

Teacher Associates **must work 30 hours (0.7500 F.T.E.) or more per week to be eligible to participate** in the following CRCSD benefit options for 2017-2018 as per the negotiated Agreement between the Cedar Rapids Organization of Teacher Associates and the Cedar Rapids Community School District (CRCSD).

Benefits are effective July 1, 2017 (or your date of hire) and continue through June 30, 2018.

BENEFIT PROVISION PROVIDED BY THE DISTRICT

Information about each option below can be found on the District's website by going to this link: [DISTRICT RESOURCES](#). If you are not accessing this document electronically, navigate to the Cedar Rapids Community School District website and Choose Departments & Services > Human Resources > Benefits or Payroll to access the information outlined within this document.

LONG TERM DISABILITY

- The CRCSD pays the premium for **eligible** Teacher Associates of the plan in force on the effective date of the work agreement.
- Use this link to learn more. [Long Term Disability Information](#)

VOLUNTARY PRE-TAX BENEFIT CHOICES

Below is a brief description of the voluntary pre-tax Benefit choices available to you. The employee cost of the CRCSD voluntary benefit elected is deducted as **salary reduction**, which means the deductions are taken from the gross pay before taxes.

Benefits are effective July 1, 2017 (or your date of hire) and continue through June 30, 2018.

Paychecks with deductions for 2017-2018 Benefits are distributed every other Friday beginning September 8, 2017 and continuing for 19 consecutive pay periods through May 18, 2018.

HEALTH INSURANCE – CRCSD is part of a self-funded consortium called Metro Interagency Insurance Program (MIIP) and administered by Wellmark Blue Cross and Blue Shield of Iowa. There are four plans offered.

Use this link to learn more. [MIIP Health Plan Comparison 2017-2018](#)

DISTRICT CONTRIBUTION

Eligible Teacher Associates **enrolled** in a **District health plan** receive a **District Contribution of \$355 per month, which** is subtracted from the monthly cost of the **District health plan** elected.

- Note: If you enroll in either the HMO Essential or HMO Basic health plan (Wellmark Blue Advantage) you will be required to name your Primary Care Physician. To determine which physicians subscribe you may
 - access the Wellmark website at www.wellmark.com
 - call Wellmark Customer Service at 1-800-277-8380

DENTAL INSURANCE

Use this link to learn more about the Delta Dental of Iowa Plan offered.

[Dental Plan Information](#)

Use this link to see a brief description of the dental coverage. [Delta Dental Plan Summary and Rates](#)

FLEXIBLE SPENDING (REIMBURSEMENT) ACCOUNTS –

Two excellent “pre-tax” programs administered by **WageWorks** that can help you save money! These are “use it or lose it” accounts. Neither account carries forward to the next plan year so it is important that you do not overestimate the amount of money you wish to designate for either account. However, each account has a two and a half month grace period in which to incur and submit expenses after the account expires on June 30, 2018.

Use this link to learn more. [Flexible Spending Reimbursement Accounts](#)

- **Medical Reimbursement Account (Health FSA)** to pay out-of-pocket medical, dental or vision expenses. (This is called Health FSA in the *BluesEnroll* electronic enrollment system.)
 - You will enter a **yearly** amount when you enroll
 - You are allowed to contribute a **minimum** yearly amount of **\$100** or up to the **maximum** yearly amount of **\$2,600**
 - There are two **different** types of Medical Reimbursement (Health FSA) accounts.
 - **General Purpose** from which **all** qualifying expenses are eligible.
 - **Limited Purpose** if you, your spouse or your dependents contribute or receive contributions from an employer or anyone else for a Health Savings Account (H.S.A.) then **only vision and dental** expenses that are not paid from any other source are reimbursed.
 - **Flex Debit Card**: Will be issued to you for **no annual fee**. You decide whether or not you want to activate the card for use.
 - **Automatic Reimbursement**: If you are enrolled in a CRCSD/MIIP health plan you may elect to have health expenses that remain after benefits are paid automatically reimbursed to you without the need to file a claim form. Note: Do not use the Flex Debit card for expenses that are automatically reimbursed through this option.
- **Dependent Care Reimbursement** to pay for child daycare or dependent care expenses.
 - You will enter a **yearly** amount when you enroll
 - You are eligible to set aside a maximum amount of:
 - **\$5,000 Per YEAR or \$416.67 per MONTH** if you are a single parent with children or a married parent filing jointly
 - **\$2,500 Per YEAR** if you are a married parent filing separately
 - **Direct Deposit**: You will need to provide your bank account information if you want your reimbursement paid directly to your checking or savings account, instead of receiving a check.

**COMPLETE YOUR BENEFITS ENROLLMENT
ELECTRONICALLY. FOLLOW THESE INSTRUCTIONS TO COMPLETE
YOUR ENROLLMENT!**

Use this link to take you directly to the enrollment website.

www.bluesenroll.com

Follow these instructions for accessing the *BluesEnroll* electronic enrollment system.

Login:

- Your **user name** will be **your** entire first name followed by the first initial of **your** last name and the last four digits of **your** social security number (this is not case sensitive and you should not use spaces or dashes)

Password:

- Your initial password will be **your entire** social security number (do not use dashes or spaces)
- You will be prompted immediately to change the initial password (using the criteria required and you will need to answer all three secret questions before you can move on to the next screen)

If you experience any problems accessing the *BluesEnroll* system you will need to call your Benefits Specialist listed on the last page below.

ANNUAL ENROLLMENT

Use this link to learn more. [ANNUAL ENROLLMENT INFORMATION](#)

Each spring **eligible** Teacher Associates are given the opportunity to change their benefit choices during the Annual Enrollment period.

The Annual Enrollment period for 2017-2018 Benefits is completed through the [BluesEnroll](#) system for Benefits that are effective July 1, 2017 through June 30, 2018.

- Once enrolled in a CRCSD health and/or dental plan the same plan will carry forward to continue for the next plan year.
- Flexible Spending Accounts require a new election be made each plan year.

You may access the enrollment system anytime during the Annual Enrollment period or for new hires within 30 days from the first day you report to work.

- **You must either...**
 - **Enroll** in any 2017-2018 benefit choice that you want
 - or**
 - **Decline/Refuse** any 2017-2018 benefit choices that you do **not** want. *Please decline/refuse in **each** benefit section that you do not want*

Remember: you have 30 days to access the [BluesEnroll](#) system

- from the date your employment begins
- or if you experience a Qualifying Event

QUALIFYING EVENTS

Use this link to learn more. [Qualified Life Events](#)

REMINDER:

Are you considering a Leave of Absence, Retiring or Resigning after June 30, 2018?

The CRCSD accrues and pays on your behalf the benefits that continue through summer with the expectation of deducting salary reduction from your paychecks when you return in the fall. If you **fail to notify the Benefits office** and you **do not return to work you are liable and you will be billed** for any benefit elections that are effective July 1, 2018.

For benefits questions or assistance with enrollment, contact:

Benefits Specialist for Employees **A-L**
Terry Langhurst
(319) 558-1021
tlanghurst@cr.k12.ia.us

Benefits Specialist for Employees **M-Z**
Tracy Wellman
(319) 558-1127
twellman@cr.k12.ia.us