



*2023-2024*  
*Township of Union*  
*Board of Education*  
*Benefit Guide*



## Welcome to Open Enrollment!

Open Enrollment for 2023 will take place between May 15th and June 9th. During the open enrollment period, you will be able to change your plan selection, add or term dependents. There will be Open Enrollment Meetings held both in-person and virtually to answer your questions about Aetna and open enrollment changes.

Please closely review the following important notes regarding this open enrollment:

- ▶ There will be five medical plans offered during this open enrollment to those who were hired prior to July 1, 2020. All employees hired after July 1, 2020, will have access to the Educator plan and the Garden State Plan. We will continue to offer two dental plans – PPO and DMO.
  
- ▶ To help you better understand the cost impact of the various plans a premium calculator will be available and on the employee intranet to allow you to determine your total contribution.

Sincerely,

*Township of Union Board of Education*

The Township of Union Board of Education offers a comprehensive suite of benefits to promote health and financial wellness for you and your family.

This booklet provides a summary of your benefits. Please review it carefully so you can choose the coverage that's right for you.



## Benefit Basics

As a Township of Union Board of Education employee, you are eligible for benefits if you work at least 30 hours per week. Benefits are effective on the first of the month following a **60-day waiting period**.

You may enroll your dependents for coverage once you are eligible. Your eligible dependents include:

- Your legal spouse
- Your civil union partners
- Your children up to age 26 for medical and age 23 for dental

Once your benefit elections become effective, they remain in effect until open enrollment of the following year, when you are able to update your benefits and dependents. You may only change coverage within 30 days of a qualified life event.

## Your Benefits

Benefit	Carrier	Website	Phone Number
Medical Coverage	Aetna	<a href="http://www.aetna.com">www.aetna.com</a>	866-377-7216
Dental Coverage	Aetna	<a href="http://www.aetna.com">www.aetna.com</a>	877-238-6200
Vision	Aetna	<a href="http://www.AetnaVision.com">www.AetnaVision.com</a>	877-973-3238
Flexible Spending Accounts	AFLAC	<a href="mailto:vincent_morelli@us.aflac.com">vincent_morelli@us.aflac.com</a>	201-697-0203

July 1, 2020	Eligible Plans	Contribution
Employees hired prior to have access to all six medical plan offerings listed.	OAMC (DA\$15&\$20, Educator) OAEC-SP (EPO, OMNIA) AWH OAMC (GSP)	➤ The Educator and GSP plans are subject to the State contribution percentages.
Employees hired after are only eligible for the two plan offerings listed.	OAMC (Educator) AWH OAMC (GSP)	➤ All other plans are subject to Chapter 78 contributions.

## Medical Coverage

The Township of Union Board of Education offers a choice of six medical plan options through Aetna. Each plan includes comprehensive health care benefits, including free preventive care services and coverage for prescription drugs. The EPO \$15 Copay plan offers In-Network services only.

Plan Provisions	Aetna OAMC-303 (DA\$15)		Aetna OAMC-301 (DA\$20)		Aetna OAEC-101 (EPO)
	In Network	Out-of-Network	In Network	Out-of-Network	In Network Only
<b>Annual Deductible (Individual/Family)</b>	None	\$100/\$250	None	\$100/\$250	None
<b>Out-of-Pocket Max. (Includes Deductible)</b>	\$400/\$800	\$2,000/\$5,000	\$400/\$800	\$2,000/\$5,000	\$2,500/\$5,000
<b>Lifetime Maximum</b>	Unlimited		Unlimited		Unlimited
<b>Preventive Care</b>	100%	30%	100%	20%	100%
<b>Primary Physician Office Visit</b>	\$15 copay	30%*	\$20 copay	20%*	\$20 copay
<b>Specialist Office Visit</b>	\$15 copay	30%*	\$20 copay	20%*	\$40 copay
<b>Inpatient Hospital Services</b>	100%	30%*	100%	\$200 copay – then 20%*	\$250 per day up to 5 days maximum
<b>Outpatient Hospital Services</b>	100%	30%*	100%	20%*	\$100 Amb. Surgery \$200 copay
<b>Urgent Care</b>	\$15 copay	30%*	\$20 copay	20%*	\$40
<b>Emergency Room Care</b>	\$50 copay		\$25 copay		\$100 copay
<b>Prescription (OOP Max) (Individual/Family)</b>	None		None		None
<b>Retail Prescriptions (30-day supply)</b>	10% coinsurance		10% coinsurance		10% coinsurance
<b>Mail Order Prescriptions (90-day supply)</b>	\$0		\$0		\$0

\*After the deductible is met

Note: This is a summary of coverage only; the summary plan description contains exclusions and limitations that are not shown here. In-network services are based on negotiated charges; out-of-network services are based on Reasonable and Customary (R&C) charges.

## Medical Coverage

**DELAYED ENROLLMENT**

Plan Provisions	Aetna OAEC-SP-201 (OMNIA)		Aetna OAMC-401 (Educator)		Aetna AWH OAMC-501 (GSP)	
	Tier 1	Tier 2	In-Network	Out-of-Network	In-Network	Out-of-Network
<b>Annual Deductible (Individual/Family)</b>	None	\$1,500/\$3,000	None	\$350/\$700	None	\$350/\$700
<b>Out-of-Pocket Max. (Inc. Ded.)</b>	\$2,500/\$5,000	\$4,500/\$9,000	\$500/\$1,000	\$2,000/\$5,000	\$500/\$1,000	\$2,000/\$5,000
<b>Lifetime Maximum</b>	Unlimited		Unlimited		Unlimited	
<b>Preventive Care</b>	100%	100%	100%	30%	100%	30%
<b>Primary Physician Office Visit</b>	\$5 copay	\$20 copay	\$10 copay	30%*	\$10 copay	30%*
<b>Specialist Office Visit</b>	\$15 copay	\$30 copay	\$15 copay	30%*	\$15 copay	30%*
<b>Inpatient Hospital Services</b>	\$250 per day up to 5 days maximum	20%*	100%	30%*	100%	30%*
<b>Outpatient Hospital Services</b>	\$150 copay	20%*	100%	30%*	100%	30%*
<b>Urgent Care</b>	\$15 copay	30%*	\$20 copay	30%*	\$10 copay	30%*
<b>Emergency Room Care</b>	\$100 copay	\$100 copay then ded. then 20%	\$25 copay		\$35 copay	
<b>Rx (OOP Max) (Individual/Family)</b>	None		None		\$2,600/\$5,200	
<b>Retail Rx (30-day supply)</b>	10% coinsurance					
<b>Generic</b>						
<b>Brand Preferred</b>						
<b>Brand Non Preferred</b>			\$5	\$5	\$10	\$10
<b>Mail Order Rx (90-day supply)</b>	\$0					
<b>Generic</b>						
<b>Brand Preferred</b>						
<b>Brand Non Preferred</b>			\$0	\$0	\$5	\$15
					\$25	

\*After the deductible is met

Note: This is a summary of coverage only; the summary plan description contains exclusions and limitations that are not shown here. In-network services are based on negotiated charges; out-of-network services are based on Reasonable and Customary (R&C) charges.



## Township of Union Board of Education

### DocFind Instructions – 2023 Open Enrollment

**Step 1:** Visit Aetna’s website at [www.aetna.com/docfind](http://www.aetna.com/docfind)

**Step 2:** On the right side of the page, under “**Continue as a Guest**” enter the Zip code or City, State you would like to “find a Provider”. You may adjust the distance from zero to 100 miles. Click “SEARCH”

**Step 3: Select your plan:** you may type the name of your plan (ie: “*Managed Choice (Open Access)*” or “*Savings Plus*” in the box or scroll down to the appropriate category and then click on the appropriate plan name:

Plan Name	DocFind Plan selection
<b>OAMC</b> (Horizon DA\$15, DA\$20, Educator)	Category = <u>Aetna Open Access Plans</u> DocFind Plan Name = <u>Managed Choice (Open Access)</u>
<b>Open Access Elect Choice</b> (Horizon EPO)	Category = <u>Aetna Open Access Plans</u> DocFind Plan Name = <u>Elect Choice EPO (Open Access)</u>
<b>OAEC-SP</b> (Horizon OMNIA)	Category = <u>Savings Plus Plans</u> DocFind Plan Name = <u>Aetna Health Network Option (Open Access)</u>
<b>AWH OAMC</b> (Horizon Garden State Plan)	Category = Aetna Whole Health DocFind Plan Name = (NJ) Aetna Whole Health <sup>SM</sup> - New Jersey - Open Access Managed Choice
<b>OAMC Savings Plus</b> (Horizon Garden State Plan) (Those enrolling in the GSHP that live in Cape May/Monmouth & Ocean Counties)	Category = Savings Plus Plans DocFind Plan Name = Savings Plus of New Jersey-Open Access Aetna Select

**Step 4:** Enter name of your provider in the “what do you want to search for...?” box or select “category” box (then narrow your search further (ie: All Primary Care Physicians, Hospitals, Urgent Care, etc.)

**Step 5:** Review your results (*select either:* List view or Map View)



Quality health plans & benefits  
Healthier living  
Financial well-being  
Intelligent solutions



## Sign-up is quick — but the extras keep coming

### Your members-only website

#### Home base for health and benefits

After you enroll in an Aetna health benefits or insurance plan this year, there are some nice tools, programs and perks waiting for you.

And the only way to get to them? Sign up for your member website at [www.aetna.com](http://www.aetna.com). It's the one place to look after your benefits and your health.

#### Taking care of business

First things first. Your member website is hands-down the best place for handling benefits business. Log in to:

- See who's covered under the plan
- Get a bill breakdown
- Find network docs who accept your plan
- Get digital ID cards
- Check balances in a health savings account or health fund

While you're logged in, you can email or chat with Member Services, too.

#### Tools, programs and perks

But there's more to it than just managing benefits. Your member website also opens the door to extras that come with your coverage.

#### Keep an eye on costs

Use the Member Payment Estimator to compare and estimate costs\* for up to 10 different network doctors or facilities at once. This tool includes more than 650 network health services people commonly use, like:

- Office visits
- Maternity services
- X-rays, MRIs, CT scans and other lab services

You'll find a series of tools to check costs in your area. And the quality of care, too.

\*Estimated costs not available in all markets. The tool gives you an estimate of what you would owe for a particular service based on your plan at that very point in time. Actual costs may differ from the estimate if, for example, claims for other services are processed after you get your estimate but before the claim for this service is submitted. Or, if the doctor or facility performs a different service at the time of your visit.

**In Idaho, health benefits and health insurance plans are offered and/or underwritten by Aetna Health of Utah Inc. and Aetna Life Insurance Company (Aetna). For all other states, health benefits and health insurance plans are offered, administered and/or underwritten by Aetna Health Inc., Aetna Health of California Inc., Aetna Health Insurance Company of New York, Aetna Health Insurance Company and/or Aetna Life Insurance Company. In Florida, by Aetna Health Inc. and/or Aetna Life Insurance Company. In Utah and Wyoming, by Aetna Health of Utah Inc. and Aetna Life Insurance Company. In Maryland, by Aetna Health Inc., 151 Farmington Avenue, Hartford, CT 06156. Each insurer has sole financial responsibility for its own products.**

## Handy health info

**Health Decision Support.** This is like having a personalized health library. Through this tool, you'll find a series of online programs — on topics from lower back pain and bariatric surgery to total hip replacement. They help you:

- Understand your specific health condition
- Learn about your treatment options
- Make the right decision for you

**Link to health information.** Just visit the Healthwise® Knowledgebase for information on thousands of health topics in English and Spanish. You can find out about asthma, pregnancy, heart disease and other conditions.

## Help for healthier days

Want to make a difference in your well-being in 20 minutes? Just fill out the health assessment.

This assessment asks questions about your health history and habits. It helps you learn about your health risks, as well as steps to head them off.

And it offers helpful programs and resources that are all about *you*.

## Find what you need — wherever, whenever

The Aetna Mobile app puts our most popular online features at your fingertips. It's available for Android™ and iPhone® mobile devices.

Visit [www.aetna.com/mobile](http://www.aetna.com/mobile).

## More support for new and power users

Use Ask Ann, your online search assistant. If you're new to Aetna, she can help you sign up for your member website.

After that, when you log in, Ann "recognizes" you — and your health plan. She can help you find a doctor who accepts your health plan, answer questions about claims and find out more about your benefits.

## Take advantage of it all.

Once you enroll, sign up for your members-only website at [www.aetna.com](http://www.aetna.com).

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[www.aetna.com](http://www.aetna.com)

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You're in your car, at the doctor's office ... anywhere. You need that ID number or claims record now. With Aetna Mobile, you'll get all the answers you need, instantly.

## Features of Aetna Mobile

**Search claims** — no more guesswork when you don't have the paperwork with you.

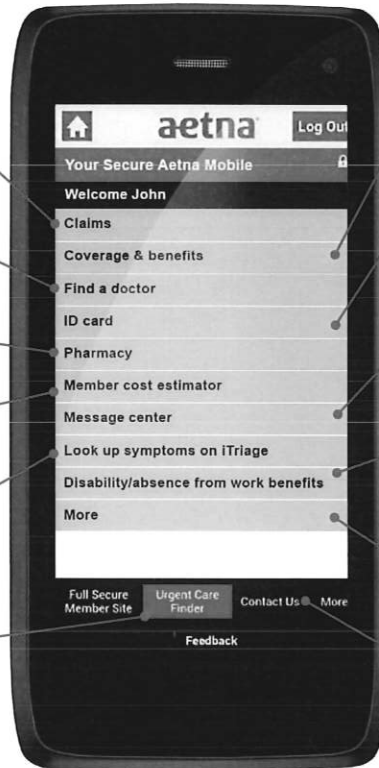
**Find a doctor** — it's easy to search for doctors, dentists and specialists in your area.

**Pharmacy** — find a pharmacy, get drug costs or refill a prescription on the go.

**Member cost estimator** — real-time estimates for out-of-pocket medical expenses based on your health plan.

**Look up symptoms on the iTriage® app** — it's easy to search symptoms, conditions and medications.

**Use the Urgent Care Finder** — it's for immediate help in an emergency. Because every minute counts.



**Check benefits and coverage information** — just clear, accurate details when you click.

**Pull up your medical and/or dental ID card information** — if you left your ID card at home, it's no problem.

**Message center** — one location for all Aetna e-mail correspondence from Member Services.

**View your disability or leave information** — reference your existing claims, leaves and payments while you're on the go.

**More** — for access to your personal health record.

**Contact us** — for fast answers to your plan questions.

## Two ways to download your FREE Aetna Mobile app:

- Text **Apps** to **23862** to download now\*
- Scan the code with your mobile device



To learn more, visit us at [www.aetna.com/mobile](http://www.aetna.com/mobile).

\*Standard text messaging rates may apply.

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[www.aetna.com](http://www.aetna.com)

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## Dental Coverage

Regular dental exams can help you and your dentist detect problems in the early stages when treatment is simpler and costs are lower. Keeping your teeth and gums clean and healthy will help prevent most tooth decay and periodontal disease, and is an important part of maintaining your medical health. The Township of Union Board of Education offers two dental plan options. The Aetna PPO plan offers coverage with in- and out-of-network benefits, while the Aetna DMO plan covers services on a Fee-for-Service basis.

Plan Provision	Aetna PPO/PDN with PPOII Network		Aetna DMO/DNO Network
	In-Network	Out-of-Network	In-Network Only
<b>Annual Deductible (Individual/Family)</b>	\$25/\$75		\$0
<b>Annual Maximum (Per person)</b>	\$1,250		N/A
<b>Diagnostic and Preventive Care: Includes cleanings, fluoride treatments, sealants and x-rays</b>	0%	0%	See Fee Schedule
<b>Basic Services: Includes fillings, periodontics, scaling and root planning, and oral surgery</b>	20%*	20%*	See Fee Schedule
<b>Major Services: Includes crowns, bridges and full and partial dentures</b>	50%*	50%*	See Fee Schedule
<b>Orthodontia (Adults and Children)</b>	50%* \$1,000 lifetime maximum		See Fee Schedule

Note: This is a summary of coverage only; the summary plan description contains exclusions and limitations that are not shown here. In-network services are based on negotiated charges; out-of-network services are based on Reasonable and Customary (R&C) charges.

This valuable benefit feature allows you to carry over a portion of your unused standard annual maximum benefit limit into the next year, and beyond. You can accumulate part of your unused benefit dollars from a healthy year and use it for larger, more expensive procedures in the future- such a bridges, crowns, and root canals.

**Aetna Dental Care Rewards** is included with the Aetna PPO plan.

- ✓ Encourages oral and overall health by rewarding members who seek dental care.
- ✓ Simple to understand and qualify
  - Obtain any Preventive service in year 1 to carry over an additional \$250 max into the following year
- ✓ Benefits continue to increase up to a max of 3 increases

There will be a custom preloaded maximum for the current population for 2022.

- ✓ **All active members will begin with second tier maximum of \$250 (total of \$1,500 annual max year 1)**
- ✓ New hires will start at first tier

# See if your dentist is in our network — or find a new one

You can locate a dentist through **our provider search tool**, which is updated six days a week. Please keep in mind that the availability of any particular dentist cannot be guaranteed.

## Steps to locating a doctor

1. Log on to [aetna.com/dsepublic](https://aetna.com/dsepublic)
2. Enter your ZIP code or city/state and click search. This will allow you to search the entire directory or search for a specific dentist.

The screenshot shows two side-by-side panels. The left panel, titled "Already a member?", has a "Login to Secure Site" button and a "Register Now" button. Below, it asks "Why Register?" and "Searching as a member is better" with a "You Can:" section containing three icons: "Get results for your plan", "View cost estimates", and "Select a primary care doctor". The right panel, titled "Continue as a guest", asks for a home location (zip, city, county or state) and offers a "Traveling?" option to change location. It includes a "Look within" distance selector set to "25 Miles" (with a range from 0 to 100 miles) and a "Search" button.

3. Select a plan choice — “ex. Dental PPO/PDN with PPOII network” and click continue to search for dentist.

The screenshot shows the "Select a Plan" screen for Chicago, IL. It includes a search bar, a "Continue" button, and a list of plan options. Two boxes highlight specific options: "DMO Network" points to "DMO/DNO/Managed Dental" and "PPO Network" points to "Dental PPO/PDN with PPO II network".

Network Type	Plan Name
DMO Network	DMO/DNO/Managed Dental
	DMO/DNO
	DMO/DNO - Select
	Aetna Advantage™ Dental
	Basic Dental/Discount Dental/Family Preventive Dental
PPO Network	Dental PPO/PDN
	Dental PPO/PDN
	Aetna HealthFund II/Aetna Dental Fund II
	Dental EPP
	Dental PPO/PDN with PPO II network
	Dental PPO/PDN with PPO II

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- Search by dentist name or select "Dental Care." If selecting "Dental Care," you can search by primary care, pediatric dentists, orthodontists, oral surgeons, and more.

What do you want to search for near 60614 (Chicago, IL)? [Change location](#)

Q  
 Eg. John Wright, Primary Care Physician, Dermatologists, Periodontists

OR

Find what you need by category

**Medical Doctors & Specialists**

Primary care physicians (PCPs), pediatricians, cardiologists, OB/GYNs, others

**Hospitals & Facilities**

Hospitals, urgent care centers, walk-in clinics, physical therapy centers, others

**Behavioral Health**

Counseling, EAP, mental health facilities, substance abuse treatment, psychiatrists, others

**Urgent Care**

Walk-in clinics, urgent care centers, emergency rooms

**Alternative Medicine**

Chiropractors, acupuncturists, massage therapists, dietitians, others

**Dental Care**

Dentists, orthodontists, endodontists, oral surgeons, endodontists, others

**Vision**

Routine eye exams, glasses, contact lenses

**Labs & Testing**

Bloodwork, ISO tests, diagnostic testing centers, sleep centers, imaging centers, others

**Pharmacy**

Search for pharmacies by name or location

**Durable Medical Equipment (DME)**

Hearing aids, breast pumps, prosthetics, wheelchairs, diabetes equipment, others

- Click or search for a specific provider type and your list will appear.

In network search results for Primary Care Dentists (PCD) near 60614 (Chicago, IL)

In Network List View Map View Filter & Sort Print a Provider Directory Print

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

Provider/Facility Information	Distance	Plan Information	Ratings
Jercinovic, Ernest G., DDS In Network 2200 North Halsted Street Chicago, IL 60614 (773) 535-4444 Specialties: General Practice - Dental Accepts your insurance through: Halsted Street Dental - GP In Network Specialties: General Practice - Dental <input type="checkbox"/> Add to compare <a href="#">Report incorrect information</a>	0.07 miles	See Accepted Plans	★★★★☆ 37 ratings

This material is for information only. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to dental services. Information is believed to be accurate as of the production date; however, it is subject to change.

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Quality health plans & benefits  
Healthier living  
Financial well-being  
Intelligent solutions



## Good news to smile about Aetna Dental® plans

### You don't need a dental ID card to get dental care

We want to make doing business with us easier than ever.

#### How will my dentist know I'm an Aetna Dental member?

When you visit your dentist, simply tell the office your name, date of birth and member ID number (or your Social Security number).

### But what if I want a card?

**Easy — use our mobile app or go online.** Log in to your secure member website at [www.aetna.com](http://www.aetna.com). Your ID card will appear on your personal benefits page. You can print out an ID card for you and your dependents by clicking on **"Get an ID card."** If your electronic ID card says **"No Election"** or **"Invalid Choice,"** then your plan requires you to choose a primary care dentist (PCD) who is in our network. Until you choose one, your benefits and claims may be affected.\*

### Here's what else you can do online:

- Find or select a dentist
- View claims and claim address
- Manage your health care spending

### Aetna Mobile — find what you need, wherever, whenever

There are two ways to download the free Aetna Mobile app to access your ID card or dental benefits information when you're on the go.

- Text "Apps" to 44040 to download now.\*\*
- Scan the code with your mobile device.

To learn more, visit us at [www.aetna.com/mobile](http://www.aetna.com/mobile).



\*CA/AZ DMO® participants: If you have not selected a PCD, one may have been selected for you. View your electronic ID card to determine if one was selected on your behalf.

\*\*Standard text messaging rates may apply.

**DMO dental benefits and dental insurance plans are underwritten by Aetna Dental Inc., Aetna Health Inc. and/or Aetna Life Insurance Company. Dental preferred provider organization (PPO) and dental indemnity insurance plans are underwritten and/or administered by Aetna Life Insurance Company. Each insurer has sole financial responsibility for its own products.**

Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to [www.aetna.com](http://www.aetna.com).

Here is a reminder card. Just cut it out and keep it close by.



### Aetna Dental® plans





Log in to your secure member website at [www.aetna.com](http://www.aetna.com) to explore the resources available to you. Call **1-877-238-6200** if you have any questions — 24 hours a day, 365 days a year.

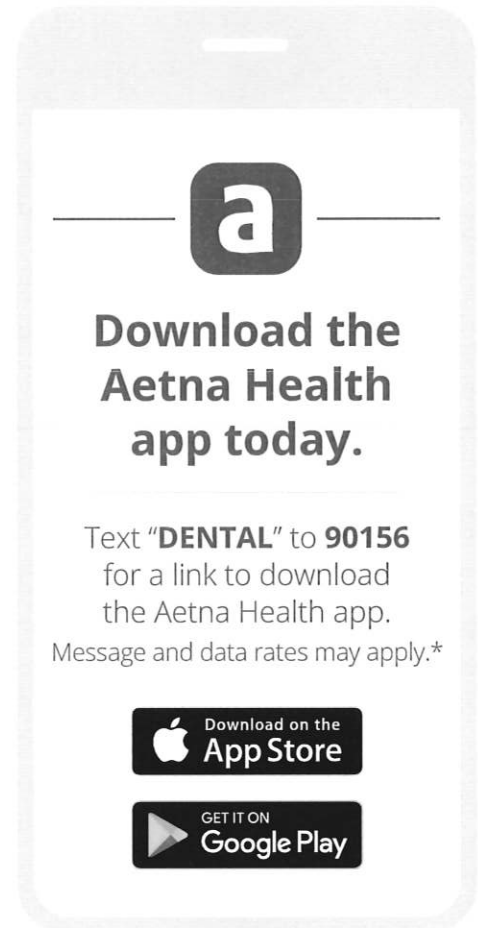


# Helping you take charge

Good oral hygiene helps keeps your whole body healthy. So stay on top of your dental benefits with the Aetna Health app.

## With the Aetna Health app, you can:

-  View your dental plan summary and get detailed information about what's covered.
-  View claims details and pay claims for your whole family.
-  Search for in-network dentists by name, specialty or procedure.
-  Access your ID card whenever you need it.



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Not all services are covered. See plan documents for a complete description of benefits, exclusions and limitations of coverage. Plan features and availability may vary by location and are subject to change.

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[Aetna.com/AetnaHealthApp](https://Aetna.com/AetnaHealthApp)

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## Vision Coverage

Vision Plan Provision	Aetna Vision	
	In Network	Out of Network
<b>Eye Exam</b>	\$10 copay	Reimbursement up to \$32
<b>Lenses</b>		
- <b>Single Vision</b>	\$25 copay	Reimbursement up to \$10
- <b>Bifocal</b>		Reimbursement up to \$25
- <b>Trifocal</b>		Reimbursement up to \$55
- <b>Lenticular</b>	\$90 copay	Reimbursement up to \$55
- <b>Progressive</b>		Reimbursement up to \$25
<b>Contact Lenses</b>		
- <b>Medically Necessary</b>	Covered (copay waived) Reimbursement up to \$130 (copay waived) Standard Reimbursement up to \$40. Premium – 90% of retail	Reimbursement up to \$200
- <b>Elective</b>		Reimbursement up to \$90 (copay waived)
- <b>Fitting and Evaluation</b>		Not Covered
<b>Frames</b>	Reimbursement up to \$130 retail plus 20% off balance	Reimbursement up to \$46
<b>Benefit Frequency</b>	Exams – Every 12 Months Lenses – Every 12 Months Frames – Every 24 Months	

Note: This is a summary of coverage only; the summary plan description contains exclusions and limitations that are not shown here. In-network services are based on negotiated charges; out-of-network services are based on Reasonable and Customary (R&C) charges.





# Best-in-class network

**Aetna Vision<sup>SM</sup> Preferred National Access**



## National

**When it comes to getting quality vision care, Aetna Vision Preferred is there for our members when and where they need it most, with:**

- Trusted local independent providers
- Retail locations with convenient weekend and evening hours
- Online, in-network options
- Providers can be found at **AetnaVision.com**

Aetna.com

10.03.139.1 (7/21)



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## Aetna Fitness Benefit Program Award

*If you have any questions about these programs, please call the Member Services number on the back of your ID card.*

### FITNESS BENEFIT

#### **Qualified Health Clubs**

A qualified health club is one that offers a variety of cardiovascular and strength-training exercise equipment. These include traditional health clubs, YMCAs, and JCCs.

The Fitness Program Award does not apply to martial arts centers; gymnastics facilities; country clubs; tennis, aerobic, or pool-only facilities; social clubs; and sports teams or leagues. It also does not apply to aerobic/fitness activity fees (including those paid for personal training, lessons, coaching, exercise equipment, or clothing) paid to a non-qualified health club.

### WHAT DO I NEED TO DO?

You can simply complete the enclosed Fitness Program Award claim form and send it to the Aetna address at the top of the form, along with:

- **For Fitness Program Award reimbursement:**
  - A copy of your health club agreement or contract that includes the name and address of the health club and the membership or completed log including class dates (see attached). A minimum of 12 visits per month must be completed **and/or walk 10K steps a day** (or a combination there of). Member is limited to \$240.00 reimbursement per year (\$20 per month). Dependents must be over age 18 to be eligible.
  - **Note:** Each 10K step day = one gym visit. Example: Submit 6 days of 10K steps and 6 days of Gym visits in a month would qualify as 1 monthly allowance. **ATTESTATION BOX MUST BE CHECKED FOR STEP CREDIT.**
  - Photocopies of dated, paid receipts, or your bank or credit card statements, or paycheck stub if your club fees are automatically deducted from those accounts. Receipts or statements should include the name of the family member

Wellness is a lifelong journey, from staying healthy to managing conditions. The path to wellness is different for each individual, but it must start with getting members engaged in their own well-being.

**Now as part of Aetna Healthy Commitments<sup>SM</sup> Enhanced, Premier, and Aetna Health Promise wellness packages, Aetna plan members can earn a \$50 gift certificate for doing something simple and smart for their health.**

You will earn a gift certificate from [www.aetnarewards.com](http://www.aetnarewards.com) when you:

- Complete or update your Simple Steps To A Healthier Life health assessment
- Complete a Journey, an online health coaching program\*

Once you complete both the health assessment and one online health coaching program, you will earn a \$50 gift certificate. If your spouse is covered under your plan, he or she is also eligible for the same incentive. You can spend it at one of many online or local shops.

**It's easy for you:**

**Step 1: Log in to your secure member website at [www.aetna.com](http://www.aetna.com).**

You will need to register by creating a user name and password, if you have not already.

**Step 2: Complete an online health coaching program — or Journey<sup>®</sup>.**

After completing the health assessment, go to your HealthMap to view your recommended health Directions. Under the Direction, you can embark on a Journey that meets your health needs and interests.

**Step 3: Complete your Journey and get rewarded.**

Once you complete all of these steps, you'll receive an e-mail from Aetna with directions to claim your \$50 gift certificate. Then go to [www.aetnarewards.com](http://www.aetnarewards.com) to shop.

If you do not receive an email from our gift card vendor within six weeks of completing all required activities, please call **1-877-922-4483**.

**Get started today.**  
Visit [www.aetna.com](http://www.aetna.com)

\*Incentive-based activity will only be given for completing select wellness programs as determined by the plan sponsor.

All wellness allowances are subject to review and approval by Aetna. Aetna has the right to determine whether or not any particular allowance usage is permitted under applicable law and the applicable contract with the plan sponsor.

Due to the strict Massachusetts requirement, gift cards are not permitted for use on any Fully-Insured case with a MA contract (for ALIC products) or on any MA HMO/HNO site (regardless of the ALIC contract state). Alabama, New York and Maryland are excepted and require Regional Counsel approval.

**Health benefits and health insurance plans are offered, administered and/or underwritten by Aetna Health Inc., Aetna Health of California Inc., Aetna Health Insurance Company of New York, Aetna Health Insurance Company and/or Aetna Life Insurance Company (Aetna). In Florida, by Aetna Health Inc. and/or Aetna Life Insurance Company. In Idaho, Wyoming and Utah, by Aetna Health of Utah Inc. In Maryland, by Aetna Health Inc., 151 Farmington Avenue, Hartford, CT 06156. Each insurer has sole financial responsibility for its own products.**

The information provided by the Simple Steps To A Healthier Life program is not meant to be either a recommendation for medical treatment or a diagnosis of a medical condition. Participants should consult their health care provider for the advice and care appropriate for their specific medical needs. This material is for information only. Health benefits and health insurance plans contain exclusions and limitations. Providers are independent contractors and are not agents of Aetna. This incentive reward may be taxable. Members may wish to consult with a tax adviser as to the proper tax treatment of this incentive award. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to [www.aetna.com](http://www.aetna.com).

**Policy forms issued in Oklahoma include:** HMO OK COC-5 09/07, HMO/OK GA-3 11/01, HMO OK POS RIDER 08/07, GR-23 and/or GR-29/GR-29N.

[www.aetna.com](http://www.aetna.com)

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**aetna<sup>®</sup>**

## **IMPORTANT LEGAL NOTICES**

### **EMPLOYEE RETIREMENT INCOME SECURITY ACT (ERISA)**

The Employee Retirement Income Security Act (ERISA) requires plan administrators - the people who manage plans - to give plan participants in writing the most important facts they need to know about their retirement and health benefit plans including plan rules, financial information, and documents on the operation and management of the plan. Some of these facts must be provided to participants regularly and automatically by the plan administrator. Upon written request, others are available, free-of-charge for minimal copying fees.

### **CONSOLIDATED OMNIBUS BUDGET RECONCILIATION ACT (COBRA)**

The Consolidated Omnibus Budget Reconciliation Act (COBRA) gives workers and their families who lose their health benefits the right to choose to continue group health benefits provided by their group health plan for limited periods of time under certain circumstances such as voluntary or involuntary job loss, reduction the hours worked, transition between jobs, death, divorce, and other life events. Qualified individuals may be required to pay the entire premium for coverage up to 102 percent of the cost to the plan.

### **HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)**

The Health Insurance Portability and Accountability Act (HIPAA) provides rights and protections for participants and beneficiaries in group health plans. HIPAA prohibits discrimination against Associates and dependents based on their health status; and allow a special opportunity to enroll in a new plan to individuals in certain circumstances. HIPAA may also give participants a right to purchase individual coverage if no group health plan coverage is available, and have exhausted COBRA or other continuation coverage.

### **MENTAL HEALTH PARITY AND ADDICTION ACT EQUITY ACT OF 2008**

This act expands the mental health parity requirements in the Employee Retirement Income Security Act, the Internal Revenue Code and the Public Health Services Act by imposing new mandates on group health plans that provide both medical and surgical benefits and mental health or substance abuse disorder benefits. Among the new requirements, such plans (or the health insurance coverage offered in connection with such plans) must ensure that the financial requirements applicable to mental health or substance abuse disorder benefits are no more restrictive than the predominant financial requirements applied to substantially all medical and surgical benefits covered by the plan (or coverage), and there are no separate cost sharing requirements that are applicable only with respect to mental health or substance abuse disorder benefits.

### **NEWBORNS AND MOTHERS HEALTH PROTECTION ACT**

The Newborns and Mothers Health Protection Act (Newborns Act) requires group health plans that offer maternity hospital benefits for mothers and newborns to pay for at least a 48-hour hospital stay for the mother and newborn following childbirth (or, in the case of a cesarean section, 96-hour hospital stay), unless the attending provider, in consultation with the mother, decides to discharge earlier.

### **QUALIFIED MEDICAL CHILD SUPPORT ORDER (QMCSO)**

QMCSO is a medical child support order issued under State law that creates or recognizes the existence of an “alternate recipient’s” right to receive benefits for which a participant or beneficiary is eligible under a group health plan. An “alternate recipient” is any child of a participant

(including a child adopted by or placed for adoption with a participant in a group health plan) who is recognized under a medical child support order as having a right to enrollment under a group health plan with respect to such participant. Upon receipt, the administrator of a group health plan is required to determine, within a reasonable period of time, whether a medical child support order is qualified, and to administer benefits in accordance with the applicable terms of each order that is qualified. In the event you are served with a notice to provide medical coverage for a dependent child as the result of a legal determination, you may obtain information from your employer on the rules for seeking to enact such coverage. These rules are provided at no cost to you and may be requested from your employer at any time.

#### **WOMEN’S HEALTH AND CANCER RIGHTS (WHCRA)**

Special Rights Following Mastectomy. A group health plan generally must, under federal law, make certain benefits available to participants who have undergone a mastectomy. In particular, a plan must offer mastectomy patients benefits for:

- Reconstruction of the breast on which the mastectomy has been performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Protheses
- Treatment of physical complications of mastectomy

Our Plan complies with these requirements. Benefits for these items generally are comparable to those provided under our Plan for similar types of medical services and supplies. Of course, the extent to which any of these items is appropriate following mastectomy is a matter to be determined by consultation between the attending physician and the patient. Our Plan neither imposes penalties (for example, reducing or limiting reimbursements) nor provides incentives to induce attending providers to provide care inconsistent with these requirements.

## **EXPANDED WOMEN'S PREVENTIVE CARE NOTICE**

In plan years starting June 1st, 2013, the following additional items will be covered with no cost-sharing under Preventive Services for Women as per Healthcare Reform (non-grandfathered plans):

- Breast feeding: Comprehensive support and counseling from trained providers, as well as access to breastfeeding supplies, for pregnant and nursing women.
- Contraception: Food and Drug Administration-approved contraceptive methods, sterilization procedures, and patient education and counseling, not including abortifacient drugs – Rx coverage went into effect on August 1, 2012.
- Domestic and interpersonal violence: Screening and Counseling for all women.
- Gestational diabetes: Screening for women 24 to 28 weeks pregnant and those at high risk of developing gestational diabetes.
- Human Papillomavirus (HPV) DNA Test: High risk HPV DNA testing every 3 years for women with normal cytology results who are 30 years and older.
- Sexually Transmitted Infections (STI): Counseling for sexually active women
- Well-woman visits: Obtain recommended preventive services for women under 65.

## **COVERAGE EXTENSION RIGHTS UNDER THE UNIFORMED SERVICES EMPLOYMENT AND REEMPLOYMENT RIGHTS ACT (USERRA)**

If you leave your job to perform military service, you have the right to elect to continue your existing employer-based health plan coverage for you and your dependents (including spouse) for up to 24 months while in the military. Even if you do not elect to continue coverage during your military service, you have the right to be reinstated in your employer's health plan when you are reemployed, generally without any waiting periods or exclusions for pre-existing conditions except for service-connected injuries or illnesses.

## **GINA NOTICE TO AVOID PROVIDING GENETIC INFORMATION FOR WELLNESS PROGRAMS**

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request. "Genetic information" as defined by GINA, includes an individual's family medical history, the results of an individual's or family member's genetic tests, the fact that an individual or an individual's family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual's family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services. Please do not include any family medical history or any information related to genetic testing, genetic services, genetic counseling or genetic diseases for which an individual may be at risk.

## **MICHELLE'S LAW**

Michelle's Law permits seriously ill or injured college students to continue coverage under a group health plan when they must leave school on a full-time basis due to their injury or illness and would otherwise lose coverage. The continuation of coverage applies to a dependent child's leave of absence from (or other change in enrollment) a postsecondary educational institution (college or university) because of a serious illness or injury, while covered under a health plan. This would otherwise cause the child to lose dependent status under the terms of the plan.

Coverage will be continued until:

1. One year from the start of the medically necessary leave of absence, or
2. The date on which the coverage would otherwise terminate under the terms of the health plan; whichever is earlier.

## **QUALIFYING EVENTS**

Group health plans are required to offer special enrollment to otherwise eligible Associates, spouse and any new dependents upon marriage, birth, adoption or placement for adoption, or when a loss of eligibility for other group health plan or health insurance coverage occurs and when employer contributions toward other coverage cease. Accordingly, an Associate who is otherwise eligible, but not enrolled for coverage, can enroll (and can also enroll a spouse and any new dependents, if they are otherwise eligible under the plan) when any of these events occur, as long as notification is provided within 30 days of the date the change became effective.

## **Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)**

If you or your children are eligible for Medicaid or CHIP and you are eligible for health coverage from your employer, your State may have a premium assistance program that can help pay for coverage. These States use funds from their Medicaid or CHIP programs to help people who are eligible for these programs, but also have access to health insurance through their employer. If you or your children are not eligible for Medicaid or CHIP, you will not be eligible for these premium assistance programs.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, you can contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, you can contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or [www.insurekidsnow.gov](http://www.insurekidsnow.gov) to find out how to apply. If you qualify, you can ask the State if it has a program that might help you pay the premiums for an employer-sponsored plan. Once it is determined that you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must permit you to enroll in your employer plan if you are not already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in

your employer plan, you can contact the Department of Labor electronically at [www.askebsa.dol.gov](http://www.askebsa.dol.gov) or by calling toll-free 1-866-444-EBSA (3272).

### **HIPAA Special Enrollment Notice**

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself or your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards your or your dependents' other coverage). However, you must request enrollment within 30 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption.

Special enrollment rights also may exist in the following circumstances:

- If you or your dependents experience a loss of eligibility for Medicaid or a state Children's Health Insurance Program (CHIP) coverage and you request enrollment within 60 days after that coverage ends; or
- If you or your dependents become eligible for a state premium assistance subsidy through Medicaid or a state CHIP with respect to coverage under this plan and you request enrollment within 60 days after the determination of eligibility for such assistance.

Note: The 60-day period for requesting enrollment applies only in these last two listed circumstances relating to Medicaid and state CHIP. As described above, a 30-day period applies to most special enrollments.

To request special enrollment or obtain more information, contact the Human Resources Department 908-850-6200.

### **HIPAA Availability Notice of Privacy Practices**

Horizon BCBS provides health benefits to eligible employees of Township of Union Board of Education and their eligible dependents as described in the summary plan description(s) for the Plan. The Plan creates, receives, uses, maintains and discloses health information about participating employees and dependents in the course of providing these health benefits. The Plan is required by law to provide notice to participants of the Plan's duties and privacy practices with respect to covered individuals' protected health information, and has done so by providing to Plan participants a Notice of Privacy Practices, which describes the ways that the Plan uses and discloses protected health information. To receive a copy of the Plan's Notice of Privacy Practices you should contact the Human Resources Department 908-850-6200, who has been designated as

the Plan's contact person for all issues regarding the Plan's privacy practices and covered individuals' privacy rights.

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP

programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit [www.healthcare.gov](http://www.healthcare.gov).

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or [www.insurekidsnow.gov](http://www.insurekidsnow.gov) to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at [www.askebsa.dol.gov](http://www.askebsa.dol.gov) or call 1-866-444-EBSA (3272).



If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2014. Contact your State for more information on eligibility.

<b>ALABAMA – Medicaid</b>	<b>COLORADO – Medicaid</b>
Website: <a href="http://www.medicaid.alabama.gov">http://www.medicaid.alabama.gov</a> Phone: 1-855-692-5447	Medicaid Website: <a href="http://www.colorado.gov/">http://www.colorado.gov/</a> Medicaid Phone (In state): 1-800-866-3513 Medicaid Phone (Out of state): 1-800-221-3943
<b>ALASKA – Medicaid</b>	
Website: <a href="http://health.hss.state.ak.us/dpa/programs/medicaid/">http://health.hss.state.ak.us/dpa/programs/medicaid/</a> Phone (Outside of Anchorage): 1-888-318-8890 Phone (Anchorage): 907-269-6529	
<b>ARIZONA – CHIP</b>	<b>FLORIDA – Medicaid</b>
Website: <a href="http://www.azahcccs.gov/applicants">http://www.azahcccs.gov/applicants</a> Phone (Outside of Maricopa County): 1-877-764-5437 Phone (Maricopa County): 602-417-5437	Website: <a href="https://www.flmedicaidtprecovery.com/">https://www.flmedicaidtprecovery.com/</a> Phone: 1-877-357-3268
	<b>GEORGIA – Medicaid</b>
	Website: <a href="http://dch.georgia.gov/">http://dch.georgia.gov/</a> - Click on Programs, then Medicaid, then Health Insurance Premium Payment (HIPP) Phone: 1-800-869-1150
<b>IDAHO – Medicaid</b>	<b>MONTANA – Medicaid</b>
Medicaid Website: <a href="http://healthandwelfare.idaho.gov/Medical/Medicaid/PremiumAssistance/tabid/1510/Default.aspx">http://healthandwelfare.idaho.gov/Medical/Medicaid/PremiumAssistance/tabid/1510/Default.aspx</a> Medicaid Phone: 1-800-926-2588	Website: <a href="http://medicaidprovider.hhs.mt.gov/clientpages/clientindex.shtml">http://medicaidprovider.hhs.mt.gov/clientpages/clientindex.shtml</a> Phone: 1-800-694-3084
<b>INDIANA – Medicaid</b>	<b>NEBRASKA – Medicaid</b>
Website: <a href="http://www.in.gov/fssa">http://www.in.gov/fssa</a> Phone: 1-800-889-9949	Website: <a href="http://www.ACCESSNebraska.ne.gov">www.ACCESSNebraska.ne.gov</a> Phone: 1-855-632-7633
<b>IOWA – Medicaid</b>	<b>NEVADA – Medicaid</b>
Website: <a href="http://www.dhs.state.ia.us/hipp/">www.dhs.state.ia.us/hipp/</a> Phone: 1-888-346-9562	Medicaid Website: <a href="http://dwss.nv.gov/">http://dwss.nv.gov/</a> Medicaid Phone: 1-800-992-0900
<b>KANSAS – Medicaid</b>	
Website: <a href="http://www.kdheks.gov/hcf/">http://www.kdheks.gov/hcf/</a> Phone: 1-800-792-4884	
<b>KENTUCKY – Medicaid</b>	<b>NEW HAMPSHIRE – Medicaid</b>
Website: <a href="http://chfs.ky.gov/dms/default.htm">http://chfs.ky.gov/dms/default.htm</a> Phone: 1-800-635-2570	Website: <a href="http://www.dhhs.nh.gov/oii/documents/hippapp.pdf">http://www.dhhs.nh.gov/oii/documents/hippapp.pdf</a> Phone: 603-271-5218

<b>LOUISIANA – Medicaid</b>	<b>NEW JERSEY – Medicaid and CHIP</b>
Website: <a href="http://www.lahipp.dhh.louisiana.gov">http://www.lahipp.dhh.louisiana.gov</a>	Medicaid Website: <a href="http://www.state.nj.us/humanservices/dmahs/clients/medicaid/">http://www.state.nj.us/humanservices/dmahs/clients/medicaid/</a>
Phone: 1-888-695-2447	Medicaid Phone: 609-631-2392
<b>MAINE – Medicaid</b>	CHIP Website: <a href="http://www.njfamilycare.org/index.html">http://www.njfamilycare.org/index.html</a>
Website: <a href="http://www.maine.gov/dhhs/ofi/public-assistance/index.html">http://www.maine.gov/dhhs/ofi/public-assistance/index.html</a>	CHIP Phone: 1-800-701-0710
Phone: 1-800-977-6740	
TTY 1-800-977-6741	
<b>MASSACHUSETTS – Medicaid and CHIP</b>	<b>NEW YORK – Medicaid</b>
Website: <a href="http://www.mass.gov/MassHealth">http://www.mass.gov/MassHealth</a>	Website: <a href="http://www.nyhealth.gov/health_care/medicaid/">http://www.nyhealth.gov/health_care/medicaid/</a>
Phone: 1-800-462-1120	Phone: 1-800-541-2831
<b>MINNESOTA – Medicaid</b>	<b>NORTH CAROLINA – Medicaid</b>
Website: <a href="http://www.dhs.state.mn.us/Click%20on%20Health%20Care,%20then%20Medical%20Assistance">http://www.dhs.state.mn.us/Click on Health Care, then Medical Assistance</a>	Website: <a href="http://www.ncdhhs.gov/dma">http://www.ncdhhs.gov/dma</a>
Phone: 1-800-657-3629	Phone: 919-855-4100
<b>MISSOURI – Medicaid</b>	<b>NORTH DAKOTA – Medicaid</b>
Website:	Website:
<a href="http://www.dss.mo.gov/mhd/participants/pages/hipp.htm">http://www.dss.mo.gov/mhd/participants/pages/hipp.htm</a>	<a href="http://www.nd.gov/dhs/services/medicalserv/medicaid/">http://www.nd.gov/dhs/services/medicalserv/medicaid/</a>
Phone: 573-751-2005	Phone: 1-800-755-2604
<b>OKLAHOMA – Medicaid and CHIP</b>	<b>UTAH – Medicaid and CHIP</b>
Website: <a href="http://www.insureoklahoma.org">http://www.insureoklahoma.org</a>	Website: <a href="http://health.utah.gov/upp">http://health.utah.gov/upp</a>
Phone: 1-888-365-3742	Phone: 1-866-435-7414
<b>OREGON – Medicaid</b>	<b>VERMONT – Medicaid</b>
Website: <a href="http://www.oregonhealthykids.gov">http://www.oregonhealthykids.gov</a>	Website: <a href="http://www.greenmountaincare.org/">http://www.greenmountaincare.org/</a>
<a href="http://www.hijossaludablesoregon.gov">http://www.hijossaludablesoregon.gov</a>	Phone: 1-800-250-8427
Phone: 1-800-699-9075	
<b>PENNSYLVANIA – Medicaid</b>	<b>VIRGINIA – Medicaid and CHIP</b>
Website: <a href="http://www.dpw.state.pa.us/hipp">http://www.dpw.state.pa.us/hipp</a>	Medicaid Website:
Phone: 1-800-692-7462	<a href="http://www.coverva.org/programs_premium_assistance.cfm">http://www.coverva.org/programs_premium_assistance.cfm</a>
	Medicaid Phone: 1-800-432-5924
	CHIP Website:
	<a href="http://www.coverva.org/programs_premium_assistance.cfm">http://www.coverva.org/programs_premium_assistance.cfm</a>
	CHIP Phone: 1-855-242-8282
<b>RHODE ISLAND – Medicaid</b>	<b>WASHINGTON – Medicaid</b>
Website: <a href="http://www.ohhs.ri.gov">www.ohhs.ri.gov</a>	Website:
Phone: 401-462-5300	<a href="http://www.hca.wa.gov/medicaid/premiumpymt/pages/index.aspx">http://www.hca.wa.gov/medicaid/premiumpymt/pages/index.aspx</a>
	Phone: 1-800-562-3022 ext. 15473
<b>SOUTH CAROLINA – Medicaid</b>	<b>WEST VIRGINIA – Medicaid</b>
Website: <a href="http://www.scdhhs.gov">http://www.scdhhs.gov</a>	Website: <a href="http://www.dhhr.wv.gov/bms/">www.dhhr.wv.gov/bms/</a>
Phone: 1-888-549-0820	Phone: 1-877-598-5820, HMS Third Party Liability
<b>SOUTH DAKOTA - Medicaid</b>	<b>WISCONSIN – Medicaid</b>
Website: <a href="http://dss.sd.gov">http://dss.sd.gov</a>	Website: <a href="http://www.badgercareplus.org/pubs/p-10095.htm">http://www.badgercareplus.org/pubs/p-10095.htm</a>
Phone: 1-888-828-0059	Phone: 1-800-362-3002
<b>TEXAS – Medicaid</b>	<b>WYOMING – Medicaid</b>
Website: <a href="https://www.gethipptexas.com/">https://www.gethipptexas.com/</a>	Website: <a href="http://health.wyo.gov/healthcarefin/equalitycare">http://health.wyo.gov/healthcarefin/equalitycare</a>
Phone: 1-800-440-0493	Phone: 307-777-7531

To see if any other states have added a premium assistance program since July 31, 2014, or for more information on special enrollment rights, contact either:

U.S. Department of Labor  
Employee Benefits Security Administration  
[www.dol.gov/ebsa](http://www.dol.gov/ebsa)  
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services  
Centers for Medicare & Medicaid Services  
[www.cms.hhs.gov](http://www.cms.hhs.gov)  
1-877-267-2323, Menu Option 4, Ext. 61565

## **For Medicare Beneficiaries: 2019**

### **Important Notice from Township of Union Board of Education**

#### **About Your Prescription Drug Coverage and Medicare**

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Township of Union Board of Education and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

#### **There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:**

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. Township of Union Board of Education has determined that the prescription drug coverage offered by Horizon BCBS is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

#### **When Can You Join A Medicare Drug Plan?**

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th to December 7th. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

#### **What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?**

If you decide to join a Medicare drug plan, your current Township of Union Board of Education coverage will be affected. If you do decide to join a Medicare drug plan and drop your current Township of Union Board of Education coverage, be aware that you and your dependents will not be able to get this coverage back.

#### **When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?**

You should also know that if you drop or lose your current coverage with Township of Union Board of Education and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

**For More Information About This Notice Or Your Current Prescription Drug Coverage...**

Contact the person listed below for further information. NOTE: You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through Township of Union Board of Education changes. You also may request a copy of this notice at any time.

**For More Information About Your Options Under Medicare Prescription Drug Coverage...**

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

**For more information about Medicare prescription drug coverage:**

- Visit [www.medicare.gov](http://www.medicare.gov).
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help.
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at [www.socialsecurity.gov](http://www.socialsecurity.gov), or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Date: 3/1/2022

**Name of Entity/Sender:** Donna Carlin

**Contact--Position/Office:** Administrative Assistant – Benefits & Certifications

**Phone Number:** 908-851-6401

**CMS Form 10182-CC Updated April 1, 2011**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0990. The time required to complete this information collection is estimated to average 8 hours per response initially, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244.



# Township of Union Public Schools

## Aetna Calculator Educators Plan

Effective July 1, 2023

<u>Plan Option:</u>	<u>Educators Plan w \$5/\$10 RX</u>			
	<u>Single (1)</u>	<u>Spouse (2)</u>	<u>Family (3)</u>	<u>Parent/Child (4)</u>
<u>Medical &amp; RX</u>	<u>\$1,297.78</u>	<u>\$2,922.68</u>	<u>\$3,247.66</u>	<u>\$1,817.70</u>
	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>
<b>Monthly COST:</b>	<u>\$1,297.78</u>	<u>\$2,922.68</u>	<u>\$3,247.66</u>	<u>\$1,817.70</u>

<u>SINGLE COVERAGE CONTRIBUTION (1)</u>		<u>SPOUSE COVERAGE CONTRIBUTION (2)</u>	
<u>Salary</u>	<u>% of Salary</u>	<u>Salary</u>	<u>% of Salary</u>
<u>Less than \$20,000</u>	<u>1.70%</u>	<u>Less than \$20,000</u>	<u>2.80%</u>
<u>\$20,000 - \$24,999</u>	<u>1.70%</u>	<u>\$20,000 - \$24,999</u>	<u>2.80%</u>
<u>\$25,000 - \$29,999</u>	<u>1.70%</u>	<u>\$25,000 - \$29,999</u>	<u>2.80%</u>
<u>\$30,000 - \$34,999</u>	<u>1.70%</u>	<u>\$30,000 - \$34,999</u>	<u>2.80%</u>
<u>\$35,000 - \$39,999</u>	<u>1.70%</u>	<u>\$35,000 - \$39,999</u>	<u>2.80%</u>
<u>\$40,000 - \$44,999</u>	<u>1.90%</u>	<u>\$40,000 - \$44,999</u>	<u>3.30%</u>
<u>\$45,000 - \$49,999</u>	<u>1.90%</u>	<u>\$45,000 - \$49,999</u>	<u>3.30%</u>
<u>\$50,000 - \$54,999</u>	<u>2.20%</u>	<u>\$50,000 - \$54,999</u>	<u>3.90%</u>
<u>\$55,000 - \$59,999</u>	<u>2.20%</u>	<u>\$55,000 - \$59,999</u>	<u>3.90%</u>
<u>\$60,000 - \$64,999</u>	<u>2.50%</u>	<u>\$60,000 - \$64,999</u>	<u>4.40%</u>
<u>\$65,000 - \$69,999</u>	<u>2.50%</u>	<u>\$65,000 - \$69,999</u>	<u>4.40%</u>
<u>\$70,000 - \$74,999</u>	<u>2.80%</u>	<u>\$70,000 - \$74,999</u>	<u>5.00%</u>
<u>\$75,000 - \$79,999</u>	<u>2.80%</u>	<u>\$75,000 - \$79,999</u>	<u>5.00%</u>
<u>\$80,000 - \$90,000</u>	<u>3.00%</u>	<u>\$80,000 - \$90,000</u>	<u>5.50%</u>
<u>\$90,000-100,000</u>	<u>3.30%</u>	<u>\$90,000-100,000</u>	<u>6.00%</u>
<u>\$100,001+</u>	<u>3.60%</u>	<u>\$100,001+</u>	<u>6.60%</u>



# Township of Union Public Schools

## Aetna Calculator Educators Plan

<u>PARENT/CHILD(REN) COVERAGE CONTRIBUTION (4)</u>			<u>FAMILY COVERAGE CONTRIBUTION (3)</u>	
<u>Salary</u>	<u>% of Salary</u>		<u>Salary</u>	<u>% of Salary</u>
<u>Less than \$20,000</u>	<u>2.20%</u>		<u>Less than \$20,000</u>	<u>3.30%</u>
<u>\$20,000 - \$24,999</u>	<u>2.20%</u>		<u>\$20,000 - \$24,999</u>	<u>3.30%</u>
<u>\$25,000 - \$29,999</u>	<u>2.20%</u>		<u>\$25,000 - \$29,999</u>	<u>3.30%</u>
<u>\$30,000 - \$34,999</u>	<u>2.20%</u>		<u>\$30,000 - \$34,999</u>	<u>3.30%</u>
<u>\$35,000 - \$39,999</u>	<u>2.20%</u>		<u>\$35,000 - \$39,999</u>	<u>3.30%</u>
<u>\$40,000 - \$44,999</u>	<u>2.50%</u>		<u>\$40,000 - \$44,999</u>	<u>3.90%</u>
<u>\$45,000 - \$49,999</u>	<u>2.50%</u>		<u>\$45,000 - \$49,999</u>	<u>3.90%</u>
<u>\$50,000 - \$54,999</u>	<u>2.80%</u>		<u>\$50,000 - \$54,999</u>	<u>4.40%</u>
<u>\$55,000 - \$59,999</u>	<u>2.80%</u>		<u>\$55,000 - \$59,999</u>	<u>4.40%</u>
<u>\$60,000 - \$64,999</u>	<u>3.00%</u>		<u>\$60,000 - \$64,999</u>	<u>5.00%</u>
<u>\$65,000 - \$69,999</u>	<u>3.00%</u>		<u>\$65,000 - \$69,999</u>	<u>5.00%</u>
<u>\$70,000 - \$74,999</u>	<u>3.30%</u>		<u>\$70,000 - \$74,999</u>	<u>5.50%</u>
<u>\$75,000 - \$79,999</u>	<u>3.30%</u>		<u>\$75,000 - \$79,999</u>	<u>5.50%</u>
<u>\$80,000 - \$90,000</u>	<u>3.60%</u>		<u>\$80,000 - \$90,000</u>	<u>6.00%</u>
<u>\$90,000-100,000</u>	<u>3.90%</u>		<u>\$90,000-100,000</u>	<u>6.60%</u>
<u>\$100,001+</u>	<u>4.40%</u>		<u>\$100,001+</u>	<u>7.20%</u>



# Township of Union Public Schools

## Aetna Calculator Garden State Plan

**Effective July 1, 2023**

<b>Plan Option:</b>	<b>Garden State Plan</b>			
	<u>Single (1)</u>	<u>Spouse (2)</u>	<u>Family (3)</u>	<u>Parent/Child (4)</u>
<b>Medical &amp; RX</b>	<u>\$1,162.69</u>	<u>\$2,618.53</u>	<u>\$2,909.71</u>	<u>\$1,628.46</u>
	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>
<b>Monthly COST:</b>	<u>\$1,162.69</u>	<u>\$2,618.53</u>	<u>\$2,909.71</u>	<u>\$1,628.46</u>

<b><u>SINGLE COVERAGE CONTRIBUTION (1)</u></b>		<b><u>SPOUSE COVERAGE CONTRIBUTION (2)</u></b>	
<b><u>Salary</u></b>	<b><u>% of Salary</u></b>	<b><u>Salary</u></b>	<b><u>% of Salary</u></b>
<u>Less than \$20,000</u>	<u>1.50%</u>	<u>Less than \$20,000</u>	<u>1.50%</u>
<u>\$20,000 - \$24,999</u>	<u>1.50%</u>	<u>\$20,000 - \$24,999</u>	<u>1.50%</u>
<u>\$25,000 - \$29,999</u>	<u>1.50%</u>	<u>\$25,000 - \$29,999</u>	<u>1.50%</u>
<u>\$30,000 - \$34,999</u>	<u>1.50%</u>	<u>\$30,000 - \$34,999</u>	<u>1.50%</u>
<u>\$35,000 - \$39,999</u>	<u>1.50%</u>	<u>\$35,000 - \$39,999</u>	<u>1.50%</u>
<u>\$40,000 - \$44,999</u>	<u>1.50%</u>	<u>\$40,000 - \$44,999</u>	<u>1.65%</u>
<u>\$45,000 - \$49,999</u>	<u>1.50%</u>	<u>\$45,000 - \$49,999</u>	<u>1.65%</u>
<u>\$50,000 - \$54,999</u>	<u>1.50%</u>	<u>\$50,000 - \$54,999</u>	<u>1.95%</u>
<u>\$55,000 - \$59,999</u>	<u>1.50%</u>	<u>\$55,000 - \$59,999</u>	<u>1.95%</u>
<u>\$60,000 - \$64,999</u>	<u>1.50%</u>	<u>\$60,000 - \$64,999</u>	<u>2.20%</u>
<u>\$65,000 - \$69,999</u>	<u>1.50%</u>	<u>\$65,000 - \$69,999</u>	<u>2.20%</u>
<u>\$70,000 - \$74,999</u>	<u>1.50%</u>	<u>\$70,000 - \$74,999</u>	<u>2.50%</u>
<u>\$75,000 - \$79,999</u>	<u>1.50%</u>	<u>\$75,000 - \$79,999</u>	<u>2.50%</u>
<u>\$80,000 - \$90,000</u>	<u>1.50%</u>	<u>\$80,000 - \$90,000</u>	<u>2.75%</u>
<u>\$90,000-100,000</u>	<u>1.65%</u>	<u>\$90,000-100,000</u>	<u>3.00%</u>
<u>\$100,001+</u>	<u>1.80%</u>	<u>\$100,001+</u>	<u>3.30%</u>





# Township of Union Public Schools

## Aetna Calculator Garden State Plan

<b><u>PARENT/CHILD(REN) COVERAGE CONTRIBUTION (3)</u></b>			<b><u>FAMILY COVERAGE CONTRIBUTION (4)</u></b>	
<b><u>Salary</u></b>	<b><u>% of Salary</u></b>		<b><u>Salary</u></b>	<b><u>% of Salary</u></b>
<b><u>Less than \$20,000</u></b>	<b><u>1.50%</u></b>		<b><u>Less than \$20,000</u></b>	<b><u>1.65%</u></b>
<b><u>\$20,000 - \$24,999</u></b>	<b><u>1.50%</u></b>		<b><u>\$20,000 - \$24,999</u></b>	<b><u>1.65%</u></b>
<b><u>\$25,000 - \$29,999</u></b>	<b><u>1.50%</u></b>		<b><u>\$25,000 - \$29,999</u></b>	<b><u>1.65%</u></b>
<b><u>\$30,000 - \$34,999</u></b>	<b><u>1.50%</u></b>		<b><u>\$30,000 - \$34,999</u></b>	<b><u>1.65%</u></b>
<b><u>\$35,000 - \$39,999</u></b>	<b><u>1.50%</u></b>		<b><u>\$35,000 - \$39,999</u></b>	<b><u>1.65%</u></b>
<b><u>\$40,000 - \$44,999</u></b>	<b><u>1.50%</u></b>		<b><u>\$40,000 - \$44,999</u></b>	<b><u>1.95%</u></b>
<b><u>\$45,000 - \$49,999</u></b>	<b><u>1.50%</u></b>		<b><u>\$45,000 - \$49,999</u></b>	<b><u>1.95%</u></b>
<b><u>\$50,000 - \$54,999</u></b>	<b><u>1.50%</u></b>		<b><u>\$50,000 - \$54,999</u></b>	<b><u>2.20%</u></b>
<b><u>\$55,000 - \$59,999</u></b>	<b><u>1.50%</u></b>		<b><u>\$55,000 - \$59,999</u></b>	<b><u>2.20%</u></b>
<b><u>\$60,000 - \$64,999</u></b>	<b><u>1.50%</u></b>		<b><u>\$60,000 - \$64,999</u></b>	<b><u>2.50%</u></b>
<b><u>\$65,000 - \$69,999</u></b>	<b><u>1.50%</u></b>		<b><u>\$65,000 - \$69,999</u></b>	<b><u>2.50%</u></b>
<b><u>\$70,000 - \$74,999</u></b>	<b><u>1.65%</u></b>		<b><u>\$70,000 - \$74,999</u></b>	<b><u>2.75%</u></b>
<b><u>\$75,000 - \$79,999</u></b>	<b><u>1.65%</u></b>		<b><u>\$75,000 - \$79,999</u></b>	<b><u>2.75%</u></b>
<b><u>\$80,000 - \$90,000</u></b>	<b><u>1.80%</u></b>		<b><u>\$80,000 - \$90,000</u></b>	<b><u>3.00%</u></b>
<b><u>\$90,000-100,000</u></b>	<b><u>1.95%</u></b>		<b><u>\$90,000-100,000</u></b>	<b><u>3.30%</u></b>
<b><u>\$100,001+</u></b>	<b><u>2.20%</u></b>		<b><u>\$100,001+</u></b>	<b><u>3.60%</u></b>



# Township of Union Public Schools

## Aetna Calculator OA EC Savings

**Effective July 1, 2023**

<b>Plan Option:</b>	<b>OA EC Savings +</b>			
	<b>Single (1)</b>	<b>Spouse (2)</b>	<b>Family (3)</b>	<b>Parent/Child (4)</b>
<b>Medical &amp; RX</b>	<b>\$972.30</b>	<b>\$2,190.31</b>	<b>\$2,433.95</b>	<b>\$1,362.05</b>
	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Monthly COST:</b>	<b>\$972.30</b>	<b>\$2,190.31</b>	<b>\$2,433.95</b>	<b>\$1,362.05</b>

<b>SINGLE COVERAGE CONTRIBUTION (1)</b>				
<b>Salary</b>	<b>Year 4</b>	<b>Bi-Weekly Contribution</b>	<b>Monthly Contribution</b>	<b>Annual Contribution</b>
<b>Less than \$20,000</b>	<b>4.50%</b>	<b>\$21.88</b>	<b>\$43.75</b>	<b>\$525.04</b>
<b>\$20,000 - \$24,999</b>	<b>5.50%</b>	<b>\$26.74</b>	<b>\$53.48</b>	<b>\$641.72</b>
<b>\$25,000 - \$29,999</b>	<b>7.50%</b>	<b>\$36.46</b>	<b>\$72.92</b>	<b>\$875.07</b>
<b>\$30,000 - \$34,999</b>	<b>10.00%</b>	<b>\$48.62</b>	<b>\$97.23</b>	<b>\$1,166.76</b>
<b>\$35,000 - \$39,999</b>	<b>11.00%</b>	<b>\$53.48</b>	<b>\$106.95</b>	<b>\$1,283.44</b>
<b>\$40,000 - \$44,999</b>	<b>12.00%</b>	<b>\$58.34</b>	<b>\$116.68</b>	<b>\$1,400.11</b>
<b>\$45,000 - \$49,999</b>	<b>14.00%</b>	<b>\$68.06</b>	<b>\$136.12</b>	<b>\$1,633.46</b>
<b>\$50,000 - \$54,999</b>	<b>20.00%</b>	<b>\$97.23</b>	<b>\$194.46</b>	<b>\$2,333.52</b>
<b>\$55,000 - \$59,999</b>	<b>23.00%</b>	<b>\$111.81</b>	<b>\$223.63</b>	<b>\$2,683.55</b>
<b>\$60,000 - \$64,999</b>	<b>27.00%</b>	<b>\$131.26</b>	<b>\$262.52</b>	<b>\$3,150.25</b>
<b>\$65,000 - \$69,999</b>	<b>29.00%</b>	<b>\$140.98</b>	<b>\$281.97</b>	<b>\$3,383.60</b>
<b>\$70,000 - \$74,999</b>	<b>32.00%</b>	<b>\$155.57</b>	<b>\$311.14</b>	<b>\$3,733.63</b>
<b>\$75,000 - \$79,999</b>	<b>33.00%</b>	<b>\$160.43</b>	<b>\$320.86</b>	<b>\$3,850.31</b>
<b>\$80,000 - \$94,999</b>	<b>34.00%</b>	<b>\$165.29</b>	<b>\$330.58</b>	<b>\$3,966.98</b>
<b>\$95,000 +</b>	<b>35.00%</b>	<b>\$170.15</b>	<b>\$340.31</b>	<b>\$4,083.66</b>



# Township of Union Public Schools

## Aetna Calculator OA EC Savings

<b><u>SPOUSE COVERAGE CONTRIBUTION (2)</u></b>				
<b><u>Salary</u></b>	<b><u>Year 4</u></b>	<b><u>Bi-Weekly Contribution</u></b>	<b><u>Monthly Contribution</u></b>	<b><u>Annual Contribution</u></b>
<b><u>Less than \$25,000</u></b>	<b><u>3.50%</u></b>	<b><u>\$38.33</u></b>	<b><u>\$76.66</u></b>	<b><u>\$919.93</u></b>
<b><u>\$25,000 - \$29,999</u></b>	<b><u>4.50%</u></b>	<b><u>\$49.28</u></b>	<b><u>\$98.56</u></b>	<b><u>\$1,182.77</u></b>
<b><u>\$30,000 - \$34,999</u></b>	<b><u>6.00%</u></b>	<b><u>\$65.71</u></b>	<b><u>\$131.42</u></b>	<b><u>\$1,577.02</u></b>
<b><u>\$35,000 - \$39,999</u></b>	<b><u>7.00%</u></b>	<b><u>\$76.66</u></b>	<b><u>\$153.32</u></b>	<b><u>\$1,839.86</u></b>
<b><u>\$40,000 - \$44,999</u></b>	<b><u>8.00%</u></b>	<b><u>\$87.61</u></b>	<b><u>\$175.22</u></b>	<b><u>\$2,102.70</u></b>
<b><u>\$45,000 - \$49,999</u></b>	<b><u>10.00%</u></b>	<b><u>\$109.52</u></b>	<b><u>\$219.03</u></b>	<b><u>\$2,628.37</u></b>
<b><u>\$50,000 - \$54,999</u></b>	<b><u>15.00%</u></b>	<b><u>\$164.27</u></b>	<b><u>\$328.55</u></b>	<b><u>\$3,942.56</u></b>
<b><u>\$55,000 - \$59,999</u></b>	<b><u>17.00%</u></b>	<b><u>\$186.18</u></b>	<b><u>\$372.35</u></b>	<b><u>\$4,468.23</u></b>
<b><u>\$60,000 - \$64,999</u></b>	<b><u>21.00%</u></b>	<b><u>\$229.98</u></b>	<b><u>\$459.97</u></b>	<b><u>\$5,519.58</u></b>
<b><u>\$65,000 - \$69,999</u></b>	<b><u>23.00%</u></b>	<b><u>\$251.89</u></b>	<b><u>\$503.77</u></b>	<b><u>\$6,045.26</u></b>
<b><u>\$70,000 - \$74,999</u></b>	<b><u>26.00%</u></b>	<b><u>\$284.74</u></b>	<b><u>\$569.48</u></b>	<b><u>\$6,833.77</u></b>
<b><u>\$75,000 - \$79,999</u></b>	<b><u>27.00%</u></b>	<b><u>\$295.69</u></b>	<b><u>\$591.38</u></b>	<b><u>\$7,096.60</u></b>
<b><u>\$80,000 - \$84,999</u></b>	<b><u>28.00%</u></b>	<b><u>\$306.64</u></b>	<b><u>\$613.29</u></b>	<b><u>\$7,359.44</u></b>
<b><u>\$85,000 - \$99,999</u></b>	<b><u>30.00%</u></b>	<b><u>\$328.55</u></b>	<b><u>\$657.09</u></b>	<b><u>\$7,885.12</u></b>
<b><u>\$100,000 +</u></b>	<b><u>35.00%</u></b>	<b><u>\$383.30</u></b>	<b><u>\$766.61</u></b>	<b><u>\$9,199.30</u></b>



# Township of Union Public Schools

## Aetna Calculator OA EC Savings

<b>PARENT/CHILD(REN) COVERAGE CONTRIBUTION (3)</b>				
<b>Salary</b>	<b>Year 4</b>	<b>Bi-Weekly Contribution</b>	<b>Monthly Contribution</b>	<b>Annual Contribution</b>
<u>Less than \$25,000</u>	<u>3.50%</u>	<u>\$23.84</u>	<u>\$47.67</u>	<u>\$572.06</u>
<u>\$25,000 - \$29,999</u>	<u>4.50%</u>	<u>\$30.65</u>	<u>\$61.29</u>	<u>\$735.51</u>
<u>\$30,000 - \$34,999</u>	<u>6.00%</u>	<u>\$40.86</u>	<u>\$81.72</u>	<u>\$980.68</u>
<u>\$35,000 - \$39,999</u>	<u>7.00%</u>	<u>\$47.67</u>	<u>\$95.34</u>	<u>\$1,144.12</u>
<u>\$40,000 - \$44,999</u>	<u>8.00%</u>	<u>\$54.48</u>	<u>\$108.96</u>	<u>\$1,307.57</u>
<u>\$45,000 - \$49,999</u>	<u>10.00%</u>	<u>\$68.10</u>	<u>\$136.21</u>	<u>\$1,634.46</u>
<u>\$50,000 - \$54,999</u>	<u>15.00%</u>	<u>\$102.15</u>	<u>\$204.31</u>	<u>\$2,451.69</u>
<u>\$55,000 - \$59,999</u>	<u>17.00%</u>	<u>\$115.77</u>	<u>\$231.55</u>	<u>\$2,778.58</u>
<u>\$60,000 - \$64,999</u>	<u>21.00%</u>	<u>\$143.02</u>	<u>\$286.03</u>	<u>\$3,432.37</u>
<u>\$65,000 - \$69,999</u>	<u>23.00%</u>	<u>\$156.64</u>	<u>\$313.27</u>	<u>\$3,759.26</u>
<u>\$70,000 - \$74,999</u>	<u>26.00%</u>	<u>\$177.07</u>	<u>\$354.13</u>	<u>\$4,249.60</u>
<u>\$75,000 - \$79,999</u>	<u>27.00%</u>	<u>\$183.88</u>	<u>\$367.75</u>	<u>\$4,413.04</u>
<u>\$80,000 - \$84,999</u>	<u>28.00%</u>	<u>\$190.69</u>	<u>\$381.37</u>	<u>\$4,576.49</u>
<u>\$85,000 - \$99,999</u>	<u>30.00%</u>	<u>\$204.31</u>	<u>\$408.62</u>	<u>\$4,903.38</u>
<u>\$100,000 +</u>	<u>35.00%</u>	<u>\$238.36</u>	<u>\$476.72</u>	<u>\$5,720.61</u>



# Township of Union Public Schools

## Aetna Calculator OA EC Savings

<b>FAMILY COVERAGE CONTRIBUTION (4)</b>				
<b>Salary</b>	<b>Year 4</b>	<b>Bi-Weekly Contribution</b>	<b>Monthly Contribution</b>	<b>Annual Contribution</b>
<u>Less than \$25,000</u>	<u>3.00%</u>	<u>\$36.51</u>	<u>\$73.02</u>	<u>\$876.22</u>
<u>\$25,000 - \$29,999</u>	<u>4.00%</u>	<u>\$48.68</u>	<u>\$97.36</u>	<u>\$1,168.30</u>
<u>\$30,000 - \$34,999</u>	<u>5.00%</u>	<u>\$60.85</u>	<u>\$121.70</u>	<u>\$1,460.37</u>
<u>\$35,000 - \$39,999</u>	<u>6.00%</u>	<u>\$73.02</u>	<u>\$146.04</u>	<u>\$1,752.44</u>
<u>\$40,000 - \$44,999</u>	<u>7.00%</u>	<u>\$85.19</u>	<u>\$170.38</u>	<u>\$2,044.52</u>
<u>\$45,000 - \$49,999</u>	<u>9.00%</u>	<u>\$109.53</u>	<u>\$219.06</u>	<u>\$2,628.67</u>
<u>\$50,000 - \$54,999</u>	<u>12.00%</u>	<u>\$146.04</u>	<u>\$292.07</u>	<u>\$3,504.89</u>
<u>\$55,000 - \$59,999</u>	<u>14.00%</u>	<u>\$170.38</u>	<u>\$340.75</u>	<u>\$4,089.04</u>
<u>\$60,000 - \$64,999</u>	<u>17.00%</u>	<u>\$206.89</u>	<u>\$413.77</u>	<u>\$4,965.26</u>
<u>\$65,000 - \$69,999</u>	<u>19.00%</u>	<u>\$231.23</u>	<u>\$462.45</u>	<u>\$5,549.41</u>
<u>\$70,000 - \$74,999</u>	<u>22.00%</u>	<u>\$267.73</u>	<u>\$535.47</u>	<u>\$6,425.63</u>
<u>\$75,000 - \$79,999</u>	<u>23.00%</u>	<u>\$279.90</u>	<u>\$559.81</u>	<u>\$6,717.70</u>
<u>\$80,000 - \$84,999</u>	<u>24.00%</u>	<u>\$292.07</u>	<u>\$584.15</u>	<u>\$7,009.78</u>
<u>\$85,000 - \$89,999</u>	<u>26.00%</u>	<u>\$316.41</u>	<u>\$632.83</u>	<u>\$7,593.92</u>
<u>\$90,000 - \$94,999</u>	<u>28.00%</u>	<u>\$340.75</u>	<u>\$681.51</u>	<u>\$8,178.07</u>
<u>\$95,000 - \$99,999</u>	<u>29.00%</u>	<u>\$352.92</u>	<u>\$705.85</u>	<u>\$8,470.15</u>
<u>\$100,000 - \$109,999</u>	<u>32.00%</u>	<u>\$389.43</u>	<u>\$778.86</u>	<u>\$9,346.37</u>
<u>\$110,000 +</u>	<u>35.00%</u>	<u>\$425.94</u>	<u>\$851.88</u>	<u>\$10,222.59</u>



# Township of Union Public Schools

## Aetna Calculator OA EPO Elect Choice

Effective July 1, 2023

<u>Plan Option:</u>	<u>EPO \$20/\$40 Elect Choice</u>			
	<u>Single (1)</u>	<u>Spouse (2)</u>	<u>Family (3)</u>	<u>Parent/Child (4)</u>
<u>Medical &amp; RX</u>	<u>\$1,237.04</u>	<u>\$2,785.97</u>	<u>\$3,095.81</u>	<u>\$1,732.70</u>
	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>
<b>Monthly COST:</b>	<b><u>\$1,237.04</u></b>	<b><u>\$2,785.97</u></b>	<b><u>\$3,095.81</u></b>	<b><u>\$1,732.70</u></b>

<u>SINGLE COVERAGE CONTRIBUTION (1)</u>				
<u>Salary</u>	<u>Year 4</u>	<u>Bi-Weekly Contribution</u>	<u>Monthly Contribution</u>	<u>Annual Contribution</u>
<u>Less than \$20,000</u>	<u>4.50%</u>	<u>\$27.83</u>	<u>\$55.67</u>	<u>\$668.00</u>
<u>\$20,000 - \$24,999</u>	<u>5.50%</u>	<u>\$34.02</u>	<u>\$68.04</u>	<u>\$816.45</u>
<u>\$25,000 - \$29,999</u>	<u>7.50%</u>	<u>\$46.39</u>	<u>\$92.78</u>	<u>\$1,113.34</u>
<u>\$30,000 - \$34,999</u>	<u>10.00%</u>	<u>\$61.85</u>	<u>\$123.70</u>	<u>\$1,484.45</u>
<u>\$35,000 - \$39,999</u>	<u>11.00%</u>	<u>\$68.04</u>	<u>\$136.07</u>	<u>\$1,632.89</u>
<u>\$40,000 - \$44,999</u>	<u>12.00%</u>	<u>\$74.22</u>	<u>\$148.44</u>	<u>\$1,781.34</u>
<u>\$45,000 - \$49,999</u>	<u>14.00%</u>	<u>\$86.59</u>	<u>\$173.19</u>	<u>\$2,078.23</u>
<u>\$50,000 - \$54,999</u>	<u>20.00%</u>	<u>\$123.70</u>	<u>\$247.41</u>	<u>\$2,968.90</u>
<u>\$55,000 - \$59,999</u>	<u>23.00%</u>	<u>\$142.26</u>	<u>\$284.52</u>	<u>\$3,414.23</u>
<u>\$60,000 - \$64,999</u>	<u>27.00%</u>	<u>\$167.00</u>	<u>\$334.00</u>	<u>\$4,008.01</u>
<u>\$65,000 - \$69,999</u>	<u>29.00%</u>	<u>\$179.37</u>	<u>\$358.74</u>	<u>\$4,304.90</u>
<u>\$70,000 - \$74,999</u>	<u>32.00%</u>	<u>\$197.93</u>	<u>\$395.85</u>	<u>\$4,750.23</u>
<u>\$75,000 - \$79,999</u>	<u>33.00%</u>	<u>\$204.11</u>	<u>\$408.22</u>	<u>\$4,898.68</u>
<u>\$80,000 - \$94,999</u>	<u>34.00%</u>	<u>\$210.30</u>	<u>\$420.59</u>	<u>\$5,047.12</u>
<u>\$95,000 +</u>	<u>35.00%</u>	<u>\$216.48</u>	<u>\$432.96</u>	<u>\$5,195.57</u>



# Township of Union Public Schools

Aetna Calculator OA EPO Elect Choice

<b>SPOUSE COVERAGE CONTRIBUTION (2)</b>				
<b>Salary</b>	<b>Year 4</b>	<b>Bi-Weekly Contribution</b>	<b>Monthly Contribution</b>	<b>Annual Contribution</b>
<u>Less than \$25,000</u>	<u>3.50%</u>	<u>\$48.75</u>	<u>\$97.51</u>	<u>\$1,170.11</u>
<u>\$25,000 - \$29,999</u>	<u>4.50%</u>	<u>\$62.68</u>	<u>\$125.37</u>	<u>\$1,504.42</u>
<u>\$30,000 - \$34,999</u>	<u>6.00%</u>	<u>\$83.58</u>	<u>\$167.16</u>	<u>\$2,005.90</u>
<u>\$35,000 - \$39,999</u>	<u>7.00%</u>	<u>\$97.51</u>	<u>\$195.02</u>	<u>\$2,340.21</u>
<u>\$40,000 - \$44,999</u>	<u>8.00%</u>	<u>\$111.44</u>	<u>\$222.88</u>	<u>\$2,674.53</u>
<u>\$45,000 - \$49,999</u>	<u>10.00%</u>	<u>\$139.30</u>	<u>\$278.60</u>	<u>\$3,343.16</u>
<u>\$50,000 - \$54,999</u>	<u>15.00%</u>	<u>\$208.95</u>	<u>\$417.90</u>	<u>\$5,014.75</u>
<u>\$55,000 - \$59,999</u>	<u>17.00%</u>	<u>\$236.81</u>	<u>\$473.61</u>	<u>\$5,683.38</u>
<u>\$60,000 - \$64,999</u>	<u>21.00%</u>	<u>\$292.53</u>	<u>\$585.05</u>	<u>\$7,020.64</u>
<u>\$65,000 - \$69,999</u>	<u>23.00%</u>	<u>\$320.39</u>	<u>\$640.77</u>	<u>\$7,689.28</u>
<u>\$70,000 - \$74,999</u>	<u>26.00%</u>	<u>\$362.18</u>	<u>\$724.35</u>	<u>\$8,692.23</u>
<u>\$75,000 - \$79,999</u>	<u>27.00%</u>	<u>\$376.11</u>	<u>\$752.21</u>	<u>\$9,026.54</u>
<u>\$80,000 - \$84,999</u>	<u>28.00%</u>	<u>\$390.04</u>	<u>\$780.07</u>	<u>\$9,360.86</u>
<u>\$85,000 - \$99,999</u>	<u>30.00%</u>	<u>\$417.90</u>	<u>\$835.79</u>	<u>\$10,029.49</u>
<u>\$100,000 +</u>	<u>35.00%</u>	<u>\$487.54</u>	<u>\$975.09</u>	<u>\$11,701.07</u>



# Township of Union Public Schools

Aetna Calculator OA EPO Elect Choice

<b>PARENT/CHILD(REN) COVERAGE CONTRIBUTION (3)</b>				
<b>Salary</b>	<b>Year 4</b>	<b>Bi-Weekly Contribution</b>	<b>Monthly Contribution</b>	<b>Annual Contribution</b>
<u>Less than \$25,000</u>	<u>3.50%</u>	<u>\$30.32</u>	<u>\$60.64</u>	<u>\$727.73</u>
<u>\$25,000 - \$29,999</u>	<u>4.50%</u>	<u>\$38.99</u>	<u>\$77.97</u>	<u>\$935.66</u>
<u>\$30,000 - \$34,999</u>	<u>6.00%</u>	<u>\$51.98</u>	<u>\$103.96</u>	<u>\$1,247.54</u>
<u>\$35,000 - \$39,999</u>	<u>7.00%</u>	<u>\$60.64</u>	<u>\$121.29</u>	<u>\$1,455.47</u>
<u>\$40,000 - \$44,999</u>	<u>8.00%</u>	<u>\$69.31</u>	<u>\$138.62</u>	<u>\$1,663.39</u>
<u>\$45,000 - \$49,999</u>	<u>10.00%</u>	<u>\$86.64</u>	<u>\$173.27</u>	<u>\$2,079.24</u>
<u>\$50,000 - \$54,999</u>	<u>15.00%</u>	<u>\$129.95</u>	<u>\$259.91</u>	<u>\$3,118.86</u>
<u>\$55,000 - \$59,999</u>	<u>17.00%</u>	<u>\$147.28</u>	<u>\$294.56</u>	<u>\$3,534.71</u>
<u>\$60,000 - \$64,999</u>	<u>21.00%</u>	<u>\$181.93</u>	<u>\$363.87</u>	<u>\$4,366.40</u>
<u>\$65,000 - \$69,999</u>	<u>23.00%</u>	<u>\$199.26</u>	<u>\$398.52</u>	<u>\$4,782.25</u>
<u>\$70,000 - \$74,999</u>	<u>26.00%</u>	<u>\$225.25</u>	<u>\$450.50</u>	<u>\$5,406.02</u>
<u>\$75,000 - \$79,999</u>	<u>27.00%</u>	<u>\$233.91</u>	<u>\$467.83</u>	<u>\$5,613.95</u>
<u>\$80,000 - \$84,999</u>	<u>28.00%</u>	<u>\$242.58</u>	<u>\$485.16</u>	<u>\$5,821.87</u>
<u>\$85,000 - \$99,999</u>	<u>30.00%</u>	<u>\$259.91</u>	<u>\$519.81</u>	<u>\$6,237.72</u>
<u>\$100,000 +</u>	<u>35.00%</u>	<u>\$303.22</u>	<u>\$606.45</u>	<u>\$7,277.34</u>





# Township of Union Public Schools

Aetna Calculator OA EPO Elect Choice

<b>FAMILY COVERAGE CONTRIBUTION (4)</b>				
<b>Salary</b>	<b>Year 4</b>	<b>Bi-Weekly Contribution</b>	<b>Monthly Contribution</b>	<b>Annual Contribution</b>
<u>Less than \$25,000</u>	<u>3.00%</u>	<u>\$46.44</u>	<u>\$92.87</u>	<u>\$1,114.49</u>
<u>\$25,000 - \$29,999</u>	<u>4.00%</u>	<u>\$61.92</u>	<u>\$123.83</u>	<u>\$1,485.99</u>
<u>\$30,000 - \$34,999</u>	<u>5.00%</u>	<u>\$77.40</u>	<u>\$154.79</u>	<u>\$1,857.49</u>
<u>\$35,000 - \$39,999</u>	<u>6.00%</u>	<u>\$92.87</u>	<u>\$185.75</u>	<u>\$2,228.98</u>
<u>\$40,000 - \$44,999</u>	<u>7.00%</u>	<u>\$108.35</u>	<u>\$216.71</u>	<u>\$2,600.48</u>
<u>\$45,000 - \$49,999</u>	<u>9.00%</u>	<u>\$139.31</u>	<u>\$278.62</u>	<u>\$3,343.47</u>
<u>\$50,000 - \$54,999</u>	<u>12.00%</u>	<u>\$185.75</u>	<u>\$371.50</u>	<u>\$4,457.97</u>
<u>\$55,000 - \$59,999</u>	<u>14.00%</u>	<u>\$216.71</u>	<u>\$433.41</u>	<u>\$5,200.96</u>
<u>\$60,000 - \$64,999</u>	<u>17.00%</u>	<u>\$263.14</u>	<u>\$526.29</u>	<u>\$6,315.45</u>
<u>\$65,000 - \$69,999</u>	<u>19.00%</u>	<u>\$294.10</u>	<u>\$588.20</u>	<u>\$7,058.45</u>
<u>\$70,000 - \$74,999</u>	<u>22.00%</u>	<u>\$340.54</u>	<u>\$681.08</u>	<u>\$8,172.94</u>
<u>\$75,000 - \$79,999</u>	<u>23.00%</u>	<u>\$356.02</u>	<u>\$712.04</u>	<u>\$8,544.44</u>
<u>\$80,000 - \$84,999</u>	<u>24.00%</u>	<u>\$371.50</u>	<u>\$742.99</u>	<u>\$8,915.93</u>
<u>\$85,000 - \$89,999</u>	<u>26.00%</u>	<u>\$402.46</u>	<u>\$804.91</u>	<u>\$9,658.93</u>
<u>\$90,000 - \$94,999</u>	<u>28.00%</u>	<u>\$433.41</u>	<u>\$866.83</u>	<u>\$10,401.92</u>
<u>\$95,000 - \$99,999</u>	<u>29.00%</u>	<u>\$448.89</u>	<u>\$897.78</u>	<u>\$10,773.42</u>
<u>\$100,000 - \$109,999</u>	<u>32.00%</u>	<u>\$495.33</u>	<u>\$990.66</u>	<u>\$11,887.91</u>
<u>\$110,000 +</u>	<u>35.00%</u>	<u>\$541.77</u>	<u>\$1,083.53</u>	<u>\$13,002.40</u>



# Township of Union Public Schools

Aetna Calculator OA MC \$15

Effective July 1, 2023

Plan Option:	OA MC \$15 w RX			
	Single (1)	Spouse (2)	Family (3)	Parent/Child (4)
<u>Medical &amp; RX</u>	<u>\$1,402.21</u>	<u>\$3,157.67</u>	<u>\$3,508.76</u>	<u>\$1,963.91</u>
	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>
<b>Monthly COST:</b>	<u>\$1,402.21</u>	<u>\$3,157.67</u>	<u>\$3,508.76</u>	<u>\$1,963.91</u>

SINGLE COVERAGE CONTRIBUTION (1)				
Salary	Year 4	Bi-Weekly Contribution	Monthly Contribution	Annual Contribution
<u>Less than \$20,000</u>	<u>4.50%</u>	<u>\$31.55</u>	<u>\$63.10</u>	<u>\$757.19</u>
<u>\$20,000 - \$24,999</u>	<u>5.50%</u>	<u>\$38.56</u>	<u>\$77.12</u>	<u>\$925.46</u>
<u>\$25,000 - \$29,999</u>	<u>7.50%</u>	<u>\$52.58</u>	<u>\$105.17</u>	<u>\$1,261.99</u>
<u>\$30,000 - \$34,999</u>	<u>10.00%</u>	<u>\$70.11</u>	<u>\$140.22</u>	<u>\$1,682.65</u>
<u>\$35,000 - \$39,999</u>	<u>11.00%</u>	<u>\$77.12</u>	<u>\$154.24</u>	<u>\$1,850.92</u>
<u>\$40,000 - \$44,999</u>	<u>12.00%</u>	<u>\$84.13</u>	<u>\$168.27</u>	<u>\$2,019.18</u>
<u>\$45,000 - \$49,999</u>	<u>14.00%</u>	<u>\$98.15</u>	<u>\$196.31</u>	<u>\$2,355.71</u>
<u>\$50,000 - \$54,999</u>	<u>20.00%</u>	<u>\$140.22</u>	<u>\$280.44</u>	<u>\$3,365.30</u>
<u>\$55,000 - \$59,999</u>	<u>23.00%</u>	<u>\$161.25</u>	<u>\$322.51</u>	<u>\$3,870.10</u>
<u>\$60,000 - \$64,999</u>	<u>27.00%</u>	<u>\$189.30</u>	<u>\$378.60</u>	<u>\$4,543.16</u>
<u>\$65,000 - \$69,999</u>	<u>29.00%</u>	<u>\$203.32</u>	<u>\$406.64</u>	<u>\$4,879.69</u>
<u>\$70,000 - \$74,999</u>	<u>32.00%</u>	<u>\$224.35</u>	<u>\$448.71</u>	<u>\$5,384.49</u>
<u>\$75,000 - \$79,999</u>	<u>33.00%</u>	<u>\$231.36</u>	<u>\$462.73</u>	<u>\$5,552.75</u>
<u>\$80,000 - \$94,999</u>	<u>34.00%</u>	<u>\$238.38</u>	<u>\$476.75</u>	<u>\$5,721.02</u>
<u>\$95,000 +</u>	<u>35.00%</u>	<u>\$245.39</u>	<u>\$490.77</u>	<u>\$5,889.28</u>



# Township of Union Public Schools

Aetna Calculator OA MC \$15

<b>SPOUSE COVERAGE CONTRIBUTION (2)</b>				
<b>Salary</b>	<b>Year 4</b>	<b>Bi-Weekly Contribution</b>	<b>Monthly Contribution</b>	<b>Annual Contribution</b>
<u>Less than \$25,000</u>	<u>3.50%</u>	<u>\$55.26</u>	<u>\$110.52</u>	<u>\$1,326.22</u>
<u>\$25,000 - \$29,999</u>	<u>4.50%</u>	<u>\$71.05</u>	<u>\$142.10</u>	<u>\$1,705.14</u>
<u>\$30,000 - \$34,999</u>	<u>6.00%</u>	<u>\$94.73</u>	<u>\$189.46</u>	<u>\$2,273.52</u>
<u>\$35,000 - \$39,999</u>	<u>7.00%</u>	<u>\$110.52</u>	<u>\$221.04</u>	<u>\$2,652.44</u>
<u>\$40,000 - \$44,999</u>	<u>8.00%</u>	<u>\$126.31</u>	<u>\$252.61</u>	<u>\$3,031.36</u>
<u>\$45,000 - \$49,999</u>	<u>10.00%</u>	<u>\$157.88</u>	<u>\$315.77</u>	<u>\$3,789.20</u>
<u>\$50,000 - \$54,999</u>	<u>15.00%</u>	<u>\$236.83</u>	<u>\$473.65</u>	<u>\$5,683.81</u>
<u>\$55,000 - \$59,999</u>	<u>17.00%</u>	<u>\$268.40</u>	<u>\$536.80</u>	<u>\$6,441.65</u>
<u>\$60,000 - \$64,999</u>	<u>21.00%</u>	<u>\$331.56</u>	<u>\$663.11</u>	<u>\$7,957.33</u>
<u>\$65,000 - \$69,999</u>	<u>23.00%</u>	<u>\$363.13</u>	<u>\$726.26</u>	<u>\$8,715.17</u>
<u>\$70,000 - \$74,999</u>	<u>26.00%</u>	<u>\$410.50</u>	<u>\$820.99</u>	<u>\$9,851.93</u>
<u>\$75,000 - \$79,999</u>	<u>27.00%</u>	<u>\$426.29</u>	<u>\$852.57</u>	<u>\$10,230.85</u>
<u>\$80,000 - \$84,999</u>	<u>28.00%</u>	<u>\$442.07</u>	<u>\$884.15</u>	<u>\$10,609.77</u>
<u>\$85,000 - \$99,999</u>	<u>30.00%</u>	<u>\$473.65</u>	<u>\$947.30</u>	<u>\$11,367.61</u>
<u>\$100,000 +</u>	<u>35.00%</u>	<u>\$552.59</u>	<u>\$1,105.18</u>	<u>\$13,262.21</u>



# Township of Union Public Schools

Aetna Calculator OA MC \$15

<b>PARENT/CHILD(REN) COVERAGE CONTRIBUTION (3)</b>				
<b>Salary</b>	<b>Year 4</b>	<b>Bi-Weekly Contribution</b>	<b>Monthly Contribution</b>	<b>Annual Contribution</b>
<u>Less than \$25,000</u>	<u>3.50%</u>	<u>\$34.37</u>	<u>\$68.74</u>	<u>\$824.84</u>
<u>\$25,000 - \$29,999</u>	<u>4.50%</u>	<u>\$44.19</u>	<u>\$88.38</u>	<u>\$1,060.51</u>
<u>\$30,000 - \$34,999</u>	<u>6.00%</u>	<u>\$58.92</u>	<u>\$117.83</u>	<u>\$1,414.02</u>
<u>\$35,000 - \$39,999</u>	<u>7.00%</u>	<u>\$68.74</u>	<u>\$137.47</u>	<u>\$1,649.68</u>
<u>\$40,000 - \$44,999</u>	<u>8.00%</u>	<u>\$78.56</u>	<u>\$157.11</u>	<u>\$1,885.35</u>
<u>\$45,000 - \$49,999</u>	<u>10.00%</u>	<u>\$98.20</u>	<u>\$196.39</u>	<u>\$2,356.69</u>
<u>\$50,000 - \$54,999</u>	<u>15.00%</u>	<u>\$147.29</u>	<u>\$294.59</u>	<u>\$3,535.04</u>
<u>\$55,000 - \$59,999</u>	<u>17.00%</u>	<u>\$166.93</u>	<u>\$333.86</u>	<u>\$4,006.38</u>
<u>\$60,000 - \$64,999</u>	<u>21.00%</u>	<u>\$206.21</u>	<u>\$412.42</u>	<u>\$4,949.05</u>
<u>\$65,000 - \$69,999</u>	<u>23.00%</u>	<u>\$225.85</u>	<u>\$451.70</u>	<u>\$5,420.39</u>
<u>\$70,000 - \$74,999</u>	<u>26.00%</u>	<u>\$255.31</u>	<u>\$510.62</u>	<u>\$6,127.40</u>
<u>\$75,000 - \$79,999</u>	<u>27.00%</u>	<u>\$265.13</u>	<u>\$530.26</u>	<u>\$6,363.07</u>
<u>\$80,000 - \$84,999</u>	<u>28.00%</u>	<u>\$274.95</u>	<u>\$549.89</u>	<u>\$6,598.74</u>
<u>\$85,000 - \$99,999</u>	<u>30.00%</u>	<u>\$294.59</u>	<u>\$589.17</u>	<u>\$7,070.08</u>
<u>\$100,000 +</u>	<u>35.00%</u>	<u>\$343.68</u>	<u>\$687.37</u>	<u>\$8,248.42</u>



# Township of Union Public Schools

Aetna Calculator OA MC \$15

<b>FAMILY COVERAGE CONTRIBUTION (4)</b>				
<u>Salary</u>	<u>Year 4</u>	<u>Bi-Weekly Contribution</u>	<u>Monthly Contribution</u>	<u>Annual Contribution</u>
<u>Less than \$25,000</u>	<u>3.00%</u>	<u>\$52.63</u>	<u>\$105.26</u>	<u>\$1,263.15</u>
<u>\$25,000 - \$29,999</u>	<u>4.00%</u>	<u>\$70.18</u>	<u>\$140.35</u>	<u>\$1,684.20</u>
<u>\$30,000 - \$34,999</u>	<u>5.00%</u>	<u>\$87.72</u>	<u>\$175.44</u>	<u>\$2,105.26</u>
<u>\$35,000 - \$39,999</u>	<u>6.00%</u>	<u>\$105.26</u>	<u>\$210.53</u>	<u>\$2,526.31</u>
<u>\$40,000 - \$44,999</u>	<u>7.00%</u>	<u>\$122.81</u>	<u>\$245.61</u>	<u>\$2,947.36</u>
<u>\$45,000 - \$49,999</u>	<u>9.00%</u>	<u>\$157.89</u>	<u>\$315.79</u>	<u>\$3,789.46</u>
<u>\$50,000 - \$54,999</u>	<u>12.00%</u>	<u>\$210.53</u>	<u>\$421.05</u>	<u>\$5,052.61</u>
<u>\$55,000 - \$59,999</u>	<u>14.00%</u>	<u>\$245.61</u>	<u>\$491.23</u>	<u>\$5,894.72</u>
<u>\$60,000 - \$64,999</u>	<u>17.00%</u>	<u>\$298.24</u>	<u>\$596.49</u>	<u>\$7,157.87</u>
<u>\$65,000 - \$69,999</u>	<u>19.00%</u>	<u>\$333.33</u>	<u>\$666.66</u>	<u>\$7,999.97</u>
<u>\$70,000 - \$74,999</u>	<u>22.00%</u>	<u>\$385.96</u>	<u>\$771.93</u>	<u>\$9,263.13</u>
<u>\$75,000 - \$79,999</u>	<u>23.00%</u>	<u>\$403.51</u>	<u>\$807.01</u>	<u>\$9,684.18</u>
<u>\$80,000 - \$84,999</u>	<u>24.00%</u>	<u>\$421.05</u>	<u>\$842.10</u>	<u>\$10,105.23</u>
<u>\$85,000 - \$89,999</u>	<u>26.00%</u>	<u>\$456.14</u>	<u>\$912.28</u>	<u>\$10,947.33</u>
<u>\$90,000 - \$94,999</u>	<u>28.00%</u>	<u>\$491.23</u>	<u>\$982.45</u>	<u>\$11,789.43</u>
<u>\$95,000 - \$99,999</u>	<u>29.00%</u>	<u>\$508.77</u>	<u>\$1,017.54</u>	<u>\$12,210.48</u>
<u>\$100,000 - \$109,999</u>	<u>32.00%</u>	<u>\$561.40</u>	<u>\$1,122.80</u>	<u>\$13,473.64</u>
<u>\$110,000 +</u>	<u>35.00%</u>	<u>\$614.03</u>	<u>\$1,228.07</u>	<u>\$14,736.79</u>



# Township of Union Public Schools

Aetna Calculator OA MC \$20

**Effective July 1, 2023**

<u>Plan Option:</u>	<u>OA MC \$20 Copay w RX</u>			
	<u>Single (1)</u>	<u>Spouse (2)</u>	<u>Family (3)</u>	<u>Parent/Child (4)</u>
<u>Medical &amp; RX</u>	<u>\$1,459.65</u>	<u>\$3,286.84</u>	<u>\$3,652.32</u>	<u>\$2,044.37</u>
	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>	<u>\$0.00</u>
<b>Monthly COST:</b>	<u>\$1,459.65</u>	<u>\$3,286.84</u>	<u>\$3,652.32</u>	<u>\$2,044.37</u>

<b>SINGLE COVERAGE CONTRIBUTION (1)</b>				
<u>Salary</u>	<u>Year 4</u>	<u>Bi-Weekly Contribution</u>	<u>Monthly Contribution</u>	<u>Annual Contribution</u>
<u>Less than \$20,000</u>	<u>4.50%</u>	<u>\$32.84</u>	<u>\$65.68</u>	<u>\$788.21</u>
<u>\$20,000 - \$24,999</u>	<u>5.50%</u>	<u>\$40.14</u>	<u>\$80.28</u>	<u>\$963.37</u>
<u>\$25,000 - \$29,999</u>	<u>7.50%</u>	<u>\$54.74</u>	<u>\$109.47</u>	<u>\$1,313.69</u>
<u>\$30,000 - \$34,999</u>	<u>10.00%</u>	<u>\$72.98</u>	<u>\$145.97</u>	<u>\$1,751.58</u>
<u>\$35,000 - \$39,999</u>	<u>11.00%</u>	<u>\$80.28</u>	<u>\$160.56</u>	<u>\$1,926.74</u>
<u>\$40,000 - \$44,999</u>	<u>12.00%</u>	<u>\$87.58</u>	<u>\$175.16</u>	<u>\$2,101.90</u>
<u>\$45,000 - \$49,999</u>	<u>14.00%</u>	<u>\$102.18</u>	<u>\$204.35</u>	<u>\$2,452.21</u>
<u>\$50,000 - \$54,999</u>	<u>20.00%</u>	<u>\$145.97</u>	<u>\$291.93</u>	<u>\$3,503.16</u>
<u>\$55,000 - \$59,999</u>	<u>23.00%</u>	<u>\$167.86</u>	<u>\$335.72</u>	<u>\$4,028.63</u>
<u>\$60,000 - \$64,999</u>	<u>27.00%</u>	<u>\$197.05</u>	<u>\$394.11</u>	<u>\$4,729.27</u>
<u>\$65,000 - \$69,999</u>	<u>29.00%</u>	<u>\$211.65</u>	<u>\$423.30</u>	<u>\$5,079.58</u>
<u>\$70,000 - \$74,999</u>	<u>32.00%</u>	<u>\$233.54</u>	<u>\$467.09</u>	<u>\$5,605.06</u>
<u>\$75,000 - \$79,999</u>	<u>33.00%</u>	<u>\$240.84</u>	<u>\$481.68</u>	<u>\$5,780.21</u>
<u>\$80,000 - \$94,999</u>	<u>34.00%</u>	<u>\$248.14</u>	<u>\$496.28</u>	<u>\$5,955.37</u>
<u>\$95,000 +</u>	<u>35.00%</u>	<u>\$255.44</u>	<u>\$510.88</u>	<u>\$6,130.53</u>



# Township of Union Public Schools

Aetna Calculator OA MC \$20

<b><u>SPOUSE COVERAGE CONTRIBUTION (2)</u></b>				
<b><u>Salary</u></b>	<b><u>Year 4</u></b>	<b><u>Bi-Weekly Contribution</u></b>	<b><u>Monthly Contribution</u></b>	<b><u>Annual Contribution</u></b>
<b><u>Less than \$25,000</u></b>	<b><u>3.50%</u></b>	<b><u>\$57.52</u></b>	<b><u>\$115.04</u></b>	<b><u>\$1,380.47</u></b>
<b><u>\$25,000 - \$29,999</u></b>	<b><u>4.50%</u></b>	<b><u>\$73.95</u></b>	<b><u>\$147.91</u></b>	<b><u>\$1,774.89</u></b>
<b><u>\$30,000 - \$34,999</u></b>	<b><u>6.00%</u></b>	<b><u>\$98.61</u></b>	<b><u>\$197.21</u></b>	<b><u>\$2,366.52</u></b>
<b><u>\$35,000 - \$39,999</u></b>	<b><u>7.00%</u></b>	<b><u>\$115.04</u></b>	<b><u>\$230.08</u></b>	<b><u>\$2,760.95</u></b>
<b><u>\$40,000 - \$44,999</u></b>	<b><u>8.00%</u></b>	<b><u>\$131.47</u></b>	<b><u>\$262.95</u></b>	<b><u>\$3,155.37</u></b>
<b><u>\$45,000 - \$49,999</u></b>	<b><u>10.00%</u></b>	<b><u>\$164.34</u></b>	<b><u>\$328.68</u></b>	<b><u>\$3,944.21</u></b>
<b><u>\$50,000 - \$54,999</u></b>	<b><u>15.00%</u></b>	<b><u>\$246.51</u></b>	<b><u>\$493.03</u></b>	<b><u>\$5,916.31</u></b>
<b><u>\$55,000 - \$59,999</u></b>	<b><u>17.00%</u></b>	<b><u>\$279.38</u></b>	<b><u>\$558.76</u></b>	<b><u>\$6,705.15</u></b>
<b><u>\$60,000 - \$64,999</u></b>	<b><u>21.00%</u></b>	<b><u>\$345.12</u></b>	<b><u>\$690.24</u></b>	<b><u>\$8,282.84</u></b>
<b><u>\$65,000 - \$69,999</u></b>	<b><u>23.00%</u></b>	<b><u>\$377.99</u></b>	<b><u>\$755.97</u></b>	<b><u>\$9,071.68</u></b>
<b><u>\$70,000 - \$74,999</u></b>	<b><u>26.00%</u></b>	<b><u>\$427.29</u></b>	<b><u>\$854.58</u></b>	<b><u>\$10,254.94</u></b>
<b><u>\$75,000 - \$79,999</u></b>	<b><u>27.00%</u></b>	<b><u>\$443.72</u></b>	<b><u>\$887.45</u></b>	<b><u>\$10,649.36</u></b>
<b><u>\$80,000 - \$84,999</u></b>	<b><u>28.00%</u></b>	<b><u>\$460.16</u></b>	<b><u>\$920.32</u></b>	<b><u>\$11,043.78</u></b>
<b><u>\$85,000 - \$99,999</u></b>	<b><u>30.00%</u></b>	<b><u>\$493.03</u></b>	<b><u>\$986.05</u></b>	<b><u>\$11,832.62</u></b>
<b><u>\$100,000 +</u></b>	<b><u>35.00%</u></b>	<b><u>\$575.20</u></b>	<b><u>\$1,150.39</u></b>	<b><u>\$13,804.73</u></b>



# Township of Union Public Schools

Aetna Calculator OA MC \$20

<b>PARENT/CHILD(REN) COVERAGE CONTRIBUTION (3)</b>				
<b>Salary</b>	<b>Year 4</b>	<b>Bi-Weekly Contribution</b>	<b>Monthly Contribution</b>	<b>Annual Contribution</b>
<u>Less than \$25,000</u>	<u>3.50%</u>	<u>\$35.78</u>	<u>\$71.55</u>	<u>\$858.64</u>
<u>\$25,000 - \$29,999</u>	<u>4.50%</u>	<u>\$46.00</u>	<u>\$92.00</u>	<u>\$1,103.96</u>
<u>\$30,000 - \$34,999</u>	<u>6.00%</u>	<u>\$61.33</u>	<u>\$122.66</u>	<u>\$1,471.95</u>
<u>\$35,000 - \$39,999</u>	<u>7.00%</u>	<u>\$71.55</u>	<u>\$143.11</u>	<u>\$1,717.27</u>
<u>\$40,000 - \$44,999</u>	<u>8.00%</u>	<u>\$81.77</u>	<u>\$163.55</u>	<u>\$1,962.60</u>
<u>\$45,000 - \$49,999</u>	<u>10.00%</u>	<u>\$102.22</u>	<u>\$204.44</u>	<u>\$2,453.24</u>
<u>\$50,000 - \$54,999</u>	<u>15.00%</u>	<u>\$153.33</u>	<u>\$306.66</u>	<u>\$3,679.87</u>
<u>\$55,000 - \$59,999</u>	<u>17.00%</u>	<u>\$173.77</u>	<u>\$347.54</u>	<u>\$4,170.51</u>
<u>\$60,000 - \$64,999</u>	<u>21.00%</u>	<u>\$214.66</u>	<u>\$429.32</u>	<u>\$5,151.81</u>
<u>\$65,000 - \$69,999</u>	<u>23.00%</u>	<u>\$235.10</u>	<u>\$470.21</u>	<u>\$5,642.46</u>
<u>\$70,000 - \$74,999</u>	<u>26.00%</u>	<u>\$265.77</u>	<u>\$531.54</u>	<u>\$6,378.43</u>
<u>\$75,000 - \$79,999</u>	<u>27.00%</u>	<u>\$275.99</u>	<u>\$551.98</u>	<u>\$6,623.76</u>
<u>\$80,000 - \$84,999</u>	<u>28.00%</u>	<u>\$286.21</u>	<u>\$572.42</u>	<u>\$6,869.08</u>
<u>\$85,000 - \$99,999</u>	<u>30.00%</u>	<u>\$306.66</u>	<u>\$613.31</u>	<u>\$7,359.73</u>
<u>\$100,000 +</u>	<u>35.00%</u>	<u>\$357.76</u>	<u>\$715.53</u>	<u>\$8,586.35</u>





# Township of Union Public Schools

Aetna Calculator OA MC \$20

<b>FAMILY COVERAGE CONTRIBUTION (4)</b>				
<b>Salary</b>	<b>Year 4</b>	<b>Bi-Weekly Contribution</b>	<b>Monthly Contribution</b>	<b>Annual Contribution</b>
<u>Less than \$25,000</u>	<u>3.00%</u>	<u>\$54.78</u>	<u>\$109.57</u>	<u>\$1,314.84</u>
<u>\$25,000 - \$29,999</u>	<u>4.00%</u>	<u>\$73.05</u>	<u>\$146.09</u>	<u>\$1,753.11</u>
<u>\$30,000 - \$34,999</u>	<u>5.00%</u>	<u>\$91.31</u>	<u>\$182.62</u>	<u>\$2,191.39</u>
<u>\$35,000 - \$39,999</u>	<u>6.00%</u>	<u>\$109.57</u>	<u>\$219.14</u>	<u>\$2,629.67</u>
<u>\$40,000 - \$44,999</u>	<u>7.00%</u>	<u>\$127.83</u>	<u>\$255.66</u>	<u>\$3,067.95</u>
<u>\$45,000 - \$49,999</u>	<u>9.00%</u>	<u>\$164.35</u>	<u>\$328.71</u>	<u>\$3,944.51</u>
<u>\$50,000 - \$54,999</u>	<u>12.00%</u>	<u>\$219.14</u>	<u>\$438.28</u>	<u>\$5,259.34</u>
<u>\$55,000 - \$59,999</u>	<u>14.00%</u>	<u>\$255.66</u>	<u>\$511.32</u>	<u>\$6,135.90</u>
<u>\$60,000 - \$64,999</u>	<u>17.00%</u>	<u>\$310.45</u>	<u>\$620.89</u>	<u>\$7,450.73</u>
<u>\$65,000 - \$69,999</u>	<u>19.00%</u>	<u>\$346.97</u>	<u>\$693.94</u>	<u>\$8,327.29</u>
<u>\$70,000 - \$74,999</u>	<u>22.00%</u>	<u>\$401.76</u>	<u>\$803.51</u>	<u>\$9,642.12</u>
<u>\$75,000 - \$79,999</u>	<u>23.00%</u>	<u>\$420.02</u>	<u>\$840.03</u>	<u>\$10,080.40</u>
<u>\$80,000 - \$84,999</u>	<u>24.00%</u>	<u>\$438.28</u>	<u>\$876.56</u>	<u>\$10,518.68</u>
<u>\$85,000 - \$89,999</u>	<u>26.00%</u>	<u>\$474.80</u>	<u>\$949.60</u>	<u>\$11,395.24</u>
<u>\$90,000 - \$94,999</u>	<u>28.00%</u>	<u>\$511.32</u>	<u>\$1,022.65</u>	<u>\$12,271.80</u>
<u>\$95,000 - \$99,999</u>	<u>29.00%</u>	<u>\$529.59</u>	<u>\$1,059.17</u>	<u>\$12,710.07</u>
<u>\$100,000 - \$109,999</u>	<u>32.00%</u>	<u>\$584.37</u>	<u>\$1,168.74</u>	<u>\$14,024.91</u>
<u>\$110,000 +</u>	<u>35.00%</u>	<u>\$639.16</u>	<u>\$1,278.31</u>	<u>\$15,339.74</u>



# Township of Union Public Schools

## Aetna Calculator Dental DMO

<u>Plan Option:</u>	<u>Dental DMO</u>	
	<u>Single (1)</u>	<u>Family (2)</u>
<u>Medical &amp; RX</u>	<u>\$15.36</u>	<u>\$44.20</u>
	<u>\$0.00</u>	<u>\$0.00</u>
<b><u>Monthly COST:</u></b>	<b><u>\$15.36</u></b>	<b><u>\$44.20</u></b>

<b><u>SINGLE COVERAGE CONTRIBUTION (1)</u></b>				
<u>Salary</u>	<u>Year 4</u>	<u>Bi-Weekly Contribution</u>	<u>Monthly Contribution</u>	<u>Annual Contribution</u>
<u>Less than \$20,000</u>	<u>4.50%</u>	<u>\$0.35</u>	<u>\$0.69</u>	<u>\$8.29</u>
<u>\$20,000 - \$24,999</u>	<u>5.50%</u>	<u>\$0.42</u>	<u>\$0.84</u>	<u>\$10.14</u>
<u>\$25,000 - \$29,999</u>	<u>7.50%</u>	<u>\$0.58</u>	<u>\$1.15</u>	<u>\$13.82</u>
<u>\$30,000 - \$34,999</u>	<u>10.00%</u>	<u>\$0.77</u>	<u>\$1.54</u>	<u>\$18.43</u>
<u>\$35,000 - \$39,999</u>	<u>11.00%</u>	<u>\$0.84</u>	<u>\$1.69</u>	<u>\$20.28</u>
<u>\$40,000 - \$44,999</u>	<u>12.00%</u>	<u>\$0.92</u>	<u>\$1.84</u>	<u>\$22.12</u>
<u>\$45,000 - \$49,999</u>	<u>14.00%</u>	<u>\$1.08</u>	<u>\$2.15</u>	<u>\$25.80</u>
<u>\$50,000 - \$54,999</u>	<u>20.00%</u>	<u>\$1.54</u>	<u>\$3.07</u>	<u>\$36.86</u>
<u>\$55,000 - \$59,999</u>	<u>23.00%</u>	<u>\$1.77</u>	<u>\$3.53</u>	<u>\$42.39</u>
<u>\$60,000 - \$64,999</u>	<u>27.00%</u>	<u>\$2.07</u>	<u>\$4.15</u>	<u>\$49.77</u>
<u>\$65,000 - \$69,999</u>	<u>29.00%</u>	<u>\$2.23</u>	<u>\$4.45</u>	<u>\$53.45</u>
<u>\$70,000 - \$74,999</u>	<u>32.00%</u>	<u>\$2.46</u>	<u>\$4.92</u>	<u>\$58.98</u>
<u>\$75,000 - \$79,999</u>	<u>33.00%</u>	<u>\$2.53</u>	<u>\$5.07</u>	<u>\$60.83</u>
<u>\$80,000 - \$94,999</u>	<u>34.00%</u>	<u>\$2.61</u>	<u>\$5.22</u>	<u>\$62.67</u>
<u>\$95,000 +</u>	<u>35.00%</u>	<u>\$2.69</u>	<u>\$5.38</u>	<u>\$64.51</u>



# Township of Union Public Schools

## Aetna Calculator Dental DMO

<b><u>FAMILY COVERAGE CONTRIBUTION (2)</u></b>				
<b><u>Salary</u></b>	<b><u>Year 4</u></b>	<b><u>Bi-Weekly Contribution</u></b>	<b><u>Monthly Contribution</u></b>	<b><u>Annual Contribution</u></b>
<b><u>Less than \$25,000</u></b>	<b><u>3.50%</u></b>	<b><u>\$0.77</u></b>	<b><u>\$1.55</u></b>	<b><u>\$18.56</u></b>
<b><u>\$25,000 - \$29,999</u></b>	<b><u>4.50%</u></b>	<b><u>\$0.99</u></b>	<b><u>\$1.99</u></b>	<b><u>\$23.87</u></b>
<b><u>\$30,000 - \$34,999</u></b>	<b><u>6.00%</u></b>	<b><u>\$1.33</u></b>	<b><u>\$2.65</u></b>	<b><u>\$31.82</u></b>
<b><u>\$35,000 - \$39,999</u></b>	<b><u>7.00%</u></b>	<b><u>\$1.55</u></b>	<b><u>\$3.09</u></b>	<b><u>\$37.13</u></b>
<b><u>\$40,000 - \$44,999</u></b>	<b><u>8.00%</u></b>	<b><u>\$1.77</u></b>	<b><u>\$3.54</u></b>	<b><u>\$42.43</u></b>
<b><u>\$45,000 - \$49,999</u></b>	<b><u>10.00%</u></b>	<b><u>\$2.21</u></b>	<b><u>\$4.42</u></b>	<b><u>\$53.04</u></b>
<b><u>\$50,000 - \$54,999</u></b>	<b><u>15.00%</u></b>	<b><u>\$3.32</u></b>	<b><u>\$6.63</u></b>	<b><u>\$79.56</u></b>
<b><u>\$55,000 - \$59,999</u></b>	<b><u>17.00%</u></b>	<b><u>\$0.43</u></b>	<b><u>\$0.85</u></b>	<b><u>\$10.20</u></b>
<b><u>\$60,000 - \$64,999</u></b>	<b><u>21.00%</u></b>	<b><u>\$4.64</u></b>	<b><u>\$9.28</u></b>	<b><u>\$111.38</u></b>
<b><u>\$65,000 - \$69,999</u></b>	<b><u>23.00%</u></b>	<b><u>\$5.08</u></b>	<b><u>\$10.17</u></b>	<b><u>\$121.99</u></b>
<b><u>\$70,000 - \$74,999</u></b>	<b><u>26.00%</u></b>	<b><u>\$5.75</u></b>	<b><u>\$11.49</u></b>	<b><u>\$137.90</u></b>
<b><u>\$75,000 - \$79,999</u></b>	<b><u>27.00%</u></b>	<b><u>\$5.97</u></b>	<b><u>\$11.93</u></b>	<b><u>\$143.21</u></b>
<b><u>\$80,000 - \$84,999</u></b>	<b><u>28.00%</u></b>	<b><u>\$6.19</u></b>	<b><u>\$12.38</u></b>	<b><u>\$148.51</u></b>
<b><u>\$85,000 - \$99,999</u></b>	<b><u>30.00%</u></b>	<b><u>\$6.63</u></b>	<b><u>\$13.26</u></b>	<b><u>\$159.12</u></b>
<b><u>\$100,000 +</u></b>	<b><u>35.00%</u></b>	<b><u>\$7.74</u></b>	<b><u>\$15.47</u></b>	<b><u>\$185.64</u></b>



# Township of Union Public Schools

## Aetna Calculator Dental DMO

<u>Plan Option:</u>	<u>Dental PPO</u>	
	<u>Single (1)</u>	<u>Family (2)</u>
<u>Medical &amp; RX</u>	<u>\$39.48</u>	<u>\$105.18</u>
	<u>\$0.00</u>	<u>\$0.00</u>
<b><u>Monthly COST:</u></b>	<b><u>\$39.48</u></b>	<b><u>\$105.18</u></b>

<b>SINGLE COVERAGE CONTRIBUTION (1)</b>				
<u>Salary</u>	<u>Year 4</u>	<u>Bi-Weekly Contribution</u>	<u>Monthly Contribution</u>	<u>Annual Contribution</u>
<u>Less than \$20,000</u>	<u>4.50%</u>	<u>\$0.89</u>	<u>\$1.78</u>	<u>\$21.32</u>
<u>\$20,000 - \$24,999</u>	<u>5.50%</u>	<u>\$1.09</u>	<u>\$2.17</u>	<u>\$26.06</u>
<u>\$25,000 - \$29,999</u>	<u>7.50%</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.53</u>
<u>\$30,000 - \$34,999</u>	<u>10.00%</u>	<u>\$1.97</u>	<u>\$3.95</u>	<u>\$47.38</u>
<u>\$35,000 - \$39,999</u>	<u>11.00%</u>	<u>\$2.17</u>	<u>\$4.34</u>	<u>\$52.11</u>
<u>\$40,000 - \$44,999</u>	<u>12.00%</u>	<u>\$2.37</u>	<u>\$4.74</u>	<u>\$56.85</u>
<u>\$45,000 - \$49,999</u>	<u>14.00%</u>	<u>\$2.76</u>	<u>\$5.53</u>	<u>\$66.33</u>
<u>\$50,000 - \$54,999</u>	<u>20.00%</u>	<u>\$3.95</u>	<u>\$7.90</u>	<u>\$94.75</u>
<u>\$55,000 - \$59,999</u>	<u>23.00%</u>	<u>\$4.54</u>	<u>\$9.08</u>	<u>\$108.96</u>
<u>\$60,000 - \$64,999</u>	<u>27.00%</u>	<u>\$5.33</u>	<u>\$10.66</u>	<u>\$127.92</u>
<u>\$65,000 - \$69,999</u>	<u>29.00%</u>	<u>\$5.72</u>	<u>\$11.45</u>	<u>\$137.39</u>
<u>\$70,000 - \$74,999</u>	<u>32.00%</u>	<u>\$6.32</u>	<u>\$12.63</u>	<u>\$151.60</u>
<u>\$75,000 - \$79,999</u>	<u>33.00%</u>	<u>\$6.51</u>	<u>\$13.03</u>	<u>\$156.34</u>
<u>\$80,000 - \$94,999</u>	<u>34.00%</u>	<u>\$6.71</u>	<u>\$13.42</u>	<u>\$161.08</u>
<u>\$95,000 +</u>	<u>35.00%</u>	<u>\$6.91</u>	<u>\$13.82</u>	<u>\$165.82</u>



# Township of Union Public Schools

## Aetna Calculator Dental DMO

<b>FAMILY COVERAGE CONTRIBUTION (2)</b>				
<b>Salary</b>	<b>Year 4</b>	<b>Bi-Weekly Contribution</b>	<b>Monthly Contribution</b>	<b>Annual Contribution</b>
<u>Less than \$25,000</u>	<u>3.50%</u>	<u>\$1.84</u>	<u>\$3.68</u>	<u>\$44.18</u>
<u>\$25,000 - \$29,999</u>	<u>4.50%</u>	<u>\$2.37</u>	<u>\$4.73</u>	<u>\$56.80</u>
<u>\$30,000 - \$34,999</u>	<u>6.00%</u>	<u>\$3.16</u>	<u>\$6.31</u>	<u>\$75.73</u>
<u>\$35,000 - \$39,999</u>	<u>7.00%</u>	<u>\$3.68</u>	<u>\$7.36</u>	<u>\$88.35</u>
<u>\$40,000 - \$44,999</u>	<u>8.00%</u>	<u>\$4.21</u>	<u>\$8.41</u>	<u>\$100.97</u>
<u>\$45,000 - \$49,999</u>	<u>10.00%</u>	<u>\$5.26</u>	<u>\$10.52</u>	<u>\$126.22</u>
<u>\$50,000 - \$54,999</u>	<u>15.00%</u>	<u>\$7.89</u>	<u>\$15.78</u>	<u>\$189.32</u>
<u>\$55,000 - \$59,999</u>	<u>17.00%</u>	<u>\$0.43</u>	<u>\$0.85</u>	<u>\$10.20</u>
<u>\$60,000 - \$64,999</u>	<u>21.00%</u>	<u>\$11.04</u>	<u>\$22.09</u>	<u>\$265.05</u>
<u>\$65,000 - \$69,999</u>	<u>23.00%</u>	<u>\$12.10</u>	<u>\$24.19</u>	<u>\$290.30</u>
<u>\$70,000 - \$74,999</u>	<u>26.00%</u>	<u>\$13.67</u>	<u>\$27.35</u>	<u>\$328.16</u>
<u>\$75,000 - \$79,999</u>	<u>27.00%</u>	<u>\$14.20</u>	<u>\$28.40</u>	<u>\$340.78</u>
<u>\$80,000 - \$84,999</u>	<u>28.00%</u>	<u>\$14.73</u>	<u>\$29.45</u>	<u>\$353.40</u>
<u>\$85,000 - \$99,999</u>	<u>30.00%</u>	<u>\$15.78</u>	<u>\$31.55</u>	<u>\$378.65</u>
<u>\$100,000 +</u>	<u>35.00%</u>	<u>\$18.41</u>	<u>\$36.81</u>	<u>\$441.76</u>



# Township of Union Public Schools

## Aetna Calculator Vision

<u>Plan Option:</u>	<u>Vision</u>	
	<u>Single (1)</u>	<u>Family (2)</u>
<u>Medical &amp; RX</u>	<u>\$3.70</u>	<u>\$8.84</u>
	<u>\$0.00</u>	<u>\$0.00</u>
<b><u>Monthly COST:</u></b>	<b><u>\$3.70</u></b>	<b><u>\$8.84</u></b>

<b>SINGLE COVERAGE CONTRIBUTION (1)</b>				
<u>Salary</u>	<u>Year 4</u>	<u>Bi-Weekly Contribution</u>	<u>Monthly Contribution</u>	<u>Annual Contribution</u>
<u>Less than \$20,000</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$20,000 - \$24,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$25,000 - \$29,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$30,000 - \$34,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$35,000 - \$39,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$40,000 - \$44,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$45,000 - \$49,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$50,000 - \$54,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$55,000 - \$59,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$60,000 - \$64,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$65,000 - \$69,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$70,000 - \$74,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$75,000 - \$79,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$80,000 - \$94,999</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>
<u>\$95,000 +</u>	<u>\$0.74</u>	<u>\$1.48</u>	<u>\$2.96</u>	<u>\$35.52</u>



# Township of Union Public Schools

## Aetna Calculator Vision

<b><u>FAMILY COVERAGE CONTRIBUTION (2)</u></b>				
<b><u>Salary</u></b>	<b><u>Year 4</u></b>	<b><u>Bi-Weekly Contribution</u></b>	<b><u>Monthly Contribution</u></b>	<b><u>Annual Contribution</u></b>
<u>Less than \$25,000</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$25,000 - \$29,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$30,000 - \$34,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$35,000 - \$39,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$40,000 - \$44,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$45,000 - \$49,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$50,000 - \$54,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$55,000 - \$59,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$60,000 - \$64,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$65,000 - \$69,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$70,000 - \$74,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$75,000 - \$79,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$80,000 - \$84,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$85,000 - \$99,999</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>
<u>\$100,000 +</u>	<u>\$1.77</u>	<u>\$3.54</u>	<u>\$7.07</u>	<u>\$84.84</u>



This benefit summary provides selected highlights of the Township of Union Board of Education employee benefits program. It is not a legal document and shall not be construed as a guarantee of benefits nor of continued employment at Township of Union Board of Education. All benefit plans are governed by master policies, contracts and plan documents. Any discrepancies between any information provided through this summary and the actual terms of the policies, contracts and plan documents are governed by the terms of these policies, contracts and plan documents. Township of Union Board of Education reserves the right to amend, suspend or terminate any benefit plan, in whole or in part, at any time. The Plan Administrator has the authority to make these changes.



**2023 Benefits Guide**