

**Non Union
2024 Employee Contributions - Per Paycheck
Full Time and Part Time Employees working 20 or More Hours Per Week**

Medical	Employee	Employee + 1	Family
Crouse Choice Plan	\$44.00	\$88.00	\$160.00
Medical Opt - Out Benefit	\$23.00	\$23.00	\$23.00
Dental	Employee	Employee + 1	Family
Crouse Preventative Dental Plan	\$8.46	\$17.61	\$29.41
Crouse Comprehensive Dental Plan	\$16.75	\$36.19	\$62.77
Dental Opt - Out Benefit	\$5.00	\$5.00	\$5.00
Vision	Employee	Employee + 1	Family
Davis Vision Plan	\$5.00	\$7.00	\$10.00

Per paycheck; there are 26 pay periods annually on a pretax basis