



Minidoka County School District #331

"We will increase instructional intensity in all classrooms through the use of Idaho Core Standards and by incorporating 21st century strategies to improve academic achievement and demonstrate growth for all students."

Board Members

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Dr. Kenneth Cox, Superintendent
 Kerri Tibbitts, Board Clerk
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May 20, 2020

Minidoka County Schools
 Board of Trustees
 Superintendent Ken Cox

Re: 2020-2021

Dear Superintendent and Board of Trustees:

The Insurance Committee met and have reached an agreement regarding the proposed Benefit Package for the 2020-2021 school year. We further propose that the following plans be accepted and adopted by the Board.

Blue Cross of Idaho (ISBT)

To accept renewal with Blue Cross of Idaho with a 19.9% increase. This include the 3% it costs to join the state pool. The district will receive a 3% decrease the following year. The committee voted on recommending an Option A and B. Both options have a traditional plan and HSA plan. Option A is Option 2(traditional) and Option 4(HSA). Option B is Option 3(traditional) and Option 4(HSA). Please see the renewal summary with options listed

	<i>Select Health renewal</i>			<i>Blue Cross no surcharge</i>		
	<i>2500</i>	<i>4500</i>	<i>5000 HSA</i>	<i>Option #2</i>	<i>Option #3</i>	<i>Option #4</i>
Deductible:						HSA
Individual (In/Out of Network)	\$2,500/\$5,000	\$4,500/\$7,000	\$5,000/\$5,250	\$3,000	\$3,000	\$5,000
Family (In/Out of Network)	\$5,000/\$10,000	\$7,000/\$14,000	\$10,000/\$10,500	\$6,000	\$6,000	\$10,000
Physician Co-pay:	\$30	\$35	N/A	\$10/\$30	\$10/\$30	N/A
Physician Co-pay (Specialist):	\$45	\$50	N/A	\$30/\$50	\$30/\$50	N/A
Coinsurance:						
In Network	80/20%	80/20%	100%	80/20%	70/30%	100%
Out of Network	60/40%	60/40%	60/40%	60/40%	50/50%	100%
Out of Pocket Maximum:						
In Network	\$4,000/\$8,000	\$6,000/\$12,000	\$5,000/\$10,000	\$5,500	\$5,500	\$5,000
Out of Network	\$8,000/\$16,000	\$12,000/\$24,000	\$6,500/\$13,000	\$8,000	\$8,000	\$5,000
Emergency Room Co-pay	\$200 after Ded.	\$200 after Ded.	N/A			N/A
Drug Card Co-pay:	\$15/\$30/\$50/\$100	\$15/\$30/\$50/\$100	N/A	\$10/\$30/\$50	\$10/\$30/\$50	N/A
Drug Deductible	\$100	\$500	Shared w/ Med	500	500	Shared w/ Med
Drug Card Maximum:	N/A	N/A	Shared w/ Med	\$2,000	\$2,000	Shared w/ Med
Employee	\$834.90	\$660.90	\$660.90	\$693.80	\$676.60	\$577.20
Employee+Spouse	\$1,500.20	\$1,460.50	\$1,460.50	\$1,533.20	\$1,495.20	\$1,275.55
Employee+Child	\$1,419.30	\$1,123.30	\$1,123.30	\$1,179.20	\$1,150.00	\$981.05
Employee+Children	\$1,419.30	\$1,123.30	\$1,123.30	\$1,179.20	\$1,150.00	\$981.05
Employee+Family	\$2,129.80	\$1,685.70	\$1,685.70	\$1,769.60	\$1,725.70	\$1,472.20
	15.00%			20.72%	17.73%	0.44%

This comparison does not contain all benefits nor exclusions. It is merely a comparison of most commonly considered benefits.

** Willamette Renewal is \$46.07 which is \$4.16 more than Delta Dental which will be paid by the employee.

Delta Dental of Idaho-Minidoka School District Policy

To continue the PPO Plan with no increase to the district or benefit changes to the plan.

Willamette Dental-Minidoka School District Policy

To continue the PPO Plan with a 1.63% increase to the district. The renewal is \$46.07 which is \$4.16 more than Delta Dental. We are recommending the \$4.16 be paid by the employee.

Vision Service Plan-Minidoka School District Policy

We recommend continuing the group vision benefit with rates remaining the same.

Life Map

We recommend continuing our present benefit package of \$50,000 life coverage for each eligible employee and to continue \$2,500 life coverage for dependents.

We thank the Board for your continued efforts in providing a substantial benefit package to all eligible employees. Thank you for your consideration,

Wes Depew
Committee Chairman

Tara McCall
Committee Co-Chairman

Crystal Arizpe
Facilitator