

MONTHLY HEALTH RATES FOR CALENDAR YEAR 2018

TO CALCULATE YOUR RATE: MULTIPLY THE FULL MONTHLY PREMIUM (BELOW), BY YOUR CONTRIBUTION PERCENTAGE, AS FOUND IN YOUR CONTRACT.

YOUR CONTRACT CAN BE FOUND ON THE DISTRICT'S WEBSITE

UNDER "BOE/BARGAINING AGREEMENTS".

	FULL MONTHLY PREMIUM
<u>HEALTH</u>	
INDIVIDUAL	1014.98
FAMILY	2348.15
<u>VISION/EXCESS</u>	
INDIVIDUAL	15.95
FAMILY	39.27
<u>DENTAL</u>	
INDIVIDUAL	63.33
FAMILY	174.00