

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	826.13	50.00	46.75
Family	2,331.49	1,734.16	100.00	597.33

The Standard Insurance Company

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

Voluntary - a	dditional life insurance:	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 2% of your salary into your HCSP.

This is a tax free reimbursement account for health expenses after your employment ends. Does not apply to ABE and Early Learning.

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