

2025 EMPLOYEE BENEFIT ALLOWANCE:

Employee Group	Allowance
Board Member	\$850.00
Non-Represented	\$1,050.00
Certificated	\$1,150.00
Classified-Full Time	\$1,100.00
Classified Part-Time	
4 Hours	550
4.25 Hours	584.38
4.5 Hours	618.75
4.75 Hours	653.13
5 Hours	687.5
5.25 Hours	721.88
5.5 Hours	756.25
5.75 Hours	790.63
6 Hours	825
6.25 Hours	859.38
6.5 Hours	893.75
6.75 Hours	928.13
7 Hours	962.5
7.5 Hours	1,031.25
8.0 Hours (full time)	1,100.00

***The benefit allowance is the portion your employer pays towards your benefit elections.**

Guestimate your total monthly costs for your specific benefit elections, fill in the applicable boxes:

Calculate Your Monthly Benefit Cost:

Enter The Medical Plan Cost

Enter Dental Plan Cost

Enter Vision Plan Cost

Enter 30K Life Insurance Cost (mandatory with medical plan)

Total Health Benefit Costs

Employee Benefit Allowance :

(Subtract Employee Benefit Allowance from Total Health Cost)

Total Employee Cost per Month:

**This information is provided for guidance only. Final benefit costs will be provided when elections are made in EASE (health enrollment platform)

EXAMPLE 1 - Calculate your monthly costs:

Medical Plan Cost	\$946.49
Dental Plan Cost	\$122.46
Vision Plan Cost	\$20.60
30K Life Ins. Cost (only with medical)	\$3.75
Total Health Benefit Costs	\$1,093.30
Employee Benefit Allowance	\$1,050.00
Total Employee Cost per Month	\$43.30

*Please see Health Plan Rate Sheet for plan costs.