



2022 Summary of Employee Benefits

Boone County Hospital is committed to providing excellent care for our patients and their families and to do so, we recognize that we must take care of our employees and their families. Boone County Hospital offers market competitive pay and benefits that are designed to bring in and keep the best people who share our commitment to providing excellence in patient care. Boone County Hospital offers a comprehensive benefits package designed to promote and maintain good health, support overall financial security and promote personal and professional growth and development.

HEALTH AND WELLNESS *Employee Premium subject to Spousal Surcharge of \$75 per pay period, if applicable. Health Insurance only.

Plan	Coverage			Bi-Weekly Payroll Deduction	
	Type of Coverage	BCH Network	Wellmark Alliance Select Network	Coverage	Rate
Traditional/PPO Health Insurance	Preventive Care Services	100% Coverage	100% Coverage	Single	\$48.29
	Primary Care Physician Office Services	\$20/Visit	\$25/Visit	2 Party	\$131.65
	Specialist Physician Office Services	\$30/Visit	\$40/Visit	Family	\$215.17
	Outpatient Labs, X-rays, Physical Therapy, Imaging, EKG, Echo Services	BCH Billed – Deductible, then 10% co-insurance	Deductible, then 20% co-insurance		
	Annual Deductible (Dollars combined across all networks)	\$750 individual/\$1,500 family	\$1,500 individual/\$2,500 family		
	Co-insurance, after deductible	10% co-insurance	20% co-insurance		
	Out of Pocket Maximum	\$1,500 individual/\$3000 family	\$3,000 individual/\$5,000 family		
	Prescriptions				
	Generic/Tier 1	\$7 per 30 day fill	\$10 per 30 day fill		
Tier 2 (Preferred Brand Name)	\$20 per 30 day fill	\$30 per 30 day fill			
Tier 3 (Non-Preferred Brand Name)	\$40 per 30 day fill	\$50 per 30 day fill			
Tier 4 (Specialty Drugs)	\$75 per 30 day fill	\$90 per 30 day fill			

Health & Wellness Plans – Cont'd					
High Deductible Health Plan with Health Savings Account	Preventive Care Services	100% Coverage	100% Coverage	Single	\$18.53
	Primary Care Physician Office Services	Deductible then 10%	Deductible then 20%	2 Party	\$52.31
	Specialist Physician Office Services	Deductible then 10%	Deductible then 20%	Family	\$103.97
	Outpatient Labs, X-rays, Physical Therapy, Imaging, EKG, Echo Services	Deductible then 10%	Deductible then 20%		
	Annual Deductible (Dollars combined across all networks)	\$2,800 individual/\$5,600 family	\$2,800 individual/\$5,600 family		
	Co-insurance, after deductible	10%	20%		
	Out of Pocket Maximum	\$5,000 individual/\$10,000 family	\$5,000 individual/\$10,000 family		
	Prescriptions	Deductible, then 10% co-insurance	Deductible, then 10% co-insurance		
Health Savings Account: BCH contributes \$1,200 per year to an employee's Health Savings Account via bi-weekly contributions of \$46.15 for individual plans and \$2,400 per year to an employee's Health Savings Account via bi-weekly contributions of \$92.30 for two-party and family plans.					
Plan	Coverage			Bi-Weekly Payroll Deduction	
Dental Insurance	BCH offers dental insurance administered by Delta Dental of Iowa. Benefits are determined by the provider's participation with Delta Dental.			Coverage	Rate
				Individual	\$6.92
				Family	\$24.00
		Delta Dental PPO	Delta Dental Premiere		
	Deductible – Individual	\$15	\$25		
	Deductible – Family	\$45	\$75		
	Calendar Year Benefit per covered person	\$1,500	\$1,500		
	Preventive and Diagnostic	100%	100%		
	Basic Restorative	90%/10%	80%/20%		
	Major Service	50%/50%	50%/50%		
Orthodontia	50%/50%	50%/50%			
Lifetime Orthodontia Benefit	\$1,500	\$1,500			
Annual Deductible – Orthodontia	\$50	\$50			
Age Limitation – Orthodontia	19	19			

Plan	Coverage	Bi-Weekly Payroll Deduction
Flexible Spending Accounts	Health Care and Dependent Care Flexible Spending Accounts are available. Employees can elect pre-tax deductions of up to for the IRS determined amount for Medical and Dependent Care. This is a tax effective way to pay for eligible health care and dependent care expenses.	Optional election for Employee
Wellness Program	The BCH Wellness Program is made up of a wide variety of options to help employees maintain a healthy lifestyle including but not limited to: <ul style="list-style-type: none"> • One free walk-in wellness lab draw during their birthday month • A \$25 reimbursement each month when employee attends a qualifying fitness program/facility a minimum of 8 times during the month OR for paid apps when payment verified. • A 50% reimbursement for membership dues paid to Weight Watchers • Various challenges and activities throughout the year sponsored by the BCH Wellness Committee 	

INCOME PROTECTION AND LIFE INSURANCE

Plan	Coverage	Who Pays
Life Insurance/AD&D – Basic Plan	Basic Term Life Insurance equal to an employee’s annual base salary, rounded to the next higher \$1,000	No Cost to Employee
Supplemental Life Insurance	Employees may purchase additional/supplemental life insurance at group rates for themselves and qualified family members	Optional election for employees
Short Term Disability	Employees may be eligible to receive short term disability in the event he/she is unable to work due to serious illness or injury. Benefits paid are 60% of employee’s base rate and is available for up to 26 weeks or as long is medically necessary	No cost to employees
Long Term Disability	Employee is eligible after expiration of short term disability. Disability benefit equals 60% of monthly pay reduced by any benefit received from Social Security or other income source.	No cost to employees

YOUR FINANCIAL FUTURE

Plan	Plan Description	Who Pays
IPERS	Boone County Hospital helps employees create piece of mind about their financial future through the IPERS retirement plan. Employees are automatically enrolled in IPERS upon employment and before tax salary deferrals begin with the employee’s first check. IPERS deferred rates are set by the Iowa Legislative Branch. Employees are 100% vested in IPERS after 7 years of employment.	Employee 6.29% BCH 9.44% Protected Services Employee 6.81% BCH 10.21%
403(b)	BCH does not endorse or participate in any one company nor does the hospital contribute to any private annuities. However, BCH will deduct pre-tax contributions on behalf of the employee and send to appropriate company. Please contact Payroll for more information.	Optional election for Employee

MAINTAINING YOUR WORK LIFE BALANCE

Plan	Program Description																									
Paid Time Off Program	BCH provides a Paid Time Off program in lieu of traditional vacation and holiday programs. Eligible employees are Full-Time, Full-Time Exempt and Part-Time with Benefits. PTO is accrued each pay period and is based on 80 hours worked each pay period. Less than 80 hours are pro-rated.																									
	<table border="1"> <thead> <tr> <th>Years of Service</th> <th>Days/Year</th> <th>Hours/Year</th> <th>Accrual/Hour</th> <th>Maximum Hours</th> </tr> </thead> <tbody> <tr> <td>0 – 5 Years</td> <td>20</td> <td>160</td> <td>.077</td> <td>240</td> </tr> <tr> <td>6 – 10 Years</td> <td>26</td> <td>208</td> <td>.100</td> <td>312</td> </tr> <tr> <td>11 – 15 Years</td> <td>30</td> <td>240</td> <td>.115</td> <td>360</td> </tr> <tr> <td>Over 15 Years</td> <td>34</td> <td>272</td> <td>.130</td> <td>408</td> </tr> </tbody> </table>	Years of Service	Days/Year	Hours/Year	Accrual/Hour	Maximum Hours	0 – 5 Years	20	160	.077	240	6 – 10 Years	26	208	.100	312	11 – 15 Years	30	240	.115	360	Over 15 Years	34	272	.130	408
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Holidays	The following 6 holidays are observed: New Year’s Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day and Christmas Day. Holiday time is included in the PTO accrual rates If non-exempt and you work a holiday you receive time and a half.																									
Sick Time	Employees will accrue sick hours based on their hours worked. The maximum is .93 for 80 hours worked in a pay period. The accrual rate will be pro-rated when an employee works less than 80 hours in a pay period. Maximum accrual is 24 sick hours.																									
Bereavement Pay	Bereavement leave of up to 3 days (24 hours) for designated family members.																									
Employee Assistance Program (EAP)	BCH offers a comprehensive Employee Assistance Program through Employee and Family Resources (EFR) . EFR offers confidential assessment, counseling services and referrals if necessary. The program includes resources for mental health, financial and legal counseling, substance abuse services, student assistance programs and more.																									

ADDITIONAL PROGRAMS AND BENEFITS

Plan	Program Description
Inpatient and Outpatient Discounts	<p>BCH allows all benefit eligible employees (except those participating in the High Deductible Health Plan) the opportunity to receive discounts on hospital-related services received at BCH. These discounts are applicable to the employee and immediate family members who reside with the employee and are a qualifying dependent per the IRS code. The employee does not need to be enrolled in the health insurance offered by BCH.</p> <p>Inpatient and Observation charges are eligible for a 100% discount, up to \$2,500 per event, when an employee submits the Explanation of Benefits received showing what insurance has paid. Employee has 45 days from when the insurance pays to meet with a Patient Registration representative in order to receive the discount.</p> <p>Outpatient discount is 50% when employee submits the statement received showing what insurance has paid. Employee has 45 days from the date of the first billing statement to meet with a Patient Registration representative in order to receive the discount. Account must be paid within 6 pay periods.</p>

Tuition Reimbursement	BCH promotes staff development and offers many different education and training opportunities to employees that help promote career growth within the organization. Additionally, BCH offers formal education opportunities. Employees may qualify for up to \$3,000 per fiscal year in tuition reimbursement, provided all requirements are met. More information is available in the Tuition Reimbursement Policy.
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