

# 2024 Guide to Employee Benefits

Issued from the Human Resources Office
January 2024

# DISTRICT PERSONNEL PHONE NUMBERS

	Phone Number	Extension
DISTRICT OFFICE MAIN LINE	663-0600	11600
t Rachael Caspers - Receptionist		
SUPERINTENDENT'S OFFICE		
Dr. Matthew Hillmann - Superintendent of Schools	663-0629	11629
Anita Aase - Administrative Assistant to Superintendent and the Board	663-0629	11629
FINANCE OFFICE		
Valori Mertesdorf - Director of Finance	663-0620	11620
Lisa Bethke - Accounting Generalist	663-0626	11626
Jackie DuLac - Accounting Generalist / Special Education	645-3440	11440
Mary Czech - Payroll Lead	663-0628	11628
HUMAN RESOURCES OFFICE		
Molly Viesselman - Director of Human Resources	663-0624	11624
Brooke Bulfer - HR Generalist	645-3406	11406
Arleene Gallardo - HR Generalist	663-0608	11608
Emily Grote - Benefits Leadead	663-0627	11627
SPECIAL EDUCATION SERVICES		
Sara Pratt - Director of Special Services	645-3410	14441
Caleb Davidson - Assistant Director of Special Services	645-1234	14234
Jordan Streiff - Administrative Support Assistant	645-3410	14410
INSTRUCTIONAL SERVICES		
Hope Langston - Director of Instructional Services	645-3436	14436
Jessie Huebsch - Administrative Support Assistant	645-0622	14622
TECHNOLOGY & INFORMATION SYSTEMS		
Nate Knutson - Director of Technology Services	664-3399	11399
Brent Lothert - Assistant Network Manager	645-1260	11260
Jessie Huebsch - Administrative Support Assistant	645-0622	14622
Chris Neset - Student Information Specialist	645-3445	11445
Tim Drake - Technology Specialist	645-1260	11260
Samantha Becker - Technology Specialist	645-1260	11260
Debbie O'Meara- Technology Specialist	645-1260	11260
Ryan Sweeney - Technology Specialist	645-1260	11260
CHILD NUTRITION OFFICE		
Stephany Stromme - Director of Child Nutrition Services	645-3432	11432
Rachael Caspers - Administrative Support Assistant	663-0621	11621
BUILDINGS & GROUNDS OFFICE		
Justin Raabolle - Director of Buildings & Grounds	645-3435	11435
Dorothy Cohan - Administrative Support Assistant	663-0610	11610
COMMUNITY EDUCATION OFFICE		
Erin Bailey - Director of Community Education	664-3652	17652
Lisa Koktavy- Admin. Support Assistant / NCEC Building Main Line	664-3649	17750

If you need technology or facility related support please start a ticket by visiting northfieldschools.org, click the Staff Apple at the top of the page, then choose Staff Portal from the right side of the page. The staff portal password is 659. Choose Incident IQ Tech and Facilities Support Ticketing System and follow the prompts. Someone from the team will promptly respond to your request.

# STAFF PAGE - DAILY REPORTING TOOLS AND INTERNAL RESOURCES

Visit **NorthfieldSchools.org** and choose **STAFF** at the top of the page.



Scroll down on the staff page to find:

- User Guides for Daily Reporting Tools Log into these with your school mail account info. You will find directions for SMARTER, Red Rover Absence Management, and Red Rover Time and Attendance.
- **SMARTER** Your paperless payroll and leave information system. Use this system to view and print your paystubs, view time-off accrual balances, and print year end tax statements. After you have been hired you will receive SMARTER login information.
- **Red Rover Absence Management** Use this system to enter your use of time off from work. All time away from work should be reported in this system. This system is used for both planned absences and unexpected absences, including illness or unexpected emergencies.
- **Red Rover Time and Attendance** This is the time clock system for hourly staff. It can be accessed from the Staff Page link or by downloading the Red Rover mobile app.

Staff who use the Red Rover system will be sent a message to their school mail account with an invitation to create a Red Rover password. Your Red Rover username will always be your staff email address. You will need that username and password to enter absences or use the time clock system.

The Staff Page also contains links to many other important resources including: Finance Forms, HR Forms, Special Education Resources, Curriculum & MTSS Information, and Staff Development & PLC Work.

**Staff Portal** - This can be found on the left side of the Staff Page. **The portal password is 659.** The Staff Portal has links to training resources, commonly used teaching technology, and the Incident IQ Tech Support Ticketing System.

#### NORTHFIELD PUBLIC SCHOOLS INSURANCE BENEFITS

Information included in this guide is intended to generally describe the employee benefits programs.

The provisions of the district's group insurance policies, not this guide, control the degree of coverage provided. No claim may be made against the school district as a result of a denial of insurance benefits by an insurance carrier.

The benefits described herein are not to be taken as a contract between the employee and the school district.

# **Health Insurance:**

The District offers two different health insurance plans through Blue Cross Blue Shield. A general overview of these two health insurance plans can be found on pages 4-7 of this handbook. Under both plans you can choose any provider that you would like as long as they are participating providers with Blue Cross Blue Shield.

For eligibility requirements, please refer to your employment agreement.

## **Dental Insurance:**

The District offers one dental plan through Delta Dental of Minnesota. A general overview of the dental plan can be found on page 9 of this handbook. The District participates in Delta Dental's PPO Network as well as the Premier Network.

For eligibility requirements, please refer to your employment agreement.

### **Life Insurance:**

The District offers group term life insurance policies through New York Life. These policies are paid by the District for all eligible employees. The District also offers each eligible employee the option to buy supplemental life insurance. The amounts of the District paid life insurance policy as well as the supplemental life insurance policy are determined by your employment agreement.

For eligibility requirements, please refer to your employment agreement.

### **Long-term Disability Insurance:**

The District offers long-term disability insurance through New York Life. This insurance benefit is paid by the District for all eligible employees.

For eligibility requirements, please refer to your employment agreement.

#### **Vision Coverage**

The District offers vision coverage through VSP.

For eligibility requirements, please refer to your employment agreement.

# BlueCard PPO Plan



Benefit Summary | Effective Dates January 1, 2024 - December 31, 2024

Key Benefits	In network*  MN Network: Aware  National Network: BlueCard PPO	Out of network**
Calendar year deductible The in- and out-of-network maximums accumulate separately. Any dollars paid toward the deductible the last three months of the calendar year will apply to the deductible for the next calendar year.	Medical \$1,500 individual \$3,000 family	Medical \$2,500 individual \$5,000 family
Coinsurance Level  The percent you pay after your deductible is met.	20%	20%
Calendar-year out-of-pocket maximum The medical in- and out-of-network maximums accumulate separately The prescription in- and out-of-network maximums cross apply  Non-covered charges and charges in excess of the lowed amount do not apply to the out-of-pocket maximum.	Medical \$2,500 individual \$5,000 family  Prescription \$1,000 individual \$2,000 family	Medical \$4,000 individual \$8,000 family  Prescription \$1,000 individual \$2,000 family
Benefit payment levels	Payment for participating network providers as described. Most payments are based on allowed amount.	If nonparticipating provider services are covered, you are responsible for the difference between the billed charges and allowed amount. Most payments are based on allowed amount.
Preventive care  • well-child care to age 6  • prenatal care  • preventive medical evaluations age 6 and older  • cancer screening  • preventive hearing and vision exams  • immunizations and vaccinations	0% 0% 0% 0% 0% 0%	0% 0% 0% after the deductible 0% after the deductible 0% after the deductible 0% after the deductible
Physician services  • e-visits  • retail health clinic (office visit)  • physician office visits  • office, outpatient, and inpatient lab services  • office, outpatient, and inpatient diagnostic imaging  • allergy injections and serum  • Urgent Care professional services	20% after the deductible 0% 20% after the deductible	20% after the deductible 20% after the deductible 20% after the deductible 20% after the in-network deductible 20% after the in-network deductible 20% after the deductible 20% after the in-network deductible
Other professional services  chiropractic manipulation (office visit) chiropractic therapy home health care hospice care physical therapy, occupational therapy, speech therapy (office visit) physical therapy, occupational therapy, speech therapy (therapy)	20% after the deductible 20% after the deductible 20% after the deductible 0% 20% after the deductible 20% after the deductible	20% after the deductible
Inpatient Facility Services  Outpatient Facility Services  facility lab services  facility diagnostic imaging  chemotherapy and radiation therapy  scheduled outpatient surgery  urgent care services (facility services)	20% after the deductible	20% after the deductible

Key Benefits	In network* MN Network: Aware National Network: BlueCard PPO	Out of network**
Emergency care  emergency room (facility charges)  professional charges  ambulance (medically necessary transport to the nearest facility equipped to treat the condition)	20% after the deductible 20% after the deductible 20% after the deductible	
Durable Medical Equipment	20% after the deductible	20% after the deductible
Bariatric surgery	20% after the deductible	No coverage
Assisted fertilization	20% after the deductible	20% after the deductible
Behavioral health (mental health and substance abuse services)  inpatient professional services  outpatient professional services (office visits)  outpatient hospital/facility services	20% after the deductible 20% after the deductible 20% after the deductible	20% after the deductible 20% after the deductible 20% after the deductible
Preventive drug benefit	0% after the deductible	No coverage
Prescription drugs - Select Network  • retail (31-day limit) FlexRx preferred drug list open plan design  • preferred generic  • non-preferred generic  • preferred brand  • non-preferred brand	100% after \$20 copay 100% after \$20 copay 100% after \$20 copay 100% after \$75 copay	40% 40% 40% 40%
Specialty drug list	Member pays 20% up to \$300 per script Member pays 40% per script	No coverage  No coverage
• 90dayRx - Mail order pharmacy (93-day limit)     FlexRx preferred drug list     Open plan design     • preferred generic     • non-preferred generic     • preferred brand     • non-preferred brand     • 90darRx - Retail pharmacy (93-day limit)	100% after \$40 copay 100% after \$40 copay 100% after \$40 copay 100% after \$150 copay	No coverage No coverage No coverage No coverage
FlexRX preferred drug list open plan design • preferred generic • non-preferred generic • preferred brand • non-preferred brand	100% after \$40 copay 100% after \$40 copay 100% after \$40 copay 100% after \$150 copay	No coverage No coverage No coverage No coverage
	90dayRx applies to participating retail and/or mail service pharmacy only.  Identified specialty drugs purchased through a specialty pharmacy network supplier are eligible for coverage (no coverage for specialty drugs purchased through a nonparticipating specialty pharmacy supplier).  The patient will pay the difference if a brand-name drug is dispensed when a generic drug is available.  The drug list uses a step therapy program. Sign in at bluecrossmn.com for	
	more information.	5.gir iii da <b>2.005</b>

 $Your\ out-of-pocket\ costs\ depend\ on\ the\ network\ status\ of\ your\ provider.\ To\ check\ status,\ call\ Blue\ Cross\ customer\ service\ or\ visit\ \textbf{bluecrossmn.com.}$ 

This plan is Medicare Part D creditable.

**Embedded deductible** - The plan begins paying benefits that require cost sharing for the first family member who meets the individual deductible. The family deductible must then be met by one or more of the remaining family members and then the plan pays benefits for all covered family members.

This is only a summary. Read your benefit booklet for more information about what is and isn't covered. Services that aren't covered include those that are cosmetic, investigative, not medically necessary or covered by workers' compensation or no-fault insurance.

For more information, visit bluecrossmn.com or call Blue Cross customer service at the number on the back of your member ID card.

<sup>\*</sup>Lowest out-of-pocket costs: in-network providers

<sup>\*\*</sup>Highest out-of-pocket costs: out-of-network nonparticipating providers (You are responsible for the difference between Blue Cross' allowed amount and the amount billed by nonparticipating providers. This is in addition to any applicable deductible, copay, or coinsurance. Benefit payments are calculated on Blue Cross' allowed amount, which is typically lower than the amount billed by the provider.)

# BlueCard PPO HRA Plan



Benefit Summary | Effective Dates January 1, 2024 - December 31, 2024

Key Benefits	In network*  MN Network: Aware  National Network: BlueCard PPO	Out of network**
Calendar-year deductible The in- and out-of-network maximums accumulate separately. Any dollars paid toward the deductible the last three months of the calendar year will apply to the deductible for the next calendar year.	Medical \$2,000 individual \$4,000 family	Medical \$4,000 individual \$8,000 family
Coinsurance Level  The percent you pay after your deductible is met.	0%	0%
Calendar-year out-of-pocket maximum The medical in- and out-of-network maximums accumulate separately The prescription in- and out-of-network maximums cross apply  Non-covered charges and charges in excess of the lowed amount do not apply to the out-of-pocket maximum.	Medical \$2,000 individual \$4,000 family  Prescription \$1,000 individual \$2,000 family	Medical \$4,000 individual \$8,000 family  Prescription \$1,000 individual \$2,000 family
Benefit payment levels	Payment for participating network providers as described. Most payments are based on allowed amount.	If nonparticipating provider services are covered, you are responsible for the difference between the billed charges and allowed amount. Most payments are based on allowed amount.
Preventive care  • well-child care to age 6  • prenatal care  • preventive medical evaluations age 6 and older  • cancer screening  • preventive hearing and vision exams  • immunizations and vaccinations	0% 0% 0% 0% 0% 0%	0% 0% 0% after the deductible 0% after the deductible 0% after the deductible 0% after the deductible
Physician services	0% after the deductible 0%	0% after the deductible 0% after the deductible 0% after the deductible 0% after the in-network deductible 0% after the in-network deductible 0% after the deductible 0% after the deductible 0% after the in-network deductible
Other professional services	0% after the deductible	0% after the deductible
Outpatient Facility Services  • facility lab services  • facility diagnostic imaging  • chemotherapy and radiation therapy  • scheduled outpatient surgery  • urgent care services (facility services)	0% after the deductible	0% after the deductible

Key Benefits	In network*  MN Network: Aware  National Network: BlueCard PPO	Out of network**
Emergency care     • emergency room (facility charges)     • professional charges     • ambulance (medically necessary transport to the nearest facility equipped to treat the condition)	0% after the deductible 0% after the deductible 0% after the deductible	
Durable Medical Equipment	0% after the deductible	0% after the deductible
Bariatric surgery	0% after the deductible	No coverage
Assisted fertilization	0% after the deductible	0% after the deductible
Behavioral health (mental health and substance abuse services)		
<ul><li>inpatient professional services</li><li>outpatient professional services (office visits)</li><li>outpatient hospital/facility services</li></ul>	0% after the deductible 0% after the deductible 0% after the deductible	0% after the deductible 0% after the deductible 0% after the deductible
Preventive drug benefit	0% after the deductible	No coverage
Prescription drugs - Select Network  • retail (31-day limit)  FlexRx preferred drug list open pln design  • preferred generic  • non-preferred generic  • preferred brand  • non-preferred brand	100% after \$20 copay 100% after \$20 copay 100% after \$20 copay 100% after \$75 copay	40% 40% 40% 40%
Specialty drug list	Member pays 20% up to \$300 per script Member pays 40% per script	No coverage  No coverage
<ul> <li>90dayRx - Mail order pharmacy (93-day limit)</li> <li>FlexRx preferred drug list</li> <li>Open plan design</li> <li>preferred generic</li> <li>non-preferred generic</li> <li>preferred brand</li> <li>non-preferred brand</li> <li>90dayRx - Retail pharmacy (93-day limit)</li> </ul>	100% after \$40 copay 100% after \$40 copay 100% after \$40 copay 100% after \$150 copay	No coverage No coverage No coverage No coverage
FlexRx preferred drug list open plan design     preferred generic     non-preferred generic     preferred brand     non-preferred brand	100% after \$40 copay 100% after \$40 copay 100% after \$40 copay 100% after \$150 copay	No coverage No coverage No coverage No coverage
	90dayRx applies to participating retail and/or mail service pharmacy only.  Identified specialty drugs purchased through a specialty pharmacy network supplier are eligible for coverage (no coverage for specialty drugs purchased through a nonparticipating specialty pharmacy supplier).  The patient will pay the difference if a brand-name drug is dispensed when a generic drug is available.  The drug list uses a step therapy program. Sign in at bluecrossmn.com for more information.	

Your out-of-pocket costs depend on the network status of your provider. To check status, call Blue Cross customer service or visit bluecrossmn.com.

This plan is Medicare Part D creditable.

Embedded deductible - The plan begins paying benefits that require cost sharing for the first family member who meets the individual deductible. The family deductible must then be met by one or more of the remaining family members and then the plan pays benefits for all covered family members.

This is only a summary. Read your benefit booklet for more information about what is and isn't covered. Services that aren't covered include those that are cosmetic, investigative, not medically necessary or covered by workers' compensation or no-fault insurance.

For more information, visit bluecrossmn.com or call Blue Cross customer service at the number on the back of your member ID card.

<sup>\*</sup>Lowest out-of-pocket costs: in-network providers

<sup>\*\*</sup>Highest out-of-pocket costs: out-of-network nonparticipating providers (You are responsible for the difference between Blue Cross' allowed amount and the amount billed by nonparticipating providers. This is in addition to any applicable deductible, copay, or coinsurance. Benefit payments are calculated on Blue Cross' allowed amount, which is typically lower than the amount billed by the provider.)

# Medical insurance

Select from two medical options through BlueCross BlueShield.

Refer to the carrier benefits summaries for the exact benefit levels associated with your plan choice.



Find an In-Network Provider Here:

Network Directory

BlueCross BlueShield Member Resources Guide:

Resources Guide



In-Network Benefits	PPO HRA Plan	PPO Plan
	See plan details	See plan details
Annual Deductible (DED)	\$2,000 single	\$1,500 single
	\$4,000 family	\$3,000 family
Medical Out-of-Pocket Maximum		
	\$2,000 single	\$2,500 single
	\$4,000 family	\$5,000 family
Pharmacy Out-of-Pocket Maximum	\$1,000 single	\$1,000 single
	\$2,000 family	\$2,000 family
Preventive care	100%	100%
Primary care visit	DED then you pay 0%	DED then you pay 20%
Specialist visit	DED then you pay 0%	DED then you pay 20%
Urgent care	DED then you pay 0%	DED then you pay 20%
Emergency room	DED then you pay 0%	DED then you pay 20%
3 -,		/ 1/

 Prescription drugs
 (Retail / Mail)
 (Retail / Mail)

 Rx Generic
 \$20 / \$40 Copay
 \$20 / \$40 Copay

 Rx Preferred Brand
 \$20 / \$40 Copay
 \$20 / \$40 Copay

 Rx Non-Preferred Brand
 \$75 / \$150 Copay
 \$75 / \$150 Copay

 Rx Specialty
 20%, up to \$300 / 40% per script
 20%, up to \$300 / 40% per script

See your plan documents for out-of-network benefits.

The information shown in this presentation is an illustrative summary only. The underlying plan contract or document governs all aspects of the plan. Final rates are dependent on actual enrollment, insurance carrier or plan rules, plan selection, and eligibility criteria. Please refer to the plan document, contract, and other notices contained in this document, applications, and other corresponding communications for additional information.

Delta Dental of Minnesota

# **Northfield Public Schools ISD #659**

# Client #050931

Plan Benefit Highlights			
Network(s)	Delta Dental PPO™	Delta Dental Premier®	Non-Participating*
Calendar Year Plan Maximum Per person	\$1,500	\$1,500	\$1,500
Lifetime Ortho Maximum Per eligible covered person	\$1,000	\$1,000	\$1,000
Late Entrants		mited to \$100 for the first num Limited to \$750 for th	
Deductible Per person / per family per calendar year No deductible for diagnostic and preventive services or orthodontics	\$25/person \$75/family	\$25/person \$75/family	\$25/person \$75/family
Eligible Dependents	Spouse a	nd dependent children up to a	age 26
Covered Services	Denta	l Benefit Plan Cove	rage
Diagnostic & Preventive Services  Exams Cleanings X-rays Fluoride treatments Space Maintainers Sealants	100%	100%	100%
Basic Services  Emergency treatment for relief of pain  Amalgam restorations (silver fillings)  Composite resin restorations (white fillings) on anterior (front) teeth  Composite resin restorations (white fillings) on posterior (back) teeth	80%	80%	80%
Endodontics Root canal therapy on permanent teeth Pulpotomies on primary teeth for dependent children	80%	80%	80%
Periodontics Surgical/Nonsurgical periodontics	80%	80%	80%
Oral Surgery Surgical/Nonsurgical extractions All other covered oral surgery	80%	80%	80%
Major Restorative Crowns Crown repair and other major services	80% 50%	80% 50%	80% 50%
Prosthetic Repairs and Adjustments Denture adjustments and repairs	50%	50%	50%
Prosthetics Dentures (full and partial) Bridges Standard Implant Services	50%	50%	50%
Orthodontics Treatment for the prevention/ correction of malocclusion Available for eligible dependent members, ages 8 and up	50%	50%	50%

This is a summary of benefits only and does not guarantee coverage. For a complete list of covered services and limitations/exclusions, please refer to the Dental Benefit Plan Summary.

<sup>\*</sup>Dentists who have signed a participating network agreement with Delta Dental have agreed to accept the maximum allowable fee as payment in full. Non-participating dentists have not signed an agreement and are not obligated to limit the amount they charge; the member is responsible for paying any difference to the non-participating dentists.



# Make the Most of Your Benefits



Thank you for choosing Delta Dental of Minnesota as your partner in oral health. Dental insurance is designed to pay a portion of the costs associated with your dental care. Having dental insurance is essential to keeping your mouth healthy by providing access to preventative care, such as cleanings and X-rays, and helps cover extensive dental procedures such as crowns and fillings.

# Online Tools for Members:

www.DeltaDentalMN.org



#### Save Money, Go In Network:

Search for a participating dentist or specialist, clinic or location. By seeking care from a Delta Dental network dentist, you will save the most money because the dentist is not allowed to bill you more than our allowable charge.



#### **Dental Insurance 101:**

Robust member tools including commonly defined insurance terms, videos and frequently asked questions.



#### **Oral Health Resources:**

Access dental and health information including a section dedicated to kids' oral health.



#### **Cost Estimator:**

Use our cost estimator to find out what a dental procedure will cost, or you can always request a pre-treatment estimate from your dentist.



### Prefer to Speak to Someone?

Call our national customer service

Toll Free: 1-800-448-3815 Local: 651-406-5901

Monday-Friday: 7 a.m.-7p.m. central

# Tools Available in the Secure Member Portal



#### **Coverage Summary:**

Review your dental plan information including eligibility, waiting periods, plan maximums and frequency limitations.



#### **Claims Inquiry:**

View claim status, procedure details, dates of service and applied deductibles.

View your explanation of benefits (EOB) online.

Check out our new feature to opt-out of the paper delivery of your EOB.



#### **Print ID Cards:**

Print a digital or replacement ID card.

#### Secure Member Portal Registration

- 1. On DeltaDentalMN.org, go to the member page and click "Access My Secure Portal"
- 2. Select the Employer Plan option click "Log In Here" and follow the steps to register.
- 3. Remember your username and password because you will need them each time you log in.

Learn more about how your oral heath connects to your overall health at:

# **DeltaDentalMN.org**

DDMN.3.31.20 - National



**Delta Dental of Minnesota** 



Enroll in VSP® Vision Care to get access to savings and personalized vision care from a VSP network doctor for you and your family.

#### Value and savings you love.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras which provide offers from VSP and leading industry brands totaling over \$3,000 in savings.

#### Provider choices you want.



Maximize your benefits at a Premier Program location, which is part of our incredible network of doctors.

### Shop online and connect your benefits.



Eyeconic® is the preferred VSP online retailer where eyeconic you can shop in-network with your vision benefits. See your savings in real time when you shop over 70 brands of contacts, eyealasses, and sunalasses.

#### Quality vision care you need.

You'll get great care from a VSP network doctor, including a WellVision Exam®. An annual eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

#### Using your benefit is easy!

Create an account on vsp.com to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with Exclusive Member Extras. At your appointment, just tell them you have VSP.

# **YSP** vision care

More Ways to Save Extra

> to spend on Featured Brands†

bebe

**CALVINKLEIN** 

COLE HAAN

DRAGON

FLEXON





See all brands and offers at vsp.com/offers.



Up to 40%

Savings on lens enhancements‡

Enroll through your employer today. Contact us: 800.877.7195 or vsp.com

# Your VSP Vision Benefits Summary

NORTHFIELD PUBLIC SCHOOLS ISD #659 and VSP provide you with an affordable vision plan.

**PROVIDER NETWORK:** 

**VSP** Choice



01/01/2023



BENEFIT	DESCRIPTION	COPAY	FREQUENCY	
Your Coverage with a VSP Provider				
WELLVISION EXAM	Focuses on your eyes and overall wellness	\$10	Every calendar year	
ESSENTIAL MEDICAL EYE CARE	<ul> <li>Retinal screening for members with diabetes</li> <li>Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more.</li> <li>Coordination with your medical coverage may apply. Ask your VSP doctor for details.</li> </ul>	\$0 per screening \$20 per exam	Available as needed	
PRESCRIPTION GLASSE	is a second of the second of t	\$25		
FRAME <sup>+</sup>	<ul> <li>\$150 featured frame brands allowance</li> <li>\$130 frame allowance</li> <li>20% savings on the amount over your allowance</li> <li>\$130 Walmart®/Sam's Club® frame allowance</li> <li>\$70 Costco® frame allowance</li> </ul>	Included in Prescription Glasses	Every other calendar year	
LENSES	<ul> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Impact-resistant lenses for dependent children</li> </ul>	Included in Prescription Glasses	Every calendar year	
LENS ENHANCEMENTS	<ul> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average savings of 30% on other lens enhancements</li> </ul>	\$0 \$95 - \$105 \$150 - \$175	Every calendar year	
CONTACTS (INSTEAD OF GLASSES)	<ul> <li>\$130 allowance for contacts; copay does not apply</li> <li>Contact lens exam (fitting and evaluation)</li> </ul>	Up to \$60	Every calendar year	
EXTRA SAVINGS  Glasses and Sunglasses  Extra \$20 to spend on featured frame brands. Go to vsp.com/offers for details.  20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam.  Routine Retinal Screening  No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam  Laser Vision Correction  Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities				

#### YOUR COVERAGE GOES FURTHER IN-NETWORK

With so many in-network choices, VSP makes it easy to get the most out of your benefits. You'll have access to preferred private practice, retail, and online in-network choices. Log in to vsp.com to find an in-network provider.

<sup>†</sup>Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change. ‡Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details. +Coverage with a retail chain may be different or not apply.

VSP guarantees member satisfaction from VSP providers only. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail. Based on applicable laws, benefits may vary by location. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business. TruHearing is not available directly from VSP in the states of California and Washington.

To learn about your privacy rights and how your protected health information may be used, see the VSP Notice of Privacy Practices on vsp.com.

<sup>©2023</sup> Vision Service Plan. All rights reserved.

VSP, Eyeconic, and WellVision Exam are registered trademarks of Vision Service Plan. Flexon and Dragon are registered trademarks of Marchon Eyewear, Inc. All other brands or marks are the property of their respective owners. 102898 VCCM

#### LIFE/AD&D INSURANCE - New York Life

Northfield Public Schools provides eligible employees with group term Life, Accidental Death and Dismemberment insurance in the amount specified by your particular group contract or policy. Your master contract or employment policy also provides you with the opportunity to purchase supplemental term life insurance coverage, subject to a health history approval, which can be paid for through payroll deduction. The current cost for supplemental coverage is displayed on the age banded premium table below.

You have 30 days from the date you first become eligible for coverage to enroll in the District paid life insurance plan with no limitations. If you wish to enroll at a later date, you will be required to provide satisfactory evidence of good health to New York Life in order to be approved for coverage. You may change your beneficiary information at any time by completing a Digital Benefits Enrollment Form, available from the Benefits Lead in the Human Resources office. Supplemental life insurance can be purchased at any time and is subject to health history.

This life insurance policy has an Accelerated Death Benefit, which provides for a portion of the death benefit to be paid to a terminally ill employee (defined as someone with a life expectancy of six months or less). The remaining amount of the policy would be payable to the designated beneficiary upon the employee's death.r

#### VOLUNTARY LIFE AND AD&D EMPLOYEE COST PER MONTH

These rates are age banded and will increase as you age. Find your age on the left and the column on the right shows the cost per month per \$25,000 of coverage. The rates are rolled on January 1 of each year and your rate for the year will be set based on your age on January 1 of that year.

Coverage Tier	Monthly Cost Per \$25,000
Under 30	\$1.68
30 – 34	\$1.93
35 – 39	\$2.18
40 – 44	\$2.43
45 – 49	\$3.18
50 – 54	\$5.18
55 – 59	\$8.93
60 – 64	\$14.18
65 – 69	\$30.18
70 – 74	\$51.93
75+	\$51.93

# LONG TERM DISABILITY BENEFITS - New York Life

Northfield Public Schools provides eligible employees with Long Term Disability (LTD) insurance. Your employment contract and policy defines your eligibility for coverage. Benefits shall be payable after the waiting period has been met. The Waiting period is specified in your employment contract or policy. The waiting period in most contracts is 60 continuous days out of work due to the employee's own illness or injury.

This income protection plan will pay approximately 2/3 of an employee's salary, once the disability claim has been approved, and the waiting period is satisfied. Any benefit payments may be coordinated with other sources of income as defined in your employment agreement contract and LTD policy. Applications for disability benefits may be obtained from the Benefits Lead in the Human Resource Office.

### LONG TERM CARE INSURANCE

Long term care insurance is offered at your own expense through Educators Financial Services. You do receive a discounted rate for buying a policy through school. There are simplified underwriting options that are available for new employees that will not be offered to continuing employees.

For additional information regarding this benefit, please contact Josh Decker at (651)-292-4815 or joshd@efsadvisors.com.d@efsadvisors.com.

# EstateGuidance®

Step by step legal documents.



Getting your affairs in order does not have to be a daunting task. The online EstateGuidance tool allows you or your family members to easily write a last will and testament, a living will, and documents outlining wishes for final arrangements.

EstateGuidance<sup>®</sup> walks you through the process by guiding you through a series of questions, and breaking down each step into easy-to-understand terms. Access is available anytime, anywhere via tablet, desktop, or mobile app.

#### EstateGuidance documents include:

Last Will and Testament – the central component of every estate plan

Living Will – spells out end-of-life medical decisions

Final Arrangements – specifies burial or cremation; funeral or memorial service options



More than 50% of Americans think that estate planning is at least somewhat important, but only 33% have a will or living trust.<sup>1</sup>

Contact Info
EstateGuidance\*



Phone: (800) 344-97.



Website: guidanceresources.com Registration Web ID: NYLGBS

# Additional protection when you travel.

Emergencies can happen while traveling, but help is only a phone call away.

New York Life Group Benefit Solutions (NYL GBS) Secure Travel offers pre-trip planning, assistance while traveling and emergency medical transportation benefits for covered persons traveling 100 miles or more from home (see your plan for details). Service is a phone call away, 24/7/365.

#### Pre-trip planning Traveling assistance Emergency assistance\* Immunization 24-hour multilingual assistance · Emergency evacuation and repatriation, when medically necessary; arrange and cover the cost of transportation to and referral to interpretation and requirements translation services the nearest adequate medical facility\* Visa and passport Referrals to physicians, Travel arrangements for the return of a travel companion or requirements Embassy/consular dentists, medical facilities and children under age 18 who are left unattended due to the covered person's medical emergency referrals legal assistance providers Foreign exchange rates Arrangements for payment of medical expenses up to \$10,000 if required Cover round-trip transportation as well as accommodations, up to \$150 per day for up to seven days, for a family member or Travel advisories and prior to treatment\*\* weather conditions friend to visit a covered person who is hospitalized more than Cultural information Assistance with lost or stolen items. 100 miles away from home for more than seven days including luggage and prescription Arrange and cover the costs associated with returning a deceased covered person's remains to replacement services\* Emergency cash advances, his or her place of residence for burial up to \$1,500\*\* Emergency message relay, toll-free Advancement of bail\*\* Assistance with making emergency travel arrangements\*\*

#### 3

#### NYL GBS Secure Travel

From the United States and Canada, call (888) 226-4567 From other locations, call collect (202) 331-7635 Fax: (202) 331-1528

Email: ops@us.generaliglobalassistance.com Emergency services must be coordinated through Generali Global Assistance. Services coordinated outside of this

program may not be eligible for payment.

Policyholder name: \_\_\_\_\_

Policy # \_\_\_\_\_ Group#57

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#### To learn more, call (888) 226-4567

- \* Emergency Assistance services may be insured under a group or blanket insurance policy issued by Life Insurance Company of North America. All other NYL GBS Secure Travel services are NOT insurance and do not provide reimbursement of expenses or financial losses. Expenses for medical care are not covered.
- \*\* Covered person is responsible for any advances, payments, travel-related or replacement costs and must provide confirmation of reimbursement. Credit card(s) used to guarantee reimbursement must have sufficient available limit to cover the amount of the advance.
- \*\*\* Initial transport by ambulance following a covered medical emergency is excluded.

#### THE FLEXIBLE BENEFITS PLAN

The Flex Plan allows you to reclassify a portion of your paycheck into a pre-tax position. The dollars designated for these expenses will not be included in your taxable income, thereby increasing your take home pay.

The Plan requires you to estimate, in advance, the expenses you predict you will have for the year in any of the categories eligible under the plan. These expenses, which you pay yourself, are dollar amounts you can have reclassified on your paycheck as pre-tax dollars. The Plan Year runs from January 1 through December 31.

When you make an online election, the amount you have elected for the year will be divided by the number of your anticipated regular pay periods, and will be deducted pre-tax on your checks. As you incur expenses, you complete a "reimbursement request" or use your debit card provided by the company, attaching copies of receipts for these expenses and submit them to Medsurety or upload receipts to the online website. Those expenses you have incurred will then be reimbursed to you directly by check, or by direct deposit, whichever you choose. This results in your expenses being repaid to you tax-free.

The categories in which you may elect your expenses are:

<u>Dependent Care:</u> These are expenses incurred for someone who cares for your child or dependent while you are at work. The expenses for which you may be reimbursed are those which qualify as "Dependent Care Assistance" under Section 129 of the Internal Revenue Code.

<u>Health Flexible Spending Arrangement (FSA):</u> Your out-of-pocket medical and dental expenses (not reimbursed by insurance) are elected in this category. Typical expenses are deductibles and co-pays, orthodontia, vision, hearing aid costs, elective surgery, family counseling and treatment programs. A general list of eligible expenses is found on the next page. A complete listing of eligible medical expenses can be found in IRS Publication 502.

<u>NOTE:</u> If you enroll in the health and dental plans, or elect supplemental life insurance, your share of the insurance premiums are automatically put into a pre-tax position unless you sign a form to waive this benefit. Waivers are available in the Human Resources Department.

Estimate your expenses carefully! You will not be able to change your election during the Plan year unless you have an eligible "change in status." If you estimate more than you actually spend in that plan year, you will lose the difference between what you have estimated and what you actually spent.

More detailed information on the Flex Plan may be obtained on the "Benefits" page of the "Human Resources Department" web site.

If you have questions regarding the Flexible Benefits Program, please call Emily Grote at (507) 663-0627 or Medsurety customer service at 1-888-816-4234 or visit the Medsurety website at Medsurety.com.

# **Contact information**



# **Human Resources at Northfield Public Schools:**

Emily Grote Molly Viesselman

Email: egrote@northfieldschools.org Email: mviesselman@northfieldschools.org

# Look out for an email from the HR department with your enrollment instructions!

Medical Pharmacy	BlueCross BlueShield  Client Portal	Member Services: Toll Free: 1-800-382-2000 Local: 651-662-8000
Dental	Delta Dental  Client Portal	Member Services: Toll Free: 1-800-448-3815 Local: 651-406-5901 7:00am - 7:00pm
Vision	VSP  Client Portal	Member Services: Toll Free: 1-800-877-7195 8:00am - 7:00pm
Life / AD&D Long Term Disability	New York Life  Client Portal	Member Services: Toll Free: 1-800-225-5695 7:00am - 6:00pm
Flexible Spending Account (FSA)  Health Reimbursement Account (HRA)	MedSurety  Client Portal	Member Services: Toll Free: 888-816-4234 Local: 952-303-5700
Employee Assistance Program (EAP)	Sand Creek  Client Portal	Member Services: Toll Free: 1-888-243-5744 Company Code: northfield

#### **Annual Notices**

We're required to tell you about certain rights and responsibilities you have as an employee of Northfield Public Schools.

**View Your Notices** 



#### PAYROLL INFORMATION

#### **Contracted Teachers**

Salary checks will be distributed twice per month on or before the 15th and 30th of each month commencing each contract year in the month of September. If the pay date falls on a weekend or a holiday the check will be issued the work day prior. The Business Office will annually publish a list of payroll dates for the ensuing contract year.

Teachers will be paid on a 24 salary check schedule. The 24 salary check schedule will be paid in equal amounts beginning the 15th of September with the final check being issued on August 30th.

Payment for additional work will be made as reported by principals. Pay for extracurricular activities will be made according to the statement or the assignment and in accordance with contract language.

## **Salary Paid Employees**

Salary checks will be distributed twice per month on or before the 15th and 30th of each month. Semi-monthly salary will be calculated based on dividing annual compensation by the appropriate number of pay periods for the work year for the position.

## **Hourly Paid Employees**

Wage checks will be distributed twice per month on or before the 15th and 30th of each month. Wages paid on the 15th will be based on hours submitted through the 30th of the prior month. Wages paid on the 30th will be based on hours submitted through the 15th of the current month.

#### **Direct Payroll Deposit**

Northfield Public Schools payroll system works on a mandatory direct deposit basis. The employee is provided with a form that tells the payroll department to deposit their net pay into a checking or savings account at a bank, savings & loan, or credit union of their choice. Pay stubs may be obtained through the employee self serve system, SMARTeR, located on the NorthfieldSchools.org website under the staff apple area.

For new employees and Employees who have never logged into SMARTeR the User ID is your Employee ID number. The password is the district number plus the last 4 digits of your social security number (no spaces or dashes) in this format: 659XXXX. The Northfield Public Schools District Number is 659.

The first time you log into SMARTeR you will be asked to setup two-factor authentication so you will receive either a text or e-mail with a verification code every time you use the system.

#### REPORTING WORK RELATED INJURIES

Employees who are injured on the job should **immediately, or as soon as possible,** report the injury, even if the injury is considered minor, to the supervisors as listed below.

The supervisor is responsible for helping the injured employee call the Paradigm Nurse Triage Line at 1-844–847–8708. **Immediate reporting is vital in meeting guidelines affecting the employee's eligibility for coverage of medical bills or lost time.** If you have any questions on this information, please call the Human Resource Office - (507) 645-3406.

#### **Employee**

Building Custodians
Head Custodians
Child Nutrition Staff
Kitchen Managers
Secretaries
Teachers, Ed Assistants, Other Building Staff
H.S. Coaches, Non-Teacher Activities Advisors
M.S. Coaches
Community Education Employees
Family Ed Employees
Ventures Employees

#### Supervisor to report injury to

Head Custodian

Director of Buildings and Grounds

Kitchen Manager

Director of Child Nutrition Immediate Supervisor

Building Principal Activities Director

MS Assistant Principal

Community Education Director Early Childhood Coordinator

Ventures Coordinator

Superintendent

Upon receipt of notification via the Nurse Triage Line, Paradigm will complete and submit a "First Report of Injury" to our workers' compensation insurance carrier.

## MEDICAL COSTS

Administrators

If you experience medical expenses in relation to your approved claim, inform your health care provider that workers' compensation related bills should be submitted to:

Risk Administration Services, Inc. PO Box 89310 Sioux Falls, SD 57109-9310 1-800-732-1486

Payment of work-related injury costs is made directly to your health care provider by Risk Administration Services, Inc. You must provide the HR office with a report ofworkability that has been completed by the attending physician.

#### WAGE REPLACEMENT

In accordance with Minnesota Workers' Compensation Law, wage replacement benefits partially compensate employees for wages lost when an employee is unable to work due to **medical restrictions**. Payments of these benefits begin after the employee has been unable to work for more than **three** calendar days. If the employee has been unable to work for **ten** calendar days or more, benefits also will be paid for the first three days. These benefits are tax-free.

Generally, workers' compensation will pay approximately 2/3 of your salary for lost time. This amount may be coordinated with any accumulated sick leave you may have. The amount of your salary plus the amount of your workers' compensation lost time reimbursement shall at no time be greater than the amount of your regular salary.

# RETIREMENT

### PENSION PLANS

All public employees in the state of Minnesota are required by state law to belong to public pension plans. Our staff belong to those administered by Teachers Retirement Association (TRA) or Public Employees Retirement Association (PERA), both are a state-wide pension plans. Minnesota Statutes Chapters 353 and 354 set the rates for employer and employee contributions. Upon enrollment, TRA or PERA will contact you directly regarding your benefits under their pension plans. If you have any questions, please call the toll free numbers listed below:

Teachers Retirement Association (TRA): for Licensed Staff

1-800-657-3669 www.minnesotatra.org

Public Employees Retirement Association (PERA): for Non-Licensed Staff

1-800-652-9026 www.mnpera.org

# 403(b) TAX SHELTERED ACCOUNTS

Employees of Northfield Public Schools are eligible to pall11c1pate 111 403(b) Tax-Sheltered accounts as established pursuant to United States Public Law N. 98-370.

A 403(b) plan, also known as a tax-sheltered annuity plan, is a retirement plan for certain employees of public schools, employees of certain Code Section 501(c)(3) tax-exempt organizations and certain ministers. A 403(b) plan allows employees to contribute some of their salary to the plan. The employer may also contribute to the plan for employees based on individual contract language.

Application to participate, change or terminate a Tax-Sheltered account must be made on form I 0-03-WT, available from the Payroll Lead in the Finance Office. The purchase of Tax Sheltered accounts for any one employee is limited to two companies.

The amounts withheld from salary and paid for the purchase of a Tax-Sheltered account shall comply with provisions under Section 403(b) of IRS Code as amended and with Minnesota Statute. Employees are encouraged to seek professional financial advice regarding these limitations.

# STATE OF MINNESOTA DEFERRED COMPENSATION PLAN

The State of Minnesota Deferred Compensation Plan is a voluntary plan that allows employees to place a portion of their earnings into a pre-tax deferred investment program. Taxes on money set aside and earnings are deferred until the time of withdrawal. This allows employees to defer present income for long-term savings to supplement retirement and other benefits. This is a tax deferred retirement program authorized under Section 457 of the IRS Code.

Please contact Mary Czech in the Northfield Public Schools Finance Office at (507) 663-0628 for further information or enrollment forms for this program.

# Life comes with challenges.

# Your SandCreek Employee Assistance Program is here to help.

Your Assistance Program can help you reduce stress, improve mental health, and make life easier by connecting you to the right information, resources, and referrals. All services are free, confidential, and available to you and your family members. This includes access to short-term counseling and the wide range of services and resources listed below:

#### **Member Portal and App**

These digital tools enable you to access your benefits 24/7/365 with online requests and chat options. They also provide easy access to thousands of articles, webinars, podcasts, and tools covering total well-being.

#### **Mental Health Sessions**

Manage stress, anxiety, and depression, resolve conflict, improve relationships, overcome substance abuse, and address any personal issues.

#### Life Coaching

Reach personal and professional goals, manage life transitions, overcome obstacles, strengthen relationships, and build balance.

#### **Financial Consultation**

Build financial wellness related to budgeting, buying a home, paying off debt, managing taxes, preventing identity theft, and saving for retirement or tuition.

#### **Legal Consultation**

Get help with personal legal matters including estate planning, wills, real estate, bankruptcy, divorce, custody, and more.

#### **Work-Life Resources and Referrals**

Obtain information and referrals when seeking childcare, adoption, special needs support, eldercare, housing, transportation, education, and pet care.

#### **Personal Assistant**

Save time with referrals for travel and entertainment, seeking professional services, cleaning services, home food delivery, and managing everyday tasks.

#### **Medical Advocacy**

Get help navigating insurance, obtaining doctor referrals, securing medical equipment or transportation, and planning for transitional care and discharge.

#### **Contact Sand Creek EAP**

Call: 888-243-5744 Visit: SandCreekEap.com

**Northfield** is the company code that will be requested to create a Sand Creek account.

### STEP UP - STAFF WELLNESS COMMITTEE

Northfield Public Schools implemented the District wide staff wellness program starting with the 2007-08 school year. The Step UP Staff Wellness Committee is comprised of teachers, support staff and administrators, and works to prepare information, activities, and programs for all staff.

Our mission is to promote and support healthy lifestyle choices that improve the wellness of all district employees. We will provide a variety of activities and resources, as well as a monthly newsletter, featuring various wellness topics. Activities, topics, and speakers are brought to you based on areas of interest identified in a staff survey. Each building has a Step UP Wellness Committee representative that will connect with you regarding these monthly topics, resources and activities.

#### EMPLOYEE DRESS GUIDELINES

## **Key Concepts of Appropriate Workplace Dress**

We all agree that Northfield Public Schools employees should project a professional image for our students, fellow staff members, parents, and community. Northfield Public Schools has established business casual dress "guidelines" that allow our employees to work comfortably in the workplace. Because not all casual clothing is suitable for the workplace, these guidelines will help you determine what is appropriate to wear to work. Clothing that works well for the beach, yard work, dance clubs, exercise sessions, and sports contests is not usually appropriate for the work environment. Clothing that reveals cleavage, your back, your chest, your stomach or your underwear is not appropriate for a place of business, even in a business casual setting.

Torn, dirty, or frayed clothing is unacceptable. Any clothing that has words, terms, or pictures that may be offensive to other employees, students, parents or community members is unacceptable.

# **Guide to Business Casual Dressing for Work**

This is a general overview of appropriate business casual attire. Items that are not appropriate for work are listed, too. Neither list is all-inclusive and both are open to change. The lists tell you what is generally acceptable as business casual attire and what is generally not acceptable as business casual attire.

No dress guide can cover all contingencies so employees must exert a certain amount of judgment in their choice of clothing to wear to work. If you experience uncertainty about acceptable, professional business casual attire for work, please ask your supervisor.

#### Slacks, Pants, and Suit Pants

Slacks that are similar to Dockers and other makers of cotton, wool or synthetic material pants, jeans, and uniform pants are acceptable. Inappropriate slacks or pants include torn or ragged jeans, sweatpants, exercise pants, short shorts, and any spandex or other form-fitting pants such as people wear for biking. Exercise clothing is acceptable for staff providing physical education instruction.

#### Skirts, Dresses, and Skirted Suits

Casual dresses and skirts, and skirts that are split at or below the knee are acceptable. Miniskirts and spaghetti-strap dresses are inappropriate for the workplace.

#### Shirts, Tops, Blouses, and Jackets

Casual shirts, dress shirts, sweaters, tops, golf-type shirts, turtlenecks, and uniform shirts are acceptable attire for work. Most suit jackets or sport jackets are also acceptable attire for the workplace, if they violate none of the listed guidelines. Inappropriate attire for work includes tank tops; midriff tops; shirts with potentially inappropriate words, terms, logos, pictures, cartoons, or slogans; halter-tops; tops with bare shoulders; torn or ragged sweatshirts and t-shirts.

#### **Shoes and Footwear**

Athletic, walking or dress shoes, loafers, clogs, sneakers, boots, flats, dress heels, and leather sandals and deck-type shoes are acceptable for work. Closed toe and closed heel shoes are required in the areas where mechanical equipment is operated.

### Jewelry, Makeup, Perfume, Cologne and Tattoos

Jewelry should be in good taste, with limited visible body piercing. Remember, that some people are allergic to the chemicals in perfumes and make-up, so wear these substances with restriction. Tattoos should be minimally visible in the work place.

### **Hats and Head Covering**

Hats are not appropriate in the workplace. Head Covers necessitated by medical or health conditions and those that are required for religious purposes or to honor cultural tradition are allowed.

#### Conclusion

If clothing fails to meet these standards, as determined by the employee's supervisor, the employee will be asked not to wear the inappropriate item to work again. If the problem persists, the employee may be sent home to change clothes and will receive a verbal warning for the first offense. Progressive disciplinary action will be applied if dress guideline violations continue.

# JOB DESCRIPTIONS, EMPLOYMENT AGREEMENTS, AND SCHOOL BOARD POLICIES

### **JOB DESCRIPTIONS**

Job descriptions for District positions are available on the District website. The job descriptions can be found at <a href="www.northfieldschools.org">www.northfieldschools.org</a> Go to Departments, then to Human Resources, and then choose Job Descriptions.

### **EMPLOYMENT AGREEMENTS**

Employment agreements for all District employment groups are available on the District website. The employment agreements can be found at <a href="www.northfieldschools.org">www.northfieldschools.org</a> Go to Departments, then to Human Resources, and then choose Employment Agreements.

## SCHOOL BOARD POLICIES

School Board policies can be found on the District website: <a href="www.northfieldschools.org">www.northfieldschools.org</a> Go to About the District, then to School Board, and then choose Policies.

#### NORTHFIELD PUBLIC SCHOOLS

#### STAFFNISITOR IDENTIFICATION BADGES

The Northfield School District is committed to providing a safe and secure environment for students, staff and visitors. As part of its efforts in this regard, it is the policy of the School District to require staff, substitutes, visitors and volunteers to wear appropriate identification as described below. Please refer to Policy 903 on the District website for complete information regarding staff/visitor identification badges and please refer to district Policy 655 on the District website for complete information regarding School Volunteers and Volunteer Background checks.

#### Permanent School Employees:

Photo ID's will be provided by the School District and must be worn at all times by permanent employees of Northfield Public Schools when they are in school buildings. Should a replacement badge be needed for any reason, please contact the Human Resources or Buildings and Grounds Office immediately. In the interim, employees should obtain a temporary badge from the school office.

If the employee loses their ID badge, there is a \$10.00 replacement fee. If the badge breaks it will be replaced at no charge when the broken badge is turned in to the Human Resources Office. Please report lost or stolen badges to the HR Department or Buildings and Grounds Department immediately! Your badge is a key to your building and needs to be deactivated as quickly as possible.

#### Substitute Employees:

"Substitute" badges will be issued to individuals who are subbing within the buildings of Northfield Public Schools. Such badges must be worn whenever the individual is in school buildings. Such badges will be temporary and do need to be turned in at the end of the assignment.

#### Visitors/Volunteers:

All volunteers must complete and pass the required volunteer background check via the district website prior to volunteering. These background checks are only valid for one school year and must be redone annually. Prior to entering the building visitors and volunteers are required to register and obtain a "Visitor" or "Volunteer" badge in the main office of the school building, and to return the badge and check out at the end of the visit.

All school employees are responsible to help monitor people in the school buildings and are expected to either escort visitors who do not have badges to the office to register and get a "Visitor" or "Volunteer" badge, or to alert office personnel that they have directed a visitor or volunteer to the office.

Any suspicious persons in the building are to be reported to the office immediately.