Madison School District #321 Summary of Employee Benefits



Contact Information

Madison School District www.msd321.com

208-359-3300 60 West Main St 208-581-8292 FAX Rexburg, ID 83440

Ballard Insurance Group

208-356-7500 147 N 2nd E, Suite #1 208-356-7501 FAX Rexburg, ID 83440

PERSI www.persi.idaho.gov

800-451-8228 P.O. Box 83720

Boise, ID 83720-0078

Blue Cross of Idaho www.bcidaho.com

888-462-7677 P.O. Box 7408

Boise, ID 83707

LifeMap www.vsp.com

800-794-5390 1211 W Myrtle St, Suite 200

Boise, ID 83702

This publication is only a partial summary of benefits and is provided for information purposes only.

Skyward

- Employees access their time off, time sheet, payroll information and other personnel information online through Skyward Employee Access
- Skyward can be found on Madison School District's website www.msd321.com under Employee link
- Employees may obtain their login and password from Payroll Payday
- Payday is the 20th of each month unless the 20th falls on a Saturday or Sunday then payday is the Friday before
- Pay information is usually available for review 2 days before payday on Skyward
- ❖ Substitutes and hourly timesheet employees will be paid for their time worked the previous month (ie. all hours worked in August will be paid September 20th)
- Payroll is paid through direct deposit check stubs are not issued but can be found on Skyward

Sick Leave

- Certified Employees 12 sick days per year
- Classified Employees 1 sick day per full month worked (9 days for full school year)
- All employees may accumulate unused sick leave from year to year with no limit
- Employees leaving the district will lose all sick leave with the exception of being transferred to another school in Idaho
- Employees retiring will have sick leave reported to PERSI for use of paying group insurance premiums

Personal Leave

- Certified Employees 3 personal days per year
- Classified Employees 1 personal day per full trimester worked (3 days for full school year)
- ❖ Personal leave is capped at 8 days any unused personal days above 5 will be paid out at the employee's current rate in June
- Employees leaving the district or retiring will be paid out for all unused personal leave

Bereavement

- ❖ All employees receive 2 bereavement days per incident for the loss of any member of the employee or spouse's immediate family
- ❖ If more than 2 days is needed, employee may use their sick leave

PERSI - Public Employee Retirement Systems of Idaho

PERSI Retirement

Employees become a PERSI member when working in an eligible position of 20 hours or more per week. Participation is mandatory. After 60 months of service employee will become vested. Not all 60 months need to be with the same PERSI employer.

Base Plan Benefits

Enrollment in PERSI is automatic. Employee contributions are 7.62% or 6.71% (depending on employee type). Madison School District contributions are 12.69% or 11.18% (depending on employee type). Employee contributions are credited to a personal account that earns interest. Contributions made by the school district are pooled in a trust to cover future benefits for all PERSI members.

Portability of Funds

After leaving Madison School District employees have 3 options with PERSI contributions:

- 1- Keep contributions with PERSI until a future decision
- 2- Withdraw contributions plus any interest earned (tax penalties and withholdings will apply)
- 3- Roll over contributions into an IRA or other qualified retirement plan

The Choice 401(k) Plan

The Choice 401(k) plan is an optional contribution retirement plan available to active members. Participation is completely voluntary. A portion of income may be held out pretax by payroll deduction.

For More Information

To learn more about PERSI, or for detailed information about your retirement options and benefits visit the PERSI website at: www.persi.idaho.gov or contact the PERSI answer center at 1-800-451-8228.

Why is Open Enrollment Important?

Employees may change benefit elections during open enrollment each year. Once the open enrollment period has ended no additions may be made unless there is a qualifying event.

Open enrollment is August 10 – September 10.

Who is Eligible to Participate

Eligible Employee – employees working over 30 hours per week Eligible Dependent – employee's spouse under legally valid marriage; employee's natural child, stepchild, legally adopted child or a child for whom the employee or employee's spouse has court appointed guardianship or custody - a child must be under the age of 26 or medically certified as disabled due to mental handicap

Qualifying Events

Generally there are 30 days after a qualifying event to change benefit elections. Some examples of qualifying events are: Divorce, Marriage, Newborn Dependent, Change in employment or Involuntary loss of other coverage.

When do benefits take effect?

The Employee is eligible for benefits the 1st of the month following 1 month after their hire date. The employee is required to complete paperwork for enrollment within 30 days of eligibility date. If the forms are not returned to the Payroll office before the end of 30 days the benefits are waived, until open enrollment the following year. Please contact payroll for an enrollment packet. Any changes made during open enrollment will go into effect October 1.

When do benefits end?

Employee's premium for insurance is taken out the previous month (ie. September's premium will pay for the month of October). Insurance coverage will end the last day of the month that the employee's is employed (ie. If last paycheck is August 20 insurance will end August 31).

Pricing

Employees working over 30 hours per week may enroll in Medical and/or Dental and/or Vision Insurance. Applications may be obtained from Payroll.

	Preferred Blue	HSA		
	Medical	Medical	Dental	Vision
Employee	103.75	20.00	36.55	7.12
Employee & Spouse	398.35	121.05	73.05	14.24
Employee & Child	185.85	20.00	81.00	15.25
Employee & Children	257.45	24.20	125.70	15.25
Family	415.80	91.75	167.55	24.36

Blue Cross of Idaho - Dental

	In-Network	Out-of- Network
Calendar Year Deductible (Individual / Family)	\$50 / \$150	
Annual Maximum (Per person per calendar year for covered dental services)	\$1,250	\$1,250
Orthodontic Lifetime Maximum	\$1,000	\$1,000
Diagnostic & Preventative Services (examinations, cleanings, x-rays)	100%	80%
Basic Services (fillings, root canals, extractions, periodontics)	80%	70%
Major Restorative Services (crowns, bridges, dentures)	50%	40%

LifeMap VSP - Vision

	In-Network	Out-of- Network
Well Vision Exam	\$10 Copay	Up to \$45 after copay
Frames	Up to \$130 Allowance	Up to \$70 after copay
Lens Single Vision, Lined Bifocal, Lined Trifocal, and polycarbonate lenses for dependent children	\$25 Copay	Up to \$30- \$65 after copay
Contacts	Up to \$130 Allowance	Up to \$105 after copay

Blue Cross of Idaho - Health

		Preferred Blue Option 1		HSA Option 2	
Plan Year 2022-2023		In- Network	Out-of- Network	In- Network	Out-of- Network
Calendar Year Deductible (Individual / Family)		*\$2,000	/ \$4,000	\$3,000/	\$6,000
Out of Pocket Limit (Individual / Family)		\$3,500/ \$7,000	\$5,000/ \$10,000	\$5,800/	\$11,600
Covered Services	Deductible payment required?	PF Opti		PPO Opti	
Ambulance transportation services, Dental services related to accidental injury, Durable medical equipment, Home health skilled nursing, Hospital services, Inpatient physical rehabilitation, Maternity services, Medical services, Skilled nursing facility, Selective therapy services, Transplant services	yes	You pay 20% of the allowed amount	You pay 40% of the allowed amount	You pay 30% of the allowed amount	You pay 50% of the allowed amount
Chiropractic Care	yes	You pay 20% of the allowed amount	You pay 50% of the allowed amount	You pay 30% of the allowed amount	You pay 50% of the allowed amount
Emergency Services	yes	You pay \$100 copayment for hospital ER visit then you pay 20% of the allowed amount	You pay \$100 copayment for hospital ER visit then you pay 40% of the allowed amount	You pay \$100 copayment for hospital ER visit then you pay 30% of the allowed amount	You pay \$100 copayment for hospital ER visit then you pay 50% of the allowed amount
Breastfeeding support and supply services, Hospice, Prescribed contraceptive services	no	You pay nothing of the allowed amount	You pay 40% of the allowed amount	You pay nothing of the allowed amount	You pay 50% of the allowed amount
Preventative Care Services	yes/no	You pay nothing for services specifically listed	You pay 40% of the allowed amount	You pay nothing for services specifically listed	You pay 50% of the allowed amount
Immunizations	no	You pay nothing for listed immunizations You pay nothing for list immunizations			
Physician Office Visits	no	You pay a \$20 copayment per visit	You pay 40% of the allowed amount		
Physician Office Visits	yes			You pay 30% of the allowed amount	You pay 50% of the allowed amount
Prescription Drug	no/yes	copayment	eneric copay/ brand name after \$250 ctible		
Prescription Drug	yes	3 5			ount

^{*}With the buy down it brings your deductible on the Preferred Blue plan (Option 1) down to \$1,000/\$2,000

Pretax deduction

Health, Dental, Vision, and Life insurance premiums are held out pretax. An employee may request to have the insurance premiums held out posttax by contacting Payroll.

Flex Account

The Health Care Flex Account (FSA) allows employees to set aside up to \$2,750 in pretax dollars to pay most out of pocket medical, dental or vision care expenses.

The Day Care Flex Account allows employees to set aside up to \$5,000 in pretax dollars to pay for eligible dependent care expenses. During each open enrollment, employees elect how much to deposit into their flex account. This amount is evenly deducted during the plan

For Flex reimbursement, expenses need to be submitted to Ballard Insurance Group. Reimbursement are done as a direct deposit on the $1^{\rm st}$ and $15^{\rm th}$ of each month by the district office.

The Flex year is from September 1 to August 31.

*If employees do not use all the pretax dollars deposited into the flex account by August 31, any balance in the account is forfeited.

Health Insurance

vear from each paycheck.

To verify if a doctor or facility is part of the PPO network, visit the Blue Cross of Idaho website www.bcidaho.com or call 1-800-627-1188. Always use Blue Cross of Idaho PPO Doctors and Facilities when seeking care. This will result in lower cost.

*Option 1 - Preferred Blue plan

There is a "Buy Down" associated with the Preferred Blue plan. This brings the individual deductible down from \$2,000 to \$1,000. The school district will reimburse employees for 80% coinsurance between the \$1,000 and \$2,000 deductible. When an Explanation of Benefits (EOB) from Blue Cross shows expenses over the \$1,000 take the EOB to Ballard Insurance Group. Reimbursement are done as a direct deposit on the $1^{\rm st}$ and $15^{\rm th}$ of each month by the district office.

*Option 2 – HSA plan

With the HSA plan employees are eligible to have a Health Savings Account (HSA). An HSA allows pretax dollars to be deposited into an account to pay most out of pocket medical, dental or vision care expenses. Unlike the FSA the money will remain in the account and carries over year after year. Employees must set up the account and will maintain control over the funds in HSA.

Optional Life Insurance

Optional life insurance may be purchased by the employee through NCPERS and/or LifeMap. Applications may be obtained from Payroll.

NCPERS

Cost is \$16 a month with no health questions asked. This includes coverage for spouse and dependents. Coverage is based upon the age of the employee.

Age	Life	AD&D	Spouse	Children
<25	\$225,000	\$100,000	\$20,000	\$4,000
25-29	\$170,000	\$100,000	\$20,000	\$4,000
30-39	\$100,000	\$100,000	\$20,000	\$4,000
40-44	\$65,000	\$100,000	\$18,000	\$4,000
45-49	\$40,000	\$100,000	\$16,000	\$4,000
50-54	\$30,000	\$100,000	\$10,000	\$4,000
55-59	\$18,000	\$100,000	\$7,000	\$4,000
60-64	\$12,000	\$100,000	\$5,000	\$4,000
>64	\$7,500	\$7,500	\$4,000	\$4,000

LifeMap

Voluntary Life Insurance cost is based on the age of the employee. Employees may elect coverage up to 5 times their salary; the guarantee issue amount is \$200,000 of life insurance on employee, \$50,000 on spouse and \$10,000 on children. Spouse and child coverage may not exceed employee coverage amounts. If the minimum of \$10,000 is elected at initial enrollment, employees may increase the amount at any future annual enrollment with no health questions asked.

Age	Cost per \$10,000	
<24	\$0.38	
25-29	\$0.44	
30-34	\$0.58	
35-39	\$0.86	
40-44	\$1.25	
45-49	\$2.00	
50-54	\$3.14	
55-59	\$4.75	
60-64	\$7.22	
65-69	\$12.29	
70-74	\$21.88	
>74	\$44.03	
Children	\$2.60	

For Accidental Death & Dismemberment Life Insurance employees may elect coverage up to 5 times their salary of life insurance on employee and spouse and \$10,000 on children. Spouse and child coverage may not exceed employee coverage amounts.

	Cost per \$10,000
Employee	\$0.03
Child	\$0.05

Group Life Insurance

Madison School District provides group life insurance to all employees working 20 hours or more per week.

All new employees need to fill out a beneficiary form which may be obtained from Payroll.

	Basic Life	AD&D
Employee	\$50,000	\$50,000
Spouse	\$10,000	NA
Child	\$10,000	NA

Disability Insurance

Madison School District provides long term disability to employees working 20 hours or more a week.

When an employee cannot work more than 90 days due to a debilitating illness or injury, 66.7% of their income is protected.

For questions please contact Payroll.

