# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 7.5 hours | | | | | | | | | | |
| Employee | $10,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $2,600.00 | $7,400.00 | $14,476.20 | $1,206.35 | $616.67 | $589.68 | $7,076.20 | $900.00 | $7,976.20 |
| | **$3500 /** $7000 | $3,500.00 | $6,500.00 | $14,690.76 | $1,224.23 | $541.67 | $682.56 | $8,190.76 | | $8,190.76 |
| | **$6350** / $12700 | $6,350.00 | $3,650.00 | $11,389.20 | $949.10 | $304.17 | $644.93 | $7,739.20 | | $7,739.20 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 7.5 hours | | | | | | | | | | |
| Employee + Spouse | $10,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $10,000.00 | $0.00 | $30,628.92 | $2,552.41 | $833.33 | $1,719.08 | $20,628.92 | $1,300.00 | $27,128.92 |
| | $3500 / **$7000** | $10,000.00 | $0.00 | $31,082.88 | $2,590.24 | $833.33 | $1,756.91 | $21,082.88 | | $28,082.88 |
| | $6350 / **$12700** | $10,000.00 | $0.00 | $24,097.32 | $2,008.11 | $833.33 | $1,174.78 | $14,097.32 | | $26,797.32 |
| | | | | | | | | | | |
| Employee + Children | $10,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $10,000.00 | $0.00 | $23,547.84 | $1,962.32 | $833.33 | $1,128.99 | $13,547.84 | $1,300.00 | $20,047.84 |
| | $3500 / **$7000** | $10,000.00 | $0.00 | $23,896.80 | $1,991.40 | $833.33 | $1,158.07 | $13,896.80 | | $20,896.80 |
| | $6350 / **$12700** | $10,000.00 | $0.00 | $18,526.32 | $1,543.86 | $833.33 | $710.53 | $8,526.32 | | $21,226.32 |
| | | | | | | | | | | |
| Family | $10,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $10,000.00 | $0.00 | $45,913.56 | $3,826.13 | $833.33 | $2,992.80 | $35,913.56 | $1,300.00 | $42,413.56 |
| | $3500 / **$7000** | $10,000.00 | $0.00 | $46,594.08 | $3,882.84 | $833.33 | $3,049.51 | $36,594.08 | | $43,594.08 |
| | $6350 / **$12700** | $10,000.00 | $0.00 | $36,122.64 | $3,010.22 | $833.33 | $2,176.89 | $26,122.64 | | $38,822.64 |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 7 hours | | | | | | | | | | |
| Employee | $9,333.33 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $2,426.67 | $6,906.67 | $14,476.20 | $1,206.35 | $575.56 | $630.79 | $7,569.53 | $900.00 | $8,469.53 |
| | **$3500 /** $7000 | $3,266.67 | $6,066.67 | $14,690.76 | $1,224.23 | $505.56 | $718.67 | $8,624.09 | | $8,624.09 |
| | **$6350** / $12700 | $5,926.67 | $3,406.67 | $11,389.20 | $949.10 | $283.89 | $665.21 | $7,982.53 | | $7,982.53 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 7 hours | | | | | | | | | | |
| Employee + Spouse | $9,333.33 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $9,333.33 | $0.00 | $30,628.92 | $2,552.41 | $777.78 | $1,774.63 | $21,295.59 | $1,300.00 | $27,795.59 |
| | $3500 / **$7000** | $9,333.33 | $0.00 | $31,082.88 | $2,590.24 | $777.78 | $1,812.46 | $21,749.55 | | $28,749.55 |
| | $6350 / **$12700** | $9,333.33 | $0.00 | $24,097.32 | $2,008.11 | $777.78 | $1,230.33 | $14,763.99 | | $27,463.99 |
| | | | | | | | | | | |
| Employee + Children | $9,333.33 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $9,333.33 | $0.00 | $23,547.84 | $1,962.32 | $777.78 | $1,184.54 | $14,214.51 | $1,300.00 | $20,714.51 |
| | $3500 / **$7000** | $9,333.33 | $0.00 | $23,896.80 | $1,991.40 | $777.78 | $1,213.62 | $14,563.47 | | $21,563.47 |
| | $6350 / **$12700** | $9,333.33 | $0.00 | $18,526.32 | $1,543.86 | $777.78 | $766.08 | $9,192.99 | | $21,892.99 |
| | | | | | | | | | | |
| Family | $9,333.33 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $9,333.33 | $0.00 | $45,913.56 | $3,826.13 | $777.78 | $3,048.35 | $36,580.23 | $1,300.00 | $43,080.23 |
| | $3500 / **$7000** | $9,333.33 | $0.00 | $46,594.08 | $3,882.84 | $777.78 | $3,105.06 | $37,260.75 | | $44,260.75 |
| | $6350 / **$12700** | $9,333.33 | $0.00 | $36,122.64 | $3,010.22 | $777.78 | $2,232.44 | $26,789.31 | | $39,489.31 |
| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **6.75 Hours** | | | | | | | | | | |
| **Employee** | $9,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $2,340.00 | $6,660.00 | $14,476.20 | $1,206.35 | $555.00 | $651.35 | $7,816.20 | $900.00 | $8,716.20 |
| | **$3500 /** $7000 | $3,150.00 | $5,850.00 | $14,690.76 | $1,224.23 | $487.50 | $736.73 | $8,840.76 | | $8,840.76 |
| | **$6350** / $12700 | $5,715.00 | $3,285.00 | $11,389.20 | $949.10 | $273.75 | $675.35 | $8,104.20 | | $8,104.20 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **6.75 Hours** | | | | | | | | | | |
| **Employee + Spouse** | $9,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $9,000.00 | $0.00 | $30,628.92 | $2,552.41 | $750.00 | $1,802.41 | $21,628.92 | $1,300.00 | $28,128.92 |
| | $3500 / **$7000** | $9,000.00 | $0.00 | $31,082.88 | $2,590.24 | $750.00 | $1,840.24 | $22,082.88 | | $29,082.88 |
| | $6350 / **$12700** | $9,000.00 | $0.00 | $24,097.32 | $2,008.11 | $750.00 | $1,258.11 | $15,097.32 | | $27,797.32 |
| | | | | | | | | | | |
| **Employee + Children** | $9,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $9,000.00 | $0.00 | $23,547.84 | $1,962.32 | $750.00 | $1,212.32 | $14,547.84 | $1,300.00 | $21,047.84 |
| | $3500 / **$7000** | $9,000.00 | $0.00 | $23,896.80 | $1,991.40 | $750.00 | $1,241.40 | $14,896.80 | | $21,896.80 |
| | $6350 / **$12700** | $9,000.00 | $0.00 | $18,526.32 | $1,543.86 | $750.00 | $793.86 | $9,526.32 | | $22,226.32 |
| | | | | | | | | | | |
| **Family** | $9,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $9,000.00 | $0.00 | $45,913.56 | $3,826.13 | $750.00 | $3,076.13 | $36,913.56 | $1,300.00 | $43,413.56 |
| | $3500 / **$7000** | $9,000.00 | $0.00 | $46,594.08 | $3,882.84 | $750.00 | $3,132.84 | $37,594.08 | | $44,594.08 |
| | $6350 / **$12700** | $9,000.00 | $0.00 | $36,122.64 | $3,010.22 | $750.00 | $2,260.22 | $27,122.64 | | $39,822.64 |
| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **6.5 Hours** | | | | | | | | | | |
| **Employee** | $8,666.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $2,253.33 | $6,413.33 | $14,476.20 | $1,206.35 | $534.44 | $671.91 | $8,062.87 | $900.00 | $8,962.87 |
| | **$3500 /** $7000 | $3,033.33 | $5,633.33 | $14,690.76 | $1,224.23 | $469.44 | $754.79 | $9,057.43 | | $9,057.43 |
| | **$6350** / $12700 | $5,503.33 | $3,163.33 | $11,389.20 | $949.10 | $263.61 | $685.49 | $8,225.87 | | $8,225.87 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **6.5 Hours** | | | | | | | | | | |
| **Employee + Spouse** | $8,666.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $8,666.67 | $0.00 | $30,628.92 | $2,552.41 | $722.22 | $1,830.19 | $21,962.25 | $1,300.00 | $28,462.25 |
| | $3500 / **$7000** | $8,666.67 | $0.00 | $31,082.88 | $2,590.24 | $722.22 | $1,868.02 | $22,416.21 | | $29,416.21 |
| | $6350 / **$12700** | $8,666.67 | $0.00 | $24,097.32 | $2,008.11 | $722.22 | $1,285.89 | $15,430.65 | | $28,130.65 |
| | | | | | | | | | | |
| **Employee + Children** | $8,666.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $8,666.67 | $0.00 | $23,547.84 | $1,962.32 | $722.22 | $1,240.10 | $14,881.17 | $1,300.00 | $21,381.17 |
| | $3500 / **$7000** | $8,666.67 | $0.00 | $23,896.80 | $1,991.40 | $722.22 | $1,269.18 | $15,230.13 | | $22,230.13 |
| | $6350 / **$12700** | $8,666.67 | $0.00 | $18,526.32 | $1,543.86 | $722.22 | $821.64 | $9,859.65 | | $22,559.65 |
| | | | | | | | | | | |
| **Family** | $8,666.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $8,666.67 | $0.00 | $45,913.56 | $3,826.13 | $722.22 | $3,103.91 | $37,246.89 | $1,300.00 | $43,746.89 |
| | $3500 / **$7000** | $8,666.67 | $0.00 | $46,594.08 | $3,882.84 | $722.22 | $3,160.62 | $37,927.41 | | $44,927.41 |
| | $6350 / **$12700** | $8,666.67 | $0.00 | $36,122.64 | $3,010.22 | $722.22 | $2,288.00 | $27,455.97 | | $40,155.97 |
| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **6.25 Hours** | | | | | | | | | | |
| **Employee** | $8,333.33 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $2,166.67 | $6,166.67 | $14,476.20 | $1,206.35 | $513.89 | $692.46 | $8,309.53 | $900.00 | $9,209.53 |
| | **$3500 /** $7000 | $2,916.67 | $5,416.67 | $14,690.76 | $1,224.23 | $451.39 | $772.84 | $9,274.09 | | $9,274.09 |
| | **$6350** / $12700 | $5,291.67 | $3,041.67 | $11,389.20 | $949.10 | $253.47 | $695.63 | $8,347.53 | | $8,347.53 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **6.25 Hours** | | | | | | | | | | |
| **Employee + Spouse** | $8,333.33 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $8,333.33 | $0.00 | $30,628.92 | $2,552.41 | $694.44 | $1,857.97 | $22,295.59 | $1,300.00 | $28,795.59 |
| | $3500 / **$7000** | $8,333.33 | $0.00 | $31,082.88 | $2,590.24 | $694.44 | $1,895.80 | $22,749.55 | | $29,749.55 |
| | $6350 / **$12700** | $8,333.33 | $0.00 | $24,097.32 | $2,008.11 | $694.44 | $1,313.67 | $15,763.99 | | $28,463.99 |
| | | | | | | | | | | |
| **Employee + Children** | $8,333.33 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $8,333.33 | $0.00 | $23,547.84 | $1,962.32 | $694.44 | $1,267.88 | $15,214.51 | $1,300.00 | $21,714.51 |
| | $3500 / **$7000** | $8,333.33 | $0.00 | $23,896.80 | $1,991.40 | $694.44 | $1,296.96 | $15,563.47 | | $22,563.47 |
| | $6350 / **$12700** | $8,333.33 | $0.00 | $18,526.32 | $1,543.86 | $694.44 | $849.42 | $10,192.99 | | $22,892.99 |
| | | | | | | | | | | |
| **Family** | $8,333.33 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $8,333.33 | $0.00 | $45,913.56 | $3,826.13 | $694.44 | $3,131.69 | $37,580.23 | $1,300.00 | $44,080.23 |
| | $3500 / **$7000** | $8,333.33 | $0.00 | $46,594.08 | $3,882.84 | $694.44 | $3,188.40 | $38,260.75 | | $45,260.75 |
| | $6350 / **$12700** | $8,333.33 | $0.00 | $36,122.64 | $3,010.22 | $694.44 | $2,315.78 | $27,789.31 | | $40,489.31 |
| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 6 Hours | | | | | | | | | | |
| Employee | $8,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $2,080.00 | $5,920.00 | $14,476.20 | $1,206.35 | $493.33 | $713.02 | $8,556.20 | $900.00 | $9,456.20 |
| | **$3500 /** $7000 | $2,800.00 | $5,200.00 | $14,690.76 | $1,224.23 | $433.33 | $790.90 | $9,490.76 | | $9,490.76 |
| | **$6350** / $12700 | $5,080.00 | $2,920.00 | $11,389.20 | $949.10 | $243.33 | $705.77 | $8,469.20 | | $8,469.20 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 6 Hours | | | | | | | | | | |
| Employee + Spouse | $8,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $8,000.00 | $0.00 | $30,628.92 | $2,552.41 | $666.67 | $1,885.74 | $22,628.92 | $1,300.00 | $29,128.92 |
| | $3500 / **$7000** | $8,000.00 | $0.00 | $31,082.88 | $2,590.24 | $666.67 | $1,923.57 | $23,082.88 | | $30,082.88 |
| | $6350 / **$12700** | $8,000.00 | $0.00 | $24,097.32 | $2,008.11 | $666.67 | $1,341.44 | $16,097.32 | | $28,797.32 |
| | | | | | | | | | | |
| Employee + Children | $8,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $8,000.00 | $0.00 | $23,547.84 | $1,962.32 | $666.67 | $1,295.65 | $15,547.84 | $1,300.00 | $22,047.84 |
| | $3500 / **$7000** | $8,000.00 | $0.00 | $23,896.80 | $1,991.40 | $666.67 | $1,324.73 | $15,896.80 | | $22,896.80 |
| | $6350 / **$12700** | $8,000.00 | $0.00 | $18,526.32 | $1,543.86 | $666.67 | $877.19 | $10,526.32 | | $23,226.32 |
| | | | | | | | | | | |
| Family | $8,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $8,000.00 | $0.00 | $45,913.56 | $3,826.13 | $666.67 | $3,159.46 | $37,913.56 | $1,300.00 | $44,413.56 |
| | $3500 / **$7000** | $8,000.00 | $0.00 | $46,594.08 | $3,882.84 | $666.67 | $3,216.17 | $38,594.08 | | $45,594.08 |
| | $6350 / **$12700** | $8,000.00 | $0.00 | $36,122.64 | $3,010.22 | $666.67 | $2,343.55 | $28,122.64 | | $40,822.64 |
| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 5.63 (75%) | | | | | | | | | | |
| Employee | $7,506.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $1,951.73 | $5,554.93 | $14,476.20 | $1,206.35 | $462.91 | $743.44 | $8,921.27 | $900.00 | $9,821.27 |
| | **$3500 /** $7000 | $2,627.33 | $4,879.33 | $14,690.76 | $1,224.23 | $406.61 | $817.62 | $9,811.43 | | $9,811.43 |
| | **$6350** / $12700 | $4,766.73 | $2,739.93 | $11,389.20 | $949.10 | $228.33 | $720.77 | $8,649.27 | | $8,649.27 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 5.63 (75%) | | | | | | | | | | |
| Employee + Spouse | $7,506.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $7,506.67 | $0.00 | $30,628.92 | $2,552.41 | $625.56 | $1,926.85 | $23,122.25 | $1,300.00 | $29,622.25 |
| | $3500 / **$7000** | $7,506.67 | $0.00 | $31,082.88 | $2,590.24 | $625.56 | $1,964.68 | $23,576.21 | | $30,576.21 |
| | $6350 / **$12700** | $7,506.67 | $0.00 | $24,097.32 | $2,008.11 | $625.56 | $1,382.55 | $16,590.65 | | $29,290.65 |
| | | | | | | | | | | |
| Employee + Children | $7,506.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $7,506.67 | $0.00 | $23,547.84 | $1,962.32 | $625.56 | $1,336.76 | $16,041.17 | $1,300.00 | $22,541.17 |
| | $3500 / **$7000** | $7,506.67 | $0.00 | $23,896.80 | $1,991.40 | $625.56 | $1,365.84 | $16,390.13 | | $23,390.13 |
| | $6350 / **$12700** | $7,506.67 | $0.00 | $18,526.32 | $1,543.86 | $625.56 | $918.30 | $11,019.65 | | $23,719.65 |
| | | | | | | | | | | |
| Family | $7,506.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $7,506.67 | $2,493.33 | $45,913.56 | $3,826.13 | $625.56 | $3,200.57 | $38,406.89 | $1,300.00 | $42,413.56 |
| | $3500 / **$7000** | $7,506.67 | $2,493.33 | $46,594.08 | $3,882.84 | $625.56 | $3,257.28 | $39,087.41 | | $43,594.08 |
| | $6350 / **$12700** | $7,506.67 | $2,493.33 | $36,122.64 | $3,010.22 | $625.56 | $2,384.66 | $28,615.97 | | $38,822.64 |
| | | | | | | | | | | |
| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 5.55 Hours (74%) | | | | | | | | | | |
| Employee | $7,400.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $1,924.00 | $5,476.00 | $14,476.20 | $1,206.35 | $456.33 | $750.02 | $9,000.20 | $900.00 | $10,576.20 |
| | **$3500 /** $7000 | $2,625.00 | $4,775.00 | $14,690.76 | $1,224.23 | $397.92 | $826.31 | $9,915.76 | | $10,665.76 |
| | **$6350** / $12700 | $4,762.50 | $2,637.50 | $11,389.20 | $949.10 | $219.79 | $729.31 | $8,751.70 | | $10,339.20 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 5.55 Hours (74%) | | | | | | | | | | |
| Employee + Spouse | $7,400.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $7,400.00 | $0.00 | $30,628.92 | $2,552.41 | $616.67 | $1,935.74 | $23,228.92 | $1,300.00 | $29,728.92 |
| | $3500 / **$7000** | $7,400.00 | $0.00 | $31,082.88 | $2,590.24 | $616.67 | $1,973.57 | $23,682.88 | | $30,682.88 |
| | $6350 / **$12700** | $7,400.00 | $0.00 | $24,097.32 | $2,008.11 | $616.67 | $1,391.44 | $16,697.32 | | $29,397.32 |
| | | | | | | | | | | |
| Employee + Children | $7,400.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $7,400.00 | $0.00 | $23,547.84 | $1,962.32 | $616.67 | $1,345.65 | $16,147.84 | $1,300.00 | $22,647.84 |
| | $3500 / **$7000** | $7,400.00 | $0.00 | $23,896.80 | $1,991.40 | $616.67 | $1,374.73 | $16,496.80 | | $23,496.80 |
| | $6350 / **$12700** | $7,400.00 | $0.00 | $18,526.32 | $1,543.86 | $616.67 | $927.19 | $11,126.32 | | $23,826.32 |
| | | | | | | | | | | |
| Family | $7,400.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $7,400.00 | $0.00 | $45,913.56 | $3,826.13 | $616.67 | $3,209.46 | $38,513.56 | $1,300.00 | $45,013.56 |
| | $3500 / **$7000** | $7,400.00 | $0.00 | $46,594.08 | $3,882.84 | $616.67 | $3,266.17 | $39,194.08 | | $46,194.08 |
| | $6350 / **$12700** | $7,400.00 | $0.00 | $36,122.64 | $3,010.22 | $616.67 | $2,393.55 | $28,722.64 | | $41,422.64 |
| | | | | | | | | | | |
| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 5.37 hours (72%) | | | | | | | | | | |
| Employee | $7,200.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $1,872.00 | $5,328.00 | $14,476.20 | $1,206.35 | $444.00 | $762.35 | $9,148.20 | $900.00 | $10,776.20 |
| | **$3500 /** $7000 | $2,520.00 | $4,680.00 | $14,690.76 | $1,224.23 | $390.00 | $834.23 | $10,010.76 | | $10,865.76 |
| | **$6350** / $12700 | $4,572.00 | $2,628.00 | $11,389.20 | $949.10 | $219.00 | $730.10 | $8,761.20 | | $10,539.20 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 5.37 hours (72%) | | | | | | | | | | |
| Employee + Spouse | $7,200.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $7,200.00 | $0.00 | $30,628.92 | $2,552.41 | $600.00 | $1,952.41 | $23,428.92 | $1,300.00 | $29,928.92 |
| | $3500 / **$7000** | $7,200.00 | $0.00 | $31,082.88 | $2,590.24 | $600.00 | $1,990.24 | $23,882.88 | | $30,882.88 |
| | $6350 / **$12700** | $7,200.00 | $0.00 | $24,097.32 | $2,008.11 | $600.00 | $1,408.11 | $16,897.32 | | $29,597.32 |
| | | | | | | | | | | |
| Employee + Children | $7,200.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $7,200.00 | $0.00 | $23,547.84 | $1,962.32 | $600.00 | $1,362.32 | $16,347.84 | $1,300.00 | $22,847.84 |
| | $3500 / **$7000** | $7,200.00 | $0.00 | $23,896.80 | $1,991.40 | $600.00 | $1,391.40 | $16,696.80 | | $23,696.80 |
| | $6350 / **$12700** | $7,200.00 | $0.00 | $18,526.32 | $1,543.86 | $600.00 | $943.86 | $11,326.32 | | $24,026.32 |
| | | | | | | | | | | |
| Family | $7,200.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $7,200.00 | $0.00 | $45,913.56 | $3,826.13 | $600.00 | $3,226.13 | $38,713.56 | $1,300.00 | $45,213.56 |
| | $3500 / **$7000** | $7,200.00 | $0.00 | $46,594.08 | $3,882.84 | $600.00 | $3,282.84 | $39,394.08 | | $46,394.08 |
| | $6350 / **$12700** | $7,200.00 | $0.00 | $36,122.64 | $3,010.22 | $600.00 | $2,410.22 | $28,922.64 | | $41,622.64 |
| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **5.25 Hours (.7)** | | | | | | | | | | |
| **Employee** | $7,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $1,820.00 | $5,180.00 | $14,476.20 | $1,206.35 | $431.67 | $774.68 | $9,296.20 | $900.00 | $10,196.20 |
| | **$3500 /** $7000 | $2,450.00 | $4,550.00 | $14,690.76 | $1,224.23 | $379.17 | $845.06 | $10,140.76 | | $10,140.76 |
| | **$6350** / $12700 | $4,445.00 | $2,555.00 | $11,389.20 | $949.10 | $212.92 | $736.18 | $8,834.20 | | $8,834.20 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **5.25 Hours (.7)** | | | | | | | | | | |
| **Employee + Spouse** | $7,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $7,000.00 | $0.00 | $30,628.92 | $2,552.41 | $583.33 | $1,969.08 | $23,628.92 | $1,300.00 | $30,128.92 |
| | $3500 / **$7000** | $7,000.00 | $0.00 | $31,082.88 | $2,590.24 | $583.33 | $2,006.91 | $24,082.88 | | $31,082.88 |
| | $6350 / **$12700** | $7,000.00 | $0.00 | $24,097.32 | $2,008.11 | $583.33 | $1,424.78 | $17,097.32 | | $29,797.32 |
| | | | | | | | | | | |
| **Employee + Children** | $7,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $7,000.00 | $0.00 | $23,547.84 | $1,962.32 | $583.33 | $1,378.99 | $16,547.84 | $1,300.00 | $23,047.84 |
| | $3500 / **$7000** | $7,000.00 | $0.00 | $23,896.80 | $1,991.40 | $583.33 | $1,408.07 | $16,896.80 | | $23,896.80 |
| | $6350 / **$12700** | $7,000.00 | $0.00 | $18,526.32 | $1,543.86 | $583.33 | $960.53 | $11,526.32 | | $24,226.32 |
| | | | | | | | | | | |
| **Family** | $7,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $7,000.00 | $0.00 | $45,913.56 | $3,826.13 | $583.33 | $3,242.80 | $38,913.56 | $1,300.00 | $45,413.56 |
| | $3500 / **$7000** | $7,000.00 | $0.00 | $46,594.08 | $3,882.84 | $583.33 | $3,299.51 | $39,594.08 | | $46,594.08 |
| | $6350 / **$12700** | $7,000.00 | $0.00 | $36,122.64 | $3,010.22 | $583.33 | $2,426.89 | $29,122.64 | | $41,822.64 |
| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 5 Hours (.67) | | | | | | | | | | |
| Employee | $6,666.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $1,733.33 | $4,933.33 | $14,476.20 | $1,206.35 | $411.11 | $795.24 | $9,542.87 | $900.00 | $10,442.87 |
| | **$3500 /** $7000 | $2,333.33 | $4,333.33 | $14,690.76 | $1,224.23 | $361.11 | $863.12 | $10,357.43 | | $10,357.43 |
| | **$6350** / $12700 | $4,233.33 | $2,433.33 | $11,389.20 | $949.10 | $202.78 | $746.32 | $8,955.87 | | $8,955.87 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 5 Hours (.67) | | | | | | | | | | |
| Employee + Spouse | $6,666.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $6,666.67 | $0.00 | $30,628.92 | $2,552.41 | $555.56 | $1,996.85 | $23,962.25 | $1,300.00 | $30,462.25 |
| | $3500 / **$7000** | $6,666.67 | $0.00 | $31,082.88 | $2,590.24 | $555.56 | $2,034.68 | $24,416.21 | | $31,416.21 |
| | $6350 / **$12700** | $6,666.67 | $0.00 | $24,097.32 | $2,008.11 | $555.56 | $1,452.55 | $17,430.65 | | $30,130.65 |
| | | | | | | | | | | |
| Employee + Children | $6,666.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $6,666.67 | $0.00 | $23,547.84 | $1,962.32 | $555.56 | $1,406.76 | $16,881.17 | $1,300.00 | $23,381.17 |
| | $3500 / **$7000** | $6,666.67 | $0.00 | $23,896.80 | $1,991.40 | $555.56 | $1,435.84 | $17,230.13 | | $24,230.13 |
| | $6350 / **$12700** | $6,666.67 | $0.00 | $18,526.32 | $1,543.86 | $555.56 | $988.30 | $11,859.65 | | $24,559.65 |
| | | | | | | | | | | |
| Family | $6,666.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $6,666.67 | $0.00 | $45,913.56 | $3,826.13 | $555.56 | $3,270.57 | $39,246.89 | $1,300.00 | $45,746.89 |
| | $3500 / **$7000** | $6,666.67 | $0.00 | $46,594.08 | $3,882.84 | $555.56 | $3,327.28 | $39,927.41 | | $46,927.41 |
| | $6350 / **$12700** | $6,666.67 | $0.00 | $36,122.64 | $3,010.22 | $555.56 | $2,454.66 | $29,455.97 | | $42,155.97 |
| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **4.5 Hours** | | | | | | | | | | |
| **Employee** | $6,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $1,560.00 | $4,440.00 | $14,476.20 | $1,206.35 | $370.00 | $836.35 | $10,036.20 | $900.00 | $10,936.20 |
| | **$3500 /** $7000 | $2,100.00 | $3,900.00 | $14,690.76 | $1,224.23 | $325.00 | $899.23 | $10,790.76 | | $10,790.76 |
| | **$6350** / $12700 | $3,810.00 | $2,190.00 | $11,389.20 | $949.10 | $182.50 | $766.60 | $9,199.20 | | $9,199.20 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **4.5 Hours** | | | | | | | | | | |
| **Employee + Spouse** | $6,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $6,000.00 | $0.00 | $30,628.92 | $2,552.41 | $500.00 | $2,052.41 | $24,628.92 | $1,300.00 | $31,128.92 |
| | $3500 / **$7000** | $6,000.00 | $0.00 | $31,082.88 | $2,590.24 | $500.00 | $2,090.24 | $25,082.88 | | $32,082.88 |
| | $6350 / **$12700** | $6,000.00 | $0.00 | $24,097.32 | $2,008.11 | $500.00 | $1,508.11 | $18,097.32 | | $30,797.32 |
| | | | | | | | | | | |
| **Employee + Children** | $6,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $6,000.00 | $0.00 | $23,547.84 | $1,962.32 | $500.00 | $1,462.32 | $17,547.84 | $1,300.00 | $24,047.84 |
| | $3500 / **$7000** | $6,000.00 | $0.00 | $23,896.80 | $1,991.40 | $500.00 | $1,491.40 | $17,896.80 | | $24,896.80 |
| | $6350 / **$12700** | $6,000.00 | $0.00 | $18,526.32 | $1,543.86 | $500.00 | $1,043.86 | $12,526.32 | | $25,226.32 |
| | | | | | | | | | | |
| **Family** | $6,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $6,000.00 | $0.00 | $45,913.56 | $3,826.13 | $500.00 | $3,326.13 | $39,913.56 | $1,300.00 | $46,413.56 |
| | $3500 / **$7000** | $6,000.00 | $0.00 | $46,594.08 | $3,882.84 | $500.00 | $3,382.84 | $40,594.08 | | $47,594.08 |
| | $6350 / **$12700** | $6,000.00 | $0.00 | $36,122.64 | $3,010.22 | $500.00 | $2,510.22 | $30,122.64 | | $42,822.64 |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 4.35 hours (58%) | | | | | | | | | | |
| Employee | $5,800.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $1,508.00 | $4,292.00 | $14,476.20 | $1,206.35 | $357.67 | $848.68 | $10,184.20 | $900.00 | $11,084.20 |
| | **$3500 /** $7000 | $2,030.00 | $3,770.00 | $14,690.76 | $1,224.23 | $314.17 | $910.06 | $10,920.76 | | $10,920.76 |
| | **$6350** / $12700 | $3,683.00 | $2,117.00 | $11,389.20 | $949.10 | $176.42 | $772.68 | $9,272.20 | | $9,272.20 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 4.35 hours (58%) | | | | | | | | | | |
| Employee + Spouse | $5,800.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $5,800.00 | $0.00 | $30,628.92 | $2,552.41 | $483.33 | $2,069.08 | $24,828.92 | $1,300.00 | $31,328.92 |
| | $3500 / **$7000** | $5,800.00 | $0.00 | $31,082.88 | $2,590.24 | $483.33 | $2,106.91 | $25,282.88 | | $32,282.88 |
| | $6350 / **$12700** | $5,800.00 | $0.00 | $24,097.32 | $2,008.11 | $483.33 | $1,524.78 | $18,297.32 | | $30,997.32 |
| | | | | | | | | | | |
| Employee + Children | $5,800.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $5,800.00 | $0.00 | $23,547.84 | $1,962.32 | $483.33 | $1,478.99 | $17,747.84 | $1,300.00 | $24,247.84 |
| | $3500 / **$7000** | $5,800.00 | $0.00 | $23,896.80 | $1,991.40 | $483.33 | $1,508.07 | $18,096.80 | | $25,096.80 |
| | $6350 / **$12700** | $5,800.00 | $0.00 | $18,526.32 | $1,543.86 | $483.33 | $1,060.53 | $12,726.32 | | $25,426.32 |
| | | | | | | | | | | |
| Family | $5,800.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $5,800.00 | $0.00 | $45,913.56 | $3,826.13 | $483.33 | $3,342.80 | $40,113.56 | $1,300.00 | $46,613.56 |
| | $3500 / **$7000** | $5,800.00 | $0.00 | $46,594.08 | $3,882.84 | $483.33 | $3,399.51 | $40,794.08 | | $47,794.08 |
| | $6350 / **$12700** | $5,800.00 | $0.00 | $36,122.64 | $3,010.22 | $483.33 | $2,526.89 | $30,322.64 | | $43,022.64 |
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| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **4.13 Hours** | | | | | | | | | | |
| **Employee** | $5,506.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $1,431.73 | $4,074.93 | $14,476.20 | $1,206.35 | $339.58 | $866.77 | $10,401.27 | $900.00 | $11,301.27 |
| | **$3500 /** $7000 | $1,927.33 | $3,579.33 | $14,690.76 | $1,224.23 | $298.28 | $925.95 | $11,111.43 | | $11,111.43 |
| | **$6350** / $12700 | $3,496.73 | $2,009.93 | $11,389.20 | $949.10 | $167.49 | $781.61 | $9,379.27 | | $9,379.27 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **4.13 Hours** | | | | | | | | | | |
| **Employee + Spouse** | $5,506.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $5,506.67 | $0.00 | $30,628.92 | $2,552.41 | $458.89 | $2,093.52 | $25,122.25 | $1,300.00 | $31,622.25 |
| | $3500 / **$7000** | $5,506.67 | $0.00 | $31,082.88 | $2,590.24 | $458.89 | $2,131.35 | $25,576.21 | | $32,576.21 |
| | $6350 / **$12700** | $5,506.67 | $0.00 | $24,097.32 | $2,008.11 | $458.89 | $1,549.22 | $18,590.65 | | $31,290.65 |
| | | | | | | | | | | |
| **Employee + Children** | $5,506.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $5,506.67 | $0.00 | $23,547.84 | $1,962.32 | $458.89 | $1,503.43 | $18,041.17 | $1,300.00 | $24,541.17 |
| | $3500 / **$7000** | $5,506.67 | $0.00 | $23,896.80 | $1,991.40 | $458.89 | $1,532.51 | $18,390.13 | | $25,390.13 |
| | $6350 / **$12700** | $5,506.67 | $0.00 | $18,526.32 | $1,543.86 | $458.89 | $1,084.97 | $13,019.65 | | $25,719.65 |
| | | | | | | | | | | |
| **Family** | $5,506.67 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $5,506.67 | $0.00 | $45,913.56 | $3,826.13 | $458.89 | $3,367.24 | $40,406.89 | $1,300.00 | $46,906.89 |
| | $3500 / **$7000** | $5,506.67 | $0.00 | $46,594.08 | $3,882.84 | $458.89 | $3,423.95 | $41,087.41 | | $48,087.41 |
| | $6350 / **$12700** | $5,506.67 | $0.00 | $36,122.64 | $3,010.22 | $458.89 | $2,551.33 | $30,615.97 | | $43,315.97 |
| | | | | | | | | | | |
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# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **4 Hours** | | | | | | | | | | |
| **Employee** | $5,333.33 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $1,386.67 | $3,946.67 | $14,476.20 | $1,206.35 | $328.89 | $877.46 | $10,529.53 | $900.00 | $11,429.53 |
| | **$3500 /** $7000 | $1,866.67 | $3,466.67 | $14,690.76 | $1,224.23 | $288.89 | $935.34 | $11,224.09 | | $11,224.09 |
| | **$6350** / $12700 | $3,386.67 | $1,946.67 | $11,389.20 | $949.10 | $162.22 | $786.88 | $9,442.53 | | $9,442.53 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| **4 Hours** | | | | | | | | | | |
| **Employee + Spouse** | $5,333.33 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $5,333.33 | $0.00 | $30,628.92 | $2,552.41 | $444.44 | $2,107.97 | $25,295.59 | $1,300.00 | $31,795.59 |
| | $3500 / **$7000** | $5,333.33 | $0.00 | $31,082.88 | $2,590.24 | $444.44 | $2,145.80 | $25,749.55 | | $32,749.55 |
| | $6350 / **$12700** | $5,333.33 | $0.00 | $24,097.32 | $2,008.11 | $444.44 | $1,563.67 | $18,763.99 | | $31,463.99 |
| | | | | | | | | | | |
| **Employee + Children** | $5,333.33 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $5,333.33 | $0.00 | $23,547.84 | $1,962.32 | $444.44 | $1,517.88 | $18,214.51 | $1,300.00 | $24,714.51 |
| | $3500 / **$7000** | $5,333.33 | $0.00 | $23,896.80 | $1,991.40 | $444.44 | $1,546.96 | $18,563.47 | | $25,563.47 |
| | $6350 / **$12700** | $5,333.33 | $0.00 | $18,526.32 | $1,543.86 | $444.44 | $1,099.42 | $13,192.99 | | $25,892.99 |
| | | | | | | | | | | |
| **Family** | $5,333.33 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $5,333.33 | $0.00 | $45,913.56 | $3,826.13 | $444.44 | $3,381.69 | $40,580.23 | $1,300.00 | $47,080.23 |
| | $3500 / **$7000** | $5,333.33 | $0.00 | $46,594.08 | $3,882.84 | $444.44 | $3,438.40 | $41,260.75 | | $48,260.75 |
| | $6350 / **$12700** | $5,333.33 | $0.00 | $36,122.64 | $3,010.22 | $444.44 | $2,565.78 | $30,789.31 | | $43,489.31 |
| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 3.75 hours (50%) | | | | | | | | | | |
| Employee | $5,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $1,300.00 | $3,700.00 | $14,476.20 | $1,206.35 | $308.33 | $898.02 | $10,776.20 | $900.00 | $11,676.20 |
| | **$3500 /** $7000 | $1,750.00 | $3,250.00 | $14,690.76 | $1,224.23 | $270.83 | $953.40 | $11,440.76 | | $11,440.76 |
| | **$6350** / $12700 | $3,175.00 | $1,825.00 | $11,389.20 | $949.10 | $152.08 | $797.02 | $9,564.20 | | $9,564.20 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 3.75 hours (50%) | | | | | | | | | | |
| Employee + Spouse | $5,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $5,000.00 | $0.00 | $30,628.92 | $2,552.41 | $416.67 | $2,135.74 | $25,628.92 | $1,300.00 | $32,128.92 |
| | $3500 / **$7000** | $5,000.00 | $0.00 | $31,082.88 | $2,590.24 | $416.67 | $2,173.57 | $26,082.88 | | $33,082.88 |
| | $6350 / **$12700** | $5,000.00 | $0.00 | $24,097.32 | $2,008.11 | $416.67 | $1,591.44 | $19,097.32 | | $31,797.32 |
| | | | | | | | | | | |
| Employee + Children | $5,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $5,000.00 | $0.00 | $23,547.84 | $1,962.32 | $416.67 | $1,545.65 | $18,547.84 | $1,300.00 | $25,047.84 |
| | $3500 / **$7000** | $5,000.00 | $0.00 | $23,896.80 | $1,991.40 | $416.67 | $1,574.73 | $18,896.80 | | $25,896.80 |
| | $6350 / **$12700** | $5,000.00 | $0.00 | $18,526.32 | $1,543.86 | $416.67 | $1,127.19 | $13,526.32 | | $26,226.32 |
| | | | | | | | | | | |
| Family | $5,000.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $5,000.00 | $0.00 | $45,913.56 | $3,826.13 | $416.67 | $3,409.46 | $40,913.56 | $1,300.00 | $47,413.56 |
| | $3500 / **$7000** | $5,000.00 | $0.00 | $46,594.08 | $3,882.84 | $416.67 | $3,466.17 | $41,594.08 | | $48,594.08 |
| | $6350 / **$12700** | $5,000.00 | $0.00 | $36,122.64 | $3,010.22 | $416.67 | $2,593.55 | $31,122.64 | | $43,822.64 |
| | | | | | | | | | | |
| | | | | | | | | | | |

# 2027 Monthly Rates

| Teachers | District Contribution | Total VEBA Contribution | Balance left for Premium | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 3.5 hours (46.7%) | | | | | | | | | | |
| Employee | $4,670.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | **$2600** / $5200 | $1,300.00 | $3,370.00 | $14,476.20 | $1,206.35 | $280.83 | $925.52 | $11,106.20 | $900.00 | $12,006.20 |
| | **$3500 /** $7000 | $1,750.00 | $2,920.00 | $14,690.76 | $1,224.23 | $243.33 | $980.90 | $11,770.76 | | $11,770.76 |
| | **$6350** / $12700 | $3,175.00 | $1,495.00 | $11,389.20 | $949.10 | $124.58 | $824.52 | $9,894.20 | | $9,894.20 |
| | | | | | | | | | | |

| Teachers | District Contribution | Total District Premium Contribution | Balance left for VEBA | Annual Premium | Monthly Premium | Monthly Amount Paid towards Premium | Monthly Premium Cost to Employee | Annual Premium Cost to Employee | Plan Costs beyond Deductible | Max OOP Total Annual Employee Cost |
|---|---|---|---|---|---|---|---|---|---|---|
| 3.5 hours (46.7%) | | | | | | | | | | |
| Employee + Spouse | $4,670.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $4,670.00 | $0.00 | $30,628.92 | $2,552.41 | $416.67 | $2,135.74 | $25,628.92 | $1,300.00 | $32,128.92 |
| | $3500 / **$7000** | $4,670.00 | $0.00 | $31,082.88 | $2,590.24 | $416.67 | $2,173.57 | $26,082.88 | | $33,082.88 |
| | $6350 / **$12700** | $4,670.00 | $0.00 | $24,097.32 | $2,008.11 | $416.67 | $1,591.44 | $19,097.32 | | $31,797.32 |
| | | | | | | | | | | |
| Employee + Children | $4,670.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $4,670.00 | $0.00 | $23,547.84 | $1,962.32 | $416.67 | $1,545.65 | $18,547.84 | $1,300.00 | $25,047.84 |
| | $3500 / **$7000** | $4,670.00 | $0.00 | $23,896.80 | $1,991.40 | $416.67 | $1,574.73 | $18,896.80 | | $25,896.80 |
| | $6350 / **$12700** | $4,670.00 | $0.00 | $18,526.32 | $1,543.86 | $416.67 | $1,127.19 | $13,526.32 | | $26,226.32 |
| | | | | | | | | | | |
| Family | $4,670.00 | ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy*** | | | | | | | | |
| | $2600 / **$5200** | $4,670.00 | $0.00 | $45,913.56 | $3,826.13 | $416.67 | $3,409.46 | $40,913.56 | $1,300.00 | $47,413.56 |
| | $3500 / **$7000** | $4,670.00 | $0.00 | $46,594.08 | $3,882.84 | $416.67 | $3,466.17 | $41,594.08 | | $48,594.08 |
| | $6350 / **$12700** | $4,670.00 | $0.00 | $36,122.64 | $3,010.22 | $416.67 | $2,593.55 | $31,122.64 | | $43,822.64 |