

J.B. Sullivan Blue Cross Blue Shield of Illinois Dental effective 01/01/2023

EMPLOYEE \$ 36.84
EMPLOYEE/SPOUSE \$ 73.67
EMPLOYEE/CHILD \$ 84.61
FAMILY \$ 132.44

INSURANCE COVERAGE	PERCENT EMPLOYEE PAYS	MONTHLY PREMIUM	TIMES MONTHS	Annual Cost	DIVIDED BY PAY PERIODS	WHAT YOU PAY PER PERIOD	Biweekly compared to 2022
EMPLOYEE	100%	\$ 36.84	12	\$ 442.08	26	\$ 17.00	Up \$7.82
EMPLOYEE/SPOUSE	100%	\$ 73.67	12	\$ 884.04	26	\$ 34.00	Up \$3.50
EMPLOYEE/CHILD	100%	\$ 84.61	12	\$ 1,015.32	26	\$ 39.05	Up \$2.10
FAMILY	100%	\$ 132.44	12	\$ 1,589.28	26	\$ 61.12	Up \$5.52

COBRA RATES (Monthly)

Employee Only \$ 37.58

Employee/Spouse \$ 75.14

Employee/Child \$ 86.30

Family \$ 135.09

Points of interest

- *Two (2) cleanings per year 6 months apart (Type I coverage 100%)
- *Wisdom teeth removal **usually** goes under medical (impacted)
- *Type 2 and 3 deductible is \$50 - 80% (Type 2 coverage) and 50% (Type 3 coverage)
- *Fluoride treatments are covered 100% as preventative for those under age 19 - two (2) times per year
- *Network info - Illinois Blues typically pay 90 of usual and customer for Dentists Not in Network...but please check with your provider
- *Pending Open Enrollment BCBS has stated rates may go up or down \$3 to \$4