DISTRICT OF COLUMBIA
PUBLIC SCHOOLS

Year 2016

Employee Benefits Guide

Central Office (EG, EX, MSS, DS, CS, LS, LX)
Non-Instructional School Based (EG)
Wage Grade (RW, SW)

Reach us via email: dcps.benefits@dc.gov

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Introduction to Benefits

Welcome to DC Public Schools!

We are pleased that you have joined us as an employee of DC Public Schools (DCPS)! In this Employee Benefits Guide you'll find information to help acquaint you with our full range of benefits.

Who is eligible for health benefit coverage?

District of Columbia Public Schools provides a comprehensive benefits plan to the following employees and their eligible dependents:

- All Full-Time Permanent Employees
- All Part-Time Permanent Employees who generally work at least 20 hours per week
- Employees with Temporary Full-Time appointments of 13 months or at least paid for 30 hours per week (or 120 hours per month)

The employee's District Government service date determines which benefits plan is available. Employees who began benefits-eligible employment with the District Government prior to October 1, 1987 participate in the Federal Employees Health Benefits (FEHB) Plan, while employees with a District Government service date of October 1, 1987 or later participate in the District of Columbia Employees Health Benefits (DCEHB) Plan.

The chart below lists all dependents eligible for health insurance. You are required to provide social security numbers and dates of birth for all dependents.

DEPENDENT	PLAN TYPE
Legally Married Spouse	Federal and District Plans
Domestic Partner - Common Law Spouse - Same-Sex Partner	District Plan Only
Unmarried Children - Until reaching age 26	Federal and District Plans
Disabled Adult Children **Note: Child must have been disabled before age 22**	Federal and District Plans

Additional Details

Health coverage does not begin on the first day of employment. Coverage for health insurance and additional optional benefits takes effect on the first day of the pay period following your online enrollment. **The provider mails health insurance cards approximately four to six weeks after the online application is processed**.

The District carries the majority of the cost of health benefits coverage with a 28% supporting contribution from you. Your share is paid with pre-tax dollars deducted from each paycheck. If you are enrolling a domestic partner, your share is paid with after-tax dollars deducted from each paycheck.

In order to carry newly elected health insurance coverage into retirement, new coverage must be in effect for the five years of service immediately preceding the retirement date or the entire period of service during which coverage was available (if this period is less than five years).

Explanation of Benefits Options – Health Plans

Transgender Benefits Available through All Healthcare Providers

Through **all District healthcare providers**, covered transgender benefits include sexual reassignment surgery and mastectomy with chest reconstruction, in addition to mental health and hormone therapy services. Cost sharing is the same as cost sharing for other medical services (e.g., inpatient hospital cost sharing, office visit cost sharing, etc.)

Healthcare Reform Update

The Affordable Care Act ("ACA," also known as "health care reform") was passed in 2010. This law is intended to extend access to medical coverage to nearly everyone in the U.S. and to eliminate restrictions on key benefits. On January 1, 2015, the Government began to require almost everyone in the U.S. to have medical insurance coverage. Those who don't have medical coverage will pay a penalty -- this requirement is call the "individual mandate." (The only exception to this requirement is if you earn below a certain level of income.)

Note that eligibility for healthcare benefits has been extended to include some temporary and intermittent employees (i.e., employees who work for at least 90 days within a 12-month evaluation period and are paid at least 30 hours per week (or 120 hours per month). Employees falling into this category are **eligible to participate only in a HMO healthcare plan**.

2016 Health Benefit Plan Options (District Employees Only)

The Explanation of Benefits (EOB) below pertains to employees participating in the District of Columbia Employee Health Benefits Plan only. Employees receiving health and life insurance benefits through the Federal Employees Health Benefits Plan should obtain more information by contacting the Benefits team via email at dcps.benefits@dc.gov.

DCPS offers the flexibility of selecting a HMO, PPO, or CDHP plan option for health insurance coverage. There are distinct differences among each option:

Health Maintenance Organization (HMO): Aetna, Kaiser Permanente

- Requires you to select a primary care physician within plan network of providers *(Kaiser only)*
- Requires that you obtain a referral for specialist care *(Kaiser only)*
- Services rendered by out of network providers will not be considered as eligible expenses under the plan

Open Choice (PPO): Aetna

- No primary care physician selection required, no referrals needed
- Provides both in and out of network benefits
- Provides nationwide coverage for non-emergency care

Nationwide Choice (HMO): United Health Care

- No primary care physician selection required, no referrals needed
- Plan provides nationwide coverage for services rendered by physicians seen within network
- Services rendered by out of network providers will not be considered as eligible expenses under the plan

Consumer Driven Health Plan (CDHP)

- No primary care physician selection required, no referrals needed
- A Health Savings Account (HSA) is available with this plan, where the employee maximum contribution is $3,100 for Self, $6,250 for Self+1, and $6,250 for Family (unused funds roll over into the following year and are portable)
- Employees cannot participate in both CDHP and a Healthcare Flexible Spending Account

NOTE: All of the healthcare providers require employees to maintain a local address in PeopleSoft.

NEED MORE INFORMATION?
For information regarding the health plan providers, co-payments, deductibles, etc., please visit http://dcps.dc.gov/page/employee-benefits-00.

Visit the healthcare websites located in the Points of Contact section (p. 33) for additional information on plans, services covered, and participating providers.

Federal Employees Health Benefits (FEHB) Information

Employees originally hired by the District Government prior to October 1, 1987 are eligible to receive health, dental, and life insurance benefits sponsored by the Federal Government. To obtain more information about these benefits, please visit the Office of Personnel Management (OPM) website (http://www.opm.gov/insure) or contact the Benefits team via email at dcps.benefits@dc.gov.

Federal Employees Health Benefits (FEHB) Self Plus One Enrollment Information

Note that OPM has implemented a new enrollment type, called “Self Plus One.” effective January 1, 2016. Previously, the only enrollment types available were Self Only and Self and Family.

Explanation of Benefits Offered – Dental & Optical

Dental and Optical insurance coverage are provided to employees based on non-union or union designation and position type.

American Federation of State, County and Municipal Employees (AFSCME Local 2921)

Instructional Program Assistants and Secretarial/Clerical employees who are members of AFSCME Union Local 2921 are entitled to Dental and Optical coverage through their union. To enroll, complete the union's online enrollment through PeopleSoft. **(Local 2921 Contact Information: (202) 234-6506)**

American Federation of State, County and Municipal Employees (AFSCME Local 2401)

Specified employees in the DCPS Office of Contracts and Acquisitions are members of AFSCME Union Local 2401 and are entitled to Dental and Optical coverage through their union. To enroll, complete the union's online enrollment through PeopleSoft. **(Local 2401 Contact Information: (202) 234-6506)**

Teamsters Union Local 639

Teamsters Union Local 639 employees no longer will receive Optical coverage through their union. Instead, employees are eligible for Optical coverage through the District Government, starting January 2016. Optical coverage is provided through Quality Plan Administrators. Dental coverage will continue to be provided through their union. To enroll, complete the online enrollment through PeopleSoft. (**Local 639 Contact Information: (202) 636-8170)**

Teamsters Union Local 730

Teamsters Union Local 730 employees no longer will receive Optical coverage through their union. Instead, employees are eligible for Optical coverage through the District Government, starting January 2016. Optical coverage is provided through Quality Plan Administrators. Dental coverage will continue to be provided through their union. To enroll, complete the online enrollment through PeopleSoft. (**Local 730 Contact Information: (202) 589-3434)**

Explanation of Benefits – Life Insurance

DCPS offers several Life Insurance options to eligible employees. Benefits eligible employees hired on or after 10/01/1987 participate in the District of Columbia Employees Group Life Insurance (DCEGLI) Plan.

Basic Life Insurance

Coverage begins on Day 1 of employment and you are automatically enrolled in the benefit **unless you decline** coverage. Basic life insurance is equal to 1x your annual salary (rounded up to the nearest $1,000) plus $2,000.

You cannot elect supplemental life insurance unless you elect to enroll within 31 days of your hire date.

Supplemental Life Insurance

To enroll in supplemental options, you must be enrolled in the Basic Life insurance option. Rates are based on age and salary.

Standard: Option A
Additional $10,000 worth of insurance coverage
Additional: Option B
Additional coverage equivalent to one up to five times your annual salary
Family: Option C

- $10,000 life insurance for eligible spouse
  $10,000 life insurance for eligible dependent child
- $25,000 life insurance for eligible spouse
  $10,000 life insurance for eligible dependent child
- $50,000 life insurance for eligible spouse
  $10,000 life insurance for eligible dependent child

NOTE: Employees have the ability to decrease supplemental life insurance at any time. However, if you waive Basic Life or decline one or more of the options, your opportunity to cancel your waiver or enroll in a supplemental option you previously declined is strictly limited.

In order to carry newly elected life insurance coverage into retirement, new coverage must be in effect for the five years of service immediately preceding the retirement date or the entire period of service during which coverage was available (if this period is less than five years).

A waiver or cancellation of coverage also may affect your eligibility for continuing coverage into retirement.

Accidental Death and Dismemberment Insurance (AD&D)

This additional benefit is provided at no cost to the employee. Coverage is equal to 1x annual salary plus $2,000, and the full benefit is available until age 35. Beginning on the employee's 36th birthday, AD&D coverage decreases by 10% each year until age 45. At age 45, AD&D is no longer available to the employee.

Explanation of Benefits Offered – Supplemental Insurance

Supplemental Insurance plans provide security, peace of mind, and satisfaction in knowing that you have taken a step toward securing your income during a period of disability. Plans offered to DCPS employees include:

Short Term Disability Coverage

Short Term Disability (STD) is designed to pay a weekly benefit to you in the event that you cannot work due to a covered illness or injury. This benefit replaces 66.3% of your income, thus helping you to meet your financial commitments in a time of need. Short Term Disability may be used in conjunction with annual or sick leave.

If you become disabled and your claim for STD benefits is approved by The Standard, benefits may be payable for up to 180 days, following the benefit waiting period. The benefit waiting period is a specified number of days during which you must remain continuously disabled. STD benefits are not payable during the Benefit Waiting Period.

The Benefit Waiting Period is 20 days for the following causes of disability:

- Accidental injury
- Physical disease, pregnancy, or mental disorder

Long Term Disability Coverage

Long Term Disability (LTD) insurance is designed to pay a weekly benefit to you in the event that you cannot work due to a covered illness or injury. If you become disabled and your claim for LTD benefits is approved by The Standard, LTD benefits become payable after you have been continuously disabled for 180 days and remain continuously disabled. LTD benefits are not payable during the Benefit Waiting Period.

The Benefit Waiting Period is 180 days for the following causes of disability:

- Accidental injury
- Physical disease, pregnancy, or mental disorder

The coverage can help with the everyday bills, such as the mortgage or rent, that continue even when you can't work. LTD may be used in conjunction with annual or sick leave. The maximum monthly benefit is equal to $7,500 (depending upon annual salary), with worldwide coverage provided and a waiver of premiums while disabled. If you become disabled before age 62, LTD benefits may continue during disability until you reach age 65.

Travel Assistance

Travel Assistance is a comprehensive program of information, referral, assistance, transportation, and evacuation services designed to help you respond to medical care situations and many other emergencies that may arise during travel. Travel assistance also offers pre-travel assistance, which gives you access to information on things like passport and visa requirements, foreign currency, and worldwide weather. All services are provided by one of the most experienced assistance companies in the United States, FrontierMEDEX.

Employees who are enrolled in DCPS Basic Life Insurance are automatically covered by Travel Assistance. Coverage also extends to the employee's spouse (domestic partner) and children through age 25, regardless of student or marital status.

AFLAC Indemnity Plan

AFLAC offers a distinct type of protection. Unlike major medical health insurance, AFLAC pays **you** (unless otherwise assigned), **not** the doctor or hospital. Note that AFLAC does not replace medical insurance – it is an additional benefit that provides cash benefits and allows you to spend them as you like to help with the financial challenges an accident or illness may impose. Types of medical issues covered include:

- Cancer/Specified-Disease
- Hospital Confinement Sickness Indemnity
- Hospital Confinement Indemnity
- Specified Health Event
- Accident Indemnity

For more information, visit www.aflacclients.com/dcgov/Welcome.aspx or contact the AFLAC Customer Service Line at 202.442.9718.

NOTE: You are required to meet with an AFLAC Customer Care Representative to complete the enrollment process. If you do not meet with an AFLAC representative, the elections made through PeopleSoft will not be honored and all AFLAC deductions will be returned to you as taxable income.

Employee Assistance Plan

The Employee Assistance Program (EAP) is a free, confidential, 24/365 service for employees and their immediate family members age 18 and older. Following are the two providers employees may contact for EAP services.

Inova Employee Assistance Program is a comprehensive, top ranked international provider of employee assistance services. With telephonic access and convenient online resources, Inova EAP offers practical, real world solutions to employee life issues that may derail productivity and satisfaction. Employees have access to helpful materials that will assist with a range of Work-Life services, such as Parenting, Aging, Career and Workplace Education, Health, Wellness, and other daily living topics.

COPE, Inc. has been providing EAP services to workplaces and their employees for over 30 years. These services are designed to help employees with everyday problems in living, including emotional or marital problems, stress, depression and anxiety, family or relationship troubles, alcohol or drug abuse, workplace difficulties, and financial or legal referrals.

Explanation of Benefits Offered – Flexible Spending Accounts

New 2016 – New Provider for Flexible Spending Accounts (FSA)

Starting in 2016 the District will utilize a new provider, Benefit Resource, Inc., for Flexible Spending Accounts. This provider will allow participants to use a single debit card to directly access funds saved through pre-tax spending account deductions. This debit card can be used to pay for eligible healthcare, transit, and parking costs and is accepted at WMATA metro kiosks for direct purchases and reloading SmartTrip cards. Reimbursement checks will be issued for claims filed for eligible dependent care expenses.

DCPS offers all benefits-eligible employees the opportunity to participate in Flexible Spending Accounts (FSA) for Healthcare, Dependent Care, Commuter Transit, and/or Commuter Parking. These pre-tax accounts allow you to pay your work-related daycare, out-of-pocket medical, dental, vision, and transportation expenses on a pre-tax basis. Note that a **FSA only can be added during Benefits Open Enrollment**; however, with a life change event, a FSA can be increased or decreased within 31 days of that event.

Benefits of FSAs	FSAs – Important Information
Flexible Spending Accounts (FSAs) can help reduce your taxes and increase your take-home pay.	***FSAs runs on a calendar year plan from January 1 through December 31, so be sure to estimate your expected out-of-pocket expenses carefully.***
On average, people save 23% in taxes by paying their out-of-pocket health care and child care expenses on a pre-tax basis through a FSA. Actual tax savings depends on several variables, including state and local tax rates and the tax bracket of the participant: •15% tax bracket can save up to 22.65% •27% tax bracket can save up to 34.65%	If you do not use all of the money that you deposit into your healthcare flexible spending account by December 31 of the plan year, up to $500 of your unused balance will automatically roll over to the next year plan, according to IRS regulations. All receipts for the plan year's expenses must be submitted by March 31 of the next calendar year.
Online and Mobile Support	**You must enroll each year during the benefits Open Enrollment period, or all funds will be forfeited.**
For additional information regarding Benefits Resource, Inc., visit www.BenefitResource.com	

Healthcare

- Employees can set aside up to $2,500 annually for eligible health expenses.
- Up to $500 of your unused balance will roll over to the next plan year.
- Eligible expenses include medical, dental, and vision expenses not reimbursed by any plan (e.g., copayments, deductibles).

Dependent Care

- Employees can set aside annually up to $5,000 (single parent or married and filing taxes jointly) or $2,500 per person if married and filing taxes separately.
- If married, spouse must be working, searching for a job, in school and enrolled as a full-time student for at least five months of the year, or mentally and/or physically unable to provide care for a dependent for the daycare expenses to qualify for reimbursement.

- All unused money will be forfeited.
- Eligible dependents include:
  - Dependents under age 13 who can be claimed as exemptions on your federal income tax return.
  - Dependents of any age (including parents who are mentally or physically incapable of self-care and who live regularly in your household at least eight hours per day).

Commuter Transit

All employees may use the Commuter Benefits Transit Plan, which is a pre-tax benefit that is used to pay for your monthly bus, train, and/or metro passes. Contributions to your Transit Plan account are made before any taxes (payroll or income) are taken from your earnings:

- You determine the per paycheck deduction, up to the IRS monthly maximum ($250 per plan).
- Expenses must be incurred when commuting between work and an employee's residence.
- Provides the opportunity to pay for these expenses with earnings that have not been taxed.

Commuter Parking

Note the following regarding eligible parking expenses:

- You determine the per paycheck deduction, up to the IRS monthly maximum ($255 per plan).
- Can be used for parking provided to an employee on or near the business premises of the employer.
- Includes commutes by carpool, commuter highway vehicle, and mass transit facilities.
- Payment can be made directly to the location where the employer pays the expense (e.g., parking lot provider) or the employee can be reimbursed.
- Includes parking at locations where the employer provides parking on premises it owns or leases.

Note that **only** Commuter Transit and Commuter Parking Flexible Spending Accounts can be changed or cancelled at any time during the calendar year.

For more information visit the Benefit Resource, Inc. website at www.BenefitResource.com.

Explanation of Benefits Offered – Additional Benefits

AT&T, Sprint, and Verizon Wireless

You can save up to 15% on qualified charges with AT&T, Sprint, or Verizon Wireless because you are a DC Government employee. Contact the respective company to request the discounts to be added to your active account.

City First Homes

City First Homes is a non-profit organization that supports families and individuals who want to buy a home in Washington, DC through a low-cost Down Payment Assistance Loan. This program is only offered to DC Government Employees. Visit www.cfhomes.org for additional information and to review home listings.

Negotiated Employee Assistance Home Purchase Program

Through this joint labor effort (NEAHP), administered by the District of Columbia Department of Housing and Community Development (DHCD) and the Office of Labor Relations and Collective Bargaining (OLRCB), with the assistance of the Greater Washington Urban League (GWUL), DCPS contributed $50,000 to NEAHP for Teamsters members to use toward the purchase of a primary residence in the District of Columbia.

DC Teacher Federal Credit Union

All DC Public Schools employees are eligible to join the DC Teachers Federal Credit Union (DCTFU). The purchase of one share ($50) and payment of a one-time membership fee ($5) begins your savings account and a lifetime of credit union membership and benefits. For more information visit the website at http://dctfcu.org.

Employee Assistance Program

All employees may use the Employee Assistance Program, which provides confidential counseling and referral services for emotional, professional, or financial problems. Professionals are staffed through Cope, Inc. and Inova to provide counseling services. For more information on Cope, Inc., call 202.628.5240 or 800.841.7406 or visit the website at www.cope-inc.com. For more information on Inova, call 800.346.0110 or visit the website at www.inova.org/eap.

DPR Fitness Center

DC Department of Human Resources (DCHR) and the Department of Parks and Recreation (DPR) have partnered to offer District Government employees free and reduced rates on DPR fitness center memberships through payroll deduction. Employees can elect an annual non-refundable membership that will provide the employee and/or their family members with access to DPR fitness centers. To enroll, complete the online enrollment through PeopleSoft.

Explanation of Benefits – Retirement Options

District Government 401(a) Defined Contribution Plan

Employees hired on or after October 1, 1987 and classified as EG, EX, MSS, and DS participate in the District of Columbia Government 401(a) Defined Contribution Plan, which is administered by ICMA-RC. Each pay period, the District contributes five percent of your salary to the plan. The plan is 100% employer funded, which means that this benefit is free to you.

After one year and one day of continuous service, you are automatically enrolled – no action is necessary on your part.

Employees are vested (acquire ownership of their retirement contribution account) on a graded vesting schedule as shown below. Employees are fully vested after five consecutive years of service.

YEARS OF CREDITABLE SERVICE	VESTED PERCENTAGE
Less Than 2	0%
2	20%
3	40%
4	60%
5 or more	100%

Civil Service Retirement Plan

Employees hired before October 1, 1987 and classified as EG, EX, MSS, or DS participate in the Civil Service Retirement Plan (CSRS). Each pay period, the employee contributes 7, 7 ½, or 8 percent of their paycheck to CSRS, and while they generally pay no Social Security retirement or survivor and disability (OASDI) tax, they must pay the Medicare tax. DCPS matches the employee's CSRS contributions.

CSRS participants are vested after five years of service. Upon retirement from DCPS, you receive a monthly annuity if you meet the age and service requirements. You are eligible to retire from DCPS under voluntary retirement if you meet the age and service criteria in one of the following three categories:

- Age 55 with 30 years of service
- Age 60 with 20 years of service
- Age 62 with 5 years of service

In any category, you must have a minimum of five years of DCPS service.

To be eligible for post-retirement health coverage, you must have:

- At least ten years of creditable District service; and
- At least five years of continuous coverage under a Federal health plan immediately preceding your retirement.

For complete details on the plan provisions, visit www.opm.gov/retirement.

Explanation of Benefits – Retirement Options (continued)

457 Deferred Compensation Plan

All benefits-eligible DCPS employees may participate in the 457 Deferred Compensation Plan, which is managed by ICMA-RC. The 457 Plan reduces the amount of taxable income per pay period based on the employee's contribution. This is an optional savings program that allows employees to tax-defer income and invest for the future. The Internal Revenue Service (IRS) determines the maximum annual amount that can be deferred. For plan year 2016, employees may defer up to $18,000. There are no employer contributions to this plan.

Employees may be eligible for increased annual contributions under a special 457 catch-up provision during the three years prior to the year the employee reaches normal retirement age or, if the employee reaches age 50 or older before the end of the calendar year.

To enroll in the 457 Deferred Compensation Plan you must complete a paper enrollment form with ICMA-RC. To obtain a copy of the enrollment form, please call ICMA-RC at 800.669.7400.

Note: ***Enrollment selections made through PeopleSoft without a paper enrollment form will not be honored and the money will be deducted and held in escrow. Following the escrow waiting period, the funds will be returned to you and taxed as income.***

Please note that you may enroll in the 457 Plan at any time throughout the calendar year.

Explanation of Benefits – Retirement Options (continued)

403(b) Tax Shelter Annuity Plan

The 403(b) Tax Shelter Annuity Plan is an optional retirement savings program that provides employees the opportunity to make pre-tax contributions to a tax shelter annuity (TSA). Eligible employees may defer up to $18,000 annually for the year. Eligible employees over age 50 may contribute an additional $5,000 into a TSA. No taxes are paid on the contributions or earnings until the employee withdraws the funds.

How to Enroll

STEP 1: Contact the vendor of your choice. *Please note that you may enroll in the 403(b) plan at any time throughout the calendar year.*

STEP 2: Meet with a representative to determine your investment strategy and complete their paper enrollment process. The 403(b) investment provider will notify DCPS of your payroll contribution (bi-weekly deduction) by sending us a Salary Reduction Agreement (SRA).

Note: ***Enrollment selections made through PeopleSoft without a paper enrollment form will not be honored and the money will be deducted and held in escrow. Following the escrow waiting period, the funds will be returned to you and taxed as income.***

2016 APPROVED 401a, 457 and 403(b) VENDORS FOR DCPS EMPLOYEES

Vendor	Name	Phone #	Email address
AXA Equitable	John Anderson	703.207.2790 / 202.577.1577 Cell	
	Mark Toia	703.205.0346 / 323.841.2007 Cell	mark.toia@axa-advisors.com
	Steven (Tyler) Tisdell	703.205.0368 / 609.221.3058 Cell	steven.tisdell@axa-advisors.com
	Christopher Regan	703.205.0310 / 540.905.1823 Cell	christopher.regan@axa-advisors.com
	Danielle Byrd Thompson	703.205.0354 / 313.530.3492 Cell	danielle.byrd@axa-advisors.com
Holistic Planners (The Felder Group)	Demetrius Felder	202.808.8289 / 240.508.2169 Cell	d.felder@holisticplanners.com
VOYA Financial	Keith Serrano	301.292.2423/ 240.605.6917 Cell	keithmserrano@voyafa.com
	Bruce Rome	703.449.2916 / 301.980.9949 Cell	bruce.rome@voyafa.com
	Jennifer Holmes	703.449.2953	
	Donald Byrd	240.532.5480 / 301.257.9429 Cell	donald.byrd@voyafa.com
	Jeffrey Wheeler	703.405.7880 Cell	jeffrey.wheeler@voyafa.com
Lincoln Investments	Perry (Ray) Stanley	301.987.7211 ext. 62504 or 800.242.1421	pstanley@lincolninvestment.com
MetLife (Travelers)	Iris LaVigne	703.821.5410 / 703.597.5625 Cell	ilavigne@metlife.com

	Guy Lavigne	443.957.6082 / 703.677.7217 Cell	glavigne@metlife.com
	Berhane Kassahun	301.354.3821 / 202.320.6923 Cell	bkassahun@metlife.com
New York Life	Melanie White Terry	410.740.4719 / 202.422.1079 Cell	mwhite@ft.newyorklife.com
	Yaba Baker	301.214.6600 / 202.359.1938 Cell	ykbaker@nyl.com
	Joyce Swinson	301.980.9694	jgswinson@ft.newyorklife.com
Valic	Aprenea McCutchen	410.859.2164 / 443.802.5998 Cell	aprenea.mccutchen@valic.com
	Larry Perez	800.892.5558 ext. 87821 240.459.5153 Cell	larry.perez@valic.com
	Amanda Maggio	800.892.5558 ext. 88399 703.663.6709 Cell	amanda.maggio@valic.com
	Peter A. Ramig	800.892.5558 ext. 88128 503.757.3147 Cell	peter.ramig@valic.com
ICMA-RC 401a/457	Investment Representatives	800.669.7400	service@DCretire.com

How to Enroll

Welcome Workshop provides new employees with an introduction to DCPS, a discussion of DCPS personnel policies, and information about employee benefits.

You will be able to enroll in benefits following your Welcome Workshop, so we encourage all new employees to thoroughly review this Employee Benefits Guide.

YOU MUST ENROLL IN HEALTH AND LIFE INSURANCE BENEFITS WITHIN 31 DAYS OF YOUR EFFECTIVE HIRE DATE

TOP 4 ENROLLMENT QUESTIONS ANSWERED

1. **How do I enroll in benefits online?**
   New employees can begin to make benefits selections online through PeopleSoft Employee Self Service (ESS) following their effective hire date. You must have your PeopleSoft user id and password to access the online system. Employee Services will send you an email that will include your user id and password.

2. **When does my life insurance coverage begin?**
   Life insurance coverage begins on your first day of employment.

3. **How do I confirm that my benefits elections were processed?**
   Following your successful enrollment, you will receive a confirmation email from PeopleSoft that will include a list of all of the benefits options that you selected. If you do not receive a confirmation email or if the email does not include the options you selected, contact the Benefits team immediately via email at dcps.benefits@dc.gov.

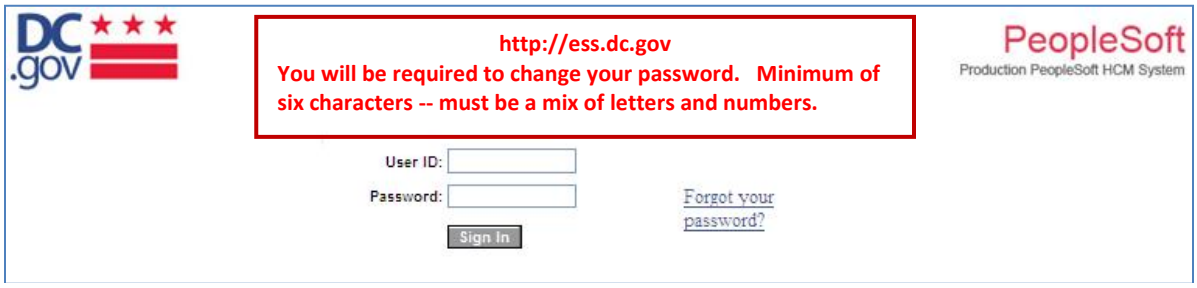
4. **When does my health insurance and additional optional benefits coverage begin?**
   The effective date of coverage for health insurance and additional optional benefits begins on the first day of the pay period following your online enrollment. Note that it takes the insurance providers 30-45 days from your online enrollment date to confirm enrollment. Wait until you receive enrollment cards to use your benefits for non-emergency services.

Accessing PeopleSoft Employee Self Service

Why should I use ESS?

PeopleSoft Employee Self Service (ESS) is the most convenient way to view, manage, and update your DCPS personal and pay information. ESS is used by all employees to enroll in benefits within the first 31 days of employment. In addition to benefits enrollment, ESS is an easy way to do the following: view your paycheck prior to payday; make changes to your beneficiaries, tax deductions, and direct deposit information; and update personal information, such as mailing & email address, phone numbers, and your emergency point of contact.

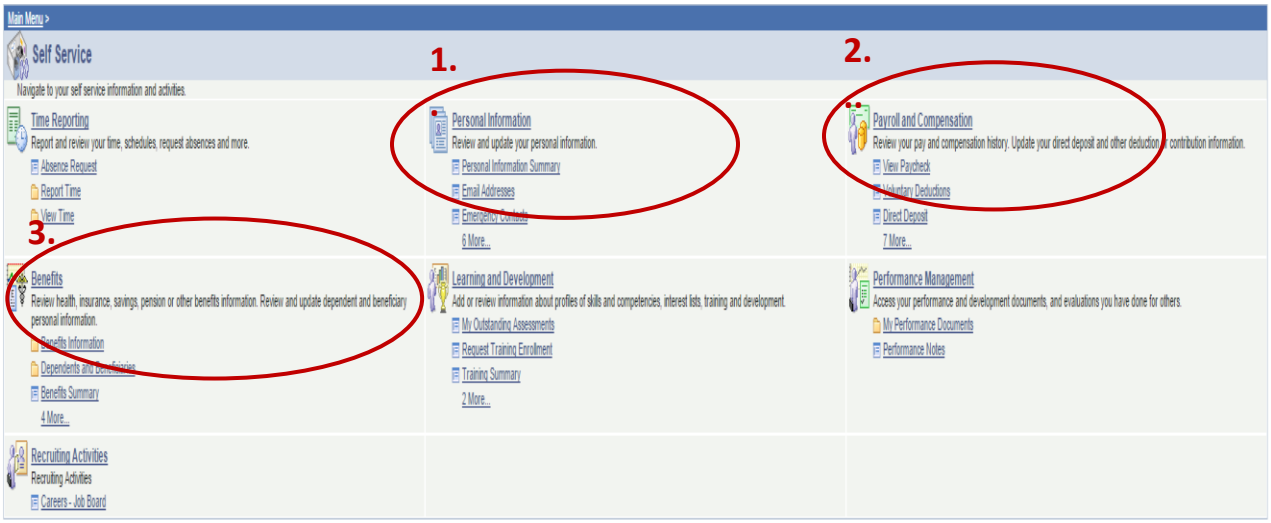
How to Log into Your PeopleSoft Employee Self Service Account



1. Log onto Employee Self Service.
   If you are using a computer on the DCPS network use **http://pshcm.dc.gov.**
   If you are using a computer from home or outside the DCPS network use **http://ess.dc.gov.**
2. We highly recommend that the first time you log onto ESS that you use a DCPS networked computer. Additionally, you will be required to change your password (minimum of six characters -- must be a mix of letters and numbers).

What You Need To Update In Your Profile

All employees must update their personal information, direct deposit information, and tax withholdings and enroll in benefits. *Note: only benefits-eligible employees will be able to access the benefits enrollment screen within the first 31 days of hire. If you are transferring positions, you are not eligible to enroll in benefits.*



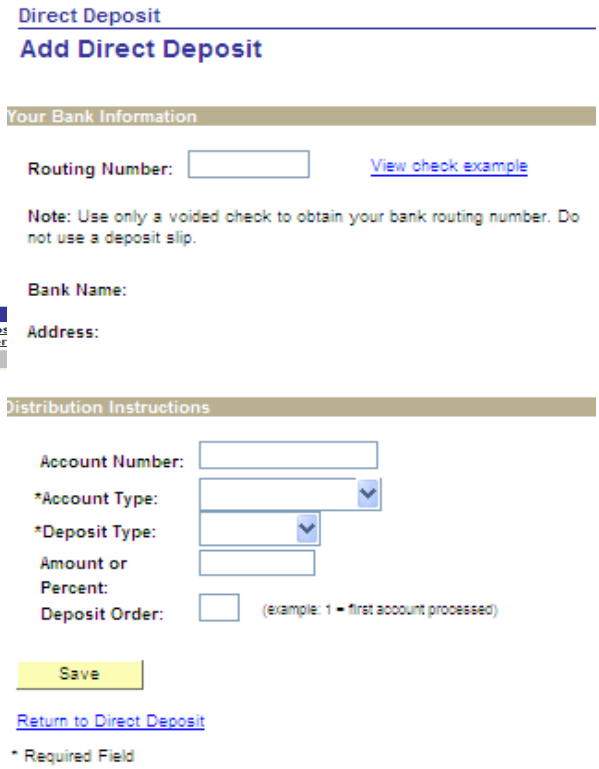
Accessing PeopleSoft Employee Self Service (continued)

What You Need To Update In Each Section

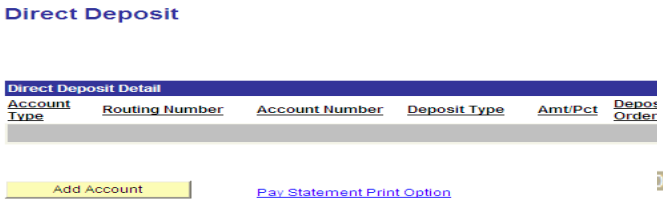
Personal Information	Payroll & Compensation	Benefits
Can only update from DC Gov't computer	***Update from any computer***	***Update from any computer***
▪ Add Contact Information ▪ Add Email Address ▪ Add Emergency Contacts ▪ Verify Personal Details	▪ Add Direct Deposit Information ▪ Add W-4 Information ▪ Add State Tax Information ▪ Select the state where you live	▪ Benefit Enrollment

Direct Deposit

You are strongly encouraged to utilize the direct deposit system to receive your paycheck. Pay is deposited to your account at 12:00am on the pay date. The maximum number of accounts that you can have in the system is four.



1. Click Add Account.

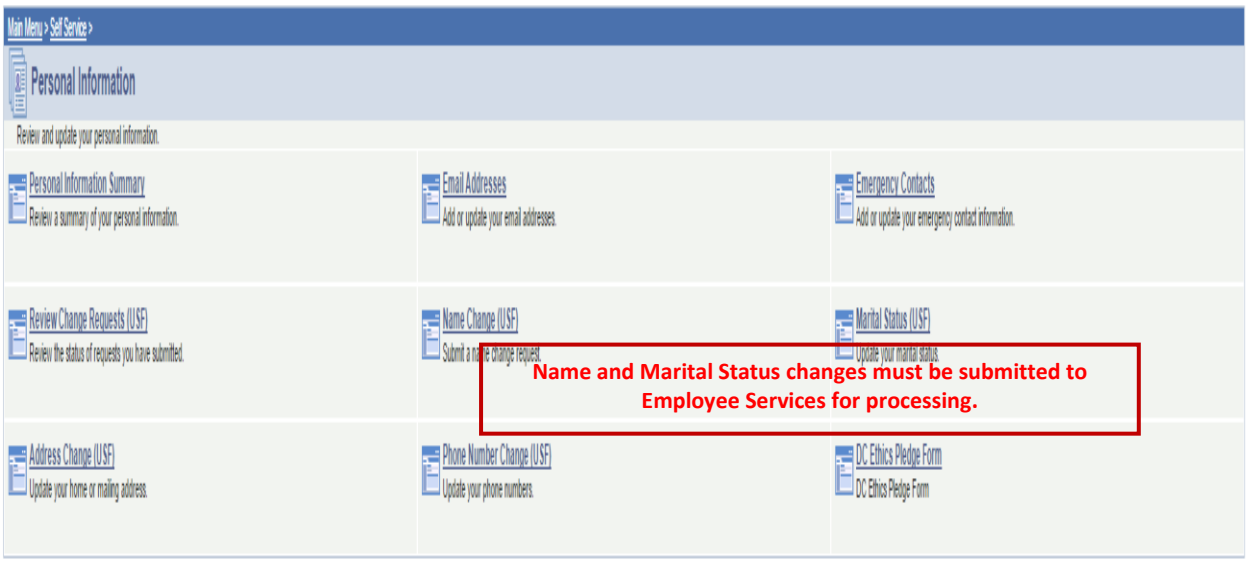


2. Type in the Routing Number of your banking institution.
3. Type in the Account Number of your banking institution and select the account type (checking or savings).
4. Select your Deposit Type.
   Amount: Select a specific amount to be deposited.
   Balance: Used when selecting more than one account. Percent: You may select any percentage amount.
5. Select your Deposit Type.
   Amount: Select a specific amount to be deposited.
   Balance: Used when selecting more than one account.
   Percent: You may select any percentage amount.
6. Select Deposit Order.
7. Click Save.

Accessing PeopleSoft Employee Self Service (continued)

Personal Information

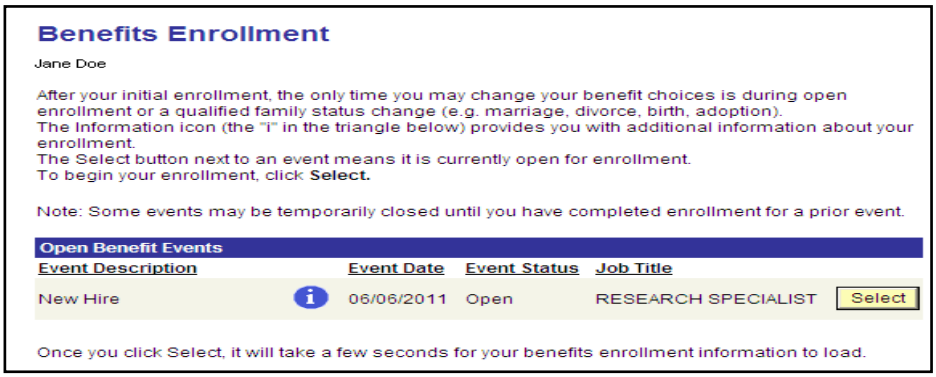
You can change all of your personal information through ESS **except Name and Marital Status.** To change this information, provide proof of the requested status change to Employee Services either in person or via fax to 202.442.5315, Attention: Data Changes. For more information, contact HR Answers at dcps.hranswers@dc.gov or via phone at 202.442.4090.



Accessing PeopleSoft Employee Self Service (continued)
Benefit Enrollment

How to Enroll in Benefits

1. Click Select to open your benefit event.



You will have only 31 days from the date of hire to enroll in benefits. If you are still within your 31 day enrollment period and are unable to access your benefits beyond this screen, send an email that includes your name and employee id number to dcps.benefits@dc.gov. Your request for assistance will be responded to within two business days.

Before making your benefit elections, carefully review your *Employee Benefits Guide* to determine the benefit(s) that you would like to enroll in. You can only access your benefits enrollment event once within your 31 day enrollment period. Selections take 48 hours to appear on your PeopleSoft benefits summary screen.

Upon completion of enrollment, you will receive a benefits confirmation summary via email. Check your dc.gov email account within 48 hours of your enrollment. If you do not receive a benefits confirmation summary within 48 hours, your enrollment was unsuccessful and you will need to contact Employee Services **immediately** via email at dcps.benefits@dc.gov. Your request for assistance will be responded to within two business days.

Accessing PeopleSoft Employee Self Service (continued)

1. Edit your Enrollment Summary. Click the *Edit* buttons to make your choices. Upon completion, you will receive a confirmation email -- **be sure to save a copy for your records.**

Employee Health Benefits and Domestic Partner Medical *(if applicable)* Healthcare coverage for eligible dependent children extends until reaching age 26.

Do Not Enroll Online. For details regarding AFLAC enrollment, visit www.aflacclients.com/dcgov/Welcome.aspx.

You are automatically enrolled in Basic Life Insurance. If you do not want the basic coverage, you must cancel through ESS.

Short Term & Long Term Disability are offered through The Standard Insurance Company. For more information, visit www.dcps.dc.gov.

All DCPS employees may participate in 403(b) Tax Shelter Annuity and Section 457 options and you can enroll at any time. **Note! Do Not Enroll Online**. For more information, refer to the Retirement pages in this guide.

Flexible Spending is based on the calendar year. This includes the Health, Dependent Care, Transit, and Parking plans. **Note! Health Flex Spending reimbursements are not approved for over-the-counter medications without a prescription.**

Enrollment Summary

Edit	**Employees Health Benefits**	Before Tax	After Tax
Current:	Aetna Quality Open Access Btax:S&F		
New:	Aetna PPO Btax:S&F	180.09	
Edit	**Domestic Partner Medical**	Before Tax	After Tax
Current:	Waive		
New:	Waive		0.00
Edit	**AFLAC - Cancer Insurance**	Before Tax	After Tax
Current:	No Coverage		
New:	Waive		0.00
Edit	**AFLAC - Hospital Confinement**	Before Tax	After Tax
Current:	No Coverage		
New:	Waive		0.00
Edit	**AFLAC - Personal Sickness**	Before Tax	After Tax
Current:	No Coverage		
New:	Waive		0.00
Edit	**AFLAC - Personal Accident**	Before Tax	After Tax
Edit	**Short-Term Disability**	Before Tax	After Tax
Current:	STD - Standard STD Plan: 66.67% of Salary		
New:	STD - Standard STD Plan: 66.67% of Salary		32.19
Edit	**Long-Term Disability**	Before Tax	After Tax
Current:	: 66.67% of Salary		
New:	LTD - Standard LTD Plan: 66.67% of Salary		18.00
Edit	**Tax Sheltered Annuity**	Before Tax	After Tax
Current:	Waive		
New:	Waive		
Edit	**Section 457**	Before Tax	After Tax
Current:	Waive		
New:	Waive		
Edit	**Flex Spending Health - U.S.**	Before Tax	
Current:	Waive		
New:	No Coverage		
Edit	**Flex Spending Dependent Care**	Before Tax	
Current:	Waive		
New:	No Coverage		
Edit	**Transit FSA**	Befo	
Current:	No Coverage		
New:	No Coverage		
Edit	**Parking FSA**	Befo	
Current:	No Coverage		
New:	No Coverage		

Do NOT Enroll in AFLAC Online!
Contact a Representative!

Do NOT Enroll in the Tax Sheltered Annuity Or Section 457 Online!
Contact a Representative!

Note!

This table summarizes estimated costs for your new benefit choices.

	Before Tax	After Tax	Total
Your Costs	180.09	50.19	230.28

These costs do not include certain choices that are based on variable earnings.

Submit — Click **Submit** to send your final choices to the Benefits Department.

I Have No Changes — Or click the **I Have No Changes** button if you are happy with your prior elections and do not want to make any changes.

Your enrollment request will not be submitted until you click *Submit.*

Then follow the instructions on the additional pages to finalize the enrollment process.

Your benefits enrollment is complete ONLY after you have received a confirmation email from PeopleSoft.

Save the email for your records!

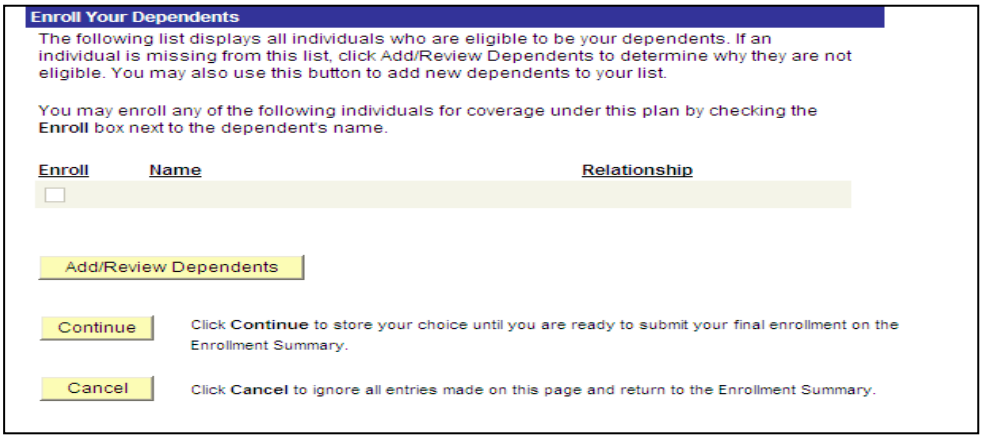
Accessing PeopleSoft Employee Self Service (continued)

Health Coverage Options

The most up-to-date premium rates are provided within the health coverage options section below. Please note that you have the option to have your health insurance premiums deducted pre-tax, which allows your premiums to be deducted from your gross pay prior to taxes being calculated. You may wish to consider this option if you want to reduce your taxable salary.

If you are enrolling a domestic partner (same-sex or common law) or a domestic partner and children, you must elect to have your benefits deducted after-tax. Therefore, your premiums will be deducted from your gross pay after taxes are calculated.

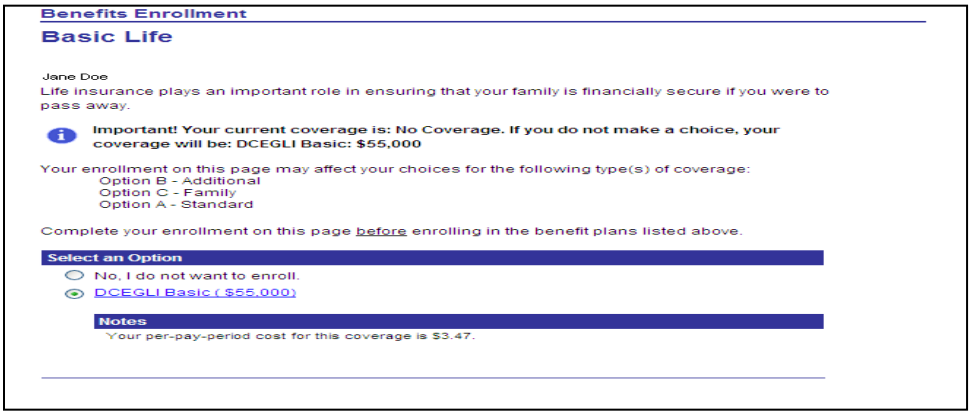
Adding Dependents to Health Insurance



To add dependents to your health insurance coverage, you must have their full name, date of birth, and social security number at the time of online enrollment. Additionally, you will need to submit documentation showing proof of relationship to Employee Services within 31 days of your enrollment. Please refer to your *Employee Benefits Guide* for more information regarding required documentation.

Electing Life Insurance

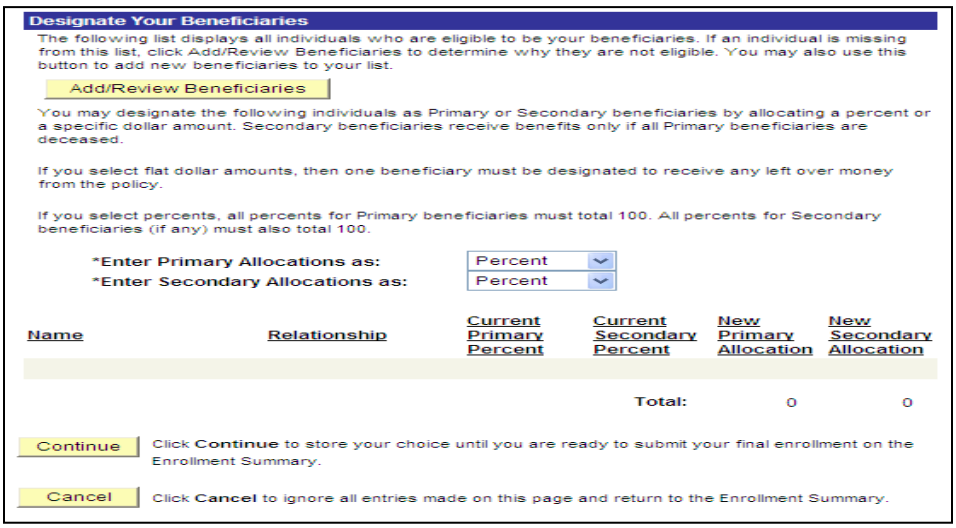
You may elect to have additional life insurance coverage beyond the basic plan during your 31 day enrollment period. Refer to your *Employee Benefits Guide* for more information regarding your life insurance options.



Accessing PeopleSoft Employee Self Service (continued)

Designating Life Insurance Beneficiaries

When selecting your life insurance plan(s), you also will need to designate beneficiaries, and you will need to provide personal contact information for each of your beneficiaries. You're able to add and make changes to your life insurance beneficiaries at any time throughout the year using ESS.



Confirming Your Benefits Elections

Once you have completed your elections, carefully read each enrollment confirmation screen. You will be required to click "Submit" twice and "Ok" once. After you complete your online benefits enrollment, a confirmation email entitled "Benefits Enrollment Summary" will be sent automatically to your dc.gov email account.

If you do not receive an email confirmation of your benefits enrollment, you have not successfully enrolled and you will not be covered for any benefit. Please log into PeopleSoft and re-enroll into the option(s) of your choice using the steps provided above.

Reviewing Your Benefits Elections

Within 48 hours following the completion of your benefits elections, you will be able to review your benefits summary in ESS. Access the Benefits section and select Benefits Summary.

Accessing PeopleSoft Employee Self Service (continued)

When reviewing your Benefits Summary, make sure that the enrollment date reflects the actual date when your coverage will begin.

If you did not add your life insurance beneficiaries during enrollment, you can update your beneficiaries through the Benefits Summary screen.

Benefits Summary

Jane Doe

To view your benefits as of another date, enter the date and click Go:

05/26/2011 Go

Type of Benefit	Plan Description	Coverage or Participation
Employees Health Benefits	United HC POS-DC After Tx	Self and Family
Domestic Partner Medical		Waived
AFLAC - Cancer Insurance		Waived
AFLAC - Hospital Confinement		Waived
AFLAC - Personal Sickness		Waived
AFLAC - Personal Accident		Waived
AFLAC - Specify Health Event		Waived
Basic Life	DCEGLI Basic	1 X Salary + $2000
Option B - Additional	Option B - 2X	Salary X 2
Option C - Family	Option C - 1X	$5000
Option A - Standard		Waived
Short-Term Disability	STD - Standard STD Plan	100% of Salary
Long-Term Disability	LTD - Standard LTD Plan	100% of Salary
Tax Sheltered Annuity		Waived
Section 457		Waived
529 College Savings Plan		Waived
Flex Spending Health - U.S.	Healthcare Acct.	$300 Pledge
Parking FSA		Waived
Retirement	DEfined Contribution 5%	0% of Earnings

Go to: Enroll in Benefits

Select the plan for which you would like to update your beneficiary information.

Benefits Enrollment Confirmation

Once you have successfully completed your Benefits Enrollment, you will receive a Benefits Enrollment Summary emailed to your dc.gov email address. See sample below:

From: pshcm@dc.gov [mailto:pshcm@dc.gov]
Sent: Tuesday, December 1, 2016 6:23 AM
To: New-Hire, Happi (DCPS)
Cc: Benefits, DCHR (DCHR)
Subject: Benefits Enrollment Summary – Happi New-Hire (00099000)

A change has been processed using your DC Government PeopleSoft Self Service account. If you did not make these online changes, please contact your HR Department or phone the help desk at 727-8700, Monday - Friday, between the hours of 8am and 6pm.

Dear Ms. New-Hire (00099000) :

The following is your Benefits Enrollment Summary:
Benefit Plan : **Employees Health Benefits**
New: Aetna HMO-DC Before Tx:Self Only
After Tax Amount is $0.00
Before Tax Amount is $65.92

Benefit Plan : **AFLAC - Cancer Insurance**
New: Waive
After Tax Amount is $0.00
Before Tax Amount is $0.00

Benefit Plan : **Basic Life**
New: DCEGLI Bas: 1 X Salary + 2000 : $41,000
After Tax Amount is $6.36
Before Tax Amount is $0.00

Benefit Plan : **Option B - Additional**
New: Waive
After Tax Amount is $0.00
Before Tax Amount is $0.00

Benefit Plan : **Option C - Family**
New: Waive
After Tax Amount is $0.00
Before Tax Amount is $0.00

Benefit Plan : **Short-Term Disability**
New: Waive
After Tax Amount is $0.00
Before Tax Amount is $0.00

Benefit Plan : **Long-Term Disability**
New: Waive
After Tax Amount is $0.00
Before Tax Amount is $0.00

Benefit Plan : **Tax Sheltered Annuity**
New: Waive
After Tax Amount is $0.00
Before Tax Amount is $0.00

Benefit Plan : **Section 457**
New: Waive
After Tax Amount is $0.00
Before Tax Amount is $0.00

Benefit Plan : **529 College Savings Plan**
New: Waive
After Tax Amount is $0.00
Before Tax Amount is $0.00

Benefit Plan : **Flex Spending Health - U.S.**
New: Healthcare Acct.: $750.00
After Tax Amount is $0.00
Before Tax Amount is $27.78

Benefit Plan : **Flex Spending Dependent Care**
New: No Coverage
After Tax Amount is $0.00
Before Tax Amount is $0.00

Benefit Plan : **Transit FSA**
New: No Coverage
After Tax Amount is $0.00

Health Benefit Plan Premium Rates
12 Month Employees (excluding AFSCME 10-Month)

DC Employees Health Benefits (for employees hired on or after 10/01/1987)

The premium rates listed below are for the 2016 Calendar Year.

Cost of Benefits for Domestic Partners and Domestic Partners + Children
Please note that if you are enrolling a domestic partner or a domestic partner and children, you will pay the *Domestic Partner Family* rate AFTER-TAX**.**

AETNA HEALTHCARE CONSUMER DRIVEN HEALTH PLAN (CDHP)

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	HM1	$ 35.38	$ 76.65
Self + 1	HM2	$ 69.54	$ 150.67
Family	HM3	$ 103.23	$ 221.50

AETNA HMO

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	AH1	$ 73.92	$ 160.16
Self + 1	AH2	$ 145.30	$ 314.82
Family	AH3	$ 213.61	$ 462.82

AETNA PPO

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	AP1	$ 81.62	$ 176.86
Self + 1	AP2	$ 160.45	$ 347.65
Family	AP3	$ 235.88	$511.08

KAISER PERMANENTE HMO

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	KP1	$ 64.94	$ 140.70
Self + 1	KP2	$ 124.03	$ 268.73
Family	KP3	$ 190.26	$ 412.24

UNITED HEALTHCARE CHOICE NATIONWIDE

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	MD1	$ 70.31	$ 152.34
Self + 1	MD2	$ 134.29	$ 290.97
Family	MD3	$ 206.01	$ 446.35

Health Benefit Plan Premium Rates (AFSCME 10-Month)

The premium rates listed below are for 10-month instructional aide employees hired on or after 10/01/1987.

AETNA HEALTHCARE CONSUMER DRIVEN HEALTH PLAN (CDHP)

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	HM1	$ 41.81	$ 91.99
Self + 1	HM2	$ 82.18	$ 180.80
Family	HM3	$ 120.82	$ 265.80

AETNA HMO

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	AH1	$ 87.36	$192.19
Self + 1	AH2	$ 171.72	$ 377.78
Family	AH3	$ 278.77	$ 555.39

AETNA PPO

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	AP1	$ 96.46	$ 212.21
Self + 1	AP2	$ 189.62	$ 417.17
Family	AP3	$ 278.77	$ 613.29

KAISER PERMANENTE HMO

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	KP1	$ 76.75	$ 168.84
Self + 1	KP2	$ 146.58	$ 322.48
Family	KP3	$ 224.85	$ 494.68

UNITED HEALTHCARE CHOICE NATIONWIDE

TYPE	ENROLLMENT CODE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	MD1	$ 83.09	$ 182.81
Self + 1	MD2	$ 158.71	$ 349.15
Family	MD3	$ 243.47	$ 535.63

DCEHB Health Provider Comparison Chart 2016

Healthcare Providers for employees hired on or after 10/1/1987

	Aetna Healthcare CDHP Preferred	Aetna Healthcare CDHP Non-Preferred	Aetna HMO	Aetna PPO Preferred	Aetna PPO Non-Preferred	Kaiser Permanente HMO	United Healthcare Choice Nationwide
Deductible (ded) Per Calendar Year	$1,300 self $2,600 family	$2,500 self $5,000 family	None	$750 self $1,500 family	$1,500 self $3,000 family	None	None
Health Savings Account (HSA)	**HSA applies only to Aetna Healthcare CDHP:** Employee Maximum Contribution to Health Savings Account $3,100 Self/ $6,250 Self +1/ $6,250 Family Unused funds roll over into the following year and are portable. Employees cannot participate in both CDHP and a Healthcare Flexible Spending Account.						
Out of Pocket Maximum Annual Copay	$3,425 self $6,850 family	$6,450 self $12,900 family	None	$1,500 self $3,000 family	$3,000 self $6,000 family	$3,500 self $9,400 family	$3,500 self $9,400 family
Primary Care Physician (PCP) Selection	Not Required		Not Required	Not Required		Required	Not Required
Referral Required for Specialist	Not Required		None	Not Required		Required	Not Required
Preventive Care Office Visit	No Charge	40% after ded	No Charge	No Charge	25% after ded	No Charge	No Charge
Primary Care Office Visits	15% after ded	40% after ded	$10 copay	$15 copay	25% after ded	$10 per visit (Waived for kids under 5)	$10 copay
Specialist Office Visit	15% after ded	40% after ded	$20 copay	$30 copay	25% after ded	$20 per visit	$20 copay
Routine Pediatric Care	Covered 100%	40% after ded	Covered 100%	Covered 100%	25% after ded	$10 per visit	$10 copay
Emergency Service:							
Urgent Care Office Visit	15% after ded	40% after ded	$20 copay	$25 copay	25% after ded	$10 per visit (PCP) /$20 per visit (Specialty)	$20 copay
Emergency Room Visit	15% After Deductible		$50 copay	$100 copay Waived if admitted	$100 copay after deductible	$50 per visit (waived if admitted)	$50 copay (waived if admitted)
Ambulance Service	15% After Deductible		No Charge	Covered 100%	25% after ded	No Charge	No Charge
Medical Equipment	85% After Deductible		50% Coinsurance	85% After Deductible		50% Coinsurance	50% Coinsurance
Mental Health: In-Patient	85% after ded	40% after ded	$100 per admission	Covered 100% after ded	25% after ded	$100 per admission	$100 per admission
Mental Health: Out-Patient	85% after ded	40% after ded	$10 copay visits	$15 copay after ded	25% after ded	$10 per visit for individual therapy $5 per visit for group therapy	$10 copay
Pharmacy (Retail) G: Generic P:Preferred N:Non Preferred	G:$10/ P:$30/ N:$60 | 20% after copay		G:$20/ P:$40/ N:$55	G:$10/P:$20/N:$40	Not Covered	G:$10/P:$15 /N:$55	Tier1:$20 / Tier2:$40 / Tier3:$55
Hospitalization	15% after ded	40% after ded	$100 per admission	Covered 100% after ded	25% after ded	$100 per admission	$100 per admission
Infertility Treatment	Cost sharing based on service type		50% of charges	Cost sharing based on service type		50% of allowable charge	50% of allowable charge
Pregnancy Office Visits	15% after ded	40% after ded	$20 initial visit, 100% covered thereafter	$30 copay Initial visit only	25% after ded	No charge--Routine pre-natal visit (after confirmation of pregnancy) and first post-natal visit	$10 copay applies to first visit only
Diagnostic Lab Work & X-Ray	15% after ded	40% after ded	Covered 100%	Covered 100% if part of office visit	25% after ded	No charge	No charge
Dental Care Discount	Dental Discount Provided		Discount Program	Dental Discount Provided		$30 for preventive dental care services	N/A
Vision Care	$100 per 24 months Covered 100% for 1 exam per 12months		$100 per 24 months $20 copay	$30 copay/ 1 visit per 24 mths $100 per 24 mths.	Not Covered	$10 per visit (PCP) /$20 per visit (Specialty)	N/A

Non-Union Based Employees Dental & Optical Premium Rates

Employees in non-union positions have the option to enroll in both dental and optical insurance plans. The District pays 100 percent of the premium costs for the HMO dental option and the optical plan, even if you choose to cover family members.

CIGNA DHMO (DENTAL)
Employees are responsible for out-of-pocket expenses incurred while enrolled in the plan.

TYPE	2016PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	$ 0	$ 0
Self + 1	$ 0	$ 0
Family	$ 0	$ 0

CIGNA PPO (DENTAL)
Employees are responsible for the premium rates listed below for the CIGNA PPO dental insurance plan as well as all out-of-pocket expenses incurred while enrolled in the plan.

TYPE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	$ 28.09	$ 60.86
Self + 1	$ 39.87	$ 86.39
Family	$ 51.71	$ 112.04

QUALITY PLAN ADMINISTRATORS (OPTICAL)
The District pays for 100 percent of the premium costs for the optical insurance plan. Employees are responsible for the out-of-pocket expenses incurred while enrolled in the plan.

TYPE	2016 PREMIUM BI-WEEKLY	2016 PREMIUM MONTHLY
Self-Only	$ 0	$ 0
Self + 1	$ 0	$ 0
Family	$ 0	$ 0

Life Insurance – Premium Rates

2016 DCEGLI LIFE INSURANCE PREMIUM RATES

Following are premium rates for the DC Life Insurance plans, which are available for all benefits-eligible employees hired on or after 10/01/1987. Actual bi-weekly rates are automatically calculated when enrolling through PeopleSoft Employee Self Service.

Basic – Annual Salary + $2,000

Basic Coverage – Biweekly Rates
$0.090 per $1,000 of coverage
$0.063 per $1,000 is employee's share
$0.027 per $1,000 is District's share

Sample Bi-Weekly Cost
Annual Salary: $39,452
40,000 + 2,000 =$42,000 x ($0.063/1000) = **$2.65**

Option A – Standard $10,000 coverage

AGE	BI-WEEKLY PREMIUM RATE
Under 35	$0.352
35 – 39	$0.440
40 – 44	$0.704
45 – 49	$1.144
50 – 54	$1.936
55 – 59	$3.960
60+	$6.160

Sample Bi-Weekly Cost
Annual Salary: $39,452 Age: 41

Round salary to nearest $1,000
Divide salary by 10,000 and multiply by age group

($40, 000/10,000) x 0.704 = **$2.82**

Option B – Additional Coverage 1x - 5x Annual Salary
Bi-weekly premium per $1,000 of coverage

AGE	BI-WEEKLY PREMIUM RATE
Under 35	$0.035
35 – 39	$0.044
40 – 44	$0.070
45 – 49	$0.114
50 – 54	$0.194
55 – 59	$0.396
60+	$0.748

Sample Bi-Weekly Cost
Annual Salary: $39,452 Age: 41
Election: 5x salary

Round salary to nearest $1,000
Divide age category rate by 1,000
Multiply number above by number of times you want to elect
Multiply by salary

(0.070/1000) x 5 x $40,000= **$14.00**

Option C – Family Coverage
Bi-weekly premium for family unit

Refer to PeopleSoft to view bi-weekly premiums for this life insurance option.

Points of Contact

Frequently Requested Phone Numbers & Email Addresses

DCPS Central Office

DCPS Office	Email/ Why Contact	Phone Number	Fax Number
Employee Services	mailto: dcps.hranswers@dc.gov	202.442.4090	202.442.5315
Payroll Office	Paycheck errors, leave errors	202.442.5300	202.442.5306
IT Help Desk	Email login issues, lost passwords	202.442.5715	

Health Benefits

Provider	Website	Member Services Contact	Group ID Number
Aetna Healthcare	www.aetna.com	800.872.3862	172614
Kaiser Permanente	www.kp.org	301.468.6000	7029
United Healthcare	www.myuhc.com	866.633.2446	712971

Dental & Optical Plans

Provider	Website	Member Services Contact	Group ID Number
Cigna Dental Health	www.cigna.com	1.800.367.1037	2466814
Quality Plan Administrators	www.qualityplanadmin.com	202.722.2744 or 1.800.900.4112	100

Life Insurance

Provider	Website	Group ID number
The Standard	www.standard.com	641332-B

Additional Benefits

Benefit Type	Administrator	Website	Phone Number
Flexible Spending Accounts: Health, Dependent, and Commuter Transit/Parking	Benefit Resource, Inc.	www.BenefitResource.com	800.473.9595
Short Term/Long Term Disability	The Standard	www.standard.com	800.426.4332
AFLAC Indemnity Plans	ALFAC	www.aflac.com	202.379.4755
Travel Assistance	Frontier MEDEX (Group #9061)	www.medexassist.com/standard/standard1.aspx	800.527.0218
Employee Assistance Program	COPE Inova	www.cope-inc.com www.inova.org/eap	800.841.7406 800.346.0110

Frequently Asked Questions

Holidays

Q. What are the paid holidays for District of Columbia Government non-union employees in Central Office positions?

A. The paid holidays for DC Government non-union employees in Central Office positions for calendar year 2016 are as follows:

- New Year's Day
- Martin Luther King, Jr. Birthday
- President's Day
- Emancipation Day
- Memorial Day
- Independence Day
- Labor Day
- Columbus Day
- Veterans Day
- Thanksgiving Day
- Christmas Day

Q. What are the paid holidays for EG-classified employees in union positions?

A. Employees in American Federation of State, County, and Municipal Employees (AFSCME) and Teamsters positions should refer to their union's Collective Bargaining Agreement with DCPS for a complete list of paid holidays.

Q. If I want to participate in a religious or cultural holiday not shown above, what type of leave would I use?

A. EG, EX, MSS, DS, CS, LS, and LX employees are required to use sick leave to participate in religious and/or cultural holidays. All other employees are required to use annual leave. The leave request must be submitted to your supervisor in advance.

Health, Dental, and Optical

Q. Does my health insurance cover all of my family members, including my parents and grandchildren?

A. No, health insurance is solely reserved for you, your spouse, and eligible dependents under the age of 26.

Q. Can I enroll my eligible dependent from another country who does not have a social security number yet?

A. Yes, you have 31 days from their date of arrival to the United States to add them to your plan. You must provide a copy of the dependent's visa.

Q. How long will it take for me to receive my health insurance card?

A. It will take approximately four to six weeks from the effective date of your online enrollment before you receive your health insurance card.

Q. If I do not see deductions for insurance options on my paycheck, should I assume that I am covered for the benefit(s)?

A. No, if you do not see deductions on your paycheck on the expected deduction begin date, there may be an issue with your enrollment and you should not use the service. Contact HR Answers immediately at 202.442.4090 or dcps.hranswers@dc.gov to confirm your enrollment coverage. If you decide to use the service, without making a payment through payroll deductions, you will be charged for the entire cost of the service.

Q. Is Dental and Optical coverage included with my health coverage?

A. Many of the health insurance plans include dental and/or optical discounts (see the above Health Insurance Comparison chart for plan specifics). However, you also automatically will be enrolled in separate Dental and Optical plans (employee coverage) through providers outside of your health insurance provider. This coverage is separate and distinct from what is provided through your health insurance plan. See the Explanation of Benefits – Dental and Optical above for more details, as well as information about how to enroll your dependents.

Q. What is the difference between in-network care and out-of-network care?

A. You should carefully weigh the pros and cons of utilizing services in-network vs. out-of-network. If you elect to use out-of-network services, this allows you to see physicians of your choice, even if they are not part of the health provider's network. However, you will be required to pay a deductible per year based on your coverage type, and co-payments for out-of-network office visits and services usually are higher. Usually there is no deductible or a significantly smaller deductible for in-network care.

Q. What is a primary care physician?

A. A primary care physician (PCP) is a physician with a concentration in Internal Medicine, Family Practice, or Pediatrics. In an HMO, all care must be coordinated through your PCP.

Q. Can I enroll in the health insurance plan at any time?

A. No, as a general rule you may enroll in the health insurance plan only during your first 31 days of employment and during the benefits Open Enrollment period. However, if you have a qualifying event, such as a status change, marriage, divorce, adoption, or birth, you may enroll within 31 days of that qualifying event.

Q. Are my dependents automatically dropped from my insurance once they become over age for coverage?

A. No, you are required to notify DCPS, in writing, when your dependents become over age. Until then, your coverage will continue at a family rate and no refunds will be issued.

Q. If my employment terminates, can I continue my health insurance coverage for my family and myself?

A. Yes, you may continue coverage under Temporary Continuation of Coverage (TCC) for you and your dependents for at least 18 months, provided you were previously covered. TCC also is known as COBRA.

Short/Long Term Disability Insurance

Q. Am I automatically enrolled in the Short & Long Term Disability Plans?

A. No, participation in the plans is optional. You must enroll when first hired or during benefits Open Enrollment.

Q. Can I cancel Short/Long Term Disability at any time during the year?

A. No, you can only cancel during benefits Open Enrollment.

Q. How do I submit a Short/Long Term Disability claim?

A. To file a claim, contact the Standard Insurance Company at 800.426.4332.

Flexible Spending Accounts

Q. How do I know if either of the Flexible Spending Accounts is right for me?

A. A flexible spending account may be right for you if you have medical expenses that are not covered by your health insurance plan or you pay for a dependent care program. You can elect up to $2,500 per year for healthcare expenses and up to $5,000 per year for dependent care. The elected amounts are deducted from your paycheck in equal installments on a pre-tax basis.

Q. What types of expenses are considered eligible for the healthcare account?

A. A wide variety of items and services may be reimbursable. Examples of items include, but are not limited to: dental, vision, hearing services, medications, co-payments, medically prescribed treatments, and smoking cessation programs. A detailed list of eligible expenses can be found online at www.BenefitResource.com.

Q. What happens to the money in my account if I do not use it by the end of the calendar year?

A. Under IRS regulations, up to $500 will roll over to the next calendar year for Healthcare Flexible Spending account only. You will forfeit any money in your Dependent Care account that is unused at the end of the calendar year; therefore, employees are encouraged to plan cautiously.

Q. Does my enrollment in FSA roll over each calendar year?

A. No, you will need to enroll in a FSA option during benefits Open Enrollment for each year that you elect to participate.

Q. Can I change my deductions for a Commuter account at any time?

A. Yes, pre-tax commuter accounts can be changed or cancelled at any time during the calendar year.

Q. Does my enrollment in a Commuter account roll over each year?

A. No, you will need to enroll in a Commuter account during benefits Open Enrollment for each year that you elect to participate.

Q. What happens to the money in my Commuter account if I do not use it by the end of the calendar year?

A. You will forfeit any money in your Commuter account that is unused at the end of the calendar year; therefore, employees are encouraged to plan cautiously.

Life Insurance

Q. Can I add or increase my life insurance coverage during the benefits Open Enrollment period?

A. No, opportunities to enroll in a life insurance option you previously declined, or to increase your life insurance amount, are strictly limited and typically are not offered during the benefits Open Enrollment period. However, you can decrease your supplemental life insurance coverage at any time.

Q. Can I change my beneficiary designations at any time or only during the benefits Open enrollment period?

A. Changes to beneficiaries can be made any time. It is recommended that you review and update your beneficiary designations in Employee Self Service following life events (e.g., birth of child, marriage, divorce, etc).

Q. Can I obtain life insurance coverage for my family members?

A. Yes, you may purchase optional life insurance to cover your spouse or children, but only during the benefits Open Enrollment period for life insurance. However, if you have a qualifying event including, but not limited to, marriage, divorce, adoption, or birth of a child, you may enroll within 31 days of that event.

Q. If I terminate employment, can I take my current life insurance coverage with me?

A. Yes, an employee can convert the group coverage policy into an individual whole life policy by completing a life insurance conversion form within 31 days of termination.

Supplemental Retirement Plans

Q. Can I enroll via PeopleSoft for a 457 Deferred Compensation Plan and/or 403(b) Tax Shelter Annuity Plan?

A. No, if you elect a 457 Deferred Compensation Plan and/or a 403(b) Tax Shelter Annuity Plan benefit through PeopleSoft, your election will not be honored. You must contact a 457 or 403(b) vendor to enroll (approved 457 & 403(b) vendor contact information on pp. 14 -17). *If you do enroll via PeopleSoft, the money will be deducted from your paycheck and held in escrow. Following the escrow waiting period, the funds will be returned to you and taxed as income.*

Q. What is the benefit of contributing to a 403(b) Plan?

A. When you contribute to a 403(b) Plan, you do not pay income tax on allowable contributions until you begin making withdrawals from the 403(b) Plan. Usually, this does not happen until you retire. In addition, as a convenience to you, allowable contributions to a 403(b) Plan are deducted from your paychecks.

Q. How long does it take to be vested in my 403(b) Plan?

A. You always are 100% vested in your 403(b) Plan contributions.

Q. Can I take loans and/or withdrawals from my 403(b) Plan?

A. Yes, you can take a tax-free loan from your 403(b) Plan. However defaulted loan amounts are taxed as ordinary income and may be subject to a 10% Federal tax penalty if under age 59½. In addition to loans, you can take hardship withdrawals from your 403(b) Plan. However, in the event of a hardship withdrawal, your payroll deductions will be stopped for a period of six months, per IRS regulations.

Q. How do I take out a loan or hardship withdrawal?

A. To take out a loan or hardship withdrawal, make the initial request with your 403(b) Plan representative, and he/she will provide you with the appropriate forms for processing. Submit your paperwork to DCPS-Employee Services for review, verification, and Plan Administrator signature via fax (202.535.2112) or email (dcps.retirement@dc.gov). Once DCPS-Employee Services has completed the form, we will email it to you and your 403(b) vendor.

Q. Who is eligible to participate in the 457 Plan?

A. All classifications of DCPS employees are eligible to participate in the 457 Plan, with the following exceptions:

- WAE
- Temporary
- Part-Time (employees who work less than 20 per week)
- Substitute Teachers

Q. How long does it take to be vested in my 457 Plan?
A. You are always 100% vested in your 457 Plan contributions.

Q. When are you eligible to participate in the 457 Plan?
A. You are eligible to participate in the 457 Plan immediately upon employment.

Q. How do I enroll in the 457 Plan?
A. Contact an ICMA-RC representative (approved 457 Vendor contact information on pp. 16-17). After speaking with your ICMA-RC representative, you may be directed to enroll online, by telephone, or in person, and any requisite paperwork will be provided to you. Once your account has been set up, complete a Salary Reduction Agreement and return it to DCPS-Employee Services. Your Salary Reduction Agreement will authorize that TSA deductions are taken from your paycheck. The entire process takes up to four pay periods for your account to be set up and your payroll deductions to begin.

Q. Can I take loans and/or withdrawals from my 457 Plan?
A. You cannot take loans from your 457 Plan. However, you can take hardship withdrawals, under certain conditions mandated by the IRS. As a general rule, a withdrawal while you are employed with DCPS is allowed only for an unforeseeable emergency that causes a severe financial hardship.