



**Clerical/Office Support and Health Assistants**

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

Coverage	Monthly Premium	District's monthly contribution:		Your cost per month
		to premium cost	into your HRA/VEBA	
Single	872.88	826.13	50.00	<b>46.75</b>
Family	2,331.49	1,734.16	100.00	<b>597.33</b>

**The Standard Insurance Company**

The district provides a long-term disability (LTD) insurance policy, and a \$50,000 term life insurance policy.

Voluntary - additional 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
Single	\$42.50	\$40.00	\$2.50
Family	\$97.00	\$40.00	\$57.00

**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 1% matching contribution from the district after one full school year of employment.

\*refer to group contract for full details