Employee Group Insurance Program

The Board will provide group insurance coverage for Administrators, Non-union Support Staff, Regular Classified, and Certified staff. Such coverages may include but are not limited to the following:

Employee Life and Accidental Death and Dismemberment Insurance Dependent Life Insurance Long-Term Disability Insurance Hospital-Surgical-Medical Insurance Major Medical Insurance Dental Insurance Vision Insurance

The group insurance program will be reviewed periodically with respect to the amounts and types of coverage for various categories of employees. The Agency reserves the right to solicit proposals, develop specifications, and let bids on any or all portions of the group insurance program as deemed in the best interests of the Agency and where applicable, consistent with a negotiated collective bargaining agreement. Selection of insurance carrier(s) is a prerogative of the Board.

Employees may be eligible for group benefits as determined by the board and required by law. The Board will select the group benefit program(s) and the insurance company or third party administrator which will provide or administer the program.

In accordance with the Patient Protection and Affordable Care Act (ACA), the Board will offer employees who work an average of at least thirty (30) hours per week or one hundred thirty (130) hours per month, based on the measurement method adopted by the Board, with minimum essential coverage that is both affordable and provides minimum value. The Board will have the authority and right to change or eliminate group benefit programs, other than the group health plan, for its employees.

Employees who work an average of at least thirty (30) hours per week or one hundred thirty (130) hours per month, based on the measurement method adopted by the Board, are eligible to participate in the group health plan.

The requirements stated in the appropriate Administrative Guidelines and the Master Contract between employees and the board regarding the group insurance benefits of such employees will be followed.

Full-time and regular part-time licensed employees who wish to purchase coverage for their spouse or dependents may do so by meeting the requirements of the applicable plan. Employees and their spouse and dependents may be allowed to continue coverage of the agency's group health program if they cease employment with the agency by meeting the requirements of the plan.

Employers should maintain documents regarding eligible employees' acceptance and rejection of coverage.

Legal Reference: Iowa Code §§ 20.9; 85; 85B; 279.12, .27; 509; 509A; 509B (2013). Internal Revenue Code § 4980H(c)(4); Treas. Reg. § 54.4980H-1(a)(21)(ii). Shared Responsibility for Employers Regarding Health Coverage, 26 CFR Parts 1, 54 and 301, 78 Fed. Reg. 217, (Jan 2, 2013).

Shared Responsibility for Employers Regarding Health Coverage, 26 CFR Parts 1, 54 and 301, 79 Fed. Reg. 8543 (Feb. 12, 2014).

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