

Nordonia Hills City Schools
Insurance Rate Schedule
Effective 7/1/2024 - 6/30/2025

Superintendent & Treasurer - Monthly Premium Amounts

	Employee Paid	Board Paid		TOTAL
Single- Medical	\$264.64	\$793.88		\$1,058.52
Single- Dental	\$26.82	\$80.46		\$107.28
Single- Vision	\$5.24	\$15.68		\$20.92
Total	\$296.70	\$890.02		\$1,186.72
Family- Medical	\$642.78	\$1,928.32		\$2,571.10
Family- Dental	\$66.12	\$198.38		\$264.50
Family- Vision	\$13.06	\$39.14		\$52.20
Total	\$721.96	\$2,165.84		\$2,887.80

Stark County Consortium rates subject to change every July 1st

revised 6/24