Voluntary Dental Insurance						
OPEN ENROLLMENT:	*August 2023*					
EFFECTIVE DATE:	09	09/01/23 - 8/31/2024				
Coverage Plan	FY20 renewal monthly rates		PER PAY deduction (24): ↓			
Employee (only)	\$	32.14	\$		16.07	
Employee + Spouse	\$	78.14	\$		39.07	
Employee + Children	\$	88.84	\$		44.42	
Family	\$	115.00	\$		57.50	
Contact the District office <b>by noon, August 31st</b> if you wish to						
enroll, cancel or make any changes to your existing coverage plan.						