

2024

Dental, Vision, & Life Insurance Rates

Monthly Full Premium

Dental Rates		Vision Rates		Life Rates	
Family	\$93.22	Family	\$25.72	OAPSE	\$4.50
Single	\$42.70	Single	\$25.72	GEA/Admin	\$6.00

Classified					
8 Hours Classified and Bus Drivers: Free Dental, Vision and Life					
Dental		Vision		Life	
Board Amount	Employee Amt.	Board Amount	Employee Amt.	Board Amount	Employee Amt.
Family	\$93.22	0	\$25.72	0	\$4.50
Single	\$42.70	0	\$25.72	0	\$4.50

Classified Section G (At least 4 Hours Classified: 25% of Dental, 50% of Vision, Free Life)					
Dental		Vision		Life	
Board Amount	Employee 25%	Board Amount	Employee 50%	Board Amount	Employee Amt.
Family	\$69.91	\$23.31	\$12.86	\$12.86	\$4.50
Single	\$32.02	\$10.68	\$12.86	\$12.86	\$4.50

Certified					
Free Dental, Full Prem. Vision, Free Life					
Dental		Vision		Life	
Board Amount	Employee Amt.	Board Amount	Employee Amt.	Board Amount	Employee Amt.
Family	\$93.22	0	0	\$25.72	\$6.00
Single	\$42.70	0	0	\$25.72	\$6.00

Administration					
Free, Dental, Vision, and Life					
Dental		Vision		Life	
Board Amount	Employee Amt.	Board Amount	Employee Amt.	Board Amount	Employee Amt.
Family	\$93.22	0	\$25.72	0	\$6.00
Single	\$42.70	0	\$25.72	0	\$6.00