

DIOCESE OF COLUMBUS

PART-TIME EMPLOYEES ONLY

RATES EFFECTIVE - January 1, 2021 through December 31, 2021

Eligibility: All regular part-time employees who are **expected** to work at least 15 hours a week and **average** less than 30 hours per week are eligible for partial group benefits through the diocese. This includes Dental, Voluntary Life and Vision. The group health insurance plan is excluded. Temporary or seasonal employees are not eligible for group benefits. All part-time employees must be a paid employee receiving a W-2 form annually.

The following is a list of our carriers and rates that will be charged.

Aetna, P. O. Box 14094, Lexington, KY 40512-4094, 1-877-238-6200, www.aetna.com

Dental Enhanced Plan	Monthly Premium	Employee Share
Single	\$ 49.00	\$ 49.00
Single + One	97.00	97.00
Family	149.00	149.00
Dental Base Plan		
Single	28.00	28.00
Single + One	54.00	54.00
Family	95.00	95.00

The Standard - for more information, contact the Insurance Office at (614) 224-1221

Voluntary Life Insurance	Monthly Premium	Employee Share
See Rate Sheet in Benefits Brochure	Based on Age Band	Based on Age Band

Vision Service Plan (VSP), www.vsp.com, 1-800-877-7195; for more information, contact the Insurance Office at (614) 224-1221

Vision Service Plan (VSP) – Enhanced Plan	Monthly Premium	Employee Share
Single	\$ 10.00	\$ 10.00
Single + One	20.00	20.00
Family	31.00	31.00
Vision Service Plan (VSP) – Base Plan		
Single	\$ 6.00	\$ 6.00
Single + One	10.00	10.00
Family	15.00	15.00