



# D.C. Everest Area School District 2026 Benefits Summary

D.C. Everest Area School District strives to provide a comprehensive benefit package that meets the needs of you and your family at an affordable cost.

## Medical Plan

### Aspirus Health Plan

For regular employees scheduled to work 30 hours or more per week, D.C. Everest offers two health plan options. Both options are high deductible health plans qualified for a Health Savings Account:

- Plan A: Signature Network
- Plan B: Freedom Network

Both health plans have a calendar year deductible: January 1st - December 31st. If you join a health plan mid-year, the deductible will accumulate from your effective date to December 31st, and then the deductible will start over on January 1st of the following year.

Both health plans are embedded deductible plans – an embedded deductible means that a single member of a family does not have to meet the full family deductible in order for after-deductible benefits to pay. Each member under the plan will have benefits pay once they meet the individual deductible – a single member will not have to meet more than \$3,400 in network per calendar year for covered benefits.

Please refer to the plan documents for details and costs which can be found on the D.C. Everest Staff Intranet.

Benefit/Service	Plan A: Signature HMO
Deductible Single/Family	\$3,400 / \$6,800
Out-of-Pocket Max	\$3,400 / \$6,800
Coinsurance	0%
Physician Services - Routine/ Preventative Care	100%
MDLive - Telehealth	Deductible, then 100%
Nurseline	No Charge
Primary Care Physician/Specialist	Deductible, then 100%
Hospital Services - Inpatient/ Outpatient	Deductible, then 100%
Walk-in Clinics/Urgent Care/ Emergency Room	Deductible, then 100%
Prescription Drugs	Deductible, then 100%
Preventive List Prescriptions	100%
Out of Network	No Coverage

Benefit/Service	Plan B: Freedom POS In-Network	Plan B: Freedom POS Out of Network
Deductible Single/Family	\$3,400 / \$6,800	\$6,600 / \$13,200
Out-of-Pocket Max	\$3,400 / \$6,800	\$8,000 / \$16,000
Coinsurance	0%	20%
Physician Services - Routine/ Preventative Care	100%	Deductible then 80%
MDLive - Telehealth	Deductible, then 100%	Not Applicable
Nurseline	No Charge	Not Applicable
Primary Care Physician/ Specialist	Deductible, then 100%	Deductible, then 80%
Hospital Services - Inpatient/ Outpatient	Deductible, then 100%	Deductible, then 80%
Walk-in Clinics/Urgent Care/ Emergency Room	Deductible, then 100%	Deductible, then 100%
Prescription Drugs	Deductible, then 100%	Not Covered
Preventive Prescriptions	100%	100%

If a brand name prescription drug is requested when generic is available, the participant must pay the cost difference — which is not applied to the maximum out-of-pocket limit. In some cases, the physician may specify that the medication be “dispensed as written” — in that case, there is no penalty.

To obtain the highest level of benefits, and help control costs for both you and D.C. Everest, it is important to seek treatment from in-network providers. If you choose not to utilize an in-network provider and are enrolled in the Signature HMO plan, you will pay all costs out-of-pocket with no payments towards your deductible.

To obtain a listing of providers in each network, go to <https://p1.aspirushealthplan.com/find-a-doctor>.

**Medical Plan Continued on Next Page . . .**

## Medical Plan (cont.)

### Health Savings Account (HSA)

Employees who are enrolled in D.C. Everest's Aspirus Health Plan, have no other health coverage, are not enrolled in Medicare, and cannot be claimed as a dependent on someone else's tax return, are eligible to contribute to a Health Savings Account. An HSA can be set up at the financial institution of your choice. D.C. Everest will deduct the elected contributions from your paycheck on a pre-tax basis.

In 2026, D.C. Everest will deposit a one-time contribution of \$100 into the HSA of employees carrying the health insurance policy (the subscriber). You can also make contributions to your HSA each year that you are eligible. For 2026, you can contribute no more than (including any employer contributions):

- Single coverage: \$4,400
- Family coverage: \$8,750
- Individuals ages 55 and older can also make additional "catch-up" contributions of up to \$1,000 annually.

### Cash in Lieu

If you are eligible for the medical plan and choose to waive coverage, you can receive a cash in lieu benefit of up to \$400 per month (prorated based on FTE). Cash in Lieu payments are made biweekly. Mid-year benefit changes that allow for cash-in-lieu will be determined on a monthly basis. Changes effective on or after the 1st of the month will allow for cash-in-lieu the following month.

## Dental Plan

### Delta Dental of Wisconsin

For regular employees scheduled to work 30 hours or more per week, D.C. Everest offers the DeltaDental PPO Plus Premier plan. You may see either Delta Dental PPO dentists or Delta Dental Premier dentists in network. Your lowest out-of-pocket costs come from seeing a Delta Dental PPO dentist, but you'll also enjoy cost advantages if you see a Delta Dental Premier dentist. That means savings on out-of-pocket costs.

**Monthly Premium: \$5.48 Single/\$16.36 Family.**

Benefit/Service	PPO/Premier
<b>Annual Maximum</b>	\$2,000
<b>Deductible</b>	\$0
Diagnostic / Preventive	100%
Basic Services	100%
Major Services (crown, inlays, onlays)	100%
Major Services (bridges, dentures, implants, repairs)	50%
Orthodontia	100% up to \$1,750

To obtain a listing of dental providers in your area go to <https://www.deltadentalwi.com/s/find-a-provider>.

## Dependent Coverage

Dependent children are covered under all plans (where family coverage is applicable) from birth through the end of the month they attain the age of 26. For the medical plan, dependents living outside of the state of Wisconsin are provided benefits for covered services through the First-Health Network. Contact Aspirus Health Plan for more information.

## Vision Insurance

### Delta Dental of Wisconsin

For regular employees scheduled to work 600 hours or more per year, D.C. Everest offers you an opportunity to purchase DeltaVision insurance through Delta Dental of Wisconsin. This plan is available through the Access network, and provides benefits for exams, glasses, and contacts.

Vision Insurance is 100% funded by you through payroll deductions. Monthly Premium: \$4.94 Single/\$12.30 Family

Services	Access Network	Non- Network Reimbursement
<b>Frequency</b> (exams/lenses/frames)	12 months / 12 months / 24 months	
<b>Comprehensive Vision Exam</b>	\$20 copay	\$35 reimbursement
<b>Standard Contact Lens Fitting</b>	Member pays up to \$55	No Reimbursement Available
<b>Frames</b> (any available frame at provider location)	\$130 allowance, then 20% off balance	\$65 reimbursement
Standard Plastic Lenses		
Single Vision	\$20 member copay	\$25 reimbursement
Bifocal	\$20 member copay	\$40 reimbursement
Trifocal	\$20 member copay	\$55 reimbursement
Standard Progressive	\$85 member copay	No reimbursement available
Lens Options		
UV Coating, Tint, Standard Scratch Resistance	Member pays \$15	No reimbursement available
Standard Polycarbonate	Member pays \$40	
Standard Anti-Reflective	Member pays \$45	
Other Add-ons & Services	20% off retail price	
Contact Lenses (in lieu of glasses)		
Disposable	\$120 allowance	\$96 reimbursement
Medically Necessary*	Paid in full	\$200 reimbursement

\*Medically necessary contacts require authorization from a vision doctor when some conditions are present. Please contact the plan for more information

To obtain a listing of vision providers in your area go to <https://www.deltadentalwi.com/s/find-a-provider>.

## Short Term Disability (STD)

### National Insurance Services

For regular employees scheduled to work 600 hours or more per year, D.C. Everest offers you an opportunity to purchase Short Term Disability insurance. This plan provides income protection in the event that you are ill or injured and unable to work for a short-term period of time.

If claims are approved, benefits under the Short-Term Disability Plan will begin immediately following an accident/injury or after 3 days of illness. If approved, you can receive up to 66.66% of your weekly pre-disability earnings, up to a maximum of \$504 per week. Benefits under this plan will continue until the lesser of 90 days (when Long-Term Disability is applicable) or until you become eligible for benefits under the Long-Term Disability plan.

Short-Term Disability is 100% funded by you through payroll deductions. Costs for the voluntary Short-Term Disability Plan are included in the table:

Weekly Benefit Amount	Monthly Rate
\$147.00	\$11.46
\$175.00	\$13.36
\$224.00	\$17.18
\$273.00	\$21.02
\$301.00	\$22.92

Amounts below require completion and approval of Evidence of Insurability for coverage.

Weekly Benefit Amount	Monthly Rate
\$357.00	\$27.38
\$420.00	\$31.86
\$462.00	\$35.04
\$504.00	\$38.22

If you are applying for coverage 31 days past your hire date for any amount, you are required to complete and submit an Evidence of Insurability Application. Applications requiring an Evidence of Insurability will be approved or denied by National Insurance Services.

## Long Term Disability (LTD)

### National Insurance Services

For regular employees scheduled to work 600 hours or more per year D.C. Everest offers you an opportunity to purchase Long Term Disability insurance. This plan provides coverage if you are sick or totally disabled and unable to work for more than 90 consecutive calendar days. At that time, if approved, you would receive 90% of your monthly earnings – until you are able to return to work or you reach the maximum benefit age. You pay 10% of the premium for this insurance. The premium is determined annually based on your salary.

## Accident Insurance

### North American Benefits Corporation

For regular employees scheduled to work 600 hours or more per year D.C. Everest offers you an opportunity to purchase Accident Insurance. Accident Insurance is designed to provide cash payments (financial security) to employees in the event of covered injuries and accidents such as burns, dislocations, fractures, lacerations, surgeries due to injuries, etc. This voluntary benefit will deliver payments directly to enrolled employees and their families to help offset high medical deductibles and other unforeseen expenses that come with any accident or injury. It will pay in addition to any paid time off, Worker's Compensation, and Short-Term Disability payments the employee may also be receiving.

Payment amounts to enrolled members varies based on the care received for covered injuries. Review the plan document for more information.

Accident Insurance is 100% covered by you through payroll deductions. The coverage options and monthly rates for employees are:

Coverage For	Monthly Rate
Employee	\$11.40
Employee and Spouse	\$18.10
Employee and Child(ren)	\$27.60
Family	\$41.60

## Flexible Spending Account (FSA)

### Employee Benefits Corporation

D.C. Everest provides any regular employee the opportunity to pay for dependent care expenses with pre-tax dollars through a Flexible Spending Account.

The **Dependent Care Flexible Spending Account** enables you to set aside money from your paycheck on a pre-tax basis. The money can be spent by December 31st of each year or you forfeit any remaining balance.

For 2026 you may elect to contribute up to **\$7,500** per year towards your Dependent Care Account (**\$3,750** if married, filing separately). The dependent care account is available if you have children under age 13 or a dependent/spouse that is physically or mentally not able to care for themselves.

Please note that annual non-discrimination testing will be performed and may have an impact on your personal election.

For more information: <http://www.ebcflex.com>

## Life Insurance

### Wisconsin Department of Employee Trust Fund (ETF)

For employees scheduled to work 880 hours per year or more, or who meet the Wisconsin Retirement System eligibility another way (per the WRS guidelines) D.C. Everest offers Life Insurance through the Department of Employee Trust Funds. Life insurance is available in the form of Basic, Additional, Supplemental, and Spouse & Dependent coverage.

The Basic Plan – coverage equal to your annual salary – is provided at **no cost** to you.

Additional and Supplemental Plan coverage may be selected for up to four times the Basic amount. The cost for the additional coverage – which is paid for by you – is based on your current age and annual income. Spouse & Dependent Plan coverage is also available: 1 Unit (Spouse=\$10,000; Dependent=\$5,000) costs \$1.60 per month; 2 Units (\$20,000/\$10,000) costs \$3.20 per month. Life insurance coverage becomes effective on the first of the month following 30 days from hire or eligibility date.

For more information: <http://etf.wi.gov/members.htm>

Yog koj muaj lus nug txog  
qhov no, thov tiv tauj  
Xia Yang ntawm  
715-359-4221, ext. 5522.

## Wisconsin Retirement System (WRS)

### Wisconsin Department of Employee Trust Fund (ETF)

You may be eligible to participate in the Wisconsin Retirement System (WRS); eligibility is based on WRS guidelines. If you are determined eligible to participate, you will be enrolled automatically. The District will contribute 7.2% and you will contribute 7.2%. This rate is for 2026; contribution rates are set annually by ETF. All contributions are automatically placed in the Core Fund, unless you elect to participate in the Variable Trust Fund.

The Beneficiary Designation Form is used to designate beneficiaries for both your retirement and life insurance funds. File a new beneficiary form as your life changes – marriage, divorce, birth of child, etc.

For more information: <http://etf.wi.gov/retirement/wrs-retirement-benefit>

## Post Employment Retirement Benefit

Regular employees hired on or after July 1, 2014 will receive an annual defined contribution to a Health Reimbursement Arrangement (HRA). You are eligible to use the benefit once you meet vesting criteria and retire.

Group (on date of retirement)	Age Eligibility (on date of retirement)	Years of Service	Annual Contribution	Maximum District Contribution
Teachers	55	15	\$1,000/year	\$60,000
At-Will Salaried	55	15	\$1,000/year	\$60,000
Hourly (Support Staff)	57	25	\$500/year	\$30,000

## 403(b) Tax Sheltered Annuities

Any employee has the option of opening a Tax-Sheltered Annuity (TSA) account with an approved vendor to save and invest before-tax or after-tax (Roth) dollars for retirement. Participation is completely voluntary and funded entirely through payroll deductions. Contact any of the approved vendors to open, close, or make changes to your account. The approved vendor list can be found on the D.C. Everest Staff Intranet.

## 457 Deferred Compensation Plan

Any employee has the option of opening a 457 account. Wisconsin Deferred Compensation (WDC) gives you the option to save and invest before-tax or after-tax (Roth) dollars for retirement. Participation is completely voluntary and funded entirely through payroll deductions. You can choose from an array of investment options.

For more information: <https://wisconsin.gwrs.com>