

# SUPPORT STAFF

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: 16% (Single Coverage)</b>			
<b>Employee Cost Share is: 20% (2-Person or Family Coverage)</b>			
	<b>TOTAL COST</b>	<b>EMPLOYER COSTS</b>	<b>EMPLOYEE COSTS</b>
Single	\$ 835.67	\$ 701.95	\$ 133.72
Employee + 1	\$ 1,791.19	\$ 1,432.95	\$ 358.24
Family	\$ 2,319.67	\$ 1,855.71	\$ 463.96

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: 16% (Single Coverage)</b>			
<b>Employee Cost Share is: 20% (2-Person or Family Coverage)</b>			
	<b>TOTAL COST</b>	<b>EMPLOYER COSTS</b>	<b>EMPLOYEE COSTS</b>
Single	\$ 48.52	\$ 40.76	\$ 7.76
Employee + 1	\$ 87.85	\$ 70.29	\$ 17.56
Family	\$ 140.72	\$ 112.56	\$ 28.16