### **COMMUNITY EDUCATION MANAGERS**



Insurance costs for plan year July 2024 through June 2025

- \* Medical insurance begins on your first day of eligible employment; and all other insurance coverage begins the first day of the following month.
- \* Your costs are paid through payroll deduction from October through May

## HealthPartners open access deductible medical plan with HRA /VEBA account\*

\* HRA/VEBA plan administered by Medsurety

	Monthly	District's monthly contribution:		Your cost
Coverage	Premium	to premium cost	into your HRA/VEBA	per month
Single	872.88	799.96	50.00	72.92
Family	2,331.49	2,097.44	100.00	234.05

### The Standard Insurance Company

The district provides a long-term disability (LTD) insurance policy, and a \$100,000 term life insurance policy. You are taxed on the value of life insurance over \$50,000.

Voluntary - a	dditional life insurance policies:	Your cost per month
	\$10,000 policy	\$1.84
	\$25,000 policy	\$4.60
	\$50,000 policy	\$9.20

#### **Delta Dental Insurance**

Policy	Monthly Premium	District's cost per month	Your cost per month
1 Olicy	i icililalii	cost per month	per month
Single	\$42.50	\$42.50	\$0.00
Family	\$97.00	\$97.00	\$0.00

## Health Care Savings Plan (HCSP) through MN State Retirement \*

Both you and the district contribute 1% of your salary into your HCSP.

This is a tax free reimbursement account for health expenses after your employment ends.

# Matching Annuity Plan \*

If you enroll in a 403(b) or 457 account, you are eligible for a 2% matching contribution from the district after one fiscal year of employment.

<sup>\*</sup>refer to group contract for full details