

<b>BLUE CROSS PREMIUMS OPTION 1 350/950</b>	<b>Draft</b>	<b>BLUE CROSS PREMIUMS OPTION 2 1000/2000</b>	<b>Draft</b>
\$869.10	Total Monthly Premiums	\$825.50	Total Monthly Premiums
\$726.90	District Share	\$726.90	District Share
\$142.20	Employee Share	\$98.60	Employee Share
\$30.35	Dental Optional (Employee)	\$30.35	Dental Optional (Employee)
<b>\$172.55</b>	Add out of pocket	<b>\$128.95</b>	
	\$43.60		
<b>EMPL. SPOUSE</b>		<b>EMPL. SPOUSE</b>	
\$1,905.65	Total Monthly Premiums	\$1,809.85	Total Monthly Premiums
\$726.90	District Share	\$726.90	District Share
\$1,178.75	Employee Share	\$1,082.95	Employee Share
\$65.70	Dental Optional (Employee)	\$65.70	Dental Optional (Employee)
<b>\$1,244.45</b>	\$95.80	<b>\$1,148.65</b>	
<b>EMPL. DEPENDENT</b>		<b>EMPL. DEPENDENT</b>	
\$1,337.20	Total Monthly Premiums	\$1,270.10	Total Monthly Premiums
\$726.90	District Share	\$726.90	District Share
\$610.30	Employee Share	\$543.20	Employee Share
\$58.35	Dental Optional (Employee)	\$58.35	Dental Optional (Employee)
<b>\$668.65</b>	\$67.10	<b>\$601.55</b>	
<b>EMP. DEPS</b>		<b>EMP. DEPS</b>	
\$1,560.50	Total Monthly Premiums	\$1,482.50	Total Monthly Premiums
\$726.90	District Share	\$726.90	District Share
\$833.60	Employee Share	\$755.60	Employee Share
\$86.75	Dental Optional (Employee)	\$86.75	Dental Optional (Employee)
<b>\$920.35</b>	\$78.00	<b>\$842.35</b>	
<b>FAMILY</b>		<b>FAMILY</b>	
\$2,216.00	Total Monthly Premiums	\$2,104.85	Total Monthly Premiums
\$726.90	District Share	\$726.90	District Share
\$1,489.10	Employee Share	\$1,377.95	Employee Share
\$116.35	Dental Optional (Employee)	\$116.35	Dental Optional (Employee)
<b>\$1,605.45</b>	\$111.15	<b>\$1,494.30</b>	