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EDUCATIONAL EXCELL'ENCE
For a Changing Tomorrow

## Chippewa Falls School District

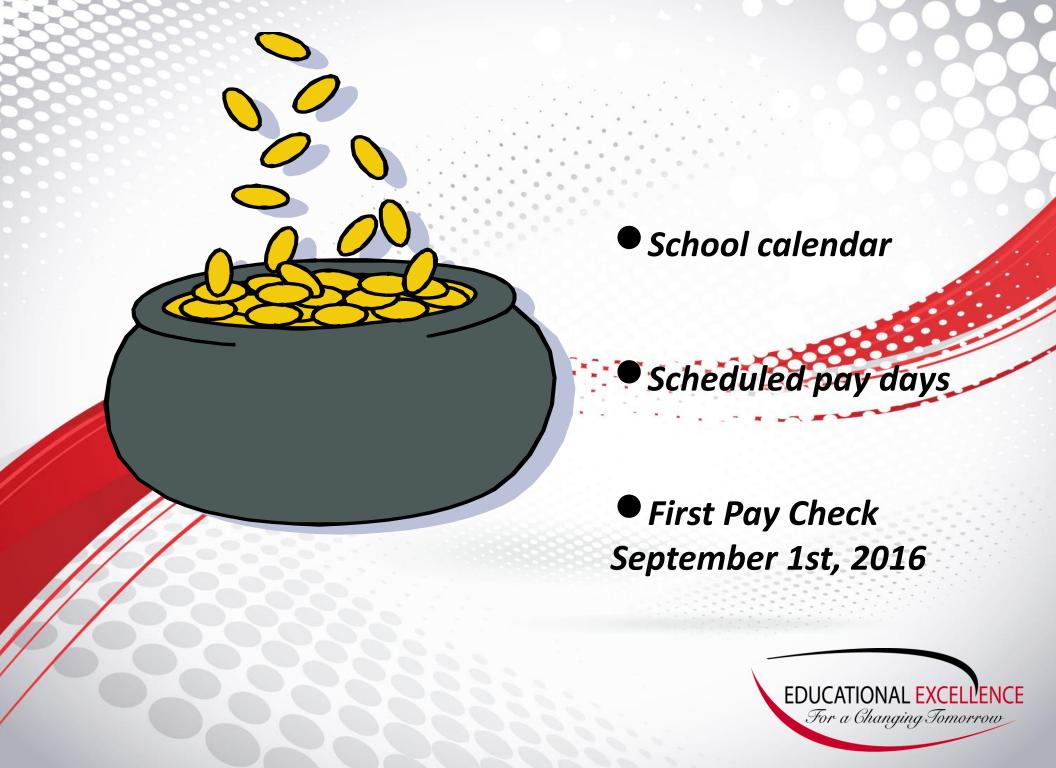
New Teacher Orientation August 2016



### Agenda

- Payroll Option
- Benefit information
- Wisconsin Retirement
- Employee handbooks
- Questions?







For the 2016 - 2017 school year, there will be 27 paychecks:

First check = 9/1/2016

Last check = 8/31/2017

Teachers can opt for 27 paychecks – this can only be done at the beginning of the year on Skyward and will decrease your deductions. If this option is not selected, you'll receive 22 paychecks and your deductions will increase.

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### Open Enrollment

Open enrollment occurs every year in May.

At that time, you may choose to enroll, terminate, or make changes to your health/dental plan(s).

Premium payment changes will occur in June.

The effective date is July 1st.

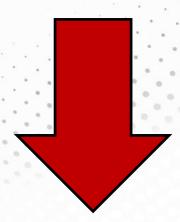


#### Qualifying Events to make Changes

- Marriage
- Birth, Adoption
- Loss of Coverage
- Divorce
- Death
- Child no longer qualifies as a dependent
- Change of employment status



#### Reminder!!



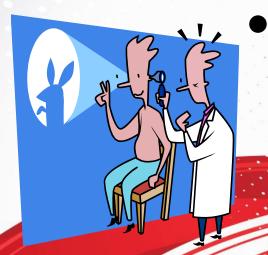
- Make sure you notify the payroll/human resources department within 30 days of a "qualifying event" such as marriage, divorce, birth of a child, or a child losing dependent status.
- We do not want you to miss your window of opportunity to make changes to your health and dental coverage.





#### Monthly Insurance Rates for 2016 - 2017

Subject to Change Every July 1st



#### **Benefit Plan Administrators - HDHP/HSA**

	Premium	<b>Employee</b>	<b>Employer</b>
<ul><li>Single</li></ul>	\$627.00	\$79.00	\$548.00
<ul><li>Family</li></ul>	\$1,608.00	\$203.00	\$1,405.00

**Employee** deductions will be taken out of the 1st two checks each month for the following month's coverage.

\*\*These rates apply to Full Time Teachers\*\*



#### **Benefit Plan Administrators**

High Deductible Health Plan / HSA

- HDHP deductible
  - \$1,500 per individual \$3,000 per individual
  - Effective 01/01/2017\$3,000 per individual \$6,000 per family
  - No restrictions on which doctor/office/hospital to use
- 90% of in-network doctor/hospital covered charges and
- 80% of all other covered charges
- 100% after the out of pocket maximum:
  - \$1,750/person per calendar year (single plan) \$3,500/per person per calendar year effective 01/01/2017
  - \$3,500 /family plan per calendar year (family plan) \$7,000 per family per calendar year effective 01/01/2017

\*\*\*Again, see Plan Document for complete details \*\*\*



#### High Deductible Health Plan / HSA

- 12.6% of the Premiums are paid by the employee.
- Premiums are pro-rated for less than full-time positions.
- The Chippewa Falls Area Unified School District will contribute \$192.90 per month into your HSA account if you elect a family HDHP plan, or \$75.22 per month if you carry a single HDHP plan. HSA savings accounts are held at Northwestern Bank in Chippewa Falls.



### HEALTH EOS

- In-network providers
- A Provider Network of physicians, hospitals and clinics committed to providing you with the lowest possible out-of-pocket expense.
- Lists are updated periodically and are available on BPA's website under "Partners" and then click on Health EOS from their home page. You do not need to be logged into BPA's website to search this information.

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- •ReforMedicine <a href="http://www.reformedicine.com/">http://www.reformedicine.com/</a>
- Mayo Clinic Express Care

http://mayoclinichealthsystem.org/locations/eau-claire/medicalservices/express-and-retail-care

- The Joyful Doc <a href="http://joyfuldoc.com/">http://joyfuldoc.com/</a>
- Marshfield Clinic Care My Way

https://www.marshfieldelinic.org/care-my-way

•CDI Open MRI

http://www.mycdi.com/twin\_cities/eau\_claire/experience\_open\_mrionly\_open\_in\_western\_wisconsin/

# What Can I Do To Lower Health Care Costs?

Once you have visited one of the previously mentioned providers you may then submit your BPA Claim Form to get credit towards your deductible and out of pocket maximum or if both have been met to be reimbursed for your expenses. You may also use your Health Savings Account to pay for these expenses. The form is located on the Human Resources Benefit Page on the District's Website <a href="http://cfsd.chipfalls.k12.wi.us/district/healthinsurance.com">http://cfsd.chipfalls.k12.wi.us/district/healthinsurance.com</a>

The previous providers are in most cases out-of-network providers so insurance will only pay 80% and not 90%, if you've met your deductible. If you've not met your deductible, you'll pay 100% of the charges.

# What to do if you visit a Private Pay Physician

#### **TELADOC**

https://aetna.app.box.com/s/rsz1sd6eq7agbcrvla93/1/4834300981/39944209741/1



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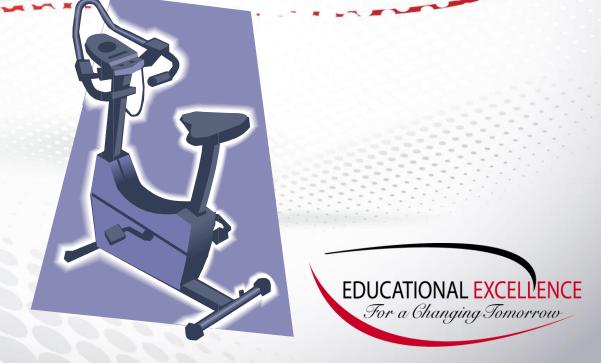
# Coming Soon:

24/7/365 ACCESS TO A DOCTOR



### Wellness Program 2016

- Wellness Programs offered.
  - "Healthy Lifestyles" Profile
    - If you qualify, you will receive a discount on your health insurance premiums: \$10 discount per month for a single health policy, or \$20 per month discount off a family policy.



### Wellness Program 2016

- Wellness Programs offered.
  - Wellness Biometric Screening
    - Screening dates will take place in early to mid September and will take place in your building.
    - Must go thru biometrics screening to receive Healthy Lifestyle discount.
    - Blood draw is a fasting blood draw!! No eating or drinking after midnight the day before the biometrics.
    - Must "re-certify" every year.

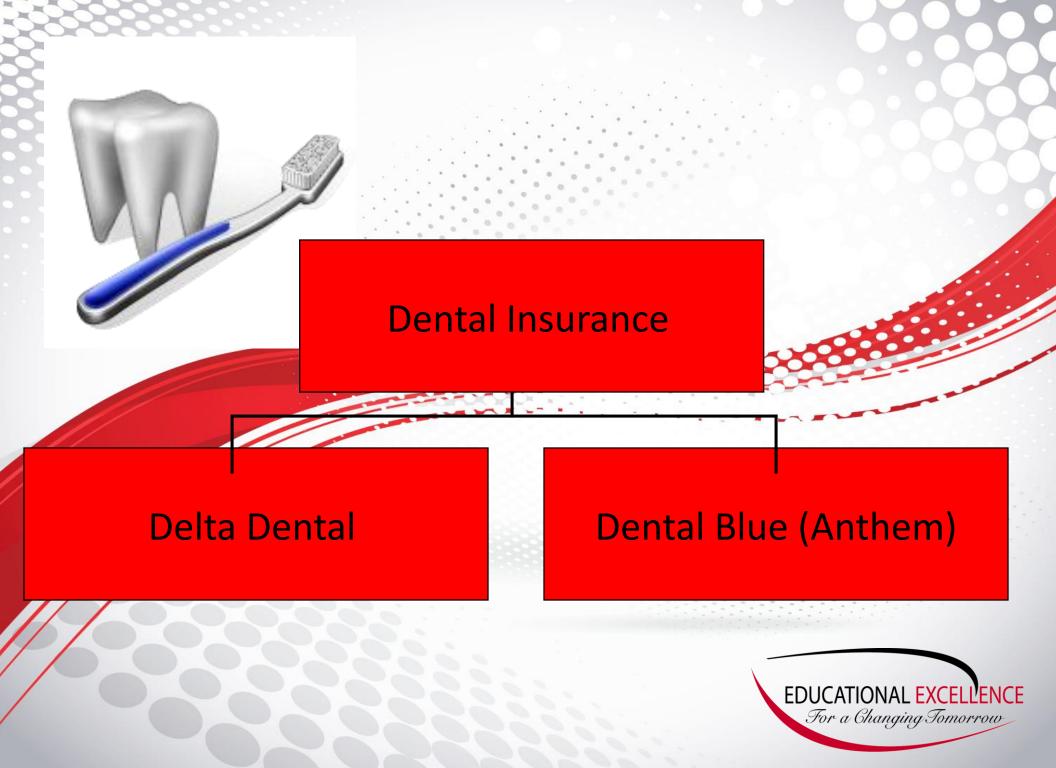


# Benefit Plan Administrators Online Enrollment



- Online enrollment with Benefit Plan Administrators is done through the online enrollment website at:
- https://service.bpaco.com/cfsenroll/enrollform.aspx
- Access this link to enroll in your health selection





#### Monthly Insurance Rates for 2016 - 2017

Subject to Change Every July 1st

Delta Dental

	Premium	Employee	Employer
<ul><li>Single</li></ul>	\$36.34	\$24.34	\$12.00
<ul><li>Family</li></ul>	\$106.54	\$71.54	\$35.00

Dental Blue (Anthem)

Single \$106.62 \$94.62 \$12.00

- Family \$325.54 \$290.54 - \$35.00

Employee deductions will be taken out of the 1st two checks each month for the following month's coverage.

\*\*These rates apply to fulltime teachers\*\*



# Delta Dental Dental Insurance

- Delta deductible
  - » \$25 per individual
  - » \$75 per family
- Deductible waived for all preventive benefits at 100%
- \$1,000 maximum per calendar year per person
- No restrictions on which doctor/office/hospital to use
- Orthodontic benefits are limited to \$1,000 per person per lifetime



#### Dental Blue (Anthem)

**Dental Insurance** 

- No deductibles
- Services provided at 100%, subject to exclusions
- Services rendered at selected dental blue centers only
- Cannot change clinic choice until open enrollment
- No annual dollar maximum
- Orthodontics covered at 50% of the balance but not more that \$695, per person, per course of treatment.
   No age limitation
- Dental Blue provides coverage for dentist's services, <u>but</u> <u>not lab fees.</u> All lab fees are at the employee's expense.



#### FLEX PLAN ENROLLMENT

- Online enrollment with Benefit Plan Administrator for medical flex and child care flex reimbursement is done through the online enrollment website:
- Medical flex with a HDHP plan is limited to dental and vision expenses. If you enroll in the district's health insurance, you can only have limited medical flexible spending.

https://service.bpaco.com/cfsenroll/flexenroll.aspx



#### Benefit Plan Administrators Flex Plan

- Medical Reimbursement Account (MRA)

   what it is and how it works
- \$2,500 per year maximum (\$2083.40 your 1<sup>st</sup> year)
- Dependent Care Reimbursement Account what it is and how it works \$5000 per year maximum (\$4166.60 your 1<sup>st</sup> year)
- Enrollment Formutomatic Reimbursement Authorization
- How do I get reimbursed??
- Request for Reimbursement Form



#### Flexible Benefits Plan

- Purpose: to allow pre-taxed payroll deductions to offset expenses not covered by your insurance:
  - » Vision, dental and dependent care expenses.
  - » "Use it or lose it" rule.
- Enrollment forms must be filled out and submitted even if you elect not to participate. (IRS rule!)
- Plan year starts July 1st and goes through June 30th.
- Deductions are taken 24 times per year twice per month.



#### Flexible Benefits Plan

- Deductions will begin with the first paycheck in September = 20 times this 1st year.
- Deductions are taken each payperiod with the exception of the months with 3 checks.
- Deductions are taken pre-taxed
- Each May during open enrollment, you will be able to make your election for the upcoming plan year online.



#### Flexible Benefits Plan

Benefit Plan Administrators

The "Reimbursement Plan Accounts" option on Superadmin website will allow you to view your deduction amounts, total claims submitted, total claims paid and account balance information.

In addition, "Reimbursement Request" forms are available on our website to use for expenses not processed through your medical plan, such as contacts, glasses, eye exams.



#### Benefit Plan Administrators' Flex Plan



The Working Families Tax Relief Act of 2004 made a change in the definition of "dependent" for purposes of the dependent care reimbursement component of the Flex Plan. "Dependent" is now defined as:

Any individual in your family who is under age 13, and who lives with you for more than one-half of the taxable year. The definition of "dependent" also includes certain relatives (including your spouse) who are mentally or physically incapable of caring for themselves and who live with you for more than one-half of the taxable year. Any such "dependent" that is age 13 or older at anytime during the taxable year must also fulfill all of the following:

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### BPA Flex – cont.

- 1. He/she may not have income in excess of the exemption amount under Code Section 151(d) (ie-\$2,000);
- He/she must receive over one half of his/her support from you;
- He/she may not be claimed as a dependent by anyone else.



#### Life Insurance

 Employees may chose insurance coverage on their own lives <u>up to</u> 5 times their prior year WRS earnings (rounded up to the next even 1,000). New employees, insurance based on initial contract year earnings.

» The Basic plan = 1 times WRS earnings

Supplemental = 1 times WRS earnings

» Additional = 1,2 or 3 times WRS earnings

 Life insurance is optional, however, you are required to decline coverage on the form and turn it in to us. We must have proof we offered the coverage.

 Within 30 days from date of hire, any and all insurance requests will be granted.



#### Life Insurance - Cont.



• If you do not enroll for all available coverage when you were first eligible (within 30 days of start date), you can apply for any amount of the coverage by submitting an evidence of insurability form.

 Evidence of insurability forms require a brief disclosure of your medical history.
 Therefore, coverage may be denied due to medical conditions.



#### Cost of Coverage 2016-2017 Monthly Rate Per \$1,000 of Insurance

<u>Age</u>	Basic Plan	<u>Supplemental</u>	<u>Additional</u>
Under 30	.05	.05	.05
30 - 34	.06	.06	.06
35 - 39	.07	.07	.07
40 - 44	.08	80.0	08
45 - 49	.12	.12	.12
50 - 54	.22	.22	.22
55-59	.39	.39	.39
60 - 64	.49	.49	.49
65 - 69	.57	.57	.57



#### Life Insurance - Cont.

Spouse / Dependent Coverage is available too!

- 1 unit = \$1.75 per month
  - » Spouse covered for \$10,000
  - » Dependents covered for \$5,000 each

2 units = \$3.50 per month

- » Spouse covered for \$20,000
- » Each dependent covered for \$10,000

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If you enroll for 1 unit of spouse/dependent coverage upon hire, evidence of insurability is required to increase coverage from 1 unit to 2 units.

# Beneficiary Designation Department of Employee Trust Funds

If you are the owner of a Wisconsin Retirement
 System (WRS) account from which a death benefit or
 life insurance benefit could be payable upon your
 death, you may file a beneficiary designation.

If no beneficiary designation is on file for an account, death benefits and life insurance benefits from that account will be paid according to the "statutory standard sequence" in effect on the date of death.

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#### **Beneficiary Designation**

Department of Employee Trust Funds

#### **Statutory Standard Sequence**

Current statutory sequence is as follows:

#### Widow or widower

- Children (natural children or legally adopted). If at least one child survives the participant, the share of any deceased child is payable to the surviving spouse of the child or to the surviving children of the child if there is no spouse, or otherwise to the other children in this group.
- Grandchild or grandchildren
- Parent(s)
- Brother(s) and sister(s)
- To the estate of

The standard sequence described above is subject to change, based on changes in state statutes. If benefits are paid according to standard sequence, the statutory standard sequence in effect at the time of your death will determine your beneficiary(ies).

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## **Beneficiary Designation**

Department of Employee Trust Funds

Unless otherwise specified on the beneficiary designation form, a beneficiary designation form filed with the Department of Employee Trust Funds (ETF) will apply to the death benefits payable upon your death from all benefit plans and accounts administered by this department, ie Wisconsin retirement account and group term life insurance. If you wish to name different beneficiaries for separate benefit plans or accounts, please contact the ETF at (608) 266-3285 or (414) 227-4294 to request forms and special instructions.



# Long Term Disability (LTD)

- The Chippewa Falls School District provides LTD insurance at <u>no</u> <u>cost</u> to full-time employees.
  - » Coverage is for employees only.
- Employees must meet the minimum number of hours per year to become eligible (600 for Teachers).
- Employees must satisfy a "90 consecutive calendar day" elimination period before monthly benefits become payable
  - "Elimination period" = the length of time an insured employee must be continuously totally disabled before monthly benefits become payable.
  - "Totally disabled" does not mean "permanently disabled", but rather the inability to perform the essential functions of your job.

#### LTD - Continued

- Once the elimination period has been satisfied and disability claim has been approved by Kansas City Life Insurance Company, monthly benefits are payable at 90% of your regular monthly earnings recognizing all maximum annual covered salary and maximum monthly benefit amounts.
- Monthly benefits are paid at the end of each monthly period for which he or she qualifies for monthly benefits. Monthly benefits will stop at the insured employee's death or at any time during the benefits period when he or she no longer qualifies for monthly benefits. Monthly benefits will stop at the end of the maximum benefit period EVEN if the insured employee is still totally disabled.

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### LTD - Continued

#### Reminder!!

In the event of any injury or illness with the potential of escalating to the point of LTD, please contact the

Payroll/Human Resource office immediately.





# **WORK COMP**

- If you sustain a work related illness or injury, you are required to report the incident to your Administrator immediately no matter how insignificant the illness or injury may seem.
- You are required to call 1-888-589-6492 within 24 hours of the illness/injury for reporting purposes.



## Wisconsin Retirement System

- All eligible employees shall be covered by the Wisconsin Retirement System in accordance with the Wisconsin state statutes. Contributions are based on GROSS wages!
- Current retirement contribution rates are:

Employee's Required Contribution = 6.60%

Employer's contribution = 6.60%

13.20% total

- The employee is responsible for 50% of the WRS rate, which for 2016 is 6.6%.
- WRS website: www.etf.wi.gov
- WRS toll free number : 1-877-533-5020



# Wisconsin Retirement System

- Upon enrollment into the WRS, you are automatically enrolled into the WRS Fixed Trust Fund. If you choose to, you may also elect to participate in the Variable Trust Fund.
- The Variable Trust Fund is invested primarily in common stocks. Those participating in the Variable Trust Fund must be aware that favorable or unfavorable stock market performances could result in investment gains or losses.
- This form is available on the ETF website for anyone who is interested in participating in the variable trust fund.



# Additional Retirement Option

- Tax Sheltered Annuity List
- Wisconsin Deferred Comp
- Salary Reduction

# Agreement Form

Information available on the District Website under staff resources.





# HRA/TSA POST EMPLOYMENT BENEFIT

The Board of Education shall make an annual contribution of \$5,000 into a post employment benefit trust on your behalf. The sum of \$3,500 shall be placed in an HRA while \$1,500 shall be placed in a TSA. Teachers who have a minimum of fifteen (15) years teaching experience in the Chippewa Falls School District, and retire at the age of fifty-seven (57), or any year thereafter, shall be entitled to the contributions, plus accumulated interest at retirement.





# Miscellaneous Information

## "Comp Days":

For those contracted for co-curricular activities, you have the choice of electing 1 or 2 "comp" days in lieu of pay. Comp days are calculated at daily teacher base rate.

Base salary for 2016 - 2017 is \$35,000.00

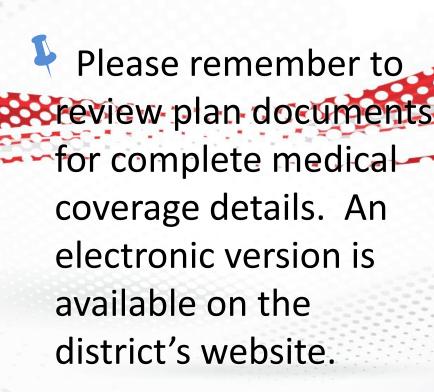
1 day = \$186.17

2 days = \$372.34

Used comp days will be deducted in the pay period they are used.



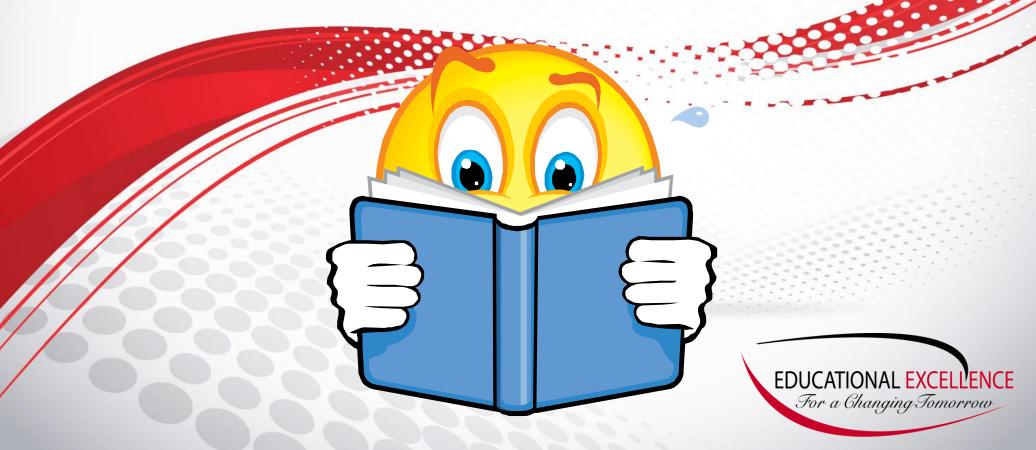
# Reminders!







Please review all information. Many policies are taken from the Board Policies which may be found online on the district's website!





## Reminders!

- Forms to turn in by MONDAY, AUGUST 22nd!!
  - HSA Deduction (optional) and HSA account number, Dental Insurance, Life Insurance, 403 (b) Tax Shelter Annuity (optional)
- ALL online enrollments by MONDAY, AUGUST 22nd!!
  - Benefit Plan Administrators Health Enrollment, Flex enrollment and Skyward







Thank you for attending today and have a great year!

