

Shakopee Public Schools

WELCOME TO OPEN ENROLLMENT!

Plan Year: 2020/2021

PICK THE BEST BENEFITS FOR YOU AND YOUR FAMILY

Shakopee Public Schools strives to provide you and your family with a comprehensive and valuable benefits package. We want to make sure you are getting the most out of our benefits—that is why we’ve put together this Open Enrollment Guide.

Open enrollment is a short period each year when you can make changes to your benefits. This guide will outline all the different benefits Shakopee Public Schools offers, so you can identify which offerings are best for you and your family.

Elections you make during open enrollment will become effective on **July 1, 2020**. If you have questions about any of the benefits mentioned in this guide, please don’t hesitate to reach out to HR (humanresources@shakopee.k12.mn.us).

Table of Contents

Health Insurance.....	4
Pharmacy Information.....	6
Dental Insurance.....	7
Life Insurance & Voluntary Life Insurance.....	9
STD & LTD.....	11
Flexible Spending Account.....	12
Health Savings Account.....	14
403B/457.....	15
Questions and Answers.....	16

HOW TO ENROLL

Our enrollment process is completed online. The administration services are administered by PlanSource Benefits Administration. You will receive an email from (humanresources@shakopee.k12.mn.us). The email will contain a link to the website, along with username and password information.

Everyone should log into the system and confirm your benefits. You'll want to make sure your personal information and beneficiary information is correct even if you are not making any changes to your insurance.

You will be able to generate an email confirmation of your elections. Keep this for your records and to use it to audit against your paychecks.

WHEN TO ENROLL

Open enrollment begins on **May 1, 2020** and runs through **May 19, 2020**. The benefits you choose during open enrollment will be effective on July 1, 2020.

HOW TO MAKE CHANGES

Unless you experience a life-changing qualifying event, you **cannot** make changes to your benefits until the next open enrollment period. Qualifying events include things like:

- Marriage, divorce or legal separation
- Birth or adoption of a child
- Change in child's dependent status
- Death of a spouse, child, or other qualified dependent
- Change in employment status or a change in coverage under another employer-sponsored plan

WHAT'S NEW FOR 2020/2021

HEALTH INSURANCE

Preferred One will remain as our medical insurance carrier. There are no changes to the benefits or deductible amounts.

District Contributions towards the VEBA/HSA

(amounts listed are for employees working 8 hours a day and for employees entering the plan on 7/1/20, if you work less than 8 hours a day or enter after 7/1/20 your amount will be pro-rated).

\$1,200/\$2,400 Deductible Plan	\$1,000 for Employee, \$2,000 for Employee+1 or Family
\$2,600/\$5,200 Deductible Plan	\$1,300 for Employee, \$2,300 for Employee+1 or Family
\$5,000/\$10,000 Deductible Plan	\$1,500 for Employee, \$2,600 for Employee+1 or Family

Summary of Medical Benefit Plans

In Network Services	\$1,200/\$2,400 Deductible	\$2,600/\$5,200 Deductible	\$5,000/\$10,000 Deductible HSA
Deductible	\$1,200 (individual) \$2,400 (family)	\$2,600 (individual) \$5,200 (family)	\$5,000 (individual) \$10,000 (family)
Out of Pocket Max	\$1,200 (individual) \$2,400 (family)	\$2,600 (individual) \$5,200 (family)	\$5,000 (individual) \$10,000 (family)
Co-Insurance	N/A	N/A	N/A
Preventive Care	100%	100%	100%
Office Visit	Deductible, then 100%	Deductible, then 100%	Deductible, then 100%
In Patient / Out Patient Hospital	Deductible, then 100%	Deductible, then 100%	Deductible, then 100%
Emergency Room Services	Deductible, then 100%	Deductible, then 100%	Deductible, then 100%
Prescription Drugs	Generic: deductible Brand: preferred – deductible non-preferred – not covered Specialty: deductible	Generic: deductible Brand: preferred – deductible non-preferred – not covered Specialty: deductible	Generic: deductible Brand: preferred – deductible non-preferred – not covered Specialty: deductible
Mail Order	90 day supply	90 day supply	90 day supply
Deductible Contribution (Benefit Eligible Staff working 8 hours a day)	\$1,000 (individual) \$2,000 (family)	\$1,300 (individual) \$2,300 (family)	\$1,500 (individual) \$2,600 (family)

YOUR COST IN 2020/2021

Our recent high claims experience requires a 6% premium increase on each of the medical plans for the new plan year. These rates have been agreed upon by the district wide insurance committee. Below are the full annual costs for each plan.

	Employee	Employee + 1	Family
\$1200/\$2400 Deductible	\$10,447.00	\$21,326.00	\$31,577.00
\$2600/\$5200 Deductible	\$8,540.00	\$17,508.00	\$26,047.00
\$5000/\$10,000 Deductible	\$6,681.00	\$13,641.00	\$20,320.00

PLEASE REFER TO YOUR CONTRACT FOR THE DISTRICT CONTRIBUTION AMOUNT TO YOUR COVERAGE

You can also view your per pay check deduction amounts when you are logged in the online enrollment site.

PHARMACY INFORMATION

Did you know that where you pick up your prescription can be costing you more money than you think?

Whether your drug costs are a co-pay or part of your deductible, shopping to find the lowest costs will help lower your premiums in the future.

As a plan we currently pay for over 16,000 prescriptions in a plan year, equaling over \$1.5 million or 20% of our entire medical plan expenditures.

Savings for each drug varies from store to store, so getting the best price on every drug would require shopping and purchasing different drugs at different stores. Most of us don't have time for that, but for every 5% we can reduce our overall drug spending we lower the required monthly premiums by 1%. This type of consumer involvement is a simple way to reduce our overall medical premiums year after year.

Please take a look at the ClearScript document on how to setup your account and find the lowest cost for your drugs.

How do I log on to ClearScript?

Step One

- Go to www.ClearScript.org and click on the orange tab.

Step Two

- Click MEMBER SIGN-IN to access your claim and drug history.

Step Three

- First time users: Click the Create New Account link. Enter information from your ID card & password you received via email.
- Returning members: go to Login. Enter User ID and Password.
- *Note: Each member will need to sign up for a password – you can only access your own prescription information.*

What information can I see on the ClearScript website?

- Mail Service – Mail Service program details, order form and online refills.
- Specialty Pharmacy Program – Information on the specialty pharmacy program and the drugs/diseases that are covered.
- Formulary Guide – See color-coded guide to drugs and their copay pricing categories.
- Pharmacy Locator – Need to know what pharmacies are near your home, or a specific address? This will identify pharmacies available and give you a map.
- Step Therapy – Information sheet available.
- Manual Claim form – Available if needed.
- Claim History – View your prescription history.
- Drug Information/Pricing – Get information about your prescription and see what you can expect to pay for it.
- Drug History – This report enables you to review your healthcare record for accuracy and content and provides information on less expensive drugs, generics, pill splitting and over-the-counter alternatives.
- Preferred Drug Search – This tool will help you determine which copayment applies to your prescription (i.e. brand/generic, formulary/non-formulary).

DENTAL INSURANCE

Health Partners will remain as our dental insurance carrier. There are no changes to the benefits. Please see the plan summary below.

The following is an overview of your HealthPartners coverage. For exact coverage terms and conditions, consult your plan materials.

Plan highlights	In-network	Out-of-Network
Partial listing of covered services	Care from a network provider	Care from an out-of-network provider *
Dental Plan Parameters	Annual Maximums & Deductibles are combined across all tiers	
- Annual maximum	\$1,000 per plan year	\$1,000 per plan year
- Individual Deductible (Applies to Basic Care, Special Care & Prosthetics)	None	\$25
- Family Deductible (Applies to Basic Care, Special Care & Prosthetics)	None	\$75
Implant maximum included in annual maximum	\$500	\$500
Preventive and Diagnostic Care		
- Teeth cleaning, exams, dental x-rays and fluoride treatments	100%	100%
- Sealants	80%	80%
Basic Care		
Basic Care I		
- Fillings (amalgam and anterior composite)	80%	80%
- Posterior composite (white fillings) You also pay the difference between the amalgam and composite fee	Altered to regular fillings	Altered to regular fillings
- Simple extractions	80%	80%
- Non-surgical periodontics	80%	80%
- Endodontics (root canal therapy)	80%	80%
Basic Care II		
- Surgical periodontics	80%	80%
- Complex oral surgery	80%	80%
Special Care		
- Restorative crowns & onlays	80%	80%
Prosthetics		
- Bridges, dentures & partial dentures	50%	50%
- Dental implants	50%	50%
Orthodontic Services		
Orthodontic lifetime maximums are combined in and out-of-network		
- Orthodontic care for dependents age 18 or under	Plan pays 50% up to \$1000 lifetime Maximum	Plan pays 50% up to \$1000 lifetime Maximum

* If your out-of-network dentist charges more than the maximum allowable amount, you may be responsible for the difference.

Emergency Care: Refer to the Group Dental Member Contract for coverage of emergency dental services

YOUR COST IN 2020/2021

There will be an increase of 2% for the 2020/2021 plan year. These rates have been agreed upon by the district wide insurance committee. Below are the full annual costs.

	Employee	Employee + 1	Family
Dental	\$1,004.00	\$1,004.00	\$1,004.00

PLEASE REFER TO YOUR CONTRACT FOR THE DISTRICT CONTRIBUTION AMOUNT TO YOUR COVERAGE

You can also view your per pay check deduction amounts when you are logged in the online enrollment site.

BASIC LIFE INSURANCE

Our life insurance is moving to The Standard.

Shakopee Public Schools provides qualified employees with group life and accidental death and dismemberment (AD&D) insurance. Please refer to your employment contract for the amount of coverage that is provided. Shakopee Public Schools pays for the full cost of this benefit—meaning you are not responsible for paying any monthly premiums.

In the online enrollment system, you can designate and/or update your beneficiary information. Please remember it is important that your beneficiaries are up to date.

VOLUNTARY LIFE/AD&D INSURANCE

While Shakopee Public Schools offers basic life insurance, some employees may want to purchase additional coverage. Think about your personal circumstances. Are you the sole provider for your household? What other expenses do you expect in the future (for example, college tuition for your child)? Depending on your needs, you may want to consider buying supplemental coverage.

You have the option to elect voluntary life/AD&D insurance with The Standard. With the change in carrier you have a one-time open enrollment opportunity to elect up to the guarantee issue amount without having to provide EOI/medical history and that after this year the annual elections will go to 2 increments of \$10,000 per year. You are responsible for paying the full cost of coverage through payroll deductions. You can purchase coverage for yourself in \$10,000 increments. The minimum coverage level is \$10,000 and the maximum is \$150,000.

Rate for Every \$1,000 of Employee Life Insurance Coverage & AD&D is \$0.020 per \$1,000										
Age	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-99
Life	\$0.04	\$0.05	\$0.08	\$0.10	\$0.15	\$0.23	\$0.43	\$0.66	\$1.27	\$2.06

VOLUNTARY DEPENDENT LIFE/AD&D INSURANCE

The district has the option for you to add voluntary life/AD&D for your dependents. You must have voluntary coverage in place for yourself to add this coverage.

You are responsible for paying the full cost of coverage through payroll deductions. With the change in carrier you have a one-time open enrollment opportunity to elect up to the guarantee issue amount without having to provide EOI/medical history and that after this year the annual elections will go to 2 increments of \$5,000 per year.

You can purchase coverage for your spouse in \$5,000 increments. The minimum coverage level is \$5,000 and the maximum is \$75,000 with a guarantee issue of \$50,000. Any amount over \$50,000 will require Evidence of Insurability to be completed.

Rate for Every \$1,000 of Voluntary Spouse Life/AD&D Insurance Coverage & AD&D is \$0.020 per \$1,000	
Age	<30 30-34 35-39 40-44 45-49 50-54 55-59 60-64 65-69 70-99
Life	\$0.04 \$0.05 \$0.08 \$0.10 \$0.15 \$0.23 \$0.43 \$0.66 \$1.27 \$2.06

You can purchase either \$5,000 or \$10,000 of all voluntary life/ad&d coverage for your child(ren).

Voluntary Child(ren) Life/AD&D Insurance Coverage & AD&D is \$0.020 per \$1,000	
\$5,000	\$1.00/month
\$10,000	\$2.00/month

SHORT TERM DISABILITY

Short Term Disability has moved to The Standard.

Many medical conditions can keep you out of work. But you need to keep up with your financial obligations while you recover. Short-term disability insurance replaces a portion of your income, providing a weekly cash benefit while you are out of work for a limited period due to an illness, injury, surgery, or recent childbirth.

Benefit of \$10 of Weekly Benefit										
Age	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-99
Life	\$0.450	\$0.414	\$0.378	\$0.342	\$0.342	\$0.378	\$0.441	\$0.522	\$0.315	\$0.711

LONG TERM DISABILITY

Our Long-Term Disability coverage has also moved to The Standard.

Shakopee Public Schools provides qualified employees with income protection with long term disability. Please refer to your contract for the coverage amount.

FLEXIBLE SPENDING ACCOUNTS

Further will continue to administer the health saving and spending accounts. Further's website is hellofurther.com.

WHAT ARE THE BENEFITS OF AN FSA?

- **It saves you money.** Allows you to put aside money tax-free that can be used for qualified medical expenses.
- **It is a tax-saver.** Since your taxable income is decreased by your contributions, you'll pay less in taxes.
- **It is flexible.** You can use your FSA funds at any time, even if it's the beginning of the year.

You cannot stockpile money in your FSA. **If you do not use it, you lose it.** You should only contribute the amount of money you expect to pay out of pocket that year.

WHAT TYPES OF FSAs ARE OFFERED?

- **Medical FSA** — This type of FSA allows you to pay for eligible expenses that are not covered by the health plan, such as deductibles, co-insurance, dental care, orthodontia, and vision care. The total amount you choose to contribute is available to you on the first day of the plan year, even if you have not actually contributed that much yet. The maximum amount you can elect for the 2020/2021 plan year is \$2,750.

The IRS expanded the eligible expenses list due to COVID-19 FSA can now be used to purchase over-the-counter medical products, including those needed in quarantine and social distancing, and feminine hygiene products, without a prescription from a physician. This change occurred on March 27, 2020 as part of the Coronavirus Aid, Relief, and Economic Security (CARES) Act that Congress passed. This means you can use both your HSA or medical FSA to pay for these items or be reimbursed without an RX from a doctor. This change is made effective retroactive to January 1, 2020. Therefore, individuals who previously purchased OTC medicines or menstrual products can request reimbursement for these items if they saved their store receipts. All FSA expenses, receipts are required for reimbursement.

- **Dependent Care FSA** — This type of FSA allows you to pay for day care expenses for your children or adult dependents. With a dependent care FSA, the money must be in your account before you can request reimbursement. The maximum amount you may contribute each year is \$5,000 (or \$2,500 if married and filing separately).

Example:

	Without FSAs	With FSAs
Gross income	\$30,000	\$30,000
FSA contributions	0	-\$5,000
Gross income	\$30,000	\$25,000
Estimated taxes		
Federal tax	-\$2,550*	-\$1,776*
State tax	-\$900**	-\$750**
FICA tax	-\$2,295	-\$1,913
After-tax earnings	\$24,255	\$20,314
Eligible out-of-pocket expenses		
Medical and dependent care expenses:	-\$5,000	\$0
Remaining spendable income	\$19,255	\$20,561
Spendable income increase		\$1,306

*Assumes standard deductions and four exemptions. **Varies, assume 3 percent.

HEALTH SAVINGS ACCOUNTS

Health savings accounts (HSAs) are a great way to save money and budget for qualified medical expenses. HSAs are tax-advantaged savings accounts that accompany high deductible health plans (HDHPs). HDHPs offer lower monthly premiums in exchange for a higher deductible (the amount you pay before insurance kicks in). The HSA is an option with the \$5,000/\$10,000 deductible plan.

WHAT ARE THE BENEFITS OF AN HSA?

- **It saves you money.** HDHPs have lower monthly premiums, meaning less money is being taken out of your paycheck.
- **It is portable.** The money in your HSA is carried over from year to year and is yours to keep, even if you leave the company.
- **It is a tax-saver**—HSA contributions are made with pre-tax dollars. Since your taxable income is decreased by your contributions, you'll pay less in taxes.

The IRS expanded the eligible expenses list due to COVID-19. HSA can now be used to purchase over-the-counter medical products, including those needed in quarantine and social distancing, and feminine hygiene products, without a prescription from a physician. This change occurred on March 27, 2020 as part of the Coronavirus Aid, Relief, and Economic Security (CARES) Act that Congress passed. This change is made effective retroactive to January 1, 2020.

The maximum amount that you can contribute to an HSA in 2020 is \$3,550 for individual coverage and \$7,100 for family coverage. Maximum contribution amounts include employee and employer amounts.

Additionally, if you are age 55 or older, you may make an additional “catch-up” contribution of \$1,000. You may change your contribution amount at any time throughout the year as long as you don't exceed the annual maximum.

403B/457

You can make a change to your 403B/457. If you are adding the 403B at this time, the form must be completed and your financial planner will have to sign the form indicating the account is set up to receive funds. If you are increasing or decreasing your contribution, you do not need the agent to sign the form. Completed forms need to be returned to humanresources@shakopee.k12.mn.us either via email, inter school mail, or fax (952-496-5091). The form is available on the district website and the online enrollment site.

The district will match contribution amounts based on years of service. If you are a licensed staff member with 0-3 years of service, you are eligible for a 1% match. If you are a licensed staff member meeting the tenure requirements, you are eligible for up to a 2.5% match. If you are a non-licensed staff member with 3 or more years of service, you are eligible for a 2.5% match.

The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the guide and actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about the guide, please contact HR.

QUESTIONS & ANSWERS

WHAT CHANGES ARE EFFECTIVE JULY 1, 2020?

- The Standard is our new Life and Disability insurance carrier. With the move to The Standard there will be an open enrollment for Voluntary Life. Employees enrolling in Voluntary Life during open enrollment can elect Voluntary Life for themselves and their spouse up to the guarantee issue amount without completing evidence of insurability.
- **The IRS expanded the eligible expenses list due to COVID-19.** FSA and HSA can now be used to purchase over-the-counter medical products, including those needed in quarantine and social distancing, and feminine hygiene products, without a prescription from a physician. This change occurred on March 27, 2020 as part of the Coronavirus Aid, Relief, and Economic Security (CARES) Act that Congress passed. This means you can use both your HSA or medical FSA to pay for these items or be reimbursed without an RX from a doctor. This change is made effective retroactive to January 1, 2020. Therefore, individuals who previously purchased OTC medicines or menstrual products can request reimbursement for these items if they saved their store receipts. All HSA and FSA expenses, receipts are required for reimbursement.

IF I WANT TO MAKE CHANGES, WHAT MUST BE COMPLETED?

- If you want to make a change to your medical, dental, or flexible spending elections, those changes will be made through the online enrollment process.
- You must complete the 403B/457 form if you want to add or change your contribution amount.
- If you are electing to add or increase supplemental life insurance, an evidence of insurability form may be required. If so, it will be sent to you to complete and return.

WHEN ARE THE FORMS DUE AND WHERE DO I RETURN THEM?

- The last day to complete the online enrollment process is May 19, 2020. The system will close at mid-night on May 19, 2020. There is no form, the enrollment is done online.

WHEN WILL I SEE A CHANGE IN PREMIUMS ON MY CHECK?

- Year Round Employees = 7/03/2020
- School Year Employees = 8/28/2020 payroll

WHAT IS THE DEDUCTIBLE PLAN YEAR?

- Medical = July through June
- Dental = July through June

OTHER INFORMATION:

- New elections must be made to continue participating in an FSA.
- If you do not make changes to your current medical and dental elections, those elections will remain the same for the plan year July 1, 2020 to June 30, 2021.
- For additional information go to www.shakopee.k12.mn.us Human Resources, Benefits or contact humanresources@shakopee.k12.mn.us