



Homewood City Schools

**Employee Benefits
2018-2019**



CENTRAL OFFICE

Finance/Personnel Staff - 870-4203

- **Dr. Kevin Maddox** – Assistant Superintendent for Business Operations
 - **Dr. Betty Winches** - Assistant Superintendent for Instruction
 - **Lynn Buch** - Chief School Financial Officer
 - **Vivian Lovorn** – Assistant Director of Finance
 - **Laura Johnston**– Payroll/Benefits Officer
 - **Elaine Haithcock**– Accounts Payable
 - **Ginger Collins**– Personnel (Teacher Certification & Employee Records – Superintendent’s Secretary)
 - **Cindy Hutchinson**– Teacher Certification
 - **Noel Faciane**– Personnel (INow & Attendance Reporting)
-

When does an employee receive their first paycheck, step increase, and **2.5% RAISE of the new contract year?**

Employees are paid 1/12 of their annual contract salary at the end of each month starting:

- **187-189 Day/9 Month employees**
 - **September 28, 2018 – Step Increase & 2.5% Raise**
- **197-209 Day/10 Month employees**
 - **September 28, 2018 – Step Increase & 2.5% Raise**
- **240 Day/12 Month employees**
 - **July 31, 2018 – Step Increase & 2.5% Raise**

There are NO Early payroll dates for 18/19.

HOW IS MY ATTENDANCE COUNTED AT THE LOCAL SCHOOL?

- Follow guidelines/procedures given to you from your Principal.
 - Clock in on Kronos - **Patriot Time** clock software each day.
 - If you forget to clock in, please add your missing punch by change request in the software.
 - Report to Kelly Services/AESOP to record all absences. They will be imported into the Patriot Time clock system and you will **NOT** be prompted on your return as in the past.
 - If you do not clock in OR call/contact Kelly Services/AESOP, Payroll will assume that you are absent and you will be docked at your daily rate.
-

HOW DO I REPORT STATUS CHANGES ?

ADDRESS

- Board Office and Teachers' Retirement System/PEEHIP

NAME

- Copy of your new social security card given to the Board office and Teachers' Retirement System/PEEHIP

BANK ACCOUNT

- Complete a new Direct Deposit Authorization for Payroll form. Send the form, along with a voided check or a savings deposit slip, to Laura Johnston, Payroll Officer.
-



ACH Bank Deposits

- Automatic Direct Deposit is required for Payroll.
 - Form required to sign up and must be accompanied by a voided check or letter of notification from your bank.
 - Direct Deposit Statements are available for viewing and printing on the Homewood City Schools Employee Self Service (ESS) portal.
-



Employee Self Service (ESS) Lite

Employees can...

- **access from any computer.**
 - **view their earnings summary and check history from April 2006 to present.**
 - **print past check information from August 2011 to present.**
 - **print W2s from 2011 to present.**
 - **view and print Form 1095-C.**
 - **view and print the annual Truth in Salary letter.**
-

Where to find additional ESS information

A link to the Employee Self Service system and additional system information pertaining to the ESS system can be found by going to the Human Resources page on the Homewood City Schools website.

The screenshot displays the Homewood City Schools website. At the top, the logo features the letters 'HCS' in a stylized font with an American flag motif, followed by the text 'Homewood City Schools' and the mission statement: 'Our mission is to educate and empower all students to maximize their unique potential'. To the right of the logo is a smaller version of the logo and the school name in a blue box.

The main content area is titled 'Human Resources'. Below this title, there are two blue underlined links: 'Employee Self Service Link' and 'Employee Self Service Tutorial Video'. To the right of these links are two buttons: '[+] Expand All' and '[-] Collapse All'.

Below the links, there are three sections of information, each starting with a folder icon:

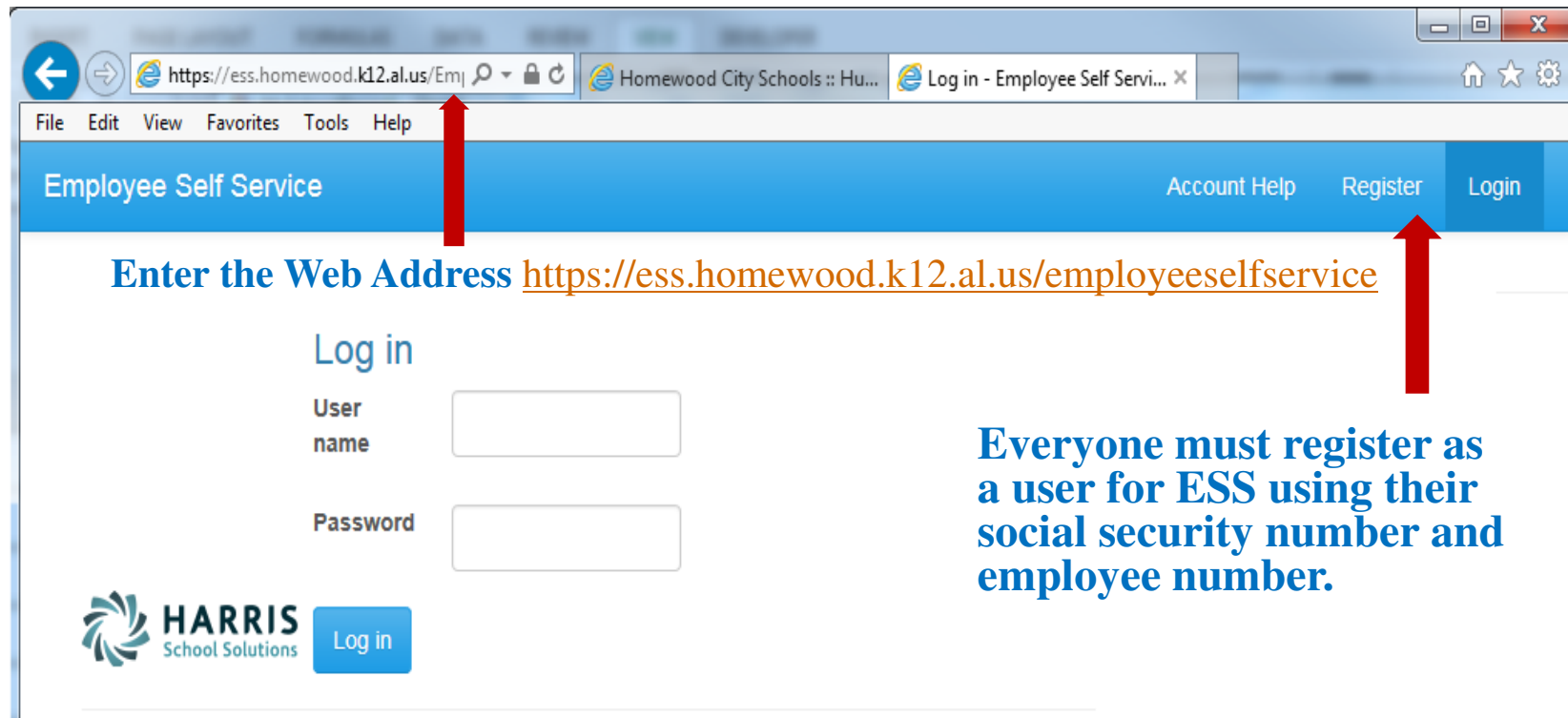
- Employee Self Service** (2 Files)
 - Instructions for Registering for Employee Self Service with Screenshots
 - Notice Regarding Employee Self Service
- Employee Benefits Information** (5 Files)
 - 403(b) Plan
 - Employee Assistance Program
 - HCS Presentation: Employee Benefits Information 2016-2017
 - PEEHIP Board Meeting 12.6.16
 - PEEHIP Presentation 2015-2016
- Sick Leave Bank** (2 Files)
 - Sick Leave Bank Guidelines
 - Catastrophic Leave Transfer Form

On the left side of the page, there is a vertical navigation menu with the following categories and sub-items:

- About Us
- Facilities
- Parents & Students
- Learning Targets
- Strategic Plan
- Board of Education
- Employment
- Departments
 - Central Office
 - Child Nutrition
 - Finance
- Human Resources
 - Employee Assistance Program
 - Insurance
 - Leave Time
 - Retirement Program
 - Prevention/Intervention
 - Special Education
 - Technology
 - Wellness

Employee Self Service – Register

Registration and Forgot Password on Log In screen



The screenshot shows a web browser window with the URL <https://ess.homewood.k12.al.us/Emj>. The page title is "Employee Self Service". The navigation bar includes "Account Help", "Register", and "Login". A red arrow points to the "Register" link. Below the navigation bar, the text "Enter the Web Address" is followed by the URL <https://ess.homewood.k12.al.us/employeeselfservice>. Below this, there is a "Log in" section with "User name" and "Password" input fields. A red arrow points to the "Register" link. At the bottom left, there is a logo for "HARRIS School Solutions" and a "Log in" button.

Everyone must register as a user for ESS using their social security number and employee number.

NOTE: Internet Explorer version 9 and below are not supported in ESS. The Internet Explorer browser must be version 10 or above.

Employee Self Service - Register

All employees must create an account in ESS.

ESS

Create a New Account

Use the form below to create a new account.

Passwords are required to be a minimum of 6 characters in length.

User name

Email

First Name


Last Name

Social Security Number

Employee Number

Password

Confirm password



Employee chooses their own User Name and Password. User name should not contain any special characters or spaces.

Social Security Number and Employee Number combination is validated in the payroll system.

Email address will be used to send all notifications from ESS. This does NOT have to be a school district assigned email address. It may be an employee's personal email address.

Your Employee Self Service account confirmation

me@me.com

Sent: Fri 5/16/2014 9:50 AM

To: Angela Palmire

Thank you for signing up with us! Please confirm your registration by clicking the following link:

[Confirmation Link](#)

In case you need it, here's the confirmation code: **dIKg0-xx2c3iCLQ8mv_BQ2**

An email, with a confirmation link, will be sent to the email address the user provided when creating their account. User **MUST** use the confirmation link in the email to be confirmed as an authorized user for ESS. Once the employee has been confirmed as a user, they can login into the ESS system with their name and password.

Employee Self Service – Account Help (Forgot Password)

Account Help allows the employee to recover their password.



Forgot Password

User Name

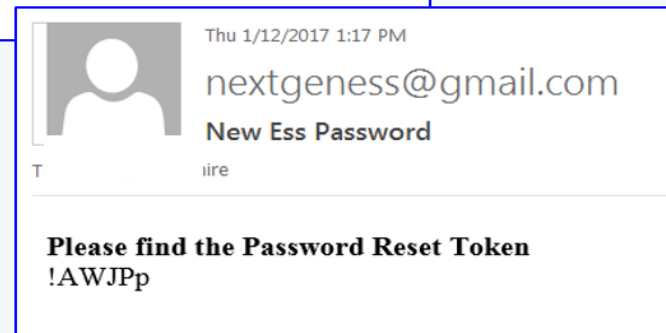
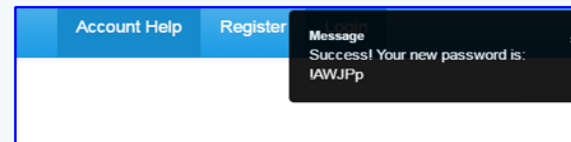
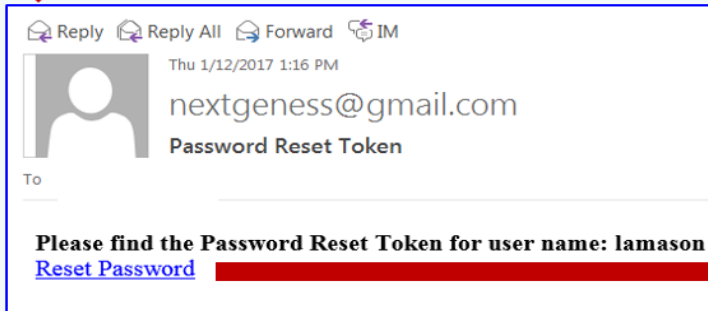
OR

Employee Number

Recover

Back

The *Account Help* allows a registered employee to recover their password with the *Forgot Password* recovery. The employee must enter their User Name or Employee Number and press the *Recover* button. An email with a 'reset password' link will be sent to employee's ESS email address. Once the employee clicks on the link in the email, a computer generated password is assigned to their user name. The employee will receive a message and a email with the new password. The employee can then login with the new password. The password can be changed (instructions on page 23). The *Forgot Password* will not work if the employee's account has not been confirmed (see previous screen).



Employee Self Service – Account Help (Forgot Username)

Account Help allows the employee to recover their user name.

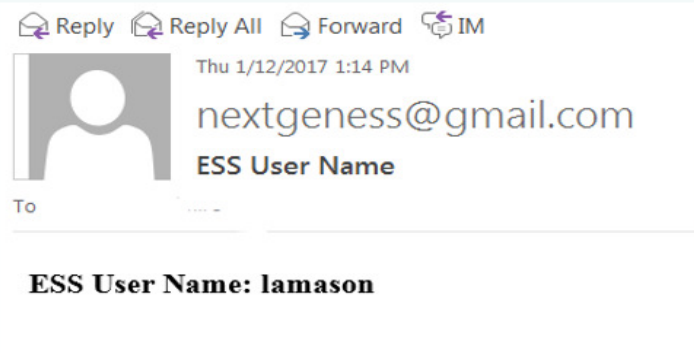
Employee Self Service Account Help Register Login

Forgot Username

Employee Number

Employee Email

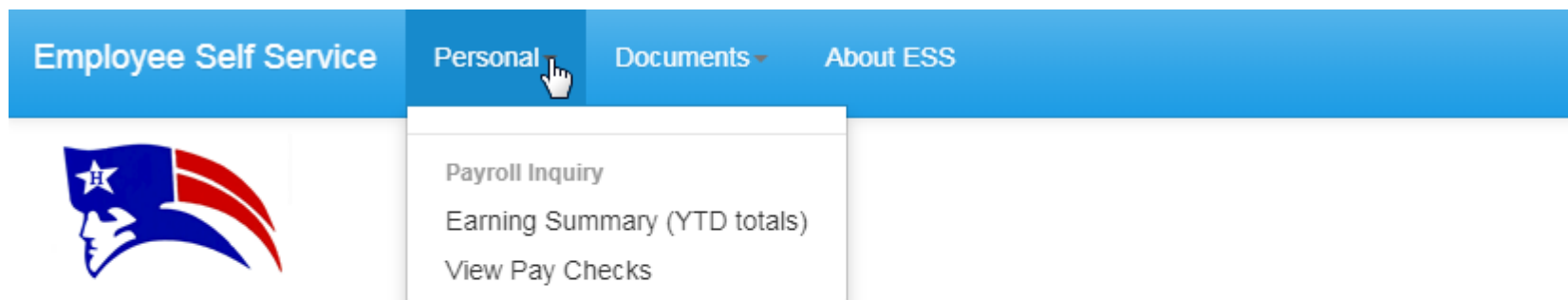
Recover Back



The *Account Help* allows a registered employee to recover their user name with the *Forgot Username* recovery. The employee must enter their Employee Number and their ESS email address and press the *Recover* button. An email with their user name will be sent to the employee's ESS email address. If the email address entered does not agree with the email address the employee register with, a message will be displayed and no email will be sent. The *Forgot Username* will not work if the employee's account has not been confirmed (see page 4).

Employee Self Service–Personal/Payroll Inquiry

The Home-Employee menu under the Personal/Payroll Inquiry tab contains the sub-menus for Earning Summary (YTD totals) and View Pay Checks which allow you to view and print your information.



Welcome to Homewood City Schools Employee Self Service!

Employee Self Service – Earnings Summary

Employees can view and print their earnings summary by selecting the year they wish to view.



Earnings Summary

[Back](#)

[Print](#)

Earnings Year

2016

Gross Wages

\$11,422.90

Federal Wages

\$10,366.20

Federal Tax Withheld

\$714.83

Social Security Wages

\$11,347.90

Social Security Tax Withheld

\$703.56

Medicare Wages

\$11,347.90

Medicare Tax Withheld

\$164.55

State Wages

\$11,222.90

State Tax Withheld

\$401.14

Employee Self Service-Earnings Summary (W2)

The employee can view and print their W2 for the selected year.

Earnings Summary

[Back](#) [Print](#)

Earnings Year

2013

[View W2](#)

Gross Wages	\$22,189.68
Federal Wages	\$18,389.49
Federal Tax Withheld	\$935.71
Social Security Wages	\$20,353.68
Social Security Tax Withheld	\$1,261.90
Medicare Wages	\$20,353.68
Medicare Tax Withheld	\$295.09
State Wages	\$20,053.68
State Tax Withheld	\$646.29


Copy 8-To Be Filed With Employee FEDERAL Tax Return			38-2099803 OMB No. 1545-0008			Copy 2-To Be Filed With Employee State City, or Local Income Tax Return			38-2099803 OMB No. 1545-0008		
a	Employee soc. sec. no.	1 Wages, tips, other comp. 18,389.49	2	Federal income tax withheld 935.71		a	Employee soc. sec. no.	1 Wages, tips, other comp. 18,389.49	2	Federal income tax withheld 935.71	
b	Employer ID number (EIN)	3 Social security wages 20,353.68	4	Social security tax withheld 1,261.90		b	Employer ID number (EIN)	3 Social security wages 20,353.68	4	Social security tax withheld 1,261.90	
		5 Medicare wages and tips 20,353.68	6	Medicare tax withheld 295.09				5 Medicare wages and tips 20,353.68	6	Medicare tax withheld 295.09	
c Employer name, address, and ZIP code Bibb County Board of Education						c Employer name, address, and ZIP code					
d Control Number 82						d Control Number 82					
e Employee name, address, and ZIP code						e Employee name, address, and ZIP code					
7	Social security tips	8 Allocated tips	9 Advance EIC payment			7	Social security tips	8 Allocated tips	9 Advance EIC payment		
10	Dependent care benefits	11 Nonqualified plans	12a	Code See inst. for box 12 DD	9,837.24	10	Dependent care benefits	11 Nonqualified plans	12a	Code See inst. for box 12 DD	9,837.24
13	Statutory Employee	14 Other	12b	Code		13	Statutory Employee	14 Other	12b	Code	
		CAF 1,836.00	G	300.00				CAF 1,836.00	G	300.00	
	Retirement plan	414 1,664.19	12c	Code			Retirement plan	414 1,664.19	12c	Code	
	X	DUE 273.35					X	DUE 273.35			
	Third-party sick pay		12d	Code			Third-party sick pay		12d	Code	
AL	037615	20,053.68	646.29			AL	037615	20,053.68	646.29		
15	State Employer state ID number	16 State wages, tips, etc.	17 State income tax			15	State Employer state ID number	16 State wages, tips, etc.	17 State income tax		
18	Local wages, tips, etc.	19 Local income tax	20 Locality name			18	Local wages, tips, etc.	19 Local income tax	20 Locality name		


Form W-2 Wage and Tax Statement 2013 Dept. of the Treasury - IRS
This information is being furnished to the Internal Revenue Service

Employee Self Service – View Pay Checks

Employee can view and print check/statement summary for a specific check date range. The employee can view check detail by clicking on a particular check.

My Checks

Start Date 

End Date 


Select date range and click Search to list pay records. Select check number from list to view pay record.

Date	Number	Date	Gross	Net	Pay Adj.-Sub Info
05/31/2016	133504 - (Check)	05/31/2016	\$2,248.58	\$1,190.99	
04/29/2016	133350 - (Check)	04/29/2016	\$2,288.58	\$1,217.66	
03/31/2016	133174 - (Check)	03/31/2016	\$2,258.58	\$1,197.66	
02/29/2016	133011 - (Check)	02/29/2016	\$2,298.58	\$1,224.23	
01/31/2016	132855 - (Check)	01/31/2016	\$2,328.58	\$1,244.23	
12/18/2015	132689 - (Check)	12/18/2015	\$2,298.58	\$1,223.44	
11/20/2015	132524 - (Check)	11/20/2015	\$2,308.58	\$1,230.10	
10/30/2015	132369 - (Check)	10/30/2015	\$2,448.58	\$1,323.13	
09/30/2015	132208 - (Check)	09/30/2015	\$2,278.58	\$1,210.20	
08/31/2015	132074 - (Check)	08/31/2015	\$2,468.58	\$1,336.35	
07/31/2015	131943 - (Check)	07/31/2015	\$2,458.58	\$1,329.69	
06/30/2015	131756 - (Check)	06/30/2015	\$2,308.58	\$1,230.10	

Employee Self Service – View Pay Checks

If an employee has extra pay, pay adjustments or substitute pay for a specific check, they can view detail information about the pay by clicking on *Adjusts/Sub Details* link. (Substitute detail information is available prior to Kelly Services being implemented.)


My Checks

Start Date 

End Date 

Select date range and click Search to list pay records. Select check number from list to view pay record.

Date	Number	Date	Gross	Net	Pay Adj.-Sub Info
05/31/2016	133579 - (Check)	05/31/2016	\$195.00	\$180.08	Adjusts/Sub Details
04/29/2016	133425 - (Check)	04/29/2016	\$65.00	\$60.03	Adjusts/Sub Details
03/31/2016	133252 - (Check)	03/31/2016	\$195.00	\$180.08	Adjusts/Sub Details
02/29/2016	133089 - (Check)	02/29/2016	\$260.00		
12/18/2015	132769 - (Check)	12/18/2015	\$130.00		
11/20/2015	132602 - (Check)	11/20/2015	\$195.00		
10/30/2015	132437 - (Check)	10/30/2015	\$227.50		

Pay Adj.-Sub Info 

Adjustments to Pay/Substitutes List for:

Subbed For	Date	Day(s)	Pay Rate	Paid
WILLIAMS,	4/28/2016	0.50	\$65.00	\$32.50
WILLIAMS	4/26/2016	0.50	\$65.00	\$32.50
SMITH,	4/4/2016	0.50	\$65.00	\$32.50
LIGHTSEY,	4/26/2016	0.50	\$65.00	\$32.50
CHUC,	4/14/2016	0.50	\$65.00	\$32.50
CHUC,	4/15/2016	0.50	\$65.00	\$32.50
Totals		3		\$195.00

Employee Self Service – View Pay Checks


Employee's detail check information can be displayed and printed.

Check Detail


deedee :

xxx-xx-1171
1ST AVENUE
WATSON, AL 35181

Check Information
Check Date: 02/28/2013
Pay Period Ending: 02/28/2013
Check Number: 124420
Note:



Print button.



Earnings

Category	Current	Ytd	Hrs
REGULAR	\$7,440.32	\$10,841.24	0.00
Total Earnings	\$7,440.32	\$10,841.24	0.00

Bank Accounts

Category	Account	Amount
-	****1255	\$5,165.12
Total Earnings		\$5,165.12

Net Pay

Category	Current	Ytd
Gross Pay	\$7,440.32	\$10,841.24
Total Deductions - Mandatory	(\$1,664.78)	(\$2,464.39)
Total Deductions - Other	(\$610.42)	(\$917.89)
Net Pay	\$5,165.12	\$7,458.96

Deductions - Mandatory

Category	Current	Ytd
FICA	\$569.18	\$829.35
Federal	\$800.97	\$1,203.66
State	\$294.63	\$431.38
Total Deductions - Mandatory	\$1,664.78	\$2,464.39

Deductions - Other

Category	Current	Ytd
RETIREMENT W/H	\$558.02	\$813.09
AEA NON CERTIFIED DUES	\$11.65	\$23.30
NEA NON CERTIFIED DUES	\$10.75	\$21.50
VALIC ANNUITY WITHHOLDINGS	\$30.00	\$60.00
Total Deductions - Other	\$610.42	\$917.89

Employee Self Service – View Pay Checks

The check/statement detail will display as a copy of the original check/statement.

The employee can also print a copy of the displayed check/statement.

Check Detail

Document Services Auto Generated Pdf. 1 / 1

Print

HARRIS SCHOOL DISTRICT BOE				
EMPLOYEE NAME	EMPLOYEE NUMBER	PAY PERIOD END	DEPOSIT DATE	DEPOSIT NUMBER
ELIZABETH TAYLOR	999999	10/15/2013	10/31/2013	485664
DESCRIPTION	CURRENT AMOUNT	DESCRIPTION	CURRENT AMOUNT	YTD AMOUNT
Regular Pay	5,852.85	FED WH	819.74	5,138.54
		STATE WH	263.33	2,354.21
		SS WH	324.20	324.20
		MC WH	75.82	678.30
		VALIC - G.	58.53	523.97
		FOCO - G.F	402.00	3,618.00
		HEALTH-CAF	401.48	3,613.32
		VISION-CAF	13.97	125.73
		FLEX MEDCL	208.33	1,874.97
		DISABILITY	66.99	602.91
		UNUM PROD	19.89	179.01
		TRS RETIRE	351.17	3,143.57
		FNB POLK	2,847.40	30,216.28
GROSS PAY	5,852.85			52,393.01
FRINGE BENEFIT	0.00			0.00
LEAVE DESCRIPTION	BALANCE	TAKEN		
SICK LEAVE	19.00	0.50		
Open Enrollment - October 21-November 8, 2013			NET DEPOSIT	0.00

CSI TECHNOLOGY OUTFITTERS
MOBILE, ALABAMA

485664

DEPOSIT *****VOID***VOID*****VOID*** DIRECT DEPOSIT
*****VOID***VOID***VOID***VOID***

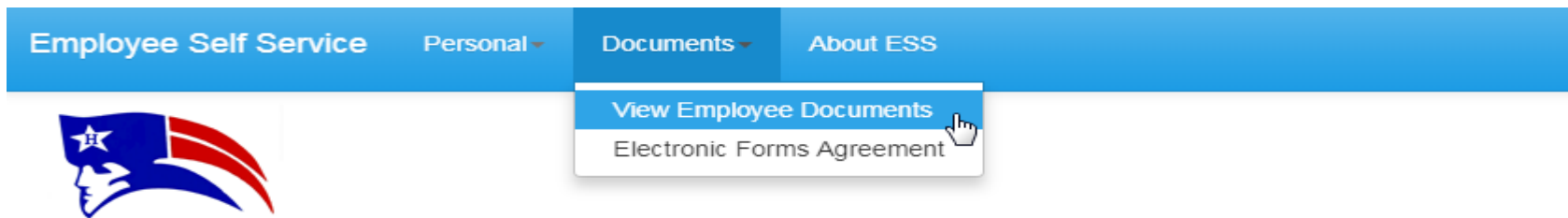
TO THE ORDER OF ELIZABETH TAYLOR
541 EAST MAIN STREET
ROME, GA 30161

DEPOSIT DATE	DEPOSIT NO.	AMOUNT
10/31/2013	485664	0.00

NON-NEGOTIABLE DIRECT DEPOSIT

Documents/View Employee Documents

From the View Employee Documents selection, The employee can view their direct deposit statement (Checks), W-2 form, Truth in Salary Letter and their Form 1095-C.



Welcome to Homewood City Schools Employee Self Service!

Employee Documents

Checks ▾

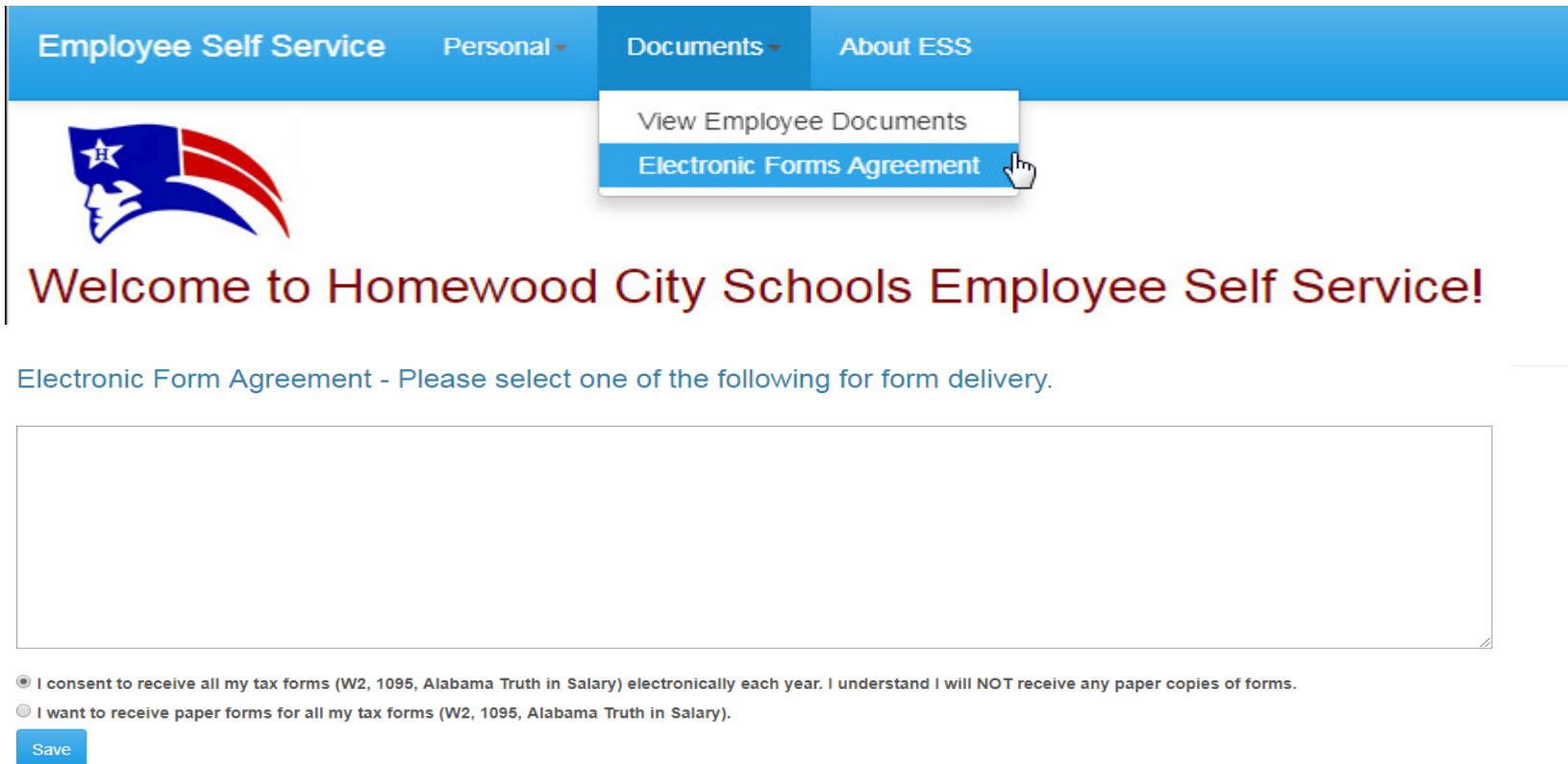
Search



Checks
W2
Truth in Salary
1095C

Documents/Electronic Forms Agreement


From the Electronic Forms selection, The employee can consent to receive all tax forms electronically each year.



The screenshot shows the Employee Self Service portal interface. At the top, there is a blue navigation bar with the following menu items: "Employee Self Service", "Personal", "Documents", and "About ESS". The "Documents" menu is currently open, displaying two options: "View Employee Documents" and "Electronic Forms Agreement", with a mouse cursor hovering over the latter. Below the navigation bar is a logo featuring a stylized profile of a person's head with a star and stripes, resembling the Alabama state flag. To the right of the logo, the text "Welcome to Homewood City Schools Employee Self Service!" is displayed in a dark red font. Below this, a blue link reads "Electronic Form Agreement - Please select one of the following for form delivery." Underneath the link is a large, empty rectangular box for form selection. At the bottom of the page, there are two radio button options: the first is selected and reads "I consent to receive all my tax forms (W2, 1095, Alabama Truth in Salary) electronically each year. I understand I will NOT receive any paper copies of forms." The second option is unselected and reads "I want to receive paper forms for all my tax forms (W2, 1095, Alabama Truth in Salary)." A blue "Save" button is located at the bottom left of the page.

Employee Self Service Personal ▾ Documents ▾ About ESS

View Employee Documents
Electronic Forms Agreement



Welcome to Homewood City Schools Employee Self Service!

[Electronic Form Agreement - Please select one of the following for form delivery.](#)

I consent to receive all my tax forms (W2, 1095, Alabama Truth in Salary) electronically each year. I understand I will NOT receive any paper copies of forms.
 I want to receive paper forms for all my tax forms (W2, 1095, Alabama Truth in Salary).

Save

BENEFITS YOU RECEIVE FREE OF CHARGE WHILE EMPLOYEED FOR THE HOMEWOOD CITY SCHOOLS

➤ Blue Cross Blue Shield Dental Insurance

- Single coverage is free
- **\$45.52** for family coverage

➤ Life Insurance – American United Life Insurance Company (AUL), a OneAmerica company

- Annual Base Salary rounded up to the nearest thousand
-

BENEFITS YOU RECEIVE FREE OF CHARGE WHILE EMPLOYEED FOR THE HOMEWOOD CITY SCHOOLS

➤ **Homewood Parks & Recreation Membership**

- Free for Employee
- \$25 per additional household member

Includes: Homewood Community Center, Central Pool, West Pool, & Lee Community Center

Membership is valid 1 year from the date of registration/purchase

➤ **Employee Assistance Program**

- **UAB EMPLOYEE ASSISTANCE and COUNSELING CENTER**

Provides employees and their families with resources for resolving work-related and personal problems.

- link is on HCS website under Departments/Human Resources
-



Homewood
City Schools


EAP

What is the EAP?



- An employee assistance program that offers support services for full time employees and their immediate household members
- A starting place for identifying, understanding, and resolving work-related and personal issues
- An avenue of assistance: team of certified counselors + collection of on-line resources + schedule of programs/events
- Help for employees to achieve a successful work/life balance

EAP Benefits | Why?

- Cost-free employee benefit
- Confidential
- Convenient office location *and* online/telehealth  ON LINE
- Covers full time employee and immediate household members
- Wellness

Reasons to consider © calling the EAP?

- Relationships & family
- Stress
- Depression & anxiety
- Financial consultation
- Work/life balance – personal growth
- Drug or alcohol issues
- Grief, loss, loneliness
- LGBTQ issues
- Eating disorders
- Community referrals

Wellness!

EAP Confidentiality©

RELEASE AUTHORIZATION FORM

Name of the parent/Guardian: _____

Address of the parent/Guardian: _____

Contact No. _____ Email ID _____

Name of the person to whom you give authority: _____

Address of the person to whom you give authority: _____

Name of the child _____ Age of the child _____

What are the reasons to take this step? _____

What are the various powers given to the caretaker for your children?

Date on which the authorization will begin: _____

What will be the duration of the authorization? From Date _____ to

Date _____

Parent/ Guardian Signature _____

Date _____ Place of Signing _____

How to access the EAP?



Call: (205) 934-2281

<http://www.uab.edu/eacc/homewood>

EAP Website



Knowledge that will change your world

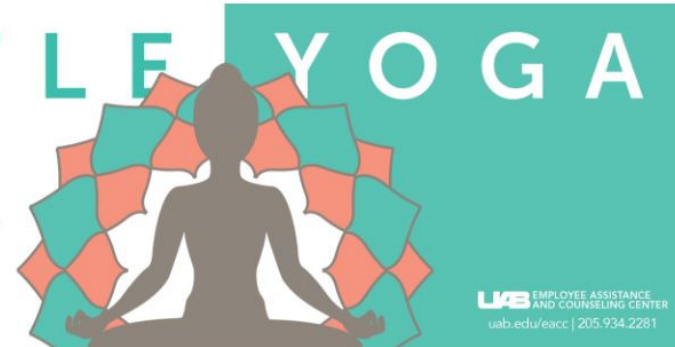
[HR Quicklinks](#) [UAB Quicklinks](#)

[Careers](#) [Benefits](#) [Compensation](#) [HR Forms](#) [Learning & Development](#) [HR Departments](#) [HR Programs](#) [Policies & Handbooks](#) [Contact Us](#)

- UAB Employee Assistance & Counseling Center
- Code Blaze
- Counseling Services
- Financial Wellness
- Programs & Events
- Support for Managers
- Online Screenings
- Professional & Administrative Staff
- Contact Us

GENTLE YOGA

Returns June 11
Mondays & Wednesdays,
5:25 p.m. at the EACC
office in Five Points



UAB EMPLOYEE ASSISTANCE AND COUNSELING CENTER
uab.edu/eacc | 205.934.2281



Welcome to the UAB Employee Assistance & Counseling Center

UAB Employee Assistance & Counseling Center offers confidential support services for UAB employees and members of their immediate household. A dedicated team of certified counselors, an extensive collection of online resources and a schedule of programs and events are designed to help you identify, understand and resolve work-related and personal issues to help you achieve a successful work/life integration. Available services include individual, couples and family counseling, financial advisement, educational and stress management programs and access to a collection to online resources.

For more information about our licensed mental health professionals and financial counselor, contact UAB EACC at 205-934-2281, or email uabeacc@uabmc.edu.

[EA CC NEW CLIENT FORMS](#)

[EA CC SOCIAL MEDIA POLICY](#)

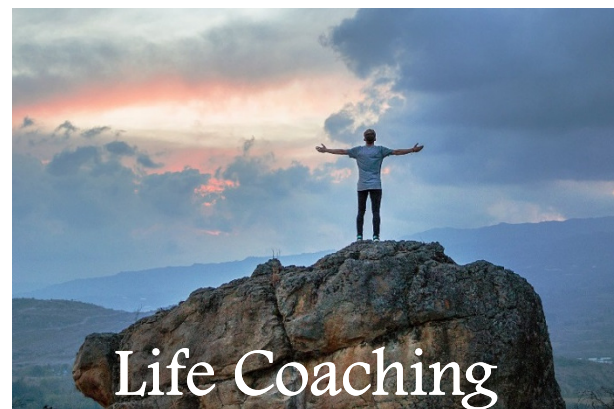
[EA CC POLICY STATEMENT](#)

[EA CC FAQs](#)

[EA CC CONFIDENTIALITY](#)

[EA CC PRIVACY STATEMENT](#)

EAP Q & A



PEEHIP HEALTH PREMIUMS

➤ Blue Cross Blue Shield

- Basic major medical
- No referrals
- **\$30** single coverage
- **\$207** family coverage – **dependents only**
- **\$282** family coverage – **spouse only**
- **\$307** family coverage – **spouse and dependents**
- **\$50.00** Wellness premium if screening not complete

➤ Viva HMO

- Major medical, vision, and dental
 - **\$30** single coverage
 - **\$207** family coverage
 - **\$100.00** fee for Spouse
-

PEEHIP PRESCRIPTION DRUG CHANGES

Effective February 1, 2016

<u>Tier/Drug Type</u>	<u>Copay: 1-30 Day Supply</u>	<u>Copay: 31-60 Day Supply</u>	<u>Copay: 61-90 Day Supply</u>
Tier 1: Generic Drugs	\$6	\$12	\$12
Tier 2: Preferred Brand Drugs	\$40	\$80	\$120
Tier 3: Non-Preferred Brand Drugs	\$60	\$120	\$180

Specialty Drugs – New 4th Tier:

A 4th tier copay was implemented for specialty drugs: 20% coinsurance with a minimum copay of \$100 and a maximum copay of \$150. The DAW (Dispense as Written) cost differential applies for multi-source brand drugs with a generic chemical equivalent.



PEEHIP Benefit Policy Changes Effective January 1, 2019

Hospital Medical Plan Changes – Blue Cross Blue Shield

- *Maximum Annual Out-of-Pocket Amounts*

The combined medical and prescription drug in-network maximum annual out-of-pocket amounts will be increased to \$7,350 per individual and \$14,700 for family coverage for calendar year 2018; and \$7,900 per individual and \$15,800 for family coverage for calendar year 2019.



PEEHIP Benefit Policy Changes Effective October 1, 2018 – September 30, 2020

Hospital Medical Plan Changes – VIVA

◆◆ The combined medical and prescription drug maximum annual out-of-pocket amounts will be increased to \$7,350 per member and \$14,700 per family coverage for the 2018-2019 benefits; and \$7,900 per member and \$15,899 for family coverage for the 2019-2020 benefits.

COMPARISON OF BENEFITS

October 1, 2018 – September 30, 2019

	PEEHIP Hospital Medical Plan Preferred Providers (Administered by Blue Cross)	VIVA Health Plan* (In approved areas only) (Active & Non-Medicare Members Only)
Preventive Medical	\$0 copayment then covered in full	\$0 copayment then covered in full
Well Baby Care	Covered at 100% of the allowed amount with no deductible or copayment. For a listing of the specific immunizations and preventive services, see www.alabamablue.com/preventiveservices .	\$0 copayment then covered in full
Routine Immunizations	\$0 copayment then covered in full	\$0 copayment then covered in full
Office Care		
Physician's Care	\$30 copayment per visit	\$25 per visit for primary care
Specialist	\$35 copayment per visit	\$40 copayment per visit
Lab/Diagnostic Procedures	\$5 per test	\$7.50 per lab test at independent labs 90% coverage for x-rays and other diagnostics 90% coverage per test at hospital based labs
Teladoc®	\$0 copayment per consultation	\$45 copay
Inpatient Facility (including Maternity)**		
Physician's Care	Covered in full	Covered in full
Inpatient/Hospital Services	\$200 hospital copayment per admission and \$25 per day for days 2-5	Covered in full after \$200 copayment per admission and \$50 per day for days 2-5
Outpatient Surgery	\$150 copayment	\$150 copayment for services performed at an ambulatory surgical center 90% coverage for services performed at other facilities
In-Hospital Care		
Surgeon	Covered in full	Covered in full
Physician Visits	Covered in full	Covered in full
Anesthesiologist	Covered in full	Covered in full
Emergency		
In Area/Out of Area Emergency Room Facility Charge	\$150 per visit; members are also responsible for the physician copayment and lab fees. If the diagnosis does not meet medical emergency criteria, covered at 80% of the allowed amount subject to calendar year deductible. Accidents treated as any other illness; all applicable copays will apply.	\$200 emergency room visit for facility, waived if admitted through the ER; Physician's charges covered at 100%.

PEEHIP HEALTH BENEFITS

Helpful Information about Open Enrollment for Existing Members

- You do not need to do anything during Open Enrollment if you are satisfied with your current coverage. If you take no action, you and your covered dependents will remain on your current plan(s).
 - **Exception:** If you want to renew your **Flexible Spending Accounts** or **Premium Assistance Program**, you must **re-enroll/reapply each year** as these two programs do not automatically renew.
 - Members enrolling in new insurance plans should receive a new ID card no later than the last week in September.
-

PEEHIP HEALTH BENEFITS

Important Open Enrollment Dates

- **Open Enrollment begins July 1, 2018, and will end by the following deadlines:**
- **Online:** Open Enrollment ends midnight **September 10, 2018**. After this time, online Open Enrollment changes will not be accepted and the Open Enrollment link will be closed. **Online enrollment is the easiest, most efficient and preferred method of enrolling or making changes.**
- **Paper:** Open Enrollment ends **August 31, 2018**. Any paper forms postmarked after August 31, 2018, will not be accepted.
- **Flexible Spending Accounts:** Paper or online Flexible Spending Account enrollment ends **September 30, 2018**.

Effective Date of Coverage:

- All Open Enrollment elections approved by PEEHIP will have an effective date of **October 1, 2018**.
-

Flexible Spending Accounts

Effective October 1, 2018, Blue Cross Blue Shield and FSA partner, HealthEquity expands current benefits. **ALL PEEHIP Health FSA members will be issued a Flex Debit Visa Card to pay for qualified medical, prescription drug, dental, and vision copays, and eligible healthcare expenses not covered by insurance.** The Traditional “automatic bump” reimbursement **WILL NOT BE AVAILABLE** and the Manual Reimbursement method must be used if members do not wish to use their debit card.

- All full time employees are eligible
 - *Dependent Care* expenses up to \$5,000
 - Pre-tax dollars set aside to pay qualifying out-of-pocket *Health Care* expenses.
 - The annual maximum healthcare contribution is indexed to \$2,650 (minimum of \$120) beginning January 1, 2018 through December 31, 2018.
-

Teladoc

Effective January 1, 2018, PEEHIP introduced Teladoc, which provides 24/7 access to a nation-wide network of U.S. board certified and state licensed primary care physicians, pediatricians and family medicine doctors through telephone or video conferencing visits.

- All PEEHIP Blue Cross Blue Shield Medical Plan Group #14000, VIVA Health Plan, or UnitedHealthcare Group Medicare Advantage (PPO) plan members are eligible
 - ***PEEHIP Blue Cross Blue Shield Group#14000 - There is NO member copay for using Teladoc***
 - This can be done 24 hours a day, 7 days a week, 365 days per year.
 - ✓ Simply visit www.Teladoc.com/Alabama, or
 - ✓ Use the mobile app, or
 - ✓ Call toll-free 1-855-477-4549
-

Teladoc

- *Viva Health Plan – there is a \$45 copay for using Teladoc*
 - This can be done 24 hours a day, 7 days a week, 365 days per year.
 - ✓ Simply visit www.Teladoc.com, or
 - ✓ Call toll-free 1-800-TELADOC (835-2362)
-

Supplemental Hospital Medical Plan

- Blue Cross and Blue Shield of Alabama administers the PEEHIP Supplemental Medical Plan. The PEEHIP Supplemental Medical Plan is designed to only be a supplemental plan to other eligible primary coverage. It does not cover the cost of services excluded by the member's eligible primary group plan.
 - Members who are enrolled in the PEEHIP Hospital Medical Plan (Group #14000), VIVA Health Plan (offered through PEEHIP), Marketplace (Exchange) Plans, State Employees Insurance Board (SEIB), Local Government Board (LGB), Medicare, Medicaid, ALL Kids, Tricare or Champus as their primary coverage **cannot enroll** in the PEEHIP Supplemental Medical Plan.
 - Members enrolled in plans with deductibles greater than \$1,450 for individual or \$2,700 for family are also not eligible for the PEEHIP Supplemental Medical Plan.
 - Annual maximum amount paid for the Supplemental Plan will be indexed to match the Hospital Medical overall maximum out of pocket (MOOP). For 2018, the MOOP is \$7,350 for single coverage, and \$14,700 for family coverage; and \$7,900 for individual coverage and \$15,800 for family coverage for calendar year 2019.
-

Southland Insurance

Supplemental Coverage

- Cancer Program \$ 38 per month*
- Dental Coverage \$ 38 per month – Single
\$ 50 per month – Family
- Hospital Indemnity \$ 38 per month*
- Vision Coverage \$ 38 per month*

Purchase supplements additional @ \$38/\$50ea. / month

OR

Refuse major medical coverage and apply allocation to the supplements for coverage at no charge.

If health coverage is declined by employee, a waiver form must be signed.

*Single or Family Coverage



THE WELLNESS PROGRAM

PEEHIP has teamed up with the Alabama Department of Public Health (ADPH) and will soon team up with another strategic partner to launch a new and improved wellness program for PEEHIP members. The goals of the program are to:

- Help members and their families achieve or maintain good health,
- Promote the early detection and identification of chronic disease,
- Change behavior that lowers the risk of chronic disease and illnesses, and
- Enhance wellness and productivity.

This program and its free services are designed to help PEEHIP members live happier, healthier and more satisfying lives. Healthier members typically get sick less often and visit the doctor less frequently. This leads to lower healthcare costs for members and the plan, which means being able to keep the same healthcare benefits coverage in place for a longer period of time.

Who is required to participate in the PEEHIP Wellness Program?

The following members enrolled in the PEEHIP Hospital Medical Group #14000 Plan administered by **Blue Cross Blue Shield** are required to complete the applicable wellness activities to earn a waiver of the \$50 monthly wellness premium.

- **Newly Enrolled PEEHIP Members (after October 1st)** - The “My Required Activities” link at the www.MyActiveHealth.com/PEEHIP website.
- **Members currently employed by a PEEHIP participating system and their covered spouse, regardless of Medicare eligibility**
- **A retired employee who is not Medicare eligible**
- **A non-Medicare-eligible spouse on a retiree contract**
- **Members on COBRA, Leave of Absence and surviving spouses who are non-Medicare-eligible**

All of the above must complete due applicable wellness components by the August 31, 2018 deadline in order to receive the wellness premium discount. The program does not require meeting any conditions related to a health factor to obtain a discount. The wellness premium discount will be determined by the PEEHIP Board.



The following is required to be completed in order to qualify for the wellness premium discount:

Wellness Screening
Health Questionnaire (HQ)

Required only if you and/or your covered spouse are identified as a candidate for these programs:

Wellness Coaching
Disease Management Coaching
Enhanced Disease Management Coaching



Wellness Screenings

The Wellness Screenings consist of the following measurements:

Blood pressure

Height, weight, waist, waist to height ratio, and body mass index (BMI)


Total cholesterol including HDL and LDL

Triglycerides

Blood glucose

The ADPH provides the screenings FREE for active employees and their covered spouses. They can obtain the screenings at any of the statewide ADPH county locations or through your personal healthcare provider.

All screenings regardless of location must be completed by August 31, 2018, to receive the wellness premium discount effective October 1, 2018.



ADPH has a PEEHIP Wellness Calendar and Wellness County Contacts on their website (www.adph.org/worksitewellness) that will inform you when the screenings will take place in your area.

If you decide to use your personal healthcare provider to do your screening, the **HEALTHCARE PROVIDER SCREENING FORM** is located on the PEEHIP website at www.rsa-al.gov/index.php/members/peehip/pubs-forms/. The form must be completed and faxed or mailed to ADPH by your healthcare provider. Under the Affordable Care Act (ACA) as part of the federal healthcare reform laws, no copay is required for one annual preventive routine office visit obtained through your in-network healthcare provider.

Also, no copay is required if an ADPH wellness coach gives you an **OFFICE VISIT REFERRAL FORM** to take with you to a physician's office to follow up with the abnormal results or risk factors identified during the screening process.

The referral is only good for 60 days from the screening date

HEALTH BENEFITS VOLUNTARY

American Fidelity Assurance Company

- Accident Only Insurance
 - Cancer Insurance
 - Disability Income Insurance
 - Life Insurance

 - FLEXIBLE SPENDING ACCOUNTS
 - Health Savings Accounts – **Flex Debit Card available**
 - Dependent Day Care Accounts
-

HEALTH BENEFITS

VOLUNTARY

VSP SIGNATURE PLAN

➤ VISION COVERAGE

- EMPLOYEE ONLY \$ 8.84
 - EMPLOYEE + SPOUSE \$17.70
 - EMPLOYEE + CHILD(REN) \$18.92
 - EMPLOYEE + FAMILY \$30.24
 - Must use participating doctors
-

HEALTH BENEFITS

VOLUNTARY

American Family Life Assurance Company (AFLAC)

- Cancer Insurance
 - Critical Care Insurance
 - Accident Indemnity
 - Short Term Disability Insurance
 - Life Insurance
 - Long Term Care
 - Dental/Vision
-

Deferred Compensation Plans

➤ 403B Plans

- American Fidelity Assurance Company
- Valic
- ValuTeachers - LSW Life
- AXA/Equitable Life
- AEA Value Builder

➤ 457 Plans

- RSA- 1 (Teachers Retirement)
 - Valic
-

VOLUNTARY PAYROLL DEDUCTIONS

➤ Homewood City Schools Foundation



I authorize Homewood City Schools to deduct funds from my monthly payroll to support the Homewood City Schools Foundation. Please return this form to Laura Johnston at the Homewood Schools Central Office.

Name: _____
(please print)

Signature: _____

School: _____

Amount: \$ _____ per month *One-time Donation:* \$ _____

Date: _____

All donations to the Foundation are tax deductible as it is a 501-C(3) non-profit organization. Tax ID 63-1132466.

➤ United Way

PEEHIP Insurance Allocations

Homewood City Schools pays the balance of your premium to PEEHIP each month at a cost of **\$800 per month** which equals **\$9,600 per year per employee**.

- **Single coverage: Employee pays \$30/mo. = \$360 per year - which would be \$830/mo. without the Board's \$800 portion.**
 - **Family coverage: (No spouse) Employee pays \$207/mo. = \$2,484 - which would be \$1,007/mo. without the Board's \$800 portion.**
(spouse ONLY) Employee pays \$282/mo. = \$3,384
- which would be \$1,082/mo. without the Board's \$800 portion.
-

PEEHIP Insurance Allocations

“3 – 1” Rule

An employee will earn one additional insurance allocation for every three months the employee has worked at least one half of the work days in the months worked.

- Work nine months and receive three summer allocations.
 - Employees working less than nine months will not earn all months and will owe an additional amount for insurance.
-



UNPAID ABSENCES

Absences taken without accrued sick leave or personal leave should be selected when choosing a leave type using Aesop and will be docked at the employee's daily rate.

Example:

A teacher holding a Bachelor's Degree with 0 years of experience has a daily rate of \$217.16.

Three absences in a pay period without accrued leave would total a docking amount of \$651.48.



UNPAID ABSENCES CAN AFFECT EARNING YOUR PEEHIP ALLOCATION

Paid leave is considered as time worked. You must work at least HALF of the contract days in each month to earn your \$800 allocation.

Example:

A teacher (B0) has used all of her sick and personal days. She gets the Flu in December and misses 6 days of work. Due to the Christmas Break, there are only 10 contract days in the month which only leaves 4 days as worked. Not only will they be docked \$1,302.96, but they will have to pay the \$800 allocation.

LEAVE

➤ Sick Leave

- One sick leave day earned per contract month
- Sick leave will not be advanced

➤ Personal Leave

- Three board paid days for every employee, Fourth day available docked at the price of a substitute

➤ Professional Leave

- May be granted for meetings and workshops to improve student achievement with prior Administrator Approval

➤ Vacation

- 12 month employees receive 1 vacation day each month
- A maximum of 30 days is allowed to accrue by each June 30th

➤ Leave can be taken in ½ and whole day increments

STATE SICK LEAVE LAW

Sick leave is defined in Title 16, Chapter 1, Section 16-1-18.1 of the Code of Alabama (last amended by Act No. 2001-671) as the absence from duty by an employee as a result of any of the following:

- Personal illness or doctor's quarantine.
 - Incapacitating personal injury.
 - Attendance upon an ill member of the employee's immediate family (parent, spouse, child, sibling); or an individual with a close personal tie.
 - Death in the family of the employee (parent, spouse, child, sibling, parent-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, nephew, niece, grandchild, grandparent, uncle or aunt).
 - Death, injury, or sickness of another person who has unusually strong personal ties to the employee, such as a person who stood in loco parentis.
-

SICK LEAVE BANK POLICY

➤ **Dr. Kevin Maddox**– Assistant Superintendent for Business Operations, Sick Leave Bank Administrator

- Any full time employee possessing two (2) days of accrued sick leave may join the sick leave bank during open enrollment each September becoming effective October 1.
- New Employees can join within the first month of being hired with a zero balance.
- First two (2) sick days earned for new hires and (2) accrued sick days for current staff will be deposited into the sick bank.
- No employee will be able to owe more than eight (8) days.
- Once you enroll you can end participation at any time by written notification and the days will revert back to your sick leave balance.

[FORMS\Sick Leave bank Guidelines Enrollment & Loan Application Forms.pdf](#)

Importance of Personal Days Rolling to Sick Leave Balance NOT Requesting Payment

Tier 1 plan members are employees who had service for which he or she received credit in the Employees' Retirement System or the Teacher's Retirement System prior to January 1, 2013.

To retire, Tier I must have a minimum of 25 service credit years or be 60 years old with 10 years of service credit. The unused accumulated sick days in your leave balance may be converted to service credit to be used to attain minimum service requirements for retirement. If minimum service has been attained, the total converted service credits are added to earn additional years of service for retirement purposes.

The TRS Sick Leave Conversion Table below displays the service credit earned by your sick leave balance.



Summary of Employee TRS Contribution Rates

During the 2011 Regular Session, the Alabama Legislature enacted Act 2011-676 resulting in changes to the employee contribution rates for all pay dates beginning on or after October 1, 2011, and October 1, 2012.

The employee contribution rates are summarized below.

Tier I
Current Rate
as of October 1, 2012
7.50%

Tier II
Current Rate
as of January 1, 2013
6.00%



Importance of Saving Your Sick Days

Be used to attain minimum service requirements for retirement.

Example:

A Tier I employee has 24 service years in the Teacher's Retirement System and is 46 years old which normally does not qualify to draw retirement benefits, BUT Tier I has an accumulated sick leave balance of 173 days. Tier I will earn an additional 12 months of service credit and qualify to retire 1 year early after working 24 years instead of the required 25 years.

OR



Example:

A Tier I employee has 26 service years in the Teacher's Retirement System and has an accumulated sick leave balance of 263 days. Tier I will earn an additional 18 months of service credit and increase their retirement benefit by \$105.65 per month which equals \$1,267.80 annually (based on the Average Final Salary of \$42,000 shown below.)

**Average Final Salary: \$42,000 & Service Credit of 27.5 years equals:
\$42,000 x 27.5 x .020125(Benefit Factor) divided by 12 =
\$1,937.03 per month**

**Average Final Salary: \$42,000 & Service Credit of 26 years equals:
\$42,000 x 26 x .020125(Benefit Factor) divided by 12 =
\$1,831.38 per month**

TRS Sick Leave Conversion Table

The following chart is used by the TRS for both public education employees and state employees to convert accumulated sick leave days to months of service credit upon service retirement.

Accumulated Sick Leave Days	Months of Service
0-7	0
8-22	1
23-37	2
38-52	3
53-67	4
68-82	5
83-97	6
98-112	7
113-127	8
128-142	9
143-157	10
158-172	11
173-187	12
188-202	13
203-217	14



TRS Sick Leave Conversion Table - Continued

Accumulated Sick Leave Days	Months of Service
218-232	15
233-247	16
248-262	17
263-277	18
278-292	19
293-307	20
308-322	21
323-337	22
338-352	23
353-367	24
368-382	25
383-397	26
398-412	27
413-427	28
428-442	29



TIER 2 MEMBERS

Tier 2 plan members are employees who first began eligible employment with an Employees' Retirement System or the Teacher's Retirement System on or after January 1, 2013 and had no eligible prior service.

To retire, Tier 2 members must have a minimum of 10 service credit years and be 62 years old. A member is eligible to retire the first day of the month following attainment of age 62 with 10 years of service credit.

TIER 2 MEMBERS

Computing Your Retirement Benefit

The factors used in calculating this benefit include:

- 1. Average Final Salary (Compensation):** The average of the highest five years (July - June) out of the last 10 years the member made contributions. Partial years are included when calculating the average final salary if they benefit the member.
- 2. Years and Months of Creditable Service:** The total amount of creditable service to include membership service, prior service, purchased service, and transfer service.
- 3. Retirement Benefit Factor:** The current benefit factor, as established by the Alabama Legislature, is 1.65%.

Retirement Formula for Maximum Monthly Benefit

$$\text{Average Final Salary} \times \text{Years and Months of Service} \times \text{Benefit Factor} \div 12 = \text{Maximum Monthly Benefit}$$

Example: Average Final Salary: \$42,000

Service Credit: 27 years and 6 months

Age 62

$$\$42,000 \times 27.5 \times .0165 \div 12 = \$1,588.13 \text{ per month}$$

QUESTIONS

