

MIDLANDS

orthopaedics, p.a.

2009-2010 MOPA Benefits Summary  
for employees who work at least 30 hours per week

- Medical and Rx coverage through Blue Cross Blue Shield of South Carolina; effective date is the first day of the month after 90 days of employment; employee basic health coverage is subject to a premium of \$25 per pay period; dental, dependent coverage and a high deductible health plan is available
- \$20,000 Life and Accidental Death & Dismemberment coverage through SunLife; effective date is the first day of the month after 90 days of employment; 100% employer paid.
- Short and Long Term Disability insurance through The Hartford; 60% (of pay) monthly benefit up to \$10,000 (guaranteed issue); 15 day elimination period for STD benefits; effective date is the first day of the month after 90 days of employment; 100% employer paid
- Health and Dependent Care Flexible Spending Accounts; effective date is the first day of the month after 90 days of employment; participation optional and 100% employee paid.
- Supplemental insurance policies available through Colonial Life and Provident Insurance companies; includes life, accident, cancer, and additional disability policies; participation optional and employee paid; effective date is the first day of the month after 90 days of employment
- Midlands Orthopaedics, PA 401(k) Profit Sharing Plan through The Principal Financial Group; Midlands matches 50% of employee contributions up to 6% of pay; 1 year service requirement prior to participation
- Annual Profit Sharing Contribution to 401(k) account- 3% of pay; 1 year service requirement for eligibility
- 7 paid holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving and the following Friday, and Christmas Day; no waiting period for holiday pay.  $\frac{3}{4}$  employees receive 6 hours of holiday pay
- Paid Time Off- 0 hours for the first 6 months; 40 hours effective the first day of the month following 180 days of employment; FT accrual of 10 hours/month (7.5 hrs/mth for  $\frac{3}{4}$  employees) beginning in with month 13
- \$150 Uniform Allowance for Clinical Employees; uniform sets provided annually to clerical employees who are required to wear them.

# PLAN COMPARISON & NEW PREMIUM AMOUNTS

**\* PLEASE REVIEW MEDICAL PLAN COMPARISON AS MEDICAL BENEFITS ARE CHANGING AND WILL AFFECT EACH PARTICIPANT\***

## Basic

## Enhanced

BCBS 2009-10	Ee cost biweekly	Ee Annual Cost	Ee cost biweekly	Ee Annual Cost
EE only med/rx	\$25.00	\$650.00	\$60.00	\$1,560.00
EE/CH med/rx	\$203.88	\$5,300.88	\$270.00	\$7,020.00
EE/SP med/rx	\$246.80	\$6,416.88	\$325.00	\$8,450.00
Family med/rx	\$300.45	\$7,811.82	\$397.00	\$10,322.00

  

	In Network	Out of Network	In Network	Out of Network
Deductible	\$750 (x3)	\$1,500 (3)	\$500 (x3)	\$1,000 (3)
Out of Pocket	\$2,500/\$5,000	\$5,000/\$10,000	\$1,500/\$3,000	\$1,500/\$3,000
Co-insurance	70%	50%	70%	50%
Primary MD office services	\$25, then 100%	Deductible, 50%	\$15; then 100%	Deductible, 50%
Specialist MD office services	\$50; then 100%		\$25; then 100%	
Other Physician services	deductible; 70%	Deductible, 50%	deductible; 70%	Deductible, 50%
Preventive care	100%	N/A	100%	N/A
Hospital; skilled nursing	deductible; 70%	\$250 co-pay, deductible, 50%	deductible; 70%	\$250 co-pay, deductible, 50%
Ambulance	deductible; 70%	deductible, 70%	deductible; 70%	Deductible, 70%
ER	deductible; 70%	deductible, 50%	deductible; 70%	deductible, 50%
Rx (mandatory generic) retail	\$20-generic/\$40-preferred/\$70-nonpreferred		\$15-generic/\$30-preferred/\$60-nonpreferred	
Rx (mandatory generic) mail	\$40-generic/\$80-preferred/\$140-nonpreferred		\$30-generic/\$65-preferred/\$120-nonpreferred	
Specialty Rx	\$100		\$100	

## HD

	Ee cost biweekly	Ee Annual Cost
EE only med/rx	\$20.00	\$520.00
EE/CH med/rx	\$198.22	\$5,153.76
EE/SP med/rx	\$239.95	\$6,238.74
Family med/rx	\$292.11	\$7,594.98

	In Network	Out of Network
Deductible	\$2650 (individual)/\$5250 (family)	\$2650 (individual)/\$5250 (family)
Out of Pocket	\$0	\$5000 (individual)/\$10000 (family)
Co-insurance	100%	60%
Primary MD office services	Deductible, 100%	Deductible, 60%
Specialist MD office svcs		
Other Physician services	Deductible, 100%	Deductible, 60%
Preventive care	100%	N/A
Hospital; skilled nursing	Deductible, 100%	Deductible, 60%
Ambulance	Deductible, 100%	Deductible, 100%
ER	Deductible, 100%	Deductible, 60%
Rx (mandatory generic) retail, mail & Specialty	Deductible, 100%	

**EE** = employee only

**EE/CH** = employee + children

**EE/SP** = employee + spouse

**Family** = employee + children + spouse

**HD** = high deductible plan

\* Due to a large increase in the HD premiums, no contributions will be made to employee HSA accounts by MOPA

\*If you currently participate in the High Deductible Health Plan and choose to switch to either the Basic or Enhanced plans, any deductible applied in 2009 under the HD plan will be applied to your lower deductible plan selection.