2024 Dental/Vision Insurance

Coverage Information with no Corporation Contribution

 Vision Information

 Premium Cost $76.56 (single)

 Employee Cost $ 3.19 per pay

 Premium Cost $183.60 (family)

 Employee Cost $ 7.65 per pay

Dental Information

Premium Cost $289.68 (single)

Employee Cost $ 11.14 per pay

Premium Cost $900.84 (family)

Employee Cost $ 34.64 per pay

**DEDUCTIONS TAKEN 24 TIMES - New premium deductions begin January 5, 2024**