

2024 ILLINOIS BARGAINING MEDICAL / DENTAL / VISION PREMIUM SCHEDULE

LINECO

ILLINOIS BARGAINING	TOTAL				Deduction Per	
	MONTHLY	EMPLOYEE	EMPLOYEE	COBRA -	Pay Check	
	PREMIUM	E PAYS	R PAYS	LINECO	(24 pp)	
Active Employees	no change to %					
Employee Only	\$ 1,640.82	\$ 246.12	15.0%	\$ 1,394.70		\$123.06
Employee + Family	\$ 1,640.82	\$ 410.21	25.0%	\$ 1,230.62		\$205.10