

ESTIMATED Insurance costs for plan year July 2025 through June 2026

- \* 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 auministered by Medsurety							
	Monthly	District's monthly contribution:		Your cost			
Coverage	Premium	to premium cost	into your HRA/VEBA	per month			
Single Family	\$939.83 \$2,510.32	\$799.96 \$2,097.44	\$50.00 \$100.00	\$139.87 \$412.88			

### 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	District's	Your cost
	Premium	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.

\*refer to group contract for full details