

2024-2025 Insurance Costs

BiWeekly 21 Deductions listed are for full year coverage. Deductions will be adjusted/prorated for mid year enrollment or plan changes.

Health Insurance	MONTHLY PREMIUM	YEARLY PREMIUM	EMPLOYEE DEDUCTION	MONTHLY DEDUCTION	BW 21 PAYMENT
CASE ADMIN FAM 20%	\$2,303.00	\$27,636.00	\$5,527.20	\$437.57	\$263.20
CASE ADMIN IND 20%	\$915.00	\$10,980.00	\$2,196.00	\$173.85	\$104.57
CASE LTA FAM 49% of 18%	\$2,244.00	\$26,928.00	\$2,375.05	\$197.92	\$113.10
CASE LTA IND 49% of 18%	\$890.00	\$10,680.00	\$941.98	\$78.50	\$44.86
CASE MAINTENANCE FAMILY 16%	\$2,303.00	\$27,636.00	\$4,421.76	\$368.48	\$210.56
CASE NURSE FAM 94% of 18%	\$2,244.00	\$26,928.00	\$4,556.22	\$379.68	\$216.96
CASE NURSE IND 94% of 18%	\$890.00	\$10,680.00	\$1,807.06	\$150.59	\$86.05
CASE PERCENT FAM 1% of Salary	\$2,303.00	\$27,636.00			\$0.00
CASE PERCENT IND 1% Salary	\$915.00	\$10,980.00			\$0.00
CASE SUPPORT FAM 13%	\$2,303.00	\$27,636.00	\$3,592.68	\$299.39	\$171.08
CASE SUPPORT IND 13%	\$915.00	\$10,980.00	\$1,427.40	\$118.95	\$67.97
CASE SUPERINTENDENT FAMILY 20%	\$2,303.00	\$27,636.00	\$5,527.20	\$460.60	\$263.20
CASE TEACH FAM 18%	\$2,244.00	\$26,928.00	\$4,847.04	\$403.92	\$230.81
CASE TEACH IND 18%	\$890.00	\$10,680.00	\$1,922.40	\$160.20	\$91.54
CDPHP ADMIN FAM 19%	\$2,676.79	\$32,121.48	\$6,103.08	\$508.59	\$290.62
CDPHP ADMIN IND 19%	\$1,139.07	\$13,668.84	\$2,597.08	\$216.42	\$123.67
CDPHP LTA IND 49% of 18%	\$1,139.07	\$13,668.84	\$1,205.59	\$100.47	\$57.41
CDPHP LTA FAM 49% of 18%	\$2,676.79	\$32,121.48	\$2,833.11	\$236.09	\$134.91
CDPHP MAINT FAMILY 16%	\$2,676.79	\$32,121.48	\$5,139.44	\$428.29	\$244.74
CDPHP NURSE FAM 94% of 18%	\$2,676.79	\$32,121.48	\$5,434.95	\$452.91	\$258.81
CDPHP NURSE IND 94% of 18%	\$1,139.07	\$13,668.84	\$2,312.77	\$192.73	\$110.13
CDPHP PERCENT FAM 1% of Salary	\$2,676.79	\$32,121.48			\$0.00
CDPHP PERCENT IND 1% Salary	\$1,139.07	\$13,668.84			\$0.00
CDPHP SUPPORT FAM 13%	\$2,676.79	\$32,121.48	\$4,175.79	\$347.98	\$198.85
CDPHP SUPPORT IND 13%	\$1,139.07	\$13,668.84	\$1,776.95	\$148.08	\$84.62
CDPHP SUPERINTENDENT FAMILY 20%	\$2,676.79	\$32,121.48	\$6,424.30	\$535.36	\$305.92
CDPHP TEACH IND 18%	\$1,139.07	\$13,668.84	\$2,460.39	\$205.03	\$117.16
CDPHP TEACH FAM 18%	\$2,676.79	\$32,121.48	\$5,781.87	\$481.82	\$275.33
Dental Insurance	MONTHLY PREMIUM	YEARLY PREMIUM	EMPLOYEE DEDUCTION	MONTHLY DEDUCTION	BW 21 PAYMENT
DELTA 001 IND (Mid Level) Premium less \$17.04 per month	\$26.25	\$315.00	\$110.52		\$5.26
DELTA 001 FAM (Mid Level) Premium less .333%	\$78.75	\$945.00	\$630.32		\$30.02
DELTA 001 FAM ADMIN (Mid Level) Premium less \$300.00	\$78.75	\$945.00	\$645.00		\$30.71
DELTA 002 IND (Low Level) Premium less \$17.04 per month	\$14.70	\$176.40	\$0.00		\$0.00
DELTA 002 FAM (Low Level) Premium less .333%	\$41.67	\$500.00	\$333.50		\$15.88
TEACHER ONC HIGH LEVEL IND Premium less \$215 per yer	\$66.00	\$792.00	\$577.00		\$27.48
TEACHER ONC HIGH LEVEL TWO PERSON Premium less \$265 per year	\$131.00	\$1,572.00	\$1,307.00		\$62.24
TEACHER ONC HIGH LEVEL FAMILY Premium less \$320 per year	\$202.00	\$2,424.00	\$2,104.00		\$100.19
SUPPORT ONC HIGH LEVEL IND Premium less \$205 per yer	\$66.00	\$792.00	\$587.00		\$27.95
SUPPORT ONC HIGH LEVEL TWO PERSON Premium less \$250 per year	\$131.00	\$1,572.00	\$1,322.00		\$62.95
SUPPORT ONC HIGH LEVEL FAMILY Premium less \$300 per year	\$202.00	\$2,424.00	\$2,124.00		\$101.14