

10 MONTH SECRETARIES:
THE RATES BELOW DO NOT INCLUDE ADJUSTMENTS
FOR SUMMERTIME INSURANCE BENEFITS

SECRETARIES

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

Medical/Prescription Employee Cost Share is: 24.5%			
	TOTAL COST	EMPLOYER COSTS	EMPLOYEE COSTS
Single	\$ 1,204.19	\$ 909.15	\$ 295.04
Employee + 1	\$ 2,581.07	\$ 1,948.71	\$ 632.36
Family	\$ 3,342.60	\$ 2,523.64	\$ 818.96

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

Dental Employee Cost Share is: 24.5%			
	TOTAL COST	EMPLOYER COSTS	EMPLOYEE COSTS
Single	\$ 57.58	\$ 43.46	\$ 14.12
Employee + 1	\$ 104.26	\$ 78.70	\$ 25.56
Family	\$ 167.01	\$ 126.09	\$ 40.92