

# Weslaco Independent School District

Risk Management Department  
 319 West Fourth Street / P. O. Box 266  
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## HEALTH AND DENTAL INSURANCE 2023-2024

### Blue Cross Blue Shield

HEALTH	Base (70/30)			High (80/20)			State (90/10)		
	Employee Deduction	Employer Deduction	Total on Billing	Employee Deduction	Employer Deduction	Total on Billing	Employee Deduction	Employer Deduction	Total on Billing
Employee Only	\$ 28.76	\$ 640.20	\$ 668.96	\$ 134.56	\$ 640.20	\$ 774.76	\$ 198.96	\$ 640.20	\$ 839.16
Employee & Child	\$ 232.30	\$ 640.20	\$ 872.50	\$ 336.96	\$ 640.20	\$ 977.16	\$ 463.46	\$ 640.20	\$ 1,103.66
Employee & Children	\$ 426.66	\$ 640.20	\$ 1,066.86	\$ 636.00	\$ 640.20	\$ 1,276.20	\$ 877.46	\$ 640.20	\$ 1,517.66
Employee & Spouse	\$ 514.00	\$ 640.20	\$ 1,154.20	\$ 755.56	\$ 640.20	\$ 1,395.76	\$ 1,008.56	\$ 640.20	\$ 1,648.76
Employee & Family	\$ 868.24	\$ 640.20	\$ 1,508.44	\$ 1,116.66	\$ 640.20	\$ 1,756.86	\$ 1,620.36	\$ 640.20	\$ 2,260.56

### Met-Life

DENTAL	Base			High		
	Employee Deduction	Employer Deduction	Total on Billing	Employee Deduction	Employer Deduction	Total on Billing
Employee Only	\$ -	\$ 10.48	\$ 10.48	\$ 21.72	\$ 10.48	\$ 32.20
Employee & Children	\$ 20.46	\$ 10.48	\$ 30.94	\$ 46.82	\$ 10.48	\$ 57.30
Employee & Spouse	\$ 20.46	\$ 10.48	\$ 30.94	\$ 46.82	\$ 10.48	\$ 57.30
Employee & Family	\$ 31.58	\$ 10.48	\$ 42.06	\$ 73.06	\$ 10.48	\$ 83.54