

FAQ for Benefits

Health

1. When can I make changes to my health insurance?

Employees may make changes during open enrollment, April 1 to May 15 without having a qualifying event. The changes are not effective till July 1.

2. What are the qualifying events that will allow me to make changes in my insurance coverage?

The following list of qualifying events must have documentation to support. For a list of documents required see page 31 of the Summary Plan Description found on PEIA website.

Divorce, Marriage, Birth/Adoption of Child, Death of spouse or dependent
Open enrollment of spouse or dependent Significant change in health coverage
Beginning or End of spouse's or dependent's employment Unpaid leave of absence

3. How do I get a replacement ID card for PEIA?

To request an ID Card for the Preferred Provider (PPB) Plan, contact UMR at 1-888-440-7342 (toll-free) or log on to your account at umr.com.

4. Do I always have to provide a copy of the marriage certificate for my spouse and birth certificates for my children?

Yes, anytime you add coverage for your spouse or children, PEIA requires the marriage certificate and birth certificates. When submitting documents to PEIA, unless otherwise specified, PEIA requires a "true and correct" copy of the document(s). Partial and/or incomplete submissions are not acceptable.

"Pictures" and/or photographs of legal documents are not acceptable. "True and Correct" copies would be considered copied and/or scanned to PDF formats

5. What is the Comprehensive Care Partnership Program?

PEIA offers a healthcare program that allows you to receive primary care services while paying less. This program, called the Comprehensive Care Partnership (CCP) program, is designed to promote quality of care, preventive services, and appropriate use of health services to identify health problems early and maintain control of chronic conditions. This benefit option is available to PEIA PPB Plan A, B, and D insureds.

Members who enroll in the CCP Program will have reduced or no copayments, deductibles or coinsurance for specified services at their CCP provider. CCP providers are expected to provide primary care services, and coordination of care, and with some CCP locations also provide specialty care services, pharmacy benefits, and/or laboratory services.

NOTE: If you want to continue using other primary care providers and/or specialists for much of your health care, the CCP may not be for you.

6. Is COVID testing and immunizations free now that the pandemic is over? Are at-home test kits still free?

COVID testing is now subject to your deductible and coinsurance. The vaccine will still be covered at 100% if administered in accordance with the CDC guidelines. The at-home test kits are no longer free due to being over the counter.

7. Is there a surcharge if my spouse can get health insurance coverage through their employer and I want to continue to cover them?

With the recent passage of Senate Bill 268, PEIA is required to charge a monthly spousal surcharge if your spouse is eligible for employer-sponsored coverage through his/her employer, but has chosen PEIA coverage instead. Plan A = \$149, Plan B = \$139, Plan C = \$141, and Plan D = \$147

If your spouse is eligible for coverage as an employee of a PEIA-participating agency, does not work, has Medicare, Medicaid, or TRICARE/Champus OR is retired, the spousal coverage surcharge is not applicable.

8. Is there a discount for being tobacco-free?

All health and optional life insurance premiums are based on the tobacco-use status of insureds. Tobacco-free insureds receive the preferred monthly premium rate. Insureds must have been tobacco-free for 6 months prior to the beginning of the Plan Year to qualify for the discount for the entire plan year. The discount is \$25.00 for employees or \$50.00 for families.

9. What should I do when I become pregnant?

Contact UMR during the first trimester of your pregnancy or as soon as your pregnancy is confirmed to enroll in UMR's Maternity CARE program.

You will need to contact UMR anytime you are admitted to the hospital during your pregnancy and within 2 business days of your admission for delivery, even if you are discharged in less than 2 days. If your attending provider requests a deposit for maternity care before delivery, PEIA PPB Plans A, B & D will make an advance payment of up to \$500. This will be deducted from the global fee paid after delivery. To receive this benefit, please contact UMR and request a Maternity Pre-payment form.

10. What Wellness Programs does PEIA offer?

Face-to-Face Diabetes Program - For more information or an application, check the PEIA website, **peia.wv.gov** under Wellness Tools, or call PEIA Customer Service at **1-888-680-7342**.

Weight Management Program - To enroll, you must complete the online application, which includes some medical information. For more information, or to enroll in the program, go to **peia.wv.gov** under Wellness Tools.

Tobacco Cessation - To access the benefits, simply visit your primary care provider. PEIA will cover an initial and follow-up visit to your physician or nurse practitioner. PEIA covers both prescription and non-prescription tobacco cessation medications if they are dispensed with a prescription.

DENTAL AND VISION

1. Who is our dental and vision company?

Delta Dental and Delta Vision is the name of the company. For vision, Delta has joined with EyeMed to provide in-network providers.

2. How do I use my Dental Coverage?

There is no dental insurance card. You tell your dentist's office you are an employee of Kanawha County Schools and have Delta Dental. You just need to give them your Social Security Number. Do not use your PEIA/UMR Health Insurance card as they will say you are not covered.

3. How do I use my Vision Coverage?

To find a provider go to www.gvsmd.com and create an account or log in to find who accepts KCS policy. There is no card you just tell the provider you have eyeMed through KCS and give them your ssn.

4. Where can I find more information about our dental coverage?

The website is www1.deltadentalins.com. You will create an account to be able to view plan information, view dental claims, and track dental activity.

FLEXIBLE SPENDING ACCOUNT

1. What is a Flexible Spending Account?

Flexible spending accounts (FSAs) allows you to reduce your tax burden and increase your take-home pay while you set aside money for eligible medical expenses. The Mountaineer Flexible Benefits Plan is sponsored by the West Virginia Public Employees Insurance Agency (PEIA) as a vehicle to provide additional benefits to eligible Kanawha County Schools employees and a tax savings to the participating KCS employees.

2. How does the Flexible Spending Account Work?

Here's how flexible spending account work:

Estimate your eligible expenses for the upcoming year (health care and/or dependent care).

Determine how much you want to have set aside from your pay to go into your FSA to pay for your eligible expenses for the coming year (this amount is called your "election").

The money you elect for your FSA will be automatically deducted from your paycheck on a pre-tax basis and credited to your FSA.

The amount you elect will be available to you on the first day of the new fiscal year.

You will make bimonthly contributions from your paycheck from August 25th to June 10th to cover this election.

When you have an eligible expense, you can submit a claim to be reimbursed from your FSA.

3. What happens to the money in my account at the end of the FY if I don't use it all?

The IRS has a "use or lose" rule for FSAs. This rule states that you'll lose any unused money still in your account on September 15th.

4. What are eligible Dependent Care Expenses?

Eligible dependent care expenses include in-home childcare, payments to licensed daycare facilities, before or after-school programs, and elder care. You may be reimbursed for dependent care expenses incurred for your qualifying child (up to age 13), spouse and/or relative. You can request reimbursement from your Dependent Care FSA as often as you like. However, your approved expense will not be reimbursed until the last date of service for which you are requesting reimbursement has passed.

5. What is the maximum contribution I can make towards my flexible spending account?

Due to this changing every year, you will be able to find the current FY's amount in the FBMC Guide located on the PEIA website under the Partners Tab and choose Mountaineer Flexible Benefits.

6. Do I have to provide documentation for every charge on my flex card?

You do not have to submit documentation for prescription's, charges under \$150.00 and dental claims

Contact information for all benefits

PEIA: www.peia.wv.gov 304-348-7850.

Health Plan: www.healthplan.org 800-624-6961

Mountaineer Flexible Benefits – www.myfbmc.com 844-559-8248
Delta Dental – 800-932-0783 PO Box 2105 Mechanicsburg, PA 17055
EyeMed – 866-265-47626 www.gvsmd.com

PEIA LIFE

1. Do I get a free life insurance policy?

All employees of KCS get a \$10,000 whole life policy through MetLife. Enrollment is not automatic; you must go to the PEIA site under Manage my Benefits to enroll in the policy.

2. How much life insurance can I get without a health questioner during my initial enrollment period?

You can get \$100,000.00 during your initial enrollment period which is the month of your hire and the following two months.

3. How do I get additional Term Life or Dependent Insurance through PEIA?

You may apply for Optional Life and Dependent Life through PEIA anytime as there is no open enrollment. You will have to complete an evidence of insurability. The evidence of insurability will come to your home address or email from MetLife.

DISABILITY

1. What disability benefits do I have?

We offer both a ST and LT disability plan through Mutual of Omaha. Our ST will start on the 15th calendar day of your injury or illness after exhaustion of all sick leave. You will receive \$200.00 a week not to exceed your Basic Weekly Earnings. You may receive this for 11 weeks. Our LT will start 90 calendar days after your injury or illness or exhaustion of sick leave whichever is longer. You will receive 66 2/3% of your monthly salary up to a maximum of \$2,500.00.

2. How do I enroll in the ST and LT disability plan?

There is nothing you need to do to enroll. All regular FT or PT employees receive the ST and LT disability plan.

3. Is there additional ST and LT disability policies that I may purchase on my own?

Yes, we offer a voluntary short-term disability policy that is also through Mutual of Omaha. You can find more information about this in the Voluntary Benefits Sections of this FAQ.

403(b)

1. Does the employer contribute any amount?

No, this is a voluntary plan in which all contributions are funded from the employee's paycheck there are no employer contributions.

2. What is the website for the 403(b)

www.tsacg.com

3. How do I set up a 403(B)?

There is a list of providers on the KCS website under 403(B). After you have chosen the company, call them and let them know you are an employee of KCS and want to set up a 403(B) account. The representative will help you set up your account and give you the paperwork to give to HR for the payroll deduction.

4. What is the maximum that I am allowed to contribute each year?

Due to this changing every year, you will need to check the website yearly for the maximum contribution.

5. Do I need to let the payroll department know that I have set up a 403(b) for payroll deductions?

No, you will need to complete and return to Human Resources the Salary Reduction Agreement found on the website if your broker doesn't do this for you.

Smart 529 College Savings Plan

1. What is a SMART529 account and how do I create one?

SMART529 is WV's 529 savings program for education beyond high school. For more information and to obtain an application visit www.smart529.com.

RETIREMENT PLAN

1. Do I have to participate?

Yes, all regular FT employees who have not previously retired from TRS must participate in the plan. You will contribute from your paycheck 6% and the employer puts in 7.5% of your salary. Your retirement benefit is not based on the stock market but your years of service and average salary.

2. When can I retire?

In order to qualify for regular retirement benefits, a member of TRS hired **before July 1, 2015** may:

- Retire with full benefits at age 60 with 5 or more years of service
- Retire with full benefits at age 55 with 30 or more years of service
- Retire with full benefits at any age with 35 or more years of service

In order to qualify for regular retirement benefits, a member of TRS hired **after July 1, 2015** may:

- Retire with full benefits at age 62 with 10 or more years of service
- Retire with reduced benefits at age 60 with 10 or more years of service
- Retire with reduced benefits at age 57 with 20 or more years of service
- Retire with reduced benefits at age 55 with 30 or more years of service.

If in TDC which is based on the stock market
You can retire at age 55 with 12 years of service

3. Can I use my sick days to buy insurance?

If you were a participant in PEIA before July 1, 1988 you have the following options:

- 2 days of accrued leave = 100% of the premium for one month of single coverage
- 3 days of accrued leave = 100% of the premium for one month of family coverage

If you were a participant in PEIA between July 1, 1988 and June 30, 2001 you have the following options:

- 2 days of accrued leave = 50% of the premium for one month of single coverage
- 3 days of accrued leave = 50% of the premium for one month of family coverage

If you were a participant after July 1, 2001, but before July 1, 2015, you may not use your accrued leave to purchase health insurance only additional years of service. Those who were hired after July 1, 2015, can no longer use their sick days for years of service.

4. Can I get a loan from my retirement account?

If you are a plan member before July 1, 2005, you may take a loan of up to 50% of your contributions, not to exceed \$8,000.00.

5. How is my retirement benefit computed?

Average Salary (5 highest in the last 15 years of employment) multiplied by years of service, multiply this amount by 2% and then divide by 12 months.

WORKERS COMPENSATION

1. If I am injured on the job what do I need to do?

As soon as you become injured you are to notify your supervisor and ask them to complete an injury report.

2. If I have to seek medical care, do I have to pay for it?

You will not be responsible for your work-related injury. You will need to contact the benefit's office to obtain your claim number and carrier information to present to the medical providers. If you are unable to contact the benefit's office you can refer the medical office to the benefit's office for the necessary information.

3. What happens if the medical provider states I am not able to work or I have been given work restrictions?

If you are not able to work due to the medical provider taking you off work you need to contact your supervisor and let them know and also the benefit's office to obtain an Election of Options form to determine who you want to be paid.

If the medical provider states, you can work but with restrictions you need to notify your supervisor and also bring a copy of the restrictions to the benefit's office so we can get you a shadow to perform the job functions you are not able to.

VOLUNTARY BENEFITS

1. Are there other benefits that I may elect to enroll in on a voluntary basis but have deducted from my paycheck?

KCS has partnered with the following companies to provide voluntary insurance policies:

AFLAC – Accident, Cancer, Disability, Hospital and Life - Andrea Williamson – 304-741-5992

Colonial Life – Accident, Critical Illness, Dental, Cancer, Hospital and Life – Jonathan Matuszkiewicz – 304-437-2279

Mutual of Omaha – Accident, Critical Illness, and Voluntary Short Term Disability – Mike Baker – 304-546-3019

New York Life – Whole Life Insurance – Anthony Church - 540-968-2653

Washington National – Accident, Cancer, Critical Illness, Heart and Stroke, Hospital and Life - Todd Cox – 540-420-6162

Important: For more information on any of the above benefits please visit the employee benefits website by going to the KCS Intranet and log into the KCS portal, from there under Important Announcements click on the KCS Employee Benefit Website. You may also contact the benefits office at 304-348-6699 or email mbstarcher@mail.kana.k12.wv.us.