

HB 1260

Presented by the State Personnel Department



Agenda

- Reviewing the timeline
- Accessing the form
- Completing the form
- Answering questions



Reviewing the Timeline

HEA 1260 Compliance Timeline

2022	Employer's cost for plans beginning in 2022 should not exceed the State plan costs by 12%.
12/31/2022	Schools file report of their costs.
2/14/2023	(or 45 days after renewal) those with employer costs exceeding the State's cost by greater than 12% submit plan to achieve compliance.
12/31/2023	Schools file report of their costs



Accessing the Form

- You may access the form and instructions on our Indiana School Corporations website
<https://www.in.gov/spd/benefits/indiana-school-corporations/employee-health-benefits-for-indiana-school-corporations/>
- Click the School Corporation Workspace
- Enter your school's information to begin the report
 - ▣ School corporation ID, name, location, and contact information
- Login trouble? Email BenefitingSchools@spd.in.gov



Completing the Form

- Begin by entering each medical plan offered through the school corporation. This will include the plan name, type, and the duration of the plan year. Each plan will need to be added individually.

Medical Plans

Name of Medical Plan *

Type of Medical Plan *

Please select an option ▼

Plan Year Start *

Plan Year End *

Insurance Type *

Please select an option ▼



Completing the Form

- This section will continue to go over the coverage levels. In this section you will enter the number of enrollees and the annual cost per enrollee. Upon completion, you will need to select the add item button after each plan or the information will not save.

Employee Only Coverage - No. of Enrollees	Employee Only Coverage - Annual Employer Contribution
Employee + 1 - No. of Enrollees	Employee + 1 - Annual Employer Contribution
Employee + Spouse - No. of Employees	Employee + Spouse - Annual Employer Contribution
Employee + Spouse + 1 - No. of Enrollees	Employee + Spouse + 1 - Annual Employer Contribution
Family - No. of Enrollees	Family - Annual Employer Cost

ADD ITEM



Completing the Form

- After the medical plans have been added, you will then go onto the next section which goes into further detail of these plans. If the section has a red asterisk (*) by it, a response is required.

1. Total number of health insurance eligible employees, including board members and legal counsel (do not include dependents or retirees): *

1a. How many of your health insurance eligible employees are teachers? *

2. Are all individuals insured under the school corporations employee health coverage eligible for the same plans: *

Please select an option

2a. If your answer is "No", please explain how your practice comports with IC 20-26-17-5(4)(A).

3. How many employees receive compensations for electing not to enroll in the group health insurance program: *



Completing the Form

- The final section will all be automatically calculated by the system. This screen will reflect the school corporations average cost compared to the States, so you are able to verify if the school was compliant for the plan year. Upon review, you will press submit.

11. Sum of lines 5, 8, 9, & 10:

12. School's Average Employer Cost Per Employee Per Year (line 11/line 7):

13. State's Average Employer Cost Per Employee Per Year for Plan Year Ending 12/31/2021:

14. State's Average Employer Cost Per Employee Per Year for Plan Year Ending %1: *

< PREVIOUS SUBMIT ←



Completing the Form

- ❑ You cannot save your work to revisit later, so make sure you have everything ready to complete the report prior to beginning it.
- ❑ Once you click Submit your information is submitted and you cannot go back into the same report and edit. Be sure your information is correct before hitting submit.
- ❑ If you realize you made any errors upon submission, you can go back into the system and redo your report from the very beginning.
- ❑ If you would like a copy of your report, you may request one by emailing BenefitingSchools@spd.in.gov



Questions

- Any questions?



Thank You

If you have questions after today, please contact the State Personnel Benefits Division

- ▣ Email: BenefitingSchools@spd.in.gov
- ▣ Toll free: (877) 248-0007
- ▣ Local (Indianapolis): (317) 232-1167