

**Upper Merion Area School District**

**Premiums (2025-2026) - CUSTODIAL / TURF / MAINTENANCE**

<b>Plan</b>	<b>Total Premium</b>	<b>Employee Monthly Share Amounts (22% of Premium)</b>	<b>Employee Per Pay (24) Deductions</b>
<b><u>Personal Choice #215</u></b>			
Single	\$960.82	\$211.38	\$105.69
Parent/Child	\$1,769.40	\$389.27	\$194.63
Parent/Children	\$2,124.26	\$467.34	\$233.67
Employee and Spouse	\$2,367.18	\$520.78	\$260.39
Family	\$2,699.55	\$593.90	\$296.95
<b><u>Keystone/DPOS (C1F1O1)</u></b>		<b><u>(13% of Premium)</u></b>	
Single	\$788.71	\$102.53	\$51.27
Parent/Child	\$1,102.51	\$143.33	\$71.66
Parent/Children	\$1,735.24	\$225.58	\$112.79
Husband/Wife	\$1,796.73	\$233.57	\$116.79
Family	\$2,332.87	\$303.27	\$151.64
<b><u>C2F1O1</u></b>		<b><u>(11% of Premium)</u></b>	
Single	\$785.52	\$86.41	\$43.20
Parent/Child	\$1,097.98	\$120.78	\$60.39
Parent/Children	\$1,728.17	\$190.10	\$95.05
Employee and Spouse	\$1,789.39	\$196.83	\$98.42
Family	\$2,323.31	\$255.56	\$127.78

Teledoc, Ovia, Diabetes Management, Hypertension Management and Mental Health Coaching by Teledoc are included at no cost to Employees enrolled in Medical coverage.

**Capital RX Prescription Program**

	<b>30 day supply</b>	<b>Copay Costs Broad 90 Retail/Mailorder</b>	
Generic (Tier 1)	\$5.00	\$5.00	There is only one choice for Prescriptions and the cost is embedded into the Medical plan rates
Brand Formulary (Tier 2)	\$30.00	\$30.00	
Brand Non-Formulary Tier 3)	\$55.00	\$55.00	

<b>DENTAL</b>	<b><u>District Monthly Premium</u></b>	<b><u>Employee Contribution</u></b>	<b><u>Employee Per Pay (24) Deductions</u></b>
Single coverage	\$44.71	\$0.00	
Family coverage	\$95.93	\$12.81	\$6.40
<b><u>VISION</u></b>		<b><u>100% Employee Paid</u></b>	<b><u>Employee Per Pay (24) Deduction</u></b>
Single		\$7.67	\$3.84
Employee + Spouse		\$14.57	\$7.29
Employee + Child(ren)		\$15.34	\$7.67
Family		\$22.55	\$11.28

**Reimbursement for Medical Waiver of Premiums:**

\$1,200 one time cash bonus paid in June. Annual Proof of other coverage required.

<b><u>Life Insurance:</u></b>	1 1/2 x annual salary	Full Time	
outlined in CBA	\$15,000	Permanent Part Time	100% Employer Paid
<b><u>Voluntary Long-Term Disability:</u></b>	cost based on salary and plan selection.		100% Employee Paid

Staff who have a regular schedule of working **less** than six (6) hours per day are NOT eligible for Medical or Dental benefits.  
Staff must have a regular schedule of least 20 hours per week to be eligible for Life Insurance, Long Term Disability and Vision.