



2024 Summary of Benefits

This document is intended to provide a general overview of benefits provided for *full-time* positions. **Insurance benefits become effective the first day of the month following the month of full-time hire.** Further details and a complete copy of the applicable contract/policy language are available at the time an employment offer is extended. If you have any questions about the benefits, please contact Human Resources at employment@renvillecountymn.gov

Medical Insurance

The County offers three (3) Blue Cross Blue Shield medical insurance plans. Find more details here: <https://www.bluecrossmn.com/>. We are part of the Select Pharmacy Network and the Aware Provider Network. Employees scheduled for 30-39 hrs/week have prorated medical insurance premiums. In circumstances where married couples are both insurance eligible employees of Renville County: if one spouse enrolls in family coverage and the other waives their individual coverage (and is covered under spouse's family plan), the county shall contribute an additional \$200/month towards the cost of family coverage, with any overage to be deposited monthly into an HSA or VEBA.

BLUE CROSS BLUE SHIELD	Premium per month	Employer Share per month	Employee premium cost per month	Monthly employer H.S.A or VEBA contribution	Important Notes
H.S.A. Plan - Single (\$4,000)	\$725.47	\$734.29	\$0.00	\$8.82	4 th quarter carryover option
H.S.A. Plan - Family (\$8,000)	\$1,933.31	\$1,445.05	\$488.27	\$100.00	
H.S.A. Plan - Single (\$5,000)	\$672.08	\$734.29	\$0.00	\$62.21	
H.S.A. Plan - Family (\$10,000)	\$1,791.05	\$1,445.05	\$346.01	\$100.00	
H.S.A. Plan - Single (\$7,070)	\$590.41	\$734.29	\$0.00	\$143.88	This plan is not considered "creditable" by the Center for Medicare and Medicaid Services. It may not be a good option for anyone nearing retirement.
H.S.A. Plan - Family (\$14,140)	\$1,573.41	\$1,445.05	\$128.37	\$100.00	

Dental Insurance

MetLife is a new provider for 2024.

Employee & Employer paid. County contributes \$34.72 per month.

Price per month: Employee: \$0 Employee + 1: \$38.71 Family: \$81.00

Vision Care

Employee paid. VSP Vision Plan.

Price per month: Employee: \$7.84 Employee & Spouse: \$15.68
Employee & Child(ren): \$16.78 Employee & Family: \$26.82

2024 Summary of Benefits

Health Savings Account (H.S.A.)

Employee paid. Funds held with WEX health. In some situations, also Employer contribution (based on medical insurance plan selected, as noted above).

Single limit per year = \$4,150

Family limit per year = \$8,300

Once age 55, employees can contribute an additional \$1,000 (to either single or family)

Limit includes employer & employee contributions. Employee can also choose to have Employer contribution (if eligible) go into a VEBA account. If receiving a wellness incentive, this is also included in the yearly limit.

Flexible Spending Accounts (FSA's) Available

Employee paid. Funds held with WEX health. These amounts cannot be changed during the year unless there is a qualifying life event. All funds must be used by claims deadline.

FSA Medical/Health max election of \$2,750 per year

Limited Purpose FSA max election of \$2,750 per year (used when you also have a H.S.A., this can only be used for vision, dental or orthodontia expenses).

FSA Dependent Care max election of \$5,000 per year per family (\$2,500 if married and filing separately)

Hospital Care Insurance

Employee paid. Cigna Health provider.

Price per month:	Employee: \$19.78	Employee & Spouse: \$40.87
	Employee & Child(ren): \$35.30	Employee & Family: \$56.39

Accident Insurance

Employee paid. Cigna Health provider.

	Plan 1 - Low	Plan 2 - High
Employee	\$9.70	\$16.95
Employee + Spouse	\$16.40	\$28.75
Employee + Child(ren)	\$16.10	\$28.20
Family	\$22.80	\$39.75

Life Insurance

Employer paid: \$20,000 basic life insurance coverage.

The Hartford provider.

Employee paid: Rates for voluntary additional coverage for employee or spouse vary according to age category. Max election is \$500,000 for voluntary employee life and \$250,000 for spousal life. Employees guaranteed up to \$100,000 of voluntary life and \$25,000 of spousal life without health history. Increases over this amount will require health history.

<u>Age of Employee or Spouse</u>	<u>Employee Monthly Cost Per \$1000</u>
Under 35	\$0.05
35 to 39	\$0.08
40 to 44	\$0.10
45 to 49	\$0.13
50 to 54	\$0.20
55 to 59	\$0.35
60 to 64	\$0.52
65 to 69	\$0.99
70 to 74	\$1.59

2024 Summary of Benefits

Child(ren) Life Insurance: \$1.30/month per family

Employee paid. The Hartford provider. Term life insurance protecting your unmarried children for \$10,000 each (Children must be under age 26).

Long Term Disability

Employee paid. The Hartford provider. Cannot be more than 60% of gross monthly wage. Employees currently insured for \$500 or more monthly benefit have the opportunity to increase their LT Disability without having to provide a Health Questionnaire. The amount of increase is subject to 6/6/24 *1 preexisting condition limitation. Employees who waived LT Disability coverage at time of initial eligibility must complete a health questionnaire. Benefits begin on the fourth month of a disability and are payable for injury, sickness or pregnancy up to your normal retirement age, as defined by Social Security. Rates vary according to age category:

<u>Age</u>	<u>Price per Month for \$100 Monthly Benefit</u>
Under 25	\$.231
25 to 29	\$.297
30 to 34	\$.440
35 to 39	\$.517
40 to 44	\$.693
45 to 49	\$ 1.034
50 to 54	\$ 1.078
55 to 59	\$ 1.342
60 to 64	\$ 1.463
65+	\$ 1.540

Short Term Disability

Employee paid. Dearborn provider. Cannot be more than 60% of gross weekly wage. Benefits begin on the 1st day of an injury or 8th day of a sickness and can be payable up to 13 weeks. Rates vary according to age category:

<u>Age</u>	<u>Price per Month/ \$100 Weekly Benefit</u>
Under 20	\$ 4.94
20 to 24	\$ 4.95
25 to 29	\$ 5.23
30 to 34	\$ 4.64
35 to 39	\$ 4.22
40 to 44	\$ 3.89
45 to 49	\$ 4.01
50 to 54	\$ 4.76
55 to 59	\$ 6.11
60 to 64	\$ 7.50
65 to 69	\$ 7.67
70+	\$ 8.66



2024 Summary of Benefits

Critical Illness Insurance

Employee paid. Cigna Health provider. Benefit amount: \$15,000 for employee, \$7,500 for spouse, \$3,750 for child(ren). Subject to a 12 month/12 month *2 pre-existing condition limitation.

Age	Employee Only	Employee & Spouse	Employee & Children	Family
18-24	\$5.82	\$10.39	\$6.19	\$10.76
25-29	\$6.59	\$11.55	\$6.97	\$11.92
30-34	\$8.52	\$14.30	\$8.90	\$14.68
35-39	\$11.73	\$19.18	\$12.10	\$19.55
40-44	\$15.00	\$24.18	\$15.37	\$24.55
45-49	\$21.57	\$34.27	\$21.94	\$34.64
50-54	\$29.49	\$47.60	\$29.87	\$47.97
55-59	\$39.41	\$64.34	\$39.79	\$64.72
60-64	\$50.53	\$82.90	\$50.90	\$83.27
65-69	\$62.42	\$100.39	\$62.79	\$100.76
70-74	\$87.29	\$138.29	\$87.66	\$138.67
75-79	\$121.61	\$182.09	\$121.99	\$182.46

*1 Pre-existing Condition Limitation: At the time You become Disabled: 1) You have not received Medical Care for the condition for 6 consecutive months while insured under The Policy; or 2) You have been continuously insured under The Policy for 24 consecutive months. See full details in the Long Term Disability Certificate available on the staff page under HR Connection.

*2 Pre-Existing Condition Limitation: Any Sickness or Injury for which a Covered Person received medical treatment, advice, care or services including diagnostic measures, took prescribed drugs or medicines or for which a reasonable person would have consulted a Physician within 12 months before the Covered Person's most recent effective date of insurance, and the most recent effective date of any added or increased amount of insurance. See full details in the Critical Illness Certificate available on the staff page under HR Connection.

Paid Time Off:

Vacation Accrual – 12 to 24 days earned per year (depending upon tenure)

Paid Holidays – 11 to 12 per year

Sick Time – 12 days earned per year

Public Employees Retirement Association benefits provided

Employee & Employer paid pension plan. PERA rates and handbooks available online: www.mnpera.org

Contributions Per Plan

	<u>Employer</u>	<u>Employee</u>
Coordinated	7.5%	6.5%
Patrol	17.7%	11.8%
Correctional	8.75%	5.83%

Deferred Compensation

Employee paid. Information can be obtained from representatives (Reps can be found on our staff page)

Wellness Incentive

If qualifying for, and receiving, the \$500 wellness incentive, it will be placed in your H.S.A., VEBA or FSA account in the year following the earning.



2024 Summary of Benefits

Continuing Education Tuition Reimbursement Program Available

Tuition reimbursement of up to \$5,250 annually is available for accredited post-secondary courses for all part-time and full-time employees.

Bilingual Pay

Employees certified to the Administration Office by their department head as bi-lingual proficient and assigned interpreter duties shall be provided additional compensation at the rate of \$1.20 per hour while in regular status for all hours compensated.

Volunteer Service Pay

Employees who are members of volunteer fire departments, ambulance services and other emergency volunteer organizations who are employer approved may stay in paid status to be absent from work to attend emergencies with department head approval.

Flexible Schedule/Remote Work

Renville County supports flex work schedules or telecommuting as a work option which, when properly implemented, can benefit both the County, customer service and employees.

Bereavement

Employees are allowed paid bereavement leave from 1-5 days based on the relationship.

Comp Time Availability

Employees may have the option to take comp time in lieu of overtime payments. After comp time is earned, it may be used in place of vacation in future pay periods.

Exempt employees may earn comp time at 1:1 ratio.

Note: *This information is intended as a summary of benefits only. Please refer to the Renville County Personnel Policy and/or applicable Union contract for a comprehensive listing of benefits and specifics.*