

## CLASSIFIED - RETIREE Insurance Costs

July 1, 2025 through June 30, 2026

July 1, 2025 through September 30, 2025

	Plan 1A	Plan 4A	Plan 8A	Plan 10A	Wellness	HDHP2	Bronze
Medical	3,394.00	3,029.00	2,552.00	2,007.00	2,803.00	1,587.00	1,454.00
Dental	118.32	118.32	118.32	118.32	118.32	118.32	118.32
Vision	21.95	21.95	21.95	21.95	21.95	21.95	21.95
Total Insurance Cost	3,534.27	3,169.27	2,692.27	2,147.27	2,943.27	1,727.27	1,594.27
District CAP	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)
<b>Retiree Portion</b>	<b>2,325.94</b>	<b>1,960.94</b>	<b>1,483.94</b>	<b>938.94</b>	<b>1,734.94</b>	<b>518.94</b>	<b>385.94</b>

October 1, 2025 through June 30, 2026

	Plan 1A	Plan 4A	Plan 8A	Plan 10A	Wellness	HDHP2	Bronze
Medical	3,856.00	3,411.00	2,900.00	2,280.00	3,184.00	1,803.00	1,651.00
Dental	124.24	124.24	124.24	124.24	124.24	124.24	124.24
Vision	23.05	23.05	23.05	23.05	23.05	23.05	23.05
Total Insurance Cost	4,003.29	3,558.29	3,047.29	2,427.29	3,331.29	1,950.29	1,798.29
District CAP	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)
<b>Retiree Portion</b>	<b>2,794.96</b>	<b>2,349.96</b>	<b>1,838.96</b>	<b>1,218.96</b>	<b>2,122.96</b>	<b>741.96</b>	<b>589.96</b>

**Annual Cost of Insurance** (Based on a full 12 months of Coverage)

	Plan 1A	Plan 4A	Plan 8A	Plan 10A	Wellness	HDHP2	Bronze
Medical	44,886.00	39,786.00	33,756.00	26,541.00	37,065.00	20,988.00	19,221.00
Dental	1,473.12	1,473.12	1,473.12	1,473.12	1,473.12	1,473.12	1,473.12
Vision	273.30	273.30	273.30	273.30	273.30	273.30	273.30
Total Plan	46,632.42	41,532.42	35,502.42	28,287.42	38,811.42	22,734.42	20,967.42
Annual CAP	(14,500.00)	(14,500.00)	(14,500.00)	(14,500.00)	(14,500.00)	(14,500.00)	(14,500.00)
<b>Annual Retiree Total</b>	<b>32,132.42</b>	<b>27,032.42</b>	<b>21,002.42</b>	<b>13,787.42</b>	<b>24,311.42</b>	<b>8,234.42</b>	<b>6,467.42</b>

### Classified Retiree Insurance - w/Spouse on Medicare A&B

July 1, 2025 through September 30, 2025

	Plan 1A	Plan 4A	Plan 8A	Plan 10A	Wellness	HDHP2	Bronze
Medical	2,238.00	2,019.00	1,736.00	1,414.00		Not Available	
Dental	118.32	118.32	118.32	118.32			
Vision	21.95	21.95	21.95	21.95			
Total Insurance Cost	2,378.27	2,159.27	1,876.27	1,554.27			
District CAP	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)			
<b>Retiree Portion</b>	<b>1,169.94</b>	<b>950.94</b>	<b>667.94</b>	<b>345.94</b>			

October 1, 2025 through June 30, 2026

	Plan 1A	Plan 4A	Plan 8A	Plan 10A	Wellness	HDHP2	Bronze
Medical	2,584.00	2,333.00	2,008.00	1,638.00		Not Available	
Dental	124.24	124.24	124.24	124.24			
Vision	23.05	23.05	23.05	23.05			
Total Insurance Cost	2,731.29	2,480.29	2,155.29	1,785.29			
District CAP	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)			
<b>Retiree Portion</b>	<b>1,522.96</b>	<b>1,271.96</b>	<b>946.96</b>	<b>576.96</b>			

**Annual Cost of Insurance** (Based on a full 12 months of Coverage)

	Plan 1A	Plan 4A	Plan 8A	Plan 10A
Medical	29,970.00	27,054.00	23,280.00	18,984.00
Dental	1,473.12	1,473.12	1,473.12	1,473.12
Vision	273.30	273.30	273.30	273.30
Total Plan	31,716.42	28,800.42	25,026.42	20,730.42
Annual CAP	(14,500.00)	(14,500.00)	(14,500.00)	(14,500.00)
<b>Annual Retiree Total</b>	<b>17,216.42</b>	<b>14,300.42</b>	<b>10,526.42</b>	<b>6,230.42</b>