

SWCD OF ILLINOIS EMPLOYEE HEALTH PLAN
SWCD EMPLOYEE GROUP INSURANCE POLICIES AND PROCEDURES

1. The SWCD of Illinois Employee Health Care Plan (herein after referred to as Local Government Health Plan).
LGHP will have an insurance committee consisting of one district employee from each of the five Bureau of Land and Water Resources regions, an advisor from the Bureau of Land and Water Resources (BLWR), an advisor from the AISWCD, and an advisor from the Soil and Water Conservation Districts Advisory Board that will have the following responsibilities:
 - a. Seek the best coverage at competitive prices by soliciting bids for contract, as needed, to be determined by the Illinois Soil & Water Conservation District Employee Association (ISWCDEA) Board.
 - b. Committee shall make contact with employees they represent and keep the line of communications open.
 - c. Review and update policies and procedures annually.
 - d. Send copy of minutes of any insurance meeting to the Plan Administrator, [AISWCD](#), BLWR [Central office](#), BLWR regional representatives and Co-Chairs of the ISWCDEA.
 - e. Review and adjust coupon to stay current on premiums.
 - f. Make special issues decisions.
 - g. Review financial statements from the plan administrator each month as mailed.
2. Any employee who works a minimum of 50% of the regularly scheduled hours for their field office is Eligible for LGHP insurance coverage at their own expense. SWCDs will have the option of subsidizing the employee's premium.
3. To be eligible for the LGHP, a district director must be a current elected SWCD official. Eligibility is valid only during the SWCD director's term of office. An eligible SWCD director may apply for participation in the LGHP at their own expense.
4. IDoA subsidized premiums are available to full-time (37 hours weekly) Administrative Coordinators (AC) and Resource Conservationists (RC). If a district employee who has been employed longer than 60 days assumes a full-time AC or RC position, subsidized premiums will be available on the first day of the month after their average work schedule changes to 37 hours per week. IDoA subsidized premiums will be discontinued the first day of the month following a work schedule change that reduces the AC or RC to less than 37 hours per week.
 - a. [Please note that IDoA's subsidization of the LGHP insurance hinges upon funding available through the annual state budget. Subsidization is not guaranteed.](#)
5. Full-time ACs and RCs who change employment between districts will continue without a break in their coverage. This would be considered a "qualifying change" and the affected employee could change providers if needed. Other full-time and eligible part-time employee's coverage will also continue without a break in coverage. However, the employee needs to verify the new district's policy for assistance with premiums as this varies from county to county.
6. Eligible employees and directors participating in the program may enroll their spouse or dependants in the program at their expense.
7. IDoA subsidized insurance will be suspended for employees on approved **unpaid leave of absence** on the 1st day of the month following notification of beginning of unpaid leave of absence. Employees wishing to continue coverage while on unpaid leave of absence may arrange for direct billing at their own expense. [\(Approved unpaid leave of absence is defined as approved leave after all comp, vacation, personal and sick leave has been exhausted.\)](#)

8. IDoA subsidized insurance will continue for employees on approved **paid leave of absence**. (Approved paid leave of absence is defined as approved leave while utilizing available, comp, vacation, personal or sick leave.)
9. Benefit Choice Period is the time of the year LGHP members review and/or changes to their health plan. The Benefit Choice Period is the **ONLY** time other than after qualifying changes in status that members can change plans or add/drop dependent coverage. Refer to your LGHP Benefits Choice Handbook for more information or contact CMS at 800-442-1300. Changes for insurance coverages must be requested by completing the LGHP membership correction /change form and submitting the signed form to the plan administrator. If you do not receive verification of your changes within two weeks, it is your responsibility to contact the plan administrator.
10. SWCD's must immediately (10 days prior to the last day of employment) notify both the Bureau of Land and Water Resources (BLWR) and the plan administrator when an employee gives notification of termination of employment. Please use the SWCD Personnel Status form for notification purposes.
11. All SWCD employees and SWCD directors who are participants in the LGHP are eligible for COBRA coverage upon termination or voluntary leave of employment with the SWCD or term of the elected official with the SWCD. Persons who elect continued coverage through COBRA will be entitled to the basic health coverage, subject to a 2 percent surcharge. The responsibility for collection of COBRA related payments from former employees or elected SWCD directors rests with the district that was the final employer or with the district from which the SWCD director served. COBRA laws require a 30 day grace period for all premium payments. A notice of early termination will be sent within 15 days to COBRA participants and the applicable district by certified mail.
12. New employees will not be eligible for coverage until the first day of the month following 60 days from their initial day of employment. Newly elected SWCD directors will not be eligible for coverage until the first day of the month following 60 days from their initial start of elected term.
13. Newly employed participating employees will begin payroll deductions of any premiums beginning with the first pay period.
14. SWCD's will set up a payroll deduction procedure for the necessary plan contributions and will be responsible for making payments on time to the plan administrator. Payments in excess of 30 days past due may result in termination of coverage. Employees interested in tax free contributions will need to contact AFLAC to set-up a Section 125 plan.
15. All premiums not subsidized will be made quarterly to the plan administrator and payments must be made with a SWCD check only and must be submitted with the appropriate coupon provided.
16. Each employee's Benefit Choice Option booklet will indicate the types of coverage and/or coverage of dependents. Employment contracts will specify those coverages and the appropriate party responsible for premiums as well as the amount of each responsible party's premium.
17. Each elected SWCD director's Benefit Choice Options booklet will indicate the types of coverage and/or coverage of dependents. Participating elected SWCD directors are responsible for premiums and must submit those premiums to their SWCD. The SWCD is responsible for making quarterly payments for participating elected SWCD directors using the appropriate coupon provided.
18. All insured employees and directors are responsible for notification to the plan administrator of any change of status (marriage, birth of child, etc) that affects their coverage as well as personal address changes.

19. The plan administrator will follow proper financial procedures for this fund and will provide proper reports of the financial transaction throughout the year. These funds will be audited as an individual account and the results of that audit will be provided to the insurance committee and to the Bureau of Land and Water Resource (BLWR).
20. The entire amount of funds for all participating SWCD employee contributions and participating elected SWCD directors contributions will be deposited in an interest bearing account with plan premiums paid to the insurance carrier on a monthly basis. Interest accrued on the account will be applied to help offset plan expenses.
21. Information regarding questions, claims, etc. can be obtained by contacting your managed care insurance carrier, CIGNA for Local Care Health Plan (LCHP) claims or the plan administrator. Refer to the LGHP Benefits choice booklet for the Toll-Free telephone numbers.

These policies and procedures are provided as a means for informing participants of operational decisions. These policies and procedures are in no way intended to supercede, alter or in any way abridge the carrier's Benefit Choice Options booklet. Always consult your individual carrier's benefit choice options booklet for detailed information concerning your policy's limitations, coverages and exclusions.

As the employer of persons who participate in the Illinois Local Group Health Plan (LGHP), we acknowledge that we have read and understand the policies and procedures and the Board's responsibilities contained herein.

Chairperson Signature

Date

_____ County SWCD Board

PLEASE RETURN *"THIS SIGNED PAGE ONLY"* TO:

MARION COUNTY SWCD
ADMINISTERING COUNTY
1550 E. MAIN STREET
SALEM, IL 62881