

BOARD MEMBERS

HEALTH, DENTAL AND VISION INSURANCE PLANS AVAILABLE

2023/2024

Effective October 1, 2023 - September 30, 2024

HEALTH

Plans	Monthly Rates	MCOE Pays
<u>KAISER HMO - TRADITIONAL</u>		
Employee only	\$965.00	\$965.00
Employee and 1 dependent	\$2,064.00	\$2,064.00
Employee and 2 or more dependents	\$2,874.00	\$2,874.00
<u>KAISER DHMO - DEDUCTIBLE</u>		
Employee only	\$801.00	\$801.00
Employee and 1 dependent	\$1,714.00	\$1,714.00
Employee and 2 or more dependents	\$2,387.00	\$2,387.00
<u>KAISER DHMO - HSA</u>		
Employee only	\$762.00	\$762.00
Employee and 1 dependent	\$1,630.00	\$1,630.00
Employee and 2 or more dependents	\$2,270.00	\$2,270.00
<u>ANTHEM BLUE CROSS PPO - 100%</u>		
Employee only	\$1,126.00	\$1,126.00
Employee and 1 dependent	\$2,411.00	\$2,411.00
Employee and 2 or more dependents	\$3,366.00	\$3,366.00
<u>ANTHEM BLUE CROSS PPO - DEDUCTIBLE</u>		
Employee only	\$921.00	\$921.00
Employee and 1 dependent	\$1,958.00	\$1,958.00
Employee and 2 or more dependents	\$2,729.00	\$2,729.00
<u>ANTHEM BLUE CROSS PPO - HSA</u>		
Employee only	\$695.00	\$695.00
Employee and 1 dependent	\$1,466.00	\$1,466.00
Employee and 2 or more dependents	\$2,036.00	\$2,036.00

DENTAL and VISION

Plans	Monthly Rates	MCOE Pays
<u>DELTA DENTAL</u>		
Employee and dependents	\$134.17	\$134.17
<u>VISION SERVICE PLAN (VSP)</u>		
Employee and dependents	\$20.93	\$20.93

SUMMARY OF BOARD MEMBER BENEFITS

Pursuant to Internal Revenue Code Section 89 (k), all employees and retirees eligible for district paid benefits must be notified regarding available benefits and under what circumstances employees are qualified to receive benefits.

Members of the Marin County Board of Education of the Marin County Office of Education are currently entitled to the following benefits:

Medical, Dental and Vision Benefits:

A choice of six medical benefit plans: Kaiser (Traditional, Deductible, & Health Savings Account), SISC Anthem PPO (100% PPO, Deductible, & Health Savings Account). Also available is coverage through Delta Dental of California and Vision Service Plan.

1. Eligibility: Specific eligibility for these plans is set forth in the Board Policy 8324 and 2023-24 Health Benefit Matrix (reverse).
2. Summary Plan Description: The contracts between the Marin County Office of Education and these companies are on file in this office and the benefit booklets are available for review on work days between the hours of 8:00 a.m. and 5:00 p.m.
3. Election to Participate: Board members may participate in the plans upon completion of an application for coverage during the open enrollment period, which usually occurs during the months of August/September each year. For new Board members and their dependents, after the Board member has completed the application, insurance coverage takes effect on the first day of the month following the effective date of the term of the service. (Exception: immediate coverage will take effect for a newborn if application is completed within 30 days of the birth).