2024/2025 Payroll Deductions

Biweekly Payroll Deductions

July 1, 2024 Through June 30, 2025

Special Payroll Employees Who Do Not Qualify for a State Subsidy

Medical Plans	Employee	Employee + 1	Family
Quality First Select Access (State BlueCare Prime Tiered [POS])	\$477.11	\$1,049.63	\$1,288.18
Primary Care Access (State BlueCare Point of Enrollment Plus [POE-G Plus])	\$510.26	\$1,122.56	\$1,377.69
Standard Access (State BlueCare Point of Enrollment [POE])	\$518.83	\$1,141.43	\$1,400.84
Expanded Access (State BlueCare Point of Service [POS])	\$519.14	\$1,142.10	\$1,401.66
State Preferred POS*	\$700.12	\$1,540.26	\$1,890.31
Out-of-Area	\$700.12	\$1,540.26	\$1,890.31

Dental Plans	Employee	Employee + 1	Family
Basic	\$18.84	\$57.48	\$57.48
Enhanced	\$15.92	\$48.55	\$48.55
Cigna Dental Care DHMO	\$10.49	\$23.08	\$28.32
Total Care DHMO	\$13.09	\$28.80	\$35.34

^{*} Closed to new enrollment