22. Insurance Benefits

A. District Contribution

For the 2025-2026 school year, the District's monthly insurance contribution to active full-time employee plans will be \$1,725 effective October 1, 2025.

For the 2022-2023 school year, the District's monthly insurance contribution to active full-time employee plans will be \$1,675 effective October 1, 2022.

For the 2023-2024 school year, the District's monthly insurance contribution to active full-time employee plans will be \$1,700 effective October 1, 2023.

For the 2024-2025 school year, the District's monthly insurance contribution to active full-time employee plans will be \$1,700 effective October 1, 2024.

<u>Full-time employees who qualify to opt-out of insurance will receive a \$550 monthly contribution to an approved benefit plan for the 2025-2026 school year.</u>

Full time employees who qualify to opt out of insurance will receive a \$400 monthly contribution to an approved benefit plan for the 2022-2023 and 2023-2024 school years. Full-time employees who qualify to opt-out of insurance will receive a \$500 monthly contribution to an approved benefit plan for the 2024-2025 school year. Part-time employees who qualify to opt-out of insurance will receive a pro-rated monthly contribution to an approved benefit plan.

- B. Part Time Pro-ration. The District will contribute on behalf of each part-time employee insurance premiums based on a pro-ration of the employee's full-time equivalent (FTE x full-time rate). The part-time employee will contribute the balance of the insurance premium through payroll deduction. Teachers under temporary contract for less than 135 continuous contract days will not be eligible for benefits under this article. Current part-time teachers who are receiving full insurance benefits will continue to receive full insurance benefits.
- C. Part-time, less than 0.5 FTE, employees are not eligible for health insurance coverage.
- D. **Selection of Plans/Riders.** The District and Association shall meet and mutually select an insurance carrier and insurance plan options. Once selected, the carrier(s) and plan options shall not be changed without the agreement of both parties. In the event these plans or riders are eliminated or modified by the carrier(s), a mutually agreed upon plan providing comparable benefits shall be substituted in determining the benefit increases specified.

- E. **Section 125 Plan.** All teachers may participate in an IRS Section 125 account by appropriate payroll deductions for any monthly insurance premium co-payment required of the employee. In addition, the plan will include a flexible reimbursement provision, i.e., employees may request pre-taxed payroll deductions to apply toward dependent care costs, prescription drugs and other health care expenses not covered by insurance. The plan administrator will be selected by the District.
- F. In the event the amount paid by the District for the purchase of health insurance for each eligible employee is less than the actual cost of that insurance, then each affected employee shall pay the difference through payroll deduction.
- G. The benefit program(s) identified herein shall be provided only in accordance with the underwriting rules and regulations as set forth by the carrier(s) in the policy (policies) retained by the policyholder.
- H. In spite of any statements in this Agreement to the contrary, nothing shall change the interpretations, meanings, or intent of the provisions of the insurance contracts between the Board and the insurance carriers.
- I. **Plan selection** will include at least one <u>low</u> cost/high deductible plan with the inclusion of an HSA (Health Savings Account) option for all bargaining unit members. The Silver Falls School District agrees to place any bargaining unit member's unspent monthly insurance benefit into the employee's HSA. For example, if the district insurance premium benefit is \$1,025 per month and the insurance plan costs \$700 per month, the district will contribute \$325 to the employee's HSA.
- J. **Domestic Eligibility** for domestic partners shall be consistent with State law and the insurance carrier or OEBB rules and regulations.