

Employee Class Definition



Complete multiple copies of this page for each type of employee eligible for benefits as listed in your organizations Employee Handbook. If all Employee's are treated the same, enter **ALL** in the Class Name field. If there no changes to an existing class, **Do Not** complete this form.

Prepared By

Purpose **New Class** **Edit to Existing Class** **Effective** /

Group Name

Class Name

Waiting & Orientation Periods
 A 30-Day Orientation Period is a 30-Day probationary period which occurs before any Benefit Waiting Period begins. It's very useful for departments or types of employee where turn-over of personnel is high. Benefit Waiting Periods are the length of time after an employee is hired before their benefits begin. Benefit Waiting Periods are applied after any 30-Day Orientation Period.

30-Day **Orientation** Period **No** **Yes**

Benefits Waiting Period

Date of Hire or 1st of Next Month
The 1st day of the month following date of hire or Date of Hire if it is the 1st day of the month

Always 1st of Next Month

30-Days 1st day of next month following Date of Hire + 30-days

60-Days 1st day of next month following Date of Hire + 60-days

Contribution Details
 Use the space provided below to describe in detail who (group or employee) contributes what towards the cost of each type of coverage offered. Describe the dollar amounts or percentages of contributions required for each type of coverage offered. Specify specifically what the contribution applies to, i.e. Employee, Spouse and/or Dependent coverage.

Health Contribution Amount **Health Contribution Type** % \$

Health Coverage **Diamond Preferred** **Platinum** **Silver**
 Diamond Choice **Gold** **Bronze**

Dental Coverage **No** **Enhanced** **Standard**
 Is employee's dental coverage enrollment automatic with health coverage? **No** **Yes**

Vision Coverage **No** **Enhanced** **Standard**

Group Life Coverage **No** **20,000** **30,000**
 40,000 **50,000**

Do employees pay some or all of the cost of Group Life Coverage? **No** **Yes**

Is employee enrollment in Vision & Group Life Coverage mandatory? **No** **Yes**

Additional Life Coverage **No** **Yes**

Does the group pay for any Additional Life Coverage? **No** **Yes**

If **Yes**, what volume does group pay for (in thousands, minimum 20)?