

**Worthington City Schools**  
**Certified Staff**  
**2025 Dental Insurance Premiums Per Month**

DENTAL INSURANCE PREMIUMS						
FTE	Single			Family		
	Employee	Board	Total	Employee	Board	Total
Full Time	\$ 8.16	\$ 100.67	\$ 108.83	\$ 8.16	\$ 100.67	\$ 108.83
.90 FTE	\$ 18.23	\$ 90.60	\$ 108.83	\$ 18.23	\$ 90.60	\$ 108.83
.80 FTE	\$ 28.30	\$ 80.53	\$ 108.83	\$ 28.30	\$ 80.53	\$ 108.83
.70 FTE	\$ 38.36	\$ 70.47	\$ 108.83	\$ 38.36	\$ 70.47	\$ 108.83
.60 FTE	\$ 48.43	\$ 60.40	\$ 108.83	\$ 48.43	\$ 60.40	\$ 108.83
.50 FTE	\$ 58.50	\$ 50.33	\$ 108.83	\$ 58.50	\$ 50.33	\$ 108.83
.40 FTE	\$ 68.56	\$ 40.27	\$ 108.83	\$ 68.56	\$ 40.27	\$ 108.83
.30 FTE	\$ 78.63	\$ 30.20	\$ 108.83	\$ 78.63	\$ 30.20	\$ 108.83
.20 FTE	\$ 88.70	\$ 20.13	\$ 108.83	\$ 88.70	\$ 20.13	\$ 108.83
.10 FTE	\$ 98.76	\$ 10.07	\$ 108.83	\$ 98.76	\$ 10.07	\$ 108.83

**2025 Vision Insurance for certified staff is provided 100% by the Board of Education.**