

WASHINGTON COUNTY PUBLIC SCHOOLS
PART-TIME EMPLOYEES
INSURANCE RATES FOR JULY 1, 2025 - JUNE 30, 2026

	Employee Coverage Tier	Half Time Teachers & ESP		Employees Working 15-19 hours per week	Monthly Cost of Coverage / LOA
		20 Deductions	26 Deductions	Medical - Monthly Den/Vis 20 deductions	
Medical / Rx In and Out of Network	Employee Only	\$343.41	\$264.16	\$1,144.69	\$1,144.69
	Employee + Spouse	\$686.81	\$528.32	\$2,289.37	\$2,289.37
	Employee + Child(ren)	\$526.10	\$404.69	\$1,753.67	\$1,753.67
	Employee + Family	\$869.55	\$668.88	\$2,898.50	\$2,898.50
Medical / Rx In Network Only	Employee Only	\$314.99	\$242.30	\$1,049.95	\$1,049.95
	Employee + Spouse	\$633.54	\$487.34	\$2,111.80	\$2,111.80
	Employee + Child(ren)	\$482.56	\$371.20	\$1,608.54	\$1,608.54
	Employee + Family	\$797.59	\$613.53	\$2,658.63	\$2,658.63
Dental	Employee Only	\$7.67	\$5.90	\$15.33	\$25.56
	Employee + Spouse	\$15.33	\$11.79	\$30.66	\$51.10
	Employee + Child(ren)	\$16.48	\$12.68	\$32.96	\$54.93
	Employee + Family	\$32.39	\$24.92	\$64.78	\$107.97
Vision	Employee Only	\$2.53	\$1.95	\$5.06	\$8.43
	Employee + Spouse	\$4.59	\$3.53	\$9.17	\$15.29
	Employee + Child(ren)	\$4.82	\$3.70	\$9.63	\$16.05
	Employee + Family	\$7.43	\$5.71	\$14.86	\$24.76

BASIC LIFE, SUPPLEMENTAL LIFE, BASIC AD&D, VOLUNTARY AD&D, & DEPENDENT LIFE INSURANCE			
Coverage Type		Cost	
Basic Term Life Insurance 1x Annual salary rounded to the next higher \$1,000 (\$10,000 Minimum)		Calculation - Annual Salary (rounded to the next higher \$1,000) divided by 1,000 x .116 x 12 divided by the number of deductions (20 or 26)	
Basic Accidental Death & Dismemberment (AD&D) 1x Annual salary rounded to the next higher \$1,000		Calculation - Annual Salary (rounded to the next higher \$1,000) divided by the number of deductions (20 or 26) divided by 1,000 x .016 x 12	
Supplemental Life Insurance 1x, 2x, or 3x annual base salary rounded to the next higher \$1,000		Cost is .234 per thousand per month Calculation - Annual salary (rounded to the next higher \$1,000) divided by 1,000 x .234 x 12 divided by the number of deductions (20 or 26)	
Dependent Life Insurance Spouse \$7500 Child(ren) \$3,000		<u>26 Deductions</u>	<u>Monthly Rate</u>
		\$1.29	\$2.80
Voluntary Accidental Death & Dismemberment (VADD) Coverage of \$50,000, \$100,000 or \$200,000		12 month pay <u>26 Deductions</u>	10 month pay <u>20 Deductions</u> <u>Monthly Rate</u>
\$50,000		\$0.46	\$1.00
\$100,000		\$0.92	\$2.00
\$200,000		\$1.85	\$4.00

Part time = 15-29 hours per week

EMPLOYEES WORKING 15-19 HOURS WEEKLY

Medical premiums will not be payroll deducted. Employees will be billed separately for medical/rx premiums on a monthly basis
Dental and Vision premiums will be payroll deducted.

All rates may vary slightly due to system rounding