

Paraeducator Rates Effective 07/01/2026 - 12/31/2026													
84%	Single Tier %	Employee costs are in Italics											
Non-Licensed Employee* Full Time - <b>Single Policy</b> - Premium Split Determined Locally	Plan	Employee Out-of-Pocket Maximum by Plan	HRA/HSA** Funding by Employer 2023-2028	Annual Out-of-Pocket Exposure for Employee <b>After</b> HRA/HSA**	Total Monthly Premium 7/1/2027	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Exposure Premium & Out-of-Pocket Share	Price per paycheck	Monthly Employer Premium	
Single	Platinum	\$2,800	\$2,200	\$600	\$1,435.18	\$17,222.16	\$13,318.80	\$3,903.36	\$325.28	\$4,503.36	\$195.17	\$1,109.90	
Single	Gold	\$3,100	\$2,200	\$900	\$1,407.39	\$16,888.68	\$13,318.80	\$3,569.88	\$297.49	\$4,469.88	\$178.49	\$1,109.90	
Single	Gold CDHP	\$2,500	\$2,200	\$300	\$1,321.31	\$15,855.72	\$13,318.80	\$2,536.92	\$211.41	\$2,836.92	\$126.85	\$1,109.90	
Single	Silver CDHP	\$4,000	\$2,200	\$1,800	\$1,209.57	\$14,514.84	\$12,192.47	\$2,322.37	\$193.53	\$4,122.37	\$116.12	\$1,016.04	
*If you are unsure if these costs apply to you, see "What employee segment am I in?" on our website.													
**HSA only available on Silver Plan													
Employer premium contributions for the <b>Platinum and Gold Plans</b> are identical to the employer premium contribution to the <b>Gold CDHP</b> .													
Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2026.													
80%	all other Tiers %												
Non-Licensed Employee* Full Time - <b>Self &amp; Spouse Policy</b> - Premium Split Determined Locally	Plan	Employee Out-of-Pocket Maximum by Plan	HRA/HSA** Funding by Employer 2023-2028	Annual Out-of-Pocket Exposure for Employee <b>After</b> HRA/HSA**	Total Monthly Premium 7/1/2027	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Exposure Premium & Out-of-Pocket Share	Price per paycheck	Monthly Employer Premium	
Self & Spouse	Platinum	\$5,600	\$4,400	\$1,200	\$2,870.38	\$34,444.56	\$23,822.21	\$10,622.35	\$885.20	\$11,822.35	\$531.12	\$1,985.18	
Self & Spouse	Gold	\$6,200	\$4,400	\$1,800	\$2,814.79	\$33,777.48	\$23,822.21	\$9,955.27	\$829.61	\$11,755.27	\$497.76	\$1,985.18	
Self & Spouse	Gold CDHP	\$5,000	\$4,400	\$600	\$2,481.48	\$29,777.76	\$23,822.21	\$5,955.55	\$496.30	\$6,555.55	\$297.78	\$1,985.18	
Self & Spouse	Silver CDHP	\$8,000	\$4,400	\$3,600	\$2,419.17	\$29,030.04	\$23,224.03	\$5,806.01	\$483.83	\$9,406.01	\$290.30	\$1,935.34	
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**HSA only available on Silver Plan													
Employer premium contributions for the <b>Platinum and Gold Plans</b> are identical to the employer premium contribution to the <b>Gold CDHP</b> .													
Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2026.													
Non-Licensed Employee* Full Time - <b>Parent/Child(ren) Policy</b> - Premium Split Determined Locally	Plan	Employee Out-of-Pocket Maximum by Plan	HRA/HSA** Funding by Employer 2023-2028	Annual Out-of-Pocket Exposure for Employee <b>After</b> HRA/HSA**	Total Monthly Premium 7/1/2027	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Exposure Premium & Out-of-Pocket Share	Price per paycheck	Monthly Employer Premium	
Parent/Child(ren)	Platinum	\$5,600	\$4,400	\$1,200	\$2,399.84	\$28,798.08	\$19,610.78	\$9,187.30	\$765.61	\$10,387.30	\$459.36	\$1,634.23	
Parent/Child(ren)	Gold	\$6,200	\$4,400	\$1,800	\$2,355.35	\$28,264.20	\$19,610.78	\$8,653.42	\$721.12	\$10,453.42	\$432.67	\$1,634.23	
Parent/Child(ren)	Gold CDHP	\$5,000	\$4,400	\$600	\$2,042.79	\$24,513.48	\$19,610.78	\$4,902.70	\$408.56	\$5,502.70	\$245.13	\$1,634.23	
Parent/Child(ren)	Silver CDHP	\$8,000	\$4,400	\$3,600	\$2,039.02	\$24,468.24	\$19,574.59	\$4,893.65	\$407.80	\$8,493.65	\$244.68	\$1,631.22	
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Employer premium contributions for the <b>Platinum and Gold Plans</b> are identical to the employer premium contribution to the <b>Gold CDHP</b> .													
Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2026.													
Non-Licensed Employee* Full Time - <b>Family Policy</b> - Premium Split Determined Locally	Plan	Employee Out-of-Pocket Maximum by Plan	HRA/HSA** Funding by Employer 2023-2028	Annual Out-of-Pocket Exposure for Employee <b>After</b> HRA/HSA**	Total Monthly Premium 7/1/2027	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Exposure Premium & Out-of-Pocket Share	Price per paycheck	Monthly Employer Premium	
Family	Platinum	\$5,600	\$4,400	\$1,200	\$4,060.11	\$48,721.32	\$35,136.38	\$13,584.94	\$1,132.08	\$14,784.94	\$679.25	\$2,928.03	
Family	Gold	\$6,200	\$4,400	\$1,800	\$3,983.95	\$47,807.40	\$35,136.38	\$12,671.02	\$1,055.92	\$14,471.02	\$633.55	\$2,928.03	
Family	Gold CDHP	\$5,000	\$4,400	\$600	\$3,660.04	\$43,920.48	\$35,136.38	\$8,784.10	\$732.01	\$9,384.10	\$439.20	\$2,928.03	
Family	Silver CDHP	\$8,000	\$4,400	\$3,600	\$3,442.08	\$41,304.96	\$33,043.97	\$8,260.99	\$688.42	\$11,860.99	\$413.05	\$2,753.66	
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Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2026.													
Updated 05.08.2026 - No change to HSA/HRA Funding for 2023-2028													