

Schalmont Central School District

4 Sabre Drive
Schenectady, NY 12306

BUSINESS OFFICE MEMORANDUM

To: All Retirees

From: Melissa Gemmett – Payroll and Benefits Coordinator

RE: Health Insurance Open Enrollment

Date: April 27, 2026

Attached to this memo are the new rates for all available health plans. The open enrollment period for current health plan participants and eligible retirees will be through Friday, May 29, 2026. During this period, retirees may choose any of the attached health plans. If you are not making any changes regarding your health or vision coverage, you do not need to do anything.

If you wish to make a change and need enrollment forms, please contact me via phone or email. I can send them to you or you can find all forms on our website, Schalmont.org, under Staff Resources.

All updated forms must be returned by Friday, May 29, 2026, for coverage effective July 1, 2026.

If you would like more information or have any questions, please contact me at (518) 355-9200 ext. 4009 or mgemmett@schalmont.net.

There is no change in the Vision rates for 2026-2027.

****A friendly reminder, please make sure you are providing the district with your letter sent from Social Security Administration (Notice of Cost-of-Living Adjustment (COLA)) on a yearly basis. This letter is used to calculate your Quarterly Medicare Reimbursement that the district reimburses you. If we do not get this, you will be reimbursed the standard amount set forth by Social Security. ****

2026-2027 Retiree Insurance Rates

Name of Plan	Monthly Rate	Monthly Retiree Payment					
		5%	7%	10%	12%	15%	20%
BS/Highmark 815 - Individual	1,200.94	60.05	84.07	120.09	144.11	180.14	240.19
BS/ Highmark - 2 Person	2,486.78	124.34	174.07	248.68	298.41	373.02	497.36
CDPHP EPO - Individual	1,148.16	57.41	80.37	114.82	137.78	172.22	229.63
CDPHP EPO - 2 Person	2,288.78	114.44	160.21	228.88	274.65	343.32	457.76
In Area BS/Forever Blue MAP - Individual **	484.50	24.23	33.92	48.45	58.14	72.68	96.90
Out of Area BS/Forever Blue MAP - 2 Person **	969.00	48.45	67.83	96.90	116.28	145.35	193.80
Out of Area BS/Forever Blue MAP - Individual **	467.50	23.38	32.73	46.75	56.10	70.13	93.50
Out of Area BS/Forever Blue MAP - 2 Person **	935.00	46.75	65.45	93.50	112.20	140.25	187.00
CDPHP MAP - Individual **	444.52	22.23	31.12	44.45	53.34	66.68	88.90
CDPHP - MAP 2 Person **	889.04	44.45	62.23	88.90	106.68	133.36	177.81
MVP MAP - Individual **	563.12	28.16	39.42	56.31	67.57	84.47	112.62
MVP MAP - 2 Person **	1,126.24	56.31	78.84	112.62	135.15	168.94	225.25
Vision - Ind	21.22	1.06	1.49	2.12	2.55	3.18	4.24
Vision - 2 Person	49.43	2.47	3.46	4.94	5.93	7.41	9.89

** MAP (Medicare Advantage Plans) pricing is for the calendar year January through December

Prices change effective January 1, 2027 for MAP Plans ONLY