**MOYLAN’S INSURANCE UNDERWRITERS, INC.**

**NETCARE LIFE AND HEALTH INSURANCE COMPANY**

Research Corporation of the University of Guam employees chose either the Advantage POS Plan or the SmartChoice HSA 1500 Plan.

RCUOG (i.e. Grant) covers 70% of the annual premium. Employees who participate in a medical coverage plan are automatically included in the Vision Rider plan. The Dental Plan is optional.

Plan premiums are show below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CLASS** | **ADVANTAGE POS PLAN Per Month** | **ADVANTAGE**  **Annual Premium** | **SMARTCHOICE HSA 1500 Per month** | **SMARTCHOICE**  **Annual Premium** |
| SINGLE | $187.45 | $2249.40 | $103.41 | $1240.92 |
| COUPLE | $374.60 | $4495.20 | $208.35 | $2500.20 |
| FAMILY | $602.83 | $7233.96 | $336.32 | $4035.84 |

Dental and Vision Rider plan costs per month:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CLASS** | **SMILE PLAN $1000 Max Per Month** | **SMILE PLAN $1000**  **Annual Premium** | **VISION RIDER**  **Per Month** | **VISON RIDER**  **Annual Premium** |
| SINGLE | $39.00 | $468 | $7.00 | $84 |
| COUPLE | $74.00 | $888 | $14.00 | $168 |
| FAMILY | $99.00 | $1188 | $19.00 | $228 |

**MAXIMUM EMPLOYER SHARE OF FAMILY PLAN HEALTHCARE COSTS FOR GRANT BUDGETING PURPOSES**

The maximum amount a PI may have to budget for healthcare benefits for an employee is calculated on the more expensive Advantage plan at the family rate:

|  |  |  |
| --- | --- | --- |
| **CLASS** | **PLAN** | **TOTAL ANNUAL PREMIUM** |
| FAMILY | ADVANTAGE POS PLAN | $602.83 x 12 = $7233.96 |
| FAMILY | SMILE DENTAL | $99 x 12 = $1188 |
| FAMILY | VISION RIDER | $19 x 12 = $228 |
| TOTAL |  | $8649.96 |

|  |  |  |
| --- | --- | --- |
| **TOTAL ANNUAL PREMIUM FAMILY PLAN** | **EMPLOYER SHARE** | **EMPLOYEE SHARE** |
| $8649.96 | $6054.97 | $2594.98 |

EMPLOYER SHARE IS 70% of the annual premium. Employee share is 30% of the annual premium.

**BREAKDOWN OF HEALTHCARE COSTS FOR SINGLE PLAN**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CLASS** | **PLAN** | **TOTAL** | **Employer Share** | **Employee Share** |
| SINGLE | SMARTCHOICE HSA 1500 | $1240.92 | $868.64 | $372.27 |
| SINGLE | ADVANTAGE POS PLAN | $2249.40 | $1574.58 | $674.82 |
| SINGLE | VISION RIDER | $84 | $58.80 | $25.20 |
| SINGLE | SMILE DENTAL | $468 | $327.60 | $140.40 |

EMPLOYER SHARE IS 70% of the annual premium. Employee share is 30% of the annual premium.

**BREAKDOWN OF HEALTHCARE COSTS FOR COUPLE PLAN**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CLASS** | **PLAN** | **TOTAL** | **Employer Share** | **Employee Share** |
| COUPLE | SMARTCHOICE HSA 1500 | $2500.20 | $1750.14 | $750.06 |
| COUPLE | ADVANTAGE POS PLAN | $4495.20 | $3146.64 | $1348.56 |
| COUPLE | VISION RIDER | $168 | $117.60 | $50.40 |
| COUPLE | SMILE DENTAL | $888 | $621.60 | $266.40 |

EMPLOYER SHARE IS 70% of the annual premium. Employee share is 30% of the annual premium.

**BREAKDOWN OF HEALTHCARE COSTS FOR EMPLOYEE SHARE PER PAY PERIOD**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CLASS** | **PLAN** | **TOTAL** | **Employee Share** | **Per Pay Period** |
| SINGLE | SMARTCHOICE HSA 1500 | $1240.92 | $372.27 | $14.31 per PP |
| SINGLE | ADVANTAGE POS PLAN | $2249.40 | $674.82 | $25.95 per PP |
| SINGLE | VISION RIDER | $84 | $25.20 | .97 per PP |
| SINGLE | SMILE DENTAL | $468 | $140.40 | $5.40 per PP |
|  |  |  |  |  |
| COUPLE | SMARTCHOICE HSA 1500 | $2500.20 | $750.06 | $28.84 per PP |
| COUPLE | ADVANTAGE POS PLAN | $4495.20 | $1348.56 | $51.86 per PP |
| COUPLE | VISION RIDER | $168 | $50.40 | $1.93 per PP |
| COUPLE | SMILE DENTAL | $888 | $266.40 | $10.24 per PP |
|  |  |  |  |  |
| FAMILY | SMARTCHOICE HSA 1500 | $4035.85 | $1210.75 | $46.56 per PP |
| FAMILY | ADVANTAGE POS PLAN | $7233.96 | $2170.18 | $83.46 per PP |
| FAMILY | VISION RIDER | $228 | $68.40 | $2.63 per PP |
| FAMILY | SMILE DENTAL | $1188 | $356.40 | $13.70 per PP |

**Other information**

* RCUOG employees have 30 days from the first day of employment to enroll in a NetCare plan.
* Forms and supporting documents must be submitted to NetCare before the 20th of the month prior to the effective date of coverage. Coverage becomes effective the first day of the following month.
* The open enrollment period will be held each year during the month of December.