

LOCAL 825-Fire

FY 2023-2024

Premium Cost Shares
Effective 07/01/2023-06/30/2024PAYROLL DEDUCTIONS
DEDUCTION EACH PAY PERIOD

COVERAGE	Single	2 Person	Family
Century Preferred PPO	130.10	264.10	340.90
High Deductible H.S.A.	37.52	76.16	98.34
Dental, ABCD	0.94	2.44	3.40
