

**Riverside Township Board of Education**  
**Health Benefit Plan Options - Employees Hired Before 7/1/2020**  
**Monthly Plan Rates Effective 7-1-2021 to 6-30-2022**

**MEDICAL PLAN OPTIONS - SHIF/AETNA**

	*NJHP	Patriot V	Patriot X
Single	\$893.00	\$912.00	\$1,010.00
Parent/Child(ren)	\$1,364.00	\$1,393.00	\$1,554.00
Member/Spouse	\$1,754.00	\$1,791.00	\$1,997.00
Family	\$2,329.00	\$2,379.00	\$2,655.00
Dependent to 31	\$579.00	\$592.00	\$592.00

	Premier	Core	Buy Up
Single	\$891.00	\$642.00	\$767.00
Parent/Child(ren)	\$1,352.00	\$985.00	\$1,175.00
Member/Spouse	\$1,745.00	\$1,267.00	\$1,511.00
Family	\$2,311.00	\$1,680.00	\$2,006.00
Dependent to 31	\$539.00	\$418.00	\$499.00

**PRESCRIPTION - BENECARD/Rx ALLIANCE**

	*NJHP	Retail: \$5/\$10	Option A Retail: \$5/\$25/\$40	Option B Retail: \$10/\$30/\$45
Single	\$223.43	\$255.17	\$229.70	\$204.22
Parent/Child(ren)	\$584.41	\$667.44	\$600.81	\$534.13
Member/Spouse	\$584.41	\$667.44	\$600.81	\$534.13
Family	\$584.41	\$667.44	\$600.81	\$534.13
Dependent to 31	\$178.21	\$203.54	\$183.22	\$162.89

**DENTAL - DELTA DENTAL**

	PPO Plus Premier
Single	\$39.46
Family	\$98.05

\*Please note, the NJ Educator Plan for medical and prescriptions benefits must be selected together. Employee contributions for this plan are based on the new Chapter 44 Contribution Scale. All other options apply to the Chapter 78 and/or Collectively Bargained employee contributions.