



Paraprofessionals (20 - 29 hours per week) Benefit Summary

Medical Insurance – The district offers four medical plans to employees through BCBS of MN. One plan has a lower deductible and out-of-pocket maximum, the other is more cost effective, but has a higher deductible and out-of-pocket maximum. You have the choice of enrolling in the Low Deductible plan in the Aware or High Value network or the HOOP plan in the Aware or High Value network. The Aware network is considered an open access network and the High Value network is a limited network of doctors/clinics/hospitals. When enrolling, you will choose between the Low Deductible or HOOP plan and the network you want to enroll in.

BCBS of MN	Low Deductible Aware & High Value	HOOP (Higher Out-of-Pocket) Aware & High Value
Annual Deductible	\$1,500 Per Person \$3,000 Per Family	\$3,500 Per Person \$7,000 Per Family
Coinsurance	20% after deductible	20% after deductible
Annual Out-of-Pocket Maximum	\$3,000 Per Person \$5,000 Per Family	\$4,000 Per Person \$8,000 Per Family
RX		
Tier 1 - Preferred Generic	\$15 Copay	\$15 Copay
Tier 2 - Preferred Brand	25% Coinsurance	25% Coinsurance
Tier 3 - Non-Preferred	35% Coinsurance	35% Coinsurance

If you are a participant in the Low Deductible or HOOP plan, the district will automatically open a VEBA (HRA) account in your name. You will receive an annual amount (based on labor agreement) deposited into your account over the course of the year.

23-24 Monthly Rates Medical Plan (20 - 29 hpw)		Monthly		
		Plan Premium	Employer Contribution	Employee Contribution
HOOP High Value/with \$900 annual VEBA contribution	Single	\$722.00	\$361.00	\$361.00
HOOP High Value/with \$900 annual VEBA contribution	EE + Child(ren)	\$1,299.00	\$422.00	\$877.00
HOOP High Value/with \$900 annual VEBA contribution	Family/EE+Spouse	\$1,443.00	\$469.00	\$974.00
Low Deductible High Value/with \$300 annual VEBA contribution	Single	\$910.00	\$455.00	\$455.00
Low Deductible High Value/with \$300 annual VEBA contribution	EE + Child(ren)	\$1,637.00	\$450.00	\$1,187.00
Low Deductible High Value/with \$300 annual VEBA contribution	Family/EE+Spouse	\$1,819.00	\$500.00	\$1,319.00
HOOP Aware/with \$900 annual VEBA contribution	Single	\$758.10	\$379.05	\$379.05
HOOP Aware/with \$900 annual VEBA contribution	EE + Child(ren)	\$1,363.95	\$443.50	\$920.45
HOOP Aware/with \$900 annual VEBA contribution	Family/EE+Spouse	\$1,515.15	\$492.50	\$1,022.65
Low Deductible Aware/with \$300 annual VEBA contribution	Single	\$955.50	\$477.75	\$477.75
Low Deductible Aware/with \$300 annual VEBA contribution	EE + Child(ren)	\$1,718.85	\$472.50	\$1,246.35
Low Deductible Aware/with \$300 annual VEBA contribution	Family/EE+Spouse	\$1,909.95	\$525.00	\$1,384.95

Note: As a school year employee, July and August premiums are taken over the course of the school year. The per check amount of any premium will be based on the number of months on the insurance plan between September and August and how many pay checks are remaining through June 15.



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Vision Insurance is through Superior Vision, this plan offers a discount for glasses and contacts.

Flexible Spending Accounts – health and dependent care spending accounts available through TASC.

Employee Assistance Program – EmployeeConnect, available to employee and family members. Offers five free counseling sessions, per person, per year, per issue.

403(b) – tax-deferred retirement account, you have the choice of an account with Fidelity or Met Life. To determine if you qualify for a 403(b) match, please review your Paraprofessional Labor Agreement.