

MTA (Monticello Teachers' Association) Benefit Trust

**39 Breaky Ave
Monticello, New York 12701**

Wrap Plan Booklet

**Rose Joyce-Turner – Chair Trustee
Yesenia Kreeger – Trustee/Member Benefits Facilitator
Cynthia Grant – Secretary Trustee
Carolyn Strahan – Trustee
Tyler Laufersweiler – Treasurer**

EMPLOYER IDENTIFICATION NUMBER: 141 – 814-869

PLAN NUMBER:

2024 - 2025 Plan Booklet

2024 - 2025

Dear Participant:

The MTA Benefit Trust (the “Plan” or the “Fund”) is pleased to provide you with this Booklet summarizing the benefits available to you through the Fund. The Fund was established to provide Participants and their Dependents with supplemental benefits permitted under the Internal Revenue Code. This Booklet is not a contract and does not guarantee any benefits. The actual terms and conditions of the Benefit Programs are contained in the Official Documents, which are incorporated by reference. This Booklet, in conjunction with the Official Documents, together provide the details of your benefits.

Although some of the Benefit Programs offered by the Fund may provide legal or financial advice, the Fund itself does not offer investment, legal, or tax advice. Participants are urged to consult their own investment, financial, tax, and legal advisers to help them with an evaluation of the Benefit Programs.

The Benefit Programs described herein are purchased through the NYSUT Member Benefits Trust Fund and provided by Benefit Providers. You should review the materials that have been provided by the Benefit Providers for more detailed information about your Fund benefits.

This document is not to be considered a substitute for the Official Documents maintained by the Benefit Providers. If a discrepancy arises between this Booklet and the Official Documents, the Official Documents will govern.

We have made every effort to ensure that this information is as up-to-date and transparent as possible. If you would like to receive additional information on any of the Benefit Programs, please contact any of the Trustees at the Fund Office or contact the Benefit Providers directly.

Sincerely,

BOARD OF TRUSTEES:

Rose Joyce – Turner—Trustee Chair _____

Yesenia Kreeger – Trustee/Member Benefits Facilitator _____

Cynthia Grant – Secretary Trustee _____

Carolyn Strahan – Trustee _____

Tyler Laufersweiler – Treasurer _____

IMPORTANT NOTICES

Claims Procedures

To the extent that the Benefits provided necessitate the submission of a claim, such Claims procedures are included in the applicable Benefit Program Official Documents. Briefly, Claims procedure information includes the following:

- Procedures for filing claim forms, providing notifications of benefit determinations, and reviewing determinations in the case of any plan; and
- Applicable time limits and remedies available under a Plan for the redress of claims, which are denied in whole or in part.

Any questions regarding claim procedures should be directed towards the claims administrator of the applicable Benefit Program.

Termination or Amendment of the Plan

The Plan Sponsor (the Board of Trustees) has the right to modify or amend the Plan, in whole or in part, to change or discontinue any of the Benefit Programs, or to terminate the Plan at any time.

No Guarantee of Income Tax Consequences

Neither the Board of Trustees nor the Benefit Trust Fund Office makes any commitment or guarantee that any amounts paid to, or for the benefit of, a Participant under this Plan will be excludable from the Participant's gross income for federal or State income tax purposes, or that any other Federal or State tax treatment will apply to or be available to any Participant.

Notices

You should send notices to Benefit Providers to their addresses, as specified in their brochures. You must provide notice to the applicable Benefit Provider or in the event that you are divorced or legally separated, your domestic partner fails to qualify as a domestic partner, or if your dependent ceases to meet the eligibility requirements for being covered as a dependent under the applicable Benefit Program.

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ARTICLE 1 – DEFINITIONS

For the purposes of this Plan, the terms below are defined. However, in the event of a conflict between the definition specified in this document and the definition stated in an Official Document issued by the Benefit Provider, the definition used in the Official Document will govern. Thus, you should be aware of the definitions used in the Official Documents you receive.

Section 1.01 Beneficiary

A “Beneficiary” is a person designated by a Participant under the terms and conditions of a Benefit Program provided by this Plan.

Section 1.02 Benefits

“Benefits” are payments or services that you may be entitled to under a Benefit Program provided by this Plan.

Section 1.04 Dependent

A “Dependent” is a legal spouse, domestic partner, or Child or such other individual eligible for Benefits as determined under the rules and requirements of a Benefit Program.

Section 1.04 Employer

The “Employer” is the Board of Education, Monticello Central School District, Town of Monticello, Sullivan County, New York.

Section 1.05 Official Document(s)

“Official Documents” are the Master Insurance Policies, your Individual Insurance Policy, and other policies, certificates, contracts, or similar documents issued to you by the Benefit Providers that set forth the terms and conditions of the respective Benefit Programs.

Section 1.06 Participant

You are a “Participant” in this Plan if you are covered by a Collective Bargaining agreement with the Monticello School District requiring them to contribute to the Fund on your behalf. You are not entitled to any coverage if you are terminated from the district and/or choose to resign from the district at any time.

Section 1.12 Union

The “Union” is the Monticello Teachers’ Association, NYSUT, NEA, AFT.

ARTICLE 2 – GENERAL

Section 2.01 About this Plan

The name of this Plan is the Monticello Benefit Trust Fund– referred to in this document as the “Plan” the “Trust Fund,” or the “Fund.” The Trust Fund is sponsored by the Board of Trustees, which is jointly administered by the Employer and the Union. The purpose of this Plan is to provide Participants and their Dependents with access to Benefit Programs endorsed by the NYSUT Member Benefits Trust and provided by independent Benefit Providers who are solely responsible for the Program Contracts; eligibility determinations; coverage and exclusions; and for paying claims and resolving any disputes about Benefits.

The Trust Fund is a tax-exempt, not-for-profit Trust Fund established and maintained for the exclusive benefit of the Participants of the Trust and their Dependents.

Section 2.02 Plan Trustees

The names and titles of your Plan’s Trustees are listed on the cover of this Booklet. For all Plan Trustees, their business address is: 39 Breakey Ave. Monticello, NY 12701

Section 2.03 Plan Administrator and Service of Legal Process

The Board of Trustees is the Plan Administrator. Any member of the Board of Trustees may be served process at the above address. Service upon one Trustee will be deemed to be service upon all Trustees.

Section 2.04 Plan Year

The Plan Year begins on June 1 and ends on May 31.

Section 2.05 How Benefits are Provided

This Plan has entered into agreements with the Benefit Providers to provide the Benefit Programs described below.

The Benefit Providers and Benefit Programs are:

- The National Legal Office of Feldman, Kramer & Monaco, P.C. provides the Group Access Legal Service Plan. The mailing address for Feldman, Kramer & Monaco is 330 Vanderbilt Motor Parkway, Hauppauge, NY 11788.
- Empire Dental: Empire BlueCross Blue Shield PO Box 810 Minneapolis, MN 55440-0810 (877)-606-3338
- Anthem Life & Disability Insurance Company Administrative Office Post Office Box 182361 Columbus, OH 43218-2361 1 (800) 551-7265
- NVA: Attention Shelter Point P.O. Box 2187 Clifton, NJ 07015
- IDWATCHDOG: PO Box 71221, Charlotte, NC 28272 [ID Watchdog](#) 866-513-1518
- MEDICAL REIMBURSEMENT—MEMBER BENEFIT FACILITATOR (Yesenia Kreeger)
- STACEY BRAUN FINANCIAL PLANNER: 377 Broadway, NY, 10013 212-226-7707
- DEFENSIVE DRIVING COURSE REIMBURSEMENT: [Safety Serve Inc. -- What Do You Want to Learn Today?](#)

ARTICLE 3 – ELIGIBILITY

Section 3.01 Eligibility

Any individual who is working under a Collective Bargaining Agreement requiring contributions to the Fund will automatically be eligible for and enrolled in the Plan's benefits.

Section 3.02 Need for Enrollment: Time Limits

Eligible employees must complete an application form to enroll themselves and/or their eligible spouses and dependents. New employees must enroll within **30 days** from date of hire. Otherwise, enrollment generally is limited to the annual open enrollment period

in June. “Change of life” occurrences that affect your coverage must be made within 30 days of said event (loss of coverage, birth or adoption of a child, marriage, divorce, death).

Section 3.03 Unpaid Leave

If a member takes an unpaid leave during the course of the school year, that member may elect to pay the **full premiums** to the MTABT *to maintain coverage for dental, vision, life, IDWatchdog, Stacey Braun Financial Planner and legal plans*. The cost will be reflected in the current plan year. The member must notify the Benefit Trust Committee within thirty (30) calendar days of their desire to retain their coverage after going on unpaid leave and remit the proper funds needed to continue the plan benefits. After thirty (30) days all plan benefits will be discontinued. The member must also notify the Benefit Trust upon their return to full employment with the district. Your coverage does not resume automatically. The district does not notify us about your change of circumstance; you must.

2024-2025 Fee Structure:

- The Monthly premium for our Shelter Point Vision plan is: Single: \$7.81; Family: \$19.77 (covered by Benefit Trust)

- The Monthly premium for Empire Dental plan is: Single: \$45.31; Family: \$137.97

- The Monthly premium for our Anthem Life Insurance is: \$7.50 (covered by Benefit Trust)

- The Monthly premium for the NYSUT Legal Plan is: \$6.25 (covered by Benefit Trust)

- The Monthly premium for the ID Watchdog is: Single: \$4.40; Family \$6.30 (covered by Benefit Trust)

- The Monthly premium for the Stacey Braun Financial Planner is: \$2.92 (covered by Benefit Trust)

ARTICLE 4 – GROUP ACCESS LEGAL SERVICE PLAN

Section 4.01 What is the Group Access Legal Service Plan?

The Group Access Legal Service Plan provides access to attorneys who will answer legal questions, write letters and review documents concerning personal legal matters. Guaranteed maximum fees for specific legal matters; two, free, hour-long office consultations; and discounted rates for legal representation are included. The Group Access Legal Service Plan also includes a Simple Will, Health Care Proxy, Living Will, and Power of Attorney and the Elder Law Rider.

Section 4.02 Who is eligible for coverage under this Program?

In addition to the Program Participant, the spouse or domestic partner who is living with the Participant; unmarried, Dependent Children under the age of 19 (or under the age of 25 if the Child is wholly dependent upon the Program Participant for support and maintenance and is enrolled as a full-time student); and Dependent parents are eligible for coverage.

Section 4.03 Who provides the Benefits under this Program?

Legal advice is provided by the National Legal Office attorneys or by a local referral attorney. The National Legal Office is Feldman, Kramer & Monaco, P.C. In the event that your problem cannot be resolved with telephone advice or by correspondence, you will be referred to a participating referral attorney in your area. Referral attorneys are located throughout the continental U.S. All are licensed and will provide legal representation at discounted rates. This Program is administered by the NYSUT Member Benefits Trust.

ARTICLE 5 – EMPIRE DENTAL PLAN

Section 5.01 What is the Empire Dental Plan?

Monticello Teachers Assoc. Benefit Trust Group Number 300191 – Empire Dental / Essential Choice

The Summary of Benefits is a summary of the Deductibles, Coinsurance and other Limits that apply when you receive Covered Services from a Provider. Please refer to the Covered Services section of this Certificate for a more complete explanation of the specific services covered by the Plan. All Covered Services are subject to the conditions, exclusions, limitations, terms and provisions of this Certificate including any attachments or riders.

- Coverage Year: Calendar Year - A 12-month period starting January 1
- Dependent Age Limit: On the birthday in which the child attains age 26.
- Benefit Waiting Period: There are no benefit waiting periods.

Section 5.02 Dental Benefit Maximums

Dental Benefit Maximums (combined for Participating and Non-Participating Dentists) Coverage Year Maximum. Your combined benefits, excluding orthodontics, are subject to the Coverage Year Maximum. We will not pay any benefit in excess of that amount during a Coverage Year.

- Orthodontic Services Lifetime Maximum. Your orthodontic benefits are subject to the Orthodontic
- Services Lifetime Maximum. We will not pay any orthodontic benefits in excess of that amount during a member's lifetime
- Coverage Year Maximum \$2,000.00 per Member
- Orthodontic Services Lifetime Maximum \$2,000.00 per Member

Section 5.03 Who is eligible for coverage in this Program?

In addition to eligible Participants, the service covers spouses / domestic partners and dependents.

Section 5.04 Who provides the Benefits under this Program?

Empire Dental: Empire BlueCross Blue Shield P.O. Box 810, Minneapolis, MN 55440-0810 (877)-606-3338.

ARTICLE 6 – ANTHEM LIFE INSURANCE

Section 6.01 What is Anthem Life Insurance?

Basic Life Insurance Amount of Your Basic Life Insurance \$25,000 All Benefits terminate at retirement. Your amount of Basic Life Insurance will be subject to any reductions listed in the Age Reductions provision of this Certificate.

Section 6.02 Who is eligible under this Program?

Only the current MTA members are eligible for benefits.

Section 6.03 Who provides the Benefits under this Program?

Anthem Life & Disability Insurance Company Administrative Office Post Office Box 182361 Columbus, OH 43218-2361 1 (800) 551-7265

ARTICLE 7 – SHELTER POINT VISION PLAN

Monticello Teachers Assoc. Benefit Trust Group Policy GVNY7202 Shelter Point/NVA

Section 7.01 What is Shelter Point Vision?

Offering Vision Benefits does a lot more than offer employees with access to discounted eyewear. Regular eye exams can provide early detection of eye diseases, as well as health conditions such as diabetes, and high blood pressure. Our plans provide the freedom to choose any Vision care provider, but members may save more at a network provider. Plus, examinations and single vision lenses are covered at 100% when using a participating provider.

Section 7.02 Who is eligible for coverage under this Program?

In addition to eligible Participants, the service covers spouses / domestic partners and dependents.

Section 7.03 Who provides the benefits under this Program?

NVA: Attention Shelter Point P.O. Box 2187 Clifton, NJ 07015

ARTICLE 8 – ID WATCHDOG

Section 8.01 What is ID WATCHDOG?

This is an identity theft coverage to have your accounts monitored. This is a fully covered benefit for you and your family (up to 10 members).

Section 8.02 Who is eligible under this Program?

Only the current MTA members are eligible for benefits.

Section 8.03 Who provides the Benefits under this Program?

IDWATCHDOG: PO Box 71221, Charlotte, NC 28272 [ID Watchdog](#) 866-513-1518

ARTICLE 9 – Medical Reimbursement

Section 9.01 What is Medical Reimbursement?

Members of the Monticello Teachers Association Benefit Trust can receive up to \$250 per unit member per plan year (July 1- June 30). The \$250 benefit includes services provided to members, spouses, and eligible dependent children. The form is available on the MCSD website under staff resources.

Section 9.02 Who is eligible under this Program?

Only the current MTA members are eligible for benefits. A member must work 70 % of the academic school year (7 out of 10 months). Reimbursements will begin in April of the benefit year.

Section 9.03 Who provides the Benefits under this Program?

MTA Benefit Trust Member Benefit Facilitator

ARTICLE 10—Stacey Braun Financial Planner

Section 10.01 What is the Stacey Braun Financial Planner?

The NYSUT Member Benefits Corporation-endorsed Financial Counseling Program offers access to a team of Certified Financial Planners® and Registered Investment Advisors to provide you with fee-based financial counseling services. Stacey Braun Associates, Inc. is an investment advisory company established in 1977 that provides fee-based professional financial counseling for both groups and individuals. Being fee-based, Stacey Braun Associates receives no commissions from mutual funds, brokerage firms, insurance companies or any other third party. As a result, Stacey Braun's advice is unbiased, objective and customized specifically for you and your financial situation.

Section 10.02 Who is eligible under this Program?

Only the current MTA members are eligible for benefits.

Section 10.03 Who provides the Benefits under this Program?

Stacey Braun Financial Planner: 377 Broadway, NY, 10013 212-226-7707

ARTICLE 11—Catastrophic Loss or Unexpected Death

Section 11.01 What is Catastrophic Loss or Unexpected Death

The MTA has agreed to a one-time, immediate payment of \$2,000.00 to any dues paying member of the Association who suffers catastrophic loss to that member's primary residence. Any member, currently in good standing with the Association, who is not out on unpaid leave, will receive the payment immediately upon return to their position with the district.

The MTA has agreed to a one-time, immediate payment of \$2,500.00 to any dues paying member of the Association who suffers an unexpected death to an immediate family member such as your spouse or child. Any member, currently in good standing with the Association, who is not out on unpaid leave, will receive the payment immediately upon return to their position with the district.

Article 12—Defensive Driving Course Reimbursement

Section 12.01 What is the reimbursement for Defensive Driving Course?

Through the NYSUT Member Benefits Corporation-endorsed **Defensive Driving Program**, NYSUT members and their family members licensed in New York State can take this course online at the members-only price of \$21.95 per person. Submit a copy of your completed certificate and your receipt and the Trust will reimburse your cost. **You must use the NYSUT Member Benefits Access Code: NYSUTDDC**

The MTA Benefit Trust will reimburse you once you send us your receipt and certificate.. Your family member can take the course; however, the trust is only reimbursing you as a MTA Member. We will only reimburse you once per year. When submitting for reimbursement, include a copy of the receipt and a copy of your completed course certificate.