



# Clyde-Green Springs Schools Employee Benefits Brochure

**Teacher's Edition**  
**August, 2009**

## Clyde-Green Springs Schools

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## San-Ott Insurance Consortium

The district has been a member of the San-Ott Insurance Consortium since August 1, 1988. San-Ott is an insurance purchasing cooperative made up of school districts located in Sandusky and Ottawa counties. The other school district members of the consortium include: Gibsonburg, Woodmore, Vanguard-Sentinel JVS, Benton-Carroll-Salem, Genoa Area, Port Clinton, Danbury & Put-in-Bay. By combining forces the districts are able to get better quotes on insurance coverage and related services.

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### Suggestions for Handling Claim Problems or Questions:

If you have a problem with a claim:

- 1) Look up your claim on the carrier's website. This is the quickest way to see if they have received the claim and how it was processed. (Note: You can also get new or replacement insurance cards on websites.)
- 2) Contact Customer Service. Customer Service numbers are shown on the back of your insurance cards and in this brochure.
- 3) Keep a record of who you spoke to, when and what was agreed upon.

The above process will resolve most problems.



## Medical & Dental Insurance

[www.medmutual.com](http://www.medmutual.com)

Visit website to:

- Find information regarding coverage
- View claims paid
- Check status of deductibles
- Request help with claims processing
- Request new identification cards

**Medical Mutual  
Customer Service Line**  
1-800-362-5729

*Medical Mutual of Ohio* provides medical and dental coverage to district employees.

Employees have a choice between two medical plans; *SuperMed Select* and *SuperMed Classic*.



Employee currently pay 8% of the monthly premium for the Select plan and 6% of the monthly premium for the Classic Plan. Employees pay 10% of the monthly premium for dental coverage.

Below are the monthly rates.

Current Plans and Rates						
Medical		SuperMed Select Option 4		SuperMed Classic Option 5		
		Family	Single	Family	Single	
		\$1,146.00	\$466.00	\$1,024.00	\$418.00	
	<b>Board Share:</b>	\$1,054.32	\$428.72	\$962.56	\$392.92	
	<b>Employee pays:</b>	\$91.68	\$37.28	\$61.44	\$25.08	
Dental		Family	Single			
		\$65.00	\$23.00			
	<b>Board Share:</b>	\$58.50	\$20.70			
	<b>Employee pays:</b>	\$6.50	\$2.30			

Effective 8/1/2009



## Prescription Drugs

[www.express-scripts.com](http://www.express-scripts.com)

**Express Scripts  
Customer Service Line**  
1-800-235-4357

*Express Scripts* provides prescription drug coverage for the district. Premiums for this coverage are included in the medical rates. By presenting your drug card at most local pharmacies, your claims are submitted automatically. You may print a claim form from their website if you purchase your prescription at a non-participating pharmacy.

## Vision Service Plan (VSP)

*Vision Service Plan* provides vision coverage for the district. The district pays 100% of the premium for its full-time employees. VSP is a network plan. To get the best benefits you should visit a participating doctor. To find participating providers in our area visit the VSP website. At this website, you can also view eligibility for services and get information about how to file a claim if you visit a non-participating provider. No membership cards are produced by VSP. Just mention to your provider that you have VSP coverage and they will verify your benefits.



[www.vsp.com](http://www.vsp.com)

**VSP**  
Customer Service  
Line  
1-800-877-7195

## Flexible Spending Accounts

IRS Section 125 Flexible Spending Accounts (a.k.a. Cafeteria Plans) are available to eligible employees through MHM Resources, LLC. All eligible employees are able to avoid taxation of their (employee) share of medical and dental insurance premiums by signing the annual election form. In addition, employees may establish a Health Care Reimbursement Account and a Dependent Care Account through the Section 125 program.

The district contributes \$1,200 into the Health Care Reimbursement Account for all full-time employees. If the employee elects *SuperMed Classic* as their medical insurance plan, the district contributes \$2,000 into the Health Care Reimbursement Account. This account can be used to cover out-of-pocket medical expenses. The employee may also contribute to the account if they wish but are warned to be conservative because of a “use it or lose it” rule.

Dependent Care Accounts are fully funded by the employee.



[www.myflexonline.com](http://www.myflexonline.com)

Claim forms for the Flexible Spending Accounts are completed online and faxed to:  
877-782-8889

or mailed to:  
Flex Claims Group  
MHM Resources, LLC  
PO Box 7969  
Leawood, KS 66207-0969

**MHM Resources**  
Customer Service  
Line

1-877-887-1062  
Or  
[Flexhelp@mhmbiz.com](mailto:Flexhelp@mhmbiz.com)

## Spousal Coordination of Benefits

The spouse of a district employee is eligible to be covered under the employee's medical coverage. However if the spouse is employed and eligible to obtain single medical coverage through his/her employment at a cost of no more than 50% of the district's Option 4 single insurance rate, excluding drug coverage (currently \$181.50/month), the spouse must enroll in primary coverage through his/her employment. Coverage for the spouse through the district's insurance would be secondary to the coverage obtained through his/her employment. If the spouse is on a qualified high-deductible health plan and utilizes a Health Savings Account (HSA), they are not eligible for any coordination of benefits under the District's plan.

## Payment in Lieu of Medical Insurance

Employees who are eligible for family medical coverage and decline coverage are eligible to receive a payment in lieu of this coverage in the annual amount of \$2,000. Employees who are eligible for family medical coverage and elect single coverage are eligible to receive a payment in lieu of this coverage in the annual amount of \$1,000.

Please consult the negotiated agreement for more information and a payment schedule of this benefit.



Please inform the district treasurer any time you have a change in beneficiary for this program.

## Term Life Insurance

According to the current negotiated agreement, the District provides a \$40,000 term life insurance policy through The Hartford to all eligible employees. Employees are asked to name a beneficiary for the policy. The 2009 rate will be \$3.80 monthly or \$45.60 annually per employee. The District pays 100% of this cost.



STATE TEACHERS  
RETIREMENT SYSTEM  
OF OHIO

State Teachers Retirement System  
275 East Board Street  
Columbus, Ohio 43215-3771  
1-888-227-7877

## Retirement

Membership in the State Teachers Retirement System (STRS) is required for all certified employees. The current employee contribution is 10% of your gross salary. The District contributes another 14% on your behalf. If you have any questions concerning your retirement, please contact STRS directly. The STRS website is found at [www.strsoh.org](http://www.strsoh.org).

## Workers Compensation



School district employees may be entitled to compensation upon incurring an injury received in the course of, and arising out of, the injured employee's employment.

If you are injured on the job, please contact your supervisor immediately. You will need to file a District accident report. If the injury is serious please seek medical attention immediately. **HealthLink of Memorial Hospital** or the occupational health department of **Bellevue Hospital** are our preferred providers. The District Treasurer will provide the appropriate BWC contact information. Please note that all claims are processed through BWC, not the District. You will not be eligible for both sick leave paid by the District and BWC compensation. In most cases you will have an option to use sick leave instead of BWC compensation. Please be aware that BWC compensation may not be as much as your normal pay.

## Unemployment Compensation

In general, all full-time District employees are covered under Ohio's Unemployment Compensation Law. Consequently, an employee may become eligible for compensation due to involuntary, total or partial unemployment provided he/she files a claim for benefits and meets the qualification requirements. The District reimburses the Ohio Bureau of Employment Services based on actual payments made on a quarterly basis.

## Other Benefits

The following list is some of the many benefits you received by being a full-time employee of the District. A complete explanation of each benefit may be found in your copy of the negotiated agreement.

- A. **Personal Leave**—three (3) days per year:
  - Two of these days are restricted and one is unrestricted
  - If these days are not used, they are converted to sick leave at June 30th each year.
- B. **Sick Leave**—fifteen (15) days per year
  - Accumulated at the rate of 1.25 per month (after first pay of each month)
  - Up to 250 days can be accumulated
- C. **Professional Leave**
  - As needed for attendance at professional conferences approved by supervisor
- D. **Calamity Days**—Up to five (5)
- E. **Severance Pay at Retirement**
  - Upon retirement, 26% of accumulated sick leave days are paid at the employee's current daily rate



## The Consolidate Omnibus Budget Reconciliation Act (COBRA)

This federal law was enacted in response to a national concern for workers, and dependents, who become ineligible for health care benefits at the time the worker’s employment ceases (referred to as a “qualifying event”).

### Qualifying Events—Eligibility and Duration

<b>Qualifying Event</b>	<b>Duration</b>
1. Termination, Voluntary/Involuntary	18 months
2. Reduction in Hours	18 months
3. Widowed Spouse/Dependent Children	36 months
4. Divorce or Legally Separated	36 months
5. Medicare Ineligible Spouse	36 months
6. Dependent Children who no longer meet plan’s definition of eligibility	36 months

Eligible individuals may receive a continuation of the same benefit coverage under COBRA, as they enjoyed under normal participation in the District’s plan. Coverage may include medical, dental, vision and prescription drug benefits, but not life insurance or disability benefit plans.

Employees must accept or reject continuation of COBRA coverage within sixty days after notice of eligibility and pay the premium within forty-five days after acceptance of continuation.

## Family & Medical Leave Act of 1993 (FMLA)



Employees must notify the Superintendent’s and Treasurer’s Office in order to receive this benefit.

The District may provide up to 12 weeks of unpaid, job-protected leave to eligible employees for certain family and medical reasons. Employees are eligible if they have worked for at least one year and for 1,250 hours over the previous 12 months. For the duration of the FMLA leave, the District will maintain the health coverage under any group health plan. The use of FMLA leave will not result in the loss of any employment benefit that accrued prior to the start of an employee’s leave. Unpaid leave may be granted for any of the following reasons:

- To care for the employee’s child after birth, or placement for adoption or foster care;
- To care for the employee’s spouse, son or daughter, or parent, who has a serious health condition; or
- For a serious health condition that makes the employee unable to perform the employee’s job.

## Section 457 Compensation Programs

Section 457 Plans are available to all staff members through either the Ohio Public Employees Deferred Compensation Program (ODC), or ING Financial Advisors, LLC. These programs are supplemental retirement plans that provide for tax-deferred contributions through payroll deductions that are above those associated with the state retirement systems.

The District does not contribute to this benefit on behalf of employees. Employees should consult their tax advisors for information regarding how they may be affected by participating this program.

## Tax-Deferred Annuity Plan

Section 403(b) tax-deferred annuities are available to all staff members. These supplemental retirement plans provide for tax-deferred contributions through payroll deduction that are above those associated with the state retirement systems. The District hereby invites employees to consider participating in these programs.

The following companies currently meet the qualifications to offer plans to District employees:

- AIG Valic (Variable Annuity Life)
- Ameriprise
- 403b ASP
- Great American
- MetLife Resources
- Security Benefit
- ING Life Insurance & Annuity Company
- Oppenheimer Funds
- Thrivent Financial

The District does not contribute to this benefit on behalf of employees. Employees should consult their tax advisors for information regarding how they may be affected by participating in a TDA plan.



[www.ohio457.org](http://www.ohio457.org)

### **Ohio Public Employees Deferred Compensation Program**

6085 Emerald Parkway  
Dublin, Ohio 43016  
1-877-644-6457



### **ING Financial Advisors Glenn Alford, Financial Planner**

1236 Clark St, Suite I  
Holland, Ohio 43528  
1-800-451-4702  
Ext. 4017489

Email: [Glenn.Alford@ingfa.com](mailto:Glenn.Alford@ingfa.com)

## Notice to Employees Regarding 403(b) Contract Transfers

The Treasury Department and IRS recently published new regulations that pertain to tax-deferred annuities under Section 403(b) of the federal income tax law. While these regulations are generally effective as of January 1, 2009, a provision of the regulations, which modify the rules regarding tax-free transfers of your 403(b) took effect after September 24, 2007.

The new regulations now limit to whom you can make transfers that occur after September 24, 2007. To assure regulations are followed, the District has contracted with ING Life Insurance and Annuity Company who will act as third party administrators for the district's tax-deferred annuity plan. Please contact the District Treasurer for more information.