

PROFESSIONAL STAFF FRINGE BENEFITS - HEALTH INSURANCE

The District's health insurance plan (medical, dental, and vision) is known as a comprehensive major medical plan. Effective September 1, 2010, the employee will pay 15% of established Health Insurance Premium. Plan options and deductibles are as follows:

Beginning September 1, 2017

\$1,000 Deductible plan, Optional Dental, Optional Vision
\$1,500 Deductible plan, Optional Dental, Optional Vision
\$2,500 Deductible plan, Optional Dental, Optional Vision

Health Plan premiums are available in the Business Office:

This agreement will only be in force while the self funded plan is in effect.

\$1,000 DEDUCTIBLE PLAN (MEDICAL ONLY)

First claims submitted at the start of the insurance year will be applied to the individual's deductible of \$1,000/individual and \$2,000/family. After satisfying the deductible, the next \$15,000/individual, \$30,000/family of covered claims will be paid at the co-insurance rate of 80/20, with eighty percent (80%) paid by the plan and twenty percent (20%) paid by the individual, except for out of network costs which will be paid at 50/50. Covered claims over \$16,000/individual, \$32,000/family will be paid at one hundred percent (100%) by the plan.

\$1,500 DEDUCTIBLE PLAN (MEDICAL ONLY)

This plan is a qualified High Deductible Health Plan (HDHP) and eligible for a Health Savings Account (HSA). First claims submitted at the start of the insurance year will be applied to the individual's deductible of \$1,500/single and \$3,000/not single. After satisfying the deductible, the next \$15,000/single, \$30,000/not single of covered claims will be paid at the co-insurance rate of 80/20, with eighty percent (80%) paid by the plan and twenty percent (20%) paid by the individual, except for out of network costs which will be paid at 50/50. Covered claims over \$16,500/single, \$33,000/not single will be paid at one hundred percent (100%) by the plan.

\$2,500 DEDUCTIBLE PLAN (MEDICAL ONLY)

This plan is a qualified High Deductible Health Plan (HDHP) and eligible for a Health Savings Account (HSA). First claims submitted at the start of the insurance year will be applied to the individual's deductible of \$2,500/single and \$5,000/not single. After satisfying the deductible, the next \$17,500/single, \$35,000/not single of covered claims will be paid at the co-insurance rate of 80/20, with eighty percent (80%) paid by the plan and twenty percent (20%) paid by the individual, except for out of network costs which will be paid at 50/50. Covered claims over \$20,000/single, \$40,000/not single will be paid at one hundred percent (100%) by the plan.

OPTIONAL DENTAL

First claims submitted at the start of the insurance year will be applied to the individual's deductible of \$50/individual and \$100/family.

OPTIONAL VISION

There is no deductible for this vision plan. First claims submitted at the start of the insurance year will be applied to the individual's maximum benefit.

DISTRICT CONTRIBUTION TO A HEALTH SAVINGS ACCOUNT

Beginning with insurance plan year 2015-2016, the District will contribute to a Health Savings Account based on elected coverage as follows:

Employee	\$200
Employee/Spouse	\$200
Employee/Children	\$400
Employee/Children/Spouse	\$400

The District will also match employee contributions to a Health Savings Account based on elected coverage as follows:

Employee	up to \$300
Employee/Spouse	up to \$300
Employee/Children	up to \$600
Employee/Children/Spouse	up to \$600

Pre-Authorization for all hospitalization is required by the plan.

For coverage under the plan, please refer to the plan booklet. Plan booklet or revisions will be distributed by the District as determined by the insurance committee.

All employees will be provided with employee insurance identification cards.

The insurance year runs from September 1 through August 31.

Spouses – Medical Coverage – Effective September 1, 2010, if an employee elects spousal coverage, it will be at a rate of \$250.00 per month, plus the applicable employee premium, for District employees' spouses not employed by the District. Effective September 1, 2011, spousal coverage premium is subject to same percentage increase as employee premium.

In the event an eligible employee does not submit the election of a health plan to the business office by August 31, employee shall be enrolled in the \$2,500 Deductible plan, if qualified.

Beginning August 31, 2016, for all eligible employees, pre-65 retirees, and post-65 retirees, if an enrollment change form different from their then current plan is not received in the business office by August 31, employee or retiree shall be enrolled in their then current plan.

In the event an eligible post-65 retiree on the Grandfather Plan does not submit the election of a health plan to the Business Office by August 31, 2018, the eligible post-65 retiree shall be enrolled in the optional dental, optional vision, and the \$1,000 Deductible Plan, if qualified.

District to provide Teledoc as a Telemedicine option beginning September 1, 2018. District to discontinue the Nurseline option effective September 1, 2018. District to pay the \$45 consultation fee before the deductible is met for the \$1,000 PPO plan and the Medicare Supplement Type plan. District to pay the \$45 consultation fee for the \$1,500 High Deductible plan and the \$2,500 High Deductible plan after deductibles have been met. This telemedicine option will be reevaluated on an annual basis for cost effectiveness.

Adopted: 09/12/88

Revised:	04/18/90	05/11/92	10/04/93	06/08/95
	04/26/00	05/21/01	09/27/04	06/13/05
	05/08/06	06/08/09	05/24/10	05/23/11
	05/14/12	05/11/15	08/08/16	05/08/17
	05/14/18			

School District #1, Sweetwater County, Wyoming