

Syracuse City



School District

Syracuse City School District

INSURANCE PREMIUM RATE CHART - 12 month Employees

Effective 9/1/2023

Unit 6 Health Insurance Rates (per Paycheck)

Salary Level & Percentage of Premium	POS*		HDHP*	
	Individual	Family	Individual	Family
Level I = \$ 0.00 - \$29,999 10% APR	\$35.50	\$93.89	\$28.94	\$76.52
Level II = \$30,000 - \$42,052 12% APR	\$42.60	\$112.67	\$34.72	\$91.82
Level III = \$42,053 - \$59,999 17% APR	\$60.36	\$159.61	\$49.19	\$130.08
Level IV = \$60,000 - \$79,999 20% APR	\$71.01	\$187.78	\$57.87	\$153.04
Level V = \$80,000 + \$99,999 22% APR	\$78.11	\$206.55	\$63.66	\$168.34
Level VI = \$100,000 + ABOVE 27% APR	\$95.86	\$253.50	\$78.13	\$206.60

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

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

Unit 6 Dental Rates (per Paycheck)

	Individual	Family
Flat Rate	\$11.00	\$21.50

Unit 6 Vision Rates (per Paycheck)

	Individual	Family
Flat Rate	\$0.00	\$0.79