

# Overview and Highlights of your Healthcare Plan

2023 - 2025

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On December 1, a panel of arbitrators unanimously rejected the Vermont School Boards Association's attempt to make healthcare more expensive and less accessible to the state's educators, especially women and those who earn the least. What's striking is that, in the end, your team was able to beat back huge increases in out-of-pocket costs, an unfair and unreasonable scheme to hike premium costs for ESPs and other non-licensed staff, and a cynical attempt to make many non-licensed employees ineligible for healthcare coverage at all.

Like in the first round of statewide healthcare bargaining, your team of experienced and dedicated local negotiators came armed with facts, solid economic arguments, and a relentless focus on what's really at stake: the health and well-being of the thousands of you who dedicate your lives to Vermont's children. The difference was clear: while the VSBA touted your healthcare as a shiny "Rolls Royce" in need of "having some of the chrome removed," your team went beyond the numbers and reminded the arbitrators that what we're talking about is real people whose healthcare is at risk.

The current healthcare plan remains intact until December 31, 2022. As you'll see below, the changes coming as a result of your team's hard work are modest and, in many cases, leaves current plan provisions untouched. [You can click here to see just how bad your healthcare plan would have been if the VSBA had prevailed.](#)

In the coming weeks, we'll let you know about opportunities to ask questions, get answers, and hear from your bargaining team. They – and a dedicated cadre of Vermont-NEA staffers – worked for nearly a year to ensure that your healthcare remains available, affordable, and comprehensive.

## Duration

Effective for all covered employees from January 1, 2023 through December 31, 2025.

## Eligibility

All school employees who work at least 17.5 hours a week are eligible for all tiers of coverage. Non-full-time employees will receive a prorated premium payment from school boards. **This is unchanged from the current arrangement.**

## Employment Status

Full-time status for all public-school employees to be bargained locally. **This is unchanged from the current arrangement.**

## Premium Contributions

For the entire duration of the new healthcare agreement, **teachers and licensed employees** will pay 20 percent of premiums for VEHI Gold CDHP and VEHI Silver CDHP, with school boards paying 80 percent. For employees choosing VEHI Gold or Platinum Plans, boards will pay the equivalent of 80 percent of the premium for Gold CDHP; employees will pay the remainder. **This is unchanged from the current premium split.**

**Support staff** who do not already pay 20 percent of their premiums will be subject to a 1 percentage point increase each year. This is less than the 2 percent increase that will go into effect under the current plan on January 1, 2020. If support staff are already at 20 percent when the new agreement starts on January 1, 2023, there will be no hikes in premium splits for the duration of the agreement. **These are smaller increases than what current terms require for this coming year.**

Pro-rata contributions for less-than-full-time employees will be determined locally. Regardless of prorated premium sharing, out-of-pocket expenses will remain the same for all tiers and all plans. **This is unchanged from the current arrangement.**

## Tiers of Coverage

All employees will be eligible for all tiers of coverage. **This is unchanged from the current arrangement.**

## Out-of-Pocket Expenses

The maximum **a teacher or other licensed employee** will have to pay toward out-of-pocket expenses will be \$600 for single coverage and \$1,000 for all other tiers. These amounts only apply after school boards pay \$1,900 for single coverage and \$4,000 for all other tiers. **This is a slight increase from the current arrangement.**

The maximum an **ESP or other non-licensed employee** will have to pay toward out-of-pocket expenses will be \$300 for single coverage and \$600 for all other tiers. These amounts only apply after school boards pay \$2,200 for single coverage and \$4,400 for all other tiers. **This is unchanged from the current arrangement.**

## Grievance Process

A grievance can be filed by the local association or school board to the Commission on Public School Employee Health Benefits. This commission has an equal number of representatives from unions and school boards. The commission then hears the grievance; if no majority is found, the matter heads to arbitration. **This is a change from the current arrangement.**

## Cash-in-lieu of Insurance

The provision of payments to employees who obtain health insurance from sources other than a school district will continue to be governed by the local bargaining process. **This is unchanged from the current arrangement.**