

# SPECIAL EDUCATION TRAINERS

Effective July 1, 2023 the costs to you on a MONTHLY basis  
for the Medical & Prescription benefit are:

<b>Medical/Prescription</b>			
Employee Cost Share is: 19% (Single Coverage)			
Employee Cost Share is: 28% (2-Person or Family Coverage)			
	<b>TOTAL COST</b>	<b>EMPLOYER COSTS</b>	<b>EMPLOYEE COSTS</b>
Single	\$ 1,182.83	\$ 958.07	\$ 224.76
Employee + 1	\$ 2,535.29	\$ 1,825.41	\$ 709.88
Family	\$ 3,283.31	\$ 2,363.95	\$ 919.36

Effective July 1, 2023 the costs to you on a MONTHLY basis  
for the Dental benefit are:

<b>Dental</b>			
Employee Cost Share is: 19% (Single Coverage)			
Employee Cost Share is: 33% (2-Person or Family Coverage)			
	<b>TOTAL COST</b>	<b>EMPLOYER COSTS</b>	<b>EMPLOYEE COSTS</b>
Single	\$ 55.37	\$ 44.85	\$ 10.52
Employee + 1	\$ 100.25	\$ 67.17	\$ 33.08
Family	\$ 160.59	\$ 107.59	\$ 53.00