

ADMINISTRATIVE DEAN 2026-2027

The amount listed below will be available for each eligible employee to distribute as he/she designates among benefits or cash. Those eligible for benefits must enroll in at least single health coverage.

| | |
|-----------|-------------|
| Per Month | \$1,041.67 |
| Per Year | \$12,500.00 |

When an employee and his/her spouse are both employees of the district, they may pool their district insurance contributions with the following stipulations:

- *Both must participate in the district health insurance plan, if qualified, and maintain two single, single +1, or a family contract.
- *Any balance remaining shall be applied toward additional coverage or cash.

HEALTH INSURANCE

| | | AWARE Cost per Month | HIGH VALUE Cost per Month |
|---------------------------|---------------------|-------------------------|------------------------------|
| \$1,500 Deductible | | | |
| | Single | \$931.13 | \$853.55 |
| | Employee+Child(ren) | \$2,001.47 | \$1,838.54 |
| | Single + Spouse | \$2,098.77 | \$1,928.08 |
| | Family | \$3,169.09 | \$2,913.05 |
| \$3,500 Deductible | | | |
| | Single | \$783.91 | \$719.21 |
| | Employee+Child(ren) | \$1,692.30 | \$1,556.45 |
| | Single + Spouse | \$1,774.88 | \$1,632.56 |
| | Family | \$2,683.26 | \$2,469.77 |
| \$6,500 Deductible | | | |
| | Single | \$676.33 | \$620.91 |
| | Employee+Child(ren) | \$1,466.38 | \$1,350.00 |
| | Single + Spouse | \$1,538.20 | \$1,416.36 |
| | Family | \$2,328.24 | \$2,145.36 |

DENTAL INSURANCE

| <u>Cost per Month</u> | |
|-----------------------|----------|
| Single | \$47.00 |
| Single +1 | \$94.00 |
| Family | \$155.00 |

VISION INSURANCE

| <u>Cost per Month</u> | |
|-----------------------|---------|
| Single | \$5.80 |
| Single +1 | \$11.02 |
| Family | \$16.18 |

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HOSPITAL INDEMNITY

Cost per Month

| | |
|-------------|---------|
| Employee | \$10.18 |
| EE + Spouse | \$17.23 |
| EE + Child | \$14.29 |
| EE + Family | \$25.54 |

ACCIDENT INSURANCE

Cost per Month

| | |
|-------------|---------|
| Employee | \$7.45 |
| EE + Spouse | \$12.41 |
| EE + Child | \$15.79 |
| EE + Family | \$20.77 |

CRITICAL ILLNESS

Critical Illness insurance is offered to Employee (\$10,000, \$20,000 or \$30,000), Spouse (\$5,000, \$10,000, \$15,000 or \$20,000) at a cost based on age. Child Critical Illness may be purchased at 50% of employee amount at no cost to Employee.

GROUP LIFE AND AD&D

The district shall provide a group life insurance policy in the amount listed below for each benefit eligible employee.
\$250,000

Accidental death and dismemberment (AD&D) insurance would pay an additional benefit, up to the amount of your life benefit, if you suffer a covered loss due to an accidental injury. The per month cost is listed below.
\$2.50

LONG TERM DISABILITY (LTD)

The district shall provide a long term disability insurance program for eligible employees. The full premium will be paid by the district. The LTD policy will be at 66.66% of the employee's monthly salary after a 60 day waiting period.

RETIREMENT BENEFITS

Teachers Retirement Association (TRA)

| | |
|--------------------|-------|
| Dist. Contribution | 9.50% |
| Emp. Contribution | 8.00% |

Deferred Compensation (403(b)/457 Accounts)

| Years of Service | Annual Dist. Match |
|------------------|--------------------|
| Beginning 1+ | \$4,400.00 |