

**2026 January-August Full Time Teacher Insurance Rates and Payroll Deductions**

<b>MESSA Choices Pak A \$300/\$600</b> Medical/Dental/Vision/Life/LTD	2026 Medical Rate Monthly Rate	2026 Employer Cap Per Month	Employee 2026 Medical Monthly Premium	2026 Dental/Vision/Life/LTD Monthly Rate	20% Employee 2026 Dental/Vision/Life/LTD Monthly Premium	Employee 2026 Medical/Dental Vision/Life/LTD Monthly Premium	Employee Jan. - Aug. 2026 8 Months of Premiums	Employee Per Pay Insurance Premiums 18 Pays 01/02/26-08/28/26	Employee Per Pay Insurance Premiums 13 Pays 01/02/26-06/19/26
Single	\$ 1,018.46	\$ 661.84	\$ 356.62	\$ 62.42	\$ 12.48	\$ 369.10	\$ 2,952.80	\$ 164.04	\$ 227.14
2 Person	\$ 2,289.66	\$ 1,384.12	\$ 905.54	\$ 98.89	\$ 19.78	\$ 925.32	\$ 7,402.56	\$ 411.25	\$ 569.43
Family	\$ 2,848.99	\$ 1,805.03	\$ 1,043.96	\$ 169.33	\$ 33.87	\$ 1,077.83	\$ 8,622.64	\$ 479.04	\$ 663.28

<b>MESSA ABC Plan 2 Pak C \$2000/\$4000</b> Medical/Dental/Vision/Life/LTD	2026 Medical Rate Monthly Rate	Employer HSA Contribution Divided by 12 Months	2026 Medical Rate Monthly Rate Plus HSA Employer Contribution	2026 Employer Cap Per Month	Employee 2026 Medical Monthly Premium	2026 Dental/Vision/Life/LTD Monthly Rate	20% Employee 2026 Dental/Vision/Life/LTD Monthly Premium	Employee 2026 Medical/Dental Vision/Life/LTD Monthly Premium	Employee Jan. - Aug. 2026 8 Months of Premiums	Employee Per Pay Insurance Premiums 18 Pays 01/02/26-08/28/26	Employee Per Pay Insurance Premiums 13 Pays 01/02/26-06/19/26	Amount Deposited into Employee's Health Savings Account (HSA) 1/1/26 & 9/1/26
Single	\$ 763.90	\$ 166.67	\$ 930.57	\$ 661.84	\$ 268.73	\$ 62.42	\$ 12.48	\$ 281.21	\$ 2,249.68	\$ 124.98	\$ 173.05	\$ 2,000.00
2 Person	\$ 1,716.90	\$ 333.33	\$ 2,050.23	\$ 1,384.12	\$ 666.11	\$ 98.89	\$ 19.78	\$ 685.89	\$ 5,487.12	\$ 304.84	\$ 422.09	\$ 4,000.00
Family	\$ 2,136.22	\$ 333.33	\$ 2,469.55	\$ 1,805.03	\$ 664.52	\$ 169.33	\$ 33.87	\$ 698.39	\$ 5,587.12	\$ 310.40	\$ 429.78	\$ 4,000.00

**OR PAK B with cash in lieu**

<b>MESSA Pak B</b> Dental/Vision/Life/LTD	2026 Monthly Rate
Single	\$ 63.42
2 Person	\$ 99.89
Family	\$ 170.33

<b>Cash in Lieu of Medical Insurance</b>	Cash in Lieu Annual Payment	Cash in Lieu Monthly Payments 2nd Pay Sept-June
	\$ 5,500.00	\$ 458.33
Married Staff Both Employed By The District	\$ 3,600.00	\$ 300.00

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