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**Our Benefits Mission Statement**

The purpose of the Division of Employee Engagement is to provide a variety of benefits offerings that are competitive with today’s employment market.

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**BALTIMORE CITY PUBLIC SCHOOLS NOTICE OF NON-DISCRIMINATION**

_Baltimore City Public Schools does not discriminate in any aspect of employment based on race, color, ancestry or national origin, religion, sex, sexual orientation, gender identity, gender expression, marital status, disability, veteran status, genetic information, or age. For inquiries regarding the non-discrimination policies, please contact the Equal Opportunity Manager/Title IX Coordinator at:_

**Equal Employment Opportunity and Title IX Compliance**

200 East North Avenue, Room 208
Baltimore, MD 21202
(p) (410) 396-2955
Employee Benefits Program

Welcome to the Baltimore City Public Schools (City Schools)! As a newly hired employee, you have a lot of information to absorb – about your job, school-wide policies, and more. This booklet will help you become familiar with your employee benefits program. City Schools provides you with a broad employee benefits program that includes health, wellness, and financial benefits coverage. Some benefits are fully paid for by City Schools; for other benefits, you and City Schools share the cost of coverage. We feel that we offer our employees one of the richest benefits packages compared to other school districts in our region. As a new employee, you have 30 days from your date of hire to elect your benefits choices for the calendar year. Don’t miss your deadline!

What You’ll Need to Do:

• Read through this booklet first – it gives you a good overview of your City Schools employee benefits program. • Visit the City Schools website at www.baltimorecityschools.org to learn more about the benefits available to you. Our Benefits Guide, medical plan comparison charts, vendor booklets, rate sheets, the Paid Time Off (PTO) schedule, forms, and more are all available online. Also on our website, you can learn about the Consolidated Omnibus Budget Reconciliation Act (COBRA). COBRA is a federal law that allows employees and their families the opportunity to temporarily extend their health coverage in certain instances at group rates.
• Once you have made your benefits selections, print the Benefits Election Form from the website.
• Return your completed forms to the Division of Employee Engagement (along with any required documentation to add qualified dependents) within 30 days of your hire date.

Division of Employee Engagement
200 E. North Avenue, Room 110
Baltimore, Maryland 21202
Phone: 410-396-8885
Email: Human Capital@bcps.k12.md.us
Web: www.baltimorecityschools.org

Helpful Hints for Your Benefits Enrollment

You have 30 days from your date of employment to enroll for benefits. If you have any questions, please email us at Human Capital@bcps.k12.md.us. We are here to help you elect the benefits that work best for you. To enroll for benefits, please complete and return the following:

• Benefit Selection form. *
• Copies of birth/marriage certificates (or other required documents) when adding dependents.
• If applicable, please make your retirement elections. Please see pages 11 through 13 for more information.

For instructions on how to designate your beneficiary(ies) for your Life Insurance coverage online, see page 8.

*In addition to your other benefits, please use this form to enroll in Long-Term Disability
Medical Plans
You may choose from three City Schools medical plans, each offering preventive care, well baby, immunizations, annual physicals, inpatient and outpatient coverage, and more. City Schools will deduct your premium contributions for the plan and coverage level you choose on a bi-weekly basis.

The 2021 plan choices are:
- CareFirst BlueCross BlueShield Preferred Provider Network (PPN)
- CareFirst Blue Choice Point of Service Plan (POS)
- Kaiser Permanente Select Health Maintenance Organization (HMO)

To learn more, you can view the medical plan comparison chart at http://www.baltimorecityschools.org/benefits. Once there, select 2021 Benefits Information, then 2021 Benefit Comparison Chart.

CareFirst BlueCross BlueShield PPN
- The CareFirst BlueCross BlueShield PPN Plan lets you choose your own doctor or specialist from the Preferred Provider Network throughout the United States. You do not need to choose a Primary Care Physician (PCP). However, you will save money when you use preferred providers.
- Referrals are not required for specialty care.
- You pay a co-pay for certain services; for example, $10 for an office visit and $20 to see a specialist. You pay a $100 co-pay for an emergency room visit (waived if you are admitted to the hospital).
- The PPN Plan lets you choose whether to receive care in-network or out-of-network each time you need care. Generally, covered services are paid at 100% of the allowed benefit when received in-network, and at 80% of the allowed benefit when received out-of-network.

CareFirst BlueCross BlueShield POS
- You choose a Primary Care Physician (PCP) for yourself and your eligible family members from a broad network of physicians throughout the region in Maryland, Washington, DC, and Virginia.
- Referrals are not required for specialty care.
- You pay a co-pay for certain services; for example, $10 for an office visit and $20 to see a specialist. You pay a $100 co-pay for an emergency room visit (waived if you are admitted to the hospital).
- The POS Plan lets you choose whether to receive care in-network or out-of-network each time you need care. Services are paid at a 90% co-insurance when received in-network, and at 70% of the allowed benefit cost when received out-of-network. (Co-insurance applies to hospital visits, hospital procedures, outpatient
services, labs, x-rays, tests, medical equipment and supplies, etc., covered at 90%. You will be responsible for the 10% co-insurance for these services. There is an out of pocket maximum of $1000 for individual coverage and $2000 for family coverage. Once these out of pocket maximums are reached, you will not have additional out of pocket expenses. Outlined in the CareFirst brochure and the comparison chart online.

**Kaiser Permanente HMO**

- You choose a Primary Care Physician (PCP) to coordinate your care. You can select a PCP at one of Kaiser’s many medical centers, or from their Select Network of approximately 12,000 physicians in private practice throughout Maryland, Washington, DC, and Virginia.
- You pay a co-pay for certain services; for example, $10 for an office visit and $20 to see a specialist. Emergency room visits require a $100 co-pay, which is waived if you are admitted to the hospital.
- You must coordinate care through your Kaiser Permanente PCP and covered services are paid in full when received in-network.
- You must obtain a referral to visit a specialist.
- There are no benefits for care received out-of-network. However, you are covered for urgent and emergency care anywhere in the world. If you do receive care outside of the Mid-Atlantic area, you will need to submit your bill to Kaiser’s claims department for reimbursement or payment.

**Prescription Drug Plan**

You may also choose to enroll in the Express Scripts Prescription Drug Plan. Under this plan, you pay a co-pay each time you fill a prescription:

- For a 30-day retail supply: $10 co-pay for generic drugs/$15 co-pay for brand name/$30 for non-preferred.
- Mail order (90-day supply) is also available.

**Dental Plans**

You may choose between two dental plans:

- Basic Dental: CareFirst DHMO Plan (The Dental Network)
- CareFirst Preferred Dental PPO (Dental Buy-Up)
Basic Dental
The Basic Dental plan is a dental HMO administered by The Dental Network. You and each covered dependent must designate a participating general dentist to receive benefits under this plan. He or she will provide your dental care, or refer you to an in-network specialist as needed. The Basic Dental Plan pays a scheduled amount for many types of dental care services. City Schools pays the full premium for the Basic Dental Plan.

Preferred Dental PPO
If you would like to have more choice, you may want to consider the Preferred Dental PPO. This plan allows you to choose from more than 2,600 dentists in the Maryland area or anywhere in the United States. You must first pay an annual deductible of $100 per person ($150 per family) before the plan pays benefits. The Dental PPO pays a percentage of the cost of most dental care services. You and City Schools share the cost of the Preferred Dental Plan.

To learn more, you can view the dental plan comparison charts at http://www.baltimorecityschools.org/Page/29379. Once there, select 2021 Benefits Information, then click on the 2021 dental brochure links.

Vision Plans
You may choose between two vision plans:
• The Vision Plan
• The Vision Buy-Up Plan

Both plans are administered by National Vision Administrators (NVA). The Vision Plan is fully paid for by City Schools and covers eye exams, glasses, and medically necessary contact lenses once every two years.

The Vision Buy-Up Plan pays a higher amount of coverage and benefits are payable each year. You and City Schools share the cost of this coverage.

Coverage Levels and Dependent Eligibility
When you enroll for a medical, dental, prescription drug, or vision plan, you will be asked to also choose one of four coverage levels:
• Yourself only
• Yourself and your spouse
• Yourself and your children
• Family coverage
When you enroll your dependents, you must include date of birth and social security numbers. Provide documentation as follows:

<table>
<thead>
<tr>
<th>Covered Dependent:</th>
<th>Required Documentation:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse</td>
<td>Marriage certificate, proof of continued cohabitation</td>
</tr>
<tr>
<td>Dependent child(ren)</td>
<td>Birth certificate</td>
</tr>
<tr>
<td>Stepchild(ren)</td>
<td>Marriage certificate, birth certificate</td>
</tr>
<tr>
<td>Adopted child(ren)</td>
<td>Birth certificate, official court documents</td>
</tr>
<tr>
<td>Disabled dependent(s)</td>
<td>City Schools <em>Disability Qualification Questionnaire</em> * and birth certificate (child must be covered under the plan prior to age 19)</td>
</tr>
</tbody>
</table>

*You may print these forms from our website at http://www.baltimorecityschools.org/Page/29379. Once there, select Benefits Forms and then the appropriate link for the form that you need.

**When You May Enroll**

<table>
<thead>
<tr>
<th>New Employee</th>
<th>You have 30 days from your date of employment to enroll in a health plan.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Employee — Loss of Other Coverage</td>
<td>If you decline enrollment for yourself or your dependents (including your spouse) because of other health insurance coverage, you may be able to enroll yourself or your dependents in a City Schools health plan later if your other coverage terminates. Requests for loss of coverage due to loss of eligibility for Medicaid or coverage under a state children’s health insurance program (CHIP) may be received up to 60 days after the coverage terminates.</td>
</tr>
<tr>
<td>Current Employee — Change in Family Status</td>
<td>You have 30 days from the date of a qualifying event (also called change in family status — includes marriage, birth, adoption, or death) to change your enrollment status in your current health plan.</td>
</tr>
<tr>
<td>Open Enrollment</td>
<td>You can enroll in or change benefits plans on an annual basis each fall for coverage that becomes effective the following January 1. Each year, you will receive instructions on how to enroll.</td>
</tr>
<tr>
<td>HIPAA Enrollment</td>
<td>If you decline enrollment for yourself during the Plan Year, but have a new dependent because of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependent(s), if you request enrollment within 30 days of the qualifying event.</td>
</tr>
</tbody>
</table>
## 2021 Health Care Rates

(Bi-weekly health plan premiums for all BTU, PSRP, and PSASA employees are deducted over 21 pay periods)

**Shown as 21 Bi-Weekly Deductions**

<table>
<thead>
<tr>
<th>Health Plan</th>
<th>Individual</th>
<th>Employee &amp; Spouse</th>
<th>Parent and 1 Child</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>CareFirst PPN</td>
<td>$75.02</td>
<td>$166.62</td>
<td>$144.85</td>
<td>$180.85</td>
</tr>
<tr>
<td>CareFirst POS</td>
<td>$24.63</td>
<td>$53.58</td>
<td>$46.71</td>
<td>$72.51</td>
</tr>
<tr>
<td>Kaiser</td>
<td>$22.35</td>
<td>$48.66</td>
<td>$42.51</td>
<td>$65.83</td>
</tr>
<tr>
<td>Prescription - Cub/L44/PSRP</td>
<td>$2.00</td>
<td>$2.00</td>
<td>$2.00</td>
<td>$2.00</td>
</tr>
<tr>
<td>Prescription - BTU PSASA</td>
<td>$8.00</td>
<td>$8.00</td>
<td>$8.00</td>
<td>$8.00</td>
</tr>
<tr>
<td>Vision</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Vision Buy-Up</td>
<td>$1.79</td>
<td>$3.23</td>
<td>$3.23</td>
<td>$4.69</td>
</tr>
<tr>
<td>Vision (PSASA)</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Vision Buy-Up (PSASA)</td>
<td>$1.47</td>
<td>$2.75</td>
<td>$2.75</td>
<td>$4.05</td>
</tr>
<tr>
<td>Dental</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Dental Buy Up</td>
<td>$12.10</td>
<td>$24.21</td>
<td>$20.55</td>
<td>$33.87</td>
</tr>
</tbody>
</table>

**Shown as 26 Bi-Weekly Deductions**

<table>
<thead>
<tr>
<th>Health Plan</th>
<th>Individual</th>
<th>Employee &amp; Spouse</th>
<th>Parent and 1 Child</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>CareFirst PPN</td>
<td>$60.59</td>
<td>$134.58</td>
<td>$116.99</td>
<td>$146.07</td>
</tr>
<tr>
<td>CareFirst POS</td>
<td>$19.89</td>
<td>$43.27</td>
<td>$37.72</td>
<td>$58.57</td>
</tr>
<tr>
<td>Kaiser</td>
<td>$18.05</td>
<td>$39.30</td>
<td>$34.33</td>
<td>$53.17</td>
</tr>
<tr>
<td>Prescription - Cub/FOP/L44</td>
<td>$1.62</td>
<td>$1.62</td>
<td>$1.62</td>
<td>$1.62</td>
</tr>
<tr>
<td>Prescription - GSS</td>
<td>$6.46</td>
<td>$6.46</td>
<td>$6.46</td>
<td>$6.46</td>
</tr>
<tr>
<td>Vision</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Vision Buy-Up</td>
<td>$1.45</td>
<td>$2.61</td>
<td>$2.61</td>
<td>$3.78</td>
</tr>
<tr>
<td>Vision (PSASA &amp; GSS)</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Vision Buy-Up (GSS)</td>
<td>$1.19</td>
<td>$2.22</td>
<td>$2.22</td>
<td>$3.27</td>
</tr>
<tr>
<td>Dental</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Dental PPO (Buy Up)</td>
<td>$9.78</td>
<td>$19.55</td>
<td>$16.60</td>
<td>$27.36</td>
</tr>
</tbody>
</table>
Flexible Spending Accounts
You may choose from two different flexible spending accounts:
- Medical Care Flexible Spending Account (FSA)
- Dependent Care Flexible Spending Account (FSA)

When you contribute to either or both Medical Care or Dependent Care FSA, your contributions will be deducted from your pay before most federal, state, and local taxes are calculated. This saves you money because you pay less in income taxes.

Dependent Care FSA
While City Schools offers many benefits to meet your needs, even the best plans do not cover major expenses such as child or elder care. To set up a Dependent Care FSA, you first choose an annual amount (from $120 to $5,000) to contribute to your account to help cover these expenses. Your contributions will be deducted from your pay on a before-tax basis. When you have an eligible expense, you file a claim for reimbursement with P&A.

Medical Care FSA
Likewise, you may set up a Medical Care FSA, to help you pay for eligible medical expenses on a before-tax basis. You can contribute an amount from $120 to $2,750 per year and draw upon the Medical Care FSA as you incur eligible expenses throughout the year. You will receive a Visa card to pay for eligible expenses, so there is no need to submit claim forms.

It’s an easy way to save money on eligible, out-of-pocket health care expenses such as over-the-counter items (bandages, pregnancy test kits, blood pressure monitors, contact lens solution, and more), chiropractic services, Lasik surgery, and deductibles – just to name a few.

Important! Your contributions to the Dependent Care and Medical Care FSAs cannot be carried over to the next Plan Year or returned to you. However, you will have a grace period until March 15 of the following year to incur eligible expenses and until April 30 of the following year to submit a claim for reimbursement for the preceding year. This is commonly referred to as the “use it or lose it” rule. Please plan your contributions carefully!

Life Insurance and Accidental Death & Dismemberment (AD&D)
In the event of your natural death while you are an active employee of City Schools, basic life insurance provides your identified beneficiaries with benefits. AD&D insurance covers you for loss of limbs and/or sight caused by external, violent, and accidental means.

Basic Life and AD&D Coverage Amounts (fully paid by City Schools)
Your amount varies based upon your union affiliation, as described on the following page.
### Union Affiliation:

<table>
<thead>
<tr>
<th>Union Affiliation</th>
<th>Basic Life and AD&amp;D Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baltimore Teachers Union (BTU)</td>
<td>$70,000</td>
</tr>
<tr>
<td>Paraprofessionals and School-Related Personnel (PSRP)</td>
<td>$27,000 or one times your annual salary (whichever is greater)</td>
</tr>
<tr>
<td>Public School Administrators (PSASA)</td>
<td>One times your annual salary</td>
</tr>
<tr>
<td>Unaffiliated Employees (GSS)</td>
<td>Two and a half times your annual salary</td>
</tr>
</tbody>
</table>

**These unions provide the following coverage amounts, after a one-year waiting period:**

<table>
<thead>
<tr>
<th>Union Affiliation</th>
<th>Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>AFSCME Local 44</td>
<td>One times your annual salary</td>
</tr>
<tr>
<td>City Union of Baltimore (CUB)</td>
<td>One times your annual salary</td>
</tr>
<tr>
<td>Fraternal Order of Police (FOP)</td>
<td>One times your annual salary</td>
</tr>
</tbody>
</table>

### Basic Dependent Life Insurance (fully paid by City Schools)

If you are covered under the Basic Life and Accidental Death & Dismemberment Plan and are a member of BTU, PSASA, PSRP, or GSS, your eligible dependents are automatically covered under the Basic Dependent Life Insurance Plan. Basic Dependent Life pays a benefit to you in the event your eligible dependent(s) die. Coverage is available for your eligible dependents as follows:

- **Your spouse:** $2,000
- **Your children age 14 days or over, but less than 6 months:** $200
- **Your children age 6 months or over, but less than 26 years:** $1,000

### Optional Life and AD&D Coverage Amounts

In addition to the Basic Life and AD&D coverage amounts, you may elect to purchase additional life insurance by enrolling in Optional Life and AD&D. If you choose to do so, you can enroll for coverage equal to one, two, three, four, or five times your annual salary (rounded to the next highest $1,000) up to a maximum of $750,000.

### Voluntary Life Insurance

You may purchase term life insurance for your eligible dependent children in the amount of $10,000 per child, without Evidence of Insurability (EOI). The cost of coverage is $0.49 per pay period for 21-pay employees and $0.39 per pay period for 26-pay employees. Coverage for your eligible spouse is also available in increments from $10,000 to $100,000. The spousal life coverage level cannot exceed the combined coverage amount of an employee’s basic and optional life values. Rates for spousal coverage are age-based, and coverage over $10,000 is subject to Evidence of Insurability.

### How to Designate Your Beneficiary

Follow the instructions below to update your Beneficiary designations after you have received your second paycheck.

- Go to the secure website https://www.ielect.com to designate your beneficiaries online
- Enter the following information to login for the first time:
  - Employer – baltimorecityschools
  - Login ID – Your EE ID
  - PIN – DOB (MM/DD/YYYY without hyphens)

If you have questions, please call 1-888-541-8147. (Representatives are available Monday through Friday, between 8:00 AM and 8:00 PM Eastern Standard Time).
2021 Life Insurance and AD&D Rates

Optional Term Life

<table>
<thead>
<tr>
<th>Age (Initial rates based on age as of effective date of your coverage. Rates will change based on the following age schedule)</th>
<th>Employee Coverage (per $1,000 of coverage)</th>
<th>Spouse Coverage (per $1,000 of coverage)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 25</td>
<td>$0.041</td>
<td>$0.042</td>
</tr>
<tr>
<td>25-29</td>
<td>$0.041</td>
<td>$0.051</td>
</tr>
<tr>
<td>30-34</td>
<td>$0.048</td>
<td>$0.055</td>
</tr>
<tr>
<td>35-39</td>
<td>$0.054</td>
<td>$0.072</td>
</tr>
<tr>
<td>40-44</td>
<td>$0.082</td>
<td>$0.096</td>
</tr>
<tr>
<td>45-49</td>
<td>$0.136</td>
<td>$0.145</td>
</tr>
<tr>
<td>50-54</td>
<td>$0.230</td>
<td>$0.215</td>
</tr>
<tr>
<td>55-59</td>
<td>$0.375</td>
<td>$0.360</td>
</tr>
<tr>
<td>60-64</td>
<td>$0.579</td>
<td>$0.713</td>
</tr>
<tr>
<td>65-69</td>
<td>$0.953</td>
<td>$1.272</td>
</tr>
<tr>
<td>70-74</td>
<td>$1.859</td>
<td>$2.363</td>
</tr>
<tr>
<td>75+</td>
<td>$2.060</td>
<td>$3.854</td>
</tr>
</tbody>
</table>

* This is optional coverage and the entire cost of coverage is employee paid. Spouse rate is based on spouse’s date of birth.

Optional Term Life Monthly Cost for Dependent Children

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Monthly Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>$10,000</td>
<td>$0.85</td>
</tr>
</tbody>
</table>

Optional AD&D Monthly Cost for Employee

Follow this worksheet to determine your, your spouse’s, or your dependent children’s monthly cost of insurance. Refer to the tables above to find the monthly rates per $1,000 of coverage for optional life insurance and AD&D for you, your spouse, or your dependent children.

<table>
<thead>
<tr>
<th>Steps to Determine Cost of Insurance</th>
<th>Worksheet</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Select desired amount of coverage.</strong> (Employee coverage is available for 1, 2, 3, 4, or 5 times your covered annual earnings, not to exceed $750,000. Spouse coverage is available in increments of $10,000 to $100,000, not to exceed 100% of employee optional term life coverage amount.)</td>
<td>$__________</td>
</tr>
<tr>
<td><strong>2. Refer to the tables above to find the corresponding monthly rate.</strong></td>
<td>The monthly rate per $1,000 is $__________</td>
</tr>
</tbody>
</table>
| **3. Divide your selected amount of coverage by $1,000. Then multiply the result by the monthly rate. The answer is the monthly cost of insurance.** | $__________ divided by $1,000 = $__________  
$__________ multiplied by $__________ = Total monthly cost of insurance $__________ |
About COBRA Continuation

The Consolidated Omnibus Budget Reconciliation Act (COBRA) is a federal law that requires most employers sponsoring group health plans to offer employees and their families the opportunity to temporarily extend their health coverage (continuation coverage) at group rates in certain instances (COBRA Qualifying Events) when coverage under the Plan would otherwise end.

**COBRA Qualifying Events**

If you are a City Schools employee and are covered by one of its health plans (including the HMO), and/or the dental plans, you have the right to choose continuation of this coverage if you or your eligible dependents lose your coverage because of any of the following qualifying events:

- Your death;
- Termination of your employment for any reason other than your gross misconduct;
- Your hours are reduced;
- Change in your employment status which causes you to no longer be eligible for benefits;
- Your legal separation or divorce; • Your entitlement to Medicare; or
- End of eligibility status under the Plan, i.e., when a child turns 26.

If you choose continuation coverage, City Schools will provide you with the same coverage provided to active employees and their family members under its health plans (including the HMO) and/or the dental plans. This means that if the coverage for active employees and their family members is modified, your continuation coverage will also be modified. You may only continue coverage (including options for that coverage) you had at the time COBRA rights began, not add coverage. If no coverage existed immediately prior to the qualifying events listed next, no COBRA continuation coverage is available. Continuation of coverage must be elected within the election period.

This notice summarizes your rights and obligations under the continuation of coverage provisions of the law. Both you and your spouse should take the time to read this notice carefully. More details about COBRA may be found on our website and in your Benefits Guide. COBRA continuation coverage is administered by P&A Group.
Long-Term Disability (LTD) Insurance
Disability income insurance provides financial security to help protect you and your family by replacing a portion of your income in the event you become sick, hurt, or unable to work for an extended period.

You have two LTD insurance options through The Hartford Life and Accident Insurance Company:

- Plan Option A: pays benefits after a 180-day waiting period
- Plan Option B: pays benefits after a 90-day waiting period

Employee Assistance Program (EAP)
The EAP from Beacon Health Options is available to you and your household members at no cost. This program offers short-term confidential counseling for personal problems and issues, including child/elder care, stress and anxiety, alcohol and drug abuse, and much more.

The EAP is voluntary and confidential. Service is available 24 hours a day, seven days a week. Beacon Health Options professionals are experienced individuals who hold master or doctoral degrees in counseling or a related field. To contact the EAP, call Value Options at 1-866-529-8063 or visit www.achievesolutions.net/bcpss.

Retirement Plans
Baltimore City Public Schools has two different retirement plans: According to your job assignment, you will be placed under the City of Baltimore Employees Retirement System or the Maryland State Teacher’s Pension System

City of Baltimore Employees Retirement System
As of January 1, 2015, Baltimore City Public Schools began its participation in the new Retirement Savings Plan of the City of Baltimore (RSP). Eligible participants can elect one of two types of the RSP membership; Hybrid Membership or Non-Hybrid Membership. You have 150 days from the date you begin service in an eligible position to elect one of the two plans. If you do not make an election during that time, you will be automatically enrolled as a Hybrid member. After the 150-day period has passed, you may not change your election. After 180 days, contributions will be deducted from your bi-weekly pay check.
The Hybrid membership consists of a **defined benefit** and **defined contribution** retirement plan with a 10-year vesting period. The Non-Hybrid membership consists of a **defined contribution retirement plan** with a 5-year vesting period. For more information please contact **Nationwide**:

**For assistance, contact your Nationwide Retirement Specialist**

Call us at (855) 826-5407 Monday – Friday 8 a.m. – 11 p.m. ET Saturday 9 a.m. – 6 p.m. ET

Local walk-in office 7 E. Redwood Street, 11th Floor Baltimore, MD 21202 Monday – Friday 8 a.m. – 4:30 p.m. (443) 984-2389

**Maryland State Retirement and Pension System (MSRPS)**

All eligible employees are enrolled in the Reformed Teacher’s Pension Plan if your position is a Principal, Teacher, or hold another eligible position and work at least 500 hours in the first fiscal year of employment. All new employees hired or beginning a new system or plan on or before April 1 must be properly enrolled by June 30. Below are some features of the plan:

- Enrollment is mandatory.
- The employee must complete an:
  - Application for Membership (Form 1);
  - Designation of Beneficiary (Form 4); and
  - Submit valid proof of employee’s birth date.

These documents must be free of error and submitted during the new hire orientation period. Failure to comply will result in a delay in enrollment.

- There is a contribution amount of 7% of your earnable compensation that will be withheld from your bi-weekly paycheck.
- As of July 1, 2011, the vesting period is with 10 years of service. Vesting means that you would be entitled to a monthly benefit at retirement age.
- Retirement is calculated based on the “90 Rule” consisting of years of service and age. For example, 30 years of service at age 60 = 90; or 32 years of service at age 58 = 90. Early service retirement eligible is age 60 with at least 25 years of eligible service.
- If you have prior years of service with the Maryland State Retirement and Pension System, your offer letter will advise you to call the Retirement Coordinator. Each employee will be handled based upon their individual need.

You may earn accrued service credit for the following:

- Military (prior duty)
- Active Duty (during employment)

Purchased service refers to service credit you may buy through direct payment to the Retirement Agency for specific types of previous employment. It includes:

- Redeposit – If you withdrew your accumulated contributions after terminating a prior period of membership in the Teachers’ Pension System, you may be eligible to purchase this prior service.
• Approved leave of absence – your accrued service credit may be affected. It is the employee’s responsibility to file an Application to be Placed on a Qualifying Leave of Absence (Form 46) with the Retirement Agency before beginning an unpaid leave of absence. The coordinator will certify that the leave was approved. Proper filing ensures continuation to earn service credit for the period of leave and that your survivor benefit will remain in effect during the leave. You may earn accrued service credit for the following:
• Personal illness
• Adoption
• Career-related study
• Government-sponsored or subsidized employment
• Service in a professional or employee organization
• Rollover Purchases – you may purchase eligible service with a rollover of funds from the following:
  • Traditional IRA;
  • Eligible Employer Plan
  • 401(a)
  • 401(k) plans, profit sharing plan, defined benefit plan, stock bonus plan, or money purchase plan;
  • 403(a) annuity plans
  • 403(b) tax sheltered annuity; or
  • 457(b) plans maintained by a governmental employer (government 457 plan).

All Forms can be downloaded from the State’s website http://www.sra.state.md.us/Participants/Members/Forms and Downloads/Printable forms. If you have any questions, please contact the Office of Human Capital to speak with a Retirement Coordinator at 410-396-8885.

**Additional Retirement Plans: 403(b)**
City Schools has nine authorized carriers who participate in offering tax-sheltered annuity and mutual fund plans. Under federal law, tax-sheltered or deferred programs (403(b)) allow you to set aside a portion of your income on a before-tax basis. The IRS limits vary year to year; in 2015, you may elect to defer up to $17,500 of your income (more if you are age 50 or older).

Here is how to enroll in the City Schools Supplemental 403(b) Retirement Plan:
• Select the company(is) you wish to invest with or speak with a representative from one of the nine investment carriers to assist you.
• Submit a *Salary Reduction* form online through our 403(b)-plan administrator’s (TSA Consulting Group) website at https://www.tsacg.com. Step-by-step directions are available online at City Schools and TSA Consulting websites.
• You can start, change, or stop a 403(b) deduction online at your convenience 24 hours a day, seven days a week. You will receive an immediate online confirmation of your submitted request. You use the same system for any 403(b) distribution approvals as well.
Questions?

Contact the City Schools’ benefits providers directly or email the Department of Employee Engagement at humancapital@bcps.k12.md.us. You may also contact us at 410-396-8885, Monday through Friday, 8 a.m. to 5 p.m.

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<tr>
<th>Benefits Provider</th>
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| CareFirst BlueCross BlueShield (PPN and Blue Choice POS) | Dedicated Customer Service: 1-800-648-5285  
Local: 410-581-3506  
(Monday-Friday, 8 a.m. to 9 p.m.)  
Member Services: 301-468-6000 or 1-800-777-7902  
(Monday-Friday, 7:30 a.m. to 5:30 p.m.) | www.carefirst.com |
| Kaiser Permanente                        |                                       |                                               |
| **Prescription Drug**                    |                                       |                                               |
| Express Scripts                          | Customer Service: 1-877-206-7430  
(24 hours a day, 7 days a week) | www.express-scripts.com |
| **Dental**                               |                                       |                                               |
| CareFirst (Preferred Dental PPO and DHMO Plan) | Customer Service: 1-866-891-2802  
(Monday-Friday, 8:30 a.m. to 5 p.m.) | www.carefirst.com |
| **Vision**                               |                                       |                                               |
| National Vision Administrators           | 1-800-672-7723  
(24 hours a day/7 days a week) | www.e-nva.com |
| **Employee Assistance Program (EAP)**    |                                       |                                               |
| Beacon Health Options                    | 1-866-529-8063  
(24 hours a day/7 days a week) | www.achievesolutions.net/bcpss |
| **403(b) and 457(b) Investment Plans**   |                                       |                                               |
| TSA Consulting Group                     | 1-888-796-3786  
(Monday-Friday, 8 a.m. to 8 p.m.) | www.tsacg.com |
| **Life and AD&D Insurance Plans**        |                                       |                                               |
| The Hartford                             | 1-888-563-1124  
(Monday-Friday 8 a.m. to 8 p.m.) | www.thehartford.com/mybenefits |
| **Medical and Dependent Flexible Spending Accounts** |                                     |                                               |
| P&A                                     | 1-800-688-2611  
(Monday-Friday, 8:30 a.m. to 10 p.m.) | www.padmin.com |
| **Voluntary Benefits**                   |                                       |                                               |
| S.F. & C. Insurance Associates, Inc.    | 410-337-7577  
1-800-876-7768  
(Monday-Friday, 8:30 a.m. to 4:30 p.m.) | www.sfandc.com |