2027 Benefits Summaries

ANN ARBOR PUBLIC SCHOOLS

Class 02 Principals & Directors

January 1, 2027 - December 31, 2027

Health Insurance Options

	Priority Health HMO 1	Priority Health HMO 2	Priority Health HMO 3	Priority Health PPO 1	Priority Health PPO 2	Priority Health PPO H.S.A $1,750	Priority Health PPO H.S.A $2,000	Cash in Lieu of Medical Insurance
	Priority Health	Priority Health	Priority Health	Priority Health	Priority Health	Priority Health	Priority Health	
Deductible **Single** Coverage	$0	$250	$500	$250	$500	$1,750	$2,000	
Deductible **2 Person/Family** Coverage	$0	$500	$1,000	$500	$1,000	$3,500	$4,000	
Coinsurance	0% / 100%	10% / 90%	20% / 80%	0% / 100%	10% / 90%	0% / 100%	20% / 80%	
Coinsurance Maximum	None	$1,500 / $3,000	$2,000 / $4,000	None	$1,000 / $2,000	None	None	
Out of Pocket Maximum	$9,100 / $18,200	$9,200 / $18,400	$9,200 / $18,400	$9,100 / $18,200	$9,200 / $18,400	$3,500 / $7,000	$5,000 / $10,000	**$2,000**
Prescription (Rx) Drugs Copay	$10 / $40	$10 / $40 / $80	20% after deductible	$10 / $40	$10 / $40 / $80	$10 / $40 / $80 after deductible	$10 / $40 / $80 after deductible	
Office Visit Copay	$20	$20	$30	$20	$20	0% after deductible	20% after deductible	
Urgent Care Copay	$20	$50	$75	$40 after deductible	$50	0% after deductible	20% after deductible	
Emergency Room Copay	$50	$150 after deductible	$150 after deductible	$50 after deductible	$150 after deductible	0% after deductible	20% after deductible	**Paid** on the **1st paycheck** of each month. New hire amount is prorated.
Hospital/Surgical Coverage	Covered 100%	10% after deductible	20% after deductible	0% after deductible	10% after deductible	0% after deductible	20% after deductible	
Specialists	$20 Referral Required for non-participating specialists	$40	$50	$20 after deductible	$40	0% after deductible	20% after deductible	(No payout July or August)
Health Savings Account (HSA)	--	--	--	--	--	**AAPS HSA quarterly contributions**** $437.50	**AAPS HSA quarterly contributions**** $500.00	

12 Month Cost	$15,524.52	$11,635.32	$7,350.96	$18,501.96	$20,732.40	$11,078.08	$3,543.80
School Year Only Pay Deductions based on **20 pays**	$776.23	$581.77	$367.55	$925.10	$1,036.62	$553.90	$177.19
Year Round Pay Deductions based on **24 pays***	$646.86	$484.81	$306.29	$770.92	$863.85	$461.59	$147.66

*Benefits Deductions will occur on the first 2 paychecks of each month

**AAPS Funds deductible through quarterly deposits into employee's HSA, only while employee is enrolled in the high-deductible health plan. New hire amount is prorated.

Vision - Blue Cross/Vision Service Plan (VSP)

Blue Cross Blue Shield of Michigan	Employer Paid	Coordination for Vision Eligible every 12 months from date of service • $5 copay for eye exam • $10 copay for lenses & frames • $130 covered for contact lenses & exam (replaces glasses)

Dental - Blue Cross Dental

Blue Cross Blue Shield of Michigan	Employer Paid	Coordination for Dental $2,000 maximum per person each benefit year for classes I, II & III services • 100% Coverage - Diagnostic & Preventive Services (Class I) • 75% Coverage - Basic & Major Services (Class II & III) • 50% Coverage - Orthodontics (Class IV) up to age 19, $2,000 lifetime max per person January - December benefit year

Unum Life, AD&D, LTD
Term Life, Accidental Death and Dismemberment (AD&D), Long Term Disability (LTD) Insurance

unum	Employer Paid	Life & AD&D Coverage Amount: 1x annual salary up to $100,000 maximum (premiums paid by AAPS) Employee may purchase up to $50,000 of additional Life/AD&D coverage LTD Pays 66.67% up to $8,000 monthly maximum Waiting period 90 calendar days

Rates listed above are for **Full Time employees**, rates for Part Time employees vary, see HR for details

Plans based on **January 1 - December 31 coverage**, rates subject to changes based on partial year coverage

When on Leave of Absence, insurance will terminate once taken off payroll with AAPS