

BENEFIT ELIGIBILITY LIST 2021: HOURLY CUSTODIAL 12 MONTH PART-TIME

Premium Amounts Are Per Pay Check

HEALTH INSURANCE*	Bi-Weekly 24 Pays Non-Wellness Participant	Bi-Weekly 24 Pays Non-Wellness Participant	Bi-Weekly 24 Pays Wellness Participant	Bi-Weekly 24 Pays Wellness Participant
TRADITIONAL PREFERRED PROVIDER OPTION #1	DISTRICT PAYS:	EMPLOYEE PAYS:	DISTRICT PAYS:	EMPLOYEE PAYS:
SINGLE PPO HEALTH	\$134.48	\$224.14	\$152.42	\$206.21
EMPLOYEE + SPOUSE PPO HEALTH	\$282.38	\$470.63	\$320.03	\$432.98
EMPLOYEE + CHILDREN PPO HEALTH	\$248.78	\$414.64	\$281.95	\$381.46
EMPLOYEE + FAMILY PPO HEALTH	\$379.14	\$631.90	\$429.69	\$581.35
STANDARD HIGH DEDUCTIBLE PLAN OPTION #2	DISTRICT PAYS:	EMPLOYEE PAYS:	DISTRICT PAYS:	EMPLOYEE PAYS:
SINGLE HDHP HEALTH	\$132.51	\$161.95	\$147.23	\$147.23
EMPLOYEE + SPOUSE HDHP HEALTH	\$278.25	\$340.08	\$309.17	\$309.17
EMPLOYEE + CHILDREN HDHP HEALTH	\$244.95	\$299.38	\$272.17	\$272.17
EMPLOYEE + FAMILY HDHP HEALTH	\$373.43	\$456.41	\$414.92	\$414.92
CHI NETWORK HIGH DEDUCTIBLE PLAN OPTION #3	DISTRICT PAYS:	EMPLOYEE PAYS:	DISTRICT PAYS:	EMPLOYEE PAYS:
SINGLE HDHP HEALTH	\$116.34	\$142.20	\$129.27	\$129.27
EMPLOYEE + SPOUSE HDHP HEALTH	\$243.56	\$297.69	\$270.63	\$270.63
EMPLOYEE + CHILDREN HDHP HEALTH	\$214.33	\$261.96	\$238.15	\$238.15
EMPLOYEE + FAMILY HDHP HEALTH	\$326.93	\$399.58	\$363.25	\$363.25
NHN NETWORK HIGH DEDUCTIBLE PLAN OPTION #4	DISTRICT PAYS:	EMPLOYEE PAYS:	DISTRICT PAYS:	EMPLOYEE PAYS:
SINGLE HDHP HEALTH	\$118.54	\$144.88	\$131.71	\$131.71
EMPLOYEE + SPOUSE HDHP HEALTH	\$248.16	\$303.30	\$275.73	\$275.73
EMPLOYEE + CHILDREN HDHP HEALTH	\$218.38	\$266.91	\$242.65	\$242.65
EMPLOYEE + FAMILY HDHP HEALTH	\$333.11	\$407.14	\$370.13	\$370.13
DENTAL INSURANCE*			District Pays Bi-Weekly 24 Pays	Employee Pays Bi-Weekly 24 Pays
SINGLE DENTAL			\$7.25	\$7.25
EMPLOYEE + SPOUSE DENTAL			\$7.25	\$24.75
EMPLOYEE + CHILDREN DENTAL			\$7.25	\$20.83
EMPLOYEE + FAMILY DENTAL			\$7.25	\$35.71
LIFE INSURANCE			District Pays Bi-Weekly 24 Pays	Employee Pays Bi-Weekly 24 Pays
\$50,000 TERM LIFE			\$1.63	\$0.00
Supplemental Life per \$50,000 in coverage (any request for an increase requires Evidence of Insurability form)*			\$0.00	\$5.00
Spouse Supplemental Life per \$25,000 in coverage (any request for an increase requires Evidence of Insurability form)*			\$0.00	\$2.25
Dependent Child Life \$10,000 Coverage			\$0.00	\$1.63
VISION INSURANCE			District Pays Bi-Weekly 24 Pays	Employee Pays Bi-Weekly 24 Pays
SINGLE VISION			\$0.00	\$3.28
EMPLOYEE + SPOUSE VISION			\$0.00	\$6.23
EMPLOYEE + CHILDREN VISION			\$0.00	\$6.56
EMPLOYEE + FAMILY VISION			\$0.00	\$9.64
OTHER BENEFITS			District Pays	Employee Pays
Contributions - Health Savings Accounts for qualifying persons electing Single Coverage - High Deductible Health Plans **			\$1,100.00	Employee Election
Contributions - Health Savings Accounts for qualifying persons electing Single+Dependant(s) Coverage - HDHP **			\$2,200.00	Employee Election
Employee Contributions - Section 125 Medical Plan for persons electing PPO Health Plan ***			\$0.00	Employee Election
Employee Contributions - Section 125 Child/Elder Care Plan ***			\$0.00	Employee Election
403(b) or 457 Tax Deferred Savings Retirement Account			\$0.00	Employee Election
Long Term Disability (required)			0.1600%	0.0000%
Nebraska Public Employees Retirement System (required) ****			9.8778%	9.7800%
Social Security / Medicare (required)			7.6500%	7.6500%

* - If you and your spouse both work for the District, contact Human Resources at 402-715-8582 for possible alternate rates.

** - Supplemental employee and spousal life insurance includes premium and coverage reductions at age 70 and 75.
Please contact Human Resources at 402-715-8582 for alternate rates.

*** - Employee contributions are limited by IRS Rules.

(2021 Limits = \$2,750 per year for Section 125 Medical and \$5,000 per year for Section 125 Child/Elder Care)

(2021 Limits for Health Savings Account = \$2,500 per year for single or \$5,000 for three family tiers of coverage after District contributions)

District Contribution: Based on your employment status in January / September, the District contributions are made on the date of your January / September paycheck

**** - Questions about the Nebraska Public Employees Retirement System may be addressed by calling 1-800-245-5712