TECH & SUPPORT STAFF

Effective July 1, 2024 the costs to you on a MONTHLY basis for the Medical & Prescription benefit are:

| Medical/Prescription Employee Cost Share is: 16% | | | | | | | | | | |
|--|----|------------|----|----------------|----|----------------|--|--|--|--|
| | | TOTAL COST | | EMPLOYER COSTS | | EMPLOYEE COSTS | | | | |
| Single | \$ | 1,204.19 | \$ | 1,011.51 | \$ | 192.68 | | | | |
| Employee + 1 | \$ | 2,581.07 | \$ | 2,168.07 | \$ | 413.00 | | | | |
| Family | \$ | 3,342.60 | \$ | 2,807.76 | \$ | 534.84 | | | | |

Effective July 1, 2024 the costs to you on a MONTHLY basis for the Dental benefit are:

| Dental Employee Cost Share is: 16% | | | | | | | | | |
|------------------------------------|----|------------|----|----------------|----|----------------|--|--|--|
| | | TOTAL COST | | EMPLOYER COSTS | | EMPLOYEE COSTS | | | |
| Single | \$ | 57.58 | \$ | 48.34 | \$ | 9.24 | | | |
| Employee + 1 | \$ | 104.26 | \$ | 87.58 | \$ | 16.68 | | | |
| Family | \$ | 167.01 | \$ | 140.29 | \$ | 26.72 | | | |