



**Dental Blue Program 2     7/1/2013 – 6/30/2014**  
**BlueCross BlueShield Dental with Orthodontia # 2329848**  
**24 Pay Schedule – Year Round Employees**

<b>Level I – 50% Employer Contribution     1<sup>st</sup> year of employment.</b>			
<b>IF you work 20-28 hrs/week, C.E.S. will continue to pay 50% of premium each year. If you work 28+ hrs/week, C.E.S. will start paying 60% of premium the month following your first anniversary.</b>			
	<b>Single</b>	<b>Two-person</b>	<b>Family</b>
Monthly premium:	40.38	86.00	120.29
C.E.S. pays:	20.20	43.00	60.15
Employee pays:	20.18	43.00	60.14
<b>Per pay period cost:</b>	<b>10.09</b>	<b>21.50</b>	<b>30.07</b>

<b>Level II – 60% Employer Contribution     2<sup>nd</sup> year of employment.</b>			
<b>The month following your second anniversary, C.E.S. will start paying 65% of premium (employees working 28+hrs/week)</b>			
	<b>Single</b>	<b>Two-person</b>	<b>Family</b>
Monthly premium:	40.38	86.00	120.29
C.E.S. pays:	24.24	51.60	72.17
Employee pays:	16.14	34.40	48.12
<b>Per pay period cost:</b>	<b>8.07</b>	<b>17.20</b>	<b>24.06</b>

<b>Level III – 65% Employer Contribution     3<sup>rd</sup> – 5<sup>th</sup> year of employment.</b>			
<b>The month following your fifth anniversary, C.E.S will start paying 75% of premium (employees working 28+hrs/week)</b>			
	<b>Single</b>	<b>Two-person</b>	<b>Family</b>
Monthly premium:	40.38	86.00	120.29
C.E.S. pays:	26.26	55.90	78.19
Employee pays:	14.12	30.10	42.10
<b>Per pay period cost:</b>	<b>7.06</b>	<b>15.05</b>	<b>21.05</b>

<b>Level IV – 75% Employer Contribution     5 + years of employment.</b>			
<b>(Employees working 28+hrs/week)</b>			
	<b>Single</b>	<b>Two-person</b>	<b>Family</b>
Monthly premium:	40.38	86.00	120.29
C.E.S. pays:	30.30	64.50	90.23
Employee pays:	10.08	21.50	30.06
<b>Per pay period cost:</b>	<b>5.04</b>	<b>10.75</b>	<b>15.03</b>