

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

SECRETARIES

Effective July 1, 2017 the costs to you on a monthly basis
 for each of the benefit components available are:

REGULAR RATES

Medical/Prescription			
	TOTAL COST	EMPLOYER COSTS	EMPLOYEE COSTS
Single	\$ 846.97	\$ 677.57	\$ 169.40
Employee + 1	\$ 1,815.39	\$ 1,361.51	\$ 453.88
Family	\$ 2,351.01	\$ 1,763.25	\$ 587.76

Dental			
	TOTAL COST	EMPLOYER COSTS	EMPLOYEE COSTS
Single	\$ 45.56	\$ 36.44	\$ 9.12
Employee + 1	\$ 82.49	\$ 65.97	\$ 16.52
Family	\$ 132.13	\$ 105.69	\$ 26.44

DISCOUNTED RATES*

Medical/Prescription			
	TOTAL COST	EMPLOYER COSTS	EMPLOYEE COSTS
Single	\$ 846.97	\$ 677.57	\$ 169.40
Employee + 1	\$ 1,815.39	\$ 1,452.31	\$ 363.08
Family	\$ 2,351.01	\$ 1,880.81	\$ 470.20

***SPOUSAL AFFIDAVIT REQUIRED TO RECEIVE DISCOUNTED RATES.**