

**2024-2025
CHESTER COUNTY INTERMEDIATE UNIT
SUMMARY OF BENEFITS FOR**

PROFESSIONAL STAFF

Medical: The Board will provide each full-time employee the option to enroll in one of two different Independence Blue Cross Personal Choice Medical plans. The Board will offer the Qualified High Deductible Health Plan (QHDHP) with Health Savings Account (HSA) as the base plan and the PC C3F302 plan. Semi-monthly payroll deductions for the medical coverage are as follows:

	<u>Base Plan</u> <u>Option QHDHP</u> <u>w/RX</u>	<u>Annual IU</u> <u>Contribution</u> <u>to HSA**</u>	<u>Option C3F302</u>
Single	\$15.47	\$850.00	\$58.38
Parent/Child	\$29.36	\$1,700.00	\$109.66
Parent/Children	\$32.56	\$1,700.00	\$124.68
Employee/Spouse	\$35.67	\$1,700.00	\$140.06
Family	\$38.87	\$1,700.00	\$155.07

*The annual Board contribution to the Health Savings Account (HSA) linked to the Qualified High Deductible Health Plan (QHDHP) is **prorated** if employment begins after September 30.

*An adjustment will be made to the per pay insurance deductions for employees who have elected to receive their annual salary over 20 pays instead of 24. To ensure the total annual contribution is paid, a supplemental deduction will be withheld each pay in addition to the regular semi-monthly insurance deduction.

****There will be a third employer contribution to the HSA for employees whose own HSA contributions for the 2024/25 SY are equivalent to or exceeds \$750 for employee only tier or \$1500 for all other tiers. The additional employer contribution will be \$250 for employee only tier and \$500 for all other tiers and will occur June 30th.

Spousal Language: If the spouse is employed and offered health insurance, the spouse is not eligible for coverage through the CCIU. The only exception is if the cost of single coverage through their employer is 25% or greater of the total cost of the premium. Certification form regarding spousal insurance must be completed and returned to Human Resources within 30 days of hire.

Prescription Drug: The Board will contribute 83% of the cost of the prescription drug program for all full-time employees and their eligible dependents. Semi-monthly payroll deductions in conjunction with the C3F302 medical plan are as follows:

Single: \$24.40
Employee + dependent(s) \$48.81

Co-pays: The plan will provide for a \$5 co-pay for all generic drugs, \$15 for brand name (if a generic is not available) and \$25 for non-preferred. If a drug is available in generic form, but the member chooses to purchase a brand name drug instead of the generic, they will be charged \$40.

90-day Maintenance Medication: Employees and their eligible dependents will be allowed up to three fills after the effective date (original fill + 2 refills) before 90-day maintenance fill is mandated for medication

on the Maintenance Medication list. 90-day supplies can be filled either at retail pharmacies or through mail order.

Specialty Drugs: If a member goes to a retail pharmacy to fill a prescription for a specialty drug, that member will be instructed to contact the Optum Specialty Pharmacy. Specialty drugs are prescribed for serious chronic conditions.

Medical Opt-Out: All full-time employees can elect to opt out of medical benefits and receive reimbursement of 40% of the premium paid by the Board toward the base plan single coverage. Employees must show proof of alternative source of coverage. Coverage through state-funded medical programs or subsidized medical coverage are not considered acceptable alternative insurance to be eligible for opt out payments. Bargaining Unit members whose spouse/parent is also employed by the CCIU may not receive opt out in lieu of healthcare benefits.

The annual opt-out payment for the 2024-2025 school year is \$3,563.87. If your opt-out election begins after September 1, the opt-out payment will be pro-rated based on the number of months the opt-out is in force.

Dental: Single Basic Coverage – No Fee
Family Basic Coverage – No Fee

Single Basic plus Supplemental Rider - \$0.57 semi-monthly
Family Basic plus Supplemental Rider - \$1.68 semi-monthly

Vision: Single Basic Coverage – No Fee
Family Basic Coverage – \$2.98 semi-monthly

Life Insurance: The Board provides all full-time professional staff basic term life insurance equal to 1.0 x annual salary rounded to the closest \$1,000.00. The option to purchase supplemental life insurance in increments of \$20,000 is also available. The monthly cost per \$1,000 of coverage is below:

Age	Cost/Mo	Age	Cost/Mo	Age	Cost/Mo	Age	Cost/Mo
0-24	0.05	35-39	0.09	50-54	0.37	65-69	1.31
25-29	0.06	40-44	0.12	55-59	0.61	70-74	2.06
30-34	0.08	45-49	0.21	60-64	0.75	75+	2.38

Disability Insurance: The Board agrees to provide long-term disability insurance beginning on the 31st day of sickness and/or accident for employees or when the employee exhausts all available sick leave, whichever is greater. This insurance pays up to 66 2/3% of the employee's monthly salary up to a maximum of \$5,000 per month.

Retirement (PSERS): Employee contribution based on class. Visit psers.pa.gov for more information.

Worker's Compensation: Board paid

FICA: Employee Contribution – 7.65% (Social Security 6.2% - Medicare – 1.45%)

Mileage: Designated personnel only

Sick Days: Unlimited accumulation

Full-time Employees: Ten (10) sick days are granted annually to all full-time employees. Sick days are **pro-rated** if hired part way through the school year.

Employees may use up to five (5) of their accrued sick days per year for illness of an Immediate Family Member as defined in the Handbook.

Personal Days: Two per year, cumulative to ten (10). Any days in excess of (10) will be converted to sick leave on September 1 of each year. Personal days are **pro-rated** if hired part way through the school year.

Bereavement Days: Three (3) Days – Immediate Family Member – Spouse, child, mother, father, sister, brother, parents-in-law, or person who resides in the same household.

One (1) Day – Near Relative – Son or daughter-in-law, brother or sister-in-law, grandparents, aunt, uncle, niece, nephew or first cousin.

Tuition Reimbursement: Permanent professional employees may be reimbursed for actual tuition costs subject to limitations. Please refer to your contract for details.

Questions concerning benefits are to be directed to the Human Resource Department at (484) 237-5085. This summary of benefits is not intended to, nor does it, constitute a contract, a promise or a guarantee of benefits. Please refer to your contract for a full explanation of benefits.