		Employee Only	Employee Plus One	Family
MEDICAL OPTIONS				-
Primary Care Access				
Anthem State BlueCare POE Plus		\$1,105.55	\$2,432.21	\$2,984.98
Qualifying Employee Share		\$118.33	\$319.25	\$405.99
State Share (Refund)	1 month	\$987.22	\$2,112.96	\$2,578.99
	2 months	\$1,974.44	\$4,225.92	\$5,157.98
	3 months	\$2,961.66	\$6,338.88	\$7,736.97
	4 months	\$3,948.88	\$8,451.84	\$10,315.96
Standard Access				
Anthem State BlueCare POE		\$1,124.13	\$2,473.09	\$3,035.15
Qualifying Employee Share		\$128.52	\$359.79	\$471.21
State Share (Refund)	1 month	\$995.61	\$2,113.30	\$2,563.94
	2 months	\$1,991.22	\$4,226.60	\$5,127.88
	3 months	\$2,986.83	\$6,339.90	\$7,691.82
	4 months	\$3,982.44	\$8,453.20	\$10,255.76
Expanded Access				
Anthem State BlueCare POS		\$1,124.79	\$2,474.54	\$3,036.93
Qualifying Employee Share		\$152.25	\$409.41	\$485.91
State Share (Refund)	1 month	\$972.54	\$2,065.13	\$2,551.02
	2 months	\$1,945.08	\$4,130.26	\$5,102.04
	3 months	\$2,917.62	\$6,195.39	\$7,653.06
	4 months	\$3,890.16	\$8,260.52	\$10,204.08
State Preferred Point of Service				
Anthem State Preferred POS		\$1,516.91	\$3,337.21	\$4,095.66
Qualifying Employee Share		\$266.78	\$779.11	\$915.75
State Share (Refund)	1 month	\$1,250.13	\$2,558.10	\$3,179.91
	2 months	\$2,500.26	\$5,116.20	\$6,359.82
	3 months	\$3,750.39	\$7,674.30	\$9,539.73
	4 months	\$5,000.52	\$10,232.40	\$12,719.64
Out of Area Point-of-Service (PO	S)			
(non-CT residents only)				
Anthem Out of Area (OOA)		\$1,516.91	\$3,337.21	\$4,095.66
Qualifying Employee Share		\$161.19	\$499.75	\$584.57
State Share (Refund)	1 month	\$1,355.72	\$2,837.46	\$3,511.09
	2 months	\$2,711.44	\$5,674.92	\$7,022.18
	3 months	\$4,067.16	\$8,512.38	\$10,533.27
	4 months	\$5,422.88	\$11,349.84	\$14,044.36

Refund Calculation 2024 - 2025 for Adjunct Faculty

Quality First Select Access				
Anthem State BlueCare Prime (POS	6)	\$1,033.72	\$2,274.19	\$2,791.04
Qualifying Employee Share		\$93.03	\$250.16	\$320.97
State Share (Refund)	1 month	\$940.69	\$2,024.03	\$2,470.07
	2 months	\$1,881.38	\$4,048.06	\$4,940.14
	3 months	\$2,822.07	\$6,072.09	\$7,410.21
	4 months	\$3,762.76	\$8,096.12	\$9,880.28
CIGNA DENTAL OPTIONS				
Basic		\$40.83	\$124.53	\$124.53
Qualifying Employee Share		\$0.00	\$25.11	\$25.11
State Share (Refund)	1 month	\$40.83	\$99.42	\$99.42
	2 months	\$81.66	\$198.84	\$198.84
	3 months	\$122.49	\$298.26	\$298.26
	4 months	\$163.32	\$397.68	\$397.68
Enhanced		\$34.49	\$105.19	\$105.19
Qualifying Employee Share		\$0.00	\$21.21	\$21.21
State Share (Refund)	1 month	\$34.49	\$83.98	\$83.98
	2 months	\$68.98	\$167.96	\$167.96
	3 months	\$103.47	\$251.94	\$251.94
	4 months	\$137.96	\$335.92	\$335.92
Dental HMO		\$22.73	\$50.01	\$61.37
Qualifying Employee Share		\$0.00	\$8.18	\$11.59
State Share (Refund)	1 month	\$22.73	\$41.83	\$49.78
	2 months	\$45.46	\$83.66	\$99.56
	3 months	\$68.19	\$125.49	\$149.34
	4 months	\$90.92	\$167.32	\$199.12
Total Care DHMO		\$28.36	\$62.39	\$76.57
Qualifying Employee Share		\$0.00	\$10.21	\$14.46
State Share (Refund)	1 month	\$28.36	\$52.18	\$62.11
	2 months	\$56.72	\$104.36	\$124.22
	3 months	\$85.08	\$156.54	\$186.33
	4 months	\$113.44	\$208.72	\$248.44