

2025 / 2026 Benefits at a Glance

September 1, 2025 – August 31, 2026



Partner Solutions

Covenant Academies Foundation

What's Changing in 2025?

Effective September 1st, we're excited to introduce five new medical plans. As always, we remain committed to offering a range of options while carefully managing employee premiums. These new plans are designed to give you flexibility and choice to fit your individual and family healthcare needs.

We encourage all employees to review the new plan details carefully to make an informed decision that best supports the health and well-being of you and your family.

In addition, we are increasing the value of our vision plan by increasing the frame benefit allowance.



Benefit Guide

Scan or click the QR code for your 2025 / 2026 Benefit Guide, or you can view it on your employee portal. You can also visit our benefit guide by clicking [HERE](#):

Health and Prescription Insurance

Highlights

	BCN HMO \$1,000	BCN HMO \$3,000	BCN HMO HSA \$3,300*	BCBS SB PPO \$2,000	BCBS SB PPO HSA \$3,500*
Calendar Year Deductible	\$1,000 / \$2,000	\$3,000 / \$6,000	\$3,300 / \$6,600	\$2,000 / \$4,000	\$3,500 / \$7,000
Out-of-Pocket Maximum	\$8,150 / \$16,300	\$8,150 / \$16,300	\$6,900 / \$13,800	\$8,150 / \$16,300	\$6,350 / \$12,700
Coinsurance	20%	20%	20%	20%	20%
Coinsurance Maximum	\$2,500 / \$5,000	\$2,500 / \$5,000	N/A	\$2,500 / \$5,000	N/A

Benefit Costs per Pay

	BCN HMO \$1,000	BCN HMO \$3,000	BCN HMO HSA \$3,300*	BCBS SB PPO \$2,000	BCBS SB PPO HSA \$3,500*
Employee	\$70.47	\$37.07	\$0.00	\$151.39	\$89.79
Employee + 1	\$169.13	\$89.01	\$0.00	\$363.36	\$207.18
Employee + Family	\$211.41	\$111.27	\$0.00	\$454.20	\$269.40

Spending Accounts

***Health Savings Accounts** are a tax-sheltered bank account to be used for your eligible health care expenses. If you enroll in either of the HSA plans a HealthEquity HSA is automatically opened on your behalf. For the 2025 plan year Partner Solutions will contribute money into your HSA: \$500 for employee coverage, \$1,000 if you are enrolled with one dependent, and \$1,500 if you are enrolled with more than one dependent.

Flexible Spending Accounts are another form of a tax-sheltered account. The 2025 annual maximum is \$3,300 for Health Care FSA's and \$5,000 for Dependent Care FSA's. You **MUST** use the full amount in your account by the end of the plan year, if you do not you will lose any remaining funds.

Opt-Out Credit

Employees who waive all medical coverage through the system will receive an annual opt out-payment of \$4,000 for employee only coverage or \$6,000 for employee plus dependent coverage.

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Dental Insurance

Highlights

	Delta Dental PPO	Delta Dental Premier	Non-Participating
Deductible	\$50 / \$150	\$50 / \$150	\$50 / \$150
Annual Maximum	\$1,500	\$1,500	\$1,500
Coverage	Preventive 100% / Basic 90% / Major 60%	Preventive 100% / Basic 90% / Major 60%	Preventive 100% / Basic 90% / Major 60%

Benefit Costs per Pay

Employee	\$0.00
Employee + 1	\$0.00
Employee + Family	\$0.00

Vision Insurance

Highlights

Exams	\$10 copay
Materials	\$10 copay
Benefit Frequency	12 (exams) / 12 (lenses) / 24 (frames) / 12 (contact lenses)

Benefit Costs per Pay

Employee	\$0.00
Employee + 1	\$0.00
Employee + Family	\$0.00

Life and AD&D Insurance

	Basic	Voluntary
Employee Benefit Amount	1 x your annual salary	3 x your annual salary
Employee Benefit Maximum	\$100,000	\$300,000

Disability Insurance

	Short Term	Long Term
Benefit Amount	60% up to \$1,500 per week	60% up to \$10,000 per month
Benefit Duration	13 weeks	Social Security Normal Retirement Age

401(k)

Eligibility	Permanent employees over the age of 21, on the first of the month following 60 from date of hire
Auto Enrollment	3% of your gross pay will be contributed from your paycheck
Auto Escalate	Increase by 1% up to 10%
Employer Match	8%