

Worthington City Schools
Classified Staff
2021 Dental Insurance Premiums Per Month

DENTAL INSURANCE PREMIUMS						
FTE	Single			Family		
	Employee	Board	Total	Employee	Board	Total
Full Time	\$ 6.66	\$ 81.97	\$ 88.63	\$ 6.66	\$ 81.97	\$ 88.63
5 Hrs	\$ 35.35	\$ 53.28	\$ 88.63	\$ 35.35	\$ 53.28	\$ 88.63
4 Hrs	\$ 47.64	\$ 40.99	\$ 88.63	\$ 47.64	\$ 40.99	\$ 88.63
3 Hrs	\$ 57.89	\$ 30.74	\$ 88.63	\$ 57.89	\$ 30.74	\$ 88.63
2 Hrs	\$ 88.63	\$ -	\$ 88.63	\$ 88.63	\$ -	\$ 88.63
1 Hr	\$ 88.63	\$ -	\$ 88.63	\$ 88.63	\$ -	\$ 88.63

Example: If you are a 5.5 hour employee, premiums are based on 5 Hours