

**CONVAL SCHOOL DISTRICT
2019-20 HEALTH INSURANCE PLANS/RATES**

TEACHER/SSP/12-MONTH STAFF, AND PARAS OPTING 21 PAYS					10-MONTH STAFF AND PARAS OPTING 16 PAYS
PLAN	2019-2020	DISTRICT PAYS PER MONTH	EMPLOYEE PAYS PER MONTH	Bi-Weekly Deduction (21 Pays)	DEDUCTION (16 PAYS)
ABSOS20/40IKDED\$10/20/45					
1 Person	\$ 729.74	\$ 627.58	\$ 102.16	\$ 58.38	\$ 76.62
2 Person	\$ 1,459.48	\$ 1,255.15	\$ 204.33	\$ 116.76	\$ 153.25
Family	\$ 1,970.29	\$ 1,694.45	\$ 275.84	\$ 157.62	\$ 206.88
AB15IPDED\$10/20/45					
1 Person	\$ 889.72	\$ 627.57	\$ 262.15	\$ 149.80	\$ 196.61
2 Person	\$ 1,779.44	\$ 1,255.15	\$ 524.29	\$ 299.59	\$ 393.22
Family	\$ 2,402.25	\$ 1,694.46	\$ 707.79	\$ 404.45	\$ 530.84
BCBS 3 Tier POS\$10/20/45					
1 Person	\$ 1,028.83	\$ 627.57	\$ 401.26	\$ 229.29	\$ 300.95
2 Person	\$ 2,057.67	\$ 1,255.15	\$ 802.52	\$ 458.58	\$ 601.89
Family	\$ 2,777.85	\$ 1,694.46	\$ 1,083.39	\$ 619.08	\$ 812.54
Delta Dental					
1 Person	\$ 46.21	\$ 46.21	\$ 0.00	\$ 0.00	\$ 0.00
2 Person	\$ 89.30	\$ 46.21	\$ 43.09	\$ 24.62	\$ 32.32
Family	\$ 160.12	\$ 46.21	\$ 113.91	\$ 65.09	\$ 84.43