TEACHERS

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

| Medical/Prescription | | | | | | | | | | |
|----------------------|----|------------|----|----------------|----|---------------|--|--|--|--|
| | | TOTAL COST | I | EMPLOYER COSTS | EN | APLOYEE COSTS | | | | |
| Single | \$ | 808.98 | \$ | 631.02 | \$ | 177.96 | | | | |
| Employee + 1 | \$ | 1,733.98 | \$ | 1,352.50 | \$ | 381.48 | | | | |
| Family | \$ | 2,245.58 | \$ | 1,751.54 | \$ | 494.04 | | | | |

| Dental | | | | | | | | | | |
|--------------|----|------------|----|----------------|----|----------------|--|--|--|--|
| | | TOTAL COST | | EMPLOYER COSTS | | EMPLOYEE COSTS | | | | |
| Single | \$ | 42.78 | \$ | 33.34 | \$ | 9.44 | | | | |
| Employee + 1 | \$ | 77.45 | \$ | 60.41 | \$ | 17.04 | | | | |
| Family | \$ | 124.07 | \$ | 96.75 | \$ | 27.32 | | | | |