

**2014-15
Employee Dental Insurance Costs**

	Annual										
	Premium										
Single	\$ 457.32										
Family	\$ 1,257.48										
DENTAL:	ADMIN	CLERICAL	CUSTODIAL	FOOD SERVICE	SUPPORT STAFF	TEACHERS	TECHNICIANS	TRANSPC			
Single Yearly Benefit	\$ 920.00	\$400.00	\$400.00	\$350.00	\$375.00	\$378.00	\$400.00	\$275.00			
Family Yearly Benefit	\$ 920.00	\$400.00	\$400.00	\$350.00	\$375.00	\$378.00	\$400.00	\$910.00			
	24 Pay	24 Pay	24 Pay	19 Pay	24 Pay	19 Pay	24 Pay	18 Pay	24 Pay	24 Pay	19 Pay
Single	\$ -	\$ 2.39	\$ 2.39	\$ 5.65	\$ 4.47	\$ 4.33	\$ 3.43	\$ 4.41	\$ 3.31	\$ 2.39	\$ 9.60
Family	\$ 14.06	\$ 35.73	\$ 35.73	\$ 47.76	\$ 37.81	\$ 46.45	\$ 36.77	\$ 48.86	\$ 36.65	\$ 35.73	\$ 18.29
Transportation - Increased family district contribution only if not taking health insurance											

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PORTATION
5.00
0.00
24 Pay
\$ 7.60
\$ 14.48