



Portland Public Schools Type 10 Bus Driver (ATU) Benefit Summary

Portland Public Schools (PPS) offers a comprehensive benefit package designed to provide employees and their families with a range of employer and employee paid benefit options. **It is the employee's responsibility to enroll in a timely manner to activate benefit elections and process his/her employment with PPS.**

In this Summary, you will find information about the following:

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WHAT'S INCLUDED IN MY HEALTH INSURANCE PLAN?

Eligible Type 10 Drivers work an average of 20 hours or more per week over the course of a semester to qualify for benefits eligibility the following semester. There are two 6 month eligibility periods per year: fall (Oct 1st–March 31st) and spring (April 1st–Sept 30th).

The health insurance package for ATU Type 10 drivers includes:

- **Medical and Prescription**

PPS offers multiple medical plans to choose from. These include a Health Maintenance Organization (HMO) Plan, an Open Option Plan and a Personal Option EPO Plan. These plans have no pre-existing condition waiting periods. All medical plans include pharmacy benefits.

- **Vision**

All Type 10 employees enrolled in a Trust medical plan will have vision coverage. Employees who enroll in a Cigna Plan will have Vision Service Plan (VSP). Employees who enroll in Kaiser medical insurance will have Kaiser Vision.

- **Dental**

All Type 10 employees enrolled in a Trust medical plan will have dental coverage. Two dental plan options are offered: Kaiser Dental and Delta Dental. Both dental plans are traditional fee-for-service plans. Please refer to the final page of this document for dental claims information.

THE COST OF COVERAGE

Most District employees share in the cost of health premiums. The payroll deductions for medical insurance are withheld from the employee's pay on a pre-tax basis. Premiums are deducted the month prior to coverage, i.e., March paycheck pays for April coverage. For rates please go to www.sdtrust.com.

COVERING A DOMESTIC PARTNER

For employees covering a domestic partner, the IRS requires the **District to withhold federal and Social Security taxes on the fair market value of the domestic partner and their dependents' coverage**. This is in addition to the base premium that all employees pay based on the plan they choose. State taxes may also be withheld depending on the employee's situation. The Imputed Income is also subject to the 6% PERS contribution for OPSRP Pension Members only (hired on or after August 29, 2003). Please contact the PPS Benefits Department for more details.

If enrolling a domestic partner, the domestic partnership must have been established for at least six months preceding the effective date of coverage. A Certificate of Registered Domestic Partnership, or a notarized Affidavit of Domestic Partnership must be received by the Benefits Department within three (3) days of your enrollment. The Human Resources department has free notaries public. A link to the Affidavit may be found in the "Forms" drop-down menu at <https://www.pps.net/Page/15959>.

HOW DO I ENROLL?

Twice per year, those Type 10 employees who qualified for the next semester's coverage will be mailed and emailed a letter and enrollment form. The form can either be mailed back to the PPS at the address listed at the bottom of the form or emailed to benefits@pps.net. Those Type 10 drivers enrolled in the previous semester's coverage do not need to submit a new form unless they wish to make changes to their plan elections or drop coverage.

- To find information on the health insurance plans, please go to www.sdtrust.com and click on "Already Enrolled?"

Select ATU/DCU	Select Type 10 Driver	Click GO!
1 CHOOSE YOUR BARGAINING UNIT Which union do you belong to? <input type="radio"/> ATU/DCU <input checked="" type="radio"/> PAT <input type="radio"/> PFSP Don't know what union you belong to? Contact the Trust administrative office.	2 CHOOSE YOUR STATUS What is your status within your union group? <input type="radio"/> Active FT <input checked="" type="radio"/> Type 10 Driver <input type="radio"/> Early Retiree	3 GET YOUR BENEFIT INFORMATION Click the button below to view your specific benefits <input type="button" value="GO!"/>

- View the plan comparison and monthly rates in the “Health Plan Documents” section.
- Gather the dates of birth and social security numbers for any dependents and/or beneficiaries.
- If you will be covering a domestic partner, complete the Affidavit of Domestic Partnership and get it notarized.

MAKING CHANGES TO MY BENEFITS PLAN

Qualifying Events – Must be made within 31-days of the event

IRS rules state that benefit selections may only be changed when an employee experiences a qualifying event or during an Open Enrollment period. The employee must complete and submit an enrollment form and appropriate documentation to the PPS Benefits Department at benefits@pps.net. The change must be consistent with the event. Employees who are unsure whether an event qualifies should contact the PPS Benefits Department for clarification.

Employees who experience a qualifying event must complete their benefits changes within **31 calendar days** from the date of the event. This change will be in two steps:

1. Email benefits@pps.net to notify the Benefits Office of your qualifying event and provide documentation of your life change (marriage license, birth certificate, divorce decree, etc) and ask for an enrollment form. The Benefits Dept will respond with an email with attached enrollment form.
2. Once you receive the enrollment form, please complete it and either mail to address at bottom of form or email to benefits@pps.net.

Open Enrollment Periods

For eligible Type 10 Drivers there are two 6 month eligibility periods per year: fall (Oct 1st–March 31st) and spring (April 1st–Sept 30th). Those drivers that qualify for the next semester’s eligibility period will be mailed an enrollment packet in the mail a little over a month prior to the beginning of the new eligibility period. For example, packets for enrolling or making changes during the fall period will typically be mailed in early September, for coverage changes beginning October 1st.

Please see the following examples of required documentation for Qualifying Events:

Marriage	Marriage license required (both sides)
Divorce	Divorce decree required (pages with your names, Judges signature, and date finalized only)
Death of a spouse/domestic partner	Death certificate
Establishment of a domestic partnership	Notarized Affidavit of Domestic Partnership required or Certificate of Registered Domestic Partnership
Dissolution of a domestic partnership	Email benefits@pps.net
Birth of a child	Birth certificate required
Adoption of a child	Adoption paperwork required
Guardianship of a child by court ordered judgment	Court order required
Loss of an employee’s dependents’ health coverage from another group plan	Certificate of Creditable Coverage required
Returning to work after an unpaid leave of absence which caused a loss of coverage	Email benefits@pps.net

DEPENDENT ELIGIBILITY

- Eligible dependents may include a spouse, domestic partner (same sex or opposite sex), children under the age of 26, or qualifying disabled adult children over age 26. For more information on covering disabled adult children, please call the Health & Welfare Trust at (503) 486-2107.

- **Secova Dependent Eligibility Verification** – Upon enrollment, employees will be required to verify all eligible dependents with Secova, an independent firm who specializes in dependent validation. You will receive a packet from Secova with instructions, and a list of approved documents, and will need to follow the instructions and respond within the required timeframe to avoid a lapse in coverage. For more information, please click: <https://www.pps.net/Page/10718> .
 - The Affordable Care Act (ACA) requires the District to collect social security numbers for all dependents enrolled in the employee's medical plan. The social security numbers are used as identifiers in reporting health insurance coverage to the IRS. Dependents for which social security numbers are not provided may not be enrolled.
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ELIGIBILITY TIMELINES

- **Eligible Type 10 Drivers must enroll in their choice of medical plan during the 31 calendar days prior to the start date for either Fall or Spring semester eligibility periods (see “How Do I Enroll?” section above). Type 10 Drivers that are eligible for the upcoming eligibility period will receive an email and letter to their residence with an enrollment form when the enrollment period is active.**
 - If the benefits eligible employee does not make a benefit election during this time period, enrollment will not be allowed until the next eligibility period or if a qualifying event occurs.
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ID CARDS

Insurance identification cards are issued directly from the insurance carriers. Processing time usually takes three to four weeks from the date of enrollment. Should the employee need medical attention prior to receipt of these cards, please call your medical insurance carrier directly. Contact information is listed on page 7.

WHEN WILL MY HEALTH INSURANCE BEGIN OR END?

- Eligible Type 10 Drivers will begin coverage on either April 1st or October 1st, dependent upon qualification by averaging 20 or more hours per week over the previous semester, and be eligible for insurance coverage for a 6 month period from that date until the next qualification window occurs and eligibility is assessed again.
 - Coverage will terminate at the end of the month the employee resigns or ceases to be paid, unless employee worked, or was paid, more than half the contract days of the month. Coverage will terminate at the end of the following month in this case.
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VOLUNTARY BENEFITS

- **Tri-Met Transit Passes**
State and Federal tax laws allow employees to pay for Tri-Met monthly transit passes on a pre-tax basis, which reduces taxable earnings. You may get more information and fill out an enrollment form at: <http://www.pps.net/Page/1657>.
 - **Credit Union Memberships**
PPS employees and their immediate family members are eligible to join the following credit unions for banking services such as savings, checking, IRAs, Certificates of Deposit, loans, and a variety of other services.
 - **OnPoint Community Credit Union** - Contact OnPoint Customer Service at 1-800-527-3932 for more information.
 - **Consolidated Community Credit Union** – Contact Consolidated Community Credit Union Member Services at 503-232-8070.
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EMPLOYEE ASSISTANCE PROGRAM (EAP)

The Reliant Behavioral Health (RBH) provides confidential counseling and referral services to all benefits eligible employees and anyone living in the employee's home. This plan is limited to six (6) free sessions per situation, per year, and includes 24-hour emergency crisis intervention when experiencing personal, emotional or substance dependency problems. Also provided are financial services, will preparation kits, legal services and more. Call 1-866-750-1327 or go online to www.MyRBH.com – access code: oebb.

RETIREMENT SAVINGS

- **OPSRP - Oregon Public Services Retirement Plan (formerly PERS)**

Employees hired on or after August 29, 2003 are eligible for OPSRP. This state retirement plan is for employees who work at least 600 hours per year and is mandated by law. Membership is established after completion of six (6) months of qualified employment, and requires an employee contribution of 6% of gross salary on a pre-tax basis. This contribution is not subject to Federal and State taxes until it is withdrawn from the retirement system. Additionally, the District contributes an amount to OPSRP for each covered employee. Vesting usually occurs after five (5) years of working at least 600 hours per year. Members automatically vest at age 65, even if they have worked fewer than five years. Complete information about the Oregon State retirement plan is available at <http://www.oregon.gov/PERS>.

On July 1, 2020, Senate Bill 1049 went into effect. SB 1049 redirects .75% of your monthly contribution of 6% of your salary into the Employee Pension Stability Account (EPSA) if you are OPSRP. For PERS Tier I or Tier 2, 2.5% of your contribution will be redirected into the EPSA. You may make voluntary after-tax contributions into your IAP account to continue to have a full 6% contribution. Please go [here](#) to learn more.

- **Tax Deferred Annuity 403(b) Plan – Voluntary**

Eligible employees may elect, and/or make changes to, traditional pre-tax and/or Roth post-tax salary reductions for retirement savings at any time during the year. Many self-directed investment options are available through a variety of participating providers. Employees who wish to participate in the Tax Deferred Annuity 403(b) plan must take the following steps:

1. Choose a vendor – For a list of District approved 403(b) vendors, and maximum annual contributions, please visit <http://www.pps.net/Page/1660> and select “2021 Annual Limits and List of Vendors” document in the 403(b) drop down menu.
2. Open an account with the vendor of your choice. Vendor contact information is included in the above list of vendors.
3. Log into the PeopleSoft Employee Self-Service portal and follow the instructions found at <http://www.pps.net/Page/7324> “403(b) Enrollment Instructions.” First time participants, or employees changing vendors, must be certain their accounts are active under the vendor's Plan ID number. The District does not contribute towards this plan.

WHAT LEAVE PLANS ARE AVAILABLE TO ME?

- **Sick Leave**

Eligible employees working at least 20 hours per week (.5 FTE) accrue sick leave at the rate equivalent to one (1) day for each month worked. Employees who complete one (1) full year of service are credited with the equivalent amount of leave annually, every July 1st. All unused sick leave is carried over year to year.

- **Bereavement Leave**

Employees may use one (1) day to attend the funeral of a relative or friend. In the case of an immediate family member, three (3) to five (5) consecutive days of bereavement leave at 100% pay, plus two (2) additional days at two-thirds pay (as stated in the union contract) are available.

- **Paid Personal Leave**

All benefits eligible employees receive three (3) paid personal leave days, which may only be used for unavoidable personal business, or for attending to matters which cannot be scheduled outside the employee's work hours. One week advance notice is required for the latter, except in the case of an emergency. Paid personal leave shall not be used for recreation, other employment, union or political activities, or to extend other leave categories, unless on an approved Federal Family Medical Leave (FMLA) or Oregon Family Leave Act (OFLA). Paid Personal Leave is reset back to three (3) days July 1st of each year and any unused balance is forfeited on June 30th of the following year. Unit members who commence employment after the end of the first semester shall be entitled to one (1) day of paid personal leave.

- **Family Illness Leave**

All benefits eligible employees receive three (3) family illness days per year, which is to be used in the event of illness of an immediate family member. "Immediate Family" is defined in the ATU union contract as the employee's spouse, domestic partner, children, parents, grandparents, grandchildren, mother-in-law, father-in-law, brothers and sisters of the employee, and also any person living in the home with the employee (use of this leave shall be for instances where care or attention by the employee is necessary). Family Illness Leave is reset back to three (3) days July 1st of each year and any remaining balance is forfeited on June 30th the following year, if unused.

- **Holidays**

Seven (7) specific holidays are designated and are paid as part of the contract year.

PEOPLESOFT EMPLOYEE SELF SERVICE (ESS)

The PeopleSoft Employee Self Service Portal gives employees access to view and make changes to certain *personal information*. Use your District email log in and password to access PeopleSoft HRMS Sign-on at <https://selfservice.pps.net>.

View and/or make changes to:

- Paychecks
- W-2
- Withholding Allowances (W-4)
- Direct Deposit
- Home Addresses
- Phone Numbers
- Personal Email Addresses
- Emergency Contacts
- Benefits Enrollment
- Dependent/Beneficiary Information
- Add Life Events
- 403(b) Changes

This is a secure site that will maintain data integrity while also allowing access to your vital information and is accessible from inside and outside of the PPS network. To log in to the self-service portal please go to <https://selfservice.pps.net>.

In the event that any statement in this summary varies from any benefit contract in effect, the benefit contract shall prevail.

HEALTH INSURANCE CONTACT AND PLAN INFORMATION

Following is information about your medical insurance plan. Please find your medical plan and read across the rows to find the vendor for prescription, vision and dental coverage.

Medical Insurance Plans	Prescription Information	Vision Information	Dental Information
Cigna PPO Plan – Option 1 Group #OAP1 Please call Cigna for information on Health Insurance and to get your Health Record Number - (800) 244-6224	Express Scripts	VSP (Vision Service Plan)	Trust Dental Plan (Delta Dental) OR Kaiser Dental
	(800) 282-2881 ID #: employee's SSN RXBIN: 003858 RXPCN: A4 RXGRP: SDN1HWT	You receive a greater benefit if you use a VSP provider. For more information please call VSP at (800) 877-7195 www.vsp.com	<u>Delta Dental:</u> (888) 217-2365 Group #10016949 <u>Kaiser Dental:</u> (800) 813-2000 Group #1739-135
Kaiser Permanente (Trust) – Option 1 Group #1739-035 Please call Kaiser Permanente for more information on Health Insurance and to get your Health Record Number - (800) 813-2000	Kaiser Permanente	Kaiser Permanente	Trust Dental Plan (Delta Dental) OR Kaiser Dental
	Please call Kaiser to get more information on your prescription coverage (800) 813-2000	Please call Kaiser for more information on your Vision Coverage (800) 813-2000	<u>Delta Dental:</u> (888) 217-2365 Group #10016949 <u>Kaiser Dental:</u> (800) 813-2000 Group #1739-135
Cigna In-Network Only Plan – Option 1 Group #OIN3 Please call Cigna for information on Health Insurance and to get your Health Record Number - (800) 244-6224	Express Scripts	VSP (Vision Service Plan)	Trust Dental Plan (Delta Dental) OR Kaiser Dental
	(800) 282-2881 ID #: employee's SSN RXBIN: 003858 RXPCN: A4 RXGRP: SDN1HWT	You receive a greater benefit if you use a VSP provider. For more information please call VSP at (800) 877-7195 www.vsp.com	<u>Delta Dental:</u> (888) 217-2365 Group #10016949 <u>Kaiser Dental:</u> (800) 813-2000 Group #1739-135

Trust Administrative Office (managed by Zenith American):

Hours: 8am-5pm Mon-Fri

Email: SD1@zenith-american.com

Phone: 833-255-4123 (toll free) or 503-486-2107

Website/Secure Account: <https://edge.zenith-american.com/>

Mailing/Office Address: 12205 SW Tualatin Rd., Suite 200, Tualatin, OR 97062

Portland Public Schools recognizes the diversity and worth of all individuals and groups and their roles in society. All individuals and groups shall be treated with fairness in all activities, programs and operations, without regard to age, color, creed, disability, marital status, national origin, race, religion, sex or sexual orientation. This standard applies to all Board policies and administrative directives. Board of Education Policy 1.80.020-P.