

Changes for 2026

The District strives to minimize benefit changes from year to year, but rising costs and regulation changes require the District to make small changes to maintain the stability of the District's health plans and compliance with IRS regulations. The District will be increasing Deductibles for 2026 as follows:

Traditional plan

Single:	Increase from \$900 to \$1,200
Couple/Family:	Increase from \$2,700 to \$3,600

High Deductible Plan

Single:	Increase from \$1,650 to \$2,000
Couple/Family:	Increase from \$3,300 to \$4,000

The District will absorb the full rate increase for the base coverage on the Traditional and High Deductible Health plans for 2026. The District will provide an equivalent subsidy for the buy-up options, however, the additional expense for these plans will be added to the employee portion of the premium.

EMI Health will be increasing the Dental rates for 2026 as follows:

Value Plan

Employee	\$0.50
Employee + 1	\$1.00
Family	\$1.50

Advantage Copay Plan

Employee	\$11.30
Employee + 1	\$20.40
Family	\$32.00

Choice PPO Plan

Employee	\$20.90
Employee + 1	\$38.10
Family	\$59.65

Choice Indemnity Plan

Employee	\$24.20
Employee + 1	\$44.15
Family	\$69.00

The IRS has increased the contribution limits for 2026 for HSA, FSA and Dependent Care FSA Plans. Consequently, the District has increased the 2026 limits as follows:

HSA: Individual Limit	\$4,400
Family Limit	\$8,750
FSA Limit:	\$3,300
Dependent Care FSA:	\$7,500