



Please keep the following in mind regarding co-payments, deductibles and co-insurance:

**Deductible:** These are the first dollars you pay for medical services provided. For example, if the first visit to your doctor for the year was a foot issue and the office visit cost \$200, you would pay \$200. Deductibles do not apply to annual physicals, prenatal visits, baby wellness visits, and numerous other things.

You would continue to pay for all deductible related costs until you hit \$1,000. If you have a family plan, no one family member will exceed the \$1,000 deductible and no family in total will exceed \$2,000.

Drug, urgent care, and emergency room co-payments do not count toward deductibles.

**Co-Insurance:** After meeting your deductible, medical costs are then split between you and the District. Currently the split is 90% paid by the District and 10% by you. The new split will be 80% and 20%.

Co-insurance does not apply to annual physicals, prenatal visits, baby wellness visits, and pharmacy.

**Medical Maximum out-of-Pocket (MOOP):** This is the most you or your family will have to pay for medical services, excluding drug co-payments. Urgent care and emergency room co-payments do count toward the MOOP.

The MOOP includes all deductible related payments. The MOOP will be \$2,000 per person. No one person in a family plan will exceed \$2,000 (\$1,000 deductible + 20% of costs to a maximum of an additional \$1,000) in medical costs. The family in total will not exceed \$4,000 (\$2,000 deductible + 20% of costs to a maximum of an additional \$2,000).

**Co-Payments:** These are amounts you pay for drugs, urgent care visits, and emergency room visits. These dollars do not count for deductible or co-insurance. Co-payments are always paid for drugs.

### **Delta Dental Insurance**

The District pays the FULL COST of a group dental benefits administered by Delta Dental of Wisconsin (current annual premium is \$553 for single coverage, and \$1,428 for family coverage). The plan pays for services to be received from any provider including two checkups per year, and 80/20 coverage for additional services, subject to reasonable and customary costs.

### **Vision Insurance**

The District offers a voluntary Vision Benefit through Delta Dental. The amount paid by employees and a brief summary is as follows:

Employee:	\$6.09/Month
Employee and Spouse:	\$12.17/Month
Employee and Children:	\$12.42/Month
Employee, Spouse and Children:	\$18.51/Month
Frame Allowance (Materials)	\$130
Contact Lenses Allowance (Materials)	\$120
Copay Amount:	\$10.00
Comprehensive Spectacle Exam	Member pays \$10.00, plan pays balance

**Life Insurance - National Insurance Services (Life Insurance)**

The District pays the FULL COST of \$10,000 term life insurance coverage.

**Short Term Disability Insurance (STD) – National Insurance Services**

The District offers a voluntary short-term disability plan, **paid for by the employee**, that provides compensation under certain conditions during a period of illness and/or disability up to 60 days.

The benefits and associated costs are as follows:

Weekly Benefit:	\$147	Monthly Employee Cost:	\$11.30
	\$175		\$13.24
	\$224		\$17.08
	\$273		\$20.96
	\$301		\$22.90
	\$357*		\$27.40
	\$420*		\$31.91
	\$462*		\$35.13
	\$504*		\$38.35

\*Benefits at this level require completion of an evidence of insurability form.

**Long Term Disability Insurance (LTD) – National Insurance Services**

The District pays the cost of group long-term disability insurance for employees who are at least a 0.50 FTE. Eligible employees qualify for benefits following 60 calendar days after the start of the disability for a period of 3 years. Benefits are equal to 80% of the staff member’s scheduled salary for the first year of disability, 70% the second and third year. Staff members who qualify for LTD shall be required to use the benefits in lieu of continuing to receive sick leave.

**LIFE INSURANCE**

The District participates in a term life insurance plan through the Department of Employee Trust Funds (Minnesota Mutual Life) with rates based on the schedule below. The basic life insurance coverage is the amount of your calendar year earnings rounded to the next highest thousand. You may choose to purchase an additional four Units equal to the basic coverage. The rate charged is based on your age as of July 1 of each year.

<u>Attained Age</u>	<u>Rate per \$1,000 of Insurance</u>
Under 30	\$.05
30-34	\$.06
35-39	\$.07
40-44	\$.08
45-49	\$.12
50-54	\$.22
55-59	\$.39
60-64	\$.49
65-69	\$.57

The district pays 20% above the scheduled premium payment listed for the basic coverage for those who elect to enroll. A spouse and dependent children can be added for \$1.75 or \$3.50 per month based on the below coverage. Regardless of the number of children insured, the costs for this coverage is listed below:

Amount of coverage for:	<u>\$1.75/Month</u>	<u>\$3.50/Month</u>
Spouse:	\$10,000	\$20,000
Children	\$5,000	\$10,000

### **FLEXIBLE BENEFIT PLAN (Section 125)**

The most you may take out for 2020 is \$2,800 for medical expenses. Whatever money you take out, must be spent or you lose it. That is the tradeoff for tax free status. There is an annual open enrollment every year in late October/early November.

For example, if you take out \$2,800 pre-tax, you earn \$2,800 to pay \$2,800. If you had to pay \$2,800 after taxes, you would have to earn about \$3,472 to pay \$2,800.

### **WISCONSIN RETIREMENT SYSTEM**

The employee contribution for eligible participants is deducted on a pre-tax basis, currently 6.6% of gross salary.

### **TAX SHELTERED ANNUITIES 403(B) (TSA)**

Similar to a 401(k) plan, employee contributions for saving for retirement can be made to a 403(b) through providers on the District's approved list. Visit [www. \*\*https://www.tsacg.com/individual/plan-sponsor/wisconsin/oak-creek-franklin-joint-school-district/\*\*](https://www.tsacg.com/individual/plan-sponsor/wisconsin/oak-creek-franklin-joint-school-district/) for a list of providers. Employees are encouraged to participate in a 403(b) plan by completing a salary reduction agreement (SRA) to have pre-tax or post tax dollars set aside for retirement. This provides savings for retirement in addition to the pension available through the Wisconsin Retirement System. Employees may complete a Salary Reduction agreement at any time during the year.

### **EMPLOYEE ASSISTANCE PROGRAM**

The district provides all employees and their family members an opportunity to address a wide range of family, health, workplace and personal issues. The Employee Assistance Program is provided through IMPACT in partnership with FEI.

If you have any questions regarding these benefits, please feel free to contact Troy Hamblin at (414) 768-6155 or e-mail at [t.hamblin@ocfsd.org](mailto:t.hamblin@ocfsd.org).