Pinellas County Schools 2026 Health Plan Insurance Rates - With New Select Choice Plan

	Total	Monthly Board	Monthly	Employee	Employee	Annual Employee
Plan Options	Monthly	Cost	Employee Cost	Deductions	Deduction	Deduction
	Premium		Employee oost	Deddetions	Increase/(Decrease)	Increase/(Decrease)
Consumer Direct Health Plan & Health Reimbursement Account						
Employee	\$885.87	\$757.54	\$128.33	\$77.00	(\$2.00)	(\$40.00)
Emp + Child(ren)	\$1,551.16	\$1,232.83	\$318.33	\$191.00	(\$4.00)	(\$80.00)
Emp + Spouse	\$1,752.18	\$1,395.51	\$356.67	\$214.00	(\$4.00)	(\$80.00)
Family	\$2,527.45	\$2,054.12	\$473.33	\$284.00	(\$6.00)	(\$120.00)
2Board Family	\$2,527.45	\$2,215.78	\$311.67	\$187.00	(\$4.00)	(\$80.00)
Select Choice (Prior Select-Copay)						
Employee	\$925.87	\$757.54	\$168.33	\$101.00	\$0.00	\$0.00
Emp + Child(ren)	\$1,629.50	\$1,232.83	\$396.67	\$238.00	(\$2.00)	(\$40.00)
Emp + Spouse	\$1,835.51	\$1,395.51	\$440.00	\$264.00	\$0.00	\$0.00
Family	\$2,642.45	\$2,054.12	\$588.33	\$353.00	\$0.00	\$0.00
2Board Family	\$2,642.45	\$2,215.78	\$426.67	\$256.00	\$2.00	\$40.00
Select Choice (Prior Choice Share with Deductible)						
Employee	\$925.87	\$757.54	\$168.33	\$101.00	(\$11.00)	(\$220.00)
Emp + Child(ren)	\$1,629.50	\$1,232.83	\$396.67	\$238.00	(\$24.00)	(\$480.00)
Emp + Spouse	\$1,835.51	\$1,395.51	\$440.00	\$264.00	(\$23.00)	(\$460.00)
Family	\$2,642.45	\$2,054.12	\$588.33	\$353.00	(\$44.00)	(\$880.00)
2Board Family	\$2,642.45	\$2,215.78	\$426.67	\$256.00	(\$42.00)	(\$840.00)
Basic Essential						
Employee	\$820.87	\$757.54	\$63.33	\$38.00	(\$1.00)	(\$20.00)
Emp + Child(ren)	\$1,444.50	\$1,232.83	\$211.67	\$127.00	(\$3.00)	(\$60.00)
Emp + Spouse	\$1,623.84	\$1,395.51	\$228.33	\$137.00	(\$3.00)	(\$60.00)
Family	\$2,337.45	\$2,054.12	\$283.33	\$170.00	(\$3.00)	(\$60.00)
2Board Family	\$2,337.45	\$2,215.78	\$121.67	\$73.00	(\$1.00)	(\$20.00)

Rates are Subject to Union Ratification and Board Approval.