SHAWNEE MISSION SCHOOL DISTRICT 2018 EMPLOYEE BENEFITS

Medical Rates

	Blue Care HMO				
	Monthly	Monthly Contribution			
	Premium	Employer Employee (WIR) (NPR)			
Employee	\$736.71	\$649.00	\$87.71	\$137.71	
Employee + One	\$1,509.39	\$649.00	\$860.39	\$910.39	
Family	\$2,230.33	\$649.00	\$1,581.33	\$1,631.33	

	Preferred Care Blue PPO				
	Monthly	Monthly Contribution			
	Premium	Employer Employee (WIR) (NPR)			
Employee	\$736.71	\$649.00	\$87.71	\$137.71	
Employee + One	\$1,509.39	\$649.00	\$860.39	\$910.39	
Family	\$2,230.33	\$649.00	\$1,581.33	\$1,631.33	

	BlueSelect Plus PPO				
	Monthly	Monthly Contribution			
	Premium	Employer Employee (WIR) (NPR)			
Employee	\$661.16	\$649.00	\$12.16	\$62.16	
Employee + One	\$1,354.67	\$649.00	\$705.67	\$755.67	
Family	\$2,001.72	\$649.00	\$1,352.72	\$1,402.72	

	BlueSaver HDHP (PPO)				
	Monthly Monthly Contribution HSA Contribution*			tribution*	
	Premium	Employer Employee		WIR	NPR
Employee	\$541.92	\$649.00	Zero	\$107.08	\$57.08
Employee + One	\$1,111.00	\$649.00	\$569.08	\$107.08	\$57.08
Family	\$1,643.46	\$649.00	\$1,101.54	\$107.08	\$57.08

	BlueSelect Plus HDHP (PPO)					
	Monthly	Monthly Monthly Contribution HSA Contribution*				
	Premium	Employer	Employee	WIR	NPR	
Employee	\$489.74	\$649.00	Zero	\$159.26	\$109.26	
Employee + One	\$1,004.08	\$649.00	\$514.34	\$159.26	\$109.26	
Family	\$1,485.27	\$649.00	\$996.00	\$159.26	\$109.26	

^{*} District will contribute monthly to your HSA account

NPR stands for Non-Participation Rate
WIR stands for Wellness Incentive Rate

SHAWNEE MISSION SCHOOL DISTRICT 2018 EMPLOYEE BENEFITS

Dental Insurance provided by Delta Dental of Kansas

	PPO (Group 2604-01)	Premier (Group 2504-01)
Tier Level of Coverage	Monthly Dental Premium	Monthly Dental Premium
Employee Only	\$31.28	\$37.93
Employee + One	\$63.42	\$80.47
Employee + Family	\$107.34	\$122.96

Vision Insurance provided by Vision Service Plan (VSP) ~ Group 12026827

Tier Level of Coverage	Monthly Vision Premium
Employee Only	\$13.84
Employee + One / Employee + Family	\$29.84

Dependent Care and Medical Reimbursement Accounts provided by Flex Made Easy

FSA Medical Details	FSA Dependent Care Details
Maximum of \$2,650 annual pledge	Maximum of \$5,000 annual pledge per household
Use-it or Lose-it Account	Use-it or Lose-it Account
If the employee enrolls in a high deductible plan	Free debit cards for both flexible spending accounts
with HSA and elects FSA Medical Account then this	and many convenient methods for reimbursement;
account will be a limited-purpose FSA allowing only	IRS governs these types of accounts so keep
qualified dental and vision expenses to be	accurate records in the event of a tax audit
reimbursed	

Short Term Disability provided by Assurant Employee Benefits ~ Group 4022885-0

Short Term Disability Plan Details		
Short-term disability salary protection is an optional voluntary benefit and is an after-tax benefit		
Formula for calculating the monthly premium:		
Annual salary x .70 x .040 divided by 52 = Monthly Premium (\$.40 per \$10 of benefit)		
Total duration of this benefit is 25 consecutive weeks		
Coverage provides 70% of weekly compensation up to a maximum of \$1,100		
This benefit has a 5-day waiting period and all accumulated paid leave must be exhausted		
Dovetails to KPERS Long Term Disability		

SHAWNEE MISSION SCHOOL DISTRICT 2018 EMPLOYEE BENEFITS

Voluntary Life Insurance provided by Standard Insurance Company ~ Group 155117

Voluntary Employee Life Details	Voluntary Spouse/Child Life Details
Voluntary Employee Life coverage is available in	Voluntary Spouse Life coverage is available in
increments of \$10,000 up to \$350,000 and is an	increments of \$5,000 up to \$175,000 and is an after-
after-tax benefit	tax benefit
\$350,000 is the maximum face value for Voluntary	Guaranteed Issue for Voluntary Spouse Life coverage
Employee Life coverage	is \$25,000 when first eligible for coverage
Guaranteed Issue for Voluntary Employee Life	Voluntary Spouse Life coverage cannot exceed 100%
coverage is \$250,000 when first eligible for	of the employee's life coverage amount
coverage	
Voluntary Employee Life must be elected to enroll in	Voluntary Child Life coverage is available in \$5,000
Voluntary Spouse Life and/or Voluntary Child Life	or \$10,000 increments
Refer to age-banded monthly premium rate sheet	\$10,000 is the maximum face value for Voluntary
for all voluntary life rates	Child Life

Annual increases are allowed during open enrollment. Employee life can be increased by 10K each year with completion of an enrollment application. Spouse life can be increased by 5K each year with completion of an enrollment application. No underwriting is required on annual increases within the guidelines explained above. Increases over 10K on employee life and increases over 5K on spouse life still require medical underwriting. If it is the first time to enroll in life insurance during open enrollment then medical underwriting is required.