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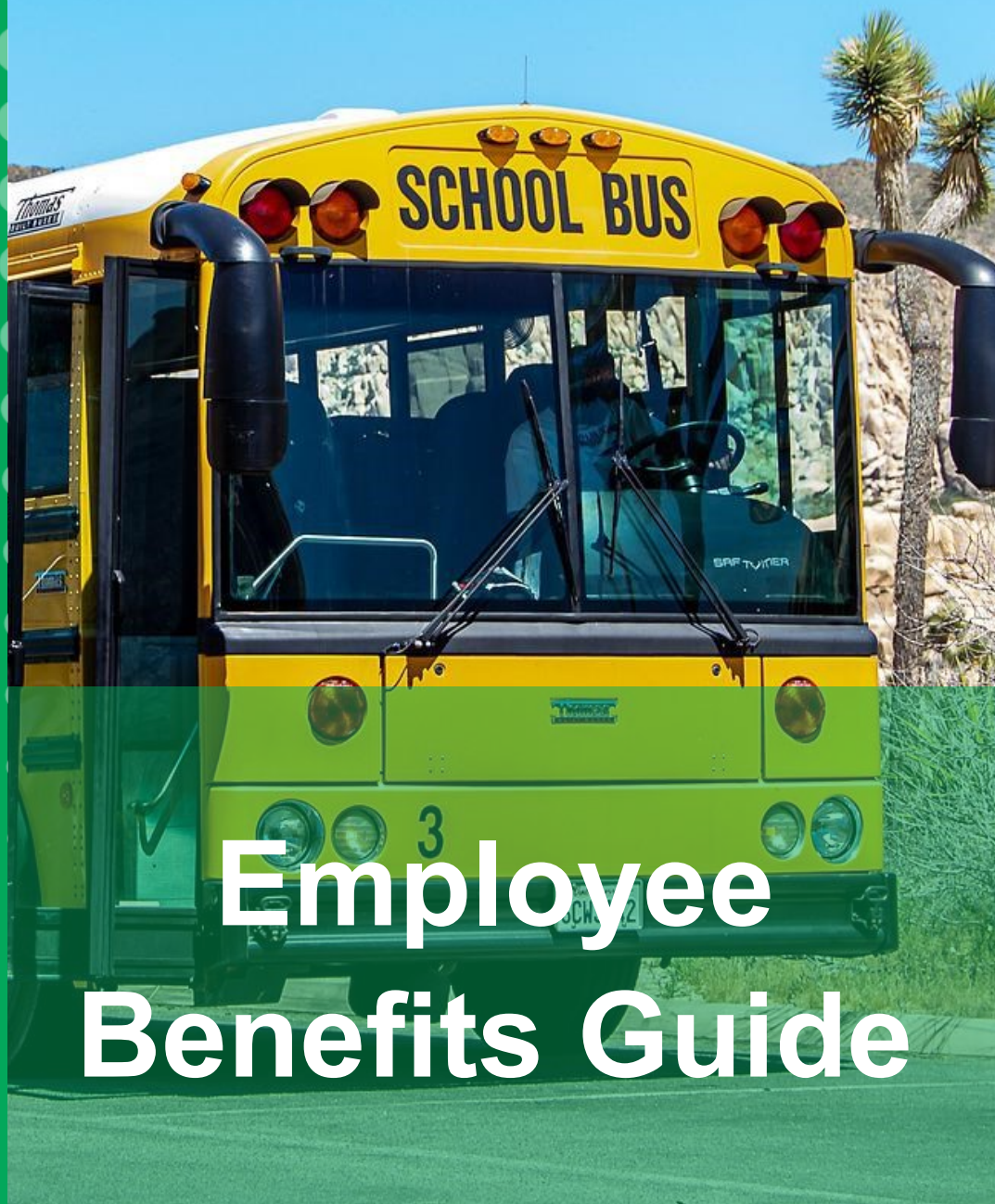
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TANQUE VERDE
UNIFIED SCHOOL DISTRICT



Employee Benefits Guide

2024 Benefits Overview

Welcome to the

2024 BENEFITS OPEN ENROLLMENT

Tanque Verde Unified School District is pleased to provide you and your family with a comprehensive benefits package. We believe our success is due to the efforts of our most valued resource, our employees. We are committed to providing high quality, market competitive benefits to our employees at an affordable cost. Shown below is a brief list of the benefits offered to TVUSD eligible employees in the 7/1/2024 – 6/30/2025 school year.

Medical Plans: Medical coverage will continue to be offered through UnitedHealthcare. TVUSD offers 3 medical plans. You will want to select the plan that best suits you and your family's healthcare needs: 2 PPO Plan options, as well as a High Deductible Health Plan (HDHP) with Health Savings Account (HSA) option. TVUSD will continue to contribute 100% of the cost of 'employee only' coverage for qualifying employees on the HDHP w/ HSA Plan and the majority of the cost of 'employee only' coverage for the PPO plans. TVUSD will continue to provide additional contributions toward dependent coverage, as well.

More thorough information on the UHC medical plans are provided in your enrollment materials. Please ensure you thoroughly review the UHC materials in your enrollment packet to make sure you have a complete understanding of their plan benefits (e.g. coverage for preventive care, ER, Urgent Care, office visit copays, prescription drug copays, etc.). All deductibles and out-of-pocket maximums are administered on a calendar year basis.

Dental Plan: TVUSD will offer two dental plans, a DHMO (copay plan) through Employer Dental Services (EDS) as the Base Plan option. The PPO plan through Principal is offered as the Buy-up Plan option. The current Principal PPO plan will be offered as the Buy-Up plan option.

Vision Plan: Voluntary vision coverage is offered through EyeMed. Employees pay the full premium for this benefit.

Life Insurance/Accidental Death and Dismemberment (AD&D): TVUSD provides Life and Accidental Death and Dismemberment coverage through Principal. This plan is 100% paid by TVUSD.

Supplemental Life/Accidental Death and Dismemberment (AD&D): TVUSD offers supplemental life insurance with AD&D. Employees will pay the full premium for this benefit.

Short Term Disability (STD): TVUSD provides Short Term Disability coverage through Principal. This plan is 100% paid by TVUSD.

Long Term Disability (LTD): LTD coverage is provided through the Arizona State Retirement System (ASRS) for employees meeting the eligibility criteria.

Employee Assistance Program (EAP): TVUSD provides an EAP program through Jorgensen Brooks. This program is paid 100% by TVUSD. All TVUSD employees and their family members are eligible to access EAP services. Information about this coverage is provided in your enrollment materials.

Pet Insurance: TVUSD offers pet insurance through United Pet Care. Employees pay the full premium for this benefit.

Retirement: Retirement benefits are offered through the ASRS to employees meeting the eligibility criteria. Both employees and TVUSD contribute to ASRS employee retirement.

Supplemental Retirement Plan: In addition to the ASRS retirement plan, TVUSD offers employees a pre-tax retirement savings plan administered by National Public Pension Fund Association (NPPFA).

2024 Benefits Overview

ELIGIBILITY

All regular employees scheduled to work a minimum of 28 hours per week and their dependents are eligible to enroll in the District's plans. Coverage is effective the first of the month following date of hire.

Eligible Dependents

- Your spouse, including legally married same-sex spouse
- Your dependents, dependents of your legally married spouse, up to age 26
- When approved, your unmarried dependent child, of any age, who is incapable of self care because of a disability and who relies on you for support

For the purpose of medical, dental and vision benefits, a dependent child is defined as the following:

- A natural child, stepchild, legally adopted child, or child placed for adoption with the employee (proof of adoption or placement for adoption may be requested); or
- A child or children of employee's legally married same-sex spouse; or
- A child for whom the employee has legal guardianship under a court order (proof of guardianship may be requested); or
- A foster child lawfully placed with the employee for whom health coverage is not provided by the State (proof of foster child placement may be requested); or
- A grandchild, if the dependent child depends on the employee for more than one-half of their support and is not a "qualifying child" of any other person. The term "qualifying child" is defined in the Internal Revenue Code (IRC) in Section 152(c).

Please contact TVUSD Human Resources (HR) with any questions (see contact information page at the end of this summary).

IMPORTANT INFORMATION REGARDING PLAN CHANGES

Each year during annual open enrollment, you have the opportunity to make new benefit elections for the coming year. All eligible employees who wish to enroll must complete and return the Benefits Enrollment and Change form for TVUSD benefit plans by the enrollment deadline date. Changes to your medical, dental and vision plans are allowed only on July 1st each year. Per IRS rules, employees cannot drop or add coverage for yourself or your dependents between 7/1/2024 and 6/30/2025, unless you have a qualifying event in family status such as - loss of benefits under another plan, marriage, divorce, legal separation, birth, adoption or placement for adoption. If you have a qualifying event and want to drop, add or make any changes to your coverage, you must request this change within 30 days of the qualifying event (e.g. within 30 days of marriage or divorce, within 30 days of date of birth) by completing a new enrollment form and submitting it to HR. It is your responsibility to notify HR of a qualifying event. Per IRS rules, if you waive or terminate coverage on 7/1/2024, you will not be able to enroll in TVUSD plan(s) until 7/1/2025, unless you have a qualifying change in family status.



REMEMBER! Open enrollment is the one time of year you can make any adjustments you'd like for the upcoming plan year.

IMPORTANT DATES

Open enrollment runs
May 1 - May 8, 2024

Pre-Tax Premiums

- TVUSD allows employees to pay for medical, dental and vision plan premiums on a pre-tax basis. This allows you to save money with every paycheck because the premiums are deducted from your paychecks before tax, which helps to reduce the overall cost of your coverage. You must notify HR, in writing, if instead you want to elect post-tax payments.

2024-2025 EMPLOYEE RATES

MEDICAL PLAN PREMIUMS

	Base Plan – HDHP			Mid-Plan – PPO			Buy-Up Plan - PPO		
	Total Annual Plan Cost	Employee Annual Cost	Employee Monthly* Cost	Total Annual Plan Cost	Employee Annual Cost	Employee Monthly* Cost	Total Annual Plan Cost	Employee Annual Cost	Employee Monthly* Cost
EE Only	\$6,416.76	\$0.00	\$0.00	\$8,123.16	\$983.16	\$81.93	\$9,260.28	\$3,644.28	\$303.69
EE + Spouse	\$13,026.00	\$6,486.00	\$540.50	\$16,489.92	\$8,629.92	\$719.16	\$18,798.36	\$12,918.36	\$1,076.53
EE + Child(ren)	\$12,063.36	\$4,563.36	\$380.28	\$15,271.44	\$6,511.44	\$542.62	\$17,409.36	\$10,869.36	\$905.78
Family	\$18,544.32	\$9,784.32	\$815.36	\$23,475.96	\$13,215.96	\$1,101.33	\$26,762.16	\$21,362.16	\$1,780.18

DENTAL PLAN PREMIUMS

	EDS – Base Plan			Principal – Buy-Up Plan		
	Total Annual Plan Cost	Employee Annual Cost	Employee Monthly * Cost	Total Annual Plan Cost	Employee Annual Cost	Employee Monthly * Cost
EE Only	\$120.84	\$0	\$0	\$408.24	\$277.44	\$23.12
EE + Spouse	\$240.48	\$109.68	\$9.14	\$813.60	\$682.80	\$56.90
EE + Child(ren)	\$292.56	\$161.76	\$13.48	\$911.52	\$780.72	\$65.06
Family	\$362.52	\$231.72	\$19.31	\$1,417.92	\$1,287.12	\$107.26

VISION PLAN PREMIUMS

	Employee Annual Cost	Employee Monthly* Cost
EE Only	\$14.88	\$1.24
EE + Spouse	\$27.60	\$2.30
EE + Child(ren)	\$29.04	\$2.42
Family	\$42.36	\$3.53

Medical Insurance

MEDICAL PLANS - CHOICE OF THREE PLAN OPTIONS

MEDICAL	UnitedHealthcare					
Description of Coverage	Base Plan HDHP w/HSA – DMHQ w/ RX		Mid Plan PPO – DMFT MOD RX01		Buy-Up Plan PPO – DMF8 MOD RX01	
	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network
Deductible (Individual /Family) <i>(Embedded Deductible)</i>	\$3,200 / \$6,400	\$10,000 / \$20,000	\$1,000 / \$2,000	\$10,000 / \$20,000	\$500 / \$1,000	\$10,000 / \$20,000
Coinsurance	20% after deductible	50% after deductible	25% after deductible	50% after deductible	20% after deductible	50% after deductible
Out of Pocket Maximum	\$5,700 / \$11,400	\$20,000 / \$40,000	\$6,000 / \$12,000	\$20,000 / \$40,000	\$4,500 / \$9,000	\$20,000 / \$40,000
Medical Services	In Network					
Primary Care Physician (PCP)	20% after deductible		\$30		\$20	
Specialist	20% after deductible		\$60		\$40	
Preventive Care <i>Wellness / Well Child Care / Immunizations</i>	100% covered		100% covered		100% covered	
Chiropractic Care	20% after deductible		\$60		\$40	
Physical Therapy	20% after deductible		\$30		\$20	
Inpatient / Outpatient	20% after deductible		25% after deductible		20% after deductible	
Hospital Admission	20% after deductible		25% after deductible		20% after deductible	
Lab / X-Ray <i>(performed in a freestanding laboratory)</i>	20% after deductible		25% after deductible		\$25	
Lab / X-Ray / Complex Diagnostic Testing	20% after deductible		25% after deductible		\$500	
Virtual Visits	20% after deductible		\$0		\$0	
Urgent Care	20% after deductible		\$50		\$50	
Emergency Room	20% after deductible		25% after deductible		\$500	
Pharmacy Benefits **PREVENTIVE DRUGS 100% COVERED**	In Network: Integrated Medical/Rx deductible		In Network		In Network	
Mandatory Generic	\$10		\$10		\$10	
Preferred Brand <i>(when NO Generic available)</i>	\$35		\$35		\$35	
Non-Preferred Brand <i>(when NO Generic available)</i>	\$70		\$70		\$70	
Specialty Drug	\$150 / \$500 after deductible		See Benefit Summary		See Benefit Summary	
Mail Order <i>(90-day supply)</i> :	2.5 copays after deductible		2.5 copays		2.5 copays	

MEDICAL PLAN

It is important that you see providers in the UHC network to obtain the best benefits coverage. If you see a doctor outside of the UHC network, you will pay a much higher out of pocket cost. Please go to www.myuhc.com or call the member services number located on the back of your ID card to look up providers in the UHC network, review claims and benefits, prescription drug medications and other plan information.

As a reminder your pharmacy out of pocket costs count toward the total medical out-of-pocket maximum, lowering your total annual out of pocket exposure.

A brief summary of the coverage for each plan is shown on the following page, however more detailed information on coverage provided is in your UHC enrollment packet. **Note: Deductibles and maximum out-of-pocket costs are administered on a calendar year basis (January 1 – December 31).**

Virtual Visits with a doctor 24/7 — whenever, wherever.

With a Virtual Visit, you can talk — by phone or video—to a doctor who can diagnose common medical conditions and even prescribe medications, if needed.

Virtual Visits may make it easier than ever to get treated by a doctor.

Whether using **myuhc.com**® or the UnitedHealthcare® app, Virtual Visits let you video chat with a doctor 24/7 — without setting up additional accounts or apps. But, if you'd rather just speak with a doctor, you can simply do a Virtual Visit over the phone.

An estimated 25% of ER visits could be treated with a Virtual Visit. Use a Virtual Visit for these common conditions:

- Allergies
- Bronchitis
- Eye infections
- Flu
- Headaches
- Migraines
- Rashes
- Sore throats
- Stomachaches
- And more

To get started: Sign in at myuhc.com/virtualvisits. | Download the UnitedHealthcare app. | Call 1-855- 615-8335

HIGH DEDUCTIBLE HEALTH PLAN (HDHP) & HEALTH SAVINGS ACCOUNT (HSA)

Understanding How it Works

Please investigate and fully evaluate the advantages of consumer driven health care available in the qualified HDHP with the option of an HSA. It is important you fully understand this plan before electing it.

This medical plan choice:

1. Allows you to pay less in monthly premiums (your payroll deductions from your paycheck for medical insurance will be less)
2. Allows you the ability to save for future health care needs; and
3. Allows you greater ability, and also greater responsibility in managing your health care dollars.

High Deductible Health Plan (HDHP)

- Lowest employee premiums
- Premium savings can be put towards HSA
- In-Network & Out-of-Network coverage
- Annual deductible
- Protection from major costs
- 100% preventive care coverage
- No upfront copays at doctor's office

Individual Health savings Bank account (HSA)

- Savings account
- Owned by you
- Used for eligible medical and pharmacy expenses, including deductibles
- Triple tax advantage
- No "use it or lose it"
- Like a 401(k) plan for medical expenses
- Debit card linked to HSA - No reimbursement forms



REMEMBER! By law, preventive care services such as routine well care visits, immunizations, labs, preventive screenings such as mammograms and colonoscopies (based on age and gender) and flu shots are covered at 100% under the HDHP so there is no need to use HSA funds for these services.

HDHP & HSA

You can enroll in an HSA if:

- You are covered under a HDHP.
- You are not covered by any other health plan that is not a HDHP.
- You have not received VA benefits within the past 3 months.
- You have not received care at an Indian Health Services facility within the past 3 months (with the exception of Dental, Vision and Preventive Care)
- You are not claimed as a dependent on someone else's tax return.

How do I access my HSA funds?

- When you enroll in an HDHP, you will need to set up your HSA account through Optum Bank. If you are currently enrolled in the HDHP, you will need to transfer your account to Optum Bank. Details about making the transfer is included in your enrollment materials. If you elect pretax payroll elections your HSA tax-free contributions are deposited into your HSA Account.
- You will then be issued an Optum Bank debit card which you can use to pay uncovered medical, dental and vision expenses from your HSA.
- You can also use HSA checks for your account.
- You can also pay for an uncovered expense with personal funds and reimburse yourself from your HSA.



www.optumbank.com

Optum Bank available 24/7 excluding major U.S. holidays
1.866.234.8913

- On-line access to all account information.
- Competitive interest rates and investment options.
- FDIC insured.
- Access all claims payment history.

HSA Contribution Limits

INDIVIDUAL

\$4,150

FAMILY

\$8,300

Catch Up age 55+ - \$1,000 for employee and \$1,000 for spouse

Qualified HSA Expenses

- Medical, dental and vision plan deductibles, copays and coinsurance not covered under any plan (see IRS Publication 502 at www.irs.gov for a complete list).
- For you and your spouse, if legally married, and dependents, even if they are not enrolled in TVUSD's plans.
- Per IRS rules, you cannot take a tax-free distribution from an HSA to pay for domestic partner expenses.

Non-Qualified HSA Expenses

- Any funds used for purposes other than IRS qualifying medical, dental and vision expenses are taxable as income and subject to a 20% tax penalty.
- The penalty does not apply if you are age 65 or older, or for those who become disabled or enroll in Medicare.

Per IRS rules, you cannot enroll in an HSA if you are enrolled in a regular Health Care FSA. You can enroll in an HSA if you're enrolled in a "Limited Purpose" FSA for uncovered dental and vision expenses only.

DENTAL PLANS – CHOICE OF TWO PLAN OPTIONS

TVUSD offers two dental plans to all eligible employees - Employers Dental Services (EDS) is an HMO plan and a Buy-Up PPO plan with Principal. TVUSD will contribute 100% of the dental plan premium for “employee only” coverage or \$10.07 based on the EDS plan and this can be used toward either plan. Employees will pay the additional cost for dependent coverage and for premium differential to enroll in the Principal PPO buy-up plan.

If you choose to enroll in the EDS plan, it is important you see a provider in the EDS network to obtain coverage under the plan. Services provided by non EDS providers will not be covered. More thorough information on the EDS dental plan is provided in your enrollment materials.

If you enroll in the Principal dental plan, you must see a dentist in the Principal dental plan network to obtain the best coverage.

To find in network dental care providers for either plan, please refer to the “Contact Information” page at the end of this booklet.

A brief summary of the coverage for these plans is shown below:

DENTAL	Base Plan – EDS DHMO	Buy-Up Plan – Principal PPO	
	In Network Only	In Network	Out of Network
Maximum Annual Benefit	None	\$1,500	
Calendar Year Deductible	None	\$50 Individual /\$150 Family Maximum	
Waived for Preventive?	N/A	Yes	Yes
Preventive - Type I	See EDS 100N Schedule of Benefits	100%	90%
Basic - Type II		80%	70%
Major - Type III (Crowns, bridges, etc.)		50%	50%
Endo/Perio: Preventive, Basic or Major?		Basic	Basic
Implants - If covered, under Basic or Major?		Not covered	
Orthodontia		50%	50%
Dependent Age Limit	25% discount for children & adults	Children up to age 19	
Deductible		None	
Maximum		\$1,000	
Additional Discounts	Eye care and eyewear discount savings pass	Laser vision, hearing aids, etc.	
Waiting Periods	None	None	

VISION PLAN

Employees can elect to purchase vision coverage for yourself, your spouse or child(ren) with the Delta Vision plan. The voluntary vision plan is administered through EyeMed. To find providers in the EyeMed network, go to www.eyemedvisioncare.com or call their customer service number at 866-800-5457. Provided below is a brief summary of coverage under the Delta Vision plan. Please see the EyeMed network in your enrollment materials for further details on the coverage provided under this plan.

Coverage Description	In-Network Coverage
Vision Exam Frequency	Covered once every 12 months
Vision Exam Copay	\$10 copay in network
Regular Lenses Frequency	Unlimited
Standard Plastic Lenses: Single Vision Bifocal Trifocal	\$50 copay \$70 copay \$105 copay
Frames Frequency	Unlimited
Frames	35% off retail price
Contact Lenses Frequency	Unlimited
Contact Lenses	15% off retail price, 0% discount on disposables

LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT

TVUSD provides employer paid life insurance/AD&D coverage to all employees working 28 or more hours per week. This coverage is intended to provide you with peace of mind and your family and/or beneficiaries with financial security, in the event of your death. Coverage is through Principal. The coverage is one times your annual base salary (100% of your annual base salary) rounded up to the nearest \$1,000.

If your death is due to accidental causes (as defined by the plan), your beneficiary(s) will receive an additional one times your annual base salary. AD&D also pays a portion of the benefit in the event of certain accidental injuries resulting in dismemberment, but not death.

If your beneficiary changes due to a life event (e.g. marriage or divorce), please be sure to complete a new Benefit Enrollment & Change form (available in Human Resources) with beneficiary information and return it to HR.

SUPPLEMENTAL LIFE & ACCIDENTAL DEATH & DISMEMBERMENT

You may purchase additional Life and AD&D insurance for yourself and eligible dependents. Premiums are paid through payroll deduction. Evidence of Insurability is required for approval if you did not enroll when you were first eligible. You must enroll as an employee to cover your spouse and/or your children.

As a newly eligible employee, it is important to know that you are guaranteed coverage up to \$150K (under age 70) with no medical underwriting approval needed. In addition, if you enroll in the minimum amount of \$10K when you are first eligible, you can increase the amount by 2 increments at each future annual enrollment, up to the guarantee issue amount.

You will require medical underwriting and can be declined coverage in the future if you do not enroll when first eligible.

Supplemental Life with AD&D	
AGE	MONTHLY RATES per \$1,000 Employee /Spouse
0-29	\$0.073
30-34	\$0.081
35-39	\$0.118
40-44	\$0.168
45-49	\$0.248
50-54	\$0.392
55-59	\$0.619
60-64	\$0.935
65-69	\$1.578
70 & over	\$2.826
Child	\$2.00 per family/\$10,000 \$4.00 per family/\$20,000
AD&D (included in rates above)	\$.019

Supplemental Life with AD&D		
Life Benefit	Employee	Spouse
Life Benefit	Minimum amount: \$10,000 Maximum amount: \$500,000 In increments of \$10,000	Minimum amount: \$5,000 Maximum amount: Up to \$100,000 In increments of \$5,000
Accidental Death and Disability	Included automatically, equal to base amount.	Included automatically, equal to base amount of coverage.
Benefit Age Reduction	35% at age 65 Additional 15% at 70	35% at age 65 Additional 15% at 70
Proof of Good Health (Required for life insurance amounts greater than)	Under age 70: \$150,000 Age 70 and over: \$10,000	Under age 70: \$30,000 Age 70 and over: \$10,000
Child Benefit 14 days or older		\$10,000 \$20,000

SHORT TERM DISABILITY (STD) INSURANCE

TVUSD provides employer paid STD insurance coverage to all employees working 28 or more hours per week through Principal. STD insurance provides you with income protection in the event you have a non-occupational illness or injury, including maternity. Coverage will begin after 30 days of absence from work. The coverage provides:

- 66-2/3% of monthly earnings
- Maximum benefit length of up to 22 weeks
- Maximum weekly benefit of \$1,050

When the premium is paid by the employer as it is by TVUSD, STD benefits received during a disability are considered taxable income by the IRS.

LONG TERM DISABILITY (LTD) INSURANCE

LTD insurance is provided through the Arizona State Retirement System (ASRS). Employees pay premiums through mandatory payroll contributions. All employees who work 20 or more hours per week and 20 or more weeks per year must contribute to the ASRS LTD plan. This plan provides benefits after 180 days of continuous disability and benefits payable are approximately 60% of the employee's regular wage. Enrollment for this plan should be completed when you are hired or when you become eligible for coverage.



Additional Benefits

EMPLOYEE ASSISTANCE PROGRAM (EAP)

TVUSD offers an employer paid Employee Assistance Program (EAP) through Jorgensen Brooks. Their contact information is listed in the "Contact Information" page at the end of this booklet.

EAP counselors are available 24 hours a day, 7 days a week to help you and your immediate family members with personal issues to help you be your best at work and at home. There is no cost to you or your immediate family members and all calls are confidential. Licensed counselors can help you with all of the following issues:

- Marital & relationship issues
- Separation & divorce, parenting
- Managing depression and anxiety
- Substance abuse
- Child & elder care resources
- Parenting support
- Legal issues
- Financial issues
- Depression
- Loss & grief
- Stress management

In office counseling sessions: Through Jorgensen Brooks, counselors will assess the issue on the phone and, if they think necessary, refer you or your immediate family member to 6 face-to-face clinical sessions per person, per problem, per year.

EMPLOYEE WELLNESS PROGRAM

Through UHC's Rewards program, employees and their spouses will have the opportunity to participate in various virtual activities to improve overall health and wellness and can earn up to \$300 for doing so.

UNITED PET CARE

TVUSD is pleased to offer employees the opportunity to save on veterinary care for your pets. One low price includes preventative, accident and sick care. Employees receive savings off every veterinary visit. United Pet Care features no claim forms, no deductibles, no waiting period, no age exclusions and no exclusions due to pre-existing or breed specific conditions. To enroll in United Pet Care, visit their website at www.unitedpetcare.com/TVUSD.

RETIREMENT PLANS

Arizona State Retirement System (ASRS)

ASRS provides a fixed monthly benefit upon retirement. All TVUSD employees working 20 or more hours per week and 20 or more weeks per year must contribute to the ASRS Retirement Plan. Both the employer and employee contribute to each employee's retirement during your years of employment. Please visit the ASRS website at www.asrs.gov for information or see the contact information at the end of this summary to contact them directly.

Supplemental Retirement Plan

Financial wellness is just as important as physical wellness. To help achieve financial wellness, TVUSD offers all employees the opportunity to save money for retirement. The district offers both a 403(b) and a 457(b), allowing employees to defer money on a pre-tax and after tax (Roth) basis. Enrollment can be done online at my.trsrretire.com or participants can contact our representatives, Debby Karton at 847-922-1191 or Joel Babbitt at 773-617-9690.

Vacation, Holiday and Sick Leave

TIME OFF PLANS

Unless an administrator's written contract specifies otherwise, employees who work twenty-four (24) hours a week or more on a twelve (12) month basis are entitled to vacation as follows. Vacation time will be prorated at their full time equivalence (FTE).

Up to 3 years of employment	Maximum: Ten (10) days per fiscal year
Start of year 4 through end off 5th year of employment	Maximum: Fifteen (15) days per fiscal year
6 years or more of employment	Maximum: Twenty (20) days per fiscal year

Employees will be eligible for vacation after six (6) months of continuous employment with the District. No more than a maximum of forty (40) days of vacation may be accrued at the end of any fiscal year. Vacation days accrued must be used and reduced to forty (40) days prior to July 1 to avoid forfeiting vacation days accrued. See TVUSD Policy GCD (professional staff) or TVUSD Policy GDD (support staff) or contact Human Resources for clarification.

HOLIDAY SCHEDULE

There are twelve (12) authorized paid holidays for support staff who work 24 hours or more per week during the school year, and fourteen (14) for those who work a twelve-month year. Paid time off is prorated to correspond with the number of hours worked. During the 2024-2025 fiscal year, the holidays are:

- July 4, 2024 (Thursday) - Independence Day
- September 2, 2024 (Monday) - Labor Day
- November 11, 2024 (Monday) - Veterans Day
- November 27, November 28, and November 29, 2024 (Wednesday, Thursday and Friday) - Thanksgiving
- December 24 and December 25, 2024 (Tuesday and Wednesday) - Winter Break
- December 31, 2024 and January 1, 2025 (Tuesday and Wednesday) - New Year's
- January 20, 2025 (Monday) - Martin Luther King Jr. Day
- February 21, 2025 (Friday) - Rodeo Break
- March 14, 2025 (Friday) - Spring Break
- May 26, 2025 (Monday) - Memorial Day
- June 16, 2025 (Monday) - Juneteenth

PERSONAL LEAVE

All employees who work 20 hours per week or more qualify for four (4) prorated personal days every school year. Unless there is an emergency, requests are to be submitted one week in advance. Reserved for "personal business," personal days are not to extend a holiday or to be used as a form of vacation. For employees who continue working into a new school year, up to one (1) unused personal leave day will be rolled over to the next year's total. Any unused personal leave days above one (1) will be added to the accrued sick leave at the close of each fiscal year. See TVUSD Policy GCCB for clarification.

SICK LEAVE BANK

All employees who work 20 hours per week or more may participate in this voluntary program. Donate one (1) day of accrued sick leave in the current fiscal year (non-refundable if not used) and then become eligible to participate in the program if the need arises and you meet all qualifying criteria. You may contact Human Resources for more information.

SICK LEAVE ACCRUAL

Ten-month employees accrue .900 days monthly with an annual maximum of nine (9) days. Eleven-month employees accrue .910 days monthly with an annual maximum of ten (10) days. Twelve-month employees accrue .917 days monthly with an annual maximum of eleven (11) days. All part-time employees working less than 20 hours per week and substitute employees are entitled to a minimum of 1 hour of paid sick leave per 30 hours worked.

Continuation of Benefits (COBRA)

Upon termination of employment for reasons other than gross misconduct, continuation of an employee's medical, dental, and vision coverage - and/or any insured dependent's coverage - is available for up to 18 months under COBRA (Consolidated Omnibus Budget Reconciliation Act), with the employee assuming all premium costs. If the employee is disabled, COBRA eligibility is increased to 29 months. Before an employee's benefits coverage ends, HR department provides the terminating employee with personalized information on COBRA continuation procedures. Continuation of medical, dental and vision coverage is also available for "qualified beneficiaries" up to 36 months when one of the following qualifying events occurs:

- Death of a covered employee;
- Divorce or legal separation;
- Employee becomes eligible for Medicare;
- Dependent child reaches maximum age allowed under group plan

"Qualified beneficiaries" are those individuals who were covered under the group plan on the day before the qualifying life event. This could include the employee's spouse and dependent child(ren). **Please note: It is the responsibility of you, the employee, or qualified beneficiary to notify the HR department of qualifying events, such as divorce, legal separation or a dependent child reaching the maximum allowable age to remain on your benefit plans.**

Health Insurance Portability and Accountability Act (HIPAA)

In December of 2000, the Department of Health and Human Services (DHHS) issued federal regulations pertaining to HIPAA, which regulates the use and disclosure of protected health information. These regulations are better known as the HIPAA Privacy Rules, which went into effect on April 14, 2003. To obtain a copy of TVUSD's Notice of Privacy Practices, please contact HR at 520-749-5751, x4107.

Family and Medical Leave Act (FMLA)

The FMLA is a federal law which provides eligible employees with up to 12 work weeks of unpaid, job protected leave in a 12 month period defined by the employer and requires group health benefits be maintained during the leave. The FMLA was amended to include military family leave entitlements (qualifying exigency leave up to 12 weeks and military caregiver leave up to 26 weeks). The FMLA covers all public and private employers with 50 or more employees within a 75 mile radius. The FMLA guarantees that employees can return to the same or equivalent position, with equivalent pay, benefits, and other terms and conditions of employment, following FMLA leave.

The FMLA allows eligible employees of covered employers to take up to 12 weeks of unpaid leave in a 12 month period defined by the employer for:

- the birth, adoption, or foster care of a child.
- the care of a spouse, parent or child with a serious health condition; or employee's own serious health condition.
- any qualifying exigency arising from fact that a spouse, parent or child (who is a member of the National Guard or Reserves) is on or has been called to active duty.
- allowing eligible employees who are family members of covered service members to take up to 26 weeks of unpaid leave in a single 12-month period to care for a covered service member with a serious illness or injury incurred in the line of duty.

The FMLA covers employees who:

- Have worked for the employer for 12 months (does not have to be consecutive);
- Have been employed for 1,250 hours during the 12 months prior to the start of the FMLA leave; and
- Are employed at a location where at least 50 or more employees are working or where the number of workers within 75 miles is 50 or more.

It defines a serious health condition as an illness, injury, impairment or physical or mental condition that involves one of the following:

- Inpatient care;
- Absence of more than 3 calendar days plus treatment;
- Pregnancy or parental care;
- Chronic conditions requiring treatments;
- Permanent long-term conditions requiring treatment;
- Multiple treatments of non-chronic conditions.

Contact Information

TVUSD Support Services

Keith Wick, PHR, Human Resources Manager
520-749-5751, ext. 4107
kwick@tanq.org

Kelly Yslas, aPHR, Human Resources Generalist
520-749-5751, ext. 4303
kyslas@tanq.org

Medical Plans

UnitedHealthcare (UHC)
Customer Service: 1-866-873-3903
www.myuhc.com

Employee Assistance Program (EAP)

Jorgensen Brooks
Direct, toll-free: 888-520-5400
www.jorgensenbrooks.com

Dental Plans

Employers Dental Services (EDS)
Customer Service: 520-696-4343
www.mydentalplan.net

Principal

Customer Service: 800-247-4695
www.principal.com

Vision Plan

Delta Vision administered by EyeMed
Customer Service: 866-800-5457
www.EyeMedvisioncare.com

Employee Claims Advocate (CBIZ)

Angela Schlosser
Direct contact for all claims issues and plans
520-321-7503
aschlosser@cbiz.com

Health Savings Account

Optum Bank
Customer Service: 866-234-8913
www.optumbank.com

Company Paid Life Insurance/AD&D & Short Term Disability

Principal
Customer Service: 800-245-1522
www.principal.com

Pet Insurance

United Pet Care
Customer Service: 602-266-5303 or 877-872-8800
www.unitedpetcare.com/tvusd

Tanque Verde USD Supplemental Retirement Plan

Joel J. Babbitt, CLU
773-617-9690
joelb@nppfabenefits.org

Debby Karton
847-922-1191
dkarton@nppfabenefits.org

Retirement Plan & Long-Term Disability

Arizona State Retirement System (ASRS)
Tucson Office: 520-239-3100
www.azasrs.gov

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TANQUE VERDE
UNIFIED SCHOOL DISTRICT

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