## **BRIDGES CHARTER SCHOOL**

## 2023-24 CALCULATE YOUR COST WORKSHEET

		COLUMN A 7/1/23 - 9/30/23	COLUMN B 10/1/23 - 6/30/24	
	FULL-TIME ANNUAL CAP *	771723 - 3730723	\$17,022.00	
ĺ		COST	COST	
	ANTHEM BLUE CROSS PPO PLAN: PBC 100%-D	7/1/23 9/30/23	10/1/23 - 6/30/24	
	ANTHEM BLUE CROSS PPO PLAN: PBC 100%-D			
	TOTAL MONTHLY PLAN COST	\$ 1,766.10	\$ 1,925.70	
	ANTHEM BLUE CROSS PPO PLAN: PBC 80%-G			
	TOTAL MONTHLY PLAN COST	\$ 1,523.10	\$ 1,657.70	
	ANTHEM BLUE CROSS PPO PLAN: PBC 80%-L			
	TOTAL MONTH V DI AN COOT	0 101010	A 400 70	
	TOTAL MONTHLY PLAN COST	\$ 1,313.10	\$ 1,423.70	
	Kaiser			
	TOTAL MONTHLY PLAN COST	\$ 1,483.10	\$ 1,616.70	
	ANTHEM BLUE CROSS PPO PLAN: PBC 90%-G	, , , , , , ,		
	ANTHEM BLUE CROSS PFO PLAN: PBC 90%-G			
	TOTAL MONTHLY PLAN COST	\$ 1,650.10	\$ 1,797.70	
	ANTHEM PPO: Minimum Value			
	TOTAL MONTHLY PLAN COST	\$ 1,103.10	\$ 1,190.70	
	Anthem PPO: 2-Tier Anchor Bronze Plan			
	TOTAL MONTHLY PLAN COST	EE: 635.00 EE+CH: 990.00	EE: 674.00 EE+CH: 1,067.00	
		22.011.000.00	22101111,001.00	
	OUR OUT-OF-POCKET COST: find the plan you currently have and enter its total month	nly plan cost here:		
2. Multiply line one	by 3 months: If your insurance for the 3 months of 7/1/23 - 9/30/23			3
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4. From column B, choose the plan you would like to have for the 9 months between 10/1/23 and 6/30/24 and enter its total monthly plan cost here:				
5. Multiply line four	by 9 months:		2	k 9
6. This is the cost of your insurance for the 9 months of 10/1/23 - 6/30/24 =				
<ol> <li>Add lines three and six together. This is the annual cost of your insurance between 7/1/23 and 6/30/24.</li> <li>Subtract the CAP from line 10 (Your full-time annual cap is \$17,022.00)</li> </ol>				- \$17,022.00
12. This is your total over cap (out-of-pocket expense).				=
14. Divide line twelve by 10 months.				÷10
15. This is your monthly over cap (out-of-pocket expense) for 12 months of the 2023-24 fiscal year. If you have an over-				-

cap, make sure you are signed up for SISC's no cost Premium Only Plan to save tax money on your premium.

<sup>\*</sup> Part-time employees should substitute their prorated monthly CAP for the full-time monthly CAP indicated on line eleven.

<sup>\*\*</sup> If the cost of insurance is less than the cap, the district pays the cost of the insurance instead of the cap.