

Municipalities, Colleges, Schools Insurance Group (MCSIG)

RETIREE DENTAL & VISION

January - December 2024 RATES

DENTAL PLAN	DEPENDENTS	ANNUAL PREMIUM	ANNUAL DISTRICT CONTRIBUTION	EMPLOYEE COST (12 MONTH)
Low \$1000	Employee Only	\$ 588.00	\$ -	\$ 49.00
	Employee + 1	\$ 1,080.00	\$ -	\$ 90.00
	Family	\$ 1,740.00	\$ -	\$ 145.00
Med \$1500	Employee Only	\$ 636.00	\$ -	\$ 53.00
	Employee + 1	\$ 1,176.00	\$ -	\$ 98.00
	Family	\$ 1,908.00	\$ -	\$ 159.00
High \$2000	Employee Only	\$ 708.00	\$ -	\$ 59.00
	Employee + 1	\$ 1,284.00	\$ -	\$ 107.00
	Family	\$ 2,112.00	\$ -	\$ 176.00
Grand \$2500	Employee Only	\$ 780.00	\$ -	\$ 65.00
	Employee + 1	\$ 1,416.00	\$ -	\$ 118.00
	Family	\$ 2,328.00	\$ -	\$ 194.00
VISION PLAN	DEPENDENTS	ANNUAL PREMIUM	ANNUAL DISTRICT CONTRIBUTION	EMPLOYEE COST (12 MONTH)
C	Employee Only	\$ 144.00	\$ -	\$ 12.00
	Employee + 1	\$ 240.00	\$ -	\$ 20.00
	Family	\$ 420.00	\$ -	\$ 35.00