Did you know?

May 4, 2026 **WCSD Benefits Monthly Newsletter**

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INSURANCE TERMINOLOGY

Premium: The amount you pay for insurance monthly.
Deductible: The amount you pay out-of-pocket before your coverage starts with a Qualified High Deductible Health Plan. With a traditional plan, deductibles apply to major medical.
Co-insurance: The amount you owe to a medical provider once the deductible has been paid.
Co-pay: A fixed amount you pay for a covered health care service.
Out-of-pocket max: The most you have to pay for covered services in a plan year. If you hit this limit, the health plan pays 100% of the costs of covered benefits in the plan year.
EOB: A statement or Explanation of Benefits from your insurance plan that describes what costs are covered by the plan and what costs the member is responsible to pay.
In-network: Refers to physicians, other health care providers, and facilities that are covered within the insurance plan. Generally the most cost-effective option.

Note: Our plan year begins August 1st and ends the following July 31st.

HEALTH SAVINGS ACCOUNTS

If you enrolled in the Qualified High Deductible Health Plan (QHDHP), you also have the Health Savings Account (HSA). You can make changes to the HSA at any time during the year. The HSA family limit is $8750, and for singles is $4400, with the 55+ additional catch-up of $1000 for 2026.

Click here for the HSA change form

Additionally, you can learn what expenses can be paid using your HSA benefits.

Click here for the qualified expenses

URS AUREUS SYSTEM

Create your account in the new URS system that is now up and running.
Verify your personal information is correct, add beneficiaries, view your retirement account balances, and more!

Sign up for Individual Retirement Planning Sessions. This is FREE!

Click here for more info

TAVA MENTAL HEALTH

TAVA mental health session reset on July 1st. Employees get 15 free sessions with TAVA during the 2026-2027 school year.

Click here for more information