



ST. MICHAEL - ALBERTVILLE SCHOOLS

EXCELLENCE IS OUR TRADITION

SUPPORT STAFF (0.875-1.0 FTE) BENEFITS SUMMARY 2025-2026 35-40 HOURS PER WEEK

*Rates are calculated for 12-months instead of the 9-months they were for the 2024-2025 year.
You will see an increase in the premium amount each paycheck due to this change.*

Medical Insurance, Option 1: BlueCross BlueShield Aware Plan with VEBA Account (HRA)

Annual Deductible/Out-of-Pocket Maximum: \$1,850 Single, \$3,700 Family***

	Total Monthly Premium	District Contribution	District Contribution to VEBA	Employee Monthly Cost*	Employee Cost per Paycheck**
Single	\$852.50	\$533.50	\$87.50	\$319.00	\$212.67
Family	\$2,470.50	\$1,288.00	\$175.00	\$1,182.50	\$788.33

Medical Insurance, Option 2: BlueCross BlueShield Aware Plan with Health Savings Account (HSA)

Annual Deductible/Out-of-Pocket Maximum: \$4,125 Single, \$8,250 Family***

	Total Monthly Premium	District Contribution	District Contribution to HSA	Employee Monthly Cost*	Employee Cost per Paycheck**
Single	\$711.50	\$621.00	\$0.00	\$90.50	\$60.33
Family	\$2,062.50	\$1,463.00	\$0.00	\$599.50	\$399.67

Medical Insurance, Option 3: BlueCross BlueShield Aware Hybrid Plan with VEBA/HSA

Annual Deductible/Out-of-Pocket Maximum: \$4,125 Single, \$8,250 Family***

	Total Monthly Premium	District Contribution	District Contribution to VEBA/HSA	Employee Monthly Cost*	Employee Cost per Paycheck**
Single	\$711.50	\$533.50	\$87.50	\$178.00	\$118.67
Family	\$2,062.00	\$1,288.00	\$175.00	\$774.50	\$516.33

Medical Insurance, Option 4: BlueCross BlueShield Aware MVP Plan with HSA

Annual Deductible/Out-of-Pocket Maximum: \$6,350 Single, \$12,700 Family***

	Total Monthly Premium	District Contribution	District Contribution to HSA	Employee Monthly Cost*	Employee Cost per Paycheck**
Single	\$605.00	\$605.00	\$16.00	\$0.00	\$0.00
Family	\$1,753.00	\$1,463.00	\$0.00	\$290.00	\$193.33

***Employee contributions are paid via payroll deduction on a pre-tax basis.**

****Cost per paycheck is calculated to collect annual premiums owed over 18 paychecks.**

*****Please see Summaries of Benefits and Coverage (SBCs) for full coverage details on each plan.**

INDEPENDENT SCHOOL DISTRICT #885
11343 50TH STREET NE
ALBERTVILLE, MN 55301
WWW.STMA.K12.MN.US



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Dental Insurance: HealthPartners Open Access Choice

	Total Monthly Premium	District Contribution	Employee Monthly Cost*	Employee Cost per Paycheck**
Single	\$51.02	\$29.15	\$21.87	\$14.58
Family	\$151.09	\$29.15	\$121.94	\$81.29

Flexible Spending Accounts: WEX Health, Inc.

Flexible spending accounts allow employees to use pre-tax dollars to pay for dependent day care and/or unreimbursed health care expenses. Eligible expenses must be incurred during the plan year. Up to \$660 of unused funds can carry over from year to year. More information on flexible spending can be found at www.stma.k12.mn.us under Departments/Human Resources/Benefits.

Basic Life Insurance: Madison National Life Insurance

All employees have \$50,000 of life and accidental death and dismemberment (AD&D) insurance coverage through the district's group policy. The entire premium is paid for by the district.

Supplemental Life Insurance: Madison National Life Insurance

Employees may purchase additional life insurance through the district's group policy. An additional \$25,000 of coverage may be purchased. Employees must be enrolled in basic life coverage to purchase additional life insurance.

	Total Monthly Premium	District Contribution	Employee Monthly Cost*	Employee Cost per Paycheck**
\$25,000 policy	\$3.00	\$0.00	\$3.00	\$2.00

Long-Term Disability Insurance: Madison National Life Insurance

All employees who work at least 20 hours per week and 170 days per year have a long-term disability insurance policy which allows the employee to continue to receive 2/3 of their monthly earnings in the event the employee becomes disabled and is unable to work for more than 90 consecutive days. The entire premium is paid for by the district.



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Retirement Plan: Public Employees Retirement Association (PERA)

The employee and employer contribute to the defined-benefit pension plan as determined by Minnesota law. Information regarding benefits may be obtained by contacting PERA at 651-296-7460 or visiting www.mnpera.org.

Supplemental Retirement Plan: 403(b)

Employees may contribute to a tax-sheltered annuity (TSA) under 403(b) regulations. To begin contributions, the employee must meet with a financial advisor from the district's approved vendor list and submit a completed salary reduction agreement.

*****This document is only meant to be a summary of information. More detailed information may be found in the support staff contract. Any discrepancies between this summary and the contract are superseded by the contract.*****