



When considering Carteret Health Care, you are considering a *Life Change*, not just a job change. In addition to working for the best community hospital in Eastern North Carolina, you will find our pay competitive and benefit plans designed to meet your needs.

Employment Status Opportunities:

- ❖ **Regular Full-Time:** Employees who are budgeted to work a minimum of thirty-six (36) hours per week or seventy-two (72) hours per pay period or are designated as weekend option. These employees are entitled to receive all employee benefits and accrued PTO based on the hours paid.
- ❖ **Regular Part-Time:** Employees who are budgeted to work a minimum of twenty (20) to thirty-five (35) hours per week or forty (40) to seventy-one (71) hours per pay period. These employees are entitled to receive all employee benefits and accrued PTO based on hours paid.
- ❖ **PRN (As Needed)** - Employees who are not budgeted to work any set amount of hours and are used on a called when needed basis. These employees are entitled to mandated employee benefits only, as well as the hospital retirement savings accounts. These employees do not accrue PTO.

What's it worth?

What are employee benefits worth? The following formula gives you an idea of what Carteret Health Care contributes on your behalf:

\$Salary	Your Annual Salary
+	4% CHC annual contribution to your Money Purchase Pension Plan*
+	2% CHC 403(b) match*
+	8,341.00 CHC annual contribution to your medical premium (<i>based on employee only rate</i>)
+hourly rate*160	CHC Paid Time Off—20 days (<i>or 160 hours</i>) in your first year

Carteret Health Care also pays the premium for your Basic Life Insurance policy as well as your Long Term Disability.

Sample:

Someone who makes \$32,000 per year would receive an additional \$13,000 in benefits annually.

- 1,920.00 annual contribution* into their Money Purchase Pension Plan and 403(b)
- \$8,341.00 annual contribution towards their medical premium (*based on employee-only rate*)
- \$2,461.54 annual compensation for time off
- \$ 233.60 annual contribution for Long Term Disability Premium
- \$ 45.31 annual contribution for Basic Life Insurance Premium

*Annual contribution into the Money Purchase Pension Plan & 403(b) is dependent upon eligibility requirements.



Carteret Health Care

Summary of Benefits for Employees

Benefit	Who's Eligible	Who Pays	Effective Date	Benefit Summary															
Paid Time Off (PTO) <i>PTO Carry-Over</i>	Regular FT employees w/ benefits	CHC	1st day of work for holidays After 6 months for vacation or sick leave	1-12 months - 20 days/yr 1-3 years - 23 days/yr 4-9 years - 28 days/yr 10-14 years - 30 days/yr 15+ years - 33 days/yr															
Paid Time Off (PTO) <i>PTO Carry-Over</i>	Regular PT employees w/ benefits	CHC	Same as FT	1-12 months - 10 days/yr 1-3 years - 11.5 days/yr 4-9 years - 14 days/yr 10-14 years - 15 days/yr 15+ years - 16.5 days/yr															
Medical Insurance*	Regular FT & PT employees w/ benefits	CHC & EE	1st of month after 60 days	<p>Carteret Health Care offers three (2) options to choose from for Health Insurance:</p> <ul style="list-style-type: none"> ◇ Plan B features a \$1000 deductible and \$15/\$50 co-pays ◇ Plan C is a High Deductible Health Plan with a Health Savings Account. *(Includes an Employer Contribution) <p style="text-align: right;"><i>Bi-weekly Rates:</i></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Full Time Premium</th> <th style="text-align: center;">Plan B</th> <th style="text-align: center;">Plan C*</th> </tr> </thead> <tbody> <tr> <td>Emp Only</td> <td style="text-align: center;">\$58.36</td> <td style="text-align: center;">\$46.24</td> </tr> <tr> <td>Emp + Sp</td> <td style="text-align: center;">\$175.16</td> <td style="text-align: center;">\$149.85</td> </tr> <tr> <td>Emp + Ch(ren)</td> <td style="text-align: center;">\$144.27</td> <td style="text-align: center;">\$115.31</td> </tr> <tr> <td>Emp Fam</td> <td style="text-align: center;">\$235.87</td> <td style="text-align: center;">\$209.79</td> </tr> </tbody> </table>	Full Time Premium	Plan B	Plan C*	Emp Only	\$58.36	\$46.24	Emp + Sp	\$175.16	\$149.85	Emp + Ch(ren)	\$144.27	\$115.31	Emp Fam	\$235.87	\$209.79
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Dental Insurance*	Regular FT & PT employees w/ benefits	Employee	1st of month after 90 days	<p>Dental Diagnostic & Preventative - 100% Basic Care - 80% after \$25 deductible Major Care after 6 months at 50%</p> <p style="text-align: right;"><i>Bi-weekly rates</i></p> <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td>Employee Only</td> <td style="text-align: right;">\$ 15.27</td> </tr> <tr> <td>Employee & Child(ren)</td> <td style="text-align: right;">\$ 35.31</td> </tr> <tr> <td>Employee & Spouse</td> <td style="text-align: right;">\$ 31.81</td> </tr> <tr> <td>Employee & Family</td> <td style="text-align: right;">\$ 51.14</td> </tr> </tbody> </table>	Employee Only	\$ 15.27	Employee & Child(ren)	\$ 35.31	Employee & Spouse	\$ 31.81	Employee & Family	\$ 51.14							
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Vision Insurance* 1-800-507-3800 www.communityeyecare.net	Regular FT & PT employees w/ benefits	Employee	1st of month after 90 days	<p>Community Eye Care No co-pay for in-network eye exam No co-pay on materials Eyewear Allowance up to \$150</p> <p style="text-align: right;"><i>Bi-weekly rates</i></p> <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td>Employee Only</td> <td style="text-align: right;">\$ 5.62</td> <td style="text-align: right;">\$3.72</td> </tr> <tr> <td>Employee Plus One</td> <td style="text-align: right;">\$ 10.90</td> <td style="text-align: right;">\$7.30</td> </tr> <tr> <td>Employee Plus Family</td> <td style="text-align: right;">\$ 16.04</td> <td style="text-align: right;">\$10.96</td> </tr> </tbody> </table>	Employee Only	\$ 5.62	\$3.72	Employee Plus One	\$ 10.90	\$7.30	Employee Plus Family	\$ 16.04	\$10.96						
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Flex Spending Account*	Regular FT & PT employees w/ benefits	Employee	1st of month after 60 days	Predetermined amount of pre-tax dollar withheld from an employee's check to pay for qualified health care/dependent care expenses															
Basic Life & AD&D 1-800-423-2765	Regular FT & PT employees w/ benefits	CHC	1st of month after 90 days	Exec: Two (2) times annual salary Staff: One (1) times annual salary															
Long Term Disability 1-800-423-2765	Regular FT & PT employees w/ benefits	CHC	1st of month after 90 days	60% of salary															
Money Purchase Pension Plan 1-800-458-6333	Employed for 1 plan year with 1,000 hrs of service	CHC	3 yr graded vesting schedule	A contribution equal to 4% of your annual base salary each year of creditable service															
Retirement Plan* 1-800-458-6333	All Employees	CHC & EE	1st pay period	403b - tax-deferred retirement account 2% company match—ROTH option available															
*Aflac Cancer , Accident, Critical Illness Insurance	Regular FT & PT employees w/ benefits	Employee	1st of month after 90 days	Individual and family plans available. Coverage is portable.															
Short Term Disability 1-800-423-2765	Regular FT & PT employees w/ benefits	Employee	1st of month after 90 days	60% of base salary															
Group Term Life 1-800-423-2765	Regular FT & PT employees w/ benefits	Employee	1st of month after 90 days	Supplemental Life Insurance is available for you and your dependents															
Wellness Program	See AllWell for eligibility	CHC & EE	90 days	Reimbursable Fitness Center Fees															

*Pre-tax benefit