



## BEA Teacher Cost Document for Insurance Plans

January 1, 2021 through December 31, 2021

<b>24 Deduction Employee Medical Plan (for employees on 26 pays)</b>			
Employee Cost per pay Plan	Tier		
	Single	2 Person	Family
ABC	\$12.83	\$74.51	\$55.92
Choices 500	\$49.52	\$157.07	\$158.67
Choices 1000	\$30.01	\$113.17	\$104.04

  

<b>20 Deduction Employee Medical Plan (for grandfathered employees on 22 pays)</b>			
Employee Cost per pay Plan	Tier		
	Single	2 Person	Family
ABC	\$15.40	\$89.41	\$67.11
Choices 500	\$59.43	\$188.48	\$190.40
Choices 1000	\$36.02	\$135.80	\$124.85

<b>24 Deduction Employee Dental Plan (for employees on 26 pays)</b>			
Employee Cost per pay Bargaining Unit	Tier		
	Single	2 Person	Family
BEA	\$1.70	\$3.22	\$6.09

  

<b>20 Deduction Employee Dental Plan (for grandfathered employees on 22 pays)</b>			
Employee Cost per pay Bargaining Unit	Tier		
	Single	2 Person	Family
BEA	\$2.04	\$3.86	\$7.31

July 1, 2020 through June 30, 2021

<b>Vision - Blue Cross Blue Shield MI – 24 Deductions (for employees on 26 pays)</b>	
Tier	Employee Cost
Single	\$0.25
2 Person	\$0.50
Family	\$0.84

  

<b>Vision - Blue Cross Blue Shield MI – 20 Deductions (for grandfathered employees on 22 pays)</b>	
Tier	Employee Cost
Single	\$0.30
2 Person	\$0.60
Family	\$1.00