

certificated benefits effective 01/01/27

fte	100%	93.8%	87.5%	80%	75%	70%	60%	56.3%	50%
delta dental - HIGH Plan									
employee only \$63.16									
district pays	63.16	59.24	55.26	50.53	47.37	44.21	37.90	35.56	31.58
employee pays	-0-	3.92	7.90	12.63	15.79	18.95	25.26	27.60	31.58
employee + 1 dep \$126.28									
district pays	63.16	59.24	55.26	50.53	47.37	44.21	37.90	35.56	31.58
employee pays	63.12	67.04	71.02	75.75	78.91	82.07	88.38	90.72	94.70
employee + 2 or more dep \$213.52									
district pays	83.49	79.86	76.17	71.79	68.86	65.94	60.09	57.93	54.24
employee pays	130.03	133.66	137.35	141.73	144.66	147.58	153.43	155.59	159.28
delta dental - PREMIUM Plan									
employee only \$69.88									
district pays	63.16	59.24	55.26	50.53	47.37	44.21	37.90	35.56	31.58
employee pays	6.72	10.64	14.62	19.35	22.51	25.67	31.98	34.32	38.30
employee + 1 dep \$139.75									
district pays	63.16	59.24	55.26	50.53	47.37	44.21	37.90	35.56	31.58
employee pays	76.59	80.51	84.49	89.22	92.38	95.54	101.85	104.19	108.17
employee + 2 or more dep \$236.25									
district pays	83.49	79.86	76.17	71.79	68.86	65.94	60.09	57.93	54.24
employee pays	152.76	156.39	160.08	164.46	167.39	170.31	176.16	178.32	182.01
delta dental - LOW Plan									
employee only \$54.40									
district pays	54.40	54.40	54.40	50.53	47.37	44.21	37.90	35.56	31.58
employee pays	0.00	0.00	0.00	3.87	7.03	10.19	16.50	18.84	22.82
employee + 1 dep \$108.81									
district pays	63.16	59.24	55.26	50.53	47.37	44.21	37.90	35.56	31.58
employee pays	45.65	49.57	53.55	58.28	61.44	64.60	70.91	73.25	77.23
employee + 2 or more dep \$183.96									
district pays	83.49	79.86	76.17	71.79	68.86	65.94	60.09	57.93	54.24
employee pays	100.47	104.10	107.79	112.17	115.10	118.02	123.87	126.03	129.72

* district pays 100% of employee medical health coverage plus 70% of dependent medical health coverage (fte adjusted); no change in co-pays