



Summary of the Dallas Independent School District benefits program for Substitutes

- Deadline Date: Your eligibility period to elect benefits is 31 days from your hire date or orientation date.
- You may elect to enroll/change your medical, dental & vision benefits:
 - o At the next annual enrollment period;

OR

o If you experience a Special Enrollment Event and notify Benefits Outlook at 866-840-3473 or online at www.disdatyourservice.org within 31 days from the date of the event. Note: A Special Enrollment Event includes a transition from "Substitute" to a Full-Time District Employee.

Benefit Options you pay 100% for	District Paid Benefits – Enrollment Automatic
Medical	Basic Life & Accidental Death &
 Dental 	Dismemberment Insurance \$10,000
 Vision 	 Employee Assistance Program (EAP)
	Be sure to designate your beneficiary at
	www.disdatyourservice.org

Employee Eligibility

- Active, contributing member of Teacher Retirement System (TRS), or
- Work 10 or more regularly scheduled hours per week
- Returning retirees are not eligible for ActiveCare medical plans

Dependent Eligibility

- Legal spouse or common-law spouse
- Dependent children under the age of 26
- Logon to www.disdatyourservice.org for complete definitions of eligible dependents under >Common Forms & Plan Info > New Hire Resource Center >2016-17 TRS-Enrollment Guide

To Enroll

- Watch the Substitute Benefits Video at: DallasISD.org >Departments > Substitute Office
- Register at DallasISD@YourService website: www.disdatyourservice.org
- Username = Employee ID (Your EID)
- Password = Your initial password is MMDDXXXX:
 - o MM = two digits from the month of your date of birth
 - o DD = two digits from the day of your date of birth
 - o XXXX = last four digits of your Social Security number

Questions? Contact the Benefits Outlook Service Center at (866) 840-DISD (3473). English- and Spanish-speaking representatives are available weekdays, 7 a.m. to 7 p.m., Central time, except holidays.

In case of any errors or omissions in this summary, the benefits contract or District Policy will prevail. For complete enrollment rules, plan details, coverage and exclusions go to: www.disdatyourservice.org. Substitute Benefits Summary

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Benefits to help you LEARN and LIVE



Substitute Benefits Premium Information

- Premiums for benefit plan enrollments are <u>PAYROLL DEDUCTED BI-WEEKLY</u> on a pre-tax basis.
- If you do not consistently work enough hours to cover the cost of elected benefits, arrears will accumulate and be deducted as funds become available.
- You will be sent a "Direct Bill" for the amount in arrears.
- Unpaid premiums will accumulate as arrears and be deducted as funds become available.
- Unpaid arrears must be paid timely or coverage will be cancelled.

Your cost for benefits you elect will be deducted every payroll

Medical Plan Options	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
ActiveCare 1-HD	\$170.50	\$457.00	\$307.50	\$615.50
ActiveCare Select	\$242.00	\$573.50	\$389.50	\$680.50
ActiveCare 2	\$322.50	\$776.00	\$521.00	\$798.50
Scott & White HMO	\$265.08	\$596.41	\$419.58	\$661.49

Dental Plan Options	Employee Only	Employee & Spouse	Employee &	Employee & Family
			Children	
DHMO	\$5.30	\$10.05	\$10.05	\$12.94
EPO	\$11.64	\$23.66	\$22.87	\$38.81
PPO	\$17.78	\$35.21	\$35.13	\$54.96
Discount Plan	\$.56	\$1.67	\$1.67	\$2.78

Vision Plan Option	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
Basic	\$2.04	\$3.85	\$4.03	\$7.51
Premium	\$2.99	\$5.91	\$6.21	\$9.52

Retirement Benefits

FICA Alternative Plan

- Enrollment is automatic, payroll deduction is 7.5%
- Rehired TRS retirees are not eligible
- Public Agency Retirement Services (PARS) is TPA 1-800-540-6369

457(b) SMART Plan

- Voluntary Pre-Tax supplemental retirement plan
- GreatWest Retirement Services 1-866-467-7756

403(b) Tax Sheltered Annuity Plan

- Voluntary Pre-Tax supplemental retirement plan
- JEM Resource Partners 1-800-943-9179

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