



COMPASS ROSE PUBLIC SCHOOLS

September 1, 2021- August 31, 2022
Hourly Employees

MEDICAL	
BASE PLAN (MTBCB038)	
EMPLOYEE ONLY	\$16.18
EMPLOYEE + SPOUSE	\$258.06
EMPLOYEE + CHILD(REN)	\$165.12
EMPLOYEE + FAMILY	\$407.15
BUY-UP PLAN (MTBCP012)	
EMPLOYEE ONLY	\$84.42
EMPLOYEE + SPOUSE	\$415.16
EMPLOYEE + CHILD(REN)	\$287.95
EMPLOYEE + FAMILY	\$618.70
Compass Rose Public Schools contributes \$170 semi-monthly toward employee's medical plan. Premiums listed reflect the employee cost after the employer contribution.	

HEALTH REIMBURSEMENT ARRANGEMENT	
EMPLOYEE ONLY	\$1,000
EMPLOYEE + SPOUSE	\$2,000
EMPLOYEE + CHILD(REN)	\$2,000
EMPLOYEE + FAMILY	\$2,000
Compass Rose Public Schools contributes toward employee's and participating members HRA.	

VISION	
EMPLOYEE ONLY	\$2.24
EMPLOYEE + SPOUSE	\$6.50
EMPLOYEE + CHILD(REN)	\$6.97
EMPLOYEE + FAMILY	\$11.42
Compass Rose Public Schools contributes \$2.50 semi-monthly toward employee's vision plan. Premiums listed reflect the employee cost after the employer contribution.	

Accident Insurance	
Employee Only	\$4.97
Employee & Spouse	\$8.27
Employee & Children	\$9.50
Family	\$14.94

DENTAL	
BASE PLAN (DTNLM40)	
EMPLOYEE ONLY	\$3.57
EMPLOYEE + SPOUSE	\$12.13
EMPLOYEE + CHILD(REN)	\$16.06
EMPLOYEE + FAMILY	\$27.50
BUY-UP PLAN (DTNLM40)	
EMPLOYEE ONLY	\$11.72
EMPLOYEE + SPOUSE	\$28.43
EMPLOYEE + CHILD(REN)	\$35.92
EMPLOYEE + FAMILY	\$58.19
Compass Rose Public Schools contributes \$5 semi-monthly toward employee's dental plan. Premiums listed reflect the employee cost after the employer contribution.	

LIFE INSURANCE	
BASIC LIFE AND AD&D	
EMPLOYEE	\$50,000
Compass Rose Public Schools provides a \$50,000 Life and Accidental Death & Dismemberment insurance at no cost to the employee.	
VOLUNTARY LIFE	
EMPLOYEE AGE/ \$1,000	
0-29	\$0.038
30-34	\$0.044
35-39	\$0.066
40-44	\$0.101
45-49	\$0.159
50-54	\$0.258
55-59	\$0.409
60-64	\$0.627
65-69	\$1.049
70+	\$1.837
VOLUNTARY AD&D	
PER \$1,000	\$0.0190

DISABILITY	
LONG TERM DISABILITY	
EMPLOYEE	60%
Compass Rose Public Schools provides long term disability insurance at no cost to the employee.	

SHORT TERM DISABILITY	
EMPLOYEE AGE/ \$10 PER WEEK UP TO 60%	
<24	0.28
25-29	0.245
30-34	0.245
35-39	0.19
40-44	0.065
45-49	0.090
50-54	0.065
55-59	0.11
60-64	0.105
65-69	0.115
70+	0.125
Compass Rose Public Schools contributes 50% of the monthly premium for short term disability insurance.	

Critical Illness	Per \$5,000
<24	\$1.11
25-29	\$1.11
30-34	\$1.56
35-39	\$1.56
40-44	\$2.91
45-49	\$2.91
50-54	\$6.23
55-59	\$6.23
60-64	\$8.72
65-69	\$17.33
70+	\$17.33