

Article 5: Medical, Dental, and Vision Insurance

A. District Insurance Contribution

1. For the 2023-2024 plan year, the District shall contribute \$1,589.06 toward the monthly insurance premium for each eligible full-time employee to be applied to any of the medical, dental, and/or vision plans selected by the District.
 - a. For the 2023-2024 plan year, the District will fund a Health Reimbursement Arrangement (HRA).
 - b. For the 2023-2024 plan year, the parties have designated MODA Plan 5 the preferred District major medical plan.
 - c. Each member eligible for maximum insurance contribution enrolling in MODA Plan 5 for medical insurance coverage shall be allocated ninety dollars and zero cents (\$90.00) per month to purchase dental and/or vision insurance offered by the District.
 - d. Monthly vision and/or dental insurance premium costs in excess of the allocations in 1.c above are the responsibility of the member.
 - e. Members that enroll in a preferred District major medical plan shall also be eligible to participate in a District-sponsored group Health Reimbursement Arrangement (HRA) plan.
 - f. As applicable, the purpose of the group HRA is to provide reimbursements to members enrolled in MODA Plan 5 such that the annual deductible amounts (\$500/\$1,500) and the annual out of pocket maximum amounts (\$3,300/\$9,900).
 - g. Reimbursements: No reimbursement described below is available until after the member and his or her spouse and dependents (if any) have satisfied their portion of the deductible and out of pocket maximum as described in this section. Group HRA reimbursements are available only for qualifying expenses that are described in the MODA Plan 5 certificate of coverage, and which are applied to the health plan's maximum out of pocket limit including deductible, coinsurance and medical copays. Reimbursements are only available for qualifying expenses incurred while the member is enrolled in the plan. Expenses are incurred when care is provided rather than when the enrollee is billed or payment for the service is made. Claims for reimbursement must be submitted on or before each December 31 for expenses incurred during the preceding MODA plan year (currently October 1 through the following September 30).
2. The District shall provide part-time employees (.5 FTE or above) with a pro-rata amount of the District's full-time contribution and the employee shall pay the balance of the

premiums by payroll deduction. Bus drivers who are regularly scheduled to work three and one-half (3.5) hours or more per day shall be eligible for insurance benefits.

B. The District and Association agree to form a District insurance committee.

The Association agrees to appoint up to three staff members who do not opt out of the insurance to the Insurance Committee. The committee will act in an advisory capacity, study insurance carriers, insurance options, plan design, and make recommendations to the District and Association for potential ratification. All meetings of the committee will be open to employees and administrators. The Insurance Committee will meet at least twice during the contract year: once prior to open enrollment in October and once in the spring after the release of insurance rates.

C. Opting Out of District Insurance Coverage

1. Members who demonstrate insurance coverage from another source may opt out or waive participation in the District health insurance program.
2. For employees hired on or after July 1, 2017 the amount of the monthly District opt-out contribution on behalf of each eligible member shall be three hundred (\$300) dollars. All payroll costs will be deducted from the gross amount.
3. For all existing employees hired before July 1, 2017 the amount of the monthly District opt-out contribution on behalf of each eligible member shall be half the insurance cap, which is seven hundred ninety-four dollars and fifty-three cents (\$794.53). All payroll costs will be deducted from the gross amount.

D. Termination of Benefits

1. For those employees who work the entire year, defined in this Agreement, twelve continuous months of insurance will be provided.
2. When a staff member's employment is terminated before the end of the employee's work year, the District's payment of the above cap will cease as of the last day of the last month of the staff member's employment.
3. When a staff member's employment is terminated at or after the end of the employee's work year, the District's payment of the above cap will continue through Sept. 30, or the completion of 12 months of benefits, whichever comes first, or unless medical insurance coverage is obtained from another employer prior to that date.
4. When a staff member's employment is terminated the employee may continue to purchase insurance by self-paying the premium under the terms of COBRA. The

employee must make timely payments of the premium in order to continue COBRA coverage.

The District will sponsor an annual health benefits briefing during the beginning of year orientation for all members.