

INSURANCE RATES FOR ALL EMPLOYEES

Bus Drivers, Clerical, Custodian, Interpreters, LPN, Non-Rep Exempt,
Hourly Non-Rep, Nutritional Services, Paraprofessionals,
Executive Director, Superintendents
(Except Teacher, SCPA & SCAA)
EFFECTIVE 10/1/2024 - 9/30/2025

HEALTH PARTNERS DEDUCTIBLE PLAN WITH AN HRA

SINGLE: \$3,500 DEDUCTIBLE WITH A \$1,000 HRA

FAMILY: \$7,000 DEDUCTIBLE WITH A \$2,000 HRA

EME = \$1,500 HRA each for 2 singles or \$3,000 HRA for Family

BENEFIT	MONTHLY PREMIUM	DISTRICT MONTHLY CONTRIBUTION	EMPLOYEE MONTHLY DEDUCTION	12 MO EMPLOYEE PER PAY PERIOD DEDUCTION
Health - Single	\$895.75	\$615.00	\$280.75	\$140.38
Health - Family	\$2,052.41	\$1,090.95	\$961.46	\$480.73
Employee Married to Employee	\$895.75	2 singles paid in full	\$0.00	\$0.00
Employee Married to Employee	\$2,052.41	or 1 family paid in full	\$0.00	\$0.00
Dental - Single	\$32.93	\$23.85	\$9.08	\$4.54
Dental - Family	\$94.70	\$66.70	\$28.00	\$14.00
Vision - Single (Eye Med Plan)	\$8.64	\$0.00	\$8.64	\$4.32
Vision - Family (Eye Med Plan)	\$21.60	\$0.00	\$21.60	\$10.80
Vision - Single (VSP Plan)	\$9.00	\$0.00	\$9.00	\$4.50
Vision - Family (VSP Plan)	\$22.52	\$0.00	\$22.52	\$11.26

NOTES:

If you are a school year (10 month) employee, your September through August premiums will be deducted from September 30th through May 31st at a prorated rate, which means we will take the total amount you owe from September through August and divide it evenly and deduct it out of your checks from September 30th through May 31st.