

You will be required to submit the required documentation for all your dependents enrolled in your PPS health insurance plan

The Affordable Care Act (ACA) requires the District to collect social security numbers for all dependents enrolled in the employee's medical plan. The social security numbers are used as identifiers in reporting health insurance coverage to the IRS. Dependents for which social security numbers are not provided may not be enrolled.

To ensure that all enrolled dependents meet the Health & Welfare Trust's eligibility requirements, the H&W Trust works with Secova, an independent firm, to conduct confidential dependent eligibility verification.

If you are covering dependents, you must fully complete the mandatory dependent eligibility verification through Secova

Within 45 days AFTER enrolling in benefits, you will receive your verification packet from Secova to the mailing address on file for you.

You MUST submit directly to Secova all required documents for the dependents you are covering on your PPS health insurance by the deadline provided in your verification packet.

IMPORTANT: If you do NOT fully complete the mandatory dependent verification audit through Secova, your dependents will be dropped from your PPS health insurance on the first of the month following receipt of a final termination letter from Secova.

More information on the Secova dependent eligibility verification can be found on the H&W Trust website at https://sdtrust.com/enroll_dependent_verification.php.

For employees covering a Domestic Partner*

There are only three times when you can enroll in benefits or possibly make changes to your benefits:

1. As a new employee or a current employee with job/work hour changes impacting benefits eligibility.
2. Within 31-calendar days* of a qualifying event.
3. During Annual Open Enrollment in October with your benefits beginning on January 1st.

For more information, visit our Benefits Enrollment & Changes: <https://www.pps.net/Page/7324>.

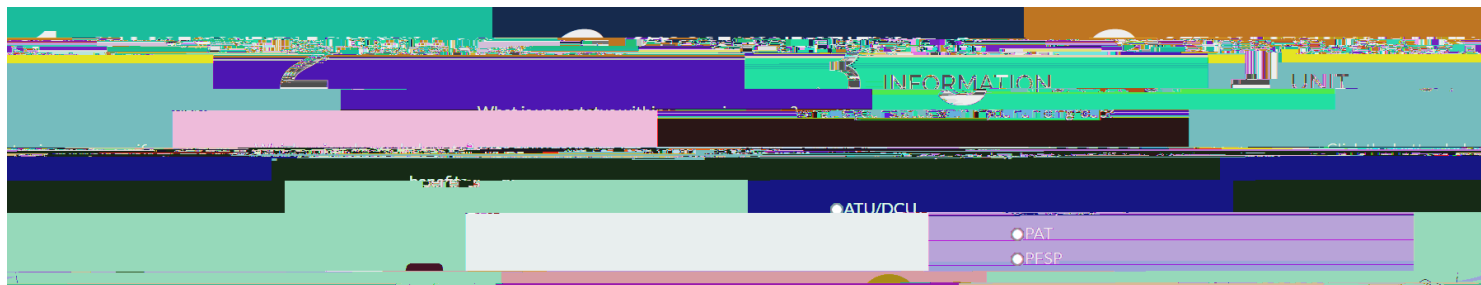
*Unless otherwise indicated.

Once your employment information has been processed in the HR computer system, you will receive the Benefits Enrollment Notification to your PPS email account and personal email account (if on file), letting you know your online benefits enrollment event is ready for you to complete and submit in PeopleSoft Employee Self-Service (ESS). You have 31-calendar days from your start date to enroll. You may then follow the Online Benefits Enrollment Instructions (<https://www.pps.net/Page/15959>, under Other Benefits Information section) to complete and submit your benefits enrollment.

In preparation, we encourage you to do the following before enrolling in benefits:

View all the benefit information on the H&W Trust website (https://sdtrust.com/mybenefits_health.php)

1. Select your Bargaining Unit (i.e., your Employee Group);
2. Select your Status; then
3. Click the GO! Button.



If you will be covering dependents (spouse/domestic partner/children), gather their dates of birth and social security numbers. For your beneficiaries, gather their dates of birth and social security numbers.

IRS rules state that benefit selections may only be changed when an employee experiences a qualifying event or during the Annual Open Enrollment period. The employee must complete an online enrollment via PeopleSoft Employee Self-Service (ESS) and upload the appropriate required documentation. The change must be consistent with the event.

Employees who experience a qualifying event must submit the required supporting documentation to the PPS Benefits Department and complete their benefits elections within 31-calendar days* from the date of the qualifying event:

*Unless otherwise indicated

For more information and instructions on making changes to your benefits due to a qualifying event, visit:

Benefits Enrollment & Changes webpage: <https://www.pps.net/Page/7324>

Qualifying Events for Benefits Enrollment & Changes webpage: <https://www.pps.net/Page/18906>

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New employees have a guarantee issue amount of \$100,000 with no medical history questionnaire required. New employees who enroll in the Voluntary Term Life Insurance may also enroll a spouse/domestic partner, with a guaranteed issue of \$30,000 for new hires or a qualifying event such as marriage with no medical history questionnaire required. Elections must be made within the eligibility timelines (see above).

To enroll during the Annual Open Enrollment Period or to elect amounts greater than the guarantee issue amount, the employee and their spouse/domestic partner are required to complete an Evidence of Insurability form (medical history questionnaire). For children, no Evidence of Insurability form is needed.

Additional information and the Evidence of Insurability form can be found on the H&W Trust Website:

https://sdtrust.com/mybenefits_life_and_add.php.

You *may* be able to continue coverage on a self-pay basis if coverage is elected within 31-days of the coverage termination. For more information, contact The Standard at 800-628-8600.

H&W Trust Certificate of Optional Group Life Insurance Coverage - The Standard Insurance Company: <https://bit.ly/3ClrpVk>

The Standard Group Policy Number: 750971-D

Benefits-eligible employees may elect additional Voluntary Accidental Death & Dismemberment (AD&D) Insurance coverage in amounts from \$25,000 to \$300,000 (in increments of \$25,000) for themselves, or for themselves and their family on a self-pay basis. Employees must enroll within the eligibility timelines or during Open Enrollment, but must be enrolled in a medical plan. Employees pay the full cost of the Voluntary AD&D Insurance and premiums are withheld from the employee's pay on an after-tax basis.

You *may* be able to continue coverage on a self-pay basis if coverage is elected within 31-days of the coverage termination. For more information, contact The Standard at 800-628-8600.

H&W Trust Certificate of Voluntary Group Accidental Death & Dismemberment Insurance Coverage - The Standard Insurance Company:

