

MARIN COUNTY OFFICE OF EDUCATION

CLASSIFIED EMPLOYEES (CSEA)

HEALTH, DENTAL, VISION AND LIFE INSURANCE PLANS AVAILABLE

2018/2019

Effective October 1, 2018

REVISED 9/18/2018

HEALTH INSURANCE

Plans	Monthly Rates	MCOE Pays	Employee Pays
<u>KAISER HEALTH PLAN - TRADITIONAL</u>			
Employee only	\$691.01	\$691.01	\$0.00
Employee and 1 dependent	\$1,485.69	\$961.05	\$524.64
Employee and 2 or more dependents	\$2,038.50	\$961.05	\$1,077.45
<u>KAISER HEALTH PLAN - VALUE OPTION</u>			
Employee only	\$553.98	\$553.98	\$0.00
Employee and 1 dependent	\$1,191.06	\$961.05	\$230.01
Employee and 2 or more dependents	\$1,634.24	\$961.05	\$673.19
<u>KAISER HEALTH PLAN - HEALTH SAVINGS ACCT</u>			
Employee only	\$498.17	\$498.17	\$0.00
Employee and 1 dependent	\$1,071.07	\$961.05	\$110.02
Employee and 2 or more dependents	\$1,469.61	\$961.05	\$508.56
<u>WHA - ADVANTAGE 15-30, RX H</u>			
Employee only	\$698.21	\$698.21	\$0.00
Employee and 1 dependent	\$1,501.17	\$961.05	\$540.12
Employee and 2 or more dependents	\$2,059.74	\$961.05	\$1,098.69
<u>WHA - WESTERN 2800B HSA HDHP</u>			
Employee only	\$473.35	\$473.35	\$0.00
Employee and 1 dependent	\$1,017.70	\$961.05	\$56.65
Employee and 2 or more dependents	\$1,396.39	\$961.05	\$435.34

CAP: \$961.05

DENTAL, VISION and LIFE

Plans	Monthly Rates	MCOE Pays	Employee Pays
<u>DELTA DENTAL</u>			
Employee and dependents	\$124.23	\$124.23	\$0.00
<u>VISION SERVICE PLAN (VSP)</u>			
Employee and dependents	\$17.02	\$17.02	\$0.00
<u>HARTFORD INSURANCE *</u>			
Employee only - \$9,400	\$2.70	\$2.70	\$0.00
Dependent life - \$1,000	\$0.56	\$0.00	\$0.56
*Term Insurance			

CAP: \$143.95

TOTAL CAP: \$1,105.00 (\$961.05 Health, \$143.95 Dental/Vision/Life)

SUMMARY OF EMPLOYEE BENEFITS

Pursuant to Internal Revenue Code Section 89 (k), all employees and retirees eligible for district paid benefits must be notified regarding available benefits and under what circumstances employees are qualified to receive benefits.

The Classified employees of the Marin County Office of Education are currently entitled to the following benefits:

Medical, Dental and Vision Benefits:

A choice of five medical benefit plans: Kaiser (Traditional, Value, & Health Savings Account). Western Health Advantage (Advantage 15-30 RX H, Western 2800B HSA HDHP) Also available is coverage through Delta Dental of California and Vision Service Plan.

1. Eligibility: Specific eligibility for these plans is set forth in the 2018-19 CSEA Collectively Bargained Agreement and Health Benefit Matrix (reverse).
2. Summary Plan Description: The contracts between the Marin County Office of Education and these companies are on file in this office and the benefit booklets are available for review on work days between the hours of 8:00 a.m. and 5:00 p.m.
3. Election to Participate: Eligible employees may participate in the plans upon completion of an application for coverage during the open enrollment period, which usually occurs during the months of August/September each year. For new eligible employees and their dependents, after the employee has completed the application, insurance coverage takes effect on the first day of the month following two months of employment. (Exception: immediate coverage will take effect for a newborn if application is completed within 30 days of the birth).