2024 / 2025

Custodians	District Contribution	Total VEBA Contribution	Balance Left for Premium	Annual Premium	Monthly Premium	Montnly Amount Paid towards Premium	Monthly Premium Cost to Employee	Annual Premium Cost to Employee	Plan Costs beyond Deductible	Max OOP Total Annual Employee Cost
8 Hours										
Employee	\$8,080.00	80.00 ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy***								
	\$2600 / \$5200	\$1,850.00	\$6,230.00	\$10,021.80	\$835.15	\$519.17	\$315.98	\$3,791.80	\$900.00	\$5,441.80
	\$3500 / \$7000	\$1,850.00	\$6,230.00	\$9,703.32	\$808.61	\$519.17	\$289.44	\$3,473.32		\$5,123.32
	\$6350 / \$12700	\$1,850.00	\$6,230.00	\$7,986.60	\$665.55	\$519.17	\$146.38	\$1,756.60		\$6,256.60
Employee +	\$8,080.00	***Nun	nbers are <i>i</i>	Approximate	e - Verify y	our Hours a	and/or FTE	for Accura	су***	
Spouse	\$2600 / \$5200	\$1,850.00	\$6,230.00	\$21,204.24	\$1,767.02	\$519.17	\$1,247.85	\$14,974.24	\$1,300.00	\$19,624.24
	\$3500 / \$7000	\$1,850.00	\$6,230.00	\$20,530.68	\$1,710.89	\$519.17	\$1,191.72	\$14,300.68		\$19,450.68
	\$6350 / \$12700	\$1,850.00	\$6,230.00	\$16,898.28	\$1,408.19	\$519.17	\$889.02	\$10,668.28		\$21,518.28
Employee +	\$8,080.00	***Nun	nbers are <i>i</i>	Approximate	e - Verify y	our Hours a	and/or FTE	for Accura	су***	
Children	\$2600 / \$5200	\$1,850.00	\$6,230.00	\$16,302.00	\$1,358.50	\$519.17	\$839.33	\$10,072.00	\$1,300.00	\$14,722.00
	\$3500 / \$7000	\$1,850.00	\$6,230.00	\$15,784.20	\$1,315.35	\$519.17	\$796.18	\$9,554.20		\$14,704.20
	\$6350 / \$12700	\$1,850.00	\$6,230.00	\$12,991.68	\$1,082.64	\$519.17	\$563.47	\$6,761.68		\$17,611.68
Family	\$8,080.00	***Nun	Approximate	e - Verify y	our Hours a	and/or FTE	for Accura	су***		
	\$2600 / \$5200	\$1,850.00	\$6,230.00	\$31,785.72	\$2,648.81	\$519.17	\$2,129.64	\$25,555.72	\$1,300.00	\$30,205.72
	\$3500 / \$7000	\$1,850.00								\$29,696.04
	\$6350 / \$12700	\$1,850.00	\$6,230.00	\$25,330.92	\$2,110.91	\$519.17	\$1,591.74	\$19,100.92		\$29,950.92

2024 / 2025

Custodians	District Contribution	Total VEBA Contribution	Blance Left For Premium	Annual Premium	Monthly Premium	Monthly Amount Paid towards Premium	Monthly Premium Cost to Employee	Annual Premium Cost to Employee	Plan Costs beyond Deductible	Max OOP Total Annual Employee Cost
4 Hours										
Employee	\$4,040.00 ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy***									
	\$2600 / \$5200	\$925.00	\$3,115.00	\$10,021.80	\$835.15	\$259.58	\$575.57	\$6,906.80	\$900.00	\$9,481.80
	\$3500 / \$7000	\$925.00	\$3,115.00	\$9,703.32	\$808.61	\$259.58	\$549.03	\$6,588.32		\$9,163.32
	\$6350 / \$12700	\$925.00	\$3,115.00	\$7,986.60	\$665.55	\$259.58	\$405.97	\$4,871.60		\$10,296.60
Employee +	\$4,040.00	\$4,040.00 ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy***								
Spouse	\$2600 / \$5200	\$925.00	\$3,115.00	\$21,204.24	\$1,767.02	\$259.58	\$1,507.44	\$18,089.24	\$1,300.00	\$23,664.24
	\$3500 / \$7000	\$925.00	\$3,115.00	\$20,530.68	\$1,710.89	\$259.58	\$1,451.31	\$17,415.68		\$23,490.68
	\$6350 / \$12700	\$925.00	\$3,115.00	\$16,898.28	\$1,408.19	\$259.58	\$1,148.61	\$13,783.28		\$25,558.28
Employee +	\$4,040.00	\$4,040.00 ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy***								
Children	\$2600 / \$5200	\$925.00	\$3,115.00	\$16,302.00	\$1,358.50	\$259.58	\$1,098.92	\$13,187.00	\$1,300.00	\$18,762.00
	\$3500 / \$7000	\$925.00	\$3,115.00	\$15,784.20	\$1,315.35	\$259.58	\$1,055.77	\$12,669.20		\$18,744.20
	\$6350 / \$12700	\$925.00	\$3,115.00	\$12,991.68	\$1,082.64	\$259.58	\$823.06	\$9,876.68		\$21,651.68
Eomily/	¢4.040.00	***Nlue	abora ara d	Approvimate	Vorify		and/or ETE	for Acouro	ov***	
Family	\$4,040.00			Approximate					-	<u> </u>
	\$2600 / \$5200	\$925.00								· · · · · · · · · · · · · · · · · · ·
	\$3500 / \$7000 \$6350 / \$12700	\$925.00 \$925.00	\$3,115.00 \$3,115.00			\$259.58 \$259.58				\$33,736.04 \$33,990.92
	φ0350/φ12700	φ920.00	φο, πο.00	φ20,000.92	φΖ,ΓΙΟ.9Τ	¢∠09.00	φ1,001.00	φΖΖ,ΖΤΟ.9Ζ		φ33,990.9Z

2024 / 2025

Custodians	District Contribution	Total VEBA Contribution	Blance Left For Premium	Annual Premium	Monthly Premium	Monthly Amount Paid towards Premium	Monthly Premium Cost to Employee	Annual Premium Cost to Employee	Plan Costs beyond Deductible	Max OOP Total Annual Employee Cost	
School days only 174/260 days	0.67	(5.35 hrs/day)									
Employee	\$5,413.60	\$5,413.60 ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy***									
	\$2600 / \$5200	\$1,239.50	\$4,174.10	\$10,021.80	\$835.15	\$347.84	\$487.31	\$5,847.70	\$900.00	\$8,108.20	
	\$3500 / \$7000	\$1,239.50	\$4,174.10	\$9,703.32	\$808.61	\$347.84	\$460.77	\$5,529.22		\$7,789.72	
	\$6350 / \$12700	\$1,239.50	\$4,174.10	\$7,986.60	\$665.55	\$347.84	\$317.71	\$3,812.50		\$8,923.00	
Employee +	\$5,413.60	o ***Numbers are Approximate - Verify your Hours and/or FTE for Accuracy***									
Spouse	\$2600 / \$5200	\$1,239.50	\$4,174.10	\$21,204.24	\$1,767.02	\$347.84	\$1,419.18	\$17,030.14	\$1,300.00	\$22,290.64	
	\$3500 / \$7000	\$1,239.50	\$4,174.10	\$20,530.68	\$1,710.89	\$347.84	\$1,363.05	\$16,356.58		\$22,117.08	
	\$6350 / \$12700	\$1,239.50	\$4,174.10	\$16,898.28	\$1,408.19	\$347.84	\$1,060.35	\$12,724.18		\$24,184.68	
Employee +	\$5,413.60	***Nun	nbers are <i>I</i>	Approximate	e - Verify y	our Hours a	and/or FTE	for Accura	су***		
Children	\$2600 / \$5200	\$1,239.50	\$4,174.10	\$16,302.00	\$1,358.50	\$347.84	\$1,010.66	\$12,127.90	\$1,300.00	\$17,388.40	
	\$3500 / \$7000	\$1,239.50	\$4,174.10	\$15,784.20	\$1,315.35	\$347.84	\$967.51	\$11,610.10		\$17,370.60	
	\$6350 / \$12700	\$1,239.50	\$4,174.10	\$12,991.68	\$1,082.64	\$347.84	\$734.80	\$8,817.58		\$20,278.08	
Family	\$5,413.60	***Nun	nbers are A	Approximate	e - Verify y	our Hours a	and/or FTE	for Accura	су***		
	\$2600 / \$5200	\$1,239.50	\$4,174.10	\$31,785.72	\$2,648.81	\$347.84	\$2,300.97	\$27,611.62	\$1,300.00	\$32,872.12	
	\$3500 / \$7000	\$1,239.50	\$4,174.10			\$347.84				\$32,362.44	
	\$6350 / \$12700	\$1,239.50	\$4,174.10	\$25,330.92	\$2,110.91	\$347.84	\$1,763.07	\$21,156.82		\$32,617.32	