

**CONVAL SCHOOL DISTRICT
2022-23 HEALTH INSURANCE PLANS/RATES**

				TEACHER/SSP	10-MONTH STAFF AND ALL PARAS	12-MONTH STAFF
PLAN	2022-23	DISTRICT PAYS PER MONTH	EMPLOYEE PAYS PER MONTH	DEDUCTION TAKEN IN 21 PAYS ONLY	DEDUCTION TAKEN IN 16 PAYS ONLY	DEDUCTION TAKEN IN 26 PAYS ONLY
ABSOS20/40IKDED\$10/20/45						
1 Person	\$ 748.05	\$ 624.62	\$ 123.43	\$ 70.53	\$ 92.57	\$ 56.97
2 Person	\$ 1,496.09	\$ 1,249.24	\$ 246.85	\$ 141.06	\$ 185.14	\$ 113.93
Family	\$ 2,019.72	\$ 1,686.47	\$ 333.25	\$ 190.43	\$ 249.94	\$ 153.81
AB15IPDED\$10/20/45						
1 Person	\$ 912.04	\$ 624.62	\$ 287.42	\$ 164.24	\$ 215.57	\$ 132.66
2 Person	\$ 1,824.09	\$ 1,249.24	\$ 574.85	\$ 328.49	\$ 431.14	\$ 265.32
Family	\$ 2,462.52	\$ 1,686.47	\$ 776.05	\$ 443.46	\$ 582.04	\$ 358.18
BCBS 3 Tier POS\$10/20/45						
1 Person	\$ 1,054.64	\$ 624.62	\$ 430.02	\$ 245.73	\$ 322.52	\$ 198.47
2 Person	\$ 2,109.29	\$ 1,249.24	\$ 860.05	\$ 491.46	\$ 645.04	\$ 396.95
Family	\$ 2,847.54	\$ 1,686.47	\$ 1,161.07	\$ 663.47	\$ 870.80	\$ 535.88
Delta Dental						
1 Person	\$ 47.29	\$ 47.29	\$ 0	\$ 0	\$ 0	\$ 0
2 Person	\$ 91.39	\$ 47.29	\$ 44.10	\$ 25.20	\$ 33.08	\$ 20.35
Family	\$ 163.86	\$ 47.29	\$ 116.57	\$ 66.61	\$ 87.43	\$ 53.80