



Full Time Employee Survey Results

1. Which range indicates your current age?

Under 21	0.5%
22-30	13.6%
31-40	24.2%
41-50	31.5%
51-60	25.3%
60+	4.8%

2. Please indicate your gender

Female	58.8%
Male	41.2%

3. Which category describes your family status?

Single (skip to question 9)	23.8%
Single parent with dependent children	8.6%
Married	31.0%
Married with dependent children	36.6%

4. If Johnson County were to move from the current two-tiered (individual and family) medical plan enrollment structure, to a four-tiered structure, which tier would you likely select?

Employee Only	19.1%
Employee & Child(ren)	14.6%
Employee & Family	41.5%
Employee & Spouse	24.8%

5. Are you primarily responsible for providing your children's insurance?

Yes	62.8%
No	37.2%

6. If you are married, does your spouse work outside the home?

Yes	79.8%
No (go to question 9)	20.2%

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7. Is your spouse eligible for benefits through his/her employer?

Yes	67.7%
No (go to question 9)	32.3%

8. If eligible, does your spouse participate in his/her employer's medical plan?

No	40.7%
Yes	59.3%

9. Do you and/ or your spouse currently have life insurance coverage other than what is provided and offered through Johnson County?

No	46.1%
Yes	53.9%

10. How long have you been employed by Johnson County?

Less than 1 year	10.3%
1 - 3 years	19.4%
4 - 5 years	12.3%
6 - 10 years	19.5%
10 + years	38.5%

11. Which range indicates your current annual salary?

Less than \$20,000	2.0%
\$20,000 - \$29,999	24.5%
\$30,000 - \$39,999	26.6%
\$40,000 - \$49,999	20.1%
\$50,000 - \$74,999	21.6%
\$75,000+	5.3%

12. Please indicate which plan(s) you are enrolled in:

Medical Plan

Blue Advantage HMO	47.7%
Blue Care HMO	29.6%
Preferred Care Blue PPO	13.2%
NA	9.5%

Medical Coverage Tier

Family	52.6%
Individual	38.1%
NA	9.3%

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12. Please indicate which plan(s) you are enrolled in (continued):

Dental Coverage Tier

Individual	36.5%
Family	49.9%
NA	13.5%

Voluntary Group Term Life Insurance (check all that apply)

Dependent	0.1%
Self	29.7%
Self & Dependent	6.8%
Self & NA	0.3%
Self & Spouse	14.9%
Self & Spouse & Dependent	16.2%
Self & Spouse & NA	0.3%
Spouse	1.7%
Spouse & Dependent	0.3%
NA	29.7%

Deferred Compensation (457) Plan (check all that apply)

ICMA	12.3%
NA	25.9%
Nationwide	53.6%
Nationwide & ICMA	7.6%
Nationwide & ICMA & NA	0.1%
Nationwide & NA	0.4%

Other Plans (check all that apply)

Dependent Care Reimbursement Account	2.5%
Medical Reimbursement Account (Medbank)	12.6%
Medical Reimbursement Account (Medbank) & Dependent Care Reimbursement Account	1.7%
NA	45.6%
Voluntary Short Term Disability	26.2%
Voluntary Short Term Disability & Dependent Care Reimbursement Account	0.5%
Voluntary Short Term Disability & Medical Reimbursement Account (Medbank)	9.4%
Voluntary Short Term Disability & Medical Reimbursement Account (Medbank) & Dependent Care Reimbursement Account	1.3%
Voluntary Short Term Disability & NA	0.2%

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13. Please indicate which retirement plan you participate in?

KPERS	87.1%
KPERS & KPF	0.7%
KPF	12.2%

14. If you are not enrolled in the Deferred Compensation (457) plan, please indicate why. Please mark the answer that best applies.

Do not want another payroll deduction	32.9%
Don't understand what the plan provides	31.0%
Employer match doesn't provide enough incentive	19.4%
I have sufficient personal savings to meet my retirement needs	3.6%
I think Social Security and KPERS/KPF will support my retirement	6.0%
Investment choices do not meet my needs	7.1%

15. How satisfied are you with the following benefits that are offered to you as an employee of Johnson County? 1 = very satisfied, 5 = not satisfied at all. Please indicate NA if you are not currently participating in a particular plan.

Medical Plan

1	15.1%
2	34.0%
3	29.0%
4	9.4%
5	3.6%
NA	8.9%

Dental Plan

1	13.9%
2	29.9%
3	25.5%
4	12.4%
5	6.6%
NA	11.7%

Vision

1	16.9%
2	27.8%
3	24.9%
4	11.5%
5	5.8%
NA	13.1%

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15. How satisfied are you with the following benefits that are offered to you as an employee of Johnson County? 1 = very satisfied, 5 = not satisfied at all. Please indicate NA if you are not currently participating in a particular plan. (continued)

Basic Group Term Life Insurance (Employer Paid)

1	23.4%
2	33.3%
3	23.5%
4	7.9%
5	3.3%
NA	8.7%

Voluntary Group Term Life Insurance

1	13.0%
2	24.1%
3	17.8%
4	5.8%
5	2.1%
NA	37.2%

Voluntary Short Term Disability

1	7.7%
2	14.3%
3	15.2%
4	5.6%
5	4.6%
NA	52.6%

Deferred Compensation (457) Plan

1	12.6%
2	21.3%
3	22.5%
4	8.9%
5	3.5%
NA	31.1%

16. How satisfied are you with the following aspects of the medical plan offered to you as an employee of Johnson County? 1 = very satisfied, 5 = not satisfied at all.

Medical Plan Customer Service

1	12.4%
2	28.8%
3	30.0%
4	9.5%
5	6.6%
NA	12.7%

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16. How satisfied are you with the following aspects of the medical plan offered to you as an employee of Johnson County? 1 = very satisfied, 5 = not satisfied at all. (continued)

Medical Claims Payment

1	15.7%
2	31.3%
3	25.4%
4	9.1%
5	5.0%
NA	13.6%

Physician Choice

1	22.5%
2	31.0%
3	22.5%
4	8.6%
5	5.6%
NA	9.9%

Hospital Choice

1	21.2%
2	29.6%
3	24.7%
4	8.7%
5	5.0%
NA	10.9%

Prescription Drug Copay Amount

1	8.8%
2	18.8%
3	26.8%
4	17.6%
5	17.5%
NA	10.4%

Employee Premium Cost for Coverage

1	8.7%
2	25.0%
3	28.7%
4	16.2%
5	11.4%
NA	10.0%

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17. How satisfied are you with the following aspects of the dental plan offered to you as an employee of Johnson County? 1 = very satisfied, 5 = not satisfied at all.

Dental Plan Customer Service

1	14.1%
2	27.8%
3	25.9%
4	6.8%
5	4.8%
NA	20.6%

Dental Claims Payment

1	15.8%
2	27.6%
3	24.1%
4	8.7%
5	6.0%
NA	17.8%

Dental Provider Choice

1	20.9%
2	28.3%
3	21.1%
4	8.3%
5	6.1%
NA	15.3%

Employee Premium Cost for Coverage

1	11.0%
2	22.8%
3	26.7%
4	13.8%
5	10.8%
NA	14.8%

18. How satisfied are you with the following aspects of the vision plan offered to you as an employee of Johnson County? 1 = very satisfied, 5 = not satisfied at all.

Vision Plan Customer Service

1	19.4%
2	26.5%
3	21.5%
4	6.6%
5	3.6%
NA	22.3%

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18. How satisfied are you with the following aspects of the vision plan offered to you as an employee of Johnson County? 1 = very satisfied. 5 = not satisfied at all. (continued)

Vision Claims Payment

1	20.2%
2	24.0%
3	22.2%
4	8.6%
5	5.3%
NA	19.8%

Vision Provider Choice

1	21.8%
2	26.9%
3	18.6%
4	8.6%
5	6.0%
NA	18.0%

19. How satisfied are you with the following aspects of the Deferred Compensation (457) plan offered to you as an employee of Johnson County? 1 = very satisfied, 5 = not satisfied at all.

Vendor Customer Service

1	10.4%
2	21.2%
3	22.8%
4	5.6%
5	4.4%
NA	35.6%

Investment Options/Choices

1	9.9%
2	22.3%
3	23.1%
4	7.7%
5	4.3%
NA	32.7%

Education/Information

1	8.6%
2	20.3%
3	22.8%
4	10.3%
5	5.9%
NA	32.2%

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19. How satisfied are you with the following aspects of the Deferred Compensation (457) plan offered to you as an employee of Johnson County? 1 = very satisfied, 5 = not satisfied at all. (continued)

Website Access/Availability

1	12.4%
2	19.6%
3	21.2%
4	5.4%
5	3.4%
NA	38.1%

20. How satisfied are you with the following aspects of the supplemental retirement (401a) plan offered to you as an employee of Johnson County? 1 = very satisfied, 5 = not satisfied at all.

Vendor Customer Service

1	8.2%
2	19.4%
3	24.4%
4	7.3%
5	3.7%
NA	37.0%

Investment Options/Choices

1	8.5%
2	19.7%
3	24.7%
4	9.5%
5	4.4%
NA	33.2%

Education/Information

1	7.4%
2	18.4%
3	23.0%
4	12.7%
5	5.5%
NA	33.0%

Website Access/Availability

1	8.6%
2	17.3%
3	21.0%
4	9.2%
5	4.5%
NA	39.5%

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21. Please rate the following benefits according to their importance to you and your family (1 = highly important, 5 = not at all important).

Medical Plan

1	85.8%
2	3.6%
3	1.6%
4	1.2%
5	4.2%
NA	3.6%

Dental Plan

1	65.2%
2	17.2%
3	6.7%
4	2.2%
5	4.1%
NA	4.6%

Vision Plan

1	56.5%
2	20.9%
3	10.9%
4	3.2%
5	3.9%
NA	4.6%

Basic Group Term Life Insurance (Employer Paid)

1	48.1%
2	23.3%
3	16.3%
4	5.5%
5	4.0%
NA	2.9%

Voluntary Group Term Life Insurance (Employee Paid)

1	28.4%
2	21.5%
3	19.6%
4	8.3%
5	10.3%
NA	11.8%

Voluntary Short Term Disability

1	22.7%
2	16.5%
3	21.6%
4	11.5%
5	10.4%
NA	17.3%

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21. Please rate the following benefits according to their importance to you and your family (1 = highly important, 5 = not at all important). (continued)

Deferred Compensation (457) Plan

1	41.4%
2	20.1%
3	13.1%
4	5.8%
5	6.2%
NA	13.5%

22. Based on your response to question 21, please list what you consider to be the most important benefit provided.

Basic Group Term Life Insurance	1.2%
Deferred Compensation (457) Plan	4.5%
Dental Plan	1.1%
Medical Plan	90.7%
Vision	0.4%
Voluntary Group Term Life Insurance	1.2%
Voluntary Short Term Disability	0.9%

23. Based on your response to question 21, please list what you consider to be the least important benefit provided.

Basic Group Term Life Insurance	3.9%
Deferred Compensation (457) Plan	14.4%
Dental Plan	2.7%
Medical Plan	1.8%
Vision	9.0%
Voluntary Group Term Life Insurance	34.9%
Voluntary Short Term Disability	33.3%

24. If you could elect vision coverage without enrolling for medical coverage, would you elect that option?

No	52.8%
Yes	47.2%

25. If you could increase your current knowledge about one of the County's benefit offerings, which one would it be?

Basic Group Term Life Insurance	2.6%
Deferred Compensation (457) Plan	36.1%
Dental Plan	2.9%
Medical Plan	17.5%
Supplemental Retirement (401a) Plan	28.8%
Vision	3.8%
Voluntary Group Term Life Insurance	2.6%
Voluntary Short Term Disability	5.8%

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26. Where do you receive the majority of your information regarding the County's benefit programs and

Benefits Division Staff	5.1%
Benefits Division website	9.5%
Co-workers	17.1%
Department Personnel/Pay Representative	17.1%
Open Enrollment meetings/newsletter	43.2%
Vendor communication (printed, website, etc.)	8.1%

27. Overall, how well do you feel the County's current benefit choices/offerings meet your needs and concerns? (1 = extremely well, 5 = not at all)

1	9.3%
2	40.3%
3	38.0%
4	10.8%
5	1.6%