SUPPORT STAFF

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

Medical/Prescription										
Employee Cost Share is: 16% (Single Coverage)										
Employee Cost Share is: 20% (2-Person or Family Coverage)										
	Т	OTAL COST	Е	MPLOYER COSTS	ΕN	IPLOYEE COSTS				
Single	\$	1,182.83	\$	993.55	\$	189.28				
Employee + 1	\$	2,535.29	\$	2,028.21	\$	507.08				
Family	\$	3,283.31	\$	2,626.63	\$	656.68				

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

Dental Employee Cost Share is: 16% (Single Coverage) Employee Cost Share is: 20% (2-Person or Family Coverage)										
		TOTAL COST	ı	EMPLOYER COSTS	El	MPLOYEE COSTS				
Single	\$	55.37	\$	46.49	\$	8.88				
Employee + 1	\$	100.25	\$	80.17	\$	20.08				
Family	\$	160.59	\$	128.47	\$	32.12				