

**CONVAL SCHOOL DISTRICT
2016-17 HEALTH INSURANCE PLANS/RATES**

TEACHER/SSP/12-MONTH STAFF AND PARAS OPTING 21 PAYS					10-MONTH STAFF AND PARAS OPTING 16 PAYS
PLAN	2016-17	DISTRICT PAYS PER MONTH	EMPLOYEE PAYS PER MONTH	BI-WEEKLY DEDUCTION (21 PAYS)	DEDUCTION (16 PAYS)
ABSOS20/40IKDED\$10/20/45					
1 Person	\$ 638.26	\$ 574.43	\$ 63.83	\$ 36.47	\$ 47.87
2 Person	\$ 1,276.52	\$ 1,148.87	\$ 127.65	\$ 72.94	\$ 95.74
Family	\$ 1,723.30	\$ 1,550.97	\$ 172.33	\$ 98.47	\$ 129.25
AB15IPDED\$10/20/45					
1 Person	\$ 778.19	\$ 574.43	\$ 203.76	\$ 116.43	\$ 152.82
2 Person	\$ 1,556.37	\$ 1,148.87	\$ 407.50	\$ 232.86	\$ 305.63
Family	\$ 2,101.10	\$ 1,550.97	\$ 550.13	\$ 314.36	\$ 412.60
BCBS 3 Tier POS\$10/20/45					
1 Person	\$ 899.86	\$ 574.43	\$ 325.43	\$ 185.96	\$ 244.07
2 Person	\$ 1,799.72	\$ 1,148.87	\$ 650.85	\$ 371.91	\$ 488.14
Family	\$ 2,429.62	\$ 1,550.97	\$ 878.65	\$ 502.09	\$ 658.99
Delta Dental					
1 Person	\$ 44.15	\$ 44.15	\$ 0.00	\$ 0.00	\$ 0.00
2 Person	\$ 85.33	\$ 44.15	\$ 41.18	\$ 23.53	\$ 30.89
Family	\$ 153.00	\$ 44.15	\$ 108.85	\$ 62.20	\$ 81.64