

**Upper Merion Area School District
Premiums (2025-2026) - UMAEA MEMBERS**

Plan	Total Premium	Employee Monthly Share Amounts (22% of Premium)	Employee Per Pay (24) Deduction	Employee Per Pay (20) Deduction
<u>Personal Choice #215</u>				
Single	\$960.82	\$211.38	\$105.69	\$126.83
Parent/Child	\$1,769.40	\$389.27	\$194.63	\$233.56
Parent/Children	\$2,124.26	\$467.34	\$233.67	\$280.40
Employee and Spouse	\$2,367.18	\$520.78	\$260.39	\$312.47
Family	\$2,699.55	\$593.90	\$296.95	\$356.34
<u>Keystone/DPOS (C1F101)</u>		<u>(13% of Premium)</u>		
Single	\$788.71	\$102.53	\$51.27	\$61.52
Parent/Child	\$1,102.51	\$143.33	\$71.66	\$86.00
Parent/Children	\$1,735.24	\$225.58	\$112.79	\$135.35
Employee and Spouse	\$1,796.73	\$233.57	\$116.79	\$140.14
Family	\$2,332.87	\$303.27	\$151.64	\$181.96
<u>C2F101</u>		<u>(11% of Premium)</u>		
Single	\$785.52	\$86.41	\$43.20	\$51.84
Parent/Child	\$1,097.98	\$120.78	\$60.39	\$72.47
Parent/Children	\$1,728.17	\$190.10	\$95.05	\$114.06
Employee and Spouse	\$1,789.39	\$196.83	\$98.42	\$118.10
Family	\$2,323.31	\$255.56	\$127.78	\$153.34

Teledoc, Ovia & Diabetes Management, Hypertension Management are included at no cost to Employees enrolled in Medical coverage.

Capital RX Prescription Program

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

Reimbursement for Medical Waiver of Premiums:

\$3,000/year, as outlined in Collective Bargaining Agreement. Annual Proof of other coverage required

<u>DENTAL</u>	<u>District Monthly Premium</u>	<u>Employee Monthly Premium</u>	<u>Employee Per Pay (24) Deduction</u>	<u>Employee Per Pay (20) Deduction</u>
Single coverage	\$26.81	\$0.00		
Family coverage	\$91.65	\$16.21	\$8.11	\$9.73
<u>VISION</u>	<u>100% Employee Paid</u>		<u>Employee Per Pay (24) Deduction</u>	
Single		\$22.55	\$11.28	
Employee + Spouse		\$0.00	\$0.00	
Employee + Child(ren)		\$0.00	\$0.00	
Family		\$0.00	\$0.00	

Life Insurance: 1 x annual salary 100 % Employer Paid

UMAEA members will have one additional opportunity in November to either elect to commence participation, change from one medical plan to another or waive participation. Critical Illness, Hospital Indemnity, and Accident Insurance thru Symetra will be offered as well as Legal Ease and LifeLock. Changes at this time will take effect on January 1, 2026.