

BENEFIT ELIGIBILITY LIST 2020: HOURLY PROFESSIONAL TECHNICAL 10 MONTH PART-TIME

Premium Amounts Are Per Pay Check

HEALTH INSURANCE*	19 Pays for Non-Wellness Participant	19 Pays for Non-Wellness Participant	19 Pays for Wellness Participant	19 Pays for Wellness Participant
TRADITIONAL PREFERRED PROVIDER OPTION #1	DISTRICT PAYS:	EMPLOYEE PAYS:	DISTRICT PAYS:	EMPLOYEE PAYS:
SINGLE PPO HEALTH	\$156.55	\$260.92	\$177.43	\$240.05
EMPLOYEE + SPOUSE PPO HEALTH	\$328.74	\$547.89	\$372.57	\$504.06
EMPLOYEE + CHILDREN PPO HEALTH	\$289.62	\$482.70	\$328.23	\$444.08
EMPLOYEE + FAMILY PPO HEALTH	\$441.39	\$735.66	\$500.25	\$676.81
STANDARD HIGH DEDUCTIBLE PLAN OPTION #2	DISTRICT PAYS:	EMPLOYEE PAYS:	DISTRICT PAYS:	EMPLOYEE PAYS:
SINGLE HDHP HEALTH	\$154.26	\$188.53	\$171.39	\$171.39
EMPLOYEE + SPOUSE HDHP HEALTH	\$323.93	\$395.91	\$359.92	\$359.92
EMPLOYEE + CHILDREN HDHP HEALTH	\$285.16	\$348.53	\$316.84	\$316.84
EMPLOYEE + FAMILY HDHP HEALTH	\$434.72	\$531.33	\$483.03	\$483.03
CHI NETWORK HIGH DEDUCTIBLE PLAN OPTION #3	DISTRICT PAYS:	EMPLOYEE PAYS:	DISTRICT PAYS:	EMPLOYEE PAYS:
SINGLE HDHP HEALTH	\$135.43	\$165.52	\$150.47	\$150.47
EMPLOYEE + SPOUSE HDHP HEALTH	\$283.55	\$346.56	\$315.05	\$315.05
EMPLOYEE + CHILDREN HDHP HEALTH	\$249.51	\$304.96	\$277.24	\$277.24
EMPLOYEE + FAMILY HDHP HEALTH	\$380.61	\$465.18	\$422.89	\$422.89
NHN NETWORK HIGH DEDUCTIBLE PLAN OPTION #4	DISTRICT PAYS:	EMPLOYEE PAYS:	DISTRICT PAYS:	EMPLOYEE PAYS:
SINGLE HDHP HEALTH	\$137.98	\$168.65	\$153.32	\$153.32
EMPLOYEE + SPOUSE HDHP HEALTH	\$288.90	\$353.10	\$321.00	\$321.00
EMPLOYEE + CHILDREN HDHP HEALTH	\$254.23	\$310.72	\$282.47	\$282.47
EMPLOYEE + FAMILY HDHP HEALTH	\$387.81	\$473.98	\$430.89	\$430.89
DENTAL INSURANCE*			District Pays 19 Pays Rate	Employee Pays 19 Pays Rate
SINGLE DENTAL			\$9.16	\$9.16
EMPLOYEE + SPOUSE DENTAL			\$9.16	\$31.26
EMPLOYEE + CHILDREN DENTAL			\$9.16	\$26.32
EMPLOYEE + FAMILY DENTAL			\$9.16	\$45.11
LIFE INSURANCE			District Pays 19 Pays Rate	Employee Pays 19 Pays Rate
\$50,000 TERM LIFE			\$2.37	\$0.00
Supplemental Life per \$50,000 in coverage (any request for an increase requires Evidence of Insurability form)**			\$0.00	\$6.47
Spouse Supplemental Life per \$25,000 in coverage (any request for an increase requires Evidence of Insurability form)**			\$0.00	\$2.84
Dependent Child Life \$10,000 Coverage			\$0.00	\$2.05
VISION INSURANCE			District Pays 19 Pays Rate	Employee Pays 19 Pays Rate
SINGLE VISION			\$0.00	\$4.14
EMPLOYEE + SPOUSE VISION			\$0.00	\$7.87
EMPLOYEE + CHILDREN VISION			\$0.00	\$8.29
EMPLOYEE + FAMILY VISION			\$0.00	\$12.18
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)			0.1810%	0.0000%
Nebraska Public Employees Retirement System (required) ****			9.87780%	9.78000%
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.

(2020 Limits = \$2,750 per year for Section 125 Medical and \$5,000 per year for Section 125 Child/Elder Care)

(2020 Limits for Health Savings Account = \$2,450 per year for single or \$4,900 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