

2026 Custodian Insurance Premiums effective January 1, 2026

Option 1 BCBSM PPO \$2000/\$4000 100% Plan	2026 Monthly Rate & Taxes	Employer Monthly Insurance Contribution	Employee Portion Per Month	Employee Jan-Dec 2026 Insurance Premiums	Employee Per Pay Insurance Premium 26 Pays Jan-Dec 2026
Single	\$ 835.30	\$ 500.00	\$ 335.30	\$ 4,023.60	\$ 154.75
2 Person	\$ 1,934.59	\$ 500.00	\$ 1,434.59	\$ 17,215.08	\$ 662.12
Family	\$ 2,455.28	\$ 500.00	\$ 1,955.28	\$ 23,463.36	\$ 902.44

Option 2 BCBSM PPO \$1700/\$3400 80% Plan	2026 Monthly Rate & Taxes	Employer Monthly Insurance Contribution	Employee Portion Per Month	Employee Jan-Dec 2026 Insurance Premiums	Employee Per Pay Insurance Premium 26 Pays Jan-Dec 2026
Single	\$ 775.97	\$ 500.00	\$ 275.97	\$ 3,311.64	\$ 127.37
2 Person	\$ 1,792.17	\$ 500.00	\$ 1,292.17	\$ 15,506.04	\$ 596.39
Family	\$ 2,277.26	\$ 500.00	\$ 1,777.26	\$ 21,327.12	\$ 820.27

Option 3 BCBSM PPO \$2500/\$5000 100% Plan	2026 Monthly Rate & Taxes	Employer Monthly Insurance Contribution	Employee Portion Per Month	Employee Jan-Dec 2026 Insurance Premiums	Employee Per Pay Insurance Premium 26 Pays Jan-Dec 2026
Single	\$ 794.49	\$ 500.00	\$ 294.49	\$ 3,533.88	\$ 135.92
2 Person	\$ 1,836.64	\$ 500.00	\$ 1,336.64	\$ 16,039.68	\$ 616.91
Family	\$ 2,332.85	\$ 500.00	\$ 1,832.85	\$ 21,994.20	\$ 845.93

Option 4 Blue Care Network POS \$1700/\$3400 100% Plan	2026 Monthly Rate & Taxes	Employer Monthly Insurance Contribution	Employee Portion Per Month	Employee Jan-Dec 2026 Insurance Premiums	Employee Per Pay Insurance Premium 26 Pays Jan-Dec 2026
Single	\$ 684.18	\$ 500.00	\$ 184.18	\$ 2,210.16	\$ 85.01
2 Person	\$ 1,571.87	\$ 500.00	\$ 1,071.87	\$ 12,862.44	\$ 494.71
Family	\$ 2,001.89	\$ 500.00	\$ 1,501.89	\$ 18,022.68	\$ 693.18

*The Board of Education will provide a \$1,300 HSA allocation to be distributed to the membership participating in the health care program. This prorated allocation will be deposited the first business day of January to the health savings account established by the member. The district's combined health insurance and HSA contribution shall not exceed the single payer cap amount set by PA 152. **The Board of Education will provide \$5,000 life insurance and AD&D.

OR

Cash in Lieu of	Cash in Lieu
8 Hours/260 Days Per Year	\$ 350.00

AND

PAK B - Dental/Vision/Life					
Status	2026 Monthly Insurance Rates	Employer Monthly Contribution 90%	Employee Monthly Insurance Premiums 10%	Employee Jan-Dec 2026 Insurance Premiums	Employee Per Pay Insurance Premium 26 Pays Jan-Dec 2026
Single	\$ 91.94	\$ 82.75	\$ 9.19	\$ 110.33	\$ 4.24
Two Person	\$ 150.50	\$ 135.45	\$ 15.05	\$ 180.60	\$ 6.95
Family	\$ 225.18	\$ 202.66	\$ 22.52	\$ 270.22	\$ 10.39

Cash in lieu payments will be every second pay.
Payroll deductions are subject to change if there is a change in insurance rates. New dental rates effective July 1.

Open enrollment is Nov. 10-26 with an effective date of January 1.