

HACAP BENEFITS

(For employees scheduled to work 30 or more hours per week)

Deductions are made each pay period.



BENEFIT (Voluntary Insurance Plans)		
BENEFIT	EFFECTIVE DATE	EMPLOYEE COST
Health/Dental/Vision/Prescription Insurance* (Pre-tax)	First of the month following hire date unless hire date is on the first	See attached rate sheet.
Flexible Spending Accounts* Medical Reimbursement and Dependent Care Reimbursement (Pre-tax)	First of the month following hire date unless hire date is on the first	Medical FSA Minimum Annual Election Allowed: \$260/year Maximum Annual Election Allowed: \$3,300/year Dependent Care FSA Minimum Annual Election Allowed: \$260/year Maximum Annual Election Allowed: \$5,000/year
Voluntary Life (After-tax)	First of the month following hire date unless hire date is on the first	Varies – Age/Income rated (26 pay periods)
Long Term Disability (After-tax)	First of the month following hire date unless hire date is on the first	Varies – Income rated (26 pay periods)
Critical Illness Insurance (After-tax)	First of the month following hire date unless hire date is on the first	Varies – Age/Income rated (26 pay periods)
Accident Insurance (After-tax)	First of the month following hire date unless hire date is on the first	Varies – Age/Income rated (26 pay periods)
BENEFIT (Company Paid Benefits)		
BENEFIT	EFFECTIVE DATE	EMPLOYEE COST
Paid Time Off	First day of employment	Accrued on hours worked & paid release hours used 0 – 1 year = .054 per hour ≈ 14 days 1 – 5 years = .07 per hour ≈ 18 days More than 5 years = .093 per hour ≈ 24 days
Holidays 11 company paid holidays	First day of employment	New Year's Day, Martin Luther King Jr. Day, President's Day, Memorial Day, Juneteenth (Non-BU Only), Independence Day, Labor Day, Indigenous People's/Columbus Day (BU Only), Thanksgiving Day, Day after Thanksgiving, Christmas Eve, Christmas Day
Short Term Disability Non-work related (25-week limit)	Completion of one year employment	No cost to employee
Basic Life and AD&D Insurance \$25,000 \$11,250 after age 70 \$7,500 after age 75	First of the month following hire date unless hire date is on the first	No cost to employee
EAP (Employee Assistance Program): Provides a variety of counseling, consultations, resources, and coaching benefits for you and your family members. EAP benefits are cost-free to you, confidential, and available 24/7.		
RETIREMENT OPTIONS		
RETIREMENT OPTIONS	EFFECTIVE DATE	EMPLOYEE COST
Option 1: Iowa Public Employees Retirement System (IPERS) (Pre-tax)	First payroll check	-Employee contributes 6.29% of gross wages -HACAP contributes 9.44%
Option 2: 403 (b) (Pre-tax)	First payroll check	-Employee designates amount of contribution -HACAP contributes up to 9.44%
ADDITIONAL BENEFITS		
Corporate Advantage Partnership Education Program with Mount Mercy and Upper Iowa University		
Can change election at open enrollment each year or if employee experiences a qualifying life event		

HACAP BENEFITS

(For employees scheduled to work 30 or more hours per week)

Deductions are made each pay period.



2025 EMPLOYEE HEALTH INSURANCE COSTS

Per Pay Period (26 Times per year)

Wellmark

\$950 Deductible HMO

Full Time

\$83.74	Employee
\$170.13	Employee & Spouse
\$157.35	Employee & Children
\$414.88	Family

Part Time

\$92.12	Employee
\$187.14	Employee & Spouse
\$173.09	Employee & Children
\$456.37	Family

\$2,000 Deductible HMO

Full Time

\$75.48	Employee
\$153.19	Employee & Spouse
\$141.70	Employee & Children
\$373.48	Family

Part Time

\$83.02	Employee
\$168.51	Employee & Spouse
\$155.87	Employee & Children
\$410.82	Family

\$2,000 PPO

Full Time

\$85.85	Employee
\$174.43	Employee & Spouse
\$161.34	Employee & Children
\$425.41	Family

Part Time

\$94.44	Employee
\$191.88	Employee & Spouse
\$177.47	Employee & Children
\$467.95	Family

\$2,500 HDHP/HSA PPO

Full Time

\$110.96	Employee
\$233.62	Employee & Spouse
\$192.94	Employee & Children
\$523.69	Family

Part Time

\$122.05	Employee
\$256.99	Employee & Spouse
\$212.23	Employee & Children
\$576.06	Family