

<i>Schedule of Insurance Premiums and Payroll Deductions</i> <i>School Nurses^/Custodians/Maintenance/Grounds</i> <i>Tier III*/12-Month Office Professionals</i> <i>Fiscal Year 2026</i>					
Health Insurance Premiums					
	Monthly Premium	Yearly Premium	Employer Contribution	Employee Contribution	Employee Deduction per Check (26)
Employee Only-PPO	954.00	11,448.00	11,104.56	343.44	13.20
Employee Only-HSA	808.00	9,696.00	9,405.12	290.88	11.18
HSA Employer Contribution Single			400.00	→Per Check→	15.39
Employee Only-HMO	792.00	9,504.00	9,218.88	285.12	10.96
Employee+Spouse-PPO	2,286.00	27,432.00	26,060.40	1,371.60	52.75
Employee+Spouse-HSA	1,936.00	23,232.00	22,070.40	1,161.60	44.67
HSA Employer Contribution Family			1,050.00	→Per Check→	40.39
Employee+Spouse-HMO	1,899.00	22,788.00	21,648.60	1,139.40	43.82
Employee+Children-PPO	2,097.00	25,164.00	23,905.80	1,258.20	48.39
Employee+Children-HSA	1,776.00	21,312.00	20,246.40	1,065.60	40.98
HSA Employer Contribution Family			1,050.00	→Per Check→	40.39
Employee+Children-HMO	1,740.00	20,880.00	19,836.00	1,044.00	40.15
Family-PPO	2,723.00	32,676.00	30,388.68	2,287.32	87.97
Family-HSA	2,303.00	27,636.00	25,701.48	1,934.52	74.40
HSA Employer Contribution Family			1,050.00	→Per Check→	40.39
Family-HMO	2,256.00	27,072.00	25,176.96	1,895.04	72.88
<i>*Support Staff can change from HSA or HMO Plan to Traditional PPO Plan in either January or July after 3 full years of employment.</i>					
Dental Insurance Premiums					
	Monthly Premium	Yearly Premium	Employer Contribution	Employee Contribution	Employee Deduction per Check (26)
Employee Only	48.00	576.00	558.72	17.28	0.66
Employee+Spouse	97.00	1,164.00	1,105.80	58.20	2.23
Employee+Children	116.00	1,392.00	1,322.40	69.60	2.67
Family	159.00	1,908.00	1,774.44	133.56	5.13
Vision Insurance Premiums					
	Monthly Premium	Yearly Premium	Employer Contribution	Employee Contribution	Employee Deduction per Check (26)
Employee	9.49	113.88	0.00	113.88	4.38
Employee + Spouse	15.18	182.16	0.00	182.16	7.01
Employee + Child/Children	15.48	185.76	0.00	185.76	7.14
Employee + Family	24.98	299.76	0.00	299.76	11.53
AFLAC Premiums					
All premiums as per individual contract at time of enrollment and relative to selected coverage					
Basic Life Insurance					
All premiums computed at .060/\$1,000 and paid by Employer					

*Tier III Positions Include:

Help Desk/Webmaster

Network Administrator

Student Information Manager

Technology Technicians

Transportation Dispatcher

Transportation Maintenance Helper

Transportation Mechanic

Transportation Assistant Mechanic

Transportation Training & Safety Officer

^Excluding Certified School Nurse