

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 administered by Medsurety

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

### **The Standard Insurance Company**

The district provides a long-term disability (LTD) insurance policy, and a \$70,000 term life insurance policy. You are taxed on the value of life insurance over \$50,000.

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**

	Monthly	District's	Your cost
Policy	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 2% 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 completing one full fiscal year of employment.

<sup>\*</sup>refer to group contract for full details