



**All Employee  
Insurance Rate Schedule (20 Pay Periods)  
July 1, 2025 - June 30, 2026**

COVERAGE	TOTAL Carrier RATE	DISTRICT'S <u>MONTHLY</u> COST	EMPLOYEE'S <u>MONTHLY</u> COST	EMPLOYEE'S <u>PER PAY PERIOD</u> COST
<b><u>MEDICAL</u></b>				
<b>ASBAIT - HDHP-C w/HSA (Banner \$6,000/Choice \$6,000)</b>				
Employee	\$ 754.50	\$ 687.50	\$ 67.00	\$ 40.20
Employee + Spouse	\$ 1,568.50	\$ 687.50	\$ 881.00	\$ 528.60
Employee + Child(ren)	\$ 1,455.50	\$ 687.50	\$ 768.00	\$ 460.80
Employee + Family	\$ 2,177.50	\$ 687.50	\$ 1,490.00	\$ 894.00
<b><u>MEDICAL</u></b>				
<b>ASBAIT - Value Bronze (Banner \$1,700/Choice \$2,300)</b>				
Employee	\$ 856.00	\$ 687.50	\$ 168.50	\$ 101.10
Employee + Spouse	\$ 1,781.00	\$ 687.50	\$ 1,093.50	\$ 656.10
Employee + Child(ren)	\$ 1,653.00	\$ 687.50	\$ 965.50	\$ 579.30
Employee + Family	\$ 2,476.00	\$ 687.50	\$ 1,788.50	\$ 1,073.10
<b><u>MEDICAL</u></b>				
<b>ASBAIT - Value Silver (Banner \$1,100/Choice \$1,300)</b>				
Employee	\$ 891.00	\$ 687.50	\$ 203.50	\$ 122.10
Employee + Spouse	\$ 1,855.00	\$ 687.50	\$ 1,167.50	\$ 700.50
Employee + Child(ren)	\$ 1,719.00	\$ 687.50	\$ 1,031.50	\$ 618.90
Employee + Family	\$ 2,576.00	\$ 687.50	\$ 1,888.50	\$ 1,133.10
<b><u>MEDICAL</u></b>				
<b>ASBAIT - Classic Gold (Banner \$540/Choice \$600)</b>				
Employee	\$ 1,054.00	\$ 687.50	\$ 366.50	\$ 219.90
Employee + Spouse	\$ 2,192.00	\$ 687.50	\$ 1,504.50	\$ 902.70
Employee + Child(ren)	\$ 2,034.00	\$ 687.50	\$ 1,346.50	\$ 807.90
Employee + Family	\$ 3,044.00	\$ 687.50	\$ 2,356.50	\$ 1,413.90
<b><u>Voluntary DENTAL PPO - BCBSAZ</u></b>				
Employee	\$ 43.22	\$ -	\$ 43.22	\$ 25.93
Employee + Spouse	\$ 88.30	\$ -	\$ 88.30	\$ 52.98
Employee + Child(ren)	\$ 99.57	\$ -	\$ 99.57	\$ 59.74
Employee + Family	\$ 163.01	\$ -	\$ 163.01	\$ 97.81
<b><u>Voluntary VISION - AVESIS</u></b>				
Employee	\$ 7.65	\$ -	\$ 7.65	\$ 4.59
Employee + Spouse	\$ 12.42	\$ -	\$ 12.42	\$ 7.45
Employee + Child(ren)	\$ 16.49	\$ -	\$ 16.49	\$ 9.89
Employee + Family	\$ 22.34	\$ -	\$ 22.34	\$ 13.40
<b><u>FLEXIBLE SPENDING ACCOUNT - FULL MEDICAL Healthcare FSA</u></b>				
Employees enrolled in the <b>Value Bronze, Value Silver, Classic Gold medical plans</b> can contribute up to \$3,300 annually towards the FSA account to help cover out of pocket medical, dental and vision costs on a pre-tax basis.				
<b><u>FLEXIBLE SPENDING ACCOUNT - DEPENDENT CARE</u></b>				
You can contribute up to \$5,000 annually towards the dependent care account to help cover out of pocket day care expenses on a pre-tax basis. If you are married and tax filing separate your annual contribution is \$2,500. Employees may be enrolled in any medical plan.				
<b><u>HEALTH SAVINGS ACCOUNT (HSA) -Requires enrollment in the Medical HDHP-C Plan</u></b>				
HDHP-C w/HSA enrolled employees can contribute up to IRS maximum of \$4,300 for Single enrolled / \$8,550 Family enrolled, with a \$1,000 additional Age 55 years or older Catch-up contribution on a pre-tax basis. HSA funds may be used for qualified medical, dental and vision expenses.				
<b><u>FLEXIBLE SPENDING ACCOUNT - "LIMITED Healthcare FSA"</u></b>				
HDHP-C w/HSA enrolled employees can open a "LIMITED Healthcare FSA" and contribute up to \$3,300 annually towards the out of pocket "Dental and Vision costs only" on a pre-tax basis. Please be aware this is the IRS "Use-It or Lose-It" plan. The <b>HSA is used for Medical expenses only</b> . If you elect a Limited Healthcare FSA, it may only be used for Dental and Vision expenses.				
<b><u>VOLUNTARY/OPTIONAL LIFE/AD&amp;D - LINCOLN FINANCIAL GROUP</u></b>				
The District provides \$50,000 of Basic Life/AD&D. You have the option to buy up additional coverage. Please see optional rates.				
<b><u>OPTIONAL INDIVIDUAL PRODUCTS AVAILABLE - AFLAC</u></b>				
Often referred to as paycheck protection. Aflac pays cash benefits directly to you when you seek eligible medical services for a covered injury/illness, or for time off of work due to an eligible disability.				