INSURANCE PREMIUM COST SHEET

12 MONTH NON-CERTIFIED EMPLOYEES

Effective 1/1/26 - 12/31/26

MEDICAL PLAN OPTIONS	MONTHLY	DISTRICT %	DISTRICT $	EMPLOYEE %	EMPLOYEE $	PER PAYCHECK
HMO Blue Adv 3 - B14332 *(District Rate-Setting Plan)*						
SINGLE	$833.00	92.5%	$770.53	7.5%	$62.47	$31.24
SINGLE +1 *(dependent or spouse)*	$1,959.00	70.0%	$1,371.30	30.0%	$587.70	$293.85
FAMILY	$2,042.00	70.0%	$1,429.40	30.0%	$612.60	$306.30
HMO Blue Adv 2 - B03881						
SINGLE	$858.00	89.8%	$770.53	10.2%	$87.47	$43.74
SINGLE +1 *(dependent or spouse)*	$2,007.00	68.3%	$1,371.30	31.7%	$635.70	$317.85
FAMILY	$2,100.00	68.1%	$1,429.40	31.9%	$670.60	$335.30
BCBS - PPO - 165611 *(District Rate-Setting Plan)*						
SINGLE	$1,035.00	87.0%	$900.00	13.0%	$135.00	$67.50
SINGLE +1 *(dependent or spouse)*	$2,394.00	69.0%	$1,650.80	31.0%	$743.20	$371.60
FAMILY	$2,611.00	69.0%	$1,802.70	31.0%	$808.30	$404.15
BCBS - PPO - 165625						
SINGLE	$1,100.00	81.8%	$900.00	18.2%	$200.00	$100.00
SINGLE +1 *(dependent or spouse)*	$2,473.00	66.8%	$1,650.80	33.2%	$822.20	$411.10
FAMILY	$2,731.00	66.0%	$1,802.70	34.0%	$928.30	$464.15

DENTAL PLAN OPTIONS	MONTHLY	DISTRICT	DISTRICT	EMPLOYEE	EMPLOYEE	PER PAYCHECK
BlueCare Dental PPO						
SINGLE	$46.00	83.2%	$38.28	16.8%	$7.72	$3.86
SINGLE +1 *(dependent or spouse)*	$92.00	65.8%	$60.57	34.2%	$31.43	$15.72
FAMILY	$136.00	65.8%	$89.55	34.2%	$46.45	$23.23

VOLUNTARY VISION	MONTHLY	DISTRICT	DISTRICT	EMPLOYEE	EMPLOYEE	PER PAYCHECK
PPO & HMO - Vision Service Plan *(Group Vision 175 Plan)*						
SINGLE	$9.47	0.00%	$0.00	100.00%	$9.47	$4.74
SINGLE +1 *(dependent or spouse)*	$15.99	0.00%	$0.00	100.00%	$15.99	$8.00
FAMILY	$21.72	0.00%	$0.00	100.00%	$21.72	$10.86

BASIC LIFE/AD&D	MONTHLY	DISTRICT	DISTRICT	EMPLOYEE	EMPLOYEE	PER PAYCHECK
$12,000 Basic Life/AD&D *(Contact District Office for additional voluntary life insurance coverage)*						
EMPLOYEE (District Provided)	$1.20	100.00%	$1.20	0.00%	$0.00	$0.00

OPTIONAL WORK SITE BENEFITS	
	Optional work site benefits may be offered by the district and are voluntary with any such benefits paid for, in full, by the employee.