Learning Resource Teacher Benefit Summary
Effective January 1, 2026

Eligibility:
Employees must work at least twenty (20) or more hours/week to be eligible for benefits. Employees that begin employment on the first day of the month are eligible for coverage on the first day of the month. Employees who begin employment after the first day of the month are eligible for coverage the first day of the following month.

Medical Insurance:
The District contribution is prorated for part time employees. The employee contribution is paid via payroll deduction on a pre-tax basis. The amount of the district contribution is determined by dividing the daily hours by eight (8) for single insurance.

Medical Insurance- Option 1 - HealthPartners- Open Access Choice $15 Co-Pay Plan

	Total Monthly Premium	District Contribution	Full-time Employee Monthly Cost
Single	$1042.00	$861.00	$181.00
Family	$2902.00	$861.00	$2041.00

Medical Insurance- Option 2 - HealthPartners- National ONE ^{sm} $1,000 High Deductible Plan/VEBA

	Total Monthly Premium	District Contribution	Full-time Employee Monthly Cost
Single	$861.00	$861.00	$0.00
Family	$2402.00	$861.00	$1541.00

VEBA Contribution:
The district contributes annually the amount of $750 for single coverage and $1500 for family coverage into a health reimbursement account through BRI, a third-party vendor. Half of the contribution is made on January 15 and half on June 30 of each year. To receive this contribution the employee must be enrolled in medical insurance option 2 – the high deductible health plan. Money accumulated in a VEBA account can be used to pay for eligible medical expenses.

Vision:
The District offers a voluntary vision plan through EyeMed. The plan will cover exams, frames & lenses, or contact lenses in lieu of glass lenses.

	Total Monthly Employee Premium
Single	$7.47
Family	$19.05

Flexible Spending Accounts:
Flexible spending accounts allow employees to save money on their unreimbursed medical, dental and/or dependent care (child care & elder care) expenses by paying for them with pre-tax dollars. Employees elect how much money they would like deducted from their paychecks (if any) on a pre-tax basis during the "plan year". This money is then reimbursed to employees after they have paid their expenses. Maximum annual election for Medical is $3,400 maximum annual election for Dependent Care expenses is $7,500. Accounts are managed through BRI, a third-party vendor.

Retirement Plan – Teacher's Retirement Association (TRA):
The employer and employee contribute to the fund as determined by law. Information regarding benefits may be obtained by contacting the Teachers' Retirement Association at 651-296-2409.

Sick Leave: Employees earn one (1) day of sick leave pers month for each month worked based on their daily hours of work per day.

Personal Leave: Employees earn two (2) personal leave days per year based on their daily hours of work.

Learning Resource Teacher Benefit Costs

HealthPartners-Open Access Choice Co-Pay Plan			HealthPartners-National ONE sm $1,000 High Deductible Plan		
FTE	**Employee Cost Per Month Single**	**Employee Cost Per Month Family**	**FTE**	**Employee Cost Per Month Single**	**Employee Cost Per Month Family**
1.0	$181.00	$2,041.00	1.0	$0.00	$1,541.00
.95	$224.00	$2,084.00	.95	$224.00	$1,584.00
.90	$267.00	$2,127.00	.90	$267.00	$1,627.00
.85	$310.00	$2,170.00	.85	$310.00	$1,670.00
.80	$353.00	$2,213.00	.80	$353.00	$1,713.00
.75	$396.00	$2,256.00	.75	$396.00	$1,756.00
.70	$439.00	$2,299.00	.70	$439.00	$1,799.00
.65	$482.00	$2,342.00	.65	$482.00	$1,842.00
.60	$525.00	$2,385.00	.60	$525.00	$1,885.00
.55	$568.00	$2,428.00	.55	$568.00	$1,928.00
.50	$612.00	$2,471.00	.50	$612.00	$1,971.00

Coverage described is intended as a summary only. For exact terms and conditions, consult the group membership contracts and/or applicable labor agreement or handbook.