

Welcome to

# Island Health



## Employee Benefits Guide

We are excited to present our comprehensive benefits package, including medical, dental and vision coverage, life & AD&D insurance, long-term disability, long-term care, flexible spending accounts, retirement and deferred compensation plans, tuition assistance, paid time off and more!

Island Health offers benefits through the Washington State Health Care Authority's Public Employees Benefits Board. Through PEBB, you can choose from a variety of healthcare plans.

### Participation

Eligible employees can participate in benefit plans on the first day of the month following 60 days of employment, with the exception of our deferred compensation plan which begins immediately after employment. Your level of benefits will vary according to your assigned FTE (Full-Time Equivalent), or hours worked per week.

### Enrollment & Support

Human Resources staff are available to help you through the enrollment process and beyond. Contact Lawanda Hampton at 360.299.4284 (x4284) or [Lawanda.Hampton@islandhospital.org](mailto:Lawanda.Hampton@islandhospital.org) for assistance.

Specific plan information can be found online at <https://www.hca.wa.gov/employee-retiree-benefits/public-employees>.



# 2024

## Contact Information

|                                  |  |
|----------------------------------|--|
| Kaiser Permanente of WA          | 866.648.1928   |
| Kaiser Permanente of WA CDHP/HSA | 877.873.8823   |
| Uniform Medical Plans            | 888.849.3681   |
| Uniform Medical CDHP/HSA         | 844.351.6853   |
| DeltaCare                        | 800.650.1583   |
| Uniform Dental                   | 800.537.3406   |
| Willamette Dental                | 855.433.6825   |
| Employee Assistance Program      | 800.467.5281   |
| Retirement: Corebridge Financial | Lisa Turner, CFS<br><a href="mailto:Lisa.turner@corebridgefinancial.com">Lisa.turner@corebridgefinancial.com</a><br>425.977.5283 |

## Island Health Human Resources

Main x4285 or 360.299.4285  
[humanresources@islandhospital.org](mailto:humanresources@islandhospital.org)

# Benefit Eligibility

| Benefit  | Full & Part Time<br>0.6-1.0 FTE<br><i>(Scheduled minimum 24 hours/ week)</i>   | Part Time<br>0.5-0.59 FTE<br><i>(Scheduled minimum 20 hours/ week)</i>               | Casual Part Time<br>0.1-0.49 FTE<br><i>(Scheduled less than 20 hours/week)</i> | Reserve<br>Per Diem<br><i>(No scheduled hours)</i> |
|--|--|--|--|--|
| <b>Medical &amp; Base Benefits</b><br><i>(Dental, Vision, Basic Life, AD&amp;D and Long-Term Disability)</i> | Eligible<br>Hospital pays for 100% of the lowest cost medical plan and base benefits   | Eligible<br>Hospital pays for 100% of the lowest cost medical plan and base benefits | Not eligible   | Not eligible                                       |
| <b>Supplemental Life &amp; AD&amp;D Insurance, LTD &amp; Long-Term Care</b>                                  | Eligible at employee's expense   | Eligible at employee's expense   | Not eligible   | Not eligible                                       |
| <b>Retirement Plan</b>   | Eligible   | Eligible   | Not eligible   | Not eligible                                       |
| <b>Deferred Compensation</b>   | Eligible   | Eligible   | Eligible for 457 plan only   | Eligible for 457 plan only                         |
| <b>Flexible Spending*</b>  | Eligible   | Eligible   | Not eligible   | Not eligible                                       |
| <b>Paid Time Off &amp; Extended Illness Benefit</b>  | Eligible<br>Available for use after 90 days  | Eligible<br>Available for use after 90 days  | Not eligible   | Not eligible                                       |
| <b>Bereavement Leave*</b>  | Eligible immediately for 4-5 days of pay for any scheduled work day for qualifying family members  |  |  |  |
| <b>Educational Leave*</b>  | Eligible after 12 months of employment<br>Leave of Absence for up to 1 year for job-related, pre-approved programs   |  |  |  |
| <b>Jury Duty Pay*</b>  | Eligible immediately for any scheduled days of work missed   |  |  |  |
| <b>Tuition Reimbursement*</b>  | Eligible after 12 months of employment   | Not eligible   | Not eligible   | Not eligible                                       |
| <b>Aflac*</b>  | Eligible<br>Payroll deductions allowed   | Eligible<br>Payroll deductions allowed   | Eligible<br>Direct bill  | Eligible<br>Direct bill                            |
| <b>Employee Assistance Program (EAP)*</b>  | Eligible<br><a href="http://www.FirstChoiceEAP.com">www.FirstChoiceEAP.com</a> Username: islandhealthcap<br>Free, confidential short-term counseling, crisis intervention 1.800.467.5281 |  |  |  |

\*For more information, contact Human Resources.

## PEBB: Medical Insurance & Base Benefits

Available to employees assigned Full-Time (.5 FTE and above)

### Medical Insurance

Choose from several plans offered by PEBB. Medical insurance can be waived if desired. Vision is covered under each medical plan.

#### Kaiser Permanente

- WA Value
- WA Classic
- WA CDHP\*
- WA SoundChoice

#### Uniform Medical

- Classic
- Select\*
- Plus
- CDHP\*

\*Island Health pays 100% of employee's monthly premium for Uniform Select and both CDHP's for employees assigned 0.6 FTE and higher, and 50% for those assigned 0.5 to 0.59 FTE. Qualified dependents can be enrolled at your own expense.

### Base Benefits

Base benefits include dental, vision, life, AD&D and long-term disability insurance. These plans are fully funded by Island Health and can not be waived.

#### Dental Insurance

Choose from Uniform Dental, DeltaCare, and Willamette dental insurance for you and your qualified dependents—at no additional cost to you.

#### Life Insurance

Employees receive PEBB basic level life insurance of \$35,000 plus \$5,000 in Accidental Death and Dismemberment. This coverage can be increased for a small premium.

#### Long-Term Disability *(Optional premium coverage)*

PEBB provides basic level long-term disability with a maximum monthly benefit of \$240 with a 90-day waiting period. You will be automatically enrolled in employee-paid coverage unless you choose to decline it.

#### Long-Term Care Insurance *(Optional)*

Insurance for Long-Term Care Insurance is available for purchase.

## Paid Time Off (PTO), Paid Sick Leave (PSL) & Extended Illness Benefit (EIB)

If you work at least 20 hours per week, you will earn Paid Time Off (PTO) and Extended Illness Benefit (EIB) hours. All employees will earn one (1) hour of Paid Sick Leave for every 40 hours worked. These benefits begin to accrue immediately and can be used after 90 days of employment.

### Paid Time Off (PTO)

To be used for holidays, vacation, short-term illness and personal time. PTO benefits are accrued according to the years of employment at Island Health and is prorated for employees working less than 40 hours per week. Hospital based RNs accrue PTO according to [WSNA contract](#).

### Extended Illness Benefit (EIB)

Paid time off for an employee's own longer term illness or that of a family member. Full-time employees earn 4 hours each month, and those working less than 40 hours per week accrue a pro-rated amount. You can earn a maximum of 520 EIB hours.

| Years of Employment | Earned PTO Hours |
|---------------------|------------------|
| 0-3 years           | 148 hours        |
| 4-5 years           | 188 hours        |
| 6-7 years           | 196 hours        |
| 8-9 years           | 204 hours        |
| 10-14 years         | 228 hours        |
| 15-16 years         | 252 hours        |
| 17-20 years         | 260 hours        |
| 21+ years           | 268 hours        |

## Retirement

Corebridge Financial provides Island Health with deferred compensation and retirement plan options with convenient, automatic contributions by salary deduction.

### Deferred Compensation 403(b), Roth 403 and 457

Similar to a 401(k), Deferred Compensation plans provide retirement savings and employees are eligible immediately upon employment.

### 401(a) Retirement Plan

Eligible first January 1 or July 1 after 18 months of employment, Island Health will contribute into a 401(a) retirement plan if you participate in the 403(b) or Roth 403 plan. The employee must contribute at least 5% of their compensation in order to receive employer contribution of 6.1% - 6.5%.

# 2024 Monthly Rates

## Medical Insurance—Full Time (.6 FTE and above)

| Plan                    | Employee Only | Employee & Spouse | Employee & Children | Full Family |
|-------------------------|---------------|-------------------|---------------------|-------------|
| Kaiser—Classic          | \$166.95      | \$1,106.55        | \$871.65            | \$1,811.25  |
| Kaiser—Value            | \$152.76      | \$1,078.16        | \$846.81            | \$1,772.22  |
| Kaiser—CDHP             | \$0.00        | \$716.02          | \$544.69            | \$1,230.02  |
| Kaiser-Soundchoice      | 10.80         | \$794.26          | \$598.39            | \$1,381.84  |
| Uniform Medical—Classic | \$65.07       | \$902.79          | \$693.36            | \$1,531.08  |
| Uniform Medical—Select  | \$0.00        | \$772.66          | \$579.49            | \$1,352.15  |
| Uniform Medical—CDHP    | \$0.00        | \$733.65          | \$560.12            | \$1,254.26  |
| UMP Plus—UW Med ACN     | \$49.89       | \$872.43          | \$666.80            | \$1,489.34  |

## Medical Insurance—Part Time (.5 to .599 FTE)

| Plan                    | Employee Only | Employee & Spouse | Employee & Children | Full Family |
|-------------------------|---------------|-------------------|---------------------|-------------|
| Kaiser—Classic          | \$553.28      | \$1,492.88        | \$1,257.98          | \$2,197.58  |
| Kaiser—Value            | \$539.09      | \$1,464.49        | \$1,233.14          | \$2,158.55  |
| Kaiser—CDHP             | \$372.51      | \$1,102.35        | \$931.02            | \$1,616.35  |
| Kaiser-SoundChoice      | \$397.13      | \$1,180.59        | \$984.72            | \$1,768.17  |
| Uniform Medical—Classic | \$451.40      | \$1,289.12        | \$1,079.69          | \$1,917.41  |
| Uniform Medical—Select  | \$386.33      | \$1,158.99        | \$965.82            | \$1,738.48  |
| Uniform Medical—CDHP    | \$376.92      | \$1,119.98        | \$946.45            | \$1,640.59  |
| UMP Plus—UW Med ACN     | \$436.22      | \$1,258.76        | \$1,053.13          | \$1,875.67  |

## Life Insurance (Per \$1,000)

| Age   | Non-Smoker | Smoker  |
|-------|------------|---------|
| <25   | \$0.030    | \$0.039 |
| 25-29 | \$0.033    | \$0.046 |
| 30-34 | \$0.036    | \$0.060 |
| 35-39 | \$0.045    | \$0.069 |
| 40-44 | \$0.067    | \$0.077 |
| 45-49 | \$0.097    | \$0.117 |
| 50-54 | \$0.151    | \$0.179 |
| 55-59 | \$0.282    | \$0.334 |
| 60-64 | \$0.432    | \$0.508 |
| 65-69 | \$0.798    | \$0.978 |
| 70+   | \$1.190    | \$1.589 |

## Long Term Disability

| % of Monthly Wages | Rate   |
|--------------------|--------|
| 60%                | 0.0047 |
| 50%                | 0.0028 |

### Calculate your monthly premium:

$$\text{Gross Monthly Earnings} \times \text{Rate} = \text{Monthly Premium}$$

Employees are automatically enrolled in 60% coverage unless they enroll in 50% or decline coverage.

## Accidental Death & Dismemberment

| Level of Benefit          | Employee | Spouse  | Child   |
|---------------------------|----------|---------|---------|
| Monthly cost per \$10,000 | \$0.019  | \$0.019 | \$0.016 |