

Employee Insurance Premium Schedule 2021/2022
Amounts listed are deducted for 10 months unless stated otherwise.

MEDICAL

BIND (United Healthcare Choice Plus Network)	SINGLE	2-PARTY	FAMILY
TEACHER	<u>Employee pays</u>	<u>Employee pays</u>	<u>Employee pays</u>
FTE	<u>10 Deductions of</u>	<u>10 Deductions of</u>	<u>10 Deductions of</u>
50%	0.00	692.22	999.78
60%	0.00	553.78	799.82
70%	0.00	415.33	599.87
75%	0.00	346.11	499.89
80%	0.00	276.89	399.91
90%	0.00	138.44	199.96
100%	0.00	0.00	0.00
100% and on salary Step 28 or higher	250.00	250.00	250.00
CLASSIFIED	<u>Employee pays</u>	<u>Employee pays</u>	<u>Employee pays</u>
Hours worked per week	<u>10 Deductions of</u>	<u>10 Deductions of</u>	<u>10 Deductions of</u>
25*	0.00	395.53	571.27
27.5*	0.00	296.69	428.51
30	0.00	197.84	285.74
32.5	0.00	98.85	142.77
35-40	0.00	0.00	0.00
ADMINISTRATOR	<u>Employee pays</u>	<u>Employee pays</u>	<u>Employee pays</u>
Administrator's medical insurance deductions are done in 12 payrolls	0.00	0.00	0.00

* Regular Route Classified School Bus Drivers working an average of 25-29.9 hours per week, eligible for state reimbursement

DENTAL

CACHE PREMIER	Copay Plan SINGLE	Copay Plan 2 PARTY	Copay Plan FAMILY	PPO- Plan SINGLE	PPO- Plan 2 PARTY	PPO- Plan FAMILY
Employee pays	21.84	43.68	75.36	36.00	71.88	124.08

VISION

OPTICARE	70C SINGLE	70C 2 PARTY	70C FAMILY	120C SINGLE	120C 2 PARTY	120C FAMILY
Employee pays	4.43	8.58	11.27	6.60	10.94	15.50