

## Clearview Local School District Health Insurance Rates - Effective 07-01-22

	Medical/Rx	Vision	<u>Dental</u>	Total
Single Full Rate	828.57	3.07	27.44	859.08
Family Full Rate	2,071.42	8.44	72.72	2,152.58

## **Certificated and Classified Employees**

	Single Rates			
	Medical/Rx	Vision	Dental	Total
Employee Share - 10%	82.86	0.31	2.74	85.91
Board Share - 90%	745.71	2.76	24.70	773.17
Total Single Rate	828.57	3.07	27.44	859.08

	Family Rates				
	Medical/Rx	Vision	Dental	Total	
Employee Share - 10%	207.14	0.84	7.27	215.26	
Board Share - 90%	1,864.28	7.60	65.45	1,937.32	
Total Family Rate	2,071.42	8.44	72.72	2,152.58	

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Hours = 8:00 AM to 1:00 PM, Monday - Friday