

Rates Effective 1/1/26 for Certificated Employees

8.0% MEDICAL, 0% DENTAL

Health Insurance Premiums Per Month		
	MDHP	
	Single	Family
Employee Share	\$ 168.38	\$ 417.36
Board Share	\$ 764.32	\$ 1,894.46
Total Cost	\$ 932.70	\$ 2,311.82

Health Insurance Premiums Per Month		
	HDHP	
	Single	Family
Employee Share	\$ 139.30	\$ 346.94
Board Share	\$ 690.02	\$ 1,709.58
Total Cost	\$ 829.32	\$ 2,056.52

The Board shall contribute \$625.00 (Single) or \$1250.00 (Family) annually to an employee's Health Savings Account (HSA) if he/she is enrolled in the HDHP plan.

Dental Insurance Per Month			
	Single	Family	Dental Only**
Employee Share	\$ 24.90	\$ 24.90	\$ 102.64
Board Share	\$ 77.74	\$ 77.74	\$ -
Total Cost	\$ 102.64	\$ 102.64	\$ 102.64

Cash-in-Lieu of Insurance - Board Paid: \$ 2,500.00

Payable the first pay in December of each calendar year.

****Employee is eligible for Cash-in-Lieu if only enrolled in Dental and EE pays 100% of monthly premium.**

Vision Insurance Per Month		
100% Employee Paid		
Employee Only	\$ 6.78	
EE+Spouse	\$ 12.90	
EE+ Child(ren)	\$ 13.56	
EE+ Family	\$ 19.94	

Board-Paid Life Insurance Premiums Per Month		
	Full Time \$45,000	Part Time \$20,000
Employee Share	\$ -	\$ -
Board Share	\$ 4.28	\$ 1.90
Total Cost	\$ 4.28	\$ 1.90