FORT WORTH INDEPENDENT SCHOOL DISTRICT
2008-2009 RATES

2008- 2009

Premiums Begin August 2008 Paycheck

DENTAL PLANS

United Concordia - Indemnity Plan*

	12 Checks	18 Checks	24 Checks
Employee Only	$35.51	$23.68	$17.76
Employee and Spouse	$71.46	$47.64	$35.73
Employee and Child(ren)	$79.29	$52.86	$39.65
Employee and Family	$115.09	$76.73	$57.55

***NOTE** **UNITED CONCORDIA PLAN YEAR IS SEPTEMBER THROUGH AUGUST.**
UNITED CONCORDIA DEDUCTIBLE YEAR AND MAXIMUMS ARE CALENDAR YEAR.