

**Ralston Public Schools
Monthly Health and Dental Insurance Premiums
2015-16**

Option #1

Plan is \$750 deductible per person with a deductible max of \$1500 per family. After deductible, services are covered at 80%. Out of pocket max is (in addition to the deductible) \$3,500 per person, max per family is \$7,000. After this, plan pays 100%. Dental covers 80% of maintenance and normal dental (fillings, x-rays, etc), and 50% of structural work (caps, crowns, dentures). Orthodontia is NOT covered.

	Employee Only	EE & Children	EE & Spouse	EE, Spouse & Children
Health w/Single Dental	22.48	45.82	69.14	134.62
Single Health & Dental w/Waiver	25.29	n/a	n/a	n/a
Special Classes:				
9 month/pay classified employees per pay period	209.80	385.20	453.23	647.47
10 month/pay classified employees per pay period	134.87	249.45	299.60	442.33
11 month/pay classified employees per pay period	73.57	138.38	173.89	274.49

Option #2

Dual Choice Option with Health Savings Account
Single policy deductible is \$3,100. Family deductible is \$6,200. After deductible is met, plan pays 100% District's cost of premium savings on this plan will be deposited into employee's Health Savings Account
Dental coverage is the same as under the \$750 deductible plan

	Employee Only	EE & Children	EE & Spouse	EE, Spouse & Children
Health w/Single Dental	19.12	38.83	58.57	113.93
Single Health & Dental w/Waiver	21.51	n/a	n/a	n/a
RPS deposit into Employee H.S.A. per pay period	80.51	148.16	165.54	215.79
Special Classes				
9 month/pay classified employees per pay period	175.16	320.41	376.8	537.74
10 month/pay classified employees per pay period	112.61	207.49	249.07	367.37
11 month/pay classified employees per pay period	61.42	115.1	144.57	227.97

Optional Dental (for all tiers)

Add children - 21.09
Add spouse - 27.30
Add family - \$46.06