

**2023-24 New Lebanon CSD Health and Dental Rates**

**ADMIN PPO 815**

	Monthly Cost	Annual Cost	85% District Annual Cost	15.00% Emp Annual Cost
<b>Individual</b>	\$857.55	\$10,290.60	\$8,747.01	\$1,543.59
<b>2 Person</b>	\$2,210.75	\$26,529.00	\$22,549.65	\$3,979.35
<b>Family</b>	\$2,335.34	\$28,024.08	\$23,820.47	\$4,203.61
<b>Dental</b>				
<b>Individual</b>	\$55.19	\$662.28	\$562.94	\$99.34
<b>Family</b>	\$129.96	\$1,559.52	\$1,325.59	\$233.93

**NLTA PPO 815**

	Monthly Cost	Annual Cost	85% District Annual Cost	15.00% Emp Annual Cost
<b>PRE 2004</b>				
<b>Individual</b>	\$853.29	\$10,239.48	\$8,703.56	\$1,535.92
<b>2 Person</b>	\$2,200.65	\$26,407.80	\$22,446.63	\$3,961.17
<b>Family</b>	\$2,324.95	\$27,899.40	\$23,714.49	\$4,184.91
<b>POST 2004</b>				
<b>Individual</b>	\$834.47	\$10,013.64	\$8,511.59	\$1,502.05
<b>2 Person</b>	\$2,155.96	\$25,871.52	\$21,990.79	\$3,880.73
<b>Family</b>	\$2,279.06	\$27,348.72	\$23,246.41	\$4,102.31
<b>Individual</b>	\$55.19	\$662.28	\$562.94	\$99.34
<b>Family</b>	\$129.96	\$1,559.52	\$1,325.59	\$233.93

**CSEA**

**PPO 813**

	Monthly Cost	Annual Cost	87.5% District Annual Cost	12.5% Emp Annual Cost
<b>Individual</b>	\$910.02	\$10,920.24	\$9,555.21	\$1,365.03
<b>2 Person</b>	\$2,351.12	\$28,213.44	\$24,686.76	\$3,526.68
<b>Family</b>	\$2,485.05	\$29,820.60	\$26,093.03	\$3,727.58

**PPO 815**

	Monthly Cost	Annual Cost	87.5% District Annual Cost	12.5% Emp Annual Cost
<b>Individual</b>	\$857.55	\$10,290.60	\$9,004.28	\$1,286.33
<b>2 Person</b>	\$2,210.75	\$26,529.00	\$23,212.88	\$3,316.13
<b>Family</b>	\$2,335.34	\$28,024.08	\$24,521.07	\$3,503.01
<b>Dental</b>				
<b>Individual</b>	\$55.19	\$662.28	\$579.50	\$82.79
<b>Family</b>	\$129.96	\$1,559.52	\$1,364.58	\$194.94