		Employer		Employee	Employee Per Pay	
Option 1		Monthly		Jan-Dec 2025	Insurance Premium	
BCBSM PPO	2025	Insurance	Employee Portion	Insurance	26 Pays	
\$2000/\$4000 100% Plan	Monthly Rate & Taxes	Contribution	Per Month	Premiums	Jan-Dec 2025	
Single	\$ 683.81	\$ 500.00	\$ 183.81	\$ 2,205.72	\$ 84.84	
2 Person	\$ 1,571.00	\$ 500.00	\$ 1,071.00	\$ 12,852.00	\$ 494.31	
Family	\$ 2,000.80	\$ 500.00	\$ 1,500.80	\$ 18,009.60	\$ 692.68	

	Employer			Employee	Employee Per Pay	
Option 2		Monthly		Jan-Dec 2025	Insurance Premium	
BCBSM PPO	2025	Insurance	Employee Portion	Insurance	26 Pays	
\$1650/\$3300 80% Plan	Monthly Rate & Taxes	Contribution	Per Month	Premiums	Jan-Dec 2025	
Single	\$ 642.68	\$ 500.00	\$ 142.68	\$ 1,712.16	\$ 65.85	
2 Person	\$ 1,472.28	\$ 500.00	\$ 972.28	\$ 11,667.36	\$ 448.74	
Family	\$ 1,877.40	\$ 500.00	\$ 1,377.40	\$ 16,528.80	\$ 635.72	

	Employer		mployer				Employee		Employee Per Pay	
Option 3		Mc		Jonthly				Jan-Dec 2025	Ins	urance Premium
Blue Care Network POS	2025		Insurance		Employee Portion		Insurance		26 Pays	
\$1650/\$3300 100% Plan	Monthly Rate a	& Taxes	Contribution		Per Month		Premiums		Jan-Dec 2025	
Single	\$	645.10	\$	500.00	\$	145.10	\$	1,741.20	\$	66.97
2 Person	\$	1,478.09	\$	500.00	\$	978.09	\$	11,737.08	\$	451.43
Family	\$	1,877.40	\$	500.00	\$	1,377.40	\$	16,528.80	\$	635.72

*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	AND
8 Hours/260 Days Per Year	\$	350.00	

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. 11-25 with an effective date of January 1.

PAK B - Dental/Vision/Life/LTD										
		2025		Employer		Monthly Insurance		Employee Jan-Dec 2025		mployee Per Pay
										Insurance Premium
	Mo	nthly Insurance	Mor	nthly Contribution		Premiums		Insurance		26 Pays
Status		Rates	90%		10%			Premiums		Jan-Dec 2025
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