

Santa Clara Unified School District			
JANUARY 1, 2022 - DECEMBER 31, 2022			
CLASSIFIED MONTHLY RATE SCHEDULE			
DENTAL AND VISION			
Employee Status	Dental	Vision - VSP	Life Insurance
District Monthly Rate			
53.33% - 4.0 Hrs	*\$83.30	\$9.06	\$1.47
60.00% - 4.5 Hrs	*90.00	10.20	1.65
66.67% - 5.0 Hrs	*96.70	11.34	1.83
73.33% - 5.5 Hrs	*103.30	12.47	2.02
80.00% - 6.0 Hrs	*110.00	13.60	2.20
Full-Time - Composite	\$130.00	\$17.00	\$2.75
Employee Monthly Rate			
Part-Time			
4.0 Hours - 53.33% FTE			
Single	46.70	7.94	1.29
Two-Party	46.70	7.94	1.29
Family	46.70	7.94	1.29
4.5 Hours - 60.00% FTE			
Single	40.00	6.80	1.10
Two-Party	40.00	6.80	1.10
Family	40.00	6.80	1.10
5.0 Hours - 66.67% FTE			
Single	33.30	5.66	0.92
Two-Party	33.30	5.66	0.92
Family	33.30	5.66	0.92
5.5 Hours - 73.33% FTE			
Single	26.70	4.53	0.74
Two-Party	26.70	4.53	0.74
Family	26.70	4.53	0.74
6.0 Hours - 80.00% FTE			
Single	20.00	3.40	0.55
Two-Party	20.00	3.40	0.55
Family	20.00	3.40	0.55
Full-Time - Composite	\$0.00	\$0.00	\$0.00
Less than 12 month employees, summer-extra rules apply.			
For COBRA add 2% fee to the premium rates.			
Contact : Kathy Wallace 408-423-2129 or Christina Contreras 408-423-2133			