MRH SUPPORT Staff Board Paid Benefits 2019-2020

Employee Group	Sick Days	Personal Days	Peers/ or PSRS Teacher Retirement	Anthem Health Insurance	Delta Dental Insurance	Anthem Group Life/Accidental Insurance
Full-time 30-40 hours	10 or 12 days per year (Accruable to 132	2 or 5 days per year (Accruable to 3 or 6)	District Matched 6.86%	Eligible for District Paid Health Insurance	Eligible for District Paid Dental Insurance	Eligible for District Paid Life Insurance 1x Salary
20-29 hours	10 days per year (Accruable to 132 Prorated to days worked per hour.	2 days per year (Accruable to 3) Prorated to days worked per hour	District Matched 6.86%	n/a	n/a	n/a

Anthem Medical Coverage	Anthem \$0 Corridor Plan	Anthem \$500 Corridor Plan (Board Paid Only)	Anthem \$1500 Base Corridor			
Employee	\$650.00	\$588.00	\$513.00			
Spouse	\$680.00	\$622.00	\$555.00			
Child(ren)	\$603.00	\$547.00	\$477.00			
Family	\$1,113.00	\$1,049.00	\$951.00			
Kidz Plan						
One Child - \$198.50						
Two or More Children - \$397.00						

	Delta Dental PPO (Out of Network) /EPO (In-Network) Plan	Vision Blue (Not Board Paid)
Employee	\$25.80 (Board Paid Only)	\$8.36
Spouse or 1 Dependent	\$50.74	\$12.55
Family	\$83.74	\$22.09

Dollar (\$) Amount is Cost per Month

For Detailed Benefit Information, Please Visit <u>WWW.MYBENERGY.COM</u> USERNAME:mrhsdk12 PASSWORD: csd

*Medical rates are effective October 1, 2018 through September 30, 2019