



Marion Health Employee Benefits Overview for MHFM Residents

Benefit	What You Receive	When Effective	Who Pays																
Health Plan	Comprehensive health plan including PPO and CDHP options. PPO: Copay and coinsurance structure, prescription drug copay and wellness initiatives. CDHP: Coinsurance structure, prescription drug coinsurance and wellness initiatives. High deductible plan with tax advantaged Health Savings Account (HSA) option. HSA seed money of \$500/single and \$1,000/family. PPO Network: United Healthcare Choice Plus. Claims Administrator: UMR.	Upon Employment	<u>Your Cost Per Pay Period</u> PPO <table><tr><td>Single</td><td>\$108.47</td></tr><tr><td>EE & Spouse</td><td>\$227.79</td></tr><tr><td>EE & Child(ren)</td><td>\$189.83</td></tr><tr><td>Family</td><td>\$325.42</td></tr></table> CDHP <table><tr><td>Single</td><td>\$52.24</td></tr><tr><td>EE & Spouse</td><td>\$122.29</td></tr><tr><td>EE & Child(ren)</td><td>\$101.72</td></tr><tr><td>Family</td><td>\$175.19</td></tr></table>	Single	\$108.47	EE & Spouse	\$227.79	EE & Child(ren)	\$189.83	Family	\$325.42	Single	\$52.24	EE & Spouse	\$122.29	EE & Child(ren)	\$101.72	Family	\$175.19
Single	\$108.47																		
EE & Spouse	\$227.79																		
EE & Child(ren)	\$189.83																		
Family	\$325.42																		
Single	\$52.24																		
EE & Spouse	\$122.29																		
EE & Child(ren)	\$101.72																		
Family	\$175.19																		
Dental Plan – Low	Calendar year deductible of \$50 individual and \$150 family aggregate. \$1,000 Annual Limit. • Preventive Services covered at 100% • Basic Services covered at 80% • Major Services covered at 50% Coverage through United Healthcare.	Upon Employment	<u>Your Cost Per Pay Period</u> <table><tr><td>Single</td><td>\$16.19</td></tr><tr><td>EE & Spouse</td><td>\$29.99</td></tr><tr><td>EE & Child(ren)</td><td>\$41.80</td></tr><tr><td>Family</td><td>\$59.30</td></tr></table>	Single	\$16.19	EE & Spouse	\$29.99	EE & Child(ren)	\$41.80	Family	\$59.30								
Single	\$16.19																		
EE & Spouse	\$29.99																		
EE & Child(ren)	\$41.80																		
Family	\$59.30																		
Dental Plan – High	Calendar year deductible of \$50 individual and \$150 family aggregate. \$1,500 Annual Limit. • Preventive Services covered at 100% • Basic Services covered at 80% • Major Services covered at 50% • Orthodontia covered at 50% Coverage through United Healthcare.	Upon Employment	<u>Your Cost Per Pay Period</u> <table><tr><td>Single</td><td>\$19.36</td></tr><tr><td>EE & Spouse</td><td>\$35.88</td></tr><tr><td>EE & Child(ren)</td><td>\$50.58</td></tr><tr><td>Family</td><td>\$71.75</td></tr></table>	Single	\$19.36	EE & Spouse	\$35.88	EE & Child(ren)	\$50.58	Family	\$71.75								
Single	\$19.36																		
EE & Spouse	\$35.88																		
EE & Child(ren)	\$50.58																		
Family	\$71.75																		

Benefit	What You Receive	When Effective	Who Pays
Vision Plan	- Exams every 12 months (\$10 copay) - Frames every 24 months (\$25 material copay, in conjunction with lenses) - Lenses every 12 months (\$25 material copay, in conjunction with frames) - Contacts every 12 months in lieu of frames/lenses Coverage through VSP.	Upon Employment	<u>Your Cost</u> <u>Per Pay Period</u> Single \$3.12 EE & Spouse \$6.24 EE & Child(ren) \$6.68 Family \$10.67
Flexible Spending Account (FSA)	Health Care.	Upon Employment	You
Life Insurance	\$50,000 flat coverage.	Upon Employment	Marion Health
Supplemental Life Insurance	Options for additional life insurance up to \$250,000.	Upon Employment	You
Dependent Life Insurance	Two plan options available for spouse and children life insurance.	Upon Employment	You
Accident Insurance	Accident off-the-job only insurance for employee and dependents. Coverage through Cigna.	Upon Employment	You
Critical Illness Insurance	Critical Illness Insurance for employee and dependents. Coverage through Cigna.	Upon Employment	You
Aura Identity Guard Insurance	Identity Theft Insurance for employee and family members in household.	Upon Employment	You
Legal Plan Insurance	Provides access to legal expertise for both expected and unexpected events.	Upon Employment	You
Short Term Disability	50% of base weekly earnings up to a maximum of \$1,200 per week if this benefit is elected.	Upon Employment begins on the 15 th day of continuous disability.	You
Long Term Disability	50% of monthly earnings up to a maximum amount of \$7,000 per month.	Upon Employment, after 180 calendar days of continuous qualifying disability.	Marion Health

Benefit	What You Receive	When Effective	Who Pays
Tax-Sheltered Annuity 403(b) with Employer Match	Opportunity to plan for retirement by setting aside a portion of your earnings tax deferred through payroll deduction. (2025 limit - \$23,500) Marion Health matches 50% of the first 6% of employee's contribution. 3-year Cliff Vesting Schedule.	Beginning of next pay period after start date	You and Marion Health
Paid Time-Off	Paid Time Off based upon Resident Time Off Policy – 15 PTO Days – 7 Holidays – 5 CME Days	Upon Employment	Marion Health
Bereavement Leave	1-5 days, dependent on family relationship.	Upon Employment	Marion Health
Worker's Compensation	Medical and hospital care as well as compensation for lost-time due to a work-related injury or illness.	Upon Employment	Marion Health
Direct Deposit	Direct deposit of payroll and savings plans (one (1) or more financial institutions).	Upon Employment	You
Sick Child Care	Care for sick children of employees while at work through the Pediatric Unit. Available 24 hours a day/7 days a week.	Upon Employment	You
Discounts:			
Cafeteria	Meals at reduced costs.	Upon Employment	You
Purchasing	Selected supplies at cost +10% & sales tax.	Upon Employment	You Via Payroll Deduction
YMCA	Discount membership to Grant County YMCA for employees and family members.	Upon Employment	You Via Payroll Deduction