

Welcome to the
School District
of Menomonee
Falls Benefit
Program!

Employee Benefit

Guide

2019



Engage | Learn | Improve

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2019 Highlights

NEW Limited Purpose Flexible Spend Account (LPFSA)

This is a new option which allows employees who are enrolled on the District HDHP plan and/or have a health savings account to also put money aside pre-tax into a LPFSA for out of pocket dental and vision expenses only.

NEW Flexible Spending Account Annual Maximum

The IRS has set the 2019 FSA maximum to \$2,700.

2019 HDHP Health/Rx Premium Rates

| Coverage Level | Total Premium | District Monthly Contribution | Employee Monthly Contribution | Premium per check (20 checks per year) |
|----------------|---------------|-------------------------------|-------------------------------|--|
| Single | \$829.48 | \$414.74 | \$414.74 | \$248.84 |
| Family | \$1,914.92 | \$957.46 | \$957.46 | \$574.47 |

Vision Premium Rates

| Coverage Level | Total Premium | Employees pay 100% of the premium for vision coverage if enrolled | Premium per check (20) |
|----------------|---------------|---|------------------------|
| Single | \$6.16 | | \$3.70 |
| Family | \$15.30 | | \$9.18 |

Benefit Basics

The School District of Menomonee Falls offers a comprehensive suite of benefits to promote health and financial security for you and your family. This booklet provides a summary of your benefits. Please review it carefully so you can choose the coverage that is right for you and your family.

Coverage for you and your family

As an Educational Assistant or Healthroom Assistant you are eligible for benefits if you work at least 30 hours per week. Benefits are effective on the first day of work. You may enroll your eligible dependents for coverage, including:

- Your legally married spouse
- Your children up to age 26.

Once your benefit elections become effective, they remain in effect for the plan year from 1/1 – 12/31. You may only change coverage if you experience a qualifying life event, as described below.

Qualifying Life Events

Generally, you may only change your benefit elections during the annual enrollment period. However, you may change your benefit elections during the year if you experience an event such as:

- Marriage
- Divorce or legal separation
- Birth of your child
- Death of your spouse or dependent child
- Adoption of or placement for adoption of your child
- Change in employment status of employee, spouse or dependent child
- Qualification by the Plan Administrator of a child support order for medical coverage
- Entitlement to Medicare or Medicaid

You must notify Human Resources within 30 days of a qualifying life event. Depending on the type of event, you may need to provide proof of the event, such as a marriage license. If you do not contact Human Resources within 30 days of the qualified event, you will have to wait until the next annual enrollment period to make changes (unless you experience another qualifying life event).

Benefit Costs

The District pays the full cost of some of your benefits; you share the cost for some others. In addition, you pay the full cost for any voluntary benefits you elect.

| Benefit | Who Pays | Tax Treatment |
|--|----------------------|-----------------|
| Medical Coverage | The District and You | Pretax |
| Vision Coverage | You | Pretax |
| Basic Life and Accidental Death and Dismemberment (AD&D) Insurance | The District | After-tax |
| Voluntary Life and Accidental Death and Dismemberment (AD&D) Insurance | You | After-tax |
| Short-Term Disability Coverage | You | After-tax |
| Flexible Spending Accounts | You | Pretax |
| Employee Assistance Plan | The District | After-tax |
| 403(b) Retirement Savings Plan | You | Pre or Post tax |

PLEASE NOTE: Educational Assistants and Health Room Assistants who work between 20-30 hours are eligible for the District provided life and supplemental life coverage only.

Medical Plan

SDMF offers comprehensive Medical and Prescription Drug coverage to employees. The plan is a qualified high deductible health plan and employees who enroll may establish and fund a health savings account, if eligible.

The plan year deductible resets every January 1st.

| Active High Deductible Health Plan (HDHP) | | |
|---|--|---|
| | In- Network Benefits | Out-of-Network Benefits |
| Annual Deductible (Individual/Family) | \$2,000 / \$4,000 | \$4,000 / \$8,000 |
| Coinsurance | The plan pays 100% after deductible | The plan pays 50% after deductible |
| Out-of-Pocket Maximum (Includes Deductible) | \$4,000 / \$8,000 (no one individual can exceed \$6,550) | \$6,000 / \$12,000 |
| Lifetime Maximum | Unlimited | Unlimited |
| Preventive Care | 100%, No deductible | Deductible and Coinsurance |
| Primary Physician Office Visit | Deductible then 100% | Deductible then 50% |
| Specialist Office Visit | Deductible then 100% | Deductible then 50% |
| X-Ray and Lab | Deductible then 100% | Deductible then 50% |
| Inpatient Hospital Services | Deductible then 100% | Deductible then 50% |
| Outpatient Hospital Services | Deductible then 100% | Deductible then 50% |
| Urgent Care | Deductible then \$75 Copay Applicable | Deductible then \$75 Copay Applicable |
| Emergency Room Care | Deductible then \$250 Copay Applicable | Deductible then \$250 Copay Applicable |
| Prescription Drug Deductible (Individual/Family) | Prescription Drugs will track to the Annual Deductible and Out of Pocket Maximum | |
| Retail Prescription Drugs (30-day supply) • Generic • Brand Preferred • Brand Non-preferred | Copays Applicable after Deductible \$10 Copay \$25 Copay \$50 Copay | Copays Applicable after Deductible \$10 Copay \$25 Copay \$50 Copay |
| Mail Order Prescription Drugs (90-day supply) • Generic • Brand Preferred • Brand Non-preferred | Copays Applicable after Deductible \$20 Copay \$50 Copay \$100 Copay | Copays Applicable after Deductible \$20 Copay \$50 Copay \$100 Copay |

Pharmacy Benefits: Express Scripts

The District contracts with Express Scripts to manage our pharmacy benefits. To find pharmacies, formulary information and other pharmacy benefit information, visit the Express Scripts site at www.express-scripts.com/sdmf.

Preventive Medications: The District offers an expanded list of preventive drugs covered under the high deductible health plan (HDHP) with ZERO cost share to members.

Mail Order: Mail order is mandatory under the pharmacy benefits after two 30-day fills at a retail pharmacy. Members may choose to order through Express Scripts mail order service, or access the Walgreens Smart90 program.

Specialty Pharmacy: Certain Specialty medications must be obtained through Accredo, the specialty pharmacy vendor for Express Scripts.

Health Savings Account (HSA)

Employees enrolled on the medical plan can establish a Health Savings Account (HSA), an account that provides a tax-free way to save and pay for eligible medical, prescription drug, dental or vision expenses – even those not covered by your health care plan.

When you have eligible health care expenses, you can withdraw money tax-free from your HSA to pay for them. You save for health care expenses through your own before-tax contributions. All the money in your HSA earns interest tax free.

You can use the money in your HSA to pay for eligible out-of-pocket health care expenses incurred by you, your spouse, and dependent children (that you claim on your tax return). Your dependents do not need to be covered under the SDMF health plan to be eligible for reimbursement from your HSA.

Your HSA funds rollover from year to year. You can use the money in your HSA to pay for current expenses, or you can save your HSA funds for future health care expenses.

Benefits of an HSA

- TRIPLE tax savings
 - Contributions are pre-tax
 - Earnings grow tax-free
 - Distributions are tax-free as long as you are paying for qualified medical expenses
- The funds stay with you, regardless of employment or enrollment in the plan
- The funds rollover every year – there is no use it or lost it rule

How is my HSA Funded?

You can make tax-free contributions to your HSA. You may do this by setting up a payroll deduction from your paycheck, or by making a deposit directly into your HSA account.

How much can I add to my HSA?

Your total HSA contributions cannot exceed the Contribution Limits (based on a calendar year) set by the IRS as shown below. If you are age 55 or older, you are allowed to contribute an additional \$1,000 per year.

| Coverage Level | 2018 Max | 2019 Max | 55+ Catch-Up Contribution |
|----------------|----------|----------|---------------------------|
| Family | \$6,900 | \$7,000 | \$1,000 |
| Single | \$3,450 | \$3,500 | \$1,000 |

Opening Your HSA

Employees who enroll on the health plan with the District are eligible to establish a health savings account, EXCEPT IF:

- You are enrolled on another health plan that is NOT a qualified high deductible health plan
- You are covered under a FSA or HRA under another employers health plan
- You are enrolled in Medicare or Tricare
- You are being claimed as a dependent on someone else's tax return (excluding spouses)

The District does not partner with a specific vendor and you may choose to establish your HSA with a financial institution of your choice.

Our health plan offers an option through Optum Bank. If you would like to establish an HSA you may contact them directly at 866-234-8913, or www.optumbank.com.

There are many other financial institutions who offer HSA's as well and checking with your current bank may be a good option.

In establishing a HSA, remember to review monthly maintenance fees, minimum balance requirements and investment options.

Vision Plan

Your vision plan is provided through Delta Dental in partnership with EyeMed. It provides coverage for routine eye exams and also pays for all or a portion of the cost of glasses or contact lenses if you need them. You can see in- or out-of-network providers, however, keep in mind that you always save more money if you stay in-network.

For a list of EyeMed Vision Care provider locations, members may:

- Visit the Delta Dental website – www.deltadentalwi.com/provider-search/vision
- Visit the EyeMed Vision Care website – www.eyemedvisioncare.com/memweb/ProviderLocator
- Call EyeMed customer service at 866-723-0514

| Benefit | In-Network | Non-Network Reimbursement |
|---|---|---|
| Exam | \$10 copay | \$35 |
| Contact lens fit and follow-up | \$0 | \$40 |
| Frequency <ul style="list-style-type: none"> • Exam • Lenses • Frames | Every 12 months Every 12 months Every 24 months | Every 12 months Every 12 months Every 24 months |
| Frames | \$150, then 20% Discount | \$75 |
| Standard Lenses <ul style="list-style-type: none"> Single vision lenses bifocal lenses trifocal lenses | \$10 copay \$10 Copay \$10 Copay | Up to \$25 Up to \$40 Up to \$55 |
| Medically necessary contact lenses | Paid in Full | \$200 |
| Elective contact lenses | \$150 | \$120 |

Flexible Spending Accounts

A Flexible spending account offers employees another way to save and pay for eligible health care and dependent care expenses on a pre-tax basis. FSA elections will not automatically roll over.

How much can I contribute?

For 2019, you can contribute up to \$2,700 to a Health Care FSA or Limited Purpose FSA and up to \$5,000 to the Dependent Care FSA.

Up to \$500 of funds will be rolled over at the end of the plan year for the Health Care FSA and LPFSA. All other funds remaining at the end of the plan year will be forfeited.

How can I use my FSA funds?

With FSA's, you can claim reimbursement for eligible expenses for yourself, your spouse and dependents that you can claim on your income tax return or your adult children to age 26, even if you cannot claim them on your tax return.

Health Care FSA

The Health Care FSA is available only if you are not eligible to contribute to an HSA. You can use the Health Care FSA for eligible medical, prescription drug, dental and vision expenses.

Dependent Care FSA

The Dependent Care FSA lets you pay for eligible child care or elder care expenses, such as nursery school or elder day care.

Limited Purpose FSA (LPFSA)

If enrolled in an HSA account, you can participate in a LPFSA. While your HSA can be used for medical, prescription drugs, dental and vision expenses, the LPFSA can only be used for eligible dental and vision expenses.

Note: IRS guidelines stipulate that an individual cannot be enrolled in a FSA and an HSA at the same time. Therefore, you cannot participate in a Health Care FSA (even if it is in your spouse's name) if you are contributing to an HSA.

Life & Disability Benefits

Life and Accidental Death & Dismemberment Insurance

Life insurance is an important part of your financial security, especially if others depend on you for support. Accidental Death & Dismemberment (AD&D) Insurance is designed to provide a benefit in the event of death by accidental means or dismemberment, which includes loss of the use of certain body parts.

The District provides Basic Life and AD&D Insurance at no cost to you. The benefit amount is 1 times your annual basic earnings, up to a maximum benefit of \$200,000.

Please note that for employer paid policies exceeding \$50,000, the IRS requires the cost of coverage to be included as income and taxed accordingly.

Supplemental Life Option

Employees may purchase additional life insurance coverage for themselves, spouse and dependent children.

Employees who enroll upon initial eligibility are guaranteed coverage per the table below. Late enrollees would be subject to medical underwriting and carrier approval.

| Coverage | Guarantee Issue Amount | Maximum Amount |
|----------|------------------------|----------------|
| Employee | \$125,000 | \$300,000 |
| Spouse | \$25,000 | \$50,000 |
| Child | \$10,000 | \$10,000 |

Rates are age banded for Employee and Spouse

| Age Bands | Rate per \$1000 of Coverage |
|----------------|-----------------------------|
| Through Age 29 | \$0.040 |
| 30-34 | \$0.050 |
| 35-39 | \$0.070 |
| 40-44 | \$0.090 |
| 45-49 | \$0.150 |
| 50-54 | \$0.230 |
| 55-59 | \$0.390 |
| 60-64 | \$0.520 |

Voluntary Short-Term Disability (STD)

Employees may elect to enroll in short-term disability coverage by paying 100% of the cost. STD covers 66.67% of your weekly pre-disability earnings, to a maximum of \$1,500 per week. Benefits begin on the 1st day for an accident and the 7th day for an illness and continue to the earlier of recovery or 60 days.

Short-term disability benefits are payable in conjunction with sick leave.

Employees who enroll upon initial eligibility are guaranteed a \$301 weekly benefit amount. Any late enrollees or changes will be subject to underwriting and carrier approval.

| Salary range | Weekly Benefits | Monthly Premium Rate |
|-----------------------|-----------------|----------------------|
| \$11,465 - \$13,648 | \$147.00 | \$6.63 |
| \$13,649 - \$17,470 | \$175.00 | \$7.74 |
| \$17,471 - \$21,291 | \$224.00 | \$9.93 |
| \$21,292 - \$23,475 | \$273.00 | \$12.15 |
| \$23,476 - \$27,843 | \$301.00 | \$13.26 |
| \$27,844 - \$32,757 | \$357.00 | \$15.83 |
| \$32,758 - \$36,033 | \$420.00 | \$18.42 |
| \$36,034 - \$39,309 | \$462.00 | \$20.26 |
| \$39,310 - \$45,236 | \$504.00 | \$22.10 |
| \$45,237 - \$52,022 | \$580.00 | \$25.39 |
| \$52,023 - \$59,822 | \$667.00 | \$29.19 |
| \$59,823 - \$68,791 | \$767.00 | \$33.57 |
| \$68,792 - \$79,087 | \$882.00 | \$38.61 |
| \$79,088 - \$90,942 | \$1,014.00 | \$44.40 |
| \$90,943 - \$104,591 | \$1,166.00 | \$51.07 |
| \$104,592 - \$116,993 | \$1,341.00 | \$58.73 |
| \$116,994+ | \$1,500.00 | \$67.54 |

Any request for enrollment in the Supplemental Life coverage or Short-Term Disability coverage may be subject to underwriting and employee will receive determination of coverage from the carrier.

Retirement

403(b) / 457 Retirement Savings Plan

The District offers voluntary retirement savings plans to help employees save for a secure retirement. All District employees are eligible to participate by making convenient payroll deducted contributions into a 403(b) or 457. The District Partners with the following three approved vendors:

| Vender | Contact Name | Contact Phone |
|---|--------------|--------------------------|
| Retirement Plan Advisors / Security Benefit | Angel Tullar | (866) 669-9500 |
| WEA Trust Member Benefits | Scott Nelson | (800) 279-4030, Ext 2239 |
| Wisconsin Deferred Compensation | Ryan Collier | (877) 457-9327 |

| | Traditional 403(b) | Roth 403(b) | 457 Deferred Comp | Roth 457 |
|--|--|--|--|--|
| Contributions | Pre-Tax | After-Tax | Pre-Tax | After-Tax |
| Growth | Tax-Deferred | Tax-Free | Tax-Deferred | Tax-Free |
| Distributions | <ul style="list-style-type: none"> • Taxable • Available at age 59 ½ or separation of service • Withdrawals prior to age 59½ may be subject to 10% federal penalty unless separation of service occurred after age 55 | <ul style="list-style-type: none"> • Tax-free at age 59½ and at least 5 tax years from date of first Roth 403(b) contribution • Withdrawals prior to age 59½ may be subject to 10% federal penalty | <ul style="list-style-type: none"> • Available at separation of service • Taxable • No age requirement. • No 10% federal penalty on early withdrawals | <ul style="list-style-type: none"> • Available at separation of service • Tax-free at age 59½ and at least 5 tax years from date of first Roth 457 contribution • No 10% federal penalty on early withdrawals (earnings may be taxable) |
| Annual Maximum Contributions (2018) | <ul style="list-style-type: none"> • \$18,500 basic • \$6,000 extra if over 50 years of age | <ul style="list-style-type: none"> • \$18,500 basic • \$6,000 extra if over 50 years of age | <ul style="list-style-type: none"> • \$18,500 basic • \$6,000 extra if over 50 years of age • \$37,000 “Double Up” provision for 3 consecutive years prior to normal retirement age (if eligible) | <ul style="list-style-type: none"> • \$18,500 basic • \$6,000 extra if over 50 years of age • \$37,000 “Double Up” provision for 3 consecutive years prior to normal retirement age (if eligible) |
| Loans | No | No | No | No |
| Hardships | Yes | Yes | Yes | Yes |
| Benefits | <ul style="list-style-type: none"> • Reduces taxable income • Provides tax-deferred income in retirement • Can combine 403(b) Roth, 403(b), 457, and 457 Roth plan contributions | <ul style="list-style-type: none"> • Tax-free growth • Provides tax-free income in retirement • Can combine 403(b) Roth, 403(b), 457, and 457 Roth plan contributions | <ul style="list-style-type: none"> • Reduces taxable income • Provides income for employees retiring before age 59 ½ • Can combine 403(b) Roth, 403(b), 457, and 457 Roth plan contributions | <ul style="list-style-type: none"> • Tax-free growth • Provides tax-free income in retirement • Can combine 403(b) Roth, 403(b), 457, and 457 Roth plan contributions |

Employee Pension

Wisconsin Retirement System (WRS)

Employees who are expected to work at least 880 hours within a rolling 12 month period will be automatically enrolled in the Wisconsin Retirement System (WRS). Effective 1/1/19, the employee contribution requirement will be 6.55% of gross earnings per check, and the District matches it 6.55%.

The pension is managed by the State of Wisconsin, not by the District. Employees may contact the Pension directly at (608) 266-3285. Or you may visit the site online at etf.wi.gov.

If an employee hits eligibility during employment, participation is required. The employee will be notified by the payroll office and enrolled in the pension.

Employee Assistance Program

Employee Assistance Program

The District provides an Employee Assistance Program (EAP) to all eligible employees – at no cost. The EAP is designed to provide prompt, confidential help with a range of personal and family issues that may affect all of us from time to time.

- Financial
- Stress
- Parenting
- Legal Counseling
- Family Issues



Benefit Plan Provider Contact Information

| Plan | Provider | Phone Numbers | Website |
|---------------------------------|-----------------------------|---------------|---|
| Medical | UMR | 800-826-9781 | www.umar.com |
| Prescription Drug | Express Scripts | 800-837-6201 | www.express-scripts.com/sdmf |
| Vision | Delta/Eye Med | 866-723-0514 | http://portal.eyemedvisioncare.com |
| Flexible Spending Accounts | Diversified Benefits | 800-234-1229 | www.dbsbenefits.com |
| Health Savings Account (HSA) | Optum Bank | 866-234-8913 | www.optumbank.com |
| Life & AD&D Coverage | National Insurance Services | 800-627-3660 | |
| Short-Term Disability Insurance | National Insurance Services | 800-627-3660 | |
| Employee Assistance Program | Optum EAP | 855-205-9185 | www.liveandworkwell.com |
| Wisconsin Retirement System | WRS/ETF | 877-533-5020 | http://etf.wi.gov |
| SDMF HR Department | Melissa Beck | 262-255-8396 | beckmel@sdmfschools.org |
| SDMF Payroll Department | Tim Hansen | 262-255-8371 | hanstim@sdmfschools.org |



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2019 SDMF Benefits Guide

Educational Assistants, Healthroom Assistants

This benefit summary provides selected highlights of the School District of Menomonee Falls benefits program. It is not a legal document and shall not be construed as a guarantee of benefits nor of continued employment at the District. All benefit plans are governed by master policies, contracts and plan documents. Any discrepancies between any information provided through this summary and the actual terms of such policies, contracts and plan documents shall be governed by the terms of such policies, contracts and plan documents. The School District of Menomonee Falls reserves the right to amend, suspend or terminate any benefit plan, in whole or in part, at any time. The authority to make such changes rests with the Plan Administrator.