



BUCKEYE LOCAL SCHOOLS
HEALTH INSURANCE - MONTHLY EMPLOYEE COST
 Effective 2025-26



MEDICAL	
SINGLE	FAMILY
ADMINISTRATIVE \$ 241.96	\$ 617.24



DENTAL	
SINGLE	FAMILY
ADMINISTRATIVE \$ 9.69	\$ 29.03



VISION	
SINGLE	FAMILY
ADMINISTRATIVE \$ 1.59	\$ 4.05



LIFE
EMPLOYER PAID
\$50,000

BLEA - FULL-TIME \$ 199.62 \$ 586.38
 BLEA - 0.5 FTE \$ 704.72 \$ 1,797.71

\$ 7.99	\$ 27.58
\$ 28.21	\$ 84.54

\$ 1.31	\$ 3.85
\$ 4.63	\$ 11.81

This is an Employer Paid Benefit.

OAPSE - FULL TIME \$ 181.47 \$ 540.08
 OAPSE - 5.0-5.99 HRS/DAY \$ 266.16 \$ 756.12
 OAPSE - 4.99 HRS OR LESS \$ 387.14 \$ 1,064.74

\$ 7.26	\$ 25.40
\$ 10.65	\$ 35.56
\$ 15.50	\$ 50.07

\$ 1.19	\$ 3.55
\$ 1.75	\$ 4.97
\$ 2.54	\$ 6.99

All Buckeye Employees receive this \$50,000 Coverage at No Cost to the Employee.

PRESCHOOL AIDE (4 DAYS/WK) \$ 318.58 \$ 879.56

\$ 12.75	\$ 41.36
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\$ 2.09	\$ 5.78
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Additional Voluntary Term Life Insurance can be purchased, as well.

PLEASE NOTE MONTHLY DEDUCTIONS ARE WITHHELD FROM YOUR PAYCHECK ONE MONTH IN ADVANCE OF COVERAGE. THIS MEANS IN JULY YOU ARE PAYING FOR AUGUST COVERAGE.

YOUR DEDUCTIONS ARE DIVIDED OVER THE TWO PAYS EACH MONTH.

DISTRICT OPEN ENROLLMENT TAKES PLACE IN MAY.

PLEASE REMEMBER THIS IS YOUR ONLY OPPORTUNITY TO CHANGE YOUR ELECTIONS WITHOUT A QUALIFYING EVENT.

IF YOU HAVE ANY QUESTIONS REGARDING BENEFITS OR ANY OF THE INFORMATION ABOVE, PLEASE CONTACT ROBYN WATSON AT x1011.