2019 BENEFITS INFORMATION

Enrollment Facts for Active Benefits Eligible Employees

The School Board provides all full-time employees Term Life insurance with Metropolitan Life Insurance Company (MetLife) that is one time their annual base salary rounded up to the next \$1,000.00, with the exception of Administrators and Confidential Exempt Personnel who receive two times their annual base salary. The minimum benefit for employees represented by AFSCME is \$10,000. We strongly encourage you take this opportunity to update your beneficiary designation online during this open enrollment period.

What You Need to Know:

- Davis Vision <u>WILL NOT</u> be offered for the 2019 plan year. If you are currently enrolled in the Davis Vision plan, your coverage will terminate on December 31, 2018. We will continue to offer vision coverage through UnitedHealthcare. If you wish to enroll in this plan, you will need to complete the online enrollment.
- There are no plan design or premium changes to the Flexible Benefits being offered.
- All Cigna healthcare plan (OAP 10 (not offered to new enrollees), OAP 20, and LocalPlus) rates will remain the same for employee and dependent healthcare coverage. However, if you experience a change in salary band, as a result of last year's negotiations, you may have an increase in both employee and dependent healthcare deductions. The Board continues to subsidize dependent coverage.
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- Annual contribution limit for Medical FSA has increased to \$2,700 (formerly \$2,650) and the minimum annual contribution has increased to \$250 (formerly \$200). If you currently have the minimum of \$200, your plan will terminate on December 31, 2018; therefore, you will need to enroll.
- If you do not make any changes, your current healthcare and/or flexible benefits coverage and your dependent(s) coverage will continue, with the exception of Davis Vision. Both plan design and premium changes will automatically be adjusted, if applicable, effective January 1, 2019.
- If you are currently opting out of healthcare, this election will continue and you will have to submit proof of other group or state-funded healthcare coverage.
- If you are being deducted the spouse/domestic partner annual surcharge, the deductions will continue. Therefore, we ask that you review your response in the Surcharge Affidavit to confirm their medical coverage status has not changed.

Your Open Enrollment To-Do List:

- ✓ Visit your new and improved ADA compliant benefits webpage at www.dadeschools.net and under "Highlights" click on "2019 Benefits."
- ✓ Log into the employee portal and carefully review your current 2018 Benefits Statement for reference during your open enrollment session. Then, review your 2019 Benefits Statement. This statement will display your benefits for the 2018 plan year; however, it will reflect your 2019 per pay deductions based on your updated Benefit Salary.
- ✓ Review your benefits to ensure you've selected the plans that best fit your needs.
- ✓ Review/Update your beneficiary designation (Name, Date of Birth and Social Security Number is required)
- ✓ If you cover your spouse or domestic partner on a medical plan, review your response in the Surcharge Affidavit to confirm their medical coverage status has not changed.
- ✓ Complete your 2019 benefit elections by submitting your changes and print your Employee Benefits Confirmation Statement.

Additional Information and Resources:

Spousal/Domestic Partner Surcharge:

If you currently cover your spouse/domestic partner on an M-DCPS healthcare plan and are being deducted the spouse/domestic partner surcharge, the annual surcharge of \$500, billed on a bi-weekly basis according to your pay schedule, will continue.

Deductions Per Pay Period	Deducciones Por Periodo de Pago	Dediksyon Pou Chak Peryòd Peye
10-month employees: \$25.00	Empleado de 10 meses: \$25.00	10 mwa anplwaye: \$25.00
11-month employees: \$20.84	Empleado de 11 meses: \$20.84	11 mwa anplwaye: \$20.84
12-month employees: \$19.23	Empleado de 12 meses: \$19.23	12 mwa anplwaye: \$19.23

However, if your spouse/domestic partner no longer has an employer sponsored healthcare plan available to him/her, please use the online enrollment application to update the status of their coverage.

During the online enrollment, click on the box next to the question that best describes the status of your spouse/domestic partner's coverage:

- My spouse/domestic partner does not have healthcare coverage available from his/her own employer and I choose to cover him/her through an M-DCPS plan (spousal/domestic partner surcharge will not be applied)
- My spouse/domestic partner does have healthcare coverage available through his/her own employer, but declines (opt-out) that coverage and I choose to cover him/her through and M-DCPS healthcare plan.
- My spouse/domestic partner does have healthcare coverage available through his/her own employer and he/she has elected that coverage; however, I choose to cover him/her through an M-DCPS healthcare plan.

Employees Hired After January 1, 2018:

- Employees hired after January 1, 2018 may be able to enroll in a plan of their choice in the following year after satisfying 12 months of continuous employment benefits in a benefits-eligible position.
- Employees hired during the Open Enrollment period have been enrolled in the Cigna LocalPlus Plan for both plan years 2018 and 2019. You must enroll online during this enrollment period for employee-paid benefits effective January 1, 2019 or you will not be allowed to make any changes after the deadline unless you experience an event that qualifies as an eligible Change in Status.

Dependent Documentation:

Proper dependent eligibility documentation is required for all dependents covered under a School Board plan and the documentation required is based on the type of dependent you are covering. For a complete list of the dependent documentation requirements, please visit www.dadeschools.net and under Highlights click on 2019 Benefits, then click on the Notices/Forms icon. If eligibility documentation is not submitted during this open enrollment period, you will receive a letter requesting it. If the required documentation is not provided, your dependent coverage will be terminated. All documentation will be treated as highly confidential.