

**2008-2009 Health and Dental Premiums  
In effect 7/1/08 - 6/30/09**

<b>REGULAR EMPLOYEES</b>	<b>Monthly District Contribution</b>	<b>Monthly Employee Contribution</b>	<b>Total Premium</b>
		<small>(Monthly premiums are deducted Pre-Tax unless employee opts-out)</small>	
<b><u>GREAT WEST - PPO STANDARD</u></b>			
Employee only	\$404.36	\$0.00	\$404.36
Employee + 1 dependent *	\$424.36	\$384.36	\$808.72
Employee + children	\$424.36	\$505.67	\$930.03
Employee + family	\$424.36	\$910.03	\$1,334.39
<b><u>GREAT WEST - PPO PREMIUM</u></b>			
Employee only	\$404.36	\$90.48	\$494.84
Employee + 1 dependent *	\$424.36	\$565.33	\$989.69
Employee + children	\$424.36	\$713.79	\$1,138.15
Employee + family	\$424.36	\$1,208.63	\$1,632.99
<b><u>GREAT WEST - PPO BASIC</u></b>			
Employee only	\$310.64	\$0.00	\$310.64
Employee + 1 dependent *	\$424.36	\$196.92	\$621.28
Employee + children	\$424.36	\$290.11	\$714.47
Employee + family	\$424.36	\$600.75	\$1,025.11
<b><u>KAISER PERMANENTE PLAN 220</u></b>			
Employee only	\$353.85	\$0.00	\$353.85
Employee + 1 dependent *	\$424.36	\$278.74	\$703.10
Employee + children	\$424.36	\$383.52	\$807.88
Employee + family	\$424.36	\$732.77	\$1,157.13
<b><u>DELTA DENTAL</u></b>			
Employee only	\$35.94	\$0.00	\$35.94
Employee + 1 dependent *	\$35.94	\$27.46	\$63.40
Employee + children	\$35.94	\$32.84	\$68.78
Employee + family	\$35.94	\$60.04	\$95.98

\*For Employee + 1 dependent, dependent can be spouse, domestic partner, or unmarried dependent child (up to age 25).