



Private Education in a Public School Setting

## Riverside School District No. 2 2016-2017 Group Insurance Benefit Premiums

The District will pay the premium rates for the employee's Medical, Dental, Vision and Basic Life Insurance coverage. **Employees who waive medical coverage must submit proof of other medical insurance.** Costs that are the responsibility of the employee will be deducted through 22 payroll deductions beginning with the payroll of **July 29, 2016 and ending on May 26, 2017.**

MEDICAL – ASBAIT/MERITAIN				
CO-PAY GOLD (PPO)	RATE	RESD CONTRIBUTION	EMPLOYEE CONTRIBUTION	EMPLOYEE PER PAY PERIOD RATE
Employee Only	\$468.00	\$468.00	\$0.00	\$0.00
Employee + 1 Dependent	\$937.00	\$468.00	\$469.00	\$255.82
Employee + Children or Family	\$1254.00	\$468.00	\$786.00	\$428.73
VALUE GOLD (PPO)	RATE	RESD CONTRIBUTION	EMPLOYEE CONTRIBUTION	EMPLOYEE PER PAY PERIOD RATE
Employee Only	\$384.00	\$384.00	\$0.00	\$0.00
Employee + 1 Dependent	\$768.00	\$384.00	\$384.00	\$209.45
Employee + Children or Family	\$1028.00	\$384.00	\$644.00	\$351.27
**Monthly Contribution to Health Saving Account by RESD = <b>\$84.00 Per Month**</b>				
HDHP \$2,600 (PPO)	RATE	RESD CONTRIBUTION	EMPLOYEE CONTRIBUTION	EMPLOYEE PER PAY PERIOD RATE
Employee Only	\$321.00	\$321.00	\$0.00	\$0.00
Employee + 1 Dependent	\$640.00	\$321.00	\$319.00	\$174.00
Employee + Children or Family	\$856.00	\$321.00	\$535.00	\$291.82
**Monthly Contribution to Health Saving Account by RESD = <b>\$147.00 Per Month**</b>				

DENTAL – DELTA DENTAL				
PPO PLUS PREMIER	RATE	RESD CONTRIBUTION	EMPLOYEE CONTRIBUTION	EMPLOYEE PER PAY PERIOD RATE
Employee Only	\$35.79	\$35.79	\$0.00	\$0.00
Employee + Spouse	\$74.74	\$35.79	\$38.95	\$21.25
Employee + Child(ren)	\$88.55	\$35.79	\$52.76	\$28.78
Employee + Family	\$144.99	\$35.79	\$109.20	\$59.56

VISION – SIGHTCARE				
SIGHTCARE	RATE	RESD CONTRIBUTION	EMPLOYEE CONTRIBUTION	EMPLOYEE PER PAY PERIOD RATE
Employee Only	\$4.19	\$4.19	\$0.00	\$0.00
Employee + 1 Dependent	\$7.53	\$4.19	\$3.34	\$1.82
Employee + Children	\$8.36	\$4.19	\$4.17	\$2.27
Employee + Family	\$10.87	\$4.19	\$6.68	\$3.64

LIFE - PRUDENTIAL			
BASIC LIFE & AD&D	RATE	\$40,000.00 Policy Per Employee Basic Life & AD&D	
Employee	Paid by RESD		
SUPPLEMENTAL LIFE	EMPLOYEE	SPOUSE	CHILD(REN)
Amount Options	\$10,000 - \$500,000	½ of Employees Benefit up to \$100,000	½ of Employees Benefit up to \$10,000
RATE	Based on Benefit Amount		
SHORT TERM DISABILITY	RATE	The weekly benefit is 60% of your weekly pre-disability earnings, up to a maximum of \$1,000	
Employee	Based on Annual Salary & Age		

PET – UNITED PET CARE	
NUMBER OF PETS	RATE PER PAY PERIOD
1	\$5.78
2	\$11.02
3	\$16.15
4	\$21.22