



PAYROLL DEDUCTION RATE CHART

If you do not enroll in a PCS-sponsored medical plan, you are eligible to use up to a \$75 per-pay-period Board Contribution credit toward the purchase of eligible supplemental benefits. Eligible benefits are marked on the rate sheets and Enrollment & Change form with a diamond (◆). Enrollment in these supplemental benefits is not automatic. You must complete an Enrollment & Change form and elect them. If you do not elect these supplemental benefits, you forfeit the \$75 per-pay-period credit.

◆ DIAMOND = Eligible for the \$75 Per-Pay Board Contribution Credit

Aetna Medical Plans - 2025				
COVERAGE LEVEL	SELECT OPEN ACCESS	CHOICE SHARE PLAN	CDHP + HRA	BASIC ESSENTIAL
Employee	\$101.00	\$112.00	\$79.00	\$39.00
Employee + Spouse	\$264.00	\$287.00	\$218.00	\$140.00
Employee + Child(ren)	\$240.00	\$262.00	\$195.00	\$130.00
Employee + Spouse + Child(ren)	\$353.00	\$397.00	\$290.00	\$173.00
Two Board Employee + Child(ren) ¹	\$254.00	\$298.00	\$191.00	\$74.00

Payroll deduction per-pay-period (20 pays) AFTER the Board Contribution credit has been applied.

¹ To be eligible for Two Board Family, three or more individuals must be covered under the plan and your legal spouse must be a benefits-eligible employee of the School Board.

◆ Humana or MetLife Dental Plans			◆ EyeMed Vision Plan	
COVERAGE LEVEL	HUMANA ADVANTAGE	METLIFE® PDP	COVERAGE LEVEL	EYEMED
Employee	\$7.93	\$14.93	Employee	No Charge
Employee + 1	\$14.56	\$27.36	Employee + 1	\$2.83
Employee + Family	\$21.27	\$39.49	Employee + Family	\$5.92
Two Board Family ²	\$19.27	\$37.49	Two Board Family	\$5.92

Payroll deduction per pay period (20 pays) AFTER the Board Contribution credit has been applied.

² To be eligible for Two Board Family, three or more individuals must be covered under the plan and your legal spouse must be a benefits-eligible employee of the School Board.

◆ MetLife Hospital Indemnity Plan (HIP)		MetLife Legal Plan
COVERAGE LEVEL	HOSPITAL INDEMNITY PLAN (HIP)	CALL METLIFE (800-438-6388) TO ENROLL
Employee Only	\$8.00	
Employee + Spouse	\$13.00	\$11.85
Employee + Children up to age 26	\$17.00	(no coverage level selection required)
Employee + Family	\$21.00	

Pre-existing conditions apply to The Standard Disability plans, HIP, and the MetLife Legal Plan. See the online Employee Benefits and Wellness Guide for full details.

PAYROLL DEDUCTION RATE CHART



Standard Insurance Company Life Insurance Plans³

Basic Employee Term Life Insurance¹

One times base annual earnings rounded up to next \$1,000 is provided for all eligible PCS employees at no cost to you.

Minimum:
\$15,000

Maximum:
\$200,000

Optional Employee and Dependent Term Life

Employee ² & Spouse ³		Children ⁴	Family ⁵
AGE (AS OF EFFECTIVE DATE OF COVERAGE)	RATES (PER \$10,000)	RATES (PER \$2,000)	FORMERLY "DEPENDENT LIFE"
			RATES (PER FAMILY UNIT)
under 30	\$0.34	\$0.24	\$0.90
30-34	\$0.48		
35-39	\$0.54		
40-44	\$0.60		
45-49	\$0.90		
50-54	\$1.38		
55-59	\$2.58		
60-64	\$3.96		
65-69	\$7.62		
70+	\$12.36		

- This coverage is "guarantee issue" and no evidence of good health is required.
- Optional Employee Term Life: \$10,000 minimum, up to \$200,000 in \$10,000 increments or \$250,000, up to \$500,000 maximum in \$50,000 increments; "guarantee issue" (new hire only) to \$250,000 or your current coverage amount; for additional amounts, you must provide evidence of good health; subject to reduction schedules at age 70.
- Optional Dependent Term Life for Spouse: \$10,000 increments to \$100,000; (Guaranteed coverage available up to \$30,000, if you enroll within 31 days of becoming eligible); coverage terminates at age 70.
- Optional Dependent Term Life for Child(ren): \$2,000 increments to \$10,000; one premium covers all eligible child(ren).
- Optional Family Term Life: One premium covers spouse and eligible child(ren).

³ Keep in mind that the amount of coverage you elect will be reduced at certain ages. The \$12.36 contribution shown for age 70 and above actually buys coverage of \$6,500 at ages 70-74, \$4,500 at ages 75-79, and \$3,000 at age 80 and above.

Standard Insurance Company Optional Accidental Death & Dismemberment Insurance

Basic Employee Accidental Death & Dismemberment Insurance is provided for all eligible PCS employees at no cost to you. Coverage Amount: \$2,000

BENEFIT AMOUNT	EMPLOYEE ONLY	EMPLOYEE + FAMILY	BENEFIT AMOUNT	EMPLOYEE ONLY	EMPLOYEE + FAMILY
\$50,000	\$0.60	\$1.05	\$200,000	\$2.40	\$4.20
\$100,000	\$1.20	\$2.10	\$300,000	\$3.60	\$6.30

Standard Insurance Company Disability

An eligible employee may select one plan and one waiting period, outlined below, provided the Monthly Disability Benefit does not exceed 66^{2/3}% of the person's regular monthly base salary.

IF YOUR ANNUAL BASE SALARY IS AT LEAST:	MONTHLY DISABILITY BENEFIT	TWO YEAR PLAN AND WAITING PERIODS			TO SSNRA ⁴ PLAN AND WAITING PERIODS		
		14 Days	30 Days	60 Days	14 Days	30 Days	60 Days
\$7,200	\$400	\$5.81	\$3.72	\$2.07	\$7.52	\$4.99	\$3.15
\$10,800	\$600	\$8.71	\$5.58	\$3.10	\$11.28	\$7.48	\$4.72
\$14,400	\$800	\$11.61	\$7.44	\$4.14	\$15.03	\$9.97	\$6.29
\$18,000	\$1,000	\$14.51	\$9.31	\$5.17	\$18.79	\$12.47	\$7.87
\$21,600	\$1,200	\$17.42	\$11.17	\$6.21	\$22.55	\$14.96	\$9.44
\$25,200	\$1,400	\$20.32	\$13.03	\$7.24	\$26.31	\$17.46	\$11.01
\$28,800	\$1,600	\$23.22	\$14.89	\$8.28	\$30.07	\$19.95	\$12.59
\$32,400	\$1,800	\$26.13	\$16.75	\$9.31	\$33.83	\$22.44	\$14.16
\$37,800	\$2,100	\$30.48	\$19.54	\$10.86	\$39.46	\$26.18	\$16.52
\$43,200	\$2,400	\$34.83	\$22.33	\$12.41	\$45.10	\$29.92	\$18.88
\$48,600	\$2,700	\$39.19	\$25.13	\$13.96	\$50.74	\$33.66	\$21.24
\$54,000	\$3,000	\$43.54	\$27.92	\$15.52	\$56.38	\$37.40	\$23.60
\$63,000	\$3,500	\$50.80	\$32.57	\$18.10	\$65.77	\$43.64	\$27.53
\$72,000	\$4,000	\$58.06	\$37.22	\$20.69	\$75.17	\$49.87	\$31.46
\$81,000	\$4,500	\$65.31	\$41.88	\$23.27	\$84.56	\$56.11	\$35.40
\$90,000	\$5,000	\$72.57	\$46.53	\$25.86	\$93.96	\$62.34	\$39.33

Pre-existing conditions, including pregnancy, apply during the first year of new or increased coverage. See page 107 and the online Employee Benefits and Wellness Guide for full details.

⁴ Social Security Normal Retirement Age (SSNRA)