

Nordonia Hills City Schools
Insurance Rate Schedule
Effective 7/1/2023 - 6/30/2024

Superintendent & Treasurer - Monthly Premium Amounts

	Employee Paid	Board Paid		TOTAL
Single- Medical	\$248.82	\$746.45		\$995.27
Single- Dental	\$25.84	\$77.53		\$103.37
Single- Vision	\$5.24	\$15.74		\$20.98
Total	\$279.90	\$839.72		\$1,119.62
Family- Medical	\$604.38	\$1,813.10		\$2,417.48
Family- Dental	\$63.70	\$191.13		\$254.83
Family- Vision	\$13.08	\$39.25		\$52.33
Total	\$681.16	\$2,043.48		\$2,724.64

Stark County Consortium rates subject to change every July 1st

revised 6/23