

2024 EMPLOYEE BENEFITS SUMMARY



Hubbard County offers a menu of benefits to defined benefit eligible employees. Benefit selections are effective the 1st of the month following 30 days of benefit eligible employment. Changes may be made during the annual open enrollment; employee is responsible to inform Human Resources of changes due to qualifying events (*i.e. marriage, divorce, birth or adoption of a child, death, child turning 26, and losing coverage*). Premiums will be rounded to be divisible by two within 24 pay periods.

Hubbard County, via Lincoln Financial, provides a term life and accidental death and dismemberment insurance coverage to each defined benefit eligible employee at no cost to the employee.

Health Coverage	Employer's Contribution	Eligible to Participate in Cafeteria Plan
Employee Elects County Coverage	1. Health coverage option w/HSA 2. Health coverage option w/VEBA	FSA-medical FSA-dependent care Other voluntary benefits (pre-tax) No cash back option
Employee Waives County Coverage (opt-out)	VEBA (limited scope: dental, vision, and when deductible is met can cover qualified medical expenses) (Employee must provide proof of alternate health coverage.)	FSA-medical FSA-dependent care Other voluntary benefits (pre-tax) No cash back option

Health Coverage

Medica Choice Passport <blue> dollars available to employee for Cafeteria Plan (pre-tax) <red> employee out of pocket dollars

Single Plan Deductible	Single Plan Monthly Premium	County Contribution \$884.70 monthly (less \$133.34 to HSA or VEBA)	Plan Deductible Individual/Family	Family Plan Monthly Premium	County Contribution \$1,575.12 monthly (less \$266.68 to HSA or VEBA)
1,600	\$995.48	\$244.12	**1,600 PP / 3,200 Family	\$2,108.48	\$800.04
3,200	\$884.08	\$132.72	3,200 PP / 6,400 Family	\$1,872.54	\$564.10
5,500	\$771.32	\$19.96	5,500 PP / 11,000 Family	\$1,633.68	\$325.24
7,050	\$712.78	\$38.58	7,050 PP / 14,100 Family	\$1,509.70	\$201.26

Essentia Choice Care with Medica

Single Plan Deductible	Single Plan Monthly Premium	County Contribution \$884.70 monthly (less \$133.34 to HSA or VEBA)	Plan Deductible Individual/Family	Family Plan Monthly Premium	County Contribution \$1,575.12 monthly (less \$266.68 to HSA or VEBA)
1,600	\$796.38	\$45.02	**1,600 PP / 3,200 Family	\$1,686.78	\$378.34
3,200	\$707.28	\$44.08	3,200 PP / 6,400 Family	\$1,498.02	\$189.58
5,500	\$617.06	\$134.30	5,500 PP / 11,000 Family	\$1,306.94	\$1.50
7,050	\$570.22	\$181.14	7,050 PP / 14,100 Family	\$1,207.76	\$100.68

**non-embedded family deductible

Look-back benefit eligible: An employee not benefit eligible but is put into a look-back period. Based on the look-back period established by the County, an employee may be deemed benefit eligible, per federal law to establish health coverage eligibility.

HR CONNECTION

Detailed coverage of benefits, including health coverage summary of benefits and creditable coverage notices, may be found at HR Connection or see the 'Benefit Contacts' listed at the end of this brochure.

Per Minnesota law, only licensed agents may discuss insurance plans specific to individuals.

For more information go to: [HR Connection](#)

SAVING/SPENDING ACCOUNTS

(PRE-TAX BENEFIT)

County employees may participate in saving/spending accounts for unreimbursed health, dental, vision, and dependent care expenses. There are three types of saving/spending accounts administrated by WEX (FSA/HSA) and BPAS (VEBA): Saving/spending amounts are direct-deposited through payroll deductions.

Health Savings Account (HSA) is only available to those enrolled in a High Deductible Health Plan (HDHP) and are not covered by any other health plan (unless the other plan is a HDHP). If option 1 (page 1) is selected, you will have an employer contribution made to the HSA. Annual IRS HSA contributions may not exceed the annual statutory maximums (**2024 IRS contribution limits: individual \$4,150 / family \$8,300 / age 55 and over can contribute an additional \$1,000 annually**). An HSA can be paired with a VEBA and/or FSA but the VEBA and/or FSA is limited to eligible dental, vision, and post-deductible expenses if actively contributing to an HSA. Account balances, if not used, roll over to subsequent year/s. An HSA is portable and participant's rights to the account are non-forfeitable.

Voluntary Employees' Beneficiary Association Account (VEBA) features a tax-free trust that public employers can use to fund health plan benefits. If option 2 is selected, you will have an employer contribution made to the VEBA. A VEBA can be paired with an HSA but the VEBA is limited to eligible dental, vision, and post-deductible expenses if actively contributing to an HSA. Employee can "freeze" the VEBA account for future expenses. If employee elects to waive (opt-out) HDHP coverage, you will have an employer contribution made into a VEBA-limited scope. A VEBA is portable and participant's rights to the account are non-forfeitable.

Flexible Spending Account (FSA) features the ability to pay for qualified medical or dependent care expenses. Once chosen, the annual amount is on a **pre-tax** basis and is irrevocable for the 12-month plan year, unless due to a qualifying event.

- **Medical:** Enrollment is completed on an annual basis prior to the beginning of a calendar year for current employees eligible for group health plans, they do not have to be enrolled in the plan. The annual maximum IRS limits based at time of open enrollment for **FSA unreimbursed medical expenses** is \$3,200. An FSA can be paired with an HSA and/or VEBA but the FSA/VEBA is limited to eligible dental, vision, and post-deductible expenses if actively contributing to an HSA. **NOTE:** Currently, by law, up to a \$640 rollover of 2024 FSA medical dollars can be used for expenses incurred in 2023.
- **Dependent care:** In most cases, the annual maximum FSA **dependent care expenses** are \$5,000.

Voluntary (Ancillary Benefits)

ACCIDENT INSURANCE-SUN LIFE

(Non-Occupational Coverage). (pre-tax benefit)
No change in rates for 2024.

Plan	Monthly Premium
Employee	\$13.06
Employee + Child(ren)	\$20.20
Employee + Spouse	\$17.10
Family	\$24.24

DENTAL INSURANCE-MET LIFE

(pre-tax benefit)
Six percent change in rates 2024.

Plan	Monthly Premium
Employee	\$32.88
Employee + 1	\$64.42
Employee + Family	\$117.72

CRITICAL ILLNESS INSURANCE-SUN LIFE

(pre-tax benefit)

No change in rates for 2024.

Critical Illness insurance pays a fixed, lump sum benefit if you're diagnosed with a covered condition such as heart attack, stroke, major organ failure, kidney disease, invasive cancer, etc. *Premium for spouse is based on employee's age and spouse's tobacco use status at time of enrollment.

VISION INSURANCE-VSP

(pre-tax benefit)

Twelve percent change in rates 2024.

Plan	Monthly Premium
Employee	\$7.54
Employee + 1	\$12.10
Employee + Child(ren)	\$12.34
Family	\$19.92

HOSPITALIZATION INSURANCE-CIGNA

(after-tax benefit)

No change in rates for 2024.

The plan pays a fixed cash benefit for hospital stays resulting from a covered injury or illness. Benefits can help pay for out-of-pocket medical and non-medical costs.

Plan	Monthly Premium
Employee	\$19.78
Employee + Child(ren)	\$35.30
Employee + Spouse	\$40.88
Family	\$56.40

SHORT-TERM DISABILITY-HARTFORD

(after-tax benefit)

No change in rates for 2024.

Benefits begin on the 1st day of an accident or 8th day of an illness/pregnancy and can be payable up to 13 weeks. Coverage may be purchased from weekly benefits of \$100 to \$1500 in \$100 increments, not to exceed 60% of weekly gross earnings.

LONG-TERM DISABILITY-LINCOLN FINANCIAL

(after-tax benefit)

No change in rates for 2024.

New employees may enroll without a health history requirement. Current LTD insured employees may increase their LTD during the annual open enrollment, without having to provide a health history. The amount of increase is subject to the normal pre-existing conditions period (subject to a 6/6/24 pre-existing condition limitation). Employees not currently participating may apply and are not subject to a health history during the annual open enrollment.

Age	Rates are per \$100/monthly benefit. Options are any \$100 increment between \$500 and \$5,000 with a maximum of 60% of monthly income (rounded to nearest \$100)
Under 25	.20
25-29	.24
30-34	.36
35-39	.44
40-44	.72
45-49	1.08
50-54	1.36
55-59	1.60
60-64	1.64
65 +	1.58

VOLUNTARY LIFE INSURANCE

(AFTER-TAX BENEFIT)

- National Conference on Public Employee Retirement Systems (NCPERS): The Prudential Insurance Company administers a group decreasing term life insurance provided at a fee of \$16.00/month. Information may be accessed on the web at www.ncpers.org.
- Lincoln Financial: New hires may elect coverage without health history up to the guaranteed issue of \$130,000 for themselves, and up to \$30,000 for their spouse, and \$10,000 for each child up to age 26. Additional Life Insurance/Accidental Death & Dismemberment (AD&D) coverage may be purchased by employees in \$5,000 increments (not to exceed 7 x's an employee's income) or up to \$300,000. A spouse's coverage may be purchased in \$5,000 increments up to 100% of the employee's coverage not to exceed \$300,000. No change in rates for 2024.

2024 Rates										
Employee Spouse Life Insurance	Attained age	Under 25-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74
	Rate per \$1000 coverage monthly	\$.064	\$.084	\$.124	\$.196	\$.288	\$.444	\$.684	\$ 1.056	\$ 2.46
\$10,000										
Child Insurance		Rate per month					\$2.34			

2024 HOLIDAYS

Holiday	Date	Holiday	Date
New Year's Day	Monday, January 1, 2024	Independence Day	Thursday, July 4, 2024
Martin Luther King Day	Monday, January 15, 2024	Labor Day	Monday, September 2, 2024
President's Day	Monday, February 19, 2024	Veterans' Day	Monday, November 11, 2024
Friday before Easter	Friday, March 29, 2024	Thanksgiving Day	Thursday, November 28, 2024
Memorial Day	Monday, May 27, 2024	Day after Thanksgiving	Friday, November 29, 2024
Juneteenth Day	Wednesday, June 19, 2024	Christmas Eve 12:30-4:30*	Tuesday, December 24, 2024
		Christmas Day	Wednesday, December 25, 2024

Note: Holidays listed differ by respective schedule – alternate schedule reflects Indigenous Peoples' Day (Monday, October 14, 2024) in place of the Friday after Thanksgiving. *Christmas Eve – half day 12:30 – 4:30 p.m.

2024 PAYROLL SCHEDULE

2024 Pay Period from	to	Pay Dates	Pay Period from	to	Pay Dates
12/17/2023	12/30/2023	01/12/2024	06/16/2024	06/29/2024	07/12/2024
12/31/2023	01/13/2024	01/26/2024	06/30/2024	07/13/2024	07/26/2024
01/14/2024	01/27/2024	02/09/2024	07/14/2024	07/27/2024	08/09//2024
01/28/2024	02/10/2024	02/23/2024	07/28/2024	08/10/2024	08/23/2024
02/11/2024	02/24/2024	03/08/2024	08/11/2024	08/24/2024	09/06/2024
02/25/2024	03/09/2024	03/22/2024	08/25/2024	09/07/2024	09/20/2024
03/10/2024	03/23/2024	04/05/2024	09/08/2024	09/21/2024	10/04/2024
03/24/2024	04/06/2024	04/19/2024	09/22/2024	10/05/2024	10/18/2024
04/07/2024	04/20/2024	05/03/2024	10/06/2024	10/19/2024	11/01/2024
04/21/2024	05/04/2024	05/17/2024	10/20/2024	11/02/2024	11/15/2024
05/05/2024	05/18/2024	05/31/2024	11/03/2024	11/16/2024	11/27/2024
05/19/2024	06/01/2024	06/14/2024	11/17/2024	11/30/2024	12/13/2024
06/02/2024	06/15/2024	06/28/2024	12/01/2024	12/14/2024	12/27/2024

Direct deposit is mandatory for all Hubbard County employees. Pay checks will be automatically deposited into checking and/or savings accounts on payday. Employee must have an existing account/s; up to four different accounts in up to two different financial institutions.

Digital Time Card recording of hours worked is provided via UKG. Employee pay stubs with current gross pay, tax withholdings, other deductions and the net pay which has been deposited into employee account/s is available at nw18.ultipro.com.

Employee Assistance Program (EAP): Hubbard County recognizes that problems of a personal nature can have an adverse effect on an employee's job performance and provides EAP as a resource to employees. EAP is a voluntary program that provides short term, no cost, confidential counseling services for employees and immediate family members when facing problems with relationships, finances, alcohol and drug use, work, stress, or other personal problems. Employee and/or family members can contact a qualified counselor, 24 hours a day, by calling The Sand Creek Group, Ltd. at **1-800-550-MCIT (6248)**.

Other benefits, such as **Paid Time Off (PTO), jury duty or bereavement leave** are referenced in the Personnel Policy and/or specific Union contracts.

RETIREMENT PLANNING

Public Employees Retirement Association of Minnesota (PERA): PERA is intended to provide public employees with retirement benefits. Counties and employees are required by law to participate in PERA. At retirement a monthly annuity is paid with the amount of the annuity dependent upon age, length of service and total contributions. An employee who terminates their employment prior to retirement age may receive their contributions plus interest, or they may elect to leave their contributions with PERA and qualify for a full annuity at retirement age, or a reduced annuity as early as age 55.

2024 PERA contributions

Plan	Employee	Employer
Coordinated	6.50%	7.50%
Police/Fire	11.80%	17.70%
Correctional	5.83%	8.75%
Defined Contribution (optional)	5.00%	5.00%

Voluntary Deferred Compensation (plans can be pre-tax (457b) and/or after-tax deductions (Roth)): Eligible employees may participate in the **MN State Deferred Compensation (MSRS) Plans** by payroll deduction. Information may be obtained by calling Cody Anderson, Retirement Counselor, (218) 349-5444. Plan information and account accessibility is available at www.msrs.state.mn.us.

BENEFIT CONTACTS

Benefit Type	Company Name	Contact Person	Phone Number(s)/Email(s)
Accident/Critical Illness / Life Insurance Dental / Vision / Hospital Insurance Long-Term & Short-Term Disability	Integrity Employees Benefits, LLC www.HRConnection.com	Bill Dehmer	(866) 437-7977 bill.dehmer@integrityeb.com
Health Insurance	Medica National Insurance Services (NIS)	Vicki Christianson, Regional Account Manager Mari Wagner, Account Manager Bill Chukuske, Employee Benefits Consultant	(701) 293-4703 vicki.christianson@medica.com (612) 720-4289 mwagner@nisbenefits.com (507) 221-0630 (507) 828-9978 bchuk@nisbenefits.com
Health Savings Account (HSA) Flexible Spending Account (FSA) Voluntary Employees' Beneficiary Association (VEBA)	WEX WEX - BPAS	Customer Service	(866) 451-3399 customerservice@wexhealth.com
PERA	www.mnpera.org		(800) 652-9026