

# CERTIFIED/CLASSIFIED EMPLOYEE MONTHLY RATES

## 2026 MEDICAL - CIGNA

	Plan	Premium	District Amount	Employee Amount
Employee Only	OAP 2500	\$900.09	\$542.34	\$357.75
Employee Only	OAP 500	\$1,002.86	\$542.34	\$460.52
Employee Only	Primary Advantage	\$993.09	\$542.34	\$450.75
Employee Only	HDHP	\$717.52	\$542.34	\$175.18
	Plan	Premium	District Amount	Employee Amount
Employee + Spouse	OAP 2500	\$2,074.00	\$674.41	\$1,399.59
Employee + Spouse	OAP 500	\$2,109.36	\$674.41	\$1,434.95
Employee + Spouse	Primary Advantage	\$2,088.73	\$674.41	\$1,414.32
Employee + Spouse	HDHP	\$1,528.01	\$674.41	\$853.60
	Plan	Premium	District Amount	Employee Amount
Employee + Child(ren)	OAP 2500	\$1,938.55	\$674.41	\$1,264.14
Employee + Child(ren)	OAP 500	\$1,908.19	\$674.41	\$1,233.78
Employee + Child(ren)	Primary Advantage	\$1,889.50	\$674.41	\$1,215.09
Employee + Child(ren)	HDHP	\$1,381.43	\$674.41	\$707.02
	Plan	Premium	District Amount	Employee Amount
Employee + Family	OAP 2500	\$2,254.61	\$674.41	\$1,580.20
Employee + Family	OAP 500	\$2,512.00	\$674.41	\$1,837.59
Employee + Family	Primary Advantage	\$2,487.13	\$674.41	\$1,812.72
Employee + Family	HDHP	\$2,187.59	\$674.41	\$1,513.18

## 2026 DENTAL - CIGNA

	Plan	Premium	District Amount	Employee Amount
Employee Only	Cigna Dental	\$31.85	\$22.30	\$9.55
Employee + Family	Cigna Dental	\$98.25	\$22.30	\$75.95

## 2026 VISION - VSP

	Plan	Premium	District Amount	Employee Amount
Employee Only	VSP	\$6.65	\$0.00	\$6.65
Employee + Family	VSP	\$18.35	\$0.00	\$18.35

# 4 DAY CLASSIFIED EMPLOYEE MONTHLY RATES

(PARAPROFESSIONAL, INSTRUCTIONAL AIDES, FOOD SERVICE)

## 2026 MEDICAL - CIGNA

	Plan	Premium	District Amount	Employee Amount
Employee Only	OAP 2500	\$900.09	\$572.12	\$327.97
Employee Only	OAP 500	\$1,002.86	\$572.12	\$430.74
Employee Only	Primary Advantage	\$993.09	\$572.12	\$420.97
Employee Only	HDHP	\$717.52	\$572.12	\$145.40
	Plan	Premium	District Amount	Employee Amount
Employee + Spouse	OAP 2500	\$2,074.00	\$748.84	\$1,325.16
Employee + Spouse	OAP 500	\$2,109.36	\$748.84	\$1,360.52
Employee + Spouse	Primary Advantage	\$2,088.73	\$748.84	\$1,339.89
Employee + Spouse	HDHP	\$1,528.01	\$748.84	\$779.17
	Plan	Premium	District Amount	Employee Amount
Employee + Child(ren)	OAP 2500	\$1,938.55	\$748.84	\$1,189.71
Employee + Child(ren)	OAP 500	\$1,908.19	\$748.84	\$1,159.35
Employee + Child(ren)	Primary Advantage	\$1,889.50	\$748.84	\$1,140.66
Employee + Child(ren)	HDHP	\$1,381.43	\$748.84	\$632.59
	Plan	Premium	District Amount	Employee Amount
Employee + Family	OAP 2500	\$2,254.61	\$748.84	\$1,505.77
Employee + Family	OAP 500	\$2,512.00	\$748.84	\$1,763.16
Employee + Family	Primary Advantage	\$2,487.13	\$748.84	\$1,738.29
Employee + Family	HDHP	\$2,187.59	\$748.84	\$1,438.75

## 2026 DENTAL - CIGNA

	Plan	Premium	District Amount	Employee Amount
Employee Only	Cigna Dental	\$31.85	\$22.30	\$9.55
Employee + Family	Cigna Dental	\$98.25	\$22.30	\$75.95

## 2026 VISION - VSP

	Plan	Premium	District Amount	Employee Amount
Employee Only	VSP	\$6.65	\$0.00	\$6.65
Employee + Family	VSP	\$18.35	\$0.00	\$18.35