NON EMO HEALTH INSURANCE RATES 7/1/2025-6/30/2026

	High Plan		
	Single	EE + 1	Family
Total Monthly Premium	$1,286.23	$2,580.22	$4,127.26

Contracts Expired 6/30/2025

Directors and Confidential Managers, Licensed Coordinators, Principals and Salaried Professionals, School Executives, I-M Coordinators, Student Management Specialists	Employee (per pay period)	$332.33	$806.79	$1,289.26
	District (per pay period)	$310.79	$483.32	$774.37

Contracts Expire 6/30/2026

Hourly Technical	Employee (per pay period)	$326.12	$797.13	$1,273.78
	District (per pay period)	$317.00	$492.98	$789.85

Contract Expired 6/30/2024

Confidential Support Specialists	Employee (per pay period)	$326.12	$797.13	$1,273.78
	District (per pay period)	$317.00	$492.98	$789.85

Custodians Expire 6/30/2026

Custodians	Employee (per pay period)	$338.43	$816.27	$1,304.44
	District (per pay period)	$304.69	$473.84	$759.19

School Nutrition Expires 6/30/2026

School Nutrition (32+ hours/week)	Employee (per pay period)	$338.43	$816.27	$1,304.44
	District (per pay period)	$304.69	$473.84	$759.19

School Nutrition (30-31.9 hours)	Employee (per pay period)	$344.40	$991.39	$1,764.91
	District (per pay period)	$298.72	$298.72	$298.72

Premiums updated 5/6/2025

NON EMO HEALTH INSURANCE RATES 7/1/2025-6/30/2026

		Value Plan		
		Single	EE + 1	Family
	Total Monthly Premium	$1,012.82	$2,029.94	$3,249.86

Contract Expires 6/30/2025

Salaried Professionals	Employee (per pay period)	$170.26	$492.21	$787.37
	District (per pay period)	$336.15	$522.76	$837.56

Contracts Expire 6/30/2025

Licensed Coordinators, Principals, I-M Coordinators, Student Management Specialists	Employee (per pay period)	$164.54	$483.32	$773.13
	District (per pay period)	$341.87	$531.65	$851.80

Contracts Expire 6/30/2025

Directors and Confidential Managers, School Executives,	Employee (per pay period)	$163.76	$482.11	$771.19
	District (per pay period)	$342.65	$532.86	$853.74

Contract Expires 6/30/2026

Hourly Technical	Employee (per pay period)	$189.41	$521.99	$835.07
	District (per pay period)	$317.00	$492.98	$789.86

Contract Expired 6/30/2024

Confidential Support Specialists	Employee (per pay period)	$189.41	$521.99	$835.07
	District (per pay period)	$317.00	$492.98	$789.86

Contract Expires 6/30/26

Custodians	Employee (per pay period)	$189.41	$521.99	$835.07
	District (per pay period)	$317.00	$492.98	$789.86

School Nutrition Expires 6/30/2026

School Nutrition (32+ hours/week)	Employee (per pay period)	$176.88	$502.51	$803.87
	District (per pay period)	$329.53	$512.46	$821.06

School Nutrition (30-31.9 hours)	Employee (per pay period)	$183.35	$691.91	$1,301.87
	District (per pay period)	$323.06	$323.06	$323.06

Premiums updated 5/6/2025

NON EMO HEALTH INSURANCE RATES 7/1/2025-6/30/2026

		HSA/High Deductible Health Plan		
		Single	EE + 1	Family
	Total Monthly Premium	$628.87	$1,260.43	$2,017.95

Contract Expires 6/30/2025

Salaried Professionals	Employee (per pay period)	$44.49	$89.16	$142.77
	District (per pay period)	$269.95	$541.06	$866.21

Contracts Expire 6/30/2025

Licensed Coordinators, Principals, I-M Coordinators, Student Management Specialists	Employee (per pay period)	$45.35	$90.90	$145.54
	District (per pay period)	$269.09	$539.32	$863.44

Contracts Expire 6/30/2025

Directors and Confidential Managers, School Executives	Employee (per pay period)	$29.21	$89.17	$142.77
	District (per pay period)	$285.23	$541.05	$866.21

Contract Expires 6/30/2026

Hourly Technical	Employee (per pay period)	$41.68	$99.16	$158.78
	District (per pay period)	$272.76	$531.06	$850.20

Contract Expired 6/30/2024

Confidential Support Specialists	Employee (per pay period)	$62.17	$139.05	$222.63
	District (per pay period)	$252.27	$491.17	$786.35

Contract Expires 6/30/26

Custodians	Employee (per pay period)	$62.17	$139.05	$222.63
	District (per pay period)	$252.27	$491.17	$786.35

School Nutrition Expires 6/30/2026

School Nutrition (32+ hours/week)	Employee (per pay period)	$52.20	$119.65	$191.57
	District (per pay period)	$262.24	$510.57	$817.41

School Nutrition (30-31.9 hours/week)	Employee (per pay period)	$64.69	$129.66	$207.60
	District (per pay period)	$249.75	$500.56	$801.38

Premiums updated 5/6/2025

NON EMO HEALTH INSURANCE RATES 7/1/2025-6/30/2026

	2025 HSA IRS Contribution Limits (employee contributions are optional)		
Annual IRS Maximum	**Single**	**EE + 1**	**Family**
Up to age 55	**$4,300.00**	**$8,550.00**	**$8,550.00**
Age 55 +	**$5,300.00**	**$9,550.00**	**$9,550.00**
District (Per Payroll)	$100.00	$200.00	$200.00
District (Monthly)	$200.00	$400.00	$400.00
District (Annual)	$2,400.00	$4,800.00	$4,800.00

Premiums updated 5/6/2025