

**2023-24 HEALTH INSURANCE INFORMATION AAAS SCIENCE & TECHNOLOGY
POLICY FELLOWSHIPS
AFPI Employees Only**

All fellows are required to have health insurance. All fellows hired by AFPI must enroll in the insurance offered by AFPI or provide a waiver showing proof of insurance. If a fellow chooses not to enroll with AFPI, those costs are not reimbursable, and all costs will be the responsibility of the fellow.

AFPI fellows will be responsible for 25% of the costs of their monthly premiums (in line with OPM guidance) and the remainder will be charged to the agency in which they serve their fellowship. Below are the rates for the 2023-24 fellowship year.

Payments will be deducted via payroll (15th and last day of the month).

MEDICAL			
	Full Monthly Premium	25% (Monthly Deduction)	25% (Per Pay Period Deduction)
EE Only	\$674.08	\$168.52	\$84.26
EE + Adult	\$1550.39	\$387.60	\$193.80
EE + Child(ren)	\$1247.07	\$311.77	\$155.88
Family	\$2049.23	\$512.31	\$256.15

DENTAL			
	Full Monthly Premium	25% (Monthly Deduction)	25% (Per Pay Period Deduction)
EE Only	\$36.38	\$9.10	\$4.55
EE + Adult	\$74.15	\$18.54	\$9.27
EE + Child(ren)	\$71.84	\$17.96	\$8.98
Family	\$111.79	\$27.95	\$13.97

Vision			
	Full Monthly Premium	25% (Monthly Deduction)	25% (Per Pay Period Deduction)
EE Only	\$6.46	\$1.62	\$0.81
EE + Adult	\$12.22	\$3.06	\$1.53
EE + Child(ren)	\$12.45	\$3.11	\$1.56
Family	\$19.71	\$4.93	\$2.46

Health Insurance: [CareFirst Blue Choice Advantage Option 3-S](#)

Dental and Vision Insurance and Voluntary Benefits: [Guardian](#)

Note: These expenses are deducted pre-tax. Prices are subject to change with each new plan year, notifications will be delivered within 30 days of the plan finalization.