

**Corning Union Elementary INSURANCE COSTS
July 1, 2026 through June 30, 2027**

Board Member INSURANCE COSTS - EMPLOYEE +ONE

July 1, 2026 through September 30, 2026

	Plan 3A	Plan 8D	Plan 9D	Plan 10D	Wellness	HDHP2	Bronze
Medical	2,514.00	1,906.00	1,689.00	1,447.00	2,242.00	1,343.00	1,225.00
Dental	100.18	100.18	100.18	100.18	100.18	100.18	100.18
Vision	17.80	17.80	17.80	17.80	17.80	17.80	17.80
Total Insurance Cost	2,631.98	2,023.98	1,806.98	1,564.98	2,359.98	1,460.98	1,342.98
District CAP	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)
Total Monthly Pmt.	1,423.65	815.65	598.65	356.65	1,151.65	252.65	134.65

October 1, 2026 through June 30, 2027

	Plan 3A	Plan 8D	Plan 9D	Plan 10D	Wellness	HDHP2	Bronze
Medical	2,715.00	2,059.00	1,825.00	1,564.00	2,421.00	1,450.00	1,323.00
Dental	100.18	100.18	100.18	100.18	100.18	100.18	100.18
Vision	17.80	17.80	17.80	17.80	17.80	17.80	17.80
Total Insurance Cost	2,832.98	2,176.98	1,942.98	1,681.98	2,538.98	1,567.98	1,440.98
District CAP	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)	(1,208.33)
Total Monthly Pmt.	1,624.65	968.65	734.65	473.65	1,330.65	359.65	232.65

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

	Plan 3A	Plan 8D	Plan 9D	Plan 10D	Wellness	HDHP2	Bronze
Medical	31,977.00	24,249.00	21,492.00	18,417.00	28,515.00	17,079.00	15,582.00
Dental	1,202.16	1,202.16	1,202.16	1,202.16	1,202.16	1,202.16	1,202.16
Vision	213.60	213.60	213.60	213.60	213.60	213.60	213.60
Total Plan	33,392.76	25,664.76	22,907.76	19,832.76	29,930.76	18,494.76	16,997.76
Annual CAP	(14,500.00)	(14,500.00)	(14,500.00)	(14,500.00)	(14,500.00)	(14,500.00)	(14,500.00)
Annual Board Total	18,892.76	11,164.76	8,407.76	5,332.76	15,430.76	3,994.76	2,497.76