

Santa Clara Unified School District			
JANUARY 1, 2022 - DECEMBER 31, 2022			
MANAGEMENT MONTHLY RATE SCHEDULE			
DENTAL , VISION AND LIFE			
Employee Status	Dental	Vision - VSP	Life Insurance
District Monthly Rate			
50.00%	*\$80.00	\$8.50	\$13.75
60.00%	*90.00	10.20	13.75
80.00%	*110.00	13.60	13.75
Full-Time - Composite	\$130.00	\$17.00	\$13.75
Employee Monthly Rate			
Part-Time			
50% FTE			
Single	50.00	8.50	6.87
Two-Party	50.00	8.50	6.87
Family	50.00	8.50	6.87
60% FTE			
Single	40.00	6.80	n/a
Two-Party	40.00	6.80	n/a
Family	40.00	6.80	n/a
80% FTE			
Single	20.00	3.40	n/a
Two-Party	20.00	3.40	n/a
Family	20.00	3.40	n/a
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			