

Benefit Overview

Clerical/Secretarial

This benefit overview is for Full-time Clerical/Secretarial Employees. The District provides eligible employees and/or families with medical, prescription, and dental at a bi-weekly employee payroll contribution of Single \$20, Family \$30. 10-month employees will pay a bi-weekly contribution for 22 pays Single \$23.64, Family \$35.45

Medical / Capital BlueCross PPO			
Deductible:	\$500/\$1,000		
Co-pays:	Office Visit	\$15	
	Specialist	\$30	
	Urgent Care	\$50	
	Emergency Room	\$100	
	Please review benefit summary for detailed information.		
Prescription / Express Scripts			
Deductible:	None		
Retail Co-pays: (30 day supply)	Generic	\$10	
	Formulary	\$40	
	Non-Formulary	\$75	
Mail-order Co-pays: (90 day supply)	Generic	\$20	
	Formulary	\$80	
	Non-Formulary	\$150	
The mail order benefit option is available for maintenance medications.			
Dental / Delta Dental			
Deductible:	None		
Annual Maximum		\$2,000	
Diagnostic & Preventive Exams, cleanings, x-rays, sealants		100%	
Basic Services Fillings, posterior composites, denture repair		100%	
Endodontic (root canals)		100%	
Periodontics (gum treatment)		100%	
Oral Surgery		100%	
Major Services (Crowns, inlays, onlays and cast restorations)		100%	
Prosthodontics (Bridges, dentures, implants)		50%	
Orthodontics		No coverage	
Life Insurance		Employee Assistance Program (EAP)	
\$45,000		Short Term Counseling	
Sick Leave (Accrued Monthly)		Personal Day	Emergency Day
12 month	12	1 day	2 days to be deducted from sick leave
10 month	10	2 day	2 days to be deducted from sick leave
Vacation Days			Income Protection
Years of Service (Based on Fiscal Year)		Earned Vacation Days	After exhaustion of sick days. Employee is entitled to with documentation from treating physician a maximum benefit of \$350.00/weekly for one year.
After 10 months		11	
After 5 years		13	
After 8 years		16	
After 10 years		18	
After 13 years		20	

PLEASE REVIEW YOUR EMPLOYEE CONTRACT FOR DETAILED INFORMATION.