**[PARISH NAME]**

**ADDENDUM**

**HEALTH INSURANCE BENEFITS**

**Effective: July 1, 2021**

The Parish offers eligible employees and their eligible dependents the option to enroll in health insurance. The Parish currently offers three health insurance plans to choose from – PPO1, PPO2 and Blue Care Network (BCN). For questions regarding the plans, please see the applicable plan documents which control.

**Monthly premiums for July 1, 2021 through June 30, 2022 are as follows:**

**PPO1: Employee**: **\_\_\_\_\_\_\_\_ Employee + 1: \_\_\_\_\_\_\_\_ Family: \_\_\_\_\_\_\_\_**

**PPO2: Employee: $514.00 Employee + 1: $1,132.00 Family: $1,339.00**

**BCN Blue Elect Plus Employee**: **\_\_\_\_\_\_\_** **Employee +** 1: **\_\_\_\_\_\_\_\_\_** **Family:** **\_\_\_\_\_\_\_\_**

FULL-TIME EMPLOYEES: The Parish will pay the following amounts toward the PPO2 health insurance plan’s monthly premium for full-time employees (i.e., Employees earning at least 30 hours of service per week):

**[The Parish must choose one of the three options below to utilize as a minimum to meet the requirements of the law. Therefore, delete the options which will *NOT* apply:]**

**[Option 1]**

Employee: The Parish will pay 100% of the monthly **PPO2** premium.

Employee +1: The Parish will pay \_\_% of the additional cost for Employee +1 coverage.

Family: The Parish will pay \_\_% of the additional cost for Family coverage.

An employee enrolling PPO1 or BCN health insurance option will be responsible to pay the total difference in cost between the Parish’s contribution toward PPO2 coverage and the additional cost of PPO1 or BCN coverage.

Examples: A full-time employee chooses PPO2 family coverage. The Parish pays $514, which is the cost of employee coverage. The Parish also pays $\_\_\_\_\_, which is \_\_\_% of $825 (the difference between family and employee coverage). The employee is responsible for paying the remaining $\_\_\_\_.

A full-time employee chooses PPO1 family coverage. The cost of the PPO1 family plan is $\_\_\_\_\_\_ more than the PPO2 family plan’s cost. The employee is responsible to pay this amount plus the amount they would be responsible to pay had they selected PPO2 family plan coverage.

A full-time employee chooses BCN family coverage. The cost of the BCN family plan is $\_\_\_\_\_\_ more than the PPO2 family plan’s cost. The employee is responsible to pay this amount plus the amount they would be responsible to pay had they selected PPO2 family plan coverage.

**[Option 2]**

Employee: The Parish will pay $\_\_\_\_\_ of the monthly premium. The employee will pay $\_\_\_\_\_\_. **[The employee’s contribution is calculated using the lowest full-time hourly wage that would possibly be paid by the Parish: Lowest FT wage x 130 (safe harbor number) x 0.095 = employee contribution.]**

Employee +1: The Parish will pay \_\_% of the additional cost for Employee +1 coverage.

Family: The Parish will pay \_\_% of the additional cost for Family coverage.

An employee enrolling in 2-person or family health insurance option will be responsible to pay the single coverage contribution and \_\_% of the total difference in cost between single coverage and the additional coverage.

Examples: A full-time employee chooses family coverage under the PPO2 plan. The Parish pays $\_\_\_\_\_ per month toward employee coverage. The Parish also pays $\_\_\_\_\_, which is \_\_\_% of $825 (the difference between family and employee coverage). The employee is responsible for paying the remaining $\_\_\_\_.

A full-time employee chooses PPO1 family coverage. The cost of the PPO1 family plan is $\_\_\_\_\_\_ more than the PPO2 family plan’s cost. The employee is responsible to pay this amount plus the amount they would be responsible to pay had they selected PPO2 family plan coverage.

A full-time employee chooses BCN family coverage. The cost of the BCN family plan is $\_\_\_\_\_\_ more than the PPO2 family plan’s cost. The employee is responsible to pay this amount plus the amount they would be responsible to pay had they selected PPO2 family plan coverage.

**[Option 3]**

Employee: The employee contributes 9.5% of their hourly wage x 130 per month. The Parish will pay the difference, if any.

Employee +1: The Parish will pay \_\_% of the additional cost for Employee +1 coverage

Family: The Parish will pay \_\_% of the additional cost for Family coverage.

An employee enrolling in the PPO1 or BCN health insurance option will be responsible to pay the total difference in cost between the Parish’s contribution toward PPO2 coverage and the additional cost of PPO1 or BCN coverage.

Examples: A full-time employee chooses family coverage under the PPO2 plan. The employee’s hourly wage is $14.00. The employee contributes $172.90 ($14.00 x 130 x 0.095) toward the monthly cost of employee coverage and the Parish will pay the remaining $341.10. The Parish also pays $\_\_\_\_\_, which is \_\_\_% of $825.00 (the difference between family and employee coverage). The employee is responsible for paying the remaining $\_\_\_\_.

A full-time employee chooses PPO1 family coverage. The cost of the PPO1 family plan is $\_\_\_\_\_\_ more than the PPO2 family plan’s cost. The employee is responsible to pay this amount, plus the amount they would be responsible to pay had they selected PPO2 family plan coverage.

A full-time employee chooses BCN family coverage. The cost of the BCN family plan is $\_\_\_\_\_\_ more than the PPO2 family plan’s cost. The employee is responsible to pay this amount plus the amount they would be responsible to pay had they selected PPO2 family plan coverage.

PART-TIME EMPLOYEES: Part-time employees who earn at least 20 hours of service per week may also choose to enroll in health insurance. **[The Parish must choose from the following options to indicate how part-time premiums will be paid. Therefore, delete the options which will *NOT* apply:]** Part-time employees who enroll are responsible to pay the entire health insurance premium. **[OR]** The Parish will contribute toward a part-time employee’s health insurance on a pro-rata basis determined on average hours worked. **[OR]** The Parish will provide an alternative such as paying a percentage or set dollar amount of the health insurance premium for a part-time employee (be specific about your choice, i.e. a percentage or a set dollar amount).

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, **accept [Parish Name] offer of Health Benefits.**

 **(*Print Name)***

I have notified MCC that I have chosen plan: PPO1 \_\_\_\_ PPO2\_\_\_\_ BCN\_\_\_\_\_

Please indicate coverage option: Employee \_\_\_\_ Employee +1 \_\_\_\_  Family \_\_\_\_

**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, decline [Parish Name] offer of Health Benefits.**

 (*Print Name)*

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: ­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**