

DENTAL INSURANCE

COSTS BY BARGAINING GROUP

EFFECTIVE 01/01/2019

2019	MONTHLY COST TO EMPLOYEE								MONTHLY COST TO DISTRICT			
BARGAINING GROUP	CARE DENTAL		PREFERRED DENTAL		LIFE INSURANCE			LTD	DENTAL		LIFE	LTD
	FAMILY	SINGLE	FAMILY	SINGLE	BASIC	SUPPL	DEPENDENT		FAMILY	SINGLE		
Bus Drivers/Assist	0.00	0.00	0.00	0.00	0.00	100% of prem	2.20	.30 *	120.28	42.96	4.50	0.00
Bus Mechanics	67.28	0.00	67.28	0.00	0.00	100% of prem	2.20	.30*	53.00	53.00	4.50	0.00
DOSS	89.38	12.06	89.38	12.06	0.00	100% of prem	2.20	.30*	30.90	30.90	2x salary	0.00
Kids Club Supervisors	120.28	42.96	120.28	42.96	0.00	100% of prem	2.20	.30*	0.00	0.00	0.90	0.00
Maintenance	81.78	7.21	81.78	7.21	0.00	100% of prem	2.20	.30*	38.50	35.75	4.50	0.00
Nutrition Services	29.23	6.73	29.23	6.73	0.00	100% of prem	2.20	.30*	91.05	36.23	4.50	0.00
Office Prof	60.28	2.96	60.28	2.96	0.00	100% of prem	2.20	.30*	60.00	40.00	4.50	0.00
Paraprofessional	120.28	42.96	120.28	42.96	4.50	100% of prem	2.20	.30*	0.00	0.00	0.00	0.00
Principals	5.86	2.14	5.86	2.14	0.00	100% of prem	2.20	.30*	114.42	40.82	3x salary	0.00
Teacher (1.0 FTE)	77.32	0.00	77.32	0.00	0.00	100% of prem	2.20	.30*	42.96	42.96	4.50	0.00
Teacher (.9 FTE)	77.32	0.00	77.32	0.00	0.00	100% of prem	2.20	.30*	42.96	42.96	4.50	0.00
Teacher (.8 FTE)	77.32	0.00	77.32	0.00	0.00	100% of prem	2.20	.30*	42.96	42.96	4.50	0.00
Teacher (.7 FTE)	90.21	12.89	90.21	12.89	4.50	100% of prem	2.20	.30*	30.07	30.07	0.00	0.00
Teacher (.6 FTE)	94.50	17.18	94.50	17.18	4.50	100% of prem	2.20	.30*	25.78	25.78	0.00	0.00
Teacher (.5 FTE)	98.80	21.48	98.80	21.48	4.50	100% of prem	2.20	N/A	21.48	21.48	0.00	0.00
Teacher (.4 FTE)	103.10	25.78	103.10	25.78	4.50	100% of prem	2.20	N/A	17.18	17.18	0.00	0.00
Teacher (.3 FTE)	107.39	30.07	107.39	30.07	4.50	100% of prem	2.20	N/A	12.89	12.89	0.00	0.00
Teacher (.2 FTE)	111.69	34.37	111.69	34.37	4.50	100% of prem	2.20	N/A	8.59	8.59	0.00	0.00
Teacher (.1 FTE)	115.98	38.66	115.98	38.66	4.50	100% of prem	2.20	N/A	4.30	4.30	0.00	0.00
Tier 1 Independent	14.28	2.75	14.28	2.75	0.00	100% of prem	2.20	.30 *^	106.00	40.21	3x salary	0.00
Tier 2 Independent	14.28	2.75	14.28	2.75	0.00	100% of prem	2.20	.30 *^	106.00	40.21	2x salary	0.00
Tier 3 Independent	22.28	2.75	22.28	2.75	0.00	100% of prem	2.20	.30 *	98.00	40.21	2x salary	0.00
Tier 4 Independent	55.28	2.75	55.28	2.75	4.50	100% of prem	2.20	.30*	65.00	40.21	4.50	0.00
COBRA/Retiree	120.28	42.96	120.28	42.96	4.50	100% of prem	2.20	N/A	0.00	0.00	0.00	N/A

*Actual LTD mo. premium is based on individual salary (rate*salary/1,000)

^May have multiple LTD rates within group

TOTAL MONTHLY PREMIUM CHARGED BY INSURER				
PLAN OPTIONS	DENTAL			LTD
	FAMILY	SINGLE	LIFE	
DELTA CARE OR PREMIER	\$120.28	\$42.96		
BASIC LIFE \$10,000			\$0.90	
BASIC LIFE \$50,000			\$4.50	
BASIC LIFE 2X SALARY			.090 / \$1000	
BASIC LIFE 3X SALARY			.154 / \$1000	
BASIC LIFE 4X SALARY			.154 / \$1000	
SUPPL LIFE (ADDL \$50,000)			\$11.00	
SUPPL LIFE (ADDL \$100,000)			\$22.00	
SUPPL LIFE (ADDL 1X SAL) Tier 1 & Princ			.32 / \$1000	
SUPPL LIFE (ADDL 1X SAL) Tier 2, Tier 3, DOSS			.22 / \$1000	
SUPPL LIFE (ADDL 2X SAL) Tier 1 & Princ			.32 / \$1000	
SUPPL LIFE (ADDL 2X SAL) Tier 2, Tier 3, DOSS			.22 / \$1000	
DEPENDENT LIFE			\$2.20	
LONG TERM DISABILITY*			.30* yearly earnings/\$1000	

*LTD Max can be found in the benefit plan summaries.

IMPORTANT INFORMATION
▶ 12 Month & Contract employees will have approximately half of the employee's monthly cost will be deducted from each pay check.
▶ 9 & 10 month employees, & voucher paid employees will have larger per-pay deductions to cover summer premiums
▶ Insurance coverage for new employees starts on the first day of the month following their start date.
▶ COBRA continuation coverage is offered per state and federal guidelines.

Updated: October 2019