E	MONTHLY MEDICAL AND DENTAL RATES EFFECTIVE JULY 1, 2022 THROUGH JUNE 30, 2023 **Subject to Change Pending Negotiations**			Hired & Enrolled Prior to 7-1-11		Hired & Enrolled After 7-1-11	
		LERC-MMO	COBRA	Monthly Rate	No completion of Wellness	Monthly Rate	No completion of Wellness
All Full Time Employees	EFFECTIVE 7/1/2022			15%	20%	20%	25%
	Premium Plan						
	Single	\$828.57	\$845.14	\$124.29	\$165.71	\$165.71	\$207.14
	Family	\$2,071.42	\$2,112.85	\$310.71	\$414.28	\$414.28	\$517.86
ll Fu Emp	Minimum Value Plan					L	
۹ –	Single	\$604.71	\$616.80	\$0.00		\$0.00	
	Family	\$1,511.78	\$1,542.02	\$0.00		\$0.00	
~	EFFECTIVE 7/1/2022			50%	55%	50%	55%
ne SE	Premium Plan						
ii -	Single	\$828.57	\$845.14	\$414.29	\$455.71	\$414.29	\$455.71
Part es ((	Family	\$2,071.42	\$2,112.85	\$1035.71	\$1,139.28	\$1035.71	\$1,139.28
Eligible Part-Time Employees (OAPSE)	Mimimum Value Plan					L	
mp mp	Single	\$604.71	\$616.80	\$302.36	\$332.59	\$302.36	332.59
- ω	Family	\$1,511.78	\$1,542.02	\$755.89	\$831.48	\$755.89	\$831.48
a	EFFECTIVE 7/1/2022						
Delta	Dental - PPO						
s –	Single	\$36.24	\$36.96	\$12.08	\$12.08	\$12.08	\$12.08
ployees Dental	Family	\$98.99	\$100.97	\$33.00	\$33.00	\$33.00	\$33.00
nple Dě	Dental EPO					L	
All Employees Dental	Single	\$20.58	\$21.01	\$6.86	\$6.86	\$6.86	\$6.86
	Family	\$56.00	\$57.12	\$18.67	\$18.67	\$18.67	\$18.67

Cannot enroll in this option. This shows the 5% increased monthly rate if the wellness program is not completed per negotiated agreement.