

# SUPPORT STAFF

Effective July 1, 2016 the costs to you on a monthly basis  
for each of the benefit components available are:

<b>Medical/Prescription</b>			
	<b>TOTAL COST</b>	<b>EMPLOYER COSTS</b>	<b>EMPLOYEE COSTS</b>
Single	\$ 808.98	\$ 687.62	\$ 121.36
Employee + 1	\$ 1,733.98	\$ 1,231.10	\$ 502.88
Family	\$ 2,245.58	\$ 1,594.34	\$ 651.24

<b>Dental</b>			
	<b>TOTAL COST</b>	<b>EMPLOYER COSTS</b>	<b>EMPLOYEE COSTS</b>
Single	\$ 42.78	\$ 36.34	\$ 6.44
Employee + 1	\$ 77.45	\$ 49.57	\$ 27.88
Family	\$ 124.07	\$ 79.39	\$ 44.68