Employee Health Benefits Rates & Cost Sharing



Manatee County Government Employee Health Benefits Plan Year January 1, 2022 - December 31, 2022

Refer to the YourChoice website (www.manateeyourchoice.com) for a full explanation of the below benefits

Medical

Manatee YourChoice Health Plan (utilizing Aetna Choice POSII Open Access Network)

2022 MEDICAL MONTHLY RATES						
	Employee Pays	Employer Pays				
Employee Only	\$83.78	\$657.60				
Employee + Spouse	\$315.64	\$1,201.84				
Employee + Child(ren)	\$270.54	\$1,030.14				
Employee + Family (spouse & children)	\$382.92	\$1,756.32				
Dependent Child (age 26-30)	\$741.38	\$0				

Dental

Aetna Dental PPO/PDN National Network*

2022 DENTAL MONTHLY RATES				
	Employee Pays			
Employee Only	\$34			
Employee + 1	\$55			
Employee + 2 or more	\$75			

The Dental Plan is 100% funded by employee contributions. Rates are based upon employee utilization during the past 12 months.

* Clerk's Office not eligible. Contact HR for details regarding your dental plan.

Vision

Aetna Vision Preferred National Network

2022 VISION MONTHLY RATES					
	Employee Pays				
Employee Only	\$4.92				
Employee + Spouse	\$9.36				
Employee + Child(ren)	\$9.84				
Employee + Family (spouse & children)	\$14.48				

Short Term Disability | Hartford Insurance Group

Short Term Disability (STD) is a NEW employee-paid benefit this year. Short-term Disability insurance is designed to help protect your income if you're hurt or sick and can't work by providing up to 60% of your pre-disability earnings (up to a maximum of \$1,000 per week) after a 2-week waiting period and for up to 13 weeks.

2022 STD MONTHLY RATES Rates are calculated automatically during Annual Enrollment					
Age	Rates Per \$10 of Weekly Benefit				
<25	\$0.36				
25-29	\$0.42				
30-35	\$0.46				
35-39	\$0.34				
40-44	\$0.28				
45-49	\$0.30				
50-54	\$0.37				
55-59	\$0.48				
60-64	\$0.59				
65+	\$1.053				

WORKSHEET FOR STD Calculate Estimated Monthly Premium						
1. Find your weekly earnings by dividing your annual earnings by 52.	Line 1: \$576.92 (30,000/52)					
2. Calculate your weekly benefit by multiplying your weekly benefit by .60 (60% max benefit of weekly earnings <i>up to</i> \$1,000.00 per week). Line 2: \$346.15						
3. Select your rate from the rate table and divide this by 10.	Line 3: \$0.046					
4. Multiply line 2 by the amount in line 3.	Line 4: \$15.92					
Line 2 (weekly benefit) X Line 3 (rate/10) = (Est. Monthly Pre	emium)					

Long Term Disability | Hartford Insurance Group

Long Term Disability (LTD) is provided to all eligible employees. Core LTD is equal to 50% of an employee's base monthly salary up to \$3,000 per month after the disability exceeds 90 days, and is provided at no cost to employees.

An employee can elect to enroll in **Additional LTD** and increase their benefit to 66 2/3% of base monthly salary, up to \$5000 per month. The cost for Additional LTD is subject to age and salary. Evidence of Insurability (EOI) is required unless elected at time of hire. Questions about this policy can be directed to Lucy De La Espriella at EHB: Lucy.delaespriella@mymanatee.org or 941.748.4501 x6280.

2022 ADDITIONAL LTD MONTHLY RATES EMPLOYEE Up to 66 2/3% Base Monthly Salary					
Age	Rates Per \$100 of Insured Earnings				
<40	\$0.11				
40-49	\$0.32				
50-59	\$0.75				
60-64	\$0.77				
65+	\$0.80				

WORKSHEET FOR ADDITIONAL LTD Calculate Estimated Monthly Premium						
 Enter your monthly earnings, not to exceed \$7,500, on Line 1. Select your rate from the rate table 	Line 1: \$5,000					
and divide this by 100. 3. Multiply Line 1 by the amount	Line 2: \$.0011 (.11 ÷ 100)					
shown on Line 2.	Line 3: \$5.50					
Line 1 (Monthly Earnings) X Line 2 (Rate/	100) = Est. Monthly Premium					

Life Insurance Minnesota Life Ins. Company - A Securian Company

Term Life insurance is provided to all eligible employees. Core Life and AD&D is equal to 1x base annual salary up to \$200,000 and is provided at no cost to employees.

Additional Life Insurance can be acquired for employees, spouses and children. Evidence of Insurability (EOI) is required unless elected at time of hire. An employee can elect up to 6x base annual salary with a maximum coverage volume of \$750,000. Questions about this policy can be directed to Lucy De La Espriella at EHB: Lucy.delaespriella@mymanatee.org or 941.748.4501 x6280.

2022 ADDITIONAL TERM LIFE MONTHLY I							
EMPLOYEE Up to 6x salary (max: \$750,000)					50% c	SPO of EE election up	
Age	Rate per \$1000 benefit	Age	Rate per \$1000 benefit		Age	Rate per \$1000 benefit	Age
<34	\$0.050	55-59	\$0.511		<34	\$0.051	55-59
35-39	\$0.058	60-64	\$0.756		35-39	\$0.066	60-69
40-44	\$0.122	65-69	\$0.994		40-44	\$0.139	
45-49	\$0.245	70+	\$1.310		45-49	\$0.263	
50-54	\$0.346				50-54	\$0.336	

NAL TERM LIFE MONTHLY KATES						
SPOUSE 0% of EE election up to \$25,000 Coverage					CHILD(REN) \$10,000 Coverage	
ge	Rate per \$1000 benefit	Age	Rate per \$1000 benefit		Flat rate \$1/month	
34	\$0.051	55-59	\$0.518		No matter how many children, the rate is still \$1/	
-39	\$0.066	60-69	\$0.715		month. Each Child receives	
-44	\$0.139				\$10,000 coverage.	
-49	\$0.263				*No EOI for children	
-54	\$0.336					
-49	\$0.139 \$0.263		40.713		\$10,000 coverage.	

