

Syracuse City



School District

Syracuse City School District

INSURANCE PREMIUM RATE CHART - 10 month Employees

Effective 9/1/2022

Unit 6 Health Insurance Rates (per Paycheck)

Salary Level & Percentage of Premium	POS*		HDHP1*	
	Individual	Family	Individual	Family
Level I = \$ 0.00 - \$29,999 10% APR	\$39.92	\$105.38	\$38.02	\$100.36
Level II = \$30,000 - \$42,052 12% APR	\$47.90	\$126.45	\$45.62	\$120.43
Level III = \$42,053 - \$59,999 17% APR	\$67.86	\$179.14	\$64.63	\$170.61
Level IV = \$60,000 - \$79,999 20% APR	\$79.84	\$210.75	\$76.04	\$200.72
Level V = \$80,000 + \$99,999 22% APR	\$87.82	\$231.83	\$83.64	\$220.79
Level VI = \$100,000 + ABOVE 27% APR	\$107.78	\$284.51	\$102.65	\$270.97

*POS Plan = PPO Point of Service Plan for Enrollees hired prior to September 1, 2017

*HDHP1 Plan = High Deductible Plan 1 for Enrollees hired on or after September 1, 2017

Unit 6 Dental Rates (per Paycheck)

	Individual	Family
Flat Rate	\$13.20	\$25.80

Unit 6 Vision Rates (per Paycheck)

	Individual	Family
Flat Rate	\$0.00	\$0.95