



SEIU Employee Group – Part Time

Benefit Guide for 2025-2026 Plan Year

October 1, 2025 - September 30, 2026

Portland Public Schools

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 online in a timely manner to activate benefit elections of their choice and process his/her employment with PPS.** Additional PPS benefits information for the SEIU Employee Group may be found on the Benefits website at: <https://www.pps.net/Page/11607>.

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PEOPLESOFT EMPLOYEE SELF-SERVICE (ESS)

The **PeopleSoft Employee Self-Service (ESS) Portal** (<https://selfservice.pps.net>) gives employees access to view and make changes to certain personal information:

- Paychecks
- W-2
- Tax 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.

PeopleSoft ESS Login Issues? Contact **PPS IT Service Desk** at 503-916-3375

HEALTH INSURANCE PACKAGE

WHAT IS INCLUDED IN MY HEALTH INSURANCE PACKAGE?

Part-Time SEIU Employees:

- To qualify for the part-time employee health insurance package, you must be regularly scheduled to work between 20-29 hours per week (0.5 FTE - 0.74 FTE).

The health insurance package for part-time SEIU employees includes:

- **Medical & Prescription**
PPS offers one (1) Moda medical plan and one (1) Kaiser Permanente HMO medical plan to choose from. These plans have no pre-existing condition waiting periods. New employees have a 31-calendar day window from their date of hire to enroll in the medical plan of their choice. Newly benefits eligible employees have a 31-calendar day window from the date of their employment change to enroll in the medical plan of their choice. All medical plans include prescription benefits.
- **Vision**
All SEIU employees enrolled in a medical plan will have VSP choice Plus Plan vision insurance coverage.
- **Dental**
All SEIU employees in a medical plan will have dental insurance coverage. Two (2) dental plan options are offered: Delta Dental Plan 5 and Kaiser Plan 8. New employees have a 31-calendar day window from their date of hire to enroll in the dental plan of their choice. Newly benefits eligible employees have a 31-calendar day window from the date of their employment change to enroll in the dental plan of their choice.
- **Group Term Life | *The Standard Group Policy Number:* 646595**
Eligible full-time and part-time employees are automatically enrolled in a **District-paid** \$30,000 group term life insurance policy. We strongly encourage you to add your beneficiary(ies) at the time you enroll.

Group Term Life Insurance coverage will end at the end of the month of termination. This coverage does have conversion and portability options on a self-pay basis. Application must be made within 31-days after your life insurance ends. For more information, contact **The Standard** at 866-756-8115

- [OEGB Certificate of Group Term Life Insurance Coverage](#) - The Standard Insurance Company
- **Long Term Disability (LTD) | *The Standard Group Policy Number:* 646595**
Eligible full-time and part-time employees are automatically enrolled in **District-paid** Long Term Disability (LTD) insurance. The LTD insurance is a salary replacement policy for a disability. Following a 90-day waiting period, benefits are payable at the rate of 66 2/3% of pre-disability income up to a maximum of \$4,000 per month.

LTD coverage will end on your last day of employment. You may be able to convert your LTD when your coverage ends. Application must be made within 31-days after your LTD insurance ends. If you are retiring from the District, you will not be eligible to convert your LTD. For more information, contact **The Standard** at 866-756-8115.

- [OEGB Certificate of Group Long Term Disability Insurance Coverage](#) - The Standard Insurance Company

WHAT IS THE COST OF HEALTH INSURANCE PACKAGE?

Most District employees share in the cost of health insurance 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., September paycheck pays for October coverage).

For monthly rates/costs, visit our **SEIU Employee Group webpage** at <https://www.pps.net/Page/11607>.

ELIGIBLE DEPENDENTS

Part time SEIU employees are eligible for medical, dental, and vision benefits at the employee only coverage level.

BENEFITS ENROLLMENT & CHANGES

There are only three times when you can enroll in benefits or possibly make changes to your benefits:

1. As a newly hired or job/work hours change impacting benefits eligibility.
2. **Within 31-calendar days*** of a qualifying event.
3. During Annual Open Enrollment from mid-August to early-September with your benefits beginning on October 1st.

For more information, visit our **Benefits Enrollment & Changes:** <https://www.pps.net/Page/7324>.

*Unless otherwise indicated.

HOW DO I ENROLL IN BENEFITS?

Once your employment information has been processed in the HR computer system, you will receive the Benefits Enrollment Notification to your PPS email account and personal email account (if on file), letting you know your online benefits enrollment event is ready for you to complete and submit in PeopleSoft Employee Self-Service (ESS). You have 31-calendar days from your start date to enroll. You may then follow the **Online Benefits Enrollment Instructions** (<https://www.pps.net/Page/11607>), under **Other Benefits Information** section) to complete and submit your benefits enrollment.

In preparation, we encourage you to do the following before enrolling in benefits:

- View the most current insurance comparison.
- View the most current monthly rates/costs sheet.
- For your beneficiaries, gather their dates of birth and social security numbers.

HOW DO I MAKE CHANGES TO MY BENEFITS?

IRS rules state that benefit selections may only be changed when an employee experiences a qualifying event **or** during the Annual Open Enrollment period. The employee must complete an online enrollment via PeopleSoft Employee Self-Service (ESS) and upload the appropriate required documentation. The change must be consistent with the event.

QUALIFYING EVENTS

Employees who experience a qualifying event must complete their benefits changes **within 31-calendar days*** from the date of the qualifying event.

*Unless otherwise indicated

For more information and instructions on making changes to your benefits due to a qualifying event, visit:

- **Benefits Enrollment & Changes webpage:** <https://www.pps.net/Page/7324>
- **Qualifying Events for Benefits Enrollment & Changes webpage:** <https://www.pps.net/Page/18906>

ANNUAL OPEN ENROLLMENT PERIOD - MANDATORY

The Annual Open Enrollment Period takes place from mid-August through early-September each year, and all changes take effect October 1st. This is the time to change medical plans and update beneficiary information.

IMPORTANT: Annual Open Enrollment is **mandatory** each year, meaning you **MUST** make an election even if you intend to stay on the same health insurance plan.

ELIGIBILITY TIMELINES

New Employees

Newly hired benefits-eligible employees must enroll in their choice of medical plan **within 31-calendar days of their start date**. New employees will receive an email when their online benefits enrollment is available.

Current Employees with a Qualifying Event

Employees who experience a qualifying event have **31-calendar days from the date of the qualifying event*** to make benefit changes.

- For more information, visit our **Qualifying Events for Benefits Enrollment & Changes webpage**:
<https://www.pps.net/Page/18906>.

Current Employees with an FTE Change

Employees who have a qualifying change in FTE have **31-calendar days** to make benefits changes.

Current Employees with a Job Change

Employees with job changes that impact benefits will receive an e-mail when their online benefits enrollment is ready and also have **31-calendar days** to make the change.

IMPORTANT: If the benefits eligible employee does not make a benefit election during this time period, enrollment changes will not be allowed until the next Annual Open Enrollment period or qualifying event.

*Unless otherwise indicated.

INSURANCE ID CARDS

Insurance identification (ID) cards are issued directly from the insurance carriers. Processing time usually takes 3-5 weeks **after** submitting your online benefits enrollment.

If you need medical attention prior to receipt of your insurance ID cards, please call your medical insurance carrier directly. If the carrier is not showing coverage, contact **OEBB** (plan administrator) for assistance at 888-469-6322.

VSP does not issue insurance ID cards for vision insurance. Contact **VSP** directly for information on how to access your vision insurance benefit at 800-877-7195.

WHEN WILL MY HEALTH INSURANCE BEGIN?

- SEIU Employees will be eligible the first day of the month following the completion of 60 days of employment of at least 20 hours per week (0.5 – 0.74 FTE).
 - Example 1: An SEIU employee is hired into a 20 hours per week (0.5 FTE) position on August 7th. They complete 60 days of employment on October 6th. Their coverage begins November 1st.
 - Example 2: An SEIU employee is hired into a 25 hours per week (0.625 FTE) position on August 22nd. They complete 60 days of employment on October 21st. Their coverage begins November 1st.

WHEN WILL MY HEALTH INSURANCE END?

Coverage will terminate at the end of the month the employee's employment ends or employee ceases to be paid, unless such time occurs on, or after the 16th of the month, then coverage terminates at the end of the following month.

VOLUNTARY BENEFITS

FLEXIBLE SPENDING ACCOUNT (FSA) - HEALTH CARE FSA & DEPENDENT CARE FSA

The **Flexible Spending Account (FSA)** is a way for you to save income taxes when paying for eligible **Health Care** OR **Dependent Care** expenses. Normally, the FSA is a use it or lose it plan and any unused funds are forfeited.

- **Health Care FSA**

Related expenses may include medical, prescription, vision and dental insurance co-pays, coinsurance, and deductibles not covered by insurance. The first time you enroll in a Health Care FSA, you will receive a FSA debit card, which allows you to pay directly from your FSA account without having to wait to be reimbursed. Review the **IRS Rules regarding undocumented FSA debit charges** (<https://www.pps.net/Page/11607>), under **Other Benefits Information** section).

- 2025-calendar year Health Care FSA maximum contribution limit is \$3,300.

- **Dependent Care FSA**

May be used for a qualifying dependent under the age of 13 or an eligible dependent who is physically or mentally incapable of self-care. You can access account information online and set up recurring payments for reimbursement of dependent care expenses.

- 2025-calendar year Dependent Care FSA maximum contribution limit is \$5,000.

For more information, visit our **Flexible Spending Account (FSA) webpage**: <https://www.pps.net/Page/1652>.

Eligible employees must enroll online at the time of initial benefits enrollment if they wish to participate in one or both of the above FSA plans OR they must wait until the annual open enrollment period, which is generally held in mid-August to early-September for an effective (start) date of October 1st.

IMPORTANT: Employees **MUST** re-enroll each year at Annual Open Enrollment for their Employee Group to continue participation in the FSA for the next plan year.

OPTIONAL LIFE INSURANCE

Benefits-eligible employees may choose to purchase Optional Life Insurance for themselves, their spouse/domestic partner, and child(ren) on a self-pay basis. An employee may elect from \$10,000 of coverage to up \$500,000 in increments of \$10,000 and may elect the same for their spouse/domestic partner. Child(ren) under age 26 may be enrolled in Optional Life Insurance in increments of \$2,000 up to \$10,000. Employees pay the full cost of the Optional Life Insurance and premiums are withheld from the employee's pay on an after-tax basis.

New Employees have a guarantee issue amount of \$200,000. Employees who enroll in the Optional Life Insurance may also enroll a spouse or domestic partner, with a guaranteed issue of \$30,000 for new hires or a qualifying event such as marriage. Elections must be made within the eligibility timelines (see above).

Additional information and the Evidence of Insurability form can be found on **The Standard website**:

<https://www.standard.com/mybenefits/oebb/>.

LONG TERM CARE (LTC) INSURANCE

Employees and their family members are eligible to enroll in **Long Term Care (LTC) Insurance** provided by **UNUM**. New employees have a guarantee issue of coverage. You must enroll within 31-days of hire to receive the guarantee issue.

Additional information can be found on the **UNUM website** at <http://unuminfo.com/oebb/>.

TRI-MET TRANSIT PASS

State and Federal tax laws allow employees to pay for the cost of a monthly TriMet Transit Pass on a pre-tax basis, which reduces taxable earnings.

For more information, including how to enroll, visit our **TriMet Transit Pass Program webpage**: <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**
Customer Service: 1-800-527-3932
 - **Consolidated Community Credit Union**
Member Services: 503-232-8070.
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RETIREMENT BENEFITS

OPSRP - OREGON PUBLIC SERVICES RETIREMENT PLAN (REQUIRED IF ELIGIBLE)

The **Oregon Public Employees Retirement System (PERS)** is the state retirement plan for employees who work at least 600 hours per year and is mandated by law. Employees hired on or after 08/29/2003 are **PERS OPSRP members** unless membership was previously established by PERS.

PERS OPSRP membership is established after completion of a six (6) month waiting period for employees who work at least 600 hours per year, and requires an employee contribution of 6% of gross salary on a pre-tax basis to the **Individual Account Program (IAP)**. If you are an existing PERS member, your mandatory contributions begin immediately. 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 the **OPSRP Pension Program** 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.

For more information, visit our **Oregon Public Employees Retirement System (PERS) webpage**: <https://www.pps.net/Page/18903>.

403(B) PLAN TAX DEFERRED ANNUITY (VOLUNTARY)

The **403(b) Plan** is a voluntary (optional) supplemental retirement savings program offered under section 403(b) of the Internal Revenue Code and is called the Tax-Sheltered Annuity Plan ("TSA Plan").

The PPS 403(b) Plan is administered by **PenServ**. PPS offers the following types of 403(b) Plans for eligible employees to contribute to:

- **Traditional (pre-tax) 403(b) Plan**; and
- **Roth (after-tax) 403(b) Plan**, subject to vendor acceptance of such contributions.

All contributions to the PPS 403(b) Plan are made by the employee. The District does not contribute toward the 403(b) Plan and there is no Employer Match.

For more information, including how to enroll, visit our **403(b) Plan Tax Deferred Annuity webpage**: <https://www.pps.net/Page/18904>.

OTHER BENEFITS

EMPLOYEE ASSISTANCE PROGRAM (EAP)

The **Employee Assistance Program (EAP)** provides free services to help people privately resolve problems that may interfere with work, family, and life. Here are just a few of the services EAP offers:

- 24-hour Crisis Help
 - Childcare Referral & Eldercare Referral
 - Confidential Counseling
 - 8 free sessions per situation, per year to all employees
 - Financial Services
 - Identity Theft Services
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- Legal Services
- Wellness

For more information, visit our **Employee Assistance Program webpage:** <https://www.pps.net/Page/1730>.

WHAT LEAVE PLANS ARE AVAILABLE TO ME?

SICK LEAVE

Employees accrue one (1) day per month, based on the employee's workday. This leave is for absences due to an employee's personal illness and medical appointments. Sick leave may also be used for illness and medical appointments for immediate family members when the presence of the employee is required. Sick leave is paid, limited to the employee's accrued balance.

FUNERAL/BEREAVEMENT LEAVE

This leave is for absences due to the death of a relative or friend. Generally, one (1) day is granted to attend the funeral of a relative or friend, with an additional day, if required, for travel. For a death in the immediate family*, three (3) days with pay, plus two (2) additional days at two-thirds pay, are allowed.

* **Immediate Family** for the purposes of Bereavement Leave, means spouse, domestic partner, children, parents, grandparents, grandchildren, mother-in-law, father-in-law, brothers and sisters, and any person regularly living in the employee's home.

PAID PERSONAL/EMERGENCY LEAVE

All employees receive up to three (3) days with pay for personal business that cannot be addressed outside the employee's work day. Personal Leave is not allowed for vacation or recreational purposes. Absences necessary for an employee's participation in religious observances is an appropriate use of personal leave. Except in the case of an emergency, Personal Leave must be requested and approved in advance.

FAMILY ILLNESS LEAVE

All employees receive up to three (3) Family Illness days with pay, due to illness of an immediate family member* or for someone else who regularly lives in the employee's home when the care or attention of the employee is required. Family Illness Leave may not be used for an employee's own illness.

* Immediate Family Member for purposes of Sick and Family Illness leaves, means spouse, domestic partner, children, parents, brothers, sisters, mother-in-law, father-in-law, grandparents and grandchildren.

HOLIDAYS

Six (6) to nine (9) specific holidays are designated and are paid as part of the work year.

VACATION LEAVE - 260-DAY EMPLOYEES ONLY

Part-time employees earn vacation time if they are in assignments designated by the District to be a twelve (12) month assignment. The maximum accrual rate is 6.7 hours per month prorated according to the employee's normal work schedule. The proration is determined by comparing the part-time employee's normal work schedule to the normal full-time work schedule. Vacation is not earned in any year that the employee is absent from work due to unpaid leave or voluntary furlough or voluntary layoff (for example, during holiday vacation periods). Extra hours worked during periods schools are in recess shall not count towards vacation accrual. For employees in positions that are designated as twelve (12) month positions, accrual shall commence the beginning of the month, provided the employee was in the assignment for at least half of the preceding month. A part-time employee who transfers to an assignment of less than twelve (12) months or who terminates employment shall be given vacation time off work prior to the transfer or termination or be paid for any accrued vacation. The District has no obligation to continue any part-time twelve (12) month assignment and there is no implied right to any part-time employee to be placed in a twelve (12) month assignment.

HEALTH INSURANCE CONTACT & PLAN INFORMATION

PLAN ADMINISTRATOR	<u>OEBB (Oregon Educators Benefit Board)</u> Phone: 888-469-6322 Email: OEBB.benefits@state.or.us Website: http://www.oregon.gov/oha/oebb/Pages/index.aspx
MEDICAL & PRESCRIPTION	<u>Moda Health (Connexus Network)</u> Group ID#: 10006726 Medical Phone: 866-923-0409 (toll-free) 503-265-2909 (local) Prescription Phone: 866-923-0411 (toll-free) Website: https://www.modahealth.com/oebb Health Systems in Connexus Network: https://www.modahealth.com/medical/plans_networks.shtml <u>Kaiser Permanente</u> Group ID#: 018050 Phone: 866-223-2375 Website: http://my.kp.org/oebb/
DENTAL	<u>Moda Delta Dental</u> Group#: 10006726 Phone: 503-265-2910 <u>Kaiser Dental</u> Group#: 15777 Phone: 866-223-2375
VISION	<u>VSP (Vision Service Plan)</u> You receive a greater benefit if you use a VSP provider. Phone: 800-877-7195 Website: https://www.vsp.com/ Note: VSP does <u>NOT</u> issue insurance ID cards.
LIFE INSURANCE <i>Group Term Life Insurance</i> <i>Optional Life Insurance</i>	<u>The Standard</u> Phone: 866-750-3544 Website: http://www.standard.com/mybenefits/oebb
FLEXIBLE SPENDING ACCOUNT (FSA) <i>Health Care FSA</i> <i>Dependent Care FSA</i>	<u>PacificSource Administrators</u> Phone: 800-422-7038 Website: http://psa.pacificsource.com/PSA
LONG TERM CARE (LTC)	<u>Unum</u> Phone: 800-227-4165 Website: http://unuminfo.com/oebb
PPS BENEFITS DEPARTMENT	<u>PPS Benefits Team</u> Email: benefits@pps.net Phone: 503-916-6464 Website: http://www.pps.net/benefits

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