

JACKSON-MADISON COUNTY SCHOOLS

2018 School Year

1. **HEALTH INSURANCE – STATE OF TENNESSEE – LOCAL EDUCATION PLAN**
PRICES ARE PER MONTH (Effective 01/01/2018-12/31/2018)

<u>Premier PPO</u>	<u>Employee</u>	JMCSS	Total
Cigna Local Plus/BCBS Network S Individual	\$214.00	\$398.00	\$612.00
Cigna Open Access Individual	\$254.00	\$398.00	\$652.00
Cigna Local Plus/BCBS Network S Emp + Child	\$504.00	\$505.00	\$1009.00
Cigna Open Access Emp + Child	\$544.00	\$505.00	\$1049.00
Cigna Local Plus/BCBS Network S Emp + Spouse	\$596.00	\$597.00	\$1,193.00
Cigna Open Access Emp + Spouse	\$676.00	\$597.00	\$1,273.00
Cigna Local Plus/BCBS Network S Emp + Sp + Child	\$795.00	\$795.00	\$1,590.00
Cigna Open Access Emp + Sp + Child	\$875.00	\$795.00	\$1,670.00
<u>Standard PPO</u>	<u>Employee</u>	JMCSS	Total
Cigna Local Plus/BCBS Network S Individual	\$172.00	\$401.00	\$573.00
Cigna Open Access Individual	\$212.00	\$401.00	\$613.00
Cigna Local Plus/BCBS Network S Emp + Child	\$425.00	\$520.00	\$945.00
Cigna Open Access Emp + Child	\$465.00	\$520.00	\$985.00
Cigna Local Plus/BCBS Network S Emp + Spouse	\$503.00	\$615.00	\$1,118.00
Cigna Open Access Emp + Spouse	\$583.00	\$615.00	\$1,198.00
Cigna Local Plus/BCBS Network S Emp + Sp + Child	\$670.00	\$819.00	\$1,489.00
Cigna Open Access Emp + Sp + Child	\$750.00	\$819.00	\$1,569.00
<u>Limited PPO</u>	<u>Employee</u>	JMCSS	Total
Cigna Local Plus/BCBS Network S Individual	\$131.00	\$393.00	\$524.00
Cigna Open Access Individual	\$171.00	\$393.00	\$564.00
Cigna Local Plus/BCBS Network S Emp + Child	\$345.00	\$518.00	\$863.00
Cigna Open Access Emp + Child	\$385.00	\$518.00	\$903.00
Cigna Local Plus/BCBS Network S Emp + Spouse	\$408.00	\$613.00	\$1,021.00
Cigna Open Access Emp + Spouse	\$488.00	\$613.00	\$1,101.00
Cigna Local Plus/BCBS Network S Emp + Sp + Child	\$544.00	\$817.00	\$1,361.00
Cigna Open Access Emp + Sp + Child	\$624.00	\$817.00	\$1,441.00

<u>Healthsavings CDHP</u>	<u>Employee</u>	JMCSS	Total
Cigna Local Plus/BCBS Network S Individual	\$89.00	\$356.00	\$445.00
Cigna Open Access Individual	\$129.00	\$356.00	\$485.00
Cigna Local Plus/BCBS Network S Emp + Child	\$257.00	\$476.00	\$733.00
Cigna Open Access Emp + Child	\$297.00	\$476.00	\$773.00
Cigna Local Plus/BCBS Network S Emp + Spouse	\$303.00	\$564.00	\$867.00
Cigna Open Access Emp + Spouse	\$383.00	\$564.00	\$947.00
Cigna Local Plus/BCBS Network S Emp + Sp + Child	\$404.00	\$751.00	\$1,155.00
Cigna Open Access Emp + Sp + Child	\$484.00	\$751.00	\$1,235.00

2. **LIFE INSURANCE –USAbLe**

The employee is automatically covered 1x their salary for Basic Life and Accidental Death and Dismemberment and the premium is paid by JMCSS. The employee also has the option to elect additional Voluntary Group Life insurance on themselves, their spouse, and their children. The premiums for the Voluntary Group Life insurance is age banded and the premiums will increase as the employee ages. If the employee does elect additional Voluntary Group Life, they must elect insurance on themselves and the employee must have double the insurance amount as to what they take out on their spouse. Dependent Life Insurance can be taken out on your spouse and /or your child(ren) under the age of 23. The cost for dependent life is \$1.85 per month and your spouse is covered for \$5,000, child(ren) 14 days to 6 months are covered for \$500 and child(ren) 6 months to 23 years are covered for \$2,000.

3. **DENTAL INSURANCE – Blue Cross Blue Shield Preferred Dental Network**

The dental insurance is not administered through the State of Tennessee
 PRICES ARE PER MONTH (Effective 01/01/2017-12/31/2017)
Individual pays \$12.93 county pays \$ 9.91 = total \$22.84
Family pays \$33.46 county pays \$25.62 = total \$59.08
 (NO ORTHODONTIC COVERAGE)

4. **VISION INSURANCE – Blue Cross Blue Shield – Vision Blue(EyeMed)**

The vision insurance is not administered through the State of Tennessee.
 PRICES ARE PER MONTH (Effective 01/01/2017-12/31/2017)
 The employee pays the total monthly premium. The school system is not responsible for any of this premium.

<u>Individual pays</u>	<u>\$ 6.67</u>
<u>Employee + Spouse pays</u>	<u>\$12.00</u>
<u>Employee + Child pays</u>	<u>\$12.60</u>
<u>Family pays</u>	<u>\$20.15</u>

The employee has 31 days from their full time date of hire to enroll in any of the insurance plans.

5. **EFFECTIVE DATE OF HEALTH, DENTAL, AND VISION**

Coverage begins on the 1st day of the month after your full time date of hire.

6. **MONTHLY INSURANCE PREMIUMS**

Insurance premiums are deducted a month in advance. Example: June insurance premiums pay for July coverage, etc. Depending upon when you receive your 1st paycheck and when your insurance becomes effective, finance may have to double up on insurance premiums to get your payments current. The monthly insurance premiums are normally divided between 2 paychecks per month. If there are 3 paychecks in one month, then insurance deductions will not come out of that 3rd paycheck.

7. **ELIGIBLE DEPENDENTS FOR INSURANCE**

Individual coverage covers only the employee. Family coverage covers the employee, legal spouse, and children up to the age of 26. This also includes adopted children, stepchildren, and children for whom the employee has legal custody or guardianship.

8. **DECLINING INSURANCE**

Even if the employee does not enroll in the health, dental, and/or vision insurance, they must sign the forms to decline the insurance. These forms are then kept in the employee's health insurance file for later reference.

9. **LIFE CHANGES AND ADDING DEPENDENTS**

You have 60 days to make any changes to your health insurance and 30 days for your dental and vision following a special qualifying event.

10. **SECTION 125-CAFETERIA PLAN**

This pertains to how the insurance premiums are deducted from your paycheck. The premiums can either be deducted pre-tax or after tax. If you do elect to have the premiums deducted pre-tax, the employee cannot change or revoke this before the next anniversary date of the plan unless a "change in status" occurs.

11. **FLEXIBLE SPENDING ACCOUNTS**

This allows employees to set aside a portion of each paycheck into an account, before paying taxes. Throughout the year, employees are reimbursed from this account for expenses such as medical care and dependent care. The employee will save 25% to 40% in taxes for every dollar they elect to contribute to these accounts. You can contribute a maximum amount of \$2,600.00 into the medical flexible spending account and up to \$5,000.00 into the Dependent Day Care account. These accounts are administered through American Fidelity and if you would like to schedule an appointment to enroll, you can call them at 800-955-2344.

12. **SUPPLEMENTAL INSURANCE-AMERICAN FIDELITY**

This insurance is purchased on a voluntary basis through payroll deductions. The employee is responsible for the entire premium and the policies pay directly to the employee. The employee has 30 days from their full time date of hire to enroll. Below are the policies that you can enroll if interested:

- Accidental Insurance
- Cancer Insurance
- Critical Care Insurance
- Intensive Care Insurance
- Short Term Disability
- Long Term Disability

If you would like more information, please contact American Fidelity directly at 800-955-2344 to schedule an appointment at your convenience.

If you resign, retire, or your contract is not renewed, you will need to stop by to complete an exit interview, complete retirement insurance paperwork to continue your insurance and/or discuss COBRA insurance.

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