

NORTH KANSAS CITY SCHOOLS MONTHLY BENEFITS COST
BENEFIT PLAN YEAR JULY 1, 2023, THROUGH JUNE 30, 2026

Ameritas Dental (Contracted through 7/1/2026)	Total Monthly Cost	District Monthly Benefit	Employee Monthly Cost	Monthly Cost Per FSP EE
Employee	\$23.60	\$23.60	\$0.00	n/a
Employee + Spouse	\$48.22	\$23.60	\$24.62	n/a
Employee + Child(ren)	\$68.76	\$23.60	\$45.16	n/a
Family	\$91.30	\$23.60	\$67.70	n/a
Family Split Premium**	\$91.30	\$47.20	\$44.10	\$22.06