



monroe one
EDUCATIONAL SERVICES



New Year Medical Deduction Reminder

The new rates for January 2024 have been updated and will be reflected in your paycheck on 1/12/2024. As you know, all employees' medical deductions are taken on a 10-month schedule, with no deductions taken in the summer.

Between January and June, deductions are collected for July and August for all employees. These adjusted pre-pay deductions are reflected in your paycheck. To make this easy to view, you will notice we have split the deductions in your paycheck. You now have two separate deductions in your paycheck for medical.

The first deduction is based on the amount determined in your union contract and reflects your semi-monthly cost for medical coverage. This is half of the monthly amount. This rate will stay the same throughout 2024 (providing there are no re-negotiations impacting your collective bargaining agreement).

You will also see a second medical deduction coded "adjusted deduction" reflecting the amount due towards July and August premiums. This deduction will only be deducted from your pay through June 30, 2024. There are no deductions during July and August. You can calculate each deduction and compare to your paycheck. If you find any discrepancies, please contact Tracy Birge at tracy_birge@boces.monroe.edu. The monthly rates and a sample of these calculations are below.

Medical Deduction Calculation Sample

The monthly rates for full time employees are attached at the end of this document. A sample of the deduction is below.

To calculate semi-monthly medical deduction:

Take the Monthly premium and divide by 2.

To calculate the adjusted deduction:

Take the Monthly premium and multiply by 2, then divide that total by 12 (pay periods between Jan. and June.)

FOR EXAMPLE ONLY: BUP Collective Bargaining Agreement / Value Single medical

Monthly: \$138.18 divided by 2 = \$69.09 – Semi-monthly deduction

Monthly: \$138.18 * 2 = \$276.36 divided by 12 = \$23.03 - Adjusted deduction (Example deduction code 354-x)



Print Your Own 2023 W-2 and 1095-C on WinCapWeb
Get them faster & sooner than paper forms!

If you consented to print your own last year, you do **NOT** need to re-consent.

- These two tax forms will be available on WinCapWeb in mid-January for you to print yourself. No more waiting for the documents to be mailed to you!
- You must elect to receive the forms electronically. You can do that today:
 1. Sign into WinCapWeb and go to Employee Self Service. Select **My W-2 Consent Elections** on the side menu or from the menu dropdown, read the information, enter your WinCapWeb password and click on

Consent


2. Go to **My 1095-C Consent Elections** and follow the same procedure.

Employee Self-Service	Payroll Vc
My Attendance Balances	
My Leave Requests	
My Attendance Activity	
My Paychecks	
My Year to Date Totals	
My Employee Demographics	
My Paycheck Printing Elections	
My W-2 Consent Elections	
My 1095-C Consent Elections	

- A BOCES-wide email will be sent when the forms are ready for you to print them from WinCapWeb.
- You will not be mailed paper forms of your W-2 and 1095-C after consenting to receive it electronically. You can change your elections at any time.
- If you elect for us to mail your forms, you will need to wait until January 31st before they are mailed to you home.

FSA

Optional Funds you elect
Taken pre-tax.




Flex Spending/Section 125

Your new 2024 Section 125 Flex spending deduction will now appear on your paycheck. The deduction code for Medical is 370 and the deduction code for Dependent Care is 390. This deduction is taken during the 20 pay periods between January and December (excluding July and August). To calculate your annual amount elected take your deduction amount times 20 pays. Any funds of \$610 or less, remaining from 2023, will roll into your new 2024 account.

HSA

For those in
High Deductible
Plan only.




Health Savings Account for Employees enrolled in High Deductible Medical Plan for BUP & PSP & Full Time BUSS Collective Bargaining Agreements ONLY

Your new 2024 HSA spending deduction (if elected) will now appear on your paycheck. This is ONLY for employees that are enrolled in the High Deductible medical plan AND elected to have extra funds deducted for their HSA accounts. The deduction code is 380A. This deduction is taken during the 20 pay periods between January and December (excluding July and August). To calculate your annual amount elected take your deduction amount times 20 pays. Please Note: due to IRS regulations, we can no longer accept changes or new elections to this plan until the next Annual Enrollment.

HRA

Money BOCES gives
for co-pays, medical
expenses etc.



Health Reimbursement Account/105/HRA

For anyone enrolled in our RASHP 2 Value or Select plan, you received new HRA funds for 2024. Funds have been loaded in your account for the new year. If you had any leftover funds from 2023, they were also rolled into the new year.

To view your Benefit Resource account, please visit www.benefitresource.com. Then select Participant Login. If you have not logged into their new website you will need to “Register an Account”. The company code is **bocesmon**, your member id is your social security number.

MONROE #1 BOCES**2024 MONTHLY MEDICAL INSURANCE RATES** - for full time employees.**Single = EMPLOYEE ONLY****Sponsor = Employee plus Spouse****Head/House = Employee plus child(ren)****Family = Employee plus spouse and child(ren)****BUP** (*Teachers, Nurses*)

	Single	Sponsor	Head/House	Family
RASHP 2 Select	\$329.68	\$791.24	\$758.22	\$874.91
RASHP 2 Value	\$138.18	\$331.64	\$317.82	\$366.21
Signature Blue High Deductible	\$0.00	\$0.00	\$0.00	\$0.00

BUSS (*Transportation, Maintenance, Food Services, Security*)

	Single	Sponsor	Head/House	Family
RASHP 2 Select	\$329.68	\$791.24	\$758.22	\$874.91
RASHP 2 Value	\$138.18	\$331.64	\$317.82	\$366.21
Signature Blue High Deductible	\$0.00	\$0.00	\$0.00	\$0.00

BPA (*Para*)

	Single	Sponsor	Head/House	Family
RASHP 2 Select	\$306.65	\$735.96	\$705.25	\$813.88
RASHP 2 Value	\$115.15	\$276.36	\$264.85	\$305.18
Signature Blue High Deductible	\$0.00	\$0.00	\$0.00	\$0.00

PSP/MISC (*Prof Support - Clerical, Technology; Miscellaneous*)

	Single	Sponsor	Head/House	Family
RASHP 2 Select	\$320.47	\$769.13	\$737.03	\$850.50
RASHP 2 Value	\$128.97	\$309.53	\$296.63	\$341.80
Signature Blue High Deductible	\$0.00	\$0.00	\$0.00	\$0.00

BASA (*Administrators*)

	Single	Sponsor	Head/House	Family
RASHP 2 Select	\$329.68	\$791.24	\$758.22	\$874.91
RASHP 2 Value	\$138.18	\$331.64	\$317.82	\$366.21
Signature Blue High Deductible	\$0.00	\$0.00	\$0.00	\$0.00

**Please note July-August deductions for medical are taken out of the 12 pay periods from January-June.

DENTAL INSURANCE

2024 **monthly** rates for full time employees for Dental Insurance. **Taken the 2nd check of each month.

Single = EMPLOYEE ONLY**Family = Employee plus spouse/children**

	Single	Family
	\$5.47	\$15.16

Sick Leave Quick Guide



Sick 1-5 days

Employee must follow their department call-in procedure.

Employee must enter their own sick time in WinCapWeb.

If employee is out of sick time, must request no-pay day in writing to HR.

2-hr Medical Appt: Email proof of appointment to Payroll_department@boces.monroe.edu within 5 school days of appointment.

Family Sick 1-5 days

Employee must follow their department call-in procedure.

Employee must enter their family sick time in WinCapWeb.

Check collective bargaining agreement for number of family sick days allowed in a school/fiscal year.

2-hr Medical Appt for family: Email proof of appointment to Payroll_department@boces.monroe.edu within 5 school days of appointment.

COVID

Employee must follow their department call-in procedure.

Employee must enter their own sick time in WinCapWeb.

Submit proof of positive lab-administered test to Payroll_department@boces.monroe.edu

Subject of email should be **“Proof of positive COVID test”**.

If eligible, HR will recode sick days to COVID sick.

HR will NOT clear employee to return following isolation.

Employee will need to wear a mask on days 6-10 after returning to work following positive result.

If an employee does not wish to provide proof of a lab-administered test, they will need to stay home until symptoms are improving and they are fever free for at least 24 hours, while using the employee's own sick time.

Sick day 6+/FMLA

Employee must fill out the “Request for Extended Leave form in Frontline Central.

Further instructions will be sent to employees BOCES email.

Employee may not return to work until HR receives clearance from their Dr and notifies the employee they are cleared to return.

Professional Study LOA: Complete Professional Study Leave form in Frontline Central. Wait for approval.

Workers Comp

File accident report at nurses office.

If you miss work: notify HR Comp/Adina.

If you have any restrictions HR will need to confirm they can be accommodated prior to return.

All medical notes associated with a workplace injury should be sent by employee to Workers_comp@boces.monroe.edu

Miscellaneous

Follow links below form more information.

Funeral: [Human Resources Office / Death in the Family and Funeral Days \(monroe.edu\)](#)

Jury Duty: [Human Resources Office / Jury Days \(monroe.edu\)](#)

Monroe 1 BOCES

ARE YOU AWARE OF YOUR 403(b) BENEFIT?

New accounts may be opened with the following approved service providers.

THE OPPORTUNITY

You have the opportunity to save for retirement by participating in your Employer's 403(b) retirement plan. A 403(b) plan is a retirement plan for certain employees of public schools, tax-exempt organizations and ministries. We recommend that all employees visit our education page which can be found here:

<https://www.omni403b.com/Employees/Education>

WHY SAVE WITH 403(b)?

1. You do not pay income tax on allowable contributions until you begin making withdrawals from the plan, usually after your retirement.
2. Pre-tax investment gains in the plan are not taxed until distribution and eligible ROTH investment gains are tax free.
3. Generally, retirement assets can be carried from one employer to another.

Future retirement savings value assuming 6% growth

Monthly Contributions	5 Year	15 Years	20 Years
\$50	\$3,489	\$14,541	\$23,102
\$200	\$13,954	\$58,164	\$92,408
\$500	\$34,885	\$145,409	\$231,020

HOW CAN I PARTICIPATE?

Prior to contributing you must open an account with an investment provider authorized in the Plan, a list of which is available on the right. You may then complete a Salary Reduction Agreement (SRA) online at: <https://www.omni403b.com/SRA>

If you are already contributing to your Employer's Plan and you want to change your contribution amount or investment provider, simply complete and submit a new SRA. Once we are in receipt of the newly completed SRA, we will notify your employer to begin contributions.

HOW MUCH CAN I CONTRIBUTE ANNUALLY?

In 2024, you may contribute up to \$23,000 if you are 49 years of age or below and up to \$30,500 if you are 50 years of age and over. You may also be entitled to additional catch-up provisions like the 15 Year Service Catch-up. Please contact OMNI's Customer Care Center at **877.544.6664** for further details.

Contribution Limits		15 Yr. Service Catch-up (if eligible)	Maximum Employer Contributions	Combined Limit	
Age 49 & below	Age 50 & above			Age 49 & below	Age 50 & above
\$23,000	\$30,500	\$3,000	\$69,000	\$69,000	\$76,500

LOOKING FOR HELP?

Click the link below for an investment professional to reach out to you.

<https://www.omni403b.com/PlanDetail>

AMERIPRISE FINANCIAL RIVERSOURCE
ASPIRE FINANCIAL SERVICES
COREBRIDGE FINANCIAL FORMERLY AIG VALIC
EQUITABLE FORMERLY AXA
INVESCO OPPENHEIMERFUNDS
LINCOLN INVESTMENT PLANNING
METLIFE
NY LIFE INS ANNUITY CORP
ORION PORTFOLIO SOLUTIONS LLC FORMERLY FTJ FUNDCHOICE
SECURITY BENEFIT
THE LEGEND GROUP A LINCOLN INVESTMENT COMPANY
VOYA FINANCIAL NATL NY

