

# Yellowstone County

## SUMMARY OF BENEFITS

### ❖ **HEALTH INSURANCE (Self Insured –Blue Cross Blue Shield)**

**Traditional Plan** - \$500 annual deductible per person (3 person - \$1,500 family maximum); insurance pays **80%** (70% of allowable costs if not a Preferred Provider doctor. Percentage is dependent on rate charged versus BCBS usual & customary rate-UCR). After \$2,500 out-of-pocket per individual, (3 person - \$7,500 family maximum), insurance pays 100%.

**HDHP** - \$3,300 annual individual deductible; \$6,600 annual family deductible; insurance pays **100% medical**. (10% out of network differential)

**Please note:** The Yellowstone County Health Insurance plan does not have annual open enrollment elections.

Please notify Human Resources with any family status changes (i.e., birth, adoption, death, marriage, divorce or loss of previous eligible insurance coverage). Addition of dependents must be completed and received by Human Resources within 31 days of any status changes to become effective. (See “Special Enrollment Period”, in your Group Benefits Plan.)

### **PRESCRIPTION PROGRAM (Prime Therapeutics)**

Tier	Tier Description	Retail (30-day Supply)	Mail Order (90-day Supply)	Retail (90-day Supply)	Specialty (30-day Supply)
ACA	ACA preventive medications – Those drugs that are listed by the Affordable Care Act as mandatory coverage.	\$0 copay	\$0 copay	\$0 copay	\$0 copay
1	Generics	\$15	\$30	\$45	
2	Preferred Brand	\$40	\$80	\$120	
3	Non-preferred (Brand)	50%	50%	50%	
Specialty medications	Specialty drugs are defined as high cost prescription drugs that may require special handling and/or administration to treat chronic, complex conditions. Prime Therapeutic Specialty Direct Pharmacy is the chosen provider for specialty drug services.				\$150

As a Prime Therapeutics Pharmacy Plan Member, you can obtain prescription benefit and drug coverage detail to assist you in understanding your pharmacy benefit plan better, as well as view comprehensive health and wellness information. To get started go to the Prime Therapeutics website at: <https://www.primetherapeutics.com/> and follow the registration instructions and prompts for creating a Prime Therapeutics Portal Account. In order to create your Prime Therapeutics Member Portal account, you will need to wait until your benefits are active & you have received your insurance card.

**Traditional plan** - Pharmaceutical Maximum Out-of-Pocket - \$1,650 per calendar year-per person  
(2 persons - \$3,300.00 family maximum).

**High Deductible Health plan (HDHP)** – now have first dollar coverage on certain preventative medications -- these medications are not subject to the deductible before they are covered, plan members will only need to pay the applicable co-pay/co-insurance for these medications. HDHP plan - Pharmaceutical Maximum Out-of-Pocket – Additional \$1,650 per calendar year-per person after \$3,200 deductible is met. (Family - \$3,300.00)

**YellowstoneCRX** is an available option, on a voluntary basis, for a new, cost savings mail order drug program for name brand prescriptions administered by CRX International. There is **\$0 Co-pay** for all prescriptions offered through the program. Prescriptions are mailed directly to your home with no shipping or handling. For more information on the program or how to enroll, please contact CRX toll free at 1-866-488-7874. Website: [www.crxintl.com](http://www.crxintl.com) WebID: YELLOWSTONE  
Forms are also available on the Human Resource Intranet page.

### ❖ **DENTAL INSURANCE (BCBS) (Applies to both Traditional and HDHP health plans)**

**\$25** annual deductible per person; insurance pays **80%**, **up** to \$3,000 per calendar year.

Be sure to check out the Dental Discount Network list of providers that is available in Human Resources to ensure your provider is in network. You can be balance billed by non-network providers.

## **\$\$ PREMIUM COSTS FOR MEDICAL, DENTAL & PHARMACY INSURANCE \$\$**

August 1, 2025	Traditional Plan (\$500/\$1,500)	HDHP Plan (\$3,300/\$6,600)
Single – No Cost to the employee	\$495.00 /pp paid by County <b>\$0 – Cost to the employee</b>	\$421 /pp paid by County <b>\$74.00 /pp in employee HSA</b> <b>\$0 – Cost to the employee</b>
Spouse only	<b>\$290.00 /pp</b> \$495.00 / pp paid by County for EE	<b>\$173.00 /pp</b> \$495.00 / pp paid by County for EE
1 child	<b>\$181.00 /pp</b> \$495.00 / pp paid by County for EE	<b>\$80.00 /pp</b> \$495.00 / pp paid by County for EE
2 children	<b>\$361.00 /pp</b> \$495.00 / pp paid by County for EE	<b>\$233.00 /pp</b> \$495.00 / pp paid by County for EE
Family (3+ children)	<b>\$387.00 /pp</b> \$495.00 / pp paid by County for EE	<b>\$255.00 /pp</b> \$495.00 / pp paid by County for EE
Part-time single (.5 - .74 FTE)	<b>\$248.00 /pp paid by Employee</b> \$248.00 /pp paid by County for EE	<b>\$211.00 /pp paid by Employee + \$37.00 in HSA</b> \$211.00 /pp paid by County for EE
Part-time single (.75 - .99 FTE)	<b>\$124.00 /pp paid by Employee</b> \$372.00 /pp paid by County for EE	<b>\$106.00 /pp paid by Employee + \$56.00 in HSA</b> \$316.00 /pp paid by County for EE

### **❖ VISION PLAN (*MACo Healthcare/Allegiance*) Voluntary Plan**

Vision Plan - \$150 annual benefit towards eye exam, \$350 annual benefit towards 12-month supply contacts, prescription lenses and frame or prescription sunglasses. Reasonable monthly rates apply.

### **❖ LIFE INSURANCE (*Unum Life Insurance Company*) (\$10,000 minimum to \$50,000 maximum limit) Employer Paid**

Beneficiary receives 100% of BAS (Base Annual Salary) rounded up to the next 1,000. Includes AD&D benefits.

### **❖ SUPPLEMENTAL LIFE INSURANCE-Voluntary Plan - \$150,000 max limit. (\$200,000 combination limit of basic & supplemental)**

You may purchase supplemental life insurance with or without the AD&D benefits for up to 3 times your BAS not to exceed \$150,000. The premium rate is based on the amount you wish to purchase and your age rate. **Dependent Life:** Must have supplemental life to purchase. Option 1: Spouse \$5,000/Child \$2,500 for \$1.55 per mo (\$.78/pp) /family unit; Option 2: Spouse \$20,000/Child \$10,000 for \$6.20 per mo (\$3.10/pp)/family unit.

### **❖ SHORT TERM DISABILITY (*Unum Insurance Company*) – Employer paid**

This coverage provides weekly income to you if you are disabled for 7-days or more. Weekly benefits up to 60% of pre-disability pay. Benefits begin day after employee has exhausted all accrued sick leave and satisfied the 7-day elimination period.

### **❖ LONG TERM DISABILITY (*Unum Insurance Company*) – Employer paid**

This coverage provides a monthly income to you if you are disabled. Monthly benefits up to 60% of monthly pre-disability pay, which can be offset by disability retirement and Social Security Disability payments.

### **❖ FLEXIBLE SPENDING ACCOUNT / HEALTH SAVINGS ACCOUNT / DEPENDENT CARE / LIMITED (*Health Equity*)**

This is a tax-savings program that allows you to pay for insurance premiums, medical expenses and childcare costs with PRE-TAX dollars taken automatically from your paycheck. The program renews each October for the next calendar year.

### **❖ RETIREMENT PLAN (*PUBLIC EMPLOYEES RETIREMENT SYSTEM*) (Defined Benefit or Defined Contribution Plan)**

A mandatory pension program if you work at least part-time. You contribute 7.9% of earnings, with a match from the County of 9.07%. You are vested after 5 years, and benefits are payable at retirement. Employee's contributions are refundable upon termination. **Sheriff's Retirement**—You contribute 10.495% with a 13.215% match by employer.

### **❖ VACATION AND SICK LEAVE**

**Vacation** - New Employees-You earn 10 hrs/month (5 hrs/pp) (3 wks/year) and are eligible to take vacation after your 6-month probationary period. The complete vacation leave schedule is in the Employee Handbook.

**Sick leave** – You earn 8 hrs/month (4 hrs/pp) (12 days/year) and are eligible to use sick leave after 90 days.

**FMLA** – Allows for up to 12 weeks leave to care for family medical emergencies. Complete details in Human Resources.

**This is simply a brief summary of the benefit programs available. For a full description of benefits, please refer to your plan booklets or contact Human Resources – 256-2737.**