Job Share Teachers
2024 Contributions Per Pay

MEDICAL

21 PAY PLAN	Select	Choice
Job Share Percentage	**50%**	**50%**
Employee Only	$299.39	$309.47
Employee + Child	$596.99	$617.07
Employee + Spouse (Grandfathered Rates)**	$596.99	$617.07
Employee + Spouse*	$703.38	$723.46
Employee + Children	$880.82	$910.46
Family (Employee + Spouse & Child(ren)) (Grandfathered)**	$880.82	$910.46
Family (Employee + Spouse & Child(ren))*	$1,037.79	$1,067.43

26 PAY PLAN	Select	Choice
Job Share Percentage	**50%**	**50%**
Employee Only	$241.82	$249.96
Employee + Child	$482.18	$498.40
Employee + Spouse (Grandfathered Rates)**	$482.18	$498.40
Employee + Spouse*	$568.11	$584.33
Employee + Children	$711.44	$735.38
Family (Employee + Spouse & Child(ren)) (Grandfathered)**	$711.44	$735.38
Family (Employee + Spouse & Child(ren))*	$838.22	$862.16

*CEA bargaining unit members or Administrators who add their spouse after May 31, 2009 will pay a higher contribution rate to include their spouse for medical coverage.

**CEA bargaining unit members or Administrators as of May 31, 2009, so long as they are continuously employed by the Board, shall be entitled to enroll a spouse for primary coverage at these rates if a qualifying event occurs. CEA bargaining unit members or Administrators as of May 31, 2009, who have continuously covered their spouse on their medical coverage since May 31, 2009, shall be allowed to continue spousal coverage at these lower rates during their continuous employment with the district.

DENTAL 50%

	21 Pay Plan	26 Pay Plan
Employee Only	$3.98	$3.22
Employee + Child	$3.98	$3.22

VISION BASE 50%

	21 Pay Plan	26 Pay Plan
Employee Only	$2.78	$2.24
Employee + 1	$5.55	$4.49
Employee + 2+	$8.95	$7.23

LIFE INSURANCE

	21 Pay Plan	26 Pay Plan
Basic Life $50,000 (District Paid)	$0.00	$0.00
Supplemental Life $50,000	$4.51	$3.65

VISION BUY-UP

	21 Pay Plan	26 Pay Plan
Employee Only	$2.78	$2.24
Employee + 1	$5.55	$4.49
Employee + 2+	$8.95	$7.23