	Y		* Retiree Ins=80% of single or 2-person premium, up to age 65.
CAP-53-Pembroke-P2					POS-OA		6.3%	$730	$1,460	$1,971	80%	80%	80%						
CAP-65-Kearsarge-P1	*SC*	65	Kearsarge	SchoolCare	HMO		1.9%	$652	$1,304	$1,761	85%	85%	85%	Y		* Y	Y		*Retiree Ins= single or two person HMO plan paid by the district at same percentage
CAP-65-Kearsarge-P2			Regional		POS-OA		1.8%	$730	$1,460	$1,971	80%	80%	80%						as active employees, to age 65.
CAP-66-Hopkinton ESP-P1	*HT*	66	Hopkinton ESP	Anthem Blue Cross	C 100-MC*		14.8%	$762	$1,524	$2,057	**	**	**	Y	$1,000 - $1,500				*Comp 100-MC not available to employees hired after June 30, 2006.
CAP-66-Hopkinton ESP-P2				BlueChoice	POS		5.1%	$614	$1,229	$1,659	**	**	**						**District contribution varies with years of servcice. Range varies from 55% - 90%
CAP-66-Hopkinton ESP-P3				Matthew Thornton Blue	HMO		5.7%	$577	$1,153	$1,557	**	**	**						of single coverage; 50% to 75% of 2-person plan.
CAP-66-Hopkinton-P1	*HT*	66	Hopkinton	Anthem Blue Cross	C 100-MC*		14.8%	$762	$1,524	$2,057	**87%	**87%	**87%	Y	$1,500				*Comp 100-MC not available to teachers hired after June 30, 2006.
CAP-66-Hopkinton-P2				BlueChoice	POS		5.1%	$614	$1,229	$1,659	***	***	***						**Annual teacher contribution capped at $1,950 for Comp 100-MC; $1,500
CAP-66-Hopkinton-P3				Matthew Thornton Blue	HMO		5.7%	$577	$1,153	$1,557	**95%	**92%	**92%						for BlueChoice POS; $900 for Matthew Thornton HMO. *** District pays the same as MTB
CAP-67-Bow ESP-P1	*HT*	67	Bow ESP	Matthew Thornton Blue	HMO		-5.1%	$636	$1,272	$1,717	$572	$636	$572	Y	**25%				
CAP-67-Bow ESP-P2				BlueChoice	POS		-1.9%	$714	$1,428	$1,928	$572	$636	$572						**25% of district contribution.
CAP-67-Bow-P1	*HT*	67	Bow	Matthew Thornton Blue	HMO		-5.1%	$636	$1,272	$1,717	**	**	**	Y	****25%	*****Y	Y	Y	**District pays dollar
CAP-67-Bow-P2				BlueChoice	POS		-2.2%	$701	$1,403	$1,894	90%	80%	80%						equivalent of its contribution for the POS toward the HMO. ***District pays dollar
CAP-80-Shaker Regional-P1	*SC*	80	Shaker Regional	SchoolCare	HMO		7.9%	$599	$1,198	$1,618	*	*	*	Y	$2,000				District will pay: $6224 for single, $12448 for two, $16804 for family plans.
CAP-80-Shaker Regional-P2					POS-OA		7.9%	$671	$1,342	$1,812	*	*	*						
CAP-80-Shaker Regional-P3					OA+		7.8%	$554	$1,108	$1,496	*	*	*						
E-11-Dover EOP-P1	*SC*	11	Dover EOP (ESP)	SchoolCare	HMO		1.8%	$725	$1,450	$1,958	90%	90%	90%	Y	*Y		Y		*Employee receives 25% of HMO premium for the coverage to
E-11-Dover EOP-P2			(office personnel)		POS-OA		1.8%	$812	$1,624	$2,193	83%	83%	83%						which he/she is entitled.
E-11-Dover Paras-P1	*SC*	11	Dover Paras	SchoolCare	HMO		1.8%	$725	$1,450	$1,958	60%	*	*	Y	$150				*District will pay dollar equivalent of its single person HMO contribution
E-11-Dover Paras-P2			(ESP)		POS-OA		1.8%	$812	$1,624	$2,193	*	*	*						toward other plans and coverages.

New Hampshire Teachers & Educational Support Personnel (ESP)

6/27/2017

MEDICAL INSURANCE BENEFITS

Rates as of July 1, 2012, rounded to the nearest dollar. District contribution shown for "full time" employees.
(MC=Managed Care; C=Comprehensive Plan; HMO=Health Maintenance Organization; POS=Point of Service; POS-OA=Point of Service, Open Access; OAP+ = Open Access Plus; PPO=Preferred Provider Organization
n/a= Plan has changed from last year or information not available from previous yea

Region\SAU\Alpha Sort	Carrier Code	SAU	District/Local			Did Not	Rate Change	Total Monthly Premium			Sch District Contribution			IRS/IRC	Reimburse	Retiree	Marrieds	Dom. Partner	Comments:
	HT, SC, IL, O	#	Name	Medical Plan(s)	Type	Report	over 2011	(rounded to the nearest dollar)			% or $ of Premium Cost			Sec 125	No Med Ins	Ins Paid	Full Ins Pd	Coverage	
Region\SAU\Alpha Sort								Single	2-Person	Family	Single	2-Person	Family						
E-11-Dover-P1	*SC*	11	Dover	SchoolCare	HMO		1.8%	$725	$1,450	$1,958	90%	90%	90%	Y	*Y		Y		*If at least 15% of bargaining unit declines coverage, each member
E-11-Dover-P2					POS-OA		1.8%	$812	$1,624	$2,193	83%	83%	83%						so declining coverage shall receive a lump sum payment of $2,000.
E-13-Freedom-P1	*SC*	13	Freedom	SchoolCare	HMO		4.3%	$706	$1,412	$1,906	85%	85%	85%	Y	$1,100				*Employee pays the difference between the district's contribution toward
E-13-Freedom-P2					POS-OA		4.4%	$791	$1,581	$2,135	*	*	*						the HMO for the POS-OA.
E-13-Madison EMP-P1	*SC*	13	Madison	SchoolCare	HMO		4.3%	$706	$1,412	$1,906	*$6808	*$13615	*$18399	Y	**Y				*Annual dollar caps for health, and dental, life and disability insurance.
E-13-Madison EMP-P2			(Teachers &		POS-OA		4.4%	$791	$1,581	$2,135	*$6808	*$13615	*$18399						$1,000 if eligible for single coveraage; $500 if eligible for two person coverage.
E-13-Madison EMP-P3			& ESP)																**Equals 20% of the difference btwn health plan cap and not taking benefits.
E-13-Tamworth ESPA-P1	*SC*	13	Tamworth ESPA	SchoolCare	HMO		4.3%	$706	$1,450	$1,958	97%	97%	97%	Y	$1,500				*Employee pays the difference between the HMO and POS-OA. District
E-13-Tamworth ESPA-P2					POS-OA		7.1%	$812	$1,624	$2,193	*	*	*						provides $650 per year for reimbursement of non-covered medical expenses.
E-13-Tamworth-P1	*SC*	13	Tamworth	SchoolCare	HMO		4.3%	$706	$1,450	$1,958	90%	90%	90%	***Y					*District pays previous year's premium, plus 1/2 of the current year's increase. **Employee
E-13-Tamworth-P2					POS-OA		7.1%	$812	$1,624	$2,193	**	**	**						pays the difference between HMO and POS-OA. ***District contributes $750 toward
E-13-Tamworth-P3																			a health care reimbursement account. Employee may contribute up to $1,500.
E-44-Northwood ESP-P1	*Y*	44	Northwood ESP	Anthem Blue Cross	JY-MC	X	0.0%	$983	$1,966	$2,655	*	*	*	Y	$1,500				*District pays dollar equivalent of its contribution toward BlueChoice for
E-44-Northwood ESP-P2				BlueChoice	POS	X	0.0%	$830	$1,661	$2,242	95%	60%	60%						other plans.
E-44-Northwood ESP-P3				Matthew Thornton Blue	HMO	X	0.0%	$764	$1,528	$2,062	*	*	*						
E-44-Northwood-P1	*Y*	44	Northwood	Anthem Blue Cross	JY-MC	X	0.0%	$983	$1,966	$2,655	91%	81.5%	81.5%	Y	$1,500				*District pays dollar equivalent of its contribution toward BlueChoice for
E-44-Northwood-P2				BlueChoice	POS	X	0.0%	$830	$1,661	$2,242	100%	85%	85%						other plans.
E-44-Northwood-P3				Matthew Thornton Blue	HMO	X	0.0%	$764	$1,528	$2,062	100%	85%	85%						
E-44-Nottingham-P1	*Y*	44	Nottingham	Anthem Blue Cross	JW	X	0.0%	$1,003	$2,007	$2,709	*	*	*	Y	$1,750			Y	*District will pay dollar equivalent of its contribution for BlueChoice
E-44-Nottingham-P2				BlueChoice	POS	X	0.0%	$818	$1,636	$2,208	95%	87%	85%						toward other plans.
E-44-Nottingham-P3				Matthew Thornton Blue	HMO	X	0.0%	$764	$1,528	$2,062	*	*	*						
E-44-Nottingham-P1	*Y*	44	Nottingham ESP	Anthem Blue Cross	JW	X	0.0%	$1,003	$2,007	$2,709	90%	*	*	Y	$1,750			Y	*District will pay dollar equivalent of its contribution for BlueChoice
E-44-Nottingham-P2				BlueChoice	POS	X	0.0%	$818	$1,636	$2,208	90%	*	*						toward other plans.
E-44-Nottingham-P3				Matthew Thornton Blue	HMO	X	0.0%	$764	$1,528	$2,062	90%	*	*						
E-44-Strafford-P1	*Y*	44	Strafford	Anthem Blue Cross	C 100-MC	X	0.0%	$929	$1,858	$2,509	95%	88%	80%	Y	$1,000				
E-44-Strafford-P2				BlueChoice	POS	X	0.0%	$830	$1,661	$2,242	95%	88%	80%						
E-44-Strafford-P3				Matthew Thornton Blue	HMO	X	0.0%	$764	$1,528	$2,062	95%	88%	80%						
E-49-Governor Wentworth-P1	*SC*	49	Governor	SchoolCare	HMO		0.0%	$725	$1,450	$1,958	90%	90%	90%	Y	$1,000			Y	*District pays dollar equivalent of its contribution for the HMO
E-49-Governor Wentworth-P2			Wentworth		POS-OA		0.0%	$812	$1,624	$2,193	*	*	*						toward the POS-OA.
E-49-Governor Wentworth-P3					OA+		0.0%	$671	$1,341	$1,811	*	*	*						Open Access + new for 2008
E-49-Gov-Wentworth ESP-P1	*SC*	49	Governor	SchoolCare	HMO		0.0%	$725	$1,450	$1,958	90%	90%	90%	Y	$1,000			Y	*District pays dollar equivalent of its contribution toward the HMO
E-49-Gov-Wentworth ESP-P2			Wentworth ESP		POS-OA		0.0%	$812	$1,624	$2,193	*	*	*						for the POS-OA.
E-49-Gov-Wentworth ESP-P3					OA+		0.0%	$671	$1,341	$1,811	*	*	*						Open Access + new for 2008
E-56-Rollinsford-P1	*SC*	56	Rollinsford	SchoolCare	POS-OA		5.3%	$898	$1,796	$2,425	95%	85%	85%	Y	$1,500				Switch to SchoolCare 3/1/10
E-56-Rollinsford-P2					HMO		5.4%	$802	$1,604	$2,166	95%	90%	90%						
E-56-Somersworth C & A-P1	*SC*	56	Somersworth	SchoolCare	POS-OA		5.3%	$898	$1,796	$2,425	95%	85%	85%	Y	$1,750				*District pays dollar equivalent of its contribution toward HMO for the
E-56-Somersworth C & A-P2			(Aides, Clerical)		HMO		5.4%	$802	$1,604	$2,166	*	*	*						POS plan. Switch to SchoolCare 3/1/10.
E-56-Somersworth ESP-P1	*SC*	56	Somersworth ESP	SchoolCare	HMO		5.4%	$802	$1,604	$2,166	98%	85%	85%	Y	$1,500				For POS plan, employee pays the difference between POS and HMO costs.
E-56-Somersworth ESP-P2			(Custodians)		POS-OA		5.3%	$898	$1,796	$2,425	*	*	*						10/1/11 Rx change to 10 /30 /65
E-56-Somersworth-P1	*SC*	56	Somersworth	SchoolCare	POS-OA		5.4%	$878	$1,755	$2,370	98%	88%	88%	Y	$1,750	**Y			Switch to SchoolCare 3/1/10
E-56-Somersworth-P2					HMO		5.4%	$784	$1,567	$2,116	98%	88%	88%						**For teachers employed before July 1, 2005 and retire after age 55,
E-56-Somersworth-P3					OA+			$725	$1,449	$1,956		*							district will pay single premium to age 65. 10/1/11 Rx change to 10 /30 /65
E-61-Farmington Paras/Food-F	*SC*	61	Farmington	SchoolCare	HMO		7.0%	$706	$1,412	$1,906	60%	*	*	Y	**				*District pays dollar equivalent of its contribution for HMO single coverage. For two person
E-61-Farmington Paras/Food-P2			Para Ed/Food Servic		POS-OA		7.0%	$791	$1,581	$2,135	*	*	*						or family coverage, and toward other plans. ** Will pay 20% of district's portion of BC JW plan
E-61-Farmington-P1	*SC*	61	Farmington	SchoolCare	HMO		7.0%	$706	$1,412	$1,906	80%	$75	$65	Y	$1,081				*District pays dollar equivalent of its contribution of the HMO
E-61-Farmington-P2					POS-OA		7.0%	$791	$1,581	$2,135	*	*	*						toward other plans.
E-64-Milton-P1	*SC*	64	Milton	SchoolCare	HMO		6.5%	$772	$1,544	$2,085	100%	80%	80%	Y	$3,300				*District pays dollar equivalent of its contribution for the HMO plan
E-64-Milton-P2					POS-OA		6.5%	$865	$1,729	$2,334	100%	*	*						toward the 2-person or family POS-OA.
E-64-Wakefield-P1	*SC*	64	Wakefield	SchoolCare	HMO		6.5%	$772	$1,544	$2,085	*88%	*88%	*88%	Y	***Y				*District pays 88% of HMO premium or $7416 single, $14831 two-person,
E-64-Wakefield-P2					POS-OA		6.5%	$865	$1,729	$2,334	**	**	**						$20021family, per year, whichever is less. **The employee pays the
E-64-Wakefield-P3																			difference between the district's contribution toward the HMO for the POS-OA.
E-64-Wakefield-P4																			***For any unused portion of the district's allotment, employee receives $1,500.
E-74-Barrington-P1	*HT*	74	Barrington	Anthem Blue Cross	C 500-MC		7.7%	$800	$1,600	$2,161	100%	100%	100%	Y	**Y				**$3,000 if eligible for two-person coverage; $4,000 if eligible for family
E-74-Barrington-P2				BlueChoice	POS		2.9%	$780	$1,560	$2,106	85%	85%	85%						coverage.
E-74-Barrington-P3				Matthew Thornton Blue	HMO		0.0%	$707	$1,414	$1,910	90%	90%	90%						
E-74-Barrington Paras P1	*HT*	74	Barrington	Comp 500	C 500-MC		7.7%	$800	$1,600	$2,161	100%	*	*	Y					* single contribution plus $1200 towards 2 person or family
E-74-Barrington Paras P2			(Paras)	BlueChoice	POS		2.9%	$780	$1,560	$2,106	85%	*	*						
E-74-Barrington Paras P3				Matthew Thornton Blue	HMO		0.0%	$707	$1,414	$1,909	90%	*	*						
LK-02-Ashland-P1	*HT*	2	Ashland	Anthem Blue Cross	C 1000-MC*	X	0.0%	$719	$1,438	$1,941	89.0%	89.0%	89.0%	Y	**Y				*District pays the first $500 of annual deductible. **50% of single plan.
LK-02-Interlakes ESP-P1	*HT*	2	Interlakes ESP	Anthem Blue Cross	C 1000-MC*	X	0.0%	$697	$1,394	$1,980	95%	94%	93%	Y		***Y			*District pays $500 per yr. toward medical expenses for each employee
LK-02-Interlakes ESP-P2						X													+ any employee medical expenses beyond the $1,000 deductible.
LK-02-Interlakes ESP-P3						X													$850 toward qualified medical expenses. ***District will pay up to two person
LK-02-Interlakes ESP-P4						X													contribution for retirees with age and service = 70+, and hired before
LK-02-Interlakes ESP-P5						X													July 1, 2005.
LK-02-Interlakes-P1	*HT*	2	Interlakes	Anthem Blue Cross	C 1000-MC*	X	0.0%	$697	$1,394	$1,980	90%	90%	90%	Y	$850**	***Y			*District pays $500 per yr. toward medical expenses for each employee +
LK-02-Interlakes-P2						X													any employee medical expenses beyond the $1,000 deductible. **District
LK-02-Interlakes-P3						X													pays up to $850 toward qualified medical expenses. ***District will pay
LK-02-Interlakes-P4						X													up to two person contribution for retirees with at least 10 yrs of service,
LK-02-Interlakes-P5						X													and hired before July 1, 2005.
LK-04-Newfound-P1	*HT*	4	Newfound	Anthem Blue Cross	C 300-MC		6.8%	$814	$1,629	$2,199	*	*	*	Y	$1,500				*district pays 90% of the HMO plan towards the Comp 300
LK-04-Newfound-P2				Matthew Thornton Blue	HMO*		-0.1%	$673	$1,347	$1,818	90%	90%	90%						
LK-18-Franklin-P1	*Y*	18	Franklin	BlueChoice	POS	X	0.0%	$767	$1,538	$2,076	90%	73%	68%	Y	$1,750	Y	Y		*Board pays dollar equivalent of its POS contribution toward the HMO plan.
LK-18-Franklin-P2				Matthew Thornton Blue	HMO	X	0.0%	$727	$1,454	$1,963	*	*	*						
LK-30-Laconia ED ASST-P1	*SC*	30	Laconia Ed. Asst.	SchoolCare NEW	OA+		N/A	$657	$1,314	$1,774	100%	100%	100%		$2,000				Switch to SchoolCare 7/1/10
LK-30-Laconia ESP-P1	*SC*	30	Laconia ESP (Cust)	SchoolCare NEW	OA+		N/A	$657	$1,314	$1,774	100%	100%	100%		$2,000	*Y			*District pays single premium until age 65. Switch to SchoolCare 7/1/10
LK-30-Laconia-P1	*SC*	30	Laconia	SchoolCare NEW	OA+		N/A	$657	$1,314	$1,774	100%	100%	100%		$3,200	*Y			*District pays single premium until age 65.
LK-45-Moultonborough-P1	*HT*	45	Moultonborough	Anthem Blue Cross	C 1000*		-1.2%	$601	$1,203	$1,625	95%	90%	90%	Y	$1,000				*District pays $500 toward deductible or other qualified medical expenses,
LK-45-Moultonborough-P2				Matthew Thornton Blue	HMO		-7.5%	$567	$1,135	$1,532	90%	88% 2	88%						plus costs incurred beyond $1,000 under the district's health plan.

New Hampshire Teachers & Educational Support Personnel (ESP)

6/27/2017

MEDICAL INSURANCE BENEFITS

Rates as of July 1, 2012, rounded to the nearest dollar. District contribution shown for "full time" employees.

(MC=Managed Care; C=Comprehensive Plan; HMO=Health Maintenance Organization; POS=Point of Service; POS-OA=Point of Service, Open Access; OAP+ = Open Access Plus; PPO=Preferred Provider Organization

n/a= Plan has changed from last year or information not available from previous yea

Region\SAU\Alpha Sort	Carrier Code	SAU	District/Local			Did Not	Rate Change	Total Monthly Premium			Sch District Contribution			IRS/IRC	Reimburse	Retiree	Marrieds	Dom. Partner	Comments:
	HT, SC, IL, O	#	Name	Medical Plan(s)	Type	Report	over 2011	(rounded to the nearest dollar)			% or $ of Premium Cost			Sec 125	No Med Ins	Ins Paid	Full Ins Pd	Coverage	
Region\SAU\Alpha Sort								Single	2-Person	Family	Single	2-Person	Family						
LK-45-Moultonborough-P3				Lumenos**	CDHP		-6.0%	$442	$883	$1,192	95%	90%	90%						** $2500 HSA
LK-48-Campton-P1	*HT*	48	Campton	BlueChoice	POS		9.2%	$805	$1,609	$2,172	92%	92%	92%	Y	$4,827	Y*			* 85% of single
LK-48-Campton-P2				Matthew Thornton Blue	HMO		7.5%	$729	$1,459	$1,969	99%	99%	99%						
LK-48-Holderness SSA-P1	*HT*	48	Holderness SSA	BlueChoice	POS		11.1%	$862	$1,724	$2,328	*	*	*	Y	$2,000				*District pays 50% - 90% of MT single
LK-48-Holderness SSA-P2			(Support Staff)	Matthew Thornton Blue	HMO		0.0%	$714	$1,427	$1,927	90%	*	*						
LK-48-Holderness-P1	*HT*	48	Holderness	BlueChoice	POS		11.1%	$862	$1,724	$2,328	90%	90%	90%	Y	**				** S=$1000, 2P= $2000, F= $3000
LK-48-Holderness-P2				Matthew Thornton Blue	HMO		7.6%	$768	$1,536	$2,073	90%	90%	90%						
LK-48-Plymouth EA-P1	*HT*	49	Plymouth	BlueChoice	POS		11.1%	$862	$1,724	$2,328	**	**	**	Y	***Y				* District pays same amount as it did in 1999-2000. **District will pay up to 10% of the increase over 2001-02.
LK-48-Plymouth EA-P2				Matthew Thornton Blue	HMO		7.6%	$768	$1,536	$2,073	88%	88%	88%						The teacher pays all rate increases beyond that amount. ***50% of single POS rate.
LK-48-Plymouth ESP-P1	*HT*	48	Plymouth ESP	BlueChoice	POS		11.1%	$862	$1,724	$2,328	100%	90%	90%	Y					
LK-48-Plymouth ESP-P2				Matthew Thornton Blue	HMO		7.6%	$768	$1,536	$2,073	100%	90%	90%						
LK-48-Plymouth Reg ESPA-P1	*HT*	49	Plymouth Regional	BlueChoice	POS		11.1%	$862	$1,724	$2,328	90%	85%	85%	Y	*Y				*50% of single POS rate.
LK-48-Plymouth Reg ESPA-P2			ESP	Matthew Thornton Blue	HMO		7.6%	$768	$1,536	$2,073	92%	90%	90%						
LK-48-Plymouth Reg-P1	*HT*	49	Plymouth	BlueChoice	POS		5.5%	$819	$1,638	$2,212	90%	90%	90%	Y	**Y				**50% of single POS rate. 2012 Rx change to 10/20/45.
LK-48-Plymouth Reg-P2			Regional	Matthew Thornton Blue	HMO		2.1%	$729	$1,459	$1,969	92%	92%	92%						
LK-48-Rumney-P1	*HT*	48	Rumney	Matthew Thornton Blue	HMO		7.6%	$768	$1,536	$2,073	90%	90%	90%						*Employees hired after 6/30/01 receive 90% payment toward premium.
LK-48-Rumney-P2				BlueChoice	POS		11.1%	$862	$1,724	$2,328	90%	90%	90%						If hired after 6/30/04, district pays 86% of premium.
LK-48-Thornton SSA-P1	*HT*	49	Thornton SSA	BlueChoice	POS		11.1%	$862	$1,724	$2,328	80%	80%	80%	Y					
LK-48-Thornton SSA-P2			Support Staff	Matthew Thornton Blue	HMO		7.6%	$768	$1,536	$2,073	80%	80%	80%						
LK-48-Thornton-P1	*HT*	48	Thornton	BlueChoice	POS		11.1%	$862	$1,724	$2,328	85%	85%	85%	Y	*Y				*50% of single POS rate.
LK-48-Thornton-P2				Matthew Thornton Blue	HMO		7.6%	$768	$1,536	$2,073	90%	90%	90%						
LK-48-Thornton-P3				Lumenos HSA	HDHP		New	$560	$1,119	$1,511	92%	92%	92%						
LK-48-Waterville Valley-P1	*HT*	48	Waterville Valley	Anthem Blue Cross	C 100-MC		11.1%	$964	$1,928	$2,603	90%	90%	90%	Y					*District pays 90% of Comp 100 rate for BlueChoice.
LK-48-Waterville Valley-P2				BlueChoice	POS		5.5%	$819	$1,638	$2,212	*	*	*						2012 Rx change to 10/20/45
LK-48-Wentworth-P1	*HT*	48	Wentworth	Matthew Thornton Blue	HMO		New	$827	$1,655	$2,234	95%	94%	90%	Y	*$1,000				*For teachers who elect not to take health insurance, the district will
LK-48-Wentworth-P2																			reimburse up to $1,000 for medical out of pocket expenses. No longer offering Blue Choice
LK-51-Pittsfield-P3				BlueChoice	POS		2.7%	$725	$1,451	$1,959	97%	97%	97%		$1,000				
LK-51-Pittsfield-P4				Matthew Thornton Blue	HMO		-0.6%	$646	$1,292	$1,744	97%	97%	97%						
LK-59-Winninsquam-P1	*SC*	59	Winnisquam	SchoolCare NEW	OA+		N/A	$748	$1,497	$1,884	95%	85%	80%	Y	$1,600	*Y			*District provides same coverage and payment for retiree and spouse
LK-59-Winninsquam-P2																			to age 65.
LK-72-Alton-P1	*SC*	72	Alton	SchoolCare	HMO		0.0%	$599	$1,198	$1,618	92%	92%	92%		$2,000				
LK-72-Alton-P2					POS-OA		0.0%	$671	$1,342	$1,812	90.5%	90.5%	90.5%						
LK-73-Gilford-P1	*HT*	73	Gilford	Anthem Blue Cross	JW-MC	X		N/A	N/A	N/A	70%	70%	70%	Y	$2,000	*Y	Y		*150 / month for retirees
LK-73-Gilford-P2				BlueChoice	POS	X	0.0%	$655	$1,309	$1,767	85%	85%	85%						
LK-73-Gilford-P3				Matthew Thornton Blue	HMO	X	0.0%	$643	$1,286	$1,736	95%	95%	95%						
LK-79-Gilmanton-P1	*HT*	79	Gilmanton	Anthem Blue Cross	JY*	X	0.0%	$1,046	$2,093	$2,826	**	**	**	Y	****Y	*****Y			*Available only to employees hired before June 30, 2001. ** District pays dollar
LK-79-Gilmanton-P2				BlueChoice	POS	X	0.0%	$870	$1,741	$2,350	100%	***	***						equivalent of its contribution to BlueChoice. ***District pays one-half the difference
LK-79-Gilmanton-P3				BlueChoice (2-tier)	POS	X	0.0%	$809	$1,617	$2,183	100%	***	***						between single coverage and two person or family. ****District pays 30% of single
LK-79-Gilmanton-P4				Matthew Thornton Blue	HMO	X	0.0%	$762	$1,524	$2,058	100%	***	***						BlueChoice plan. *****District pays 50% of single BlueChoice 3-tier plan to age 65.
LK-86-Barnstead-P1	*HT*	86	Barnstead	BlueChoice (3T5)	POS	X	0.0%	$670	$1,341	$1,810	85%	80%	80%	Y	*Y		Y		*$1,500 in lieu of a single or two person plan; $2,000 in lieu of a family plan.
LK-86-Barnstead-P2				BlueChoice	POS	X	0.0%	$662	$1,324	$1,787	85%	80%	80%						
LK-301-Prospect-P1	*SC*	301	Prospect	SchoolCare	HMO		0.0%	$599	$1,198	$1,618	91%	91%	91%		$2,000				*Employees pay the difference between distsrict contribution for HMO
LK-301-Prospect-P2			Mountain HS		POS-OA		0.0%	$671	$1,342	$1,812	*	*	*						toward OA-POS.
MON-01-Contoocook Val-P1	*HT*	1	Contoocook Valley	Anthem Blue Cross	JY-MC	X	0.0%	$744	$1,487	$2,007	**	**	**	Y			Y	Y	*Matthew Thornton Blue with $10 office copays.
MON-01-Contoocook Val-P2				Anthem Blue Cross	C 100-MC	X	0.0%	$703	$1,405	$1,897	**	**	**						**District pays dollar equivalent of 100% Matthew Thornton Blue toward
MON-01-Contoocook Val-P3				BlueChoice	POS	X	0.0%	$634	$1,269	$1,712	**	**	**						the premium for other plans.
MON-01-Contoocook Val-P4				BlueChoice (2-tier)	POS	X	0.0%	$638	$1,276	$1,723	**	**	**						
MON-01-Contoocook Val-P5				Matthew Thornton Blue	HMO	X	0.0%	$622	$1,244	$1,680	**	**	**						
MON-01-Contoocook Val-P6				Matthew Thornton Blue* 10	HMO	X	0.0%	$567	$1,133	$1,530	100%	100%	100%						
MON-29-Chesterfield ESP-P1	*Y*	29	Chesterfield ESP	Anthem Blue Cross	JW-MC	X	0.0%	$707	$1,414	$1,908	*	*	*		$1,500		Y		*District contributes 85% of its contribution toward BlueChoice for
MON-29-Chesterfield ESP-P2				BlueChoice	POS	X	0.0%	$625	$1,250	$1,688	85%	85%	85%						other plans.
MON-29-Chesterfield ESP-P3				Matthew Thornton Blue	HMO	X	0.0%	$591	$1,183	$1,597	*	*	*						
MON-29-Chesterfield-P1	*Y*	29	Chesterfield	Anthem Blue Cross	JW-MC	X	0.0%	$707	$1,414	$1,908	*	*	*		$2,500		Y		*For single coverages, district pays dollar equivalent of 100% Matthew
MON-29-Chesterfield-P2				BlueChoice	POS	X	0.0%	$625	$1,250	$1,688	*	83%	83%						Thornton Blue. For two person and family coverages, district pays dollar
MON-29-Chesterfield-P3				Matthew Thornton Blue	HMO	X	0.0%	$591	$1,183	$1,597	100%	*	*						equivalent of 83% BlueChoice.
MON-29-Harrisville-P1	*Y*	29	Harrisville	Anthem Blue Cross	JW-MC	X	0.0%	$707	$1,414	$1,908	*	*	*				Y		*District pays dollar equivalent of its contribution toward HMO for other
MON-29-Harrisville-P2				BlueChoice	POS	X	0.0%	$625	$1,250	$1,688	*	*	*						plans.
MON-29-Harrisville-P3				Matthew Thornton Blue	HMO	X	0.0%	$591	$1,183	$1,597	100%	99%	98%						
MON-29-Keene Tutors-P1	*Y*	29	Keene Tutors	Anthem Blue Cross	JW-MC	X	0.0%	$707	$1,414	$1,908	*	*	*				Y		*District pays dollar equivalent of its contribution toward BlueChoice for
MON-29-Keene Tutors-P2				BlueChoice	POS	X	0.0%	$625	$1,250	$1,688	85%	85%	85%						other plans.
MON-29-Keene Tutors-P3				Matthew Thornton Blue	HMO	X	0.0%	$591	$1,183	$1,597	*	*	*						
MON-29-Keene-P1	*Y*	29	Keene	Anthem Blue Cross	JW-MC	X	0.0%	$707	$1,414	$1,908	80%	80%	80%				Y		
MON-29-Keene-P2				BlueChoice	POS	X	0.0%	$625	$1,250	$1,688	85%	85%	85%						
MON-29-Keene-P3				Matthew Thornton Blue	HMO	X	0.0%	$591	$1,183	$1,597	85%	85%	85%						
MON-29-Marlborough-P1	*Y*	29	Marlborough	BlueChoice	POS	X		$0	$0	$0	88%	88%	88%				Y		*District pays dollar equivalent of its contribution toward BlueChoice for other
MON-29-Marlborough-P2				Matthew Thornton Blue	HMO	X		$0	$0	$0	*	*	*						plans.
MON-29-Marlow-P1	*Y*	29	Marlow	Anthem Blue Cross	JY-MC	X	0.0%	$707	$1,414	$1,908	*	*	*				Y		*District pays dollar equivalent of its contribution toward HMO for other plans.
MON-29-Marlow-P2				BlueChoice	POS	X	0.0%	$625	$1,250	$1,688	*	*	*						
MON-29-Marlow-P3				Matthew Thornton Blue	HMO	X	0.0%	$591	$1,183	$1,597	100%	98%	98%						
MON-29-Westmoreland-P1	*y*	29	Westmoreland	Anthem Blue Cross	JW-MC	X	0.0%	$707	$1,414	$1,908	*	*	*				Y		*District pays dollar equivalent of its contribution toward HMO for other
MON-29-Westmoreland-P2				BlueChoice	POS	X	0.0%	$625	$1,250	$1,688	*	*	*						plans.
MON-29-Westmoreland-P3				Matthew Thornton Blue	HMO	X	0.0%	$591	$1,183	$1,597	100%	99%	98%						
MON-38-Hinsdale ESP-P1	*HT*	92	Hinsdale	BlueChoice	POS		13.7%	$790	$1,559	$2,105	88%	88%	88%	Y			Y		
MON-38-Hinsdale ESP-P2				Matthew Thornton Blue	HMO		5.5%	$694	$1,388	$1,874	98%	97%	97%						
MON-38-Hinsdale-P1	*HT*	92	Hinsdale	BlueChoice	POS		12.2%	$780	$1,559	$2,105	85%	85%	85%	Y			Y		
MON-38-Hinsdale-P2				Matthew Thornton Blue	HMO		5.5%	$694	$1,388	$1,874	95%	90%	90%						
MON-38-Monadnock ESP-P1	*Y*	93	Monadnock ESP	BlueChoice	POS	X	0.0%	$695	$1,391	$1,878	80%	80%	80%	Y			Y		District pays dollar equivalent of its contribution toward BlueChoice for
MON-38-Monadnock ESP-P2				Matthew Thornton Blue	HMO	X	0.0%	$658	$1,316	$1,776	*	*	*						Matthew Thornton Blue.

New Hampshire Teachers & Educational Support Personnel (ESP)

6/27/2017

MEDICAL INSURANCE BENEFITS

Rates as of July 1, 2012, rounded to the nearest dollar. District contribution shown for "full time" employees.

(MC=Managed Care; C=Comprehensive Plan; HMO=Health Maintenance Organization; POS=Point of Service; POS-OA=Point of Service, Open Access; OAP+ = Open Access Plus; PPO=Preferred Provider Organization

n/a= Plan has changed from last year or information not available from previous yea

Region\SAU\Alpha Sort	Carrier Code	SAU	District/Local			Did Not	Rate Change	Total Monthly Premium			Sch District Contribution			IRS/IRC	Reimburse	Retiree	Marrieds	Dom. Partner	Comments:
	HT, SC, IL, O	#	Name	Medical Plan(s)	Type	Report	over 2011	(rounded to the nearest dollar)			% or $ of Premium Cost			Sec 125	No Med Ins	Ins Paid	Full Ins Pd	Coverage	
Region\SAU\Alpha Sort								Single	2-Person	Family	Single	2-Person	Family						
MON-38-Monadnock-P1	*Y*	93	Monadnock	Anthem Blue Cross	JY-MC	X	0.0%	$786	$1,572	$2,123	*	*	*	Y	$2,500		Y		*District pays dollar equivalent of its contribution toward BlueChoice
MON-38-Monadnock-P2				BlueChoice	POS	X	0.0%	$695	$1,391	$1,878	82%	82%	82%						for other plans.
MON-38-Monadnock-P3				Matthew Thornton Blue	HMO	X	0.0%	$658	$1,316	$1,776	*	*	*						
MON-38-Winchester-P1	*Y*	94	Winchester	Anthem Blue Cross	JY-MC*	X	0.0%	$786	$1,572	$2,123	**	**	**	Y	$1,500		Y		*Available only to grandfathered employees.
MON-38-Winchester-P2				BlueChoice	POS	X	0.0%	$695	$1,391	$1,872	85%	85%	85%						**District will contribute 87% of its POS payment toward JY-MC
MON-38-Winchester-P3				BlueChoice (2-tier)	POS	X	0.0%	$675	$1,349	$1,821	**	**	**						and BlueChoice (2-tier). ***Employee will not pay more than 1% of
MON-38-Winchester-P4				Matthew Thornton Blue	HMO	X	0.0%	$658	$1,316	$1,776	95%	95%	95%						salary.
MON-47-Jaffrey-Rindge ESP-P	*SC*	47	Jaffrey-Rindge ESP	SchoolCare	HMO		6.1%	$679	$1,358	$1,834	85%	80%	80%		$1,000				
MON-47-Jaffrey-Rindge ESP-P2					POS-OA		6.1%	$761	$1,521	$2,054	84%	79%	79%						
MON-47-Jaffrey-Rindge-P1	*SC*	47	Jaffrey-Rindge	SchoolCare	HMO		6.1%	$679	$1,358	$1,834	85%	80%	80%	Y*	$1,000		Y		*District contributes $400 to a Flexible Spending Account for each
MON-47-Jaffrey-Rindge-P2					POS-OA		6.1%	$761	$1,521	$2,054	85%	75%	75%						employee enrolled in a health insurance program.
MON-60-Fall Mountain ESP-P1	*HT*	60	Fall Mountain ESP	MTB A $5, Rx 10/20/30	HMO		New	$680	$1,360	$1,835	*	*	*	Y	$4,000				*District pays 82% of Matthew Thornton Blue "B" toward other plans.
MON-60-Fall Mountain ESP-P2				MTB C $10, Rx 10/20/45	HMO		New	$634	$1,267	$1,711	*	*	*						
MON-60-Fall Mountain ESP-P3				Anthem Blue Cross	C 100-MC		23.7%	$898	$1,797	$2,426	*	*	*						**Available only to grandfathered employees.
MON-60-Fall Mountain ESP-P4				MTB B $10, Rx 10/20/30	HMO		1.4%	$652	$1,303	$1,760	82%	82%	82%						District self-insures.
MON-60-Fall Mountain-P1	*HT*	60	Fall Mountain	MTB A $5, Rx 10/20/30	HMO		New	$680	$1,360	$1,835	*	*	*	Y	$4,000				*District pays 80% of Matthew Thornton Blue "B" toward other plans.
MON-60-Fall Mountain-P2				Anthem Blue Cross	C 100-MC		23.7%	$898	$1,797	$2,426	*	*	*						
MON-60-Fall Mountain-P3				MTB C $10, Rx 10/20/45	HMO		New	$634	$1,267	$1,711	*	*	*						
MON-60-Fall Mountain-P4				MTB B $10, Rx 10/20/30	HMO		1.4%	$652	$1,303	$1,760	80%	80%	80%						District self-insures.
NC-03-Berlin SS-P1	*HP*	3	Berlin Suport Staff	Harvard Pilgrim	HMO		3.7%	$874	$1,750	$2,363	80%	80%	80%	Y	$2,000				*District pays dollar equivalent of its contribution to the HMO plan
NC-03-Berlin SS-P2					POS		3.7%	$917	$1,835	$2,478	*	*	*						toward the POS plan.
NC-03-Berlin-P1	*HP*	3	Berlin	Harvard Pilgrim	HMO		3.7%	$874	$1,750	$2,363	80%	80%	80%	Y	$2,000				*District pays dollar equivalent of its contribution to the HMO plan
NC-03-Berlin-P2					POS		3.7%	$917	$1,835	$2,478	*	*	*						toward PO
NC-07-Colebrook-P1	*HT*	7	Colebrook	BlueChoice	POS		-3.2%	$645	$1,290	$1,742	89%	89%	89%	Y					Copay to $20
NC-07-Pittsburg-P1	*HT*	7	Pittsburg	BlueChoice	POS		0.5%	$748	$1,495	$2,018	*	*	*	Y	$2,000				*district pays same amount of HMO towards the POS
07-Pittsburg-P2				MTB 20	HMO		-3.2%	$645	$1,290	$1,742	88%	88%	88%						
NC-09-Bartlett-P1	*HT*	9	Bartlett	MTB 10/20/30	HMO		-7.6%	$734	$1,468	$1,982	80%	80%	80%	Y					District pays 80% of HMO amount toward other plans.
NC-09-Bartlett-P2				BlueChoice 2 tier 10/20/30	POS		-4.9%	$802	$1,604	$2,165	*	*	*						
NC-09-Bartlett-P3				BlueChoice 3 tier 10/20/30	POS		-4.7%	$810	$1,619	$2,186	*	*	*						
NC-09-Conway ESP-P1	*HP*	9	Conway ESP	Harvard Pilgrim	HMO		-8.0%	$722	$1,444	$1,949	80%	80%	80%	Y	**Y	***Y			*District pays 80% of HMO amount toward other plans. **50% of single
NC-09-Conway ESP-P2					POS		-8.2%	$901	$1,802	$2,433	*	*	*						HMO premium. ***80% of HMO single premium to age 65.
NC-09-Conway-P1	*HP*	9	Conway	Harvard Pilgrim	HMO		-5.4%	$722	$1,444	$1,949	80%	80%	80%	Y	**Y	***Y			*District pays 80% of HMO premium toward other plans.
NC-09-Conway-P2					POS		-5.4%	$901	$1,802	$2,433	*	*	*						**50% of single HMO premium. *** 80% of single premium to age 65.
NC-20-Gorham ESP-P1	*HP*	20	Gorham ESP	Harvard Pilgrim	HMO		-2.3%	$708	$1,416	$1,911	80%	80%	80%	Y	$1,500				
NC-20-Gorham ESP-P2					POS		0.0%	$781	$1,561	$2,107	*	*	*						
NC-20-Gorham-P1	*HP*	20	Gorham	Harvard Pilgrim	HMO		4.6%	$758	$1,516	$2,047	80%	80%	80%	Y	$3,000	**Y			*District pays 80% of HMO premium toward POS. ** District pays $2,500
NC-20-Gorham-P2					POS		7.6%	$840	$1,680	$2,227	*	*	*						per year for three years up to age 65.
NC-35-Bethlehem-P1	*HT*	35	Bethlehem	BlueChoice	POS		-12.5%	$692	$1,384	$1,868	80%	80%	80%	Y					Copay changed to $20
NC-35-Bethlehem-P1	*HT*	35	Bethlehem ESP	BlueChoice	POS		1.4%	$802	$1,604	$2,465	90%	90%	90%	Y					
NC-35-Lafayette-P1	*HT*	35	Lafayette Regional	BlueChoice	POS		1.4%	$802	$1,604	$2,165	80%	80%	80%	Y		**Y			
NC-35-Lafayette-P2				Matthew Thornton Blue	HMO		-1.6%	$727	$1,454	$1,963	88%	88%	88%						**$2,000 per year to age 65.
NC-35-Lisbon SS-P1	*HT*	35	Lisbon Suport Staff	Matthew Thornton Blue	HMO		0.6%	$646	$1,291	$1,743	82%	*	*	Y					*District pays 82% of single cost toward two person and family coverage.
NC-35-Lisbon-P1	*HT*	35	Lisbon	Matthew Thornton Blue /20	HMO		-6.4%	$692	$1,384	$1,868	84%	84%	84%	Y					New plan design
NC-35-Littleton Paras/ESP-P1	*HT*	35	Littleton Paras/ESP	BlueChoice	POS		2.6%	$865	$1,729	$2,335	*	*	*	Y	$500			Y	District pays 83% of HMO toward the POS
NC-35-Littleton Paras/ESP-P2					HMO		-0.8%	$770	$1,540	$2,079	83%	83%	83%						
NC-35-Littleton-P1	*HT*	35	Littleton	BlueChoice	POS		7.9%	$910	$1,820	$2,458	*	*	*	Y	$500			Y	* District pays 81% of HMO toward the POS
NC-35-Littleton-P2					HMO		4.4%	$810	$1,621	$2,188	81%	81%	81%			**Y			*District pays $2,000 per year until age 65.
NC-35-Profile-P1	*HT*	35	Profile	MTB 15 Ded	HMO		0.6%	$661	$1,322	$1,784	80%	80%	80%	Y		*Y			*District pays $2,000 per year until age 65. New Plan has $500 deductible.
NC-36-White Mountains ESP-F	*SC*	36	White Mountains ESF	SchoolCare	HMO		8.5%	$793	$1,586	$2,141	85%	85%	85%	Y	*Y				*30% of HMO single premium.
NC-36-White Mountains ESP-P2					POS-OA		8.4%	$888	$1,776	$2,398	85%	85%	85%						
					OA+		New	$734	$1,467	$1,981									
NC-36-White Mountains-P1	*SC*	36	White Mountains	SchoolCare	HMO		0.0%	$625	$1,250	$1,688	95%	95%	95%	Y	$2,000				
NC-36-White Mountains-P2					POS-OA		0.0%	$700	$1,400	$1,890	95%	95%	95%						
NC-36-White Mountains-P3					OA+		New	$578	$1,156	$1,560	95%	95%	95%						
NC-58-Groveton ESP-P1	*HT*	58	Groveton ESP	Matthew Thornton	HMO		-34.4%	$544	$1,089	$1,470	100%	100%	100%	Y	$1,000				
NC-58-Groveton ESP-P2				Ded: $500 /$1500															
NC-58-Groveton-P1	*HT*	58	Groveton	Matthew Thornton	HMO		-8.0%	$630	$1,261	$1,447	85%	85%	85%	*Y	**Y				*1000 **$4,500 for a single or two person plan; $6,000 for a family plan.
NC-58-Groveton-P2				Ded: $1000 /$2000															#HMO is a new plan with $1000 deductible. District pays half of deductible.
NC-58-Stratford-P1	*HT*	58	Stratford	MTB 15 Ded: $500 /$1500	HMO		-34.4%	$544	$1,089	$1,470	100%**	100%**	100%**	Y	$3000*				New plan with new carrier. *$6000 two pers. $8000 family. Cap of $7500, $15k, $21k
NC-68-Lincoln-Woodstock-P1	*SC*	68	Lincoln-Woodstock	SchoolCare	HMO		7.6%	$625	$1,250	$1,688	84%	84%	84%	Y					
NC-68-Lincoln-Woodstock-P2					POS		7.5%	$700	$1,400	$1,890	81%	81%	81%	Y					
NC-68-Lincoln-Woodstock-P3					OA+		7.4%	$578	$1,156	$1,561									
SE-10-Derry-P1	*HT*	10	Derry	BlueChoice3T w/o riders	POS		New	$853	$1,705	$2,302	80%	80%	80%	Y	$1,000				
SE-10-Derry-P2				BlueChoice 3T w/ riders	POS		3.2%	$847	$1,695	$2,288	80%	80%	80%						
SE-10-Derry-P3				BC3T15 DED	POS		NEW	$765	$1,531	$2,067	80%	80%	80%						
SE-10-Derry-P4				BlueChoice New Eng.	POS		1.4%	$877	$1,755	$2,369	80%	80%	80%						
SE-10-Derry-P5				Matthew Thornton Blue	HMO		0.0%	$755	$1,510	$2,039	80%	80%	80%						
SE-12-Londonderry-P1	*SC*	12	Londonderry	SchoolCare	HMO		1.0%	$706	$1,412	$1,906	*	*	*	Y	$500		Y		* District pays 80% of the value of POS plan towards other plans
SE-12-Londonderry-P2					POS-OA		1.0%	$791	$1,581	$2,135	80%	80%	80%						Open Access + is new for 2008
SE-12-Londonderry-P3					OA+		1.0%	$653	$1,306	$1,763	*	*	*						
SE-14-Epping Paras-P2	*HT*	14	Epping Paras	Matthew Thornton Blue	HMO		0.8%	$775	$1,550	$2,092	90%	*	*	Y	$555				*District pays 90% of single premium for two person and family coverage.
SE-14-Epping-P1	*HT*	14	Epping	BlueChoice	POS		-5.2%	$868	$1,735	$2,342	80%	80%	80%						**$555 single; $1,100 two person; $1,500 family
SE-14-Epping-P2				Matthew Thornton Blue	HMO		-8.1%	$775	$1,550	$2,092	85%	85%	85%						
SE-15-Auburn-P1	*SC*	15	Auburn	SchoolCare	HMO		8.9%	$688	$1,376	$1,858	90%	85%	85%	Y	$500		Y		Change to SchoolCare
SE-15-Auburn-P2					POS		8.9%	$771	$1,541	$2,081	90%	80%	80%						
SE-15-Auburn-P3					OA+		8.9%	$637	$1,273	$1,719	90%	85%	85%						
SE-15-Candia-P1	*SC*	15	Candia	SchoolCare	HMO		8.9%	$688	$1,376	$1,858	94%	89%	89%	Y	**		Y		Change to SchooLCare
SE-15-Candia-P2					POS		8.9%	$771	$1,541	$2,081	89%	79%	79%						**50% of single premium or $1,000, whichever is greater.

New Hampshire Teachers & Educational Support Personnel (ESP)

6/27/2017

MEDICAL INSURANCE BENEFITS

Rates as of July 1, 2012, rounded to the nearest dollar. District contribution shown for "full time" employees.

(MC=Managed Care; C=Comprehensive Plan; HMO=Health Maintenance Organization; POS=Point of Service; POS-OA=Point of Service, Open Access; OAP+ = Open Access Plus; PPO=Preferred Provider Organization

n/a= Plan has changed from last year or information not available from previous yea

Region\SAU\Alpha Sort	Carrier Code	SAU	District/Local			Did Not	Rate Change	Total Monthly Premium			Sch District Contribution			IRS/IRC	Reimburse	Retiree	Marrieds	Dom. Partner	Comments:
	HT, SC, IL, O	#	Name	Medical Plan(s)	Type	Report	over 2011	(rounded to the nearest dollar)			% or $ of Premium Cost			Sec 125	No Med Ins	Ins Paid	Full Ins Pd	Coverage	
Region\SAU\Alpha Sort								Single	2-Person	Family	Single	2-Person	Family						
SE-15-Candia-P3					OA+		8.9%	$637	$1,273	$1,719	94%	89%	89%						
SE-15-Hooksett ESP-P1	*SC*	15	Hookstt ESP	SchoolCare	HMO		8.9%	$688	$1,376	$1,858	85%	85%	85%	Y			Y		Change to SchoolCare
SE-15-Hooksett ESP-P2					POS		8.9%	$771	$1,541	$2,081	85%	85%	85%						
SE-15-Hooksett ESP-P3					OA+		8.9%	$637	$1,273	$1,719	85%	85%	85%						
SE-15-Hooksett-P1	*SC*	15	Hooksett	SchoolCare	HMO		8.9%	$688	$1,376	$1,858	93%	83%	83%	Y	$1,500		Y		Change to SchoolCare
SE-15-Hooksett-P2					POS		8.9%	$771	$1,541	$2,081	90%	80%	80%						
SE-15-Hooksett-P3					OA+		8.9%	$637	$1,273	$1,719	93%	83%	83%						
SE-17-Sanborn Reg ESP-P1	*SC*	17	Sanborn Regional	SchoolCare	HMO		8.9%	$697	$1,394	$1,882	*	*	*	Y	$1,000			Y	* district will pay 95% of OA+ toward other plans. Employees must pay the difference
SE-17-Sanborn Reg ESP-P2			ESP		POS		8.9%	$781	$1,561	$2,108	*	*	*						
SE-17-Sanborn Reg ESP-P3					OA+		9.0%	$645	$1,289	$1,740	95%	95%	95%						
SE-17-Sanborn Regional-P1	*SC*	17	Sanborn Regional	SchoolCare	HMO		8.9%	$697	$1,394	$1,882	*	*	*	Y	$1,200	**Y		Y	* district will pay 95% of OA+ toward other plans. Employees must pay the difference
SE-17-Sanborn Regional-P2					POS		8.9%	$781	$1,561	$2,108	*	*	*						**District pays up to a two person plan to age 65.
SE-17-Sanborn Regional-P3					OA+		9.0%	$645	$1,289	$1,740	95%	95%	95%						
SE-28-Pelham ESP-P1	*HT*	28	Pelham ESP	Anthem Blue Cross	C 100-MC		-2.9%	$844	$1,689	$2,280	50%	*	*	Y					*District pays 50% of single Comp 100 premium toward any other plan
SE-28-Pelham ESP-P2				BlueChoice	POS		-7.5%	$713	$1,426	$1,925	*	*	*						or coverage.
SE-28-Pelham ESP-P3				Matthew Thornton Blue	HMO		-10.5%	$639	$1,278	$1,725	*	*	*						
SE-28-Pelham-P1	*HT*	28	Pelham	Anthem Blue Cross	C 100-MC		2.3%	$844	$1,689	$2,280	*	*	*	Y	$3,000	**Y			* Same amount as BC3T
SE-28-Pelham-P2				BC Rx 10/20/45 NEW	POS		-2.7%	$713	$1,426	$1,925	85%	85%	85%						**Retiring employee can choose between cash payment or a combination
SE-28-Pelham-P3				MT Blue 10/20/45 NEW	HMO		-5.8%	$639	$1,278	$1,725	*	*	*						of cash payment and district contribution toward health insurance to age 65.
SE-28-Windham-P1	*HT*	28	Windham	Anthem Blue Cross	JY-MC*		10.4%	$941	$1,881	$2,540	**	**	**	Y	$2,500	***Y			*Available only to teachers hired before July 1, 2005 **District pays
SE-28-Windham-P2				Anthem Blue Cross	C 100-MC		10.4%	$889	$1,778	$2,400	85%	85%	85%						dollar equivalent for Comp 100 toward other plans.
SE-28-Windham-P3				BlueChoice	POS		0.0%	$750	$1,501	$2,026	**	**	**						***Retiring employee can choose between cash payment or a combination
SE-28-Windham-P4				Matthew Thornton Blue	HMO		-5.6%	$673	$1,345	$1,816	**	**	**						of cash payment and district contribution toward health insurance to age 65.
SE-33-Raymond-P1	*SC*	33	Raymond	SchoolCare	HMO		New	$725	$1,450	$1,958	85%	85%	85%	Y	$1,500				
SE-55-Hampstead ASS-P1	*HT*	55	Hampstead Assoc.	HMO Blue New Eng	HMO		New	$678	$1,355	$1,830	85%	85%	85%	Y	$750		Y		
SE-55-Hampstead ASS-P2			Support Staff	BlueChoice	POS		-3.1%	$755	$1,509	$2,037	85%	85%	85%						
SE-55-Hampstead ASS-P3			(secretaries,	BlueChoice New Eng.	POS		-7.2%	$761	$1,523	$2,056	85%	85%	85%						
SE-55-Hampstead ASS-P4			ed. assts.)	Matthew Thornton Blue	HMO		-5.7%	$675	$1,349	$1,822	85%	85%	85%						
SE-55-Hampstead SPA-P1	*HT*	55	Hampstead SPA	Anthem Blue Cross	C 100-MC		4.3%	$904	$1,808	$2,444	90%	90%	90%	Y			Y		
SE-55-Hampstead SPA-P2			(custodians and food	BlueChoice	POS		-1.4%	$768	$1,536	$2,074	90%	90%	90%						
SE-55-Hampstead SPA-P3			service)	Matthew Thornton Blue	HMO		-4.5%	$684	$1,368	$1,847	90%	90%	90%						
SE-55-Hampstead-P1	*HT*	55	Hampstead	Anthem Blue Cross	JW-MC		n/a	$957	$1,914	$2,583	81.6%	76.6%	76.6%	Y	$500	**Y	Y		**Up to $3,300 per year under age 65; up to $1,650 per year over
SE-55-Hampstead-P2				BlueChoice	POS		-1.6%	$755	$1,509	$2,037	89.4%	89.4%	89.4%						age 65.
SE-55-Hampstead-P3				BlueChoice New Eng.	POS		-3.5%	$791	$1,518	$2,135	89.4%	89.4%	89.4%						
SE-55-Hampstead-P4				Matthew Thornton Blue	HMO		0.0%	$676	$1,352	$1,825	89.0%	89.0%	89.0%						
SE-57-Salem Custodians-P1	*HT*	57	Salem Custodians	BlueChoice	POS		3.2%	$740	$1,481	$1,999	$675	$1,350	$1,823	Y				Y	*Monthly caps for all plans
SE-57-Salem Custodians-P2				BlueChoice (2-tier)	POS		3.5%	$741	$1,481	$2,000	$675	$1,350	$1,823						
SE-57-Salem Custodians-P3				Matthew Thornton Blue	HMO		-0.2%	$661	$1,323	$1,786	$675	$1,350	$1,823						
SE-57-Salem EPA-P1	*HT*	57	Salem EPA	BlueChoice	POS		0.0%	$780	$1,561	$2,107	$675	$1,350	$1,823	Y	$500			Y	*Monthly caps for all plans
SE-57-Salem EPA-P2			(secretaries)	BlueChoice (2-tier)	POS		-0.4%	$759	$1,518	$2,050	$675	$1,350	$1,823						
SE-57-Salem EPA-P3				Matthew Thornton Blue	HMO		-3.1%	$695	$1,390	$1,876	$675	$1,350	$1,823						
SE-57-Salem ESPA-P1	*HT*	57	Salem ESPA	BlueChoice	POS		0.0%	$780	$1,561	$2,107	$522	$574	$601	Y				Y	*Monthly caps for all plans for employees working 30+ hours per week.
SE-57-Salem ESPA-P2			(educ. aides)	BlueChoice (2-tier)	POS		-0.4%	$759	$1,518	$2,050	$522	$574	$601						Employees eligible for district payment only after five years of service.
SE-57-Salem ESPA-P4				Matthew Thornton Blue	HMO		-3.1%	$695	$1,390	$1,876	$522	$574	$601						
SE-57-Salem Food Service-P1	*HT*	57	Salem Food Service	BlueChoice	POS		4.1%	$812	$1,625	$2,193	$522	$1,045	$1,410	Y	$300			Y	*Monthly caps for all plans for employees working 30+ hours per week.
SE-57-Salem Food Service-P2				BlueChoice (2-tier)	POS		3.7%	$790	$1,581	$2,134	$522	$1,045	$1,410						
SE-57-Salem Food Service-P3				Matthew Thornton Blue	HMO		0.8%	$723	$1,447	$1,953	$522	$1,045	$1,410						
SE-57-Salem-P1	*HT*	57	Salem	Anthem Blue Cross	JY-MC		10.1%	$1,012	$2,023	$2,732	$675	$1,350	$1,823	Y	$500-$1,000			Y	*Monthly caps for all plans.
SE-57-Salem-P2				BlueChoice	POS		0.0%	$780	$1,561	$2,107	$675	$1,350	$1,823						
SE-57-Salem-P3				BlueChoice (2-tier)	POS		-0.4%	$759	$1,518	$2,050	$675	$1,350	$1,823						
SE-57-Salem-P4				BlueChoice New Eng.	POS		-2.3%	$803	$1,606	$2,168	$675	$1,350	$1,823						
SE-57-Salem-P5				Matthew Thornton Blue	HMO		-3.1%	$695	$1,390	$1,876	$675	$1,350	$1,823						
SE-82-Chester ESP-P1	*SC*	82	Chester ESP	BlueChoice	POS		0.0%	$884	$1,768	$2,387	*	*	*	Y				Y	*District pays $1,000 per year for each.
SE-82-Chester ESP-P2			Instr. Asst.	Matthew Thornton Blue	HMO		0.0%	$813	$1,626	$2,195	*	*	*						
SE-82-Chester-P1				SchoolCare NEW	POS		-11.7%	$781	$1,561	$2,108	80%	80%	80%	Y	**			Y	**District provides one-time cash incentive for employees to move from JY-MC 2012 change to SchoolCare
SE-82-Chester-P2					HMO		-14.3%	$697	$1,394	$1,882	80%	80%	80%						to BlueChoice or Matthew Thornton Blue.
SE-83-Fremont-P1	*HT*	83	Fremont	Anthem Blue Cross	JY-MC*		0.5%	$1,051	$2,101	$2,837	80%	80%	80%	Y	$700				*JY-MC not available to employees hired after July 1, 2004.
SE-83-Fremont-P2				BlueChoice	POS		-4.5%	$844	$1,687	$2,278	83%	83%	83%						
SE-83-Fremont-P3				Matthew Thornton Blue	HMO		-7.6%	$751	$1,503	$2,028	89%	89%	89%						
SEA-05-Oyster River ESP-P1	*HT*	5	Oyster River ESP	Anthem Blue Cross	JY-MC		11.7%	$1,092	$2,184	$2,948	*	*	*	Y	**Y			Y	* District pays dollar equivalent of its contribution for C100-MC toward
SEA-05-Oyster River ESP-P2				Anthem Blue Cross	C 100-MC		11.7%	$1,032	$2,063	$2,786	75%	75%	75%						other plans. **$3538 S. $7075 2, $9552 F
SEA-05-Oyster River ESP-P3				BlueChoice	POS		6.2%	$877	$1,753	$2,367	*	*	*						
SEA-05-Oyster River ESP-P4				Matthew Thornton Blue	HMO		2.8%	$781	$1,561	$2,108	*	*	*						
SEA-05-Oyster River-P1	*HT*	5	Oyster River	Anthem Blue Cross	JY-MC		11.7%	$1,092	$2,184	$2,948	*	*	*	Y	**Y			Y	* District pays dollar equivalent of its contribution toward C100-MC
SEA-05-Oyster River-P2				Anthem Blue Cross	C 100-MC		11.7%	$1,032	$2,063	$2,786	72%	72%	72%						for other plans. **33% of premium.
SEA-05-Oyster River-P3				BlueChoice	POS		6.2%	$877	$1,753	$2,367	*	*	*						
SEA-05-Oyster River-P4				Matthew Thornton Blue	HMO		2.8%	$781	$1,561	$2,108	*	*	*						
SEA-16-Brentwood-P1	*HT*	16	Brentwood	BlueChoice (2-tier)	POS		3.3%	$745	$1,490	$2,011	95%	85%	75%	Y	$1,600				
SEA-16-Brentwood-P2				Matthew Thornton Blue	HMO		0.4%	$682	$1,364	$1,841	100%	95%	80%						
SEA-16-East Kingston-P1	*HT*	16	East Kingston	Anthem Blue Cross	C 100-MC		8.3%	$922	$1,845	$2,490	*	*	*		$1,500				*District pays 90% of BC toward the other plans
SEA-16-East Kingston-P2				BlueChoice	POS		2.8%	$770	$1,539	$2,078	90%	90%	90%						
SEA-16-East Kingston-P3				Matthew Thornton Blue	HMO		-0.3%	$698	$1,396	$1,884	*	*	*						
SEA-16-Exeter Cooperative Pa	*HT*	16	Exeter Cooperative	BlueChoice	POS		2.3%	$766	$1,531	$2,067	*	*	*	Y					*District pays dollar equivalent of 70% single HMO premium.
SEA-16-Exeter Cooperative Paras-P2			Paras	Matthew Thornton Blue	HMO		-5.2%	$603	$1,205	$1,627	70%	*	*						
SEA-16-Exeter Cooperative-P1	*HT*	16	Exeter Cooperative	Anthem Rx 10/20/30	JW-MC		6.4%	$953	$1,907	$2,575	*	*	*	Y	$500				*District pays dollar equivalent of its contribution to C 100-MC toward JW-MC.
SEA-16-Exeter Cooperative-P2				Anthem Blue Cross**	C 100-MC		6.4%	$901	$1,802	$2,433	85%	85%	85%						
SEA-16-Exeter Cooperative-P3				BC3T 5 Rx 10/20/30	POS		0.9%	$766	$1,531	$2,067	85%	85%	85%						

New Hampshire Teachers & Educational Support Personnel (ESP)

6/27/2017

MEDICAL INSURANCE BENEFITS

Rates as of July 1, 2012, rounded to the nearest dollar. District contribution shown for "full time" employees.
(MC=Managed Care; C=Comprehensive Plan; HMO=Health Maintenance Organization; POS=Point of Service; POS-OA=Point of Service, Open Access; OAP+ = Open Access Plus; PPO=Preferred Provider Organization
n/a= Plan has changed from last year or information not available from previous yea

Region\SAU\Alpha Sort	Carrier Code	SAU	District/Local			Did Not	Rate Change	Total Monthly Premium			Sch District Contribution			IRS/IRC	Reimburse	Retiree	Marrieds	Dom. Partner	Comments:
	HT, SC, IL, O	#	Name	Medical Plan(s)	Type	Report	over 2011	(rounded to the nearest dollar)			% or $ of Premium Cost			Sec 125	No Med Ins	Ins Paid	Full Ins Pd	Coverage	
Region\SAU\Alpha Sort								Single	2-Person	Family	Single	2-Person	Family						
SEA-16-Exeter Cooperative-P4				BC3T 20 Rx 10/20/45	POS		NEW	$707	$1,413	$1,908	95%	95%	95%						
SEA-16-Exeter Cooperative-P5				Matthew Thornton Blue	HMO		-0.3%	$634	$1,205	$1,627	95%	95%	95%						
SEA-16-Exeter Paras-P1				BlueChoice	POS		0.0%	$784	$1,567	$2,116	50%	*	*	Y	$300				*District pays dollar equivalent of single contribution toward two-person
SEA-16-Exeter Paras-P2				Matthew Thornton Blue	HMO		-1.1%	$634	$1,269	$1,713	70%	*	*						and family coverage.
SEA-16-Exeter-P1	*HT*	16	Exeter	Anthem Blue Cross	JW-MC	X	0.0%	$928	$1,855	$2,504	*	*	*	Y	$500				*District pays dollar equivalent of its contribution to C 100-MC toward JW-MC.
SEA-16-Exeter-P2				Anthem Blue Cross	C 100-MC	X	0.0%	$876	$1,753	$2,366	85%	85%	85%						
SEA-16-Exeter-P3				BlueChoice 3/15 1M	POS	X	0.0%	$783	$1,567	$2,115	85%	85%	85%						Slight plan changes in BC and MTB to reduce rates
SEA-16-Exeter-P4				MTB 15, Rx 3/15 1M	HMO	X	0.0%	$641	$1,282	$1,731	90%	90%	90%						
SEA-16-Kensington-P1	*SC*	16	Kensington	SchoolCare	HMO		0.0%	$677	$1,335	$1,828	88%	88%	88%	Y					
SEA-16-Kensington-P2					POS-OA		0.0%	$758	$1,516	$2,047	83%	83%	83%						
SEA-16-Newfields-P1	*HT*	16	Newfields	Anthem Blue Cross	C 100-MC	X		N/A	N/A	N/A	80%	80%	80%						
SEA-16-Newfields-P2				BC2T 10, Rx 3/15/M1	POS	X	0.0%	$739	$1,477	$1,994	80%	80%	80%						
SEA-16-Newfields-P3				MTB 5 Rx 3/15/ M1	HMO	X	0.0%	$696	$1,391	$1,878	80%	80%	80%						
SEA-16-Newfields-Paras P1	*HT*	16	Newfields Paras	Anthem Blue Cross	C 100-MC	X		$809	$1,617	$2,186	0%	0%	0%						
SEA-16-Newfields-Paras P2				Blue Choice (2-tier)	POS	X	0.0%	$742	$1,485	$2,004	0%	0%	0%						
SEA-16-Newfields-Paras P3				Matthew Thornton Blue	HMO	X	0.0%	$716	$1,432	$1,934	0%	0%	0%						
SEA-16-Stratham-P1	*HT*	16	Stratham	Anthem Blue Cross	C 200-MC	X	0.0%	$830	$1,660	$2,240	87%	87%	87%	Y	$1,200			Y	* same amount as Comp 200
SEA-16-Stratham-P2				Anthem Blue Cross	C 100-MC	X		N/A	N/A	N/A	*	*	*						
SEA-16-Stratham-P3				BC 5 Rx 3/15/ M1	POS	X	0.0%	$766	$1,531	$2,067	87%	87%	87%						
SEA-16-Stratham-P4				MTB 15, Rx 3/15 1M	HMO	X	0.0%	$612	$1,223	$1,651	93%	93%	93%						
SEA-21-Seacoast ESP-P1	*HT*	21	Seacoast ESP	Anthem Blue Cross	C 100	X	0.0%	$916	$1,831	$2,472	85%	85%	85%	Y	* Y				*$750 Single, $1,000 2-Person/Family.
SEA-21-Seacoast ESP-P2				Matthew Thornton Blue	HMO	X	0.0%	$641	$1,282	$1,730	85%	85%	85%						
SEA-21-Seacoast-P1	*HT*	21	Seacoast	Anthem Blue Cross	JY	X	0.0%	$969	$1,938	$2,616	65%	65%	65%	Y	* Y				*$1200, $1500, $1750
SEA-21-Seacoast-P2				Anthem Blue Cross	C 1000	X	0.0%	$713	$1,427	$1,926	95%	95%	95%						
SEA-21-Seacoast-P3				Anthem Blue Cross	C 100	X	0.0%	$916	$1,832	$2,472	75%	75%	75%						
SEA-21-Seacoast-P4				BlueChoice	POS	X	0.0%	$802	$1,604	$2,166	75%	75%	75%						
SEA-21-Seacoast-P5				Matthew Thornton Blue	HMO	X	0.0%	$641	$1,282	$1,730	85%	85%	85%						
SEA-31-Newmarket-P1	*PR*	31	Newmarket	Interlocal HP	HMO		3.9%	$881	$1,763	$2,380	89%*	89%*	89%*	Y	$1,000				*Teachers hired after July 1, 2007 receive 85% district contribution toward
SEA-31-Newmarket-P2					POS		3.9%	$996	$1,994	$2,692	89%*	89%*	89%*						health insurance.
SEA-50-Greenland (ACT)-P1	*HT*	50	Greenland	Anthem Blue Cross	C 100-MC		14.0%	$1,053	$2,106	$2,843	81.0%	81.0%	81.0%	Y	$2,500		Y		
SEA-50-Greenland (ACT)-P2				BlueChoice (2-tier)	POS		7.0%	$870	$1,741	$2,350	81.0%	81.0%	81.0%						
SEA-50-Greenland (ACT)-P3				Matthew Thornton Blue	HMO		4.2%	$797	$1,539	$2,151	85%	85%	85%						
SEA-50-New Castle (ACT)-P1	*HT*	50	New Castle	Anthem Blue Cross	JY-MC		13.2%	$1,127	$2,253	$3,042	80%	80%	80%	Y	*Y		Y		*$1250 single; 1875 two person; 2500 family.
SEA-50-New Castle (ACT)-P2				BlueChoice	POS		7.5%	$899	$1,789	$2,427	80%	80%	80%						
SEA-50-New Castle (ACT)-P3				Matthew Thornton Blue	HMO		4.0%	$805	$1,611	$2,175	80%	80%	80%						
SEA-50-Newington (ACT)-P1	*HT*	50	Newington	Anthem Blue Cross	JY-MC		13.2%	$1,127	$2,253	$3,042	80%	80%	80%	Y	$2,000		Y		
SEA-50-Newington (ACT)-P2				BlueChoice	POS		7.5%	$899	$1,798	$2,427	85%	85%	85%						
SEA-50-Newington (ACT)-P3				Matthew Thornton Blue	HMO		4.0%	$805	$1,611	$2,175	90%	90%	90%						
SEA-50-Rye (ACT)-P1	*HT*	50	Rye	Anthem Blue Cross	JY-MC*		13.2%	$1,127	$2,253	$3,042	95%	75%	75%	Y	**		Y		*Only available to teachers hired before January 1, 1996.
SEA-50-Rye (ACT)-P2				BlueChoice	POS		7.5%	$899	$1,789	$2,427	95%	75%	75%						**30% of district contribution to single HMO premium.
SEA-50-Rye (ACT)-P3				Matthew Thornton Blue	HMO		4.0%	$805	$1,611	$2,175	95%	75%	75%						
SEA-50-Rye ESP-P1	*HT*	50	Rye (ESP)	Anthem Blue Cross	JY-MC		13.2%	$1,127	$2,253	$3,042	100%	75%	75%	Y	$2,000				
SEA-50-Rye ESP-P2				BlueChoice	POS		7.5%	$899	$1,798	$2,427	100%	75%	75%						
SEA-50-Rye ESP-P3				Matthew Thornton Blue	HMO		4.0%	$805	$1,611	$2,175	100%	75%	75%						
SEA-52-Portsmouth ESP-P1	*HT*	52	Portsmouth ESP	Anthem Blue Cross	C 100-MC		12.8%	$1,123	$2,246	$3,033	80%	80%	80%	Y				Y	
SEA-52-Portsmouth ESP-P2			(clerical)	BlueChoice	POS		7.1%	$948	$1,897	$2,560	80%	80%	80%						
SEA-52-Portsmouth ESP-P3				BC3T Rx 10/20/45	POS		7.1%	$901	$1,802	$2,432	80%	80%	80%						
SEA-52-Portsmouth ESP-P4				MT Blue 10/20/45	HMO		3.7%	$807	$1,615	$2,180	85%	85%	85%						
SEA-52-Portsmouth ESP-P5				Matthew Thornton Blue	HMO		3.8%	$850	$1,700	$2,295	85.0%	85.0%	85.0%						
SEA-52-Portsmouth Paras-P1	*HT*	52	Portsmouth Paras	Anthem Blue Cross	C 100-MC		12.8%	$1,123	$2,246	$3,033	83%	83%	62%	Y				Y	
SEA-52-Portsmouth Paras-P2			(ESP)	BlueChoice	POS		7.1%	$948	$1,897	$2,560	83%	83%	62%						
SEA-52-Portsmouth Paras-P3				BC3T Rx 10/20/45	POS		7.1%	$901	$1,802	$2,432	83%	83%	83%						
SEA-52-Portsmouth Paras-P4				MT Blue 10/20/45	HMO		3.7%	$807	$1,615	$2,180	87%	87%	87%						
SEA-52-Portsmouth Paras-P5				Matthew Thornton Blue	HMO		3.8%	$850	$1,700	$2,295	87.0%	87%	64%						
SEA-52-Portsmouth-P1	*HT*	52	Portsmouth	Anthem Blue Cross	C 100-MC		12.8%	$1,123	$2,246	$3,033	80%	80%	80%	Y				Y	
SEA-52-Portsmouth-P2				BlueChoice	POS		7.1%	$948	$1,897	$2,560	80%	80%	80%						
SEA-52-Portsmouth-P3				BC3T Rx 10/20/45	POS		7.1%	$901	$1,802	$2,432	80%	80%	80%						
SEA-52-Portsmouth-P4				MT Blue 10/20/45	HMO		3.7%	$807	$1,615	$2,180	85%	85%	85%						
SEA-52-Portsmouth-P5				Matthew Thornton Blue	HMO		3.8%	$850	$1,700	$2,295	85.0%	85.0%	85.0%						
SOU-19-Goffstown ESP-P1	*HT*	19	Goffstown ESP	Anthem Blue Cross	JW-MC*		10.2%	$1,065	$2,131	$2,876	90%	80%	80%	Y					*Those hired after July 1, 2003 receive the dollar equivalent of the
SOU-19-Goffstown ESP-P2				BlueChoice	POS		4.8%	$855	$1,711	$2,310	90%	80%	80%						district's contribution toward the BlueChoice plan.
SOU-19-Goffstown ESP-P3				Matthew Thornton Blue	HMO		1.5%	$762	$1,523	$2,057	90%	80%	80%						
SOU-19-Goffstown ESP-P4				MTB 10/20/45	HMO			$508	$1,015	$1,371	90%	80%	80%						
SOU-19-Goffstown-P1	*HT*	19	Goffstown	Anthem Blue Cross	JW-MC		10.2%	$1,065	$2,131	$2,876	85%	80%	80%	Y					
SOU-19-Goffstown-P2				BlueChoice (2-tier)	POS		4.4%	$813	$1,626	$2,195	85%	80%	80%						
SOU-19-Goffstown-P3				Matthew Thornton Blue	HMO		1.5%	$762	$1,523	$2,057	85%	80%	80%						
SOU-19-Goffstown-P4				MTB 10/20/45	HMO			$508	$1,015	$1,371	85%	80%	80%						
SOU-19-New Boston ESP-P1	*HT*	19	New Boston ESP	Anthem Blue Cross	C 1000- MC		8.7%	$774	$1,549	$2,091	80%	75%	75%	Y					
SOU-19-New Boston ESP-P2				BlueChoice (2-tier)	POS		6.8%	$798	$1,597	$2,156	80%	75%	75%						
SOU-19-New Boston ESP-P3				Matthew Thornton Blue	HMO		1.5%	$744	$1,488	$2,009	80%	75%	75%						
SOU-19-New Boston ESP-P4				MTB 10/20/45	HMO			$508	$1,015	$1,371	80%	75%	75%						
SOU-19-New Boston-P1	*HT*	19	New Boston	Anthem Blue Cross	C 1000-MC		8.7%	$774	$1,549	$2,091	90%	81%	81%	Y					
SOU-19-New Boston-P2				BlueChoice (2 tier)	POS		0.0%	$779	$1,558	$2,103	90%	81%	81%						
SOU-19-New Boston-P3				Matthew Thornton Blue	HMO		0.0%	$751	$1,502	$2,027	90%	81%	81%						
SOU-19-New Boston-P4				MTB 10/20/45	HMO			$508	$1,015	$1,371	90%	81%	81%						
SOU-25-Bedford EPA-P1	*HT*	25	Bedford EPA	BlueChoice	POS		3.0%	$693	$1,385	$1,870	92%	92%	92%	Y			Y		
SOU-25-Bedford ESP-P2			(para professionals)	Lumenos	CDHP		2.9%	$463	$926	$1,250	98%	98%	98%						New HDHP plan this year. *Plus HSA contribution
SOU-25-Bedford ESP-P2	*HT*	25	Bedford ESP	BlueChoice	POS		3.0%	$693	$1,385	$1,870	92%	92%	92%	Y			Y		

New Hampshire Teachers & Educational Support Personnel (ESP)

6/27/2017

MEDICAL INSURANCE BENEFITS

Rates as of July 1, 2012, rounded to the nearest dollar. District contribution shown for "full time" employees.

(MC=Managed Care; C=Comprehensive Plan; HMO=Health Maintenance Organization; POS=Point of Service; POS-OA=Point of Service, Open Access; OAP+ = Open Access Plus; PPO=Preferred Provider Organization

n/a= Plan has changed from last year or information not available from previous yea

Region\SAU\Alpha Sort	Carrier Code	SAU	District/Local			Did Not	Rate Change	Total Monthly Premium			Sch District Contribution			IRS/IRC	Reimburse	Retiree	Marrieds	Dom. Partner	Comments:
	HT, SC, IL, O	#	Name	Medical Plan(s)	Type	Report	over 2011	(rounded to the nearest dollar)			% or $ of Premium Cost			Sec 125	No Med Ins	Ins Paid	Full Ins Pd	Coverage	
Region\SAU\Alpha Sort								Single	2-Person	Family	Single	2-Person	Family						
SOU-25-Bedford ESP-P4			(custodians)	Lumenos	CDHP		2.9%	$463	$926	$1,250	98%	98%	98%						*Plus HSA contribution
SOU-25-Bedford-P1	*HT*	25	Bedford	Anthem Blue Cross	JY-MC		4.8%	$844	$1,687	$2,278	81%	79%	77%	Y		*Y	Y		*Retiree may choose either a cash allowance or district
SOU-25-Bedford-P2				BlueChoice	POS		3.0%	$693	$1,385	$1,870	93%	91%	88%						contribution toward single health insurance to age 65.
SOU-25-Bedford-P4				Lumenos	CDHP		2.9%	$463	$926	$1,250	98%	96%	94%						
SOU-26-Merrimack ESP-P1	*HT*	26	Merrimack ESP	Anthem Blue Cross	JY-MC		6.8%	$939	$1,877	$2,534	*	*	*	Y	$1,200				*District pays dollar equivalent of its contribution for the POS toward other
SOU-26-Merrimack ESP-P2				BlueChoice	POS		-2.5%	$715	$1,431	$1,931	85%	85%	85%						plans.
SOU-26-Merrimack ESP-P3				Matthew Thornton Blue	HMO		-6.6%	$639	$1,278	$1,725	*	*	*						
SOU-26-Merrimack-P1	*HT*	26	Merrimack	Anthem Blue Cross	JY-MC		13.1%	$939	$1,877	$2,534	*	*	*	Y	Y				*District pays dollar equivalent of its contribution for POS toward other
SOU-26-Merrimack-P2				BlueChoice	POS		3.3%	$715	$1,431	$1,931	80%	80%	80%						plans.
SOU-26-Merrimack-P3				Matthew Thornton Blue	HMO		0.0%	$639	$1,278	$1,725	*	*	*						$1500 reimbursement for no inusurance
SOU-27-Litchfield-P1	*HT*	27	Litchfield	BlueChoice (2-tier)	POS		3.8%	$680	$1,360	$1,836	85%	85%	85%	Y	$1,000				
SOU-27-Litchfield-P2				Matthew Thornton Blue	HMO		0.8%	$622	$1,245	$1,680	85%	85%	85%						
SOU-39-Amherst ESP-P1	*HT*	39	Amherst ESP	Luminos HSA	HDHP		n/c	$496	$992	$1,339	88%	88%	88%	Y	$1,000		Y		
SOU-39-Amherst ESP-P2				BlueChoice (2-tier)	POS		7.3%	$735	$1,471	$1,986	88%	88%	88%						
SOU-39-Amherst ESP-P3				Matthew Thornton Blue	HMO		4.3%	$681	$1,361	$1,837	88%	88%	88%						
SOU-39-Amherst-P1	*HT*	39	Amherst	Anthem Blue Cross	JY-MC		13.3%	$904	$1,808	$2,441	92%	80%	80%	Y	$1,000		Y		
SOU-39-Amherst-P2				BlueChoice (2-tier)	POS		7.3%	$706	$1,413	$1,907	92%	87.0%	87.0%						
SOU-39-Amherst-P3				Matthew Thornton Blue	HMO		4.4%	$647	$1,293	$1,746	95%	90.0%	90.0%						
SOU-39-Mont Vernon-P1	*HT*	39	Mont Vernon	Lumenos $2500 HSA	HDHP		7.4%	$496	$992	$1,339	75.0%	75.0%	75.0%	Y	$1,000		Y		High deductible ($2500) health plan for 2010. HSA contribution: $1250 /$2500
SOU-39-Mont Vernon-P2				BlueChoice (2-tier)	POS		7.3%	$706	$1,413	$1,907	75.0%	75.0%	75.0%						$3,000
SOU-39-Mont Vernon-P3				Matthew Thornton Blue	HMO		4.4%	$647	$1,293	$1,746	75.0%	75.0%	75.0%						
SOU-39-Souhegan Coop-P1	*HT*	39	Souhegan	BlueChoice (2-tier)	POS	X		$0	$0	$0	90%	75%	75%	Y	$1,000		Y		
SOU-39-Souhegan Coop-P2				Matthew Thornton Blue	HMO	X		$0	$0	$0	90%	75%	75%						
SOU-39-Souhegan Coop-P3				SchoolCare	HMO	X		$0	$0	$0	90%	75%	75%						
SOU-40-Milford ESP-P1	*SC*	40	Milford ESP	SchoolCare	HMO		1.0%	$706	$1,412	$1,906	85%	85%	85%	*Y	**Y		Y		*Flexible Benefits. Cafeteria Plan. Annual dollar allotment for health, dental,
SOU-40-Milford ESP-P2			(Custodians)		POS-OA		1.0%	$791	$1,581	$2,135	*	*	*						disability and life insurance. District uses 85% of HMO premium as its contribution for
SOU-40-Milford ESP-P3																			the health insurance component. **Employee receives 40% of usued dollars.
SOU-40-Milford-P1	*SC*	40	Milford	SchoolCare	HMO		1.0%	$706	$1,412	$1,906	*85%	85%	85%	Y		**Y	Y		*District contributes 82% of POS premium toward other plans. Teachers hired
SOU-40-Milford-P2					POS-OA		1.0%	$791	$1,581	$2,135	**82%	82%	82%						after 7/1/2005: district contributes dollar equivalent of 85% HMO. **District
SOU-40-Milford-P3																			pays 85% of POS plan if hired before 2005
SOU-41-Brookline ESP-P1	*HT*	41	Brookline ESP	BC3T 10, Rx 10 /20 /30	POS		6.0%	$831	$1,663	$2,245	$748	$950	$950	Y					
SOU-41-Brookline ESP-P2				BC3T 15 Rx 10 /20 /45	POS		New	$778	$1,556	$2,100	$700	$950	$950						
SOU-41-Brookline ESP-P3				MTB 5 Rx 10 /20 /30	HMO		2.6%	$754	$1,508	$2,035	$678	$950	$950						
SOU-41-Brookline ESP-P4				MTB 15 Rx 10 /20 /45	HMO		New	$703	$1,405	$1,897	$632	$950	$950						
SOU-41-Brookline ESP-P5				Lumenos 2500	HDHP		New	$562	$1,125	$1,518	$506	$950	$950						
SOU-41-Brookline-P1	*HT*	41	Brookline	BlueChoice Rx $3 /5, M$1	POS		6.0%	$831	$1,663	$2,245	$700	$1,244	$1,470	Y					*District pays monthy caps. Sixty-six percent of the premium increase
SOU-41-Brookline-P2				BlueChoice Rx$10/$20/$45	POS		16.5%	$778	$1,556	$2,100	$700	$1,244	$1,470						is added to the cap of the previous year.
SOU-41-Brookline-P3				Lumenos 2500	CDHP		10.2%	$562	$1,125	$1,518	$562	$1,125	$1,366						
SOU-41-Brookline-P4				MTB Rx $10/$20/$45	HMO		8.7%	$703	$1,405	$1,897	$700	$1,244	$1,470						
SOU-41-Brookline-P5				MTB Rx $3/$5/ $1M	HMO		2.6%	$754	$1,508	$2,035	$700	$1,244	$1,470						
SOU-41-Hollis ESP-P1	*HT*	41	Hollis ESP	BlueChoice Rx $3 /5, M$1	POS		10.5%	$866	$1,733	$2,339	$780	$1,025	$1,025	Y					*District contribution equivalent to 90% single, 85% 2-person and 75%
SOU-41-Hollis ESP-P2				MTB 5 Rx 3/15/ M1	HMO		7.1%	$787	$1,574	$2,125	$708	$1,025	$1,025						family for BlueChoice plan, up to a dollar cap of $975 per month. However
SOU-41-Hollis ESP-P3				BC3T 15 Rx 10 /20 /45	POS		New	$778	$1,556	$2,100	$700	$1,025	$1,025						employee must contribute a minimum of 10% toward any premium.
SOU-41-Hollis ESP-P4				MTB 15 Rx 10 /20 /45	HMO		New	$703	$1,405	$1,897	$632	$1,025	$1,025						
SOU-41-Hollis ESP-P5				Lumenos 2500	HDHP		New	$562	$1,125	$1,518	$506	$956	$1,025						
SOU-41-Hollis-Brookline ESP-I	*HT*	41	Hollis-Brookline	BlueChoice Rx 10/20/30	POS		10.2%	$831	$1,663	$2,245	$500	$900	$950	Y					*District contribution equivalent to 90% single, 85% 2-person and 75%
SOU-41-Hollis-Brookline ESP-P2			Cooperative ESP	BC3T Rx 10/20/45	POS		16.5%	$778	$1,556	$2,100	$500	$900	$950						family for BlueChoice plan, up to a dollar cap of $925 per month. However,
SOU-41-Hollis-Brookline ESP-P3				Matthew Thornton Blue	HMO		7.1%	$754	$1,508	$2,035	$500	$900	$950						employee must contribute a minimum of 10% toward any premium.
SOU-41-Hollis-Brookline ESP-P4				MTB Rx 10/20/45	HMO		8.7%	$703	$1,405	$1,897	$500	$900	$950						
SOU-41-Hollis-Brookline ESP-P5				Lumenos	CDHP		10.2%	$562	$1,125	$1,518	$464	$815	$911						
SOU-41-Hollis-Brookline-P1	*HT*	41	Hollis-Brookline	Anthem Blue Cross	JY-MC		16.7%	$1,076	$2,151	$2,904	$661	$1,213	$1,428	Y	$2,750				*District contribution equivalent to 90% single, 85% 2-person and 75%
SOU-41-Hollis-Brookline-P2			Cooperative	BC3T Rx 10/20/45	POS		16.5%	$778	$1,556	$2,100	$661	$1,213	$1,428						family for BlueChoice plan, up to a dollar cap of $1,000 per month. However,
SOU-41-Hollis-Brookline-P3				BlueChoice	POS		10.2%	$831	$1,663	$2,245	$661	$1,213	$1,428						employee must contribute a minimum of 10% toward any premium.
SOU-41-Hollis-Brookline-P4				MTB Rx 10/20/45	HMO		8.7%	$703	$1,405	$1,897	$597	$1,096	$1,290						
SOU-41-Hollis-Brookline-P5				Matthew Thornton Blue	HMO		7.1%	$754	$1,508	$2,035	$641	$1,176	$1,384						
SOU-41-Hollis-Brookline-P6				Lumenos	CDHP		10.2%	$562	$1,125	$1,518	478%	877%	$1,032						$2500 HSA with Lumenos
SOU-41-Hollis-P1	*HT*	41	Hollis	Anthem Blue Cross	JY-MC		16.7%	$1,076	$2,151	$2,904	$661	$1,190	$1,240	Y	$1,500				*District contribution equivalent to 85% single, 85% 2-person and 85%
SOU-41-Hollis-P2				BC3T Rx 10/20/45	POS		New	$778	$1,556	$2,100	$661	$1,190	$1,240						family for BlueChoice plan, up to a dollar cap of $1,040 per month. However,
SOU-41-Hollis-P3				BC3T10 Rx 10/20/30	POS		10.2%	$831	$1,663	$2,245	$661	$1,190	$1,240						employee must contribute a minimum of 10% toward any premium.
SOU-41-Hollis-P4				MTB5 Rx 10/20/30	HMO		6.8%	$754	$1,508	$2,035	$661	$1,190	$1,240						
SOU-41-Hollis-P5				MTB10 Rx 10/20/45	HMO		New	$703	$1,405	$1,897	$632	$1,190	$1,240						
SOU-41-Hollis-P6				Lumenos	HDHP		New	$562	$1,125	$1,518	$506	$956	$1,240						
SOU-63-Lyndeborough-P1	*SC*	63	Lyndeborough	SchoolCare	HMO		6.1%	$679	$1,358	$1,834	85%	85%	85%	Y					
SOU-63-Lyndeborough-P2					POS-OA		6.1%	$761	$1,521	$2,054	85%	85%	85%						
SOU-63-Mascenic ESP-P1	*SC*	87	Mascenic ESP	SchoolCare	HMO		8.6%	$679	$1,358	$1,834	*	*	*	Y					*District will contribute up to $1,000 per employee for qualified medical
SOU-63-Mascenic ESP-P2					POS		8.7%	$761	$1,521	$2,054	*	*	*						expenses, including health insurance premiums.
SOU-63-Mascenic-P1	*SC*	87	Mascenic	SchoolCare	HMO		8.6%	$679	$1,358	$1,834	92%	92%	84%	Y	**Y				*District pays dollar equivalent of its contribution for POS toward other plans.
SOU-63-Mascenic-P2					POS		8.7%	$761	$1,521	$2,054	*	*	*						**$2,000 if eligible for single coverage; $2,500 if eligible for two person/family.
SOU-63-Wilton SS-P1	*SC*	63	Wilton Support Staff	SchoolCare	HMO		6.1%	$679	$1,358	$1,834	*	*	*	Y					*District will contribute up to $1,000 per employee for qualified medical
SOU-63-Wilton SS-P2					POS-OA		6.1%	$761	$1,521	$2,054	*	*	*						expenses, including health insurance premiums.
SOU-63-Wilton-Lyndeboro Coo	*SC*	63	Wilton-Lyndeborough	SchoolCare	HMO		6.1%	$679	$1,358	$1,834	80%	80%	80%	Y	$2,000				District pays up to $300 per contract year for medical expenses
SOU-63-Wilton-Lyndeboro Coop-P2					POS-OA		6.1%	$761	$1,521	$2,054	80%	80%	80%						not covered by insurance.
SOU-63-Wilton-Lyndeboro SS-	*SC*	63	Wilton-Lyndeborough	SchoolCare	HMO		6.1%	$679	$1,358	$1,834	*	*	*	Y					*District will contribute up to $750 per employee for qualified medical
SOU-63-Wilton-Lyndeboro SS-P2			Support Staff		POS-OA		6.1%	$761	$1,521	$2,054	*	*	*						expenses, including health insurance premiums.
SOU-63-Wilton-P1	*SC*	63	Wilton	SchoolCare	HMO		6.1%	$679	$1,358	$1,834	80.0%	80.0%	80.0%	Y	$1,000				
SOU-63-Wilton-P2					POS-OA		6.1%	$761	$1,521	$2,054	80.0%	80.0%	80.0%						
SOU-81-Hudson-P1	*SC*	81	Hudson (AFT)	SchoolCare	HMO		7.1%	$725	$1,450	$1,958	85%	85%	$85	Y					
SOU-81-Hudson-P2					POS-OA		7.1%	$812	$1,624	$2,193	80%	80% 7	$80						

New Hampshire Teachers & Educational Support Personnel (ESP)

6/27/2017

MEDICAL INSURANCE BENEFITS

Rates as of July 1, 2012, rounded to the nearest dollar. District contribution shown for "full time" employees.

(MC=Managed Care; C=Comprehensive Plan; HMO=Health Maintenance Organization; POS=Point of Service; POS-OA=Point of Service, Open Access; OAP+ = Open Access Plus; PPO=Preferred Provider Organization

n/a= Plan has changed from last year or information not available from previous yea

Region\SAU\Alpha Sort	Carrier Code	SAU	District/Local			Did Not	Rate Change	Total Monthly Premium			Sch District Contribution			IRS/IRC	Reimburse	Retiree	Marrieds	Dom. Partner	Comments:
	HT, SC, IL, O	#	Name	Medical Plan(s)	Type	Report	over 2011	(rounded to the nearest dollar)			% or $ of Premium Cost			Sec 125	No Med Ins	Ins Paid	Full Ins Pd	Coverage	
Region\SAU\Alpha Sort								Single	2-Person	Family	Single	2-Person	Family						
UV-06-Claremont A.M.T.E.-P1			(maintenance and	BlueChoice	POS		7.6%	$880	$1,760	$2,375	*	*	*	Y					*District pays dollar equivalent of its contribution for Matthew Thornton
UV-06-Claremont A.M.T.E.-P2			custodians)	Matthew Thornton Blue	HMO		4.1%	$788	$1,577	$2,129	85%	85%	85%						Blue toward other plans.
UV-06-Claremont Secreatary-P	*HT*	6	Claremont	BlueChoice	POS		7.6%	$880	$1,760	$2,375	*	*	*						
UV-06-Claremont Secreatary-P2			Secretaries	Matthew Thornton Blue	HMO		4.1%	$788	$1,577	$2,129	85%	85%	85%						
UV-06-Claremont Sugar River-	*HT*	6	Claremont (teachers)	Anthem Blue Cross	JY-MC		13.1%	$1,125	$2,250	$3,038	*	*	*	Y	$2,500	**Y	Y	Y	*District pays dollar equivalent of its contribution for BlueChoice
UV-06-Claremont Sugar River-P2			Sugar River EA	BlueChoice	POS		7.6%	$880	$1,760	$2,375	86%	86%	86%						toward other plans.
UV-06-Claremont Sugar River-P3				Matthew Thornton Blue	HMO		4.1%	$788	$1,577	$2,129	*	*	*						**Up to 86% of 2-person POS coverage, between ages 57-65.
UV-06-Cornish-P1	*SC*	6	Cornish	SchoolCare	HMO		4.3%	$706	$1,412	$1,906	80%	80%	80%	Y		**Y		Y	*District pays dollar equivalent of its contribution for the HMO toward
UV-06-Cornish-P2					POS-OA		4.4%	$791	$1,581	$2,135	*	*	*						POS-OA, OA+. **District pays health insurance premium up to five years, not to
UV-06-Cornish-P3					OA+		4.3%	$653	$1,306	$1,763	*	*	*						to exceed $17,500.
UV-06-Unity-P1	*SC*	6	Unity	SchoolCare	HMO		4.3%	$706	$1,412	$1,906	*	*	*	Y					* District pays dollar equivalent of its contribution for the POS-OA
UV-06-Unity-P2					POS-OA		4.4%	$791	$1,581	$2,135	100%	90%	80%						toward the HMO plan.
UV-06-Unity-P3					OA+		4.3%	$653	$1,306	$1,763									
UV-23-Bath-P1	*SC*	23	Bath	SchoolCare	HMO		8.8%	$652	$1,304	$1,761	100%	*	*	Y	$2,000				District pays dollar equivalent of 100% single HMO toward 2-person or
UV-23-Bath-P2					POS-OA		8.8%	$730	$1,460	$1,971	*	*	*						family coverage for the HMO and all level of coverages for the POS-OA.
UV-23-Haverhill Paras/ESP-P1	*SC*	23	Haverhill Paras/ESP	SchoolCare	HMO		8.8%	$652	$1,304	$1,761	90%	80%	60%		$1,500				District pays dollar equivalent of its contribution toward the HMO
UV-23-Haverhill Paras/ESP-P2					POS-OA		8.8%	$730	$1,460	$1,971	*	*	*						for the POS-OA plan.
UV-23-Haverhill-P1	*HT*	23	Haverhill	BlueChoice	POS	X	27.8%	$652	$1,020	$1,377	*	*	*	Y	$2,000		Y		*District pays dollar equivalent of its BlueChoice (2-tier) contribution toward
UV-23-Haverhill-P2				BlueChoice (2 tier)	POS	X	0.0%	$468	$936	$1,264	82.5%	82.5%	82.5%						other BlueChoice plan.
UV-23-Piermont-P1	*SC*	23	Piermont	SchoolCare	HMO		8.8%	$652	$1,304	$1,761	100%	*	*	Y	$1,300				District pays dollar equivalent of 100% HMO, plus $2,700 per year for
UV-23-Piermont-P2					POS-OA		8.8%	$730	$1,460	$1,971	*	*	*						2-person or family coverage for the HMO. For POS-OA district pays 100%
UV-23-Piermont-P2																			of single HMO premium, plus $2,700 per year for 2-person or family coverage.
UV-23-Warren-P1	*SC*	23	Warren	SchoolCare	HMO		8.8%	$652	$1,304	$1,761	100%	*	*		$2,000				District pays 100% of single HMO, plus 80% of the difference between
UV-23-Warren-P2					POS-OA		8.8%	$730	$1,460	$1,971	*	*	*						single and 2-person coverage; and 80% of difference between single and
UV-23-Warren-P3																			family coverage.
UV-32-Plainfield ESP-P1	*SC*	32	Plainfield ESP	SchoolCare	HMO		0.0%	$625	$1,250	$1,688	86%	86%	86%	Y	$1,250			Y	*District pays dollar equivalent of its HMO contribution toward the POS-OA.
UV-32-Plainfield ESP-P2					POS-OA		0.0%	$700	$1,400	$1,890	*	*	*						
UV-32-Plainfield-P1	*SC*	32	Plainfield	SchoolCare	HMO		0.0%	$625	$1,250	$1,688	83%	83%	83%	Y	$1,250	**Y		Y	*District pays dollar equivalent of its HMO contribution toward the POS-OA.
UV-32-Plainfield-P2					POS		0.0%	$700	$1,400	$1,890	*	*	*						**District pays single premium for early retirees age 55-65, at same
UV-32-Plainfield-P3																			percentage as active employees.
UV-43-Newport ESP-P1	*HT*	43	Newport ESP	MTB15 IP Ded NEW	HMO		-0.6%	$688	$1,377	$1,858	90%	90%	90%						New MT HMO with deductible
UV-43-Newport-P1	*HT*	43	Newport	MTB15 IP Ded NEW	HMO		-0.6%	$688	$1,377	$1,858	88%	88%	88%				Y		New MT HMO with deductible
UV-43-Sunapee-P1		43	Sunapee	BlueChoice	POS		3.1%	$725	$1,449	$1,957	83%	83%	83%	Y	$1,000		Y		
UV-43-Sunapee-P2				Matthew Thornton Blue	HMO		0.2%	$657	$1,314	$1,774	83%	83%	83%						
UV-62-Mascoma ESP-P1	*SC*	62	Mascoma ESP	SchoolCare	HMO		0.0%	$625	$1,250	$1,688	95.5%	93.5%	91.5%	Y	$1,000				*District pays the dollar equivalent of its contribution toward the HMO for
UV-62-Mascoma ESP-P2					POS-OA		0.0%	$700	$1,400	$1,890	*	*	*						the POS-OA.
UV-62-Mascoma-P1	*SC*	62	Mascoma	SchoolCare	HMO		0.0%	$625	$1,250	$1,688	87%	87%	87%	Y	$1,000	*Y			*District pays 87%, up to $6,000 per retiree per year toward health
UV-62-Mascoma-P2					POS		0.0%	$700	$1,400	$1,890	87%	87%	87%						insurance, capped at $65,000 per year total for all retirees.
UV-70-Hanover ESP-P1	*PR*	70	Hanover ESP	NHIT Harvard Pilgrim	HMO		5.1%	$769	$1,538	$2,077	85%	85%	85%	Y	$750				*District pays the dollar equivalent of its contribution toward the HMO for
UV-70-Hanover ESP-P2					POS		5.2%	$914	$1,827	$2,467	*	*	*						the POS plan.
UV-70-Hanover-P1		70	Hanover	NHIT Harvard Pilgrim	HMO		5.1%	$769	$1,538	$2,077	80%	80%	80%	Y	$500	**Y			*District pays the dollar equivalent of its contribution toward the HMO for
UV-70-Hanover-P2					POS		5.2%	$914	$1,827	$2,467	*	*	*						the POS plan. **90% of single or two person coverage to Medicare eligibility.
UV-71-Goshen-Lempster-P1	*HT*	71	Goshen-Lempster	BlueChoice	POS		12.6%	$851	$1,703	$2,299	100%	83%	83%	Y	$2,000				
UV-71-Goshen-Lempster-P2				BlueChoice (2-tier)	POS		12.3%	$843	$1,687	$2,277	100%	80%	80%						
UV-71-Goshen-Lempster-P3				Matthew Thornton Blue	HMO		6.6%	$772	$1,544	$2,084	100%	85%	85%						
UV-75-Grantham-P1	*HT*	75	Grantham	Anthem Blue Cross	C 100-MC	X		N/A	N/A	N/A	$664	$1,328	$1,793	Y	25%				
UV-75-Grantham-P2				BlueChoice	POS	X		N/A	N/A	N/A	$664	$1,328	$1,793						
UV-75-Grantham-P3				Matthew Thornton Blue	HMO	X	0.0%	$753	$1,505	$2,032	$677	$1,355	$1,829						
UV-76-Lyme-P1	*SC*	76	Lyme	SchoolCare	HMO		4.3%	$706	$1,412	$1,906	85%	85%	85%	Y	$1,000	*Y			*85% of single premium to Medicare eligibility.
UV-76-Lyme-P3					POS-OA		4.4%	$791	$1,581	$2,135	85%	85%	85%						District provides $750 for employees wellness intiatives.
UV-76-Lyme-P4					OA+		4.3%	$653	$1,306	$1,763	85%	85%	85%						OA+ new for 2008
UV-77-Monroe ESP-P1	*HT*	77	Monroe ESP	BlueChoice (2-tier)	POS	X	0.0%	$743	$1,486	$2,005	80%	80%	80%	Y					
UV-77-Monroe-P1	*HT*	77	Monroe	BlueChoice (2-tier)	POS	X	0.0%	$743	$1,486	$2,005	85%	85%	85%	Y	*$1,250				Board will pay $1,250 to a tax sheltered annuity for teachers not electing
UV-77-Monroe-P2						X													health insurance.
UV-88-Lebanon Paras/ESP-P1	*SC*	88	Lebanon Paras/ESP	SchoolCare	HMO		4.2%	$688	$1,376	$1,858	84%	84%	84%	Y					
UV-88-Lebanon Paras/ESP-P2					POS-OA		4.3%	$771	$1,541	$2,081	*	*	*						
UV-88-Lebanon-P1	*SC*	88	Lebanon	SchoolCare	HMO		4.2%	$688	$1,376	$1,858	*	*	*	Y	**Y			Y	*District pays dollar equivalent of POS contribution toward the HMO.
UV-88-Lebanon-P2					POS-OA		4.3%	$771	$1,541	$2,081	78%	78%	78%						**Employee receives 25% of the cost saved by the district.
	219 NHMA					#DIV/0!	3.7%							202	159	37	56	38	
	220																		