

LEBANON SUPPORT STAFF (LSS) 2026 - 2027

CIGNA SCHOOL CARE	HEALTH INSURANCE	EMP SHARE 1% EMP SHARE 7% *	BOARD SHARE 99% BOARD SHARE 93% *	CASHBACK FLAT RATE
YELLOW OPEN ACCESS 2.0 PLAN	MONTHLY PREMIUM	26 PAYS	ANNUAL BREAKDOWN Emp. Pays --- LSD Pays -- - Yr.Total	
SINGLE (Deductible \$1,500) (Out of Pocket Max \$3,000)	\$1,287.50	\$5.94 \$41.59	\$154.50 \$15,295.50 \$15,450.00 \$1,081.50 \$14,368.50	\$1,000.00
2-PERSON (Deductible \$3,000) (Out of Pocket Max \$6,000)	\$2,575.00	\$11.88 \$83.19	\$309.00 \$30,591.00 \$30,900.00 \$2,163.00 \$28,737.00	\$2,000.00
FAMILY (Deductible \$3,000) (Out of Pocket Max \$6,000)	\$3,476.50	\$16.04 \$112.31	\$417.18 \$41,300.82 \$41,718.00 \$2,920.26 \$38,797.74	\$4,000.00

*Employees shall certify in an affidavit, to be provided to the employee by the District upon request no later than July 1 of each year, that his or her spouse does not have paid health insurance available to him or her through his or her employer. If the employee does not provide an affidavit or the spouse has such insurance available and elects to be insured by the District's plan. The Lebanon School District's contribution shall be 6% less than the percentages above.

CIGNA SCHOOL CARE	HEALTH INSURANCE	EMP SHARE 1% EMP SHARE 7% *	BOARD SHARE 99% BOARD SHARE 93% * (YELLOW 2.0 EQUIVALENT)	CASHBACK FLAT RATE
ORANGE OPEN ACCESS 2.0 PLAN (HIGH-DEDUCTIBLE PLAN)	MONTHLY PREMIUM	26 PAYS	ANNUAL BREAKDOWN Emp. Pays --- LSD Pays -- - Yr.Total	
SINGLE (Deductible \$2,500) (Out of Pocket Max \$5,000)	\$1,198.50	\$0.00 \$0.51	\$0.00 \$15,295.50 \$14,382.00 \$13.50 \$14,368.50	\$1,000.00
2-PERSON (Deductible \$5,000) (Out of Pocket Max \$10,000)	\$2,397.00	\$0.00 \$1.03	\$0.00 \$30,591.00 \$28,764.00 \$27.00 \$28,737.00	\$2,000.00
FAMILY (Deductible \$5,000) (Out of Pocket Max \$10,000)	\$3,236.00	\$0.00 \$1.31	\$0.00 \$41,300.82 \$38,832.00 \$34.26 \$38,797.74	\$4,000.00

* Spousal Affidavit required for lower premium. Affidavit reduces employee premium cost to 1%, by proving spouse cannot obtain benefits with his/her employee.

CIGNA SCHOOL CARE	DENTAL INSURANCE	BOARD SHARE 100%	CASHBACK 30% of LSD CONTRIBUTION
DP 6 plan	MONTHLY PREMIUM	ANNUAL Brd. COST	
SINGLE	\$52.29	\$627.48	\$188.24
2 PERSON	\$98.13	\$1,177.56	\$353.26
FAMILY	\$164.54	\$1,974.48	\$592.34
Must work 30 hrs./wk			

NEW HAMPSHIRE RETIREMENT SYSTEM

Participation is mandatory, 7% of gross deducted, must work 30 hrs. week or .8 FTE. Matched at 13.53% by LSD. Vested after 10 yrs. participation.

LIFE INS/LONG TERM DISABILITY

Paid in full by LSD, provided through Guardian Ins., Life in. 1X annual contracted salary, LTD 66 ⅔ % of gross salary for approved disabilities, determined by GI.

HEALTH SAVINGS ACCOUNT (HSA)

For all employees participating in the SchoolCare Orange Plan 2.0, the District will contribute the following amount each school year to an HSA account: \$1500 for a single person plan, \$2,000 for a two-person plan, and \$3,000 for a family plan. The District shall deposit its annual HSA contribution in two equal sums, July 1 (or the employee's date of hire) shall be the date of the first deposit, and January 1 shall be the date of the second deposit.

FLEXIBLE SPENDING (HFSA/DEPCARE)

LSS personnel are eligible to participate in the Flexible Spending Accounts, (Health Care and/or Dependent Care, Section 125 Flexible Spending Accounts) limits are \$2,750.00 for HCRA and \$5,000.00 for DCRA. Health Trust is the Flex Plan Administrator.

TAX SHELTERED ANNUITY/403B

For employees hired after July 1, 2017, the Board will match the employee's 403b contribution at a rate of \$0.50 for every \$1.00 contributed by the employee. The employer's match shall be capped at 2% of the employee's annual wages. All new accounts will be through a plan managed by the District's Third-Party Administrator (**AMERIPRISE FINANCIAL RIVERSOURCE, ASPIRE IPX, ASPIRE FINANCIAL SERVICES, COREBRIDGE FINANCIAL [FORMERLY AIG VALIC], EQUITABLE [FORMERLY AXA], HORACE MANN LIFE INS CO, SECURITY BENEFIT**). All fees charged by the District's Third-Party Administrator or their partners and affiliates will be incurred by the District, unless the District's Third Party Administrator offers a plan of equal or similar type and/or design to the plans offered under previous collective bargaining agreements (e.g., Fidelity, Vanguard, T. Rowe Price. or VALIC), in which case new members will be responsible for any such fees. Payments will be made under the Department of Labor and IRS requirements. Enrollments in the program must be completed by December 1 for the following school year.