

## SUFFIELD BOARD OF EDUCATION

6/2/19

### Teachers' Benefit Costs for the 2019-2020 School Year

Plan	Coverage	Total Cost Per Month	Total Cost Per Year	BOE Share Per Year	Employee Share Per Paycheck	Annual Employee Cost
<b>Health Savings (HSA)</b> 21% Employee Premium Share	Single	805.01	\$9,660.12	\$7,631.49	\$101.43	\$2,028.63
	2-Persons	1449.01	\$17,388.12	\$13,736.61	\$182.58	3,651.51
	Family	2262.06	\$27,144.72	\$21,444.33	\$285.02	5,700.39
<b>Dental</b> 21% Employee Premium Share	Single	28.26	\$339.12	\$267.90	\$3.56	\$71.22
	2-Persons	71.21	\$854.52	\$675.07	\$8.97	179.45
	Family	92.10	\$1,105.20	\$873.11	\$11.60	232.09

**Note:**

Employees enrolled in the Health Savings Plan (HSA) are responsible for paying a portion of the deductible in addition to the employee premium cost share.

The HSA deductible is \$2,000 for Single and \$4,000 for 2 or more people. The Board will contribute 40% toward the deductible in 2019-2020