

LOCAL 3429
Paraprofessionals
Fiscal Year 2024-2025

PREMIUM COST SHARES
Effective 07/01/2023-06/30/24
Effective School Year 2023-2024

PAYROLL DEDUCTIONS
DEDUCTION EACH PAY PERIOD
21 PAY PERIODS

COVERAGE	SINGLE	EMPLOYEE & ONE	FAMILY
Century Preferred PPO	216.80	440.08	568.17
Blue Care	192.73	391.24	505.12
Comp Mix	153.44	311.46	402.13
Plan HSA/HRA	58.26	118.26	152.70
Dental, ABCD	1.53	3.98	5.54