D49 - BENEFITS 2024

Monthly Premiums (full time staff only)

PPO	Employee	EE + Spouse	EE + Child(ren)	Family
Total Premium	\$870.00	\$1,290.00	\$1,365.00	\$1,785.00
District Contribution	\$715.00	\$755.00	\$905.00	\$1,070.00
Employee Cost	\$155.00	\$535.00	\$460.00	\$715.00

HDHP+ H.S.A.	Employee	EE + Spouse	EE + Child(ren)	Family
Total Premium	\$670.00	\$1,015.00	\$1,090.00	\$1,510.00
District Contribution	\$615.00	\$630.00	\$780.00	\$945.00
District Contribution H.S.A.	\$100.00	\$125.00	\$125.00	\$125.00
Employee Cost	\$55.00	\$385.00	\$310.00	\$565.00

<u>DENTAL</u>	Employee	EE + Spouse	EE + Child(ren)	Family
Total Premium	\$36.17	\$74.16	\$79.84	\$140.48
District Contribution	\$36.17	\$36.17	\$36.17	\$36.17
Employee Cost	\$0.00	\$37.99	\$43.67	\$104.31

VISION	Employee	EE + Spouse	EE + Child(ren)	Family
Total Contribution	\$5.98	\$12.94	\$13.92	\$22.82
District Contribution	\$5.98	\$5.98	\$5.98	\$5.98
Employee Cost	\$0.00	\$6.96	\$7.94	\$16.84

Life - 1x annual salary, paid 100% by district Long term disability - paid 100% by district