NON-CERTS 07

Effective July 1, 2025 the costs to you on a MONTHLY basis for the Medical & Prescription benefit are:

Medical/Prescription Employee Cost Share is: 17%			
	TOTAL COST	EMPLOYER COSTS	EMPLOYEE COSTS
Single	$ 1,334.89	$ 1,107.93	$ 226.96
Employee + 1	$ 2,861.22	$ 2,374.78	$ 486.44
Family	$ 3,705.40	$ 3,075.48	$ 629.92

Effective July 1, 2025 the costs to you on a MONTHLY basis for the Dental benefit are:

Dental Employee Cost Share is: 17%			
	TOTAL COST	EMPLOYER COSTS	EMPLOYEE COSTS
Single	$ 59.31	$ 49.23	$ 10.08
Employee + 1	$ 107.39	$ 89.11	$ 18.28
Family	$ 172.02	$ 142.78	$ 29.24

Effective July 1, 2025 the costs to you on a MONTHLY basis for the Medical & Prescription benefit are:

NON-CERTS 07D

Medical/Prescription Employee Cost Share is: 19%			
	TOTAL COST	EMPLOYER COSTS	EMPLOYEE COSTS
Single	$ 1,334.89	$ 1,081.25	$ 253.64
Employee + 1	$ 2,861.22	$ 2,317.58	$ 543.64
Family	$ 3,705.40	$ 3,001.36	$ 704.04

Effective July 1, 2025 the costs to you on a MONTHLY basis for the Dental benefit are:

Dental Employee Cost Share is: 19%			
	TOTAL COST	EMPLOYER COSTS	EMPLOYEE COSTS
Single	$ 59.31	$ 48.03	$ 11.28
Employee + 1	$ 107.39	$ 86.99	$ 20.40
Family	$ 172.02	$ 139.34	$ 32.68