



POUGHKEEPSIE CITY SCHOOL DISTRICT

18 South Perry St., Poughkeepsie, New York 12603 | Telephone 845-451-4900

To: Recently Hired Employees

Fr: _____

Re: Health Insurance Information/Registration

Welcome and congratulations on embarking on your career with the Poughkeepsie City School District!

Forms and pertinent information for enrollment in health insurance are located on the District Website at www.poughkeepsiechools.org. Select DEPARTMENTS, FINANCE and OPERATIONS. On the left hand side click Payroll & Benefits look for Insurance Benefits - Health/Dental/ Vision. The website contains information regarding benefits, costs, payroll, etc. You should check it periodically when you have questions or need a form.

NON-Teacher/Union Employees

Compare Insurance cost, summary of benefits and coverage as well as Dental and Vision coverage by clicking the appropriate link in the Summary of Benefits and Coverage sections of the webpage.

Medical Choices: Employee per paycheck contribution, varies by union or Non represented category and whether you are a 10 or 12 month employee.	DEHIC: Empire Blue Cross/Blue Shield EPO 20 plan – Health Reimb Account compliments this plan - funded 100% by the district \$200/Individual or \$400/Family	MVP	CDPHP	Opt Out: If you are covered under someone else's medical plan, you may elect to take the Buy-out by completing the Opt out Packet. Buy out amounts are determined by contract or the category that covers your title. The process of OPTING OUT must be done every year in June.
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Dental & Vision	<p>Ameritas dental/vision – covers Clerical Union, Paraprofessional Union, Admin Union (dental only), and all Non Rep employees including Ass't Supts & Superintendent.</p> <p>CSEA Employee Benefit Fund dental/vision – covers CSEA Unit including nurses & school security monitors. Hrly Food Service Helpers – Vision only coverage.</p> <p>Print out the form that corresponds to your bargaining unit.</p>
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<p align="center">Teachers- PPSTA</p> <p align="center">Compare Summary of Medical Benefits and Coverage</p> <p align="center">(If you have questions contact Debbie Kardas, 845-471-3376)</p>

Medical	UMR-PPSTA Benefit Trust: <i>Return form to PPSTA</i>	MVP: Enroll through the district	CDPHP: Enroll through the district	Opt-Out Forms: Must have other coverage
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Dental	Enrollment forms are in PPSTA new member packet. Folder will be given to you by your president or CBR.
Vision	Enrollment forms are in PPSTA new member packet. Folder will be given to you by your president or CBR.

Completed enrollment forms can be mailed interoffice to the Business Office at the Columbus Central Office building or they may also be dropped off in person. If you prefer to scan and email them.....please see my email address below.

If you need further assistance below is my contact information. Thank you.

Tamisha Greenhill/Business Office

Email: tgreenhill@poughkeepsieschools.org

Work #: 845-451-4900 ext 4963

Poughkeepsie City School District, 18 S. Perry Street, Poughkeepsie, NY. 12601