

Omni 2020 Insurance Policy

Attached, you will find the costs/coverage benefits of our company insurance benefits. Please note that only full time employees (those who work 36 hours/week for 90+ days) qualify for insurance through our company. Once an employee hits 90 days of full time hours, they are eligible to submit an insurance application (see attached). From the time an application is submitted, insurance will be effective within the next 30 days.

****Please make note of the following enrollment periods. IF YOU WOULD LIKE BENEFITS, YOU MUST ENROLL BEFORE THE FOLLOWING DATES. NO EXCEPTIONS.****

2020 Enrollment Periods	
Medical Insurance	Must enroll before 3/1/20
Dental Insurance	Must enroll between 3/1/20-4/1/20
Vision Insurance	Open Enrollment

FAQ's:

Q: What kind of coverage do these plans provide?

A: You can see all coverage details in the following pages.

Q: What if I sign up, and then need to cancel my plan?

A: An employee can cancel insurance coverage at any time. However, we require 30 days notice before a cancellation can become effective.

Q: What happens if I get cancelled or go on vacation and do not hit 36 hours one week?

A: An employee is still eligible for insurance if they do not fulfill the 36 hour requirement for one week. However, if the employee does not fulfill the 36 hour requirement for two consecutive weeks or two weeks within the same month, the employee will be responsible for a larger portion of the total cost for that pay period or insurance will be cancelled.

Q: I want to sign up, how do I pay for my portion?

A: As soon as your insurance becomes effective, you will begin seeing a deduction come out of your paycheck marked "HES" for health insurance. Because we pay weekly, a quarter of the monthly cost will come out of each paycheck.

Q: How do I sign up?

A: Just fill out the forms that are attached for all the insurance plans you'd like to sign up for and send them in to invoice@omnistaffingservices.com. You will receive a confirmation email from Joey saying that she's received your paperwork, and you will be added to the plan(s) within 30 days.

Q: I haven't received my card. Who do I call?

A: For health and dental insurance, your card will be mailed to the address you provided on your paperwork. Be sure it is correct there. For vision insurance, your local clinic will be able to look up your information... they do not provide a physical card. For further questions, call Joey at 509-855-5497.

Q: Which providers take these plans? Do I need to switch providers?

A: Please check the insurance website before signing up in order to make sure your provider accepts this insurance. You will also be able to find a provider in your area on this website.

Employee Cost: Basic Breakdown

Effective 3/1/20

Health Insurance - Premera Choice 2500 Silver				
Deductible \$2500				
Total Cost /month	Employer Portion /month	Employee Portion /month	+Spouse /month	+Child (0-20 years old) /month
\$512.69	\$384.51	\$128.18	+\$512.69	+\$324.36

Vision Insurance - VSP				
Voluntary - Paid by Employee in Full				
Total Cost /month	Employer Portion /month	Employee Portion /month	+Spouse /month	+Child /month
\$10.43	\$0	\$10.43	+\$10.43	+\$10.43

Dental Insurance - Principal				
Voluntary - Paid by Employee in Full				
Max \$3000/calendar year				
Total Cost /month	Employer Portion /month	Employee Portion /month	+Spouse /month	+Child /month
\$55.12	\$0	\$55.12	+\$55.12	+\$55.12

Employee Cost: Basic Breakdown (Cont.)

Employee Portion	Medical	Dental	Vision	Total (all 3)
Per Month	\$128.18	\$55.12	\$10.43	\$193.73
Per Week	\$32.05	\$13.78	\$2.61	\$48.44

Employee Portions +Spouse				
Employee Portion	Medical	Dental	Vision	Total (all 3)
Per Month	\$640.87	\$110.24	\$20.86	\$771.97
Per Week	\$160.22	\$27.56	\$5.22	\$193.00

Employee Portion +1 child				
Employee Portion	Medical	Dental	Vision	Total (all 3)
Per Month	\$452.54	\$110.24	\$20.86	\$583.64
Per Week	\$113.14	\$27.56	\$5.22	\$145.92