

2008 Employee Benefit Rates

Carrier/Plan	Code	Participants	Monthly Premium
Benefits required by Diocesan canon for all full-time employees (working an avg. of 30+hrs/wk)			
<u>Kaiser</u>	705	Employee	\$386.93
	715	Employee+1	\$773.85
	730	Employee+2 or more	\$1,095.01
<u>Blue Sheild HMO</u>	505	Employee	\$643.58
	515	Employee+1	\$1,312.77
	530	Employee+2 or more	\$1,931.50
<u>Blue Shield PPO</u>	570	Employee	\$642.41
	580	Employee+1	\$1,191.33
	590	Employee+2 or more	\$1,852.16
<u>Cigna-Dental</u>	210	Employee	\$62.78
	220	Employee+1	\$115.34
	230	Employee+2 or more	\$169.30
<u>Life Insurance</u>	825	Basic Life-\$50,000	\$15.38
<u>Employee Assistance Plan - Concern</u>	300	Employee (+ dependents)	\$3.21
Benefits required by Diocesan canon for all employees working an average of 20-29 hrs/wk			
<u>Disability Insurance</u>			
Short Term Disability (lay employees only – Clergy disability provided as part of Pension benefit with CPG.)	405	.44% of First \$108,000 of Compensation	
Long Term Disability (lay employees only – Clergy disability provided as part of Pension benefit with CPG.)	408	.98% of First \$108,000 of Compensation	
<u>Unemployment Insurance</u>			
School Employees	402	1% of First \$72,000 of Compensation	
Other Employees		0.4% of First \$72,000 of Compensation	
<u>Lay Pension</u>			
Not billed by Diocese via benefit invoice.		Employer base contribution 5% of salary + match employee contribution \$to\$ up to 4% of salary	