

◆ DIAMOND = Eligible for the \$75 per-pay Board Contribution

## Payroll Deduction Rate Chart

### Aetna Medical Plans

Coverage Level	Select Open Access	Choice POS II	CDHP + HRA	<b>NEW</b> Basic Essential Plan
Employee	\$89.00	99.00	69.00	\$31.00
Employee + Spouse	\$238.00	259.00	195.00	\$121.00
Employee + Child(ren)	\$217.00	238.00	174.00	\$113.00
Employee + Family	\$315.00	357.00	256.00	\$147.00
Two Board Family <sup>1</sup>	\$220.00	262.00	161.00	\$52.00

Payroll deduction **per-pay-period (20 pays)** AFTER the Board Contribution has been applied.

<sup>1</sup> To be eligible for Two Board Family, three or more individuals must be covered under the plan and your legal spouse must be a benefits-eligible employee of the School Board.

### ◆ Humana or MetLife Dental Plans

Coverage Level	Humana Advantage	MetLife® PDP
Employee	\$7.93	\$14.93
Employee + 1	\$14.56	\$27.36
Employee + Family	\$21.27	\$39.49
Two Board Family <sup>2</sup>	\$19.27	\$37.49

### ◆ EyeMed Vision Plan

Coverage Level	EyeMed
Employee	No Charge
Employee + 1	\$2.83
Employee + Family	\$5.92
Two Board Family	\$5.92

Payroll deduction **per pay period (20 pays)** AFTER the Board Contribution has been applied.

<sup>2</sup> To be eligible for Two Board Family, three or more individuals must be covered under the plan and your legal spouse must be a benefits-eligible employee of the School Board.

### ◆ MetLife Hospital Indemnity Plan (HIP)

Coverage Level	Hospital Indemnity Plan (HIP)
Employee Only	\$8.00
Employee + Spouse	\$13.00
Employee + Children up to age 26	\$17.00
Employee + Family	\$21.00

**MetLaw**  
Call MetLife  
(800-438-6388) to Enroll

\$11.85  
(no coverage level  
selection required)

Pre-existing conditions apply to The Standard Disability plans, HIP, and MetLaw. See the online BENEFlex Guide for full details.

### How Do I Enroll in the MetLife Legal Plan?

Call **800-438-6388** or visit [metlife.com/mybenefits](https://metlife.com/mybenefits) to enroll or change your coverage.

This newsletter describes Pinellas County Schools employee benefit programs that will be effective for the plan year beginning January 1, 2021. This is only a summary of the benefit programs. Additional restrictions and/or limitations not included in this newsletter may apply. In the event of a conflict between this newsletter and the plan documents, the plan documents will control.



◆ DIAMOND = Eligible for the \$75 per-pay Board Contribution

### Standard Insurance Company Life Insurance Plans<sup>3</sup>

#### Basic Employee Term Life Insurance<sup>1</sup>

One times base annual earnings rounded up to next \$1,000 is provided for all eligible PCS employees at no cost to you.  
**Minimum: \$15,000**  
**Maximum: \$200,000**

#### Optional Employee and Dependent Term Life

Age (as of effective date of coverage)	Employee <sup>2</sup> & Spouse <sup>3</sup>		Children <sup>4</sup>	Family <sup>5</sup>
	Rates (per \$10,000)	Rates (per \$2,000)	Formerly "Dependent Life" Rates (per family unit)	
under 30	\$ 0.34	\$0.24	\$0.90	
30-34	0.48			
35-39	0.54			
40-44	0.60			
45-49	0.90			
50-54	1.38			
55-59	2.58			
60-64	3.96			
65-69	7.62			
70+	12.36			

- ① This coverage is "guarantee issue" and no evidence of good health is required.
- ② Optional Employee Term Life: \$10,000 minimum, up to \$200,000 in \$10,000 increments or \$250,000, up to \$500,000 maximum in \$50,000 increments; "guarantee issue" (new hire only) to \$100,000 or your current coverage amount; for additional amounts, you must provide evidence of good health; subject to reduction schedules at age 70.
- ③ Optional Dependent Term Life for Spouse: \$10,000 increments to \$100,000; evidence of good health is required; coverage terminates at age 70.
- ④ Optional Dependent Term Life for Child(ren): \$2,000 increments to \$10,000; one premium covers all eligible child(ren).
- ⑤ Optional Family Term Life: One premium covers spouse and eligible child(ren).

<sup>3</sup> Keep in mind that the amount of coverage you elect will be reduced at certain ages. The \$12.36 contribution shown for age 70 and above actually buys coverage of \$6,500 at ages 70-74, \$4,500 at ages 75-79, and \$3,000 at age 80 and above.

### ◆ Standard Insurance Company Optional Accidental Death & Dismemberment Insurance

Basic Employee Accidental Death & Dismemberment Insurance is provided for all eligible PCS employees at no cost to you. Coverage Amount: \$2,000

Benefit Amount	Employee Only	Employee + Family	Benefit Amount	Employee Only	Employee + Family
\$50,000	\$0.60	\$1.05	\$200,000	\$2.40	\$4.20
\$100,000	\$1.20	\$2.10	\$300,000	\$3.60	\$6.30

### ◆ The Standard Insurance Company Disability

An eligible employee may select one plan and one waiting period, outlined below, provided the Monthly Disability Benefit does not exceed 66⅔% of the person's regular monthly base salary.

If Your Annual Base Salary Is at Least	Monthly Disability Benefit	Two Year Plan and Waiting Periods			To SSNRA <sup>4</sup> Plan and Waiting Periods		
		14 Days	30 Days	60 Days	14 Days	30 Days	60 Days
\$ 7,200	\$ 400	\$ 5.28	\$ 3.38	\$ 1.88	\$ 6.83	\$ 4.54	\$ 2.86
10,800	600	7.91	5.08	2.82	10.25	6.80	4.29
14,400	800	10.55	6.77	3.76	13.67	9.07	5.72
18,000	1,000	13.19	8.46	4.70	17.08	11.33	7.15
21,600	1,200	15.83	10.15	5.65	20.50	13.60	8.58
25,200	1,400	18.47	11.84	6.59	23.92	15.87	10.01
28,800	1,600	21.11	13.54	7.52	27.33	18.13	11.44
32,400	1,800	23.75	15.23	8.47	30.75	20.40	12.88
37,800	2,100	27.71	17.77	9.88	35.87	23.80	15.02
43,200	2,400	31.67	20.30	11.29	41.00	27.20	17.17
48,600	2,700	35.62	22.84	12.70	46.12	30.60	19.31
54,000	3,000	39.58	25.38	14.11	51.25	34.00	21.46
63,000	3,500	46.18	29.61	16.46	59.79	39.67	25.03
72,000	4,000	52.78	33.84	18.82	68.33	45.34	28.61
81,000	4,500	59.38	38.07	21.17	76.87	51.01	32.18
90,000	5,000	65.97	42.30	23.52	85.41	56.67	35.76

Pre-existing conditions, including pregnancy, apply during the first year of new or increased coverage. See the online BENEFlex Guide for full details.

<sup>4</sup> Social Security Normal Retirement Age (SSNRA)