

PARAPROFESSIONALS:  
THE RATES BELOW DO NOT INCLUDE ADJUSTMENTS  
FOR SUMMERTIME INSURANCE BENEFITS

## PARAPROFESSIONALS

Effective July 1, 2018 the costs to you on a monthly basis  
for the Medical & Prescription benefit are:

| <b>Medical/Prescription</b>                                      |                   |                       |                       |
|--|-------------------|-----------------------|-----------------------|
| <b>Employee Cost Share is: 15% (Single Coverage)</b>             |                   |                       |                       |
| <b>Employee Cost Share is: 25% (2-Person or Family Coverage)</b> |                   |                       |                       |
|  | <b>TOTAL COST</b> | <b>EMPLOYER COSTS</b> | <b>EMPLOYEE COSTS</b> |
| Single   | \$ 835.67         | \$ 710.31             | \$ 125.36             |
| Employee + 1   | \$ 1,791.19       | \$ 1,343.39           | \$ 447.80             |
| Family   | \$ 2,319.67       | \$ 1,739.75           | \$ 579.92             |

Effective July 1, 2018 the costs to you on a monthly basis  
for the Dental benefit are:

| <b>Dental</b>  |                   |                       |                       |
|--|-------------------|-----------------------|-----------------------|
| <b>Employee Cost Share is: 15% (Single Coverage)</b>             |                   |                       |                       |
| <b>Employee Cost Share is: 25% (2-Person or Family Coverage)</b> |                   |                       |                       |
|  | <b>TOTAL COST</b> | <b>EMPLOYER COSTS</b> | <b>EMPLOYEE COSTS</b> |
| Single   | \$ 48.52          | \$ 41.24              | \$ 7.28               |
| Employee + 1   | \$ 87.85          | \$ 65.89              | \$ 21.96              |
| Family   | \$ 140.72         | \$ 105.56             | \$ 35.16              |