SUFFIELD BOARD OF EDUCATION

5/21/2025

Teachers' Benefit Costs for the 2025-2026 School Year

Plan	Coverage	Total Cost Per Month	Total Cost Per Year	BOE Share Per Year	Employee Share Per Paycheck	Annual Employee Cost
Health Savings (HSA)	Single	$ 1,223.25	$14,679.00	$11,596.41	$154.13	$3,082.59
21% Employee Premium Share	2-Persons	$ 2,201.85	$26,422.20	$20,873.54	$277.43	5,548.66
	Family	$ 3,425.10	$41,101.20	$32,469.95	$431.56	8,631.25
Dental	Single	$ 38.87	$466.44	$368.49	$4.90	$97.95
21% Employee Premium Share	2-Persons	$ 75.60	$907.20	$716.69	$9.53	190.51
	Family	$ 145.65	$1,747.80	$1,380.76	$18.35	367.04

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 2025-2026.