



**Summary of Benefits
Non – Cafeteria
Superintendency – 2019**

(Information as of 01/01/2019)

Welcome to Saint Paul Public Schools. You will be eligible for single and/or dependent insurance coverage effective the first day of employment. If you wish to enroll in any of the insurance plans offered through your bargaining unit, you need to enroll online within 30 days of your hire date. Otherwise you will need to wait until the next open enrollment period or upon a qualified status change. Your share of premiums for single and dependent coverage is listed below:

HealthPartners			
Co-Pay Open Access	Monthly Premium	District Pay	Employee Pay
Single	\$751.00	\$751.00	\$0.00
Single + 1	\$1,690.00	\$1,075.00	\$615.00
Family	\$1,960.00	\$1,075.00	\$885.00
Co-Pay Smart Care ACO			
Single	\$676.00	\$676.00	\$0.00
Single + 1	\$1,521.00	\$1,075.00	\$446.00
Family	\$1,764.00	\$1,075.00	\$689.00

Flexible Spending Account allowed for Co-Pay Plans

Empower HRA NTL One Open Access	Monthly Premium	District Pay	Employee Pay
Single	\$648.00	\$648.00	\$0.00
Single + 1	\$1,423.00	\$1,075.00	\$348.00
Family	\$1,661.00	\$1,075.00	\$586.00
Empower HRA NTL One Smart Care ACO			
Single	\$588.00	\$588.00	\$0.00
Single + 1	\$1,287.00	\$1,075.00	\$212.00
Family	\$1,503.00	\$1,075.00	\$428.00

Flexible Spending Account allowed for HRA Plans

Empower HSA NTL One Open Access	Monthly Premium	District Pay	Employee Pay
Single	\$534.00	\$534.00	\$0.00
Single + 1	\$1,199.00	\$1,075.00	\$124.00
Family	\$1,391.00	\$1,075.00	\$316.00
Empower HSA NTL One Smart Care ACO			
Single	\$481.00	\$481.00	\$0.00
Single + 1	\$1,080.00	\$1,075.00	\$5.00
Family	\$1,252.00	\$1,075.00	\$177.00

HSA Spending Account allowed for HSA Plans

Dental	Monthly Premium	District Pay	Employee Pay
Single	\$32.78	\$32.78	\$0.00
Family	\$106.55	\$106.55	\$0.00

Vision	Monthly Premium	District Pay	Employee Pay
Single	\$7.60	\$0.00	\$7.60
Single + 1	\$14.43	\$0.00	\$14.43
Family	\$21.20	\$0.00	\$21.20

District Provided Life Insurance:

A \$10,000 basic term life policy along with an additional term life insurance policy at 3x your salary, is provided at no cost, effective first day of employment.

Optional Insurance Benefits: (For detailed information please see the brochures in your new hire packet or on-line at http://hr.spps.org/Empl_Benefits.)

- Optional Life for employee
- Optional Life for dependent(s)
- Accidental Death for employee
- Optional Life for spouse
- Accidental Death for spouse
- AFLAC

Health Savings Account: Empower HSA National One Medical Plan with HSA Account

The Empower HSA Plan combines Health Partners medical coverage with a self-funded, pre-tax savings/investment account you can use to pay for your qualifying out-of-pocket health care expenses. If you enroll in the HSA medical plan and you wish to have a Health Savings Account, you must fill out an account authorization form and the annual election form to contribute to your account. Equal pre-tax deductions will be taken from each paycheck and deposited into your HSA account. This is an annual election made for the calendar year January to December each year.

Flexible Spending Account: Medical and/or Dependent Care

Is a self-funded, pre-tax savings account you can use to pay for your qualifying out-of-pocket health care and day care expenses. This is an annual election made for the calendar year January to December each year.

District Provided Long Term Disability Insurance:

The District will pay the monthly premiums for the long-term disability coverage for members of the Superintendentcy.

District Provided Short-Term Disability:

The District will pay the monthly premiums for short-term disability coverage for members of the Superintendentcy.

Holidays: Nine paid holidays per year:

- | | | |
|------------------------|----------------|----------------------------|
| New Years Day | Memorial Day | Thanksgiving Day |
| Martin Luther King Day | Fourth of July | Day After Thanksgiving Day |
| Presidents' Day | Labor Day | Christmas Day |

Sick Leave:

Sick leave shall be granted at the rate of 15 days per year with unused leave accumulating without limit.

Vacation:

Paid vacation shall accrue each year on January 1st at 31 days per year. When you are hired, you will be credited with a pro-rated share of vacation days based on the remaining time left in the calendar year.

Tax Sheltered Annuities:

- Voluntary Retirement Accounts:
Public employees are eligible on an optional basis to invest towards retirement (other than public pension) with pre-tax dollars withheld from your paycheck. Two types of accounts are allowed: Minnesota Deferred Compensation Plan (457) and Tax Sheltered Annuity Plan, 403(b). To participate, contact one of the three approved companies: MN Deferred Comp, 651-296-2761; Fidelity, 1-800-343-0860 (Plan # 51224); or VOYA Financial, 651-665-4300.
- District Match Program:
All members are eligible to participate in a School District matched Minnesota Deferred Compensation Plan or approved 403 (b) plans. The School District will match up to \$2,500.00 per year during active service. Employees hired after January 1, 1996 are eligible to receive up to \$3,000.00. Employees hired after January 1, 2014 are eligible to receive up to \$3,200.00 per year of matching contributions to either a 403 (b) plan or 457 plan, so long as the employee remains in continuous active status.

Employee must set up an account with a TSA vendor and submit an application to begin deductions. **Enrollment is not automatic.**

Pension Plan:

You will be a member of the Saint Paul Teachers' Retirement Fund Association if your job requires a license. You will contribute 7.5% of your salary, and the district will contribute an amount equal to 11.175% of your salary.

You will be a member of Public Employees Retirement Association (PERA) if your job does not require a license. You will contribute 6.5% of your salary and the District will contribute an amount equal to 7.5% of your salary.

The intent of this summary is to high light many of the benefits for Superintendentcy at Saint Paul Public Schools. This is not intended to be an exhaustive list of all benefits. The negotiated contract shall govern all benefits provisions.

Paycheck Benefit Deduction Overview Non Cafeteria Plan Employees

- Benefits are deducted twice a month (excluding July, August and September for 10 month employees).
- 10 Month Employees – Summer Premiums (insurance Summer Deposits are collected over the 12 paychecks from January to June in addition to the regular benefit deductions).
- Summer premiums are collected on all 10 month employees.

Saint Paul Public Schools #625
360 Colborne Street
St. Paul, MN 55102

Pay Group: L10-Lag 10 Month
Pay Begin Date: 02/02/2019
Pay End Date: 02/15/2019

Business Unit: STDBU
Advice #: 000000008582931
Advice Date: 03/01/2019

Employee Name Address	Employee ID:	SPE579XXX-Special Ed - American Indian	TAX DATA:	Federal	MN State
	Department:		Marital Status:	Single	Single, or Married but le
	Location:	American Indian Magnet	Allowances:	0	0
	Job Title:	TA2938 - Inclusion EBD/LD/DCD	Add. Percent:		
	Grade:	003 Step: 05	Add. Amount:		
	Pay Rate:	00 Hourly			

HOURS AND EARNINGS						TAXES		
Description	Rate	Current Hours	Current Earnings	YTD Hours	YTD Earnings	Description	Current	YTD
Bus Premium Pay			32.50		126.75	Fed Withholding	55.56	206.53
Longevity Pay			10.50		47.55	Fed MED/EE	12.56	52.48
Regular Pay	20.350000	60.00	1,221.00	237.00	4,822.95	Fed OASD/EE	53.71	224.40
Bus Duty	20.350000	10.00	203.50	38.00	773.30	MN Withholding	32.46	126.67
Holiday Bus			0.00	1.00	20.35			
Holiday Pay			0.00	6.00	122.10			
Non-Duty Break			0.00	32.00	651.20			
Sick Leave Pay			0.00	3.00	61.05			
TOTAL:		70.00	1,467.50	317.00	6,625.25	TOTAL:	154.29	610.08

Benefits paid by the District

BEFORE-TAX DEDUCTIONS			AFTER-TAX DEDUCTIONS			EMPLOYER PAID BENEFITS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
PERA Coordinated Pension Plan	95.39	430.66	Short-Term Disability	7.48	37.40	PERA Coordinated Pension Plan	110.06	496.90
Medical Insurance	367.50	1,837.50	Union Dues For Teachers Assn	25.50	127.50	Medical Insurance	612.50	3,062.50
Dental Insurance	33.28	166.40	Insurance Summer Deposits	3.74	18.70	Dental Insurance	20.00	100.00
VOYA EE Deduction	50.00	250.00				Basic Life Premium	0.28	1.40
Insurance Summer Deposits	200.39	1,001.95				Additional Life	2.52	12.60
							50.00	250.00
							317.65	1,588.25
TOTAL:	746.56	3,686.51	TOTAL:	36.72	183.60	*TAXABLE		

Benefits paid by employee are either before or after tax

Insurance Summer Deposits (Premiums) are collected January to June to pay for July, August and September Benefits

	TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current	1,467.50	720.94	154.29	783.28	529.93
YTD	6,625.25	2,938.74	610.08	3,870.11	2,145.06

YEAR-TO-DATE	VACATION	SICK LEAVE	COMP LEAVE	NDB LEAVE	NET PAY DISTRIBUTION	
					Account Type	Deposit Amount
Start Balance	0.0	5.00	0.0	0.0		
+ Earned	0.0	15.58	0.0	0.0	Advice #000000008582931	529.93
+ Bought	0.0	0.0	0.0	0.0	Checking	
- Taken	0.0	0.0	0.0	0.0		
- Sold	0.0	0.0	0.0	0.0		
+ Adjustments	0.0	0.0	0.0	0.0		
End Balance	0.0	20.58	0.0	0.0	TOTAL:	529.93

MESSAGE:

How do I calculate my costs on my paycheck?

1. Add your **before** and **after** tax benefit deductions together

\$367.50 Medical Insurance
 + \$33.28 Dental Insurance
 + 0.00 Vision Insurance (not shown above)
 + \$0.00 Optional Life – Employee (not shown above)
 + \$0.00 Optional Life – Spouse (not shown above)
 + \$0.00 AD/D – Optional (not shown above)
 + \$0.00 AD/D – Spouse (not shown above)
 + \$0.00 Optional Life - Children (not shown above)
 + \$7.48 Short Term Disability

= **\$408.26 Total of before and after tax deductions paid by Employee**

Rates shown on the example paycheck are an *example only*.

Refer to your Benefit Summary for specific rates based on your Bargaining Unit (union)