

# Temple ISD

2025 Proposal



## Workers' Compensation Coverage

Effective Dates: 9/1/2025 - 9/1/2026

### Your INSURICA Contact:

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## Temple ISD


**Current Rate Guarantee:** 3 Years (2025 - 2028)\*

**Effective Date:** 9.1.2025

	Payrolls	Rates*
7380 – Bus Drivers	\$ 1,193,518.00	3.0359
8810 – Clerical	\$ 3,471,546.00	0.1752
8868 – Professional	\$ 65,296,438.00	0.3471
9101 – Other	\$ 4,537,973.00	2.9988
<b>Total:</b>	<b>\$ 74,499,475.00</b>	

## Member Benefits

A+ Rated Specific Excess Insurance	Medical Bill Reviews
Texas-Based Claims Administrator	Bi-Lingual Claims Adjusters
On-Site Loss Prevention Services	Personal Protective Equipment
Safety Incentives	Wellness Program

Coverage Provider	Current Annual Cost	New 3 Year Annual Cost*
	\$ 436,243.73	\$ 405,044.83
Year 1 Savings		\$ 31,198.90
Total Savings		\$ 93,596.69

\* Subject to acceptance of the attached 3 year Addendum



## 3 Year Interlocal Addendum

### Guaranteed Rates Per \$100 of Payroll

7380: 3.0359 8810: 0.1752 8868: 0.3471 9101: 2.9988

1. The Workers' Compensation Solutions Program (WCS) hereby agrees to provide Temple ISD the guaranteed rates per classification for 2025-26, 2026-27 and 2027-28.
2. If the District provides notice of cancellation prior to the end of this three-year agreement, a short-term cancellation contribution of 20% of the annual contribution for each year will be charged and payable within 30 days after notice is received.
3. The initial quarterly contribution payment is due by the effective date of this coverage, September 1, 2025.
4. The District agrees to abide by the WCS Definitions and Guidelines as approved by the WCS Board of Directors.
5. This Addendum is subject to annual appropriations by the District. This Addendum may be terminated by the District on any successive renewal date by giving written notice no later than sixty (60) days prior to the renewal date. If the District terminates for any reason prior to the end of this Addendum, a short-term cancellation contribution as stated in #2 will apply.
6. This Addendum and the Original Interlocal Agreement, completed on May 10, 2021, shall represent the entire agreement and may not be amended or altered without the written consent of both parties.

IN WITNESS WHEREOF, the undersigned agrees to the Addendum to the Interlocal Agreement.  
EXECUTED, \_\_\_\_\_, 2025 and effective as of September 1, 2025.

Temple ISD

By: \_\_\_\_\_

Title: \_\_\_\_\_

### **WORKERS' COMPENSATION SOLUTIONS**

By: \_\_\_\_\_  
Chairperson, Workers' Compensation Solutions

Date: \_\_\_\_\_