

**Unified School District No. 365
Garnett • Greeley • Mont Ida • Westphalia**

Mission Statement

With the fundamental belief that every student can learn, the primary purpose of Garnett Unified School District No. 365 is to provide each student the learning opportunity for him/her to establish a foundation for success, both now and in the future.

**Board of Education • Special Meeting
305 N. Oak**

Day/Date/TimeWednesday, August 9, 2017, 6:30 p.m.
Location**District Office**

••••• A G E N D A •••••

- 1.0 Call to Order President Michael Richards
- 1.1 Reading of District Mission Statement
- 1.2 Welcome to Guests
- 2.0 Approval to publish the 2017-2018 Budget Notice and set budget hearing.
- 3.0 Classified Handbook Update
- 4.0 Health Insurance Policy Approval
- 5.0 Adjournment President Michael Richards

1.0 Call to Order (6:00 p.m.)

Martin	Richards	Nelson	Comfort	Rickel	Teel	Wolken

2.0 Approval to publish the 2016-2017 Budget and set the Budget Hearing.

Background

Each year the BOE must adopt a budget for the coming school year. A part of the approval process is publishing the budget and setting a time and place for a budget hearing. You will find information in this packet about the 2017-2018 budget. The budget must be published 10 days prior to the budget hearing. The budget hearing is set 7:30 a.m. on the August 25, 2017 Board of Education special meeting. The budget is due to the county clerk on August 25, 2017

Approval to publish will allow USD 365 to place the Code 99 document (Notice of Hearing for the 2017-2018 budget) in the local papers.

Contacts

To further prepare for discussion and action on this topic, board members may want to contact the following individuals.

Don

Recommendation

Approve the publishing of the notice for a budget hearing.

Suggested Motion

(Mdme./Mr. President,) I move to publish the notice, Code 99 as presented, to set the USD 365 budget hearing for August 25, 2017 at 7:30 a.m.

Motion	Second	Yes	No

8-4-17

Draft

NOTICE OF HEARING 2017-2018 BUDGET

The governing body of Unified School District 365 will meet on the 25th day of August, 2017 at 7:30 AM, at 305 N. Oak Garnett, KS 66032 for the purpose of hearing and answering objections of taxpayers relating to the proposed use of all funds and the amount of tax to be levied. Detailed budget information (including budget profile) is available at District Office, 305 N. Oak Garnett, KS 66032 and will be available at this hearing.

The Amount of 2017 Tax to be Levied and Expenditures (published below) establish the maximum limits of the 2017-2018 Budget. The "Est. Tax Rate" in the far right column, shown for comparative purposes, is subject to slight change depending on final assessed valuation.

Code 99 Line	2015-2016 Actual			2016-2017 Actual			PROPOSED BUDGET 2017-2018		
	Actual Expenditures (1)	Actual Tax Rate* (2)	Actual Expenditures (3)	Actual Tax Rate* (4)	Expenditures (5)	Amount of 2017 Tax to be Levied (6)	Est. Tax Rate* (7)		
OPERATING									
General	8,829,586	20.000	7,591,287	20.000	7,206,794	1,470,088	20.000		
Supplemental General (LOB)	2,484,409	13.361	2,484,409	18.122	2,480,000	1,560,747	19.527		
SPECIAL REVENUE									
Adult Education	0	0.000	0	0.000	0	0	0.000		
Adult Supplemental Education	0		0		0				
Bilingual Education	0		0		0				
Virtual Education	0		0		0				
Capital Outlay	319,285	7.999	608,140	6.997	1,811,500	559,503	7.000		
Driver Training	28,955		10,240		45,250				
Extraordinary School Program	0		0		0				
Food Service	509,961		494,760		584,750				
Professional Development	2,963		627		19,000				
Parent Education Program	0		0		0				
Summer School	0		0		0				
Special Education	1,353,047		1,323,070		1,738,602				
Career and Postsecondary Education	266,875		264,505		345,000				
Special Liability Expense Fund	0	0.000	0	0.000	0	0	0.000		
School Retirement	0	0.000	0	0.000	0	0	0.000		
Extraordinary Growth Facilities	0	0.000	0	0.000	0	0	0.000		
Special Reserve Fund	0		0		0				
Federal Funds	272,506		248,744		240,426				
Gifts and Grants	12,854		3,502		34,500				
At Risk (4Yr Old)	0		0		68,205				
Cost of Living	0	0.000	0	0.000	0	0	0.000		
At Risk (K-12)	790,011		749,056		796,421				
Declining Enrollment	0	0.000	0	0.000	0	0	0.000		

Fund—Continued

Code Line	2015-2016 Actual		2016-2017 Actual		PROPOSED BUDGET 2017-2018		
	Actual Expenditures (1)	Actual Tax Rate* (2)	Actual Expenditures (3)	Actual Tax Rate* (4)	Expenditures (5)	Amount of 2017 Tax to be Levied (6)	Est. Tax Rate* (7)
KPERS Special Retirement Contribution	516,389		505,844		786,082		
Contingency Reserve	0		0				
Textbook & Student Material Revolving	147,656		129,480				
Activity Fund	94,364		60,616				
Tuition Reimbursement Fund	0		0		0		
DEBT SERVICE							
Bond and Interest #1	1,411,670	10.969	1,442,660	8.406	1,468,261	582,958	7.293
Bond and Interest #2	0	0.000	0	0.000	0	0	0.000
No-Fund Warrant	0	0.000	0	0.000	0	0	0.000
Special Assessment	0	0.000	0	0.000	0	0	0.000
Temporary Note	0	0.000	0	0.000	0	0	0.000
COOPERATIVES**							
Special Education	0		0		0		
TOTAL USD EXPENDITURES	17,040,531	52.329	15,916,940	53.525	17,624,791	4,173,296	53.820
Less: Transfers	4,320,245	xxxxxx	3,044,867	xxxxxx	2,594,952	xxxxxx	xxxxxx
NET USD EXPENDITURES	12,720,286	xxxxxx	12,872,073	xxxxxx	15,029,839	xxxxxx	xxxxxx
TOTAL USD TAXES LEVIED	3,582,500	xxxxxx	4,011,045	xxxxxx	4,173,296	xxxxxx	xxxxxx
OTHER							
Historical Museum	0	0.000	0	0.000	0	0	0.000
Public Library Board	0	0.000	0	0.000	0	0	0.000
Public Library Board Employee Benefits	0	0.000	0	0.000	0	0	0.000
Recreation Commission	0	0.000	0	0.000	0	0	0.000
Rec Comm Emp Benefits & Spec Liab	0	0.000	0	0.000	0	0	0.000
TOTAL OTHER	0	0.000	0	0.000	0	0	0.000
TOTAL TAXES LEVIED	3,582,500		4,011,045		4,173,296		
Assessed Valuation - General Fund	\$64,356,073		\$70,604,623		\$73,504,393		
Assessed Valuation - All Other Funds	\$70,775,832		\$77,044,833		\$79,929,068		
Outstanding Indebtedness, July 1							
General Obligation Bonds	12,696,209		12,655,517		12,059,137		
Capital Outlay Bonds	0		0		0		
Temporary Note	0		0		0		
No-Fund Warrant	0		0		0		
Lease Purchase Principal	0		0		0		
TOTAL USD DEBT	12,696,209		12,655,517		12,059,137		

* Tax Rates are expressed in Mills

** Sponsoring District Only

President

Clerk of the Board

3.0 Classified Employee Handbook Update

Background

Attached is an update to the Compensation schedule in the classified handbook. Changes have been made to the base pay rate for each group of classified employees. The new per hour wage is printed in red, with the old wage marked through.

Since this is in the Classified Handbook, the board will need to approve an update to the handbook

Contacts

To further prepare for discussion and action on this topic, board members may want to contact the following individuals.

Don

Recommendation

I would recommend the changes to the Classified Employee Handbook

Suggested Motion

(Mdme./Mr. President,) I move the board approve the changes to the 2017-2018 Classified Employee handbook.

Motion	Second	Yes	No

COMPENSATION

U.S.D. 365 maintains the following beginning wage scales for classified personnel:

Office Staff Wage Scale

Starting Hourly Wage ~~\$10.00~~ **\$10.30** per hour for employees who perform general clerical duties or general support for office managers.

~~\$10.50~~ **\$10.80** per hour for employees who perform general office management duties.

Education Add \$0.25 per hour for 60+ semester hours of college credit.

Experience Add \$0.10 for each year of experience in general office work (maximum of 5 years).

Custodian & Maintenance Wage Scale

Starting Hourly Wage ~~\$10.00~~ **\$10.30** per hour

~~\$10.50~~ **\$10.80** per hour for employees who supervise three or more maintenance/custodial employees.

Experience Add ~~up to \$0.20~~ **\$0.50 per hour** for each year of experience in institutional maintenance and cleaning (maximum of 5 years).

Paraeducator Wage Scale

Starting Hourly Wage ~~\$10.00~~ **\$10.30** per hour for all categories of paraeducator (e.g. at-risk, library, lunchroom, playground, Title I, general teacher aide, health, computer lab, etc.)

Education Add \$0.25 per hour for 60+ semester hours of college credit.

Plus ~~0\$.50~~ **\$1.00** for degree

Add \$1.00 per hour for a current valid Kansas teaching certificate.

Experience Add \$0.10 per hour for each year of full time service as a paraeducator or certified teacher add \$0.20 per hour (maximum of 5 years)

Food Service Wage Scale

Starting Hourly Wage

~~\$10.00~~ **\$10.30** per hour for employees who perform general food preparation or meal service duties.

~~\$10.50~~ **\$10.80** per hour for employees who perform kitchen manager duties and supervise other food service personnel.

Education

Add \$0.25 per hour for 60+ semester hours of college work in food science or equivalent training.

Experience

Add \$0.10 for each year of experience in institutional food service (maximum of 5 years)

Student Employment Wage Scale

Starting Hourly Wage

Minimum wage (currently \$5.15) for high school students.

\$10.00 per hour for college students.

Experience

10¢ for each year of satisfactory employment of at least eight continuous weeks with USD 365 (maximum of 5 years)

Substitute, Temporary or Seasonal Workers

Hourly Wage

~~\$10.00~~ **\$10.30** per hour for each employment category.

**Coach/Sponsor Wage Scale
(For Coaches/sponsors Not Specified in the Negotiated Agreement)**

Hourly Wage

~~\$10.00~~ **\$10.30** per hour

A one-time longevity bonus of 25¢ per hour will be added to each employee's hourly wage beginning on July 1 following their tenth (10th) full year of employment in USD 365.

Salary increases, when granted, will begin on July 1 of each year or the first duty day following July 1. Salary increases will be based upon a favorable evaluation, the employee's overall performance and improvement in job skills. Salary increases shall not be granted solely on the basis of longevity.

Classified employees are paid on or before the 15th day of each month.

4.0 Health Insurance Plan

Background

The board needs to approve the Health Insurance Premium for the 2017-2018 school year. Attached you will find the information in regards to the new rates and policies. There was a request that we add (as an option for employees the KEIT #13 plan, which is a high deductible plan). This is at no additional cost to the school district.

Contacts

To further prepare for discussion and action on this topic, board members may want to contact the following individuals.

- Paula or Don

Recommendation

I recommend approval of the KEIT Blue Cross Blue Shield Plan with the additional of KEIT 13 as an additional option.

Suggested Action

I move the board continue Blue Cross/Blue Shield KEIT Group plan with the addition of the KEIT 13 option.

Motion	Second	Yes	No

5.0 Adjournment

Motion: I move we adjourn.

Motion	Second	Yes	No

KEIT RENEWAL WORKSHEET

Group Number:	3000070	County Code:	052
Group Name:	USD 365, Garnett	Rep Code:	589
Effective Period:	10/1/2017 - 09/30/2018	Band Factor:	1.032
Grandfather Indicator:	N		

Pool Adjustment	9.1%
Demographic Adjustment	0.7%
Benefit Alignment/Changes	0.3%
Total % Increase/Decrease	10.2%

Non Grandfathered Options

Option	RAF	Empl	Empl/Ch	Empl/Sp	Empl/Depts
Option KE7:					
Hlth & Dg	1.322	674.83	1,422.91	1,449.74	2,197.81
Option KE8:					
Hlth & Dg	1.322	630.41	1,329.18	1,354.24	2,053.00
Option KE9 (\$500):					
Hlth & Dg	1.322	681.93	1,414.71	1,465.00	2,185.16
Option KE9 (\$1,000):					
Hlth & Dg	1.322	649.34	1,339.77	1,394.93	2,069.36
Option KE9 (\$2,000):					
Hlth & Dg	1.322	609.16	1,253.31	1,308.57	1,935.79
Option KE10					
Hlth & Dg	1.322	609.61	1,285.29	1,309.53	1,985.21

	Empl	Empl/Ch	Empl/Sp	Empl/Depts	Total
Option KE7	98	2	8	1	109
Option KE11	16	2	0	0	18
Totals	114	4	8	1	127

Composite Gender Factor: 1.11E

Current Health & RX Rates:

	Empl	Empl/Ch	Empl/Sp	Empl/Depts
Option KE7	\$614.34	\$1,295.77	\$1,319.68	\$2,001.11
Option KE11	\$554.87	\$1,170.23	\$1,191.82	\$1,807.18

Option	RAF	Empl	Empl/Ch	Empl/Sp	Empl/Depts
Option KE11:					
Hlth & Dg	1.322	620.23	1,307.69	1,332.35	2,019.82
Option KE12:					
Hlth & Dg	1.322	487.78	1,028.20	1,047.58	1,588.00
Option KE13:					
Hlth & Dg	1.322	521.04	1,098.38	1,119.10	1,696.44
Option KE14:					
Hlth & Dg	1.322	730.11	1,539.56	1,568.60	2,378.05

Non Grandfathered Plan include HCR Preventive Services and Women's Prev
 KE7 - \$500/\$1,000 Ded. 50/50 \$2,500/\$5,000 \$35 OVC BRXC \$15/\$30/\$45 w/ MO
 KE8 - \$500/\$1,000 Ded. 50/50 \$2,500/\$5,000 \$35 OVC BRXC \$100/200 @ 50/50 w/ MO
 KE9 - Aff. Blue \$500/\$1,500 Ded. 80/20 \$1,000/\$3,000 \$25 OVC BRXC \$100/\$300 ded. 50% w/ MO
 KE9 - Aff. Blue \$1,000/\$3,000 Ded. 80/20 \$1,000/\$3,000 \$25 OVC BRXC \$100/\$300 ded. 50% w/ MO
 KE9 - Aff. Blue \$2,000/\$6,000 Ded. 80/20 \$1,000/\$3,000 \$25 OVC BRXC \$100/\$300 ded. 50% w/ MO
 KE10 - \$2,500/5,000 Ded. 80/20 \$1000/2000 \$25 OVC BRXC \$100/200 @ 50/50 w/ MO
 KE11 - \$3,000/\$6,000 Ded. 100% Coins. Integrated Rx w/ MO
 KE12 - \$6,350/\$12,700 Ded. 100% Coins. Integrated Rx w/ MO
 KE13 - \$5,000/\$10,000 Ded. 100% Coins. Integrated Rx w/ \$15/50/75 copays & MO
 KE14 - \$500/\$1,000 Ded. 80/20 \$1,000/\$2,000 \$25 OVC BRXC \$15/\$30/\$45 w/ MO

Options:	High/Low	HDHP:	Any Non GF plan or
KE7 & KE10	KE7 & KE10	KE7 & KE11	combo can be sold
KE8 & KE10	KE8 & KE10	KE8 & KE11	with the MV plan
KE14 & KE7	KE14 & KE7	KE10 & KE11	(KE12) OR the \$5000
KE14 & KE8	KE14 & KE8	KE14 & KE11	HDHP (KE13)
KE14 & KE10	KE14 & KE10		

GUR SUPPLEMENT MASTER GROUP #: 3000070 - OPTION KE7 EFFECTIVE: 10/01/2017
 GROUP NAME: USD 365, GARNETT Grandfather Status: N
 BLUES ENROLLMENT HR: BEH Meets Minimum Value: Y

CURRENT RATES	EMP	E/CH	E/SP	E/DEPS
HEALTH	614.34	1295.77	1319.68	2001.11
DRUGS	0.00	0.00	0.00	0.00
DENTAL	25.38	59.87	54.35	88.24
TOTAL	639.72	1355.64	1,374.03	2,089.35
RENEWAL RATES				
HEALTH				
\$500 DED.(\$2500/\$5000 COINS @ 50%), UNL LIFETIME MAX. \$35 OVC, 100% PREVENTIVE	673.84	1421.92	1448.75	2196.82
DEPENDENTS TO AGE 26	0.00	0.00	0.00	0.00
UTILIZATION MANAGEMENT SERVICES	0.99	0.99	0.99	0.99
BLUE CHOICE				
PHYS MED/REHAB BENEFITS RIDER				
\$100 EMERGENCY ROOM COPAY				
HOME HEALTH CARE/HOSPICE UNLIMITED SUBJ TO DED/COINS				
OB BENE AVAIL ALL FEMALES				
AUTISM COVERAGE				
TOTAL HEALTH	674.83	1422.91	1449.74	2197.81
DRUGS				
BLUERX CARD \$15/30/45 WITH ORAL CONTRACEPTIVES	0.00	0.00	0.00	0.00
DEPENDENTS TO AGE 26				
BLUERX MAIL \$37.50/75/112.50 WITH ORAL CONTRACEPTIVES				
TOTAL DRUG	0.00	0.00	0.00	0.00
DENTAL				
COMPREHENSIVE DENTAL \$25/\$75 100% 80% 50%	27.77	54.57	59.70	85.55
LOCAL BUILDING BLOCK DENTAL RIDER D FULL PAY	0.19	8.93	0.19	8.93
DEPENDENTS TO AGE 26 FOR COMPREHENSIVE DENTAL				
TOTAL DENTAL	27.96	63.50	59.89	94.48
GRAND TOTAL	702.79	1486.41	1,509.63	2,292.29
TOTAL RATE ADJUSTMENTS	63.07	130.77	135.60	202.94
PERCENTAGE INCREASE/DECREASE	+9.9%	+9.6%	+9.9%	+9.7%

SIGNED BY: _____ DATE SIGNED: _____ EFFECTIVE DATE: _____

GUR SUPPLEMENT

MASTER GROUP #: 3000070 - OPTION KE11
 GROUP NAME: USD 365, GARNETT
 BLUES ENROLLMENT HR: BEH

Grandfather Status: N EFFECTIVE: 10/01/2017
 Meets Minimum Value: Y

CURRENT RATES

	EMP	E/CH	E/SP	E/DEPS
HEALTH	554.87	1170.23	1191.82	1807.18
DRUGS	0.00	0.00	0.00	0.00
DENTAL	25.38	59.87	54.35	88.24
TOTAL	580.25	1230.10	1246.17	1,895.42

RENEWAL RATES

RATE
ADJUSTMENT
FACTOR

	EMP	E/CH	E/SP	E/DEPS	RATE	ADJUSTMENT	FACTOR
HEALTH	619.24	1306.70	1331.36	2018.83	1.322		
COMP MM \$3000 DED 100% COINS, UNL LIFETIME MAX, 100% PREVENTIVE		0.00		0.00			
DEPENDENTS TO AGE 26	0.99	0.99	0.99	0.99			
UTILIZATION MANAGEMENT SERVICES							
BLUE CHOICE							
PHYS MED/REHAB BENEFITS RIDER							
OB BENE AVAIL ALL FEMALES							
AUTISM COVERAGE							
TOTAL HEALTH	620.23	1307.69	1332.35	2019.82			

DRUGS

BLUERX CARD SUBJECT TO HEALTH DED	0.00	0.00	0.00	0.00			
DEPENDENTS TO AGE 26							
BLUERX MAIL ORDER SUBJECT TO RETAIL DED							
TOTAL DRUG	0.00	0.00	0.00	0.00			

DENTAL

COMPREHENSIVE DENTAL \$25/\$75 100% 80% 50%	27.77	54.57	59.70	85.55	0.878		
LOCAL BUILDING BLOCK DENTAL RIDER D FULL PAY	0.19	8.93	0.19	8.93			
DEPENDENTS TO AGE 26 FOR COMPREHENSIVE DENTAL							
TOTAL DENTAL	27.96	63.50	59.89	94.48			

GRAND TOTAL
TOTAL RATE ADJUSTMENTS
PERCENTAGE INCREASE/DECREASE

GRAND TOTAL	648.19	1371.19	1392.24	2114.30			
TOTAL RATE ADJUSTMENTS	67.94	141.09	146.07	218.88			
PERCENTAGE INCREASE/DECREASE	+11.7%	+11.5%	+11.7%	+11.5%			

SIGNED BY: _____

DATE SIGNED: _____

EFFECTIVE DATE: _____

- Option KE7: *Blue Choice*
Comprehensive Major Medical \$500/\$1,000 Deduct. (\$2,500/\$5,000 Coins. Max. @ 50/50), Full Accidents with \$1,000 max, Deps to 26, Unlimited Lifetime Max, \$100 Emergency Room Copay, Hospice, Home Health Care, PDN Unlimited subj to ded/coins, \$35 Office Visit Copay with \$300 lab/x-ray max, HCR Preventive, BlueRx Card \$15/\$30/\$45 with mail order at 2.5 x copay, Integrated Combined Health/Rx Out of Pocket Max \$6,350/\$12,700, Autism Coverage, **Telehealth subj to OVC**
- Option KE8: *Blue Choice*
Comprehensive Major Medical \$500/\$1,000 Deduct. (\$2,500/\$5,000 Coins. Max. @ 50/50), Full Accidents with \$1,000 max, Deps to 26, Unlimited Lifetime Max, \$100 Emergency Room Copay, Hospice, Home Health Care, PDN Unlimited subj to ded/coins, \$35 Office Visit Copay with \$300 lab/x-ray max, HCR Preventive, BlueRx Card (Pharmacy Submit) \$100/200 (50/50 Coins.) with MO subject to retail benefits, Integrated Combined Health/Rx Out of Pocket Max \$6,350/\$12,700, Autism Coverage, **Telehealth subj to OVC**
- Option KE9: *Triple Option*
BDE Triple Option AffordaBlue \$500/\$1,500 Deduct. (\$1,000/\$3,000 Coins. Max. @ 80/20), \$50 Accident Copay, Deps. To 26, Unlimited Lifetime Max., Home Health Care/PDN/Hospice Unlimited, \$25 Office Visit Copay on first 5 visits, \$300 lab/x-ray max, HCR Preventive Health Care, BlueRx Card (Pharmacy Submit) \$100/\$300 Deduct., (50/50 Coins.) with MO subject to retail benefits, Combined Health/Rx Out of Pocket Max \$6,350/\$12,700, Autism Coverage, **Telehealth subj to OVC**
- BDE Triple Option AffordaBlue \$1,000/\$3,000 Deduct. (\$1,000/\$3,000 Coins. Max. @ 80/20), \$50 Accident Copay, Deps. To 26, Unlimited Lifetime Max., Home Health Care/PDN/Hospice Unlimited, \$25 Office Visit Copay on first 5 visits, \$300 lab/x-ray max, HCR Preventive Health Care, BlueRx Card (Pharmacy Submit) \$100/\$300 Deduct., (50/50 Coins.) with MO subject to retail benefits, Combined Health/Rx Out of Pocket Max \$6,350/\$12,700, Autism Coverage, **Telehealth subj to OVC**
- BDE Triple Option AffordaBlue \$2,000/\$6,000 Deduct. (\$1,000/\$3,000 Coins. Max. @ 80/20), \$50 Accident Copay, Deps. To 26, Unlimited Lifetime Max., Home Health Care/PDN/Hospice Unlimited, \$25 Office Visit Copay on first 5 visits, \$300 lab/x-ray max, HCR Preventive Health Care, BlueRx Card (Pharmacy Submit) \$100/\$300 Deduct., (50/50 Coins.) with MO subject to retail benefits, Combined Health/Rx Out of Pocket Max \$6,350/\$12,700, Autism Coverage, **Telehealth subj to OVC**
- Option KE10: *Blue Choice*
Comprehensive Major Medical \$2,500/\$5,000 Deduct. (\$1,000/\$2,000 Coins. Max. @ 80/20), Full Accidents with \$1,000 max, Deps. to 26, Unlimited Lifetime Max., \$100 Emergency Room Copay, Home Health Care/PDN/Hospice Unlimited subj to ded/coins, \$25 Office Visit Copay with \$300 lab/x-ray max, HCR Preventive, BlueRx Card (Pharmacy Submit) \$100/\$200 Deduct (50/50 Coins.) with MO subject to retail benefits, Integrated Combined Health/Rx Out of Pocket Max \$6,350/\$12,700, Autism Coverage, **Telehealth subj to OVC**
- Option KE11: *Blue Choice*
HDHP Comprehensive Major Medical \$3,000/\$6,000 Deduct. (100% Coins.), Accidents subj to ded/coins., Deps. to 26, Unlimited Lifetime Max., Home Health Care/PDN/Hospice Unlimited subj to ded., Office Visits subj to ded/coins., HCR Preventive, Integrated Rx (Pharmacy submit) subject to Health deductible, with Mail Order, Autism Coverage, **Telehealth subj to deduct**
- Option KE12: *Blue Choice*
HDHP Comprehensive Major Medical \$6,350/\$12,700 Integrated Deduct (Health/Rx) (100% Coins.), Accidents subj to ded/coins., Deps. to 26, Unlimited Lifetime Max., Home Health Care/PDN/Hospice Unlimited subj to ded., Office Visits subj to ded/coins., HCR Preventive, Integrated Rx (Pharmacy submit) subject to Health deductible, With Mail Order, Autism Coverage, **Telehealth subj to deduct**
- Option KE13: *Blue Choice*
HDHP Comprehensive Major Medical \$5,000/\$10,000 Integrated Deduct (Health/Rx) (100% Coins.), Accidents subj to ded/coins., Deps. to 26, Unlimited Lifetime Max., Home Health Care/PDN/Hospice Unlimited subj to ded., Office Visits subj to ded/coins., HCR Preventive, Integrated Rx (Pharmacy submit) until deductible met then BlueRx Card \$15/\$50/\$75 copay with Mail Order (2½ x Copay), Autism Coverage, **Telehealth subj to deduct**

Option KE14:

Blue Choice

New
Option for
2017

Comprehensive Major Medical \$500/\$1,000 Deduct. (\$1,000/\$2,000 Coins. Max. @ 80/20), Full Accidents with \$1,000 max, Dets to 26, Unlimited Lifetime Max, \$100 Emergency Room Copay, Hospice, Home Health Care, PDN Unlimited subj to ded/coins, \$25 Office Visit Copay with \$300 lab/x-ray max, HCR Preventive, BlueRx Card \$15/\$30/\$45 with mail order at 2.5 x copay, Integrated Combined Health/Rx Out of Pocket Max \$6,350/\$12,700, Autism Coverage, **Telehealth subj to OVC**

USD #365 Health Insurance Rates (2016-2017)

KEY# #7	Employee (monthly)	Employee (annual)	Emp/Child (monthly)	Emp/Child (Annual)	Emp/Spouse (monthly)	Emp/Spouse (annual)	Emp/Dep. (monthly)	Emp/Dep. (annual)
2017-2018	\$ 702.79	\$ 8,433.48	\$ 1,486.41	\$ 17,836.92	\$ 1,509.63	\$ 18,115.56	\$ 2,292.29	\$ 27,507.48
2016-2017	\$ 639.72	\$ 7,676.64	\$ 1,355.64	\$ 16,267.68	\$ 1,374.03	\$ 16,488.36	\$ 2,089.35	\$ 25,072.20
Difference	\$ 63.07	\$ 756.84	\$ 130.77	\$ 1,569.24	\$ 135.60	\$ 1,627.20	\$ 202.94	\$ 2,435.28

2016-2017BOE	Employee	Emp/Child (monthly)	Emp/Child (Annual)	Emp/Spouse (monthly)	Emp/Spouse (annual)	Emp/Dep. (monthly)	Emp/Dep. (annual)
Employee	\$ 639.72	\$ 640.00	\$ 7,680.00	\$ 640.00	\$ 7,680.00	\$ 640.00	\$ 7,680.00
(per month)extra	\$ -	\$ -	\$ (8,587.68)	\$ -	\$ (8,808.36)	\$ -	\$ (17,592.20)
			\$ (715.64)		\$ (734.03)		\$ (1,449.35)

2017-2018	Employee	Emp/Child (monthly)	Emp/Child (Annual)	Emp/Spouse (monthly)	Emp/Spouse (annual)	Emp/Dep. (monthly)	Emp/Dep. (annual)
Employee	\$ 702.79	\$ 703.00	\$ 8,436.00	\$ 703.00	\$ 8,436.00	\$ 703.00	\$ 8,436.00
(per month)extra	\$ -	\$ -	\$ (9,400.92)	\$ -	\$ (9,679.56)	\$ -	\$ (19,071.48)
			\$ (783.41)		\$ (806.63)		\$ (1,589.29)

2015-2016	\$ 551.20	\$ 6,614.40	\$ 1,162.07	\$ 13,944.84	\$ 1,183.67	\$ 14,203.11	\$ 1,794.58	\$ 21,534.96
Employee	\$ 475.91	\$ 5,710.92	\$ 1,001.72	\$ 12,020.64	\$ 1,022.05	\$ 12,264.60	\$ 1,547.37	\$ 18,568.44
(per month)extra	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

2015-2016	\$ 551.20	\$ 6,614.40	\$ 551.20	\$ 6,614.40	\$ 551.20	\$ 6,614.40	\$ 551.20	\$ 6,614.40
Employee	\$ 551.20	\$ 6,614.40	\$ 551.20	\$ 6,614.40	\$ 551.20	\$ 6,614.40	\$ 551.20	\$ 6,614.40
(per month)extra	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

KEY# #11	Employee (monthly)	Employee (annual)	Emp/Child (monthly)	Emp/Child (Annual)	Emp/Spouse (monthly)	Emp/Spouse (annual)	Emp/Dep. (monthly)	Emp/Dep. (annual)
2017-2018	\$ 648.19	\$ 7,778.28	\$ 1,371.19	\$ 16,454.28	\$ 1,392.24	\$ 16,706.88	\$ 2,114.30	\$ 25,371.60
2016-2017	\$ 580.25	\$ 6,963.00	\$ 1,230.10	\$ 14,761.20	\$ 1,246.17	\$ 14,954.04	\$ 1,895.42	\$ 22,745.04
Difference	\$ 67.94	\$ 815.28	\$ 141.09	\$ 1,693.08	\$ 146.07	\$ 1,752.84	\$ 218.88	\$ 2,626.56

2017-2018BOE	Employee	Emp/Child (monthly)	Emp/Child (Annual)	Emp/Spouse (monthly)	Emp/Spouse (annual)	Emp/Dep. (monthly)	Emp/Dep. (annual)
Employee	\$ 648.19	\$ 649.00	\$ 7,788.00	\$ 649.00	\$ 7,788.00	\$ 649.00	\$ 7,788.00
(per month)extra	\$ -	\$ -	\$ (8,676.00)	\$ -	\$ (8,928.60)	\$ -	\$ (17,593.32)
			\$ (723.00)		\$ (744.05)		\$ (1,466.11)

2017-2018	Employee	Emp/Child (monthly)	Emp/Child (Annual)	Emp/Spouse (monthly)	Emp/Spouse (annual)	Emp/Dep. (monthly)	Emp/Dep. (annual)	
Employee	\$ 648.19	\$ 648.19	\$ 7,778.28	\$ 648.19	\$ 7,778.28	\$ 648.19	\$ 7,778.28	
(per month)extra	\$ -	\$ -	\$ (8,676.00)	\$ -	\$ (8,928.60)	\$ -	\$ (17,593.32)	
to Health Savings	\$ 54.60	\$ 655.20	\$ 702.79	\$ 8,433.48	\$ 702.79	\$ 8,433.48	\$ 702.79	\$ 8,433.48

2017-2018	\$ 8,433.48	\$ 30,665.00	\$ 6,166	\$ 36,833.00
2016-2017	\$ 7,676.64	\$ 30,665.00	\$ 6,229	\$ 36,894.00
	\$ 756.84	\$ -	\$ -	\$ -

Salary Adjustment	Base	Health Ins.
2009-2010	\$ 30,665.00	\$ 6,166
2010-2011	\$ 30,665.00	\$ 6,229
2012-2013	\$ 31,265.00	\$ 6,024
2013-2014	\$ 32,675.00	\$ 6,902
2014-2015	\$ 33,300.00	\$ 6,740
2015-2016	\$ 33,800.00	\$ 6,929
2016-2017	\$ 33,800.00	\$ 7,677
2017-2018	\$ 33,800.00	\$ 8,434

\$ 3,000.00 deductible
 \$ 655.20 USD to HAS
 \$ 2,344.80 Out of Pocket