# 2026-27 INSURANCE RATES
# FOR 12 MONTH CLASSIFIED EMPLOYEES

The following are the health insurance rates effective October 1, 2026.
These rates are based on monthly (12) payments for insurance coverage from October 1, 2026 through September 30, 2027.
The district pays a cap of $7,000 (annually) plus 50% of the amount over the cap for full-time employees and a prorated amount for part-time employees according to the following schedule.
***Rates include medical, dental and vision for Packages 1-10***.

| | With Metlife PDP Plus Dental | | | | HSA PLANS | |
|---|---|---|---|---|---|---|
| **Hours per Day** | **Package 1 80M: 80% $40** | **Package 2 80G: 80% $30** | **Package 3 90C: 90% $20** | **Package 4 100A: 100% $20** | **Package 9 HSA 90%** | **Anchor Bronze-A Medical Only Employee Only 70%** |
| 4.00 | $ 1,119.94 | $ 1,452.94 | $ 1,674.19 | $ 1,814.44 | $ 1,266.19 | $ 490.17 |
| 4.25 | $ 1,084.49 | $ 1,410.56 | $ 1,627.21 | $ 1,764.54 | $ 1,227.70 | $ 467.84 |
| 4.50 | $ 1,048.93 | $ 1,368.05 | $ 1,580.08 | $ 1,714.49 | $ 1,189.08 | $ 445.44 |
| 4.75 | $ 1,013.48 | $ 1,325.68 | $ 1,533.11 | $ 1,664.60 | $ 1,150.59 | $ 423.11 |
| 5.00 | $ 977.92 | $ 1,283.17 | $ 1,485.98 | $ 1,614.54 | $ 1,111.98 | $ 400.71 |
| 5.25 | $ 942.47 | $ 1,240.79 | $ 1,439.00 | $ 1,564.65 | $ 1,073.49 | $ 378.38 |
| 5.50 | $ 906.91 | $ 1,198.28 | $ 1,391.88 | $ 1,514.60 | $ 1,034.88 | $ 355.98 |
| 5.75 | $ 871.46 | $ 1,155.91 | $ 1,344.90 | $ 1,464.70 | $ 996.39 | $ 333.65 |
| 6.00 | $ 835.90 | $ 1,113.40 | $ 1,297.78 | $ 1,414.65 | $ 957.78 | $ 311.25 |
| 6.25 | $ 800.45 | $ 1,071.03 | $ 1,250.80 | $ 1,364.76 | $ 919.29 | $ 288.92 |
| 6.50 | $ 764.89 | $ 1,028.52 | $ 1,203.67 | $ 1,314.70 | $ 880.67 | $ 266.52 |
| 6.75 | $ 729.44 | $ 986.14 | $ 1,156.70 | $ 1,264.81 | $ 842.18 | $ 244.19 |
| 7.00 | $ 693.88 | $ 943.63 | $ 1,109.57 | $ 1,214.76 | $ 803.57 | $ 221.79 |
| 7.25 | $ 658.43 | $ 901.26 | $ 1,062.59 | $ 1,164.86 | $ 765.08 | $ 199.46 |
| 7.50 | $ 622.87 | $ 858.75 | $ 1,015.47 | $ 1,114.81 | $ 726.47 | $ 177.06 |
| 7.75 | $ 587.42 | $ 816.37 | $ 968.49 | $ 1,064.92 | $ 687.98 | $ 154.73 |
| 8.00 | $ 551.86 | $ 773.86 | $ 921.36 | $ 1,014.86 | $ 649.36 | $ 132.33 |

| | | | | | HSA PLANS | |
|---|---|---|---|---|---|---|
| **Hours per Day** | **Package 5 80M: 80% $40** | **Package 6 80G: 80% $30** | **Package 7 90C: 90% $20** | **Package 8 100A: 100% $20** | **Package 10 HSA 90%** | **Anchor Bronze-B Medical Only Employee + Child (ren) 70%** |
| 4.00 | $ 1,141.61 | $ 1,474.61 | $ 1,695.86 | $ 1,836.11 | $ 1,287.86 | $ 868.17 |
| 4.25 | $ 1,105.71 | $ 1,431.79 | $ 1,648.43 | $ 1,785.77 | $ 1,248.92 | $ 837.98 |
| 4.50 | $ 1,069.70 | $ 1,388.82 | $ 1,600.86 | $ 1,735.26 | $ 1,209.86 | $ 807.69 |
| 4.75 | $ 1,033.80 | $ 1,346.00 | $ 1,553.43 | $ 1,684.92 | $ 1,170.91 | $ 777.50 |
| 5.00 | $ 997.79 | $ 1,303.04 | $ 1,505.85 | $ 1,634.41 | $ 1,131.85 | $ 747.21 |
| 5.25 | $ 961.89 | $ 1,260.21 | $ 1,458.42 | $ 1,584.07 | $ 1,092.91 | $ 717.02 |
| 5.50 | $ 925.87 | $ 1,217.25 | $ 1,410.84 | $ 1,533.56 | $ 1,053.84 | $ 686.73 |
| 5.75 | $ 889.98 | $ 1,174.42 | $ 1,363.42 | $ 1,483.22 | $ 1,014.90 | $ 656.54 |
| 6.00 | $ 853.96 | $ 1,131.46 | $ 1,315.84 | $ 1,432.71 | $ 975.84 | $ 626.25 |
| 6.25 | $ 818.06 | $ 1,088.64 | $ 1,268.41 | $ 1,382.37 | $ 936.90 | $ 596.06 |
| 6.50 | $ 782.05 | $ 1,045.68 | $ 1,220.83 | $ 1,331.86 | $ 897.83 | $ 565.77 |
| 6.75 | $ 746.15 | $ 1,002.85 | $ 1,173.40 | $ 1,281.52 | $ 858.89 | $ 535.58 |
| 7.00 | $ 710.14 | $ 959.89 | $ 1,125.83 | $ 1,231.01 | $ 819.83 | $ 505.29 |
| 7.25 | $ 674.24 | $ 917.06 | $ 1,078.40 | $ 1,180.67 | $ 780.88 | $ 475.10 |
| 7.50 | $ 638.23 | $ 874.10 | $ 1,030.82 | $ 1,130.16 | $ 741.82 | $ 444.81 |
| 7.75 | $ 602.33 | $ 831.28 | $ 983.39 | $ 1,079.82 | $ 702.88 | $ 414.62 |
| 8.00 | $ 566.31 | $ 788.31 | $ 935.81 | $ 1,029.31 | $ 663.81 | $ 384.33 |