WASHINGTON COUNTY PUBLIC SCHOOLS PART-TIME EMPLOYEES INSURANCE RATES FOR JULY 1, 2023 - JUNE 30, 2024

		Half Time Teachers & ESP		Employee working 15- 19 Hours/week	
	Employee Coverage Tier	20 deductions	26 deductions	Monthly Cost of Coverage/LOA	
	Employee Only	\$297.32	\$228.71	\$992.03	
In and Out of	Employee + Spouse	\$594.64	\$457.42	\$1,984.07	
Network	Employee + Child(ren)	\$455.50	\$350.38	\$1,519.81	\leq
	Employee + Family	\$752.86	\$579.12	\$2,511.96	no
	Employee Only	\$272.71	\$209.78	\$909.93	Monthly
In Network	Employee + Spouse	\$548.52	\$421.94	\$1,830.18	ly
	Employee + Child(ren)	\$417.80	\$321.39	\$1,394.03	
	Employee + Family	\$690.55	\$531.19	\$2,304.08	
	Employee Only	\$6.83	\$5.26	\$22.78	
Dental	Employee + Spouse	\$13.66	\$10.51	\$45.54	20
	Employee + Child(ren)	\$14.69	\$11.30	\$48.96	
	Employee + Family	\$28.87	\$22.21	\$96.23	ed
	Employee Only	\$1.64	\$1.26	\$5.48	deductions
Vision	Employee + Spouse	\$2.98	\$2.29	\$9.93	ior
	Employee + Child(ren)	\$3.13	\$2.41	\$10.43	SL
	Employee + Family	\$4.82	\$3.71	\$16.08	

Supplemental Life, Voluntary AD&D, Dependent Life, Long Term Disability

Coverage Type		Cost		
Basic term life insurance	1x annual pay rounded to next higher \$1,000 (\$10,000 Minimum)	divided by 1,000 x .116 x 12 divided by the number of		
Basic accidental death & dismemberment (AD&D)		Calculation - Annual salary (rounded to next higher \$1,000) divided by the number of paychecks received divided by 1,000 x .016 x 12		
Supplemental life insurance	1x, 2x, or 3x annual base pay rounded to the next higher \$1000	divided by 1,000 x .234 x 12 divided by the number of		
Voluntary accidental	\$50,000 \$100,000 \$200,000	26 Deductions 20 Deductions \$0.46 \$0.60 \$0.92 \$1.20 \$1.85 \$2.40		
Dependent life insurance	Spouse - \$7,500 Child(ren) - \$3,000	26 Deductions= \$1.29 20 Deductions = \$1.68		

Full-time = 30 or more hours per week

Rates may vary slightly due to system rounding.