COMPTRACKER REPORT REQUEST FORM



Name:	Phone:	
Email address:		
Mailing address:		
Please compare this district	to:	

You may select up to 10 districts for comparison:

1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

Reports requested

Salary schedules	This report will show the available district salary
Career Earnings (20 year and 30 year)	schedules for the selected contract year.The Career Earnings report analyzes total careerearnings based on a projected career path
Lane Comparisons	The Salary Lane Comparables tool presents a side-by- side comparison of salary lanes from your district to other districts.
Medical Insurance Premiums Report	This report generates data on district medical plan premiums for the chosen contract year. Both district and employee insurance premium costs are provided at the single, family, two-party, and single with child coverage levels. Figures for average medical insurance premium expenses for comparable districts are also provided.
Medical Insurance Deductibles and Out-Of- Pocket Limits Report	This report provides detailed information regarding the deductibles and out-of-pocket maximums for district medical plans associated with the chosen contract year. Deductible and out-of-pocket expense information is broken down by in-network and out-of-network scenarios where applicable. Each medical plan in this report is identified by district name, carrier name, and plan type (HMO, PPO, etc.)
Medical Insurance Copay and Prescription Costs Report	This report generates information on copay and prescription costs for district medical plans associated with the chosen contract year. Copay and prescription data is broken down by in-network and out-of-network scenarios where applicable

FOR SCHOOL YEAR(S):

_____ DATE NEEDED: ____

(Note that not all years requested will be available)

(Allow one week minimum for turnaround)

Received: ___/__/ Processed: __/__/

Ву:_____

Please return this form to your Education Minnesota Field Representative

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