

# **Red Oak Community School District**

**2011 North 8<sup>th</sup> Street**

**Red Oak, Iowa 51566**

**712.623.6600**

**[www.redoakschooldistrict.com](http://www.redoakschooldistrict.com)**

## **Regular Board of Directors Meeting**

Meeting Location: Red Oak High School Media Center  
Red Oak High School Campus

Monday, April 23, 2018 – 7:00 pm

### **- Agenda -**

- 1.0 Call to Order – Board of Directors President Mark Johnson
- 2.0 Roll Call – Board of Directors Secretary Deb Drey
- 3.0 Approval of the Agenda – President Mark Johnson
- 4.0 Public Presenters/Guest and Visitors Addressing the Board
- 5.0 Communications
  - 5.1 Good News from Red Oak Schools-Red Oak Community School District Elementary  
Principal Gayle Allensworth has been awarded Elementary Principal
  - 5.2 Visitors and Presentations
  - 5.3 Affirmations and Commendations
  - 5.4 Correspondence
  - 5.5 Public Comments
- 6.0 Consent Agenda
  - 6.1 Review and Approval of Minutes from April 9, 2018 *pg 1-2*
  - 6.2 Review and Approval of Monthly Business Reports *pg 3-15*
- 7.0 General Business for the Board of Directors
  - 7.1 Old Business
    - 7.1.1-none
  - 7.2 New Business
    - 7.2.1 Discussion/Approval of Health Insurance Plan 2018-2019 school year *pg. 16-42*
    - 7.2.2 Discussion/Approval of moving teachers to Select 750 plan for insurance effective July 1, 2018
    - 7.2.3 Discussion/Approval of 2<sup>nd</sup> reading for policy changes for series 300 *pg 43-61*
    - 7.2.4 Discussion/Approval of 2018 renewal proposal for SU Insurance Company *pg. 6*
    - 7.2.5 Discussion/Approval of educational services from Sioux City Community School District for the 2017-2018 school year *pg 63*
    - 7.2.6 Discussion/Approval of Ratification of the 2018-2019 Master Contract with the Red Oak Education Association *pg 64-66*
    - 7.2.7 Discussion/Approval of Supplemental Contracts for Coaches and Sponsors for the 2018-2019 school year *pg 67-68*

- 7.2.8 Discussion/Approval of Middle School closure plans following the construction project
- 7.2.9 Discussion/Approval of agreement with West Central Community Action Preschool for the 2018-2019 school year Pg 69-81
- 7.2.10 Discussion/Approval of changing online payment to Vanco for the 2018-2019 school year Pg 82

Personnel Considerations

- 7.2.11 Discussion/Approval of the resignation of Hayley Perkins as teacher at Red Oak Middle School following her one-year leave of absence for the 2017-2018 school year effective at the end of the 2018 school year Pg 83
- 7.2.12 Discussion/Approval of hiring Tessa Mittag as HS Ag Science and Middle School STEM with extended contract days effective for the 2018-2019 school year. Pg 84-86

8.0 Reports

- 8.1 Administrative
- 8.2 Future Conferences, Workshops, Seminars
- 8.3 Other Announcements

9.0 Next Board of Directors Meeting: Monday, May 14, 2018 – 7:00 pm  
Red Oak High School Media Center  
Red Oak CSD High School Campus

10.0 Adjournment

Special Note: Following the adjournment of the regular board of directors meeting, the board will meet in an exempt session to discuss negotiations strategy for upcoming contract discussions with our support unit per Iowa Code section 20.17(3).

Red Oak Community School District  
Meeting of the Board of Directors  
Meeting Location: Red Oak High School Media Center  
Red Oak High School Campus  
April 9, 2018

The Public Hearing on the 2018-2019 School Calendar was opened by President Mark Johnson at 7:00 p.m., and closed at 7:01 p.m. The regular meeting of the Board of Directors of the Red Oak Community School District was called to order by President Mark Johnson at 7:02 p.m. at the Red Oak High School Media Center.

**Present**

Directors: Roger Carlson, Bryce Johnson, Mark Johnson, Kathy Walker, Bret Blackman joined the meeting at 7:20 p.m.

Superintendent Tom Messinger, Business Manager Deb Drey

**Approval of Agenda**

Motion by Director Bryce Johnson, second by Director Walker to approve the agenda with the order of agenda items at the discretion of the meeting chair. Motion carried 4-0.

**Good News from Red Oak Schools**

Superintendent Messinger received many compliments on the School District Booth at the Buy Local Expo and a thank you from the Chamber of Commerce for hosting the event.

**Consent Agenda**

Motion by Director Carlson, second by Director Bryce Johnson to approve the consent agenda. Motion carried 4-0.

**Board Policy 208.1 Board of Directors' Meetings**

Motion by Director Bryce Johnson, second by Director Walker to approve the third and final reading of Board Policy 208.1. Motion passed 4-0.

**Board Policy 300 Series**

Motion by Director Carlson, second by Director Walker to approve the first reading of Board Policy 300 series with changes as presented. Motion carried 4-0.

**Audit Services Bids**

This item will be placed on the next agenda.

**Program Sharing between Essex School District and South Page School District**

Motion by Director Walker, second by Director Bryce Johnson to approve program sharing between Essex School District and South Page School District. Motion carried 4-0.

**Middle School Choir Trip**

Motion by Director Carlson, second by Director Walker to approve the Middle School Choir Trip to Worlds of Fun in Kansas City, MO. Motion carried unanimously.

**High School Soccer Program**

Motion by Director Walker, second by Director Carlson to approve a soccer team for the 2018-2019 school year. Motion carried unanimously.

**Certified Staff Insurance and Leaves Language**

SueAnn Crouse presented the language for Insurance and Leaves for the Certified Staff Handbook. Action will be taken when the entire handbook is completed.

**Continuation of Board Meeting Minutes 4-9-2018 page 2**

**2018-2019 School Calendar**

Motion by Director Bryce Johnson, second by Director Walker to approve the 2018-2019 School Calendar. Motion carried unanimously.

**Specialty Underwriters Insurance Renewal**

This item will be put on the next agenda.

**Retirement Investors' Club Agreement Renewal**

Motion by Director Blackman, second by Director Bryce Johnson to approve the renewal of the agreement with Retirement Investors' Club. Motion carried unanimously.

**Bond Fund Depository**

Motion by Director Carlson, second by Director Walker to approve Iowa Schools Joint Investment Trust as the depository for the bond funds. Motion carried unanimously.

**Personnel Considerations**

Motion by Director Blackman, second by Director Bryce Johnson to hire Kelli Schram as Assistant Softball Coach for the 2017-2018 school year. Motion carried unanimously.

Motion by Director Walker, second by Director Bryce Johnson to approve an additional year of Leave of Absence for Stacey Rolenc. Motion carried unanimously.

Motion by Director Bryce Johnson, second by Director Walker to hire Daniel Pollock as High School Boys Basketball Coach for the 2018-2019 school year. Motion carried unanimously.

Motion by Director Carlson, second by Director Walker to hire Savannah Whipple as Middle School Computer and High School Business teacher for the 2018-2019 school year. Motion carried unanimously.

Motion by Director Blackman, second by Director Bryce Johnson to hire Kristina Chilton as the 3<sup>rd</sup> Grade Teacher Leader Compensation Lead Teacher for the 2018-2019 school year. Motion carried unanimously.

Motion by Director Blackman, second by Director Bryce Johnson to accept the resignation of Michelle Cockburn as 5<sup>th</sup> Grade Teacher Leader Compensation Lead Teacher effective at the end of the 2017-2018 school year. Motion carried unanimously.

Motion by Director Bryce Johnson, second by Director Walker to hire Jaclyn Viner as 5<sup>th</sup> Grade Teacher Leadership Compensation Lead Teacher for the 2018-2019 school year. Motion carried unanimously.

**Adjournment**

Motion by Director Bryce Johnson, second by Director Blackman to adjourn the meeting at 8:41 p.m. Motion carried unanimously.

Next Board of Directors Meeting  
Special Meeting  
Regular Meeting

Monday, April 16, 2018 – 8:00 p.m.  
Monday, April 23, 2018 – 7:00 p.m.  
Red Oak High School Media Center  
Red Oak CSD High School Campus

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Mark Johnson, President

\_\_\_\_\_  
Deb Drey, Board Secretary

RED OAK COMMUNITY SCHOOLS 2018 MARCH RECONCILIATION REPORT

	GENERAL FUND	MANAGEMENT	PHYSICAL PLANT	AND DEBT SERVICE	SAVE TAXES
Beg. Balance 03-01-2018	\$ 3,061,489.80	\$ 2,227,632.02	\$ 1,181,527.82	\$ 183,060.56	\$ 9,622,934.74
Revenue	\$ 1,337,197.77	\$ 10,189.49	\$ 21,233.85	\$ 9,250.47	\$ 158,046.38
Expenditure	\$ 1,415,095.89	\$ 34,093.25	\$ 13,000.00	\$ -	\$ 456,648.19
Balance 03-31-2018	\$ 2,983,591.68	\$ 2,203,728.26	\$ 1,189,761.67	\$ 192,311.03	\$ 9,324,332.93

Balance 03-31-2017	\$ 2,676,651.24	\$ 2,228,475.63	\$ 842,529.55	\$ 347,753.02	\$ 3,082,981.25
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Checking Account .50%	Checking Account	\$ 7,900,325.72
Money Market Account .85%	Savings Account	\$ 8,500,481.89
	ISJIT	\$ 7.17
	Petty Cash	\$ 150.00
	Outstanding Che	\$ 507,239.21
		\$ 15,893,725.57

ACTIVITY FUND

Beg. Balance 03-01-2018	\$ 172,667.03
Revenue	\$ 9,960.66
Expenditure	\$ 14,560.69
Balance 03-31-2018	\$ 168,067.00

NUTRITION FUND

	\$ 156,384.72
	\$ 36,035.14
	\$ 47,659.22
	\$ 144,760.64

0.187721354	Total Interest	3330.58
0.138653977	General Fund	625.22
0.074857318	Management	461.80
0.012099808	PEL	249.32
0.586667543	Debt Service	40.30
	Capital Projects	1953.94
1		3330.58

Balance 03-31-2017	\$ 196,319.84
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	\$ 139,969.93
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Checking Account .50%	\$ 175,489.40
Petty Cash Boxes	\$ 1,200.00
Outstanding cks	\$ 8,622.40
Book Balance	\$ 168,067.00

	\$ 193,222.04
	\$ 9,655.44
	\$ 58,116.84
	\$ 144,760.64

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Revenue:					\$8,490,000
Interest:				4350	
TOTAL					\$8,494,350

EXPENDITURES		HS/INM	HIGH SCHOOL	INMAN	
Oct. Nov.	Ahlers Law Firm	\$1,820			
November	Piper Jaffray	\$127,350			
November	Asbestos Service/IA Environmental Services	\$4,500			
November	Alley, Poyner, Macchietto	\$338,310			
January, 2018	Ahlers Law Firm/view contract	\$868			
January, 2018	Ahlers Law Firm/Bond issue	\$12,658			
January, 2018	Dorsey Whitney/Bond issue	\$5,000			
January, 2018	Thompson, GEO Study		\$4,000	\$6,300	
January, 2018	Alley, Poyner, Design Project	\$213,105			
February, 2018	Ahlers Law Firm/Cons Legal Services	\$597			
February, 2018	Alley, Poyner, Design Project	\$140,259			
March, 2018	Alley, Poyner, Design Project	\$456,648			
TOTAL EXPENDITURES		\$1,301,114	\$4,000	\$6,300	\$1,311,414
Ending Balance					\$7,182,936

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LOCAL OPTION SALES TAX---- ONE CENT SALES TAX--SILO TAX

	2015-2016	2016-2017	2017-2018	
Beg Balance (July 1)	\$3,318,603	\$3,860,450	\$3,662,867	
Add: Revenue				Rev Bonds
1. 1¢ Sales Tax	\$902,761	\$1,171,418	\$786,934	\$786,934
2. Interest	\$7,147	\$7,875	\$17,205	\$17,205
3. Reim Sterling Comp	\$79,798			\$8,490,000
Subtotal	\$4,308,309	\$5,039,743	\$4,467,007	\$8,500,482
			\$1,000	
LESS: Expenditures				
1. Computer Lease	\$163,691	\$119,135	\$1,981	
2. BLDD Architects	\$92,684	\$261,917	\$163,691	
3. BLDD Architects	\$11,910	\$163,691	\$2,167,070	
4. Reynolds Drilling Inc	\$6,500	\$87,012	\$1,820	
5. TDD, Inc. Drilling	\$3,300	\$136,984	\$127,350	
6. Boyd Jones Constr.	\$20,130	\$3,310	\$338,310	
7. Analytic Services	\$12,600	\$20,506	\$4,500	
8. Boyd Jones	\$390	\$43,011	\$868	
9. Alley Poyner, Arch	\$36,753	\$152,023	\$12,658	
Design Serv-Ltg/Boiler		\$522	\$5,000	
10. Alley Poyner, Arch	\$1,835	\$11,520	\$10,300	
Prof Services		\$49,089	\$213,105	
11. Alley Poyner, Arch	\$35,445	\$377,483	\$597	
Prof Services		\$43,410	\$140,260	
12. Geotechnical Study	\$3,000	\$3,192	\$456,648	
Thompson,Dreesen,Dorner		\$314	\$3,644,157	
13. Alley Poyner, Arch	11956.81	\$14,243	\$823,850	
14. Boyd Jones	\$34,964	19769	\$9,324,332	
15. Impact 7G	\$570	\$23,226		
16. Impact 7G	\$6,890	-\$153,482		
17. Alley Poyner, Arch	\$5,240			
Subtotal	\$447,859	\$1,376,876		
TOTAL	\$3,860,450	\$3,662,867		\$8,500,482

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**PHYSICAL PLANT AND EQUIPMENT LEVY**

	2015-2016	2016-2017	2017-2018
Beginning Balance (July 1)	\$92,414.16	\$842,659.58	\$962,988.26
ADD: Revenue			
Property/Taxes	\$113,302.63	\$142,280.82	\$256,909.63
Property Taxes	\$405,020.88	\$403,785.51	\$96,710.87
Voted PEEL	\$432,871.98	\$48,310.93	\$49,817.18
Voted PEEL Surtax	\$4,525.46	\$20,172.15	\$52.65
Utility Replacement Tax (SAVE)	\$16,404.76	\$39.54	\$9,646.80
Mobile Home Tax	\$54.91	\$58.26	\$54.17
Voted PEEL Mobile Home	\$199.39	\$212.48	\$186.64
Military Credit	\$45.25	\$0.76	
Military Credit (SAVE)	\$164.01	\$2,537.96	\$5,960.47
Commercial Industrial tax	\$12,658.62	\$9,243.50	
Commercial Ind. Voted PEEL	\$892.59	\$2,265.68	\$4,394.03
Interest			
Donations	\$3,550.00		\$11,658.17
Prior Year Expenditure			
EMC Insurance		\$628,807.59	\$435,524.77
Webster Playground			
EMC Insurance			
MS Water Damage			
Skylight Damage (Storm)			
Refund of Prior Year Expenditure			
Subtotal	\$989,690.48	\$1,471,467.17	\$1,398,513.03
TOTAL AVAILABLE FUND	\$1,082,104.64		
LESS: Expenditures			
1. Rehnan Music-Instruments	\$24,857.00		\$1,883.75
2. Sterling Computers (5)	\$3,989.90	\$4,700.00	\$4,165.20
3. School Dude	\$3,125.12	\$3,416.00	\$11,000.00
4. Trebon-Sophos	\$5,331.67	\$13,490.00	\$7,700.00
5. Software Unlimited	\$7,600.00	\$815.69	\$3,036.00
6. Parting Lot Work	\$6,900.00	\$1,740.00	\$969.57
7. ADA Ramps at Pfl Field	\$6,900.00	\$4,180.00	\$19,474.00
8. Ethernet Cons:Pfl Field	\$18,899.00	\$525.00	\$14,605.00
9. Sellers Const. Floor Tiles	\$3,855.00	\$5,547.00	\$73,090.00
10. Moore Music, Trombone	\$2,000.00	\$1,668.86	\$935.10
11. Simplex-Fire Alarm Panel	\$17,500.00	\$8,570.00	\$19,927.75
12. Frontline Technologies AESOP	\$5,795.71	\$5,131.90	\$2,960.55
13. Red Oak Diesel Bus #1A repair	\$2,590.64	\$1,142.77	\$17,185.78
14. Trebon-Sophos Enduser Prot.	\$4,088.00	\$631.11	\$13,618.00
15. Forecast 5 Analytics, Inc	\$10,800.00	\$4,854.45	\$9,397.76
16. Granger-2 Ind. Dehumidifiers MS	\$2,076.00	\$8,250.00	\$21,719.24
17. Spee, Athletics- Mats/wr room	\$7,541.36	\$8,250.00	\$12,719.24
18. Granger-2 Ind. Dehumidifiers HS	\$2,547.15	\$30,411.00	\$10,423.00
19. O'Neal Electric-Install Door Closures	\$4,222.78	\$4,478.07	\$3,500.00
20. Infinite Campus-support	\$16,695.00	\$14,519.71	\$11,600.00
21. Council Bluffs school- SP Ed rent	\$7,675.22	\$8,570.00	\$208,751.36
22. Montgomery Co. Building Rental	\$264.00	\$41,672.00	\$1,189,761.67
23. Montgomery Co. Building Rental	\$3,550.00	\$16,511.50	
24. Cybernetic-Maintenance serv.	\$2,890.00	\$14,606.00	
25. Magsitt-Vision Screener	\$1,541.75	\$1,490.00	
26. Sellers Construction-Wr room	\$7,500.00	\$19,139.35	
27. Maintenance Agreement	\$261.00	\$37,891.25	
28. Montgomery Co. Building Rental	\$461.00	\$14,014.45	
29. Montgomery Co Building Rental (2)	\$6,130.97	\$35,287.50	
30. Council Bluffs School- Sp Ed Rental	\$16,694.00	\$95,155.63	
31. REV Services-HS Thermal Sys. Install.	\$22,479.00	\$1,840.20	
32. Red Oak Do it Center-Balfield Fencing	\$10,013.07	\$1,023.66	
33. Sterling Computers-Equipment	\$16,500.00	\$16,469.68	
34. O'Neal Electric, HS Thermal Insulation	\$16,500.00	\$5,596.00	
35. Sp Ed Rent, Council Bluffs	\$6,761.00	\$2,048.10	
36. Cargo Lift Gate on Hort Lunch Van	\$3,590.00	\$16,658.00	
Subtotal	\$243,976.54	\$894,395.19	
Cash Balance	\$898,128.30		
Beginning Balance (July 1)	\$92,414.16	\$842,659.58	\$962,988.26
ADD: Revenue			
Property/Taxes	\$142,280.82	\$142,280.82	\$256,909.63
Voted PEEL	\$48,310.93	\$48,310.93	\$96,710.87
Utility Replacement Tax (SAVE)	\$20,172.15	\$20,172.15	\$49,817.18
Mobile Home Tax	\$58.26	\$58.26	\$52.65
Voted PEEL Mobile Home	\$212.48	\$212.48	\$9,646.80
Military Credit	\$0.76	\$0.76	\$54.17
Military Credit (SAVE)	\$2,537.96	\$2,537.96	\$134.16
Commercial Industrial tax	\$9,243.50	\$9,243.50	\$186.64
Commercial Ind. Voted PEEL	\$2,265.68	\$2,265.68	\$5,960.47
Interest			
Donations			
Prior Year Expenditure			
EMC Insurance	\$628,807.59	\$628,807.59	\$435,524.77
Subtotal	\$628,807.59	\$628,807.59	\$435,524.77
TOTAL AVAILABLE FUND	\$1,471,467.17		\$1,398,513.03
LESS: Expenditures			
1. Frontline Tech. AESOP	\$4,700.00	\$4,700.00	\$1,883.75
2. SchoolDude	\$3,416.00	\$3,416.00	\$4,165.20
3. Software Unlimited	\$13,490.00	\$13,490.00	\$11,000.00
4. Scoreboards	\$815.69	\$815.69	\$7,700.00
5. Imprint-Signs	\$1,740.00	\$1,740.00	\$3,036.00
6. Delay of game-clocks	\$4,180.00	\$4,180.00	\$969.57
7. Shipping on Signs	\$525.00	\$525.00	\$19,474.00
8. Rehnan-Sexophone	\$5,547.00	\$5,547.00	\$14,605.00
9. Onneal Electric	\$1,668.86	\$1,668.86	\$73,090.00
10. Rehnan Music	\$8,570.00	\$8,570.00	\$8,062.10
School Instruments	\$5,131.90	\$5,131.90	\$19,927.75
12. Rogers Plumbing MS	\$1,142.77	\$1,142.77	\$99,570.00
13. Elmo Document Camera	\$631.11	\$631.11	\$2,580.00
14. snow blower tractor	\$4,854.45	\$4,854.45	\$1,380.60
15. JD Mower	\$8,250.00	\$8,250.00	\$3,215.42
16. Heat Exchanger	\$30,411.00	\$30,411.00	\$2,580.00
17. PowerEdge R730xd Server	\$30,411.00	\$30,411.00	\$1,381.20
18. JD Gator	\$14,519.71	\$14,519.71	\$533.30
19. JD Blade	\$1,682.76	\$1,682.76	\$2,763.32
20. Suburban-10N...6HR15A160	\$41,672.00	\$41,672.00	\$1,400.00
21. Suburban 10N...3HR164553	\$16,511.50	\$16,511.50	\$11,600.00
22. Mckee Update	\$14,606.00	\$14,606.00	
23. Sterling Comp. Access points	\$1,490.00	\$1,490.00	
24. Alley, Pymor, Macc (Lighting)	\$19,139.35	\$19,139.35	
25. Boyd Jones(ADA Compli	\$37,891.25	\$37,891.25	
26. AEL, MS LFI	\$14,014.45	\$14,014.45	
27. Gambin Mech-AEA Compl.	\$35,287.50	\$35,287.50	
28. Mckee	\$95,155.63	\$95,155.63	
29. 3 mo rent to CB Sp Ed	\$1,840.20	\$1,840.20	
30. Alley, Pymor, Macc (Boiler Pro	\$1,023.66	\$1,023.66	
31. Rent to CB Sp Ed	\$16,469.68	\$16,469.68	
32. Boyd Jones,ADA Project	\$5,596.00	\$5,596.00	
33. REV Services-Asbestos	\$2,048.10	\$2,048.10	
34. Sophos Server	\$16,658.00	\$16,658.00	
35. Computer Info Infinite Campus			
Subtotal	\$243,976.54	\$894,395.19	
Cash Balance	\$898,128.30		

6



Account Number	Detail Description	Amount
Checking Account ID 1	Fund Number 10	OPERATING FUND
BRUCE SUPPLIES & CONSTRUCTION INC.	1197	105.00
10 0010 2600 000 0000 618	JAN 26-APRIL 2 BUS WASHES	<u>105.00</u>
Vendor Name BRUCE SUPPLIES & CONSTRUCTION INC.		105.00
CENTURY LINK	040118	132.00
10 0020 2490 000 0000 530	2 WAY RADIO TRANSMITTER	<u>132.00</u>
Vendor Name CENTURY LINK		132.00
CHEMSEARCH	3081523	268.00
10 0010 2600 000 0000 432	CONTRACT WATER TREATMENT PROGRAM	<u>268.00</u>
Vendor Name CHEMSEARCH		268.00
COCA-COLA BTLG OF OMAHA	520654	336.93
10 3230 2410 000 0000 618	soda-HS	<u>336.93</u>
Vendor Name COCA-COLA BTLG OF OMAHA		336.93
COUNSEL OFFICE & DOCUMENTS	300538	44.82
10 3230 2410 000 0000 618	staples-HS	<u>44.82</u>
Vendor Name COUNSEL OFFICE & DOCUMENTS		44.82
CROUSE, SUEANN	040518	21.39
10 1902 1000 100 8002 618	Reimbursement	<u>21.39</u>
Vendor Name CROUSE, SUEANN		21.39
CUBBY'S	040218	2,045.58
10 0020 2700 000 0000 626	GAS DISTRICT-MARCH	649.76
10 0020 2700 000 0000 627	DIESEL DISTRICT-MARCH	475.72
10 0010 2650 000 0000 626	UTILITY FUEL	101.00
10 0010 2700 217 3303 626	SPED FUEL	658.84
10 0010 2700 217 3303 627	SPED DIESEL #10	<u>160.26</u>
Vendor Name CUBBY'S		2,045.58
DEGROOT, DANIEL	040918	50.36
10 2020 1000 100 0000 580	JAN SHARED CLASS W/STANTON MILEAGE	<u>50.36</u>
Vendor Name DEGROOT, DANIEL		50.36
DES MOINES STAMP MFG. CO.	1117765	42.40
10 1902 1000 100 0000 611	WASH ADDRESS STAMP	<u>42.40</u>
Vendor Name DES MOINES STAMP MFG. CO.		42.40
DICKEL DUIT OUTDOOR POWER, INC.	29348	97.63
10 0010 2600 000 0000 618	AIR FILTERS & OIL-MOWERS	97.63
DICKEL DUIT OUTDOOR POWER, INC.	29418	22.70
10 0010 2600 000 0000 618	OIL-MOWERS	<u>22.70</u>
Vendor Name DICKEL DUIT OUTDOOR POWER, INC.		120.33
DREY, DEB	041318	260.25
10 0010 2510 000 0000 340	LICENSE REIMBURSEMENT	233.00
10 0010 2510 000 0000 580	MILEAGE REIMBURSEMENT	<u>27.25</u>
Vendor Name DREY, DEB		260.25



04/20/2018 03:09 PM

Unposted; Batch Description APRIL 23 BOARD MEETING, 2018-0001

User ID: BLAYM

Vendor Name	Invoice Number	Amount
Account Number	Detail Description	Amount
EUBANK, BRETT	040918	134.07
10 3230 1000 420 1119 320	AT RISK CONF MILEAGE REIMBURSEMENT	134.07
Vendor Name	EUBANK, BRETT	<u>134.07</u>
FAREWAY FOOD STORES	00314911	23.60
10 0010 2310 000 0000 611	BOARD SUPPLIES	23.60
FAREWAY FOOD STORES	00315020	31.46
10 0010 1200 211 3301 612	VARIOUS SUPPLIES-SPED	31.46
FAREWAY FOOD STORES	00315886	46.57
10 2020 1300 340 0000 612	CLEANING PADS, MARGARINE AND EGG-MS FACS	46.57
FAREWAY FOOD STORES	00454945	55.90
10 3230 1300 340 0000 612	groceries-HS FACS	55.90
FAREWAY FOOD STORES	00459633	106.12
10 2020 1000 421 3227 618	FOOD PANTRY ITEMS FOR SCHOOLBEYONDSCHOOL	106.12
Vendor Name	FAREWAY FOOD STORES	<u>263.65</u>
FIRST BANKCARD	030718-03	117.85
10 3230 1300 310 0000 611	Horse Anatomy Books	117.85
FIRST BANKCARD	030818	45.82
10 0010 2113 420 1119 618	LICE TREATMENT	45.82
FIRST BANKCARD	030918	13.99
10 2020 2222 950 7415 618	THE ARTS VISUAL	13.99
FIRST BANKCARD	031318	739.62
10 0010 2510 000 0000 580	SCHOOL BUS ACAD HOTEL & FOOD	344.62
10 0010 2510 000 0000 340	SCHOOL BUS MAN ACAD	395.00
FIRST BANKCARD	031318-01	28.20
10 3230 1000 100 0000 612	super glue gelx4 art	28.20
FIRST BANKCARD	031318-03	24.95
10 0010 2310 000 0000 611	RECEIVED STAMP-CO	24.95
FIRST BANKCARD	031518-01	234.43
10 0010 1000 420 1119 580	Hotel & Food	234.43
FIRST BANKCARD	031518-02	12.99
10 0010 2235 000 0000 618	25 ft HDMI Cable	12.99
FIRST BANKCARD	031518-03	6.99
10 0010 2235 000 0000 618	6 Ft VGA Cable	6.99
FIRST BANKCARD	031618	99.95
10 3230 1000 100 0000 320	HOFFMAN SPEAKER HOTEL	99.95
FIRST BANKCARD	032118	813.94
10 0010 2600 000 0000 618	40 FLEX BAGS OF CLAY-MAINT-BB FIELD	813.94
FIRST BANKCARD	032818	5.34
10 0010 2510 000 0000 580	FOOD BUS OFFICAL	5.34
FIRST BANKCARD	040418	267.95
10 0010 2600 000 0000 618	HEAVY DUTY MOVING CART	228.95
10 0010 2600 000 0000 618	OVERLIMIT FEE-WILL GET CREDIT NEXT MONTH	39.00
FIRST BANKCARD	040518	120.59
10 2020 1000 421 3227 618	BUCKSNORTFOOD AND DRINK SCHOOL BEYOND SC	120.59
FIRST BANKCARD	040918	43.58
10 0010 1200 217 3303 612	SPED 3 SUPPLIES	43.58
Vendor Name	FIRST BANKCARD	<u>2,576.19</u>

Vendor Name	Invoice Number	Amount	
Account Number	Detail Description		Amount
GLENWOOD COMMUNITY SCHOOLS	040218	5,387.52	
10 0010 1200 217 3303 320	APEX-MARCHx2		5,387.52
Vendor Name	GLENWOOD COMMUNITY SCHOOLS		<u>5,387.52</u>
GOODWIN TUCKER GROUP	1198908	2,150.00	
10 0010 2600 000 0000 432	GARBAGE DISPOSAL REPAIR		2,150.00
Vendor Name	GOODWIN TUCKER GROUP		<u>2,150.00</u>
GREEN HILLS AEA	1100	685.00	
10 0010 2213 132 3376 330	TLC		265.00
10 3230 2213 132 3376 121	HSx2 PROF DEV		70.00
10 2020 2213 132 3376 121	MSx4 PROF DEV		140.00
10 1901 2213 132 3376 121	IPSx5 PROF DEV		175.00
10 1902 2213 132 3376 121	WASHx1 PROF DEV		35.00
GREEN HILLS AEA	36078	34.40	
10 0010 2310 000 0000 611	CUMULATIVE FOLDERS-CO		34.40
Vendor Name	GREEN HILLS AEA		<u>719.40</u>
HOWARD'S SPORTING GOODS	07304-00	252.00	
10 0010 1000 470 1118 612	BATTLE OF BOOKS TAG TROPHIES/MEDALS		252.00
Vendor Name	HOWARD'S SPORTING GOODS		<u>252.00</u>
HY VEE FOOD STORES	040618	222.22	
10 3230 1300 340 0000 612	groceries-HS FACS		38.37
10 3230 1300 340 0000 612	groceries-HS FACS		3.11
10 3230 1300 340 0000 612	groceries-HS FACS		2.99
10 3230 1300 340 0000 612	groceries-HS FACS		7.99
10 3230 1300 340 0000 612	groceries-HS FACS		98.23
10 3230 1300 340 0000 612	groceries-HS FACS		39.61
10 3230 1300 340 0000 612	groceries-HS FACS		31.92
HY VEE FOOD STORES	5817042564	104.56	
10 0010 2310 000 0000 611	BOARD SUPPLIES		104.56
Vendor Name	HY VEE FOOD STORES		<u>326.78</u>
IASBO	200004080	178.00	
10 0010 2510 000 0000 340	SPRING 2018 CONF REGISTRATION		178.00
Vendor Name	IASBO		<u>178.00</u>
IOWA COMMUNICATIONS NETWORK	527458	6.00	
10 0010 2236 000 0000 536	MARCH ICN CHARGES		6.00
Vendor Name	IOWA COMMUNICATIONS NETWORK		<u>6.00</u>
IOWA TESTING PROGRAM	18-7037	3,674.66	
10 0010 2240 116 4648 618	IOWA TESTING PROGRAMS		3,674.66
Vendor Name	IOWA TESTING PROGRAM		<u>3,674.66</u>
JOHNSON AUTO PARTS	6177-182447	4.97	
10 0020 2700 000 0000 618	FUSES FOR BUS		4.97
JOHNSON AUTO PARTS	6177-182787	7.84	
10 0020 2700 000 0000 618	DRILL SUPPLIES-BB		7.84
Vendor Name	JOHNSON AUTO PARTS		<u>12.81</u>



Vendor Name	Invoice Number	Amount
Account Number	Detail Description	Amount
JOSTENS	20997845	1,064.83
10 3230 2410 000 0000 618	diplomas/cords	1,064.83
JOSTENS	21373893	361.63
10 3230 2410 000 0000 618	diplomas/cords	361.63
Vendor Name JOSTENS		<u>1,426.46</u>
LEWIS CENTRAL ACTIVITIES	H10-2017-2018	144.00
10 3230 2410 000 0000 618	H10 Banquet	144.00
Vendor Name LEWIS CENTRAL ACTIVITIES		<u>144.00</u>
MIDAMERICAN ENERGY	041218	527.24
10 0030 2600 000 0000 622	SPORTS COMPLEX ELECT	527.24
MIDAMERICAN ENERGY	041318	20.83
10 1912 2600 000 0000 622	WEBSTER SCHOOL ELECT	20.83
Vendor Name MIDAMERICAN ENERGY		<u>548.07</u>
NISHNA PRODUCTIONS	041218	135.48
10 0010 1200 217 3303 320	JOB COACHINGx3	135.48
Vendor Name NISHNA PRODUCTIONS		<u>135.48</u>
ONESOURCE THE BACKGROUND CHECK COMPANY	IASB3330-20180331	30.00
10 0010 2310 000 0000 320	MARCH BACKGROUND CHECKS	30.00
Vendor Name ONESOURCE THE BACKGROUND CHECK COMPANY		<u>30.00</u>
ORIENTAL TRADING COMPANY	689435582-01	183.71
10 0010 1000 100 8203 612	PTO CARNIVAL SUPPLIES	183.71
Vendor Name ORIENTAL TRADING COMPANY		<u>183.71</u>
PEAPOD FACE PAINTING & BALLOONS	041718	550.00
10 0010 1000 100 8203 612	PTO CARNIVAL FACE PAINTING & BALLOONS	550.00
Vendor Name PEAPOD FACE PAINTING & BALLOONS		<u>550.00</u>
PEAP	343653	41.50
10 2020 1000 100 0000 612	PEAP EXCELLENCE AWARDS	41.50
Vendor Name PEAP		<u>41.50</u>
PELGAS	033118	458.40
10 0020 2700 000 0000 628	PROPANE TAX & PROPANE	458.40
Vendor Name PELGAS		<u>458.40</u>
PERIPOLE BERGERAULT INC	168040	453.99
10 1902 1000 109 0000 612	Recorders	453.99
Vendor Name PERIPOLE BERGERAULT INC		<u>453.99</u>
QUERRY, STACY	041618	500.00
10 0010 1000 100 8203 612	CASH FOR CARNIVAL	400.00
10 0010 1000 100 8203 612	CASH FOR FLOWER SALE	100.00
Vendor Name QUERRY, STACY		<u>500.00</u>
QUILL CORP.	6128046	11.37

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Account Number	Detail Description	Amount
10 1902 1000 100 0000 611	Flashlights	5.26
10 1902 1000 100 0000 611	Duster	6.11
QUILL CORP.	6145808	7.89
10 1902 1000 100 0000 611	Flashlights	7.89
Vendor Name	QUILL CORP.	<u>19.26</u>
R.K. BELT AND SONS, INC.	76412	76.00
10 0020 2700 000 0000 434	#4 CHECK LIGHT REPAIR	76.00
Vendor Name	R.K. BELT AND SONS, INC.	<u>76.00</u>
RAY MARTIN COMPANY	7413	150.00
10 0010 2600 000 0000 432	WASH CHILLER LEFTOVER INS AMT REPAIR	150.00
RAY MARTIN COMPANY	7415.1A	920.00
10 0010 2600 000 0000 432	HS CHILLER LEFTOVER INS REPAIR	920.00
RAY MARTIN COMPANY	7415.2	128.55
10 0010 2600 000 0000 432	HS CHILLER LEFOTVER INS REPAIR	128.55
RAY MARTIN COMPANY	7441	323.24
10 0010 2600 000 0000 432	HS AHU RETURN FAN INS LEFTOVER REPAIR	323.24
RAY MARTIN COMPANY	7442	165.00
10 0010 2600 000 0000 432	HS NEW MOTOR SHEAVE INS LEFTOVER REPAIR	165.00
RAY MARTIN COMPANY	7443.1	216.21
10 0010 2600 000 0000 432	HS AHU RETURN INS LEFTOVER REPAIR	216.21
RAY MARTIN COMPANY	7468	2,892.50
10 0010 2600 000 0000 432	HS AHU SUPPLY MOTOR REPAIR	2,892.50
RAY MARTIN COMPANY	7494	398.00
10 0010 2600 000 0000 432	HS TECH BLDG LEFTOVER INS REPAIR	398.00
Vendor Name	RAY MARTIN COMPANY	<u>5,193.50</u>
RED OAK EXPRESS	201803	741.21
10 0010 2572 000 0000 540	MARCH BOARD MEETING/WARRANTS/NOTICES	741.21
Vendor Name	RED OAK EXPRESS	<u>741.21</u>
RED OAK GLASS INC.	14058	253.00
10 0010 2600 000 0000 618	WINDOW FOR NEW CO	253.00
Vendor Name	RED OAK GLASS INC.	<u>253.00</u>
RED OAK GRAND THEATER	331	312.00
10 1902 1000 100 8002 618	tickets-WONDER WASH	312.00
Vendor Name	RED OAK GRAND THEATER	<u>312.00</u>
RED OAK HARDWARE HANK	24676	12.58
10 0010 2600 000 0000 618	MS TOOL SHOP FILTERS	12.58
Vendor Name	RED OAK HARDWARE HANK	<u>12.58</u>
REHBEIN, BETH	041618	70.16
10 1901 1000 100 8001 612	REIMBURSEMENT FOR SUPPLIES	70.16
Vendor Name	REHBEIN, BETH	<u>70.16</u>

Account Number	Invoice Number	Detail Description	Amount
RIEMAN MUSIC, INC.	2714078		105.00
10 2020 1920 100 8202 612		ESTIMATE TO CLEAN AND POLISH THE MIDDLE	105.00
RIEMAN MUSIC, INC.	2714080		75.00
10 2020 1920 100 8202 612		ESTIMATE TO CLEAN THE MIDDLE SCHOOL BUND	75.00
RIEMAN MUSIC, INC.	2714084		85.00
10 2020 2600 910 6220 433		ESTIMATE TO REPAIR MIDDLE SCHOOL CONN T	85.00
RIEMAN MUSIC, INC.	2714085		75.00
10 2020 2600 910 6220 433		ESTIMATE TO SERVICE HANDSLIDE AND CLEAN	75.00
RIEMAN MUSIC, INC.	2714239		95.00
10 2020 2600 910 6220 433		ESTIMATE TO REPAIR HANDSLIDE AND CLEAN M	95.00
Vendor Name	RIEMAN MUSIC, INC.		<u>435.00</u>
SCHMITT MUSIC	2148220		7.75
10 2020 1920 100 8202 612		SANITIZER MIST SPRAY, 8 OZ BOTTLE FOR MID	7.75
Vendor Name	SCHMITT MUSIC		<u>7.75</u>
SELLERS PEST CONTROL-ART SELLERS	25511		120.00
10 0010 2600 000 0000 425		MARCH PEST CONTROL	120.00
SELLERS PEST CONTROL-ART SELLERS	25619		120.00
10 0010 2600 000 0000 425		APRIL DISTRICT PEST CONTROL	120.00
Vendor Name	SELLERS PEST CONTROL-ART SELLERS		<u>240.00</u>
SIMPLEXGRINNELL	84611836		327.04
10 0010 2600 000 0000 432		REPAIR ON FIRE ALARM SYSTEM	327.04
Vendor Name	SIMPLEXGRINNELL		<u>327.04</u>
SOLUTION TREE	920492		293.55
10 0010 1000 100 3342 612		THE NEW ART AND SCIENCE OF TECHING/ PAPE	293.55
Vendor Name	SOLUTION TREE		<u>293.55</u>
STERLING COMPUTERS	0036869		1,481.94
10 0010 2235 000 0000 618		Dell Latitude 3340 MotherboardX6	1,481.94
Vendor Name	STERLING COMPUTERS		<u>1,481.94</u>
THOMAS BUS SALES OF IOWA	151247		76.46
10 0020 2700 000 0000 618		HANDLE RECESSED-BB	76.46
Vendor Name	THOMAS BUS SALES OF IOWA		<u>76.46</u>
UNITED FARMERS COOPERATIVE	0318248		38.92
10 0010 2600 000 0000 618		BB SHELIVING	38.92
UNITED FARMERS COOPERATIVE	0318313		14.90
10 0010 2600 000 0000 618		KEYS-NEW Cox10	14.90
UNITED FARMERS COOPERATIVE	0318580		65.90
10 0010 2600 000 0000 618		HS VANDALISM SUPPLIES	65.90
UNITED FARMERS COOPERATIVE	0318597		116.41
10 0010 2600 000 0000 618		HS RESTROOM DOOR SUPPLIES	116.41
UNITED FARMERS COOPERATIVE	0318599		4.69

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Vendor Name	Invoice Number	Amount
Account Number	Detail Description	Amount
10 0010 2600 000 0000 618	FBALL FIELD THERMOSTATS	4.69
UNITED FARMERS COOPERATIVE	0318659	74.95
10 0010 2600 000 0000 618	HS PARKING LOT SUPPLIES	74.95
UNITED FARMERS COOPERATIVE	0319559	5.64
10 0010 2600 000 0000 618	FIELDHOUSE PLUMBING SUPPLIES	5.64
Vendor Name	UNITED FARMERS COOPERATIVE	<u>321.41</u>
WOODRIVER ENERGY LLC	156078	9,706.73
10 1901 2600 000 0000 621	IPS GAS	1,643.41
10 1902 2600 000 0000 621	WASH GAS	702.81
10 1912 2600 000 0000 621	TECH GAS	795.56
10 3230 2600 000 0000 621	HS GAS	3,950.76
10 0020 2600 000 0000 621	MS GAS	2,614.19
Vendor Name	WOODRIVER ENERGY LLC	<u>9,706.73</u>
Fund Number	10	<u>43,147.34</u>
Checking Account ID	1	Fund Number
ALLEY, POYNER, MACCHIETTO, ARCHITECTURE, INC		33
		17001-6
		CAPITAL PROJECTS - LOST
		252,527.14
33 0010 4700 000 8218 343	HS & IPS CONSTRUCTION DOCS	252,527.14
Vendor Name	ALLEY, POYNER, MACCHIETTO, ARCHITECTURE, INC	<u>252,527.14</u>
Fund Number	33	<u>252,527.14</u>
Checking Account ID	1	295,674.48
Checking Account ID	3	Fund Number
ADM HIGH SCHOOL		21
		011318
		STUDENT ACTIVITY FUND
		100.00
21 0010 1400 920 6790 320	VARSITY WRESTLING TOURNEY	100.00
Vendor Name	ADM HIGH SCHOOL	<u>100.00</u>
BROWER, GREG	041918	300.00
21 3230 1400 950 7413 618	DJ SERVICES-PROM	300.00
Vendor Name	BROWER, GREG	<u>300.00</u>
CDW GOVERNMENT, INC.	MGK7419	151.21
21 3230 1400 950 7407 618	ADOBE PREMIER PRO 10 MONTH SUBSCRIPTION	151.21
Vendor Name	CDW GOVERNMENT, INC.	<u>151.21</u>
CRESTON COMMUNITY SCHOOLS	123017	60.00
21 0010 1400 920 6790 618	PANTHER JV WRESTLING TOURNEY	60.00
Vendor Name	CRESTON COMMUNITY SCHOOLS	<u>60.00</u>
DANNCO	25549	3,971.80
21 0010 1400 920 6740 618	HURDLES	1,089.00
21 0010 1400 920 6840 618	TRACK BLOCKS/CARTS/CROSSBAR	2,882.80
DANNCO	25653	4,455.00
21 0010 1400 920 6740 618	HURDLES	4,455.00
Vendor Name	DANNCO	<u>8,426.80</u>
FIRST BANKCARD	030718-04	219.39
21 3230 1400 950 7413 618	PROM SUPPLIES-DECOR/CROWNS	219.39
FIRST BANKCARD	031518	1,488.42
21 3230 1400 950 7407 580	HOUSING FOR NATIONAL FFA CONVENTION-2018	1,488.42

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Vendor Name	Invoice Number	Amount
Account Number	Detail Description	Amount
FIRST BANKCARD	032718	188.16
21 3230 1400 910 6110 618	ALL-STATE ROOMS	188.16
FIRST BANKCARD	032718-01	46.89
21 3230 1400 950 7413 618	PHOTO BACKDROP-PROM	46.89
FIRST BANKCARD	040318	1,548.00
21 2020 1400 910 6221 618	TICKETS FOR THE 8TH GRADE CHOIR-WORLDSOF	1,548.00
FIRST BANKCARD	040318-01	95.78
21 3230 1400 950 7413 618	METALLIC BACKGROUND MATERIAL	95.78
FIRST BANKCARD	040318-02	25.00
21 3230 1400 910 6220 618	SOLO/ENSEMBLE PIECE LICENSURE	25.00
Vendor Name FIRST BANKCARD		<u>3,611.64</u>
GREAT AMERICAN OPPORTUNITIES	914322403	576.00
21 3230 1400 950 7459 618	CAMP FUNDRAISER	576.00
Vendor Name GREAT AMERICAN OPPORTUNITIES		<u>576.00</u>
GREEN HILLS AEA	35716	49.50
21 3230 1400 950 7426 618	COLOR PRINTS	49.50
GREEN HILLS AEA	63620	2.10
21 3230 1400 950 7426 618	COLOR PRINTS	2.10
Vendor Name GREEN HILLS AEA		<u>51.60</u>
GRISWOLD COMMUNITY SCHOOLS	041018	80.00
21 0010 1400 920 6840 340	GIRLS TIGER RELAY ENTRY FEE	80.00
Vendor Name GRISWOLD COMMUNITY SCHOOLS		<u>80.00</u>
HOWARD'S SPORTING GOODS	07182-00	1,218.00
21 0010 1400 920 6740 618	TRACK MEDALS & TROPHIES-BOYS	1,218.00
HOWARD'S SPORTING GOODS	07183-00	1,218.00
21 0010 1400 920 6840 618	TRACK MEDALS & TROPHIES-GIRLS	1,218.00
HOWARD'S SPORTING GOODS	07188-00	250.20
21 0010 1400 920 6740 618	TRACK MEDALS & TROPHIES-BOYS	250.20
HOWARD'S SPORTING GOODS	07189-00	250.20
21 0010 1400 920 6840 618	TRACK MEDALS & TROPHIES-GIRLS	250.20
HOWARD'S SPORTING GOODS	07290-00	39.00
21 0010 1400 920 6840 618	TRACK SPIKES-BOYS	19.50
21 0010 1400 920 6740 618	TRACK SPIKES-GIRLS	19.50
Vendor Name HOWARD'S SPORTING GOODS		<u>2,975.40</u>
IOWA HIGH SCHOOL MUSIC ASSOC	1899	95.00
21 3230 1400 910 6210 320	LARGE GROUP DISTRICT MUSIC CONTEST REGIS	95.00
IOWA HIGH SCHOOL MUSIC ASSOC	2157	120.00
21 3230 1400 910 6220 320	LG GROUP FESTIVAL ENTRY FEE	120.00
Vendor Name IOWA HIGH SCHOOL MUSIC ASSOC		<u>215.00</u>
MOUSYNDIXON LLC	MD20180404-4A	400.00
21 3230 1400 910 6210 320	MUSICAL SOUND SYSTEM SETUP	400.00
Vendor Name MOUSYNDIXON LLC		<u>400.00</u>

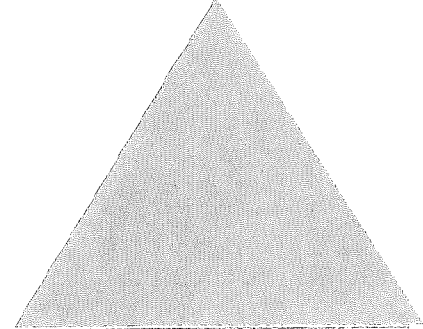
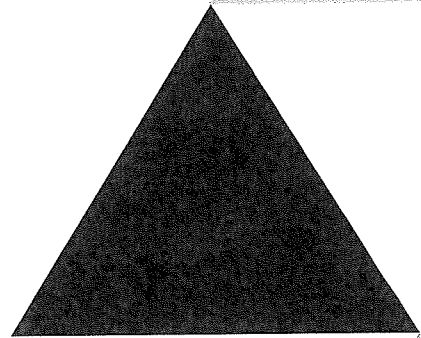
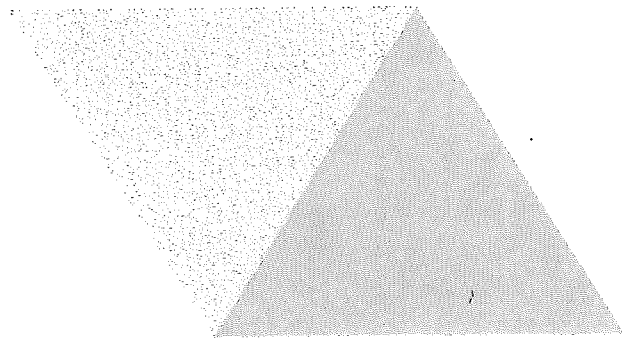
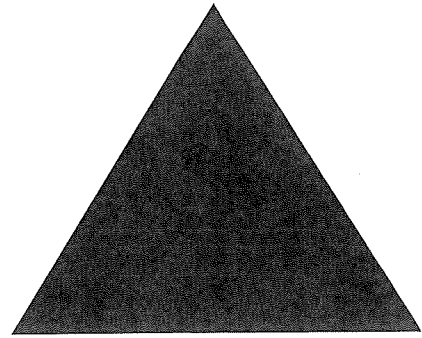
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Vendor Name	Invoice Number	Amount
Account Number	Detail Description	Amount
RED OAK HARDWARE HANK	25218	352.00
21 0010 1400 920 6650 618	TENNIS BALLSx4 BOXES	352.00
Vendor Name	RED OAK HARDWARE HANK	<u>352.00</u>
RIEMAN MUSIC, INC.	2670167	12.00
21 2020 1400 910 6220 618	OBOE REED	12.00
Vendor Name	RIEMAN MUSIC, INC.	<u>12.00</u>
SHENANDOAH COMMUNITY SCHOOLS	041018	180.00
21 0010 1400 920 6660 618	MUSTANG GOLF INVITE ENTRY FEE	90.00
21 0010 1400 920 6660 618	FILLIES GOLF INVITE ENTRY FEE	90.00
Vendor Name	SHENANDOAH COMMUNITY SCHOOLS	<u>180.00</u>
Fund Number	21	<u>17,491.65</u>
Checking Account ID	3	<u>17,491.65</u>

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# FORMS FOR SIGNATURE





**MERCER**

**MAKE TOMORROW, TODAY**

**Red Oak Community Schools**

*Renewal Rate Summary*

**REVISED**

**Renewal Rates, Effective July 1, 2018 through June 30, 2019**

<i>Health Insurance</i>	<u>Single</u>	<u>Family</u>
<i>Select 750</i>	\$670.47	\$1,907.60
<i>Select 1250</i>	\$641.29	\$1,821.71
<i>Select 1500</i>	\$622.32	\$1,765.86

*FSA Administration - Kabel Business Services*                      \$4.65    Per Participant per Month

\_\_\_\_\_

Date

\_\_\_\_\_

Name

\_\_\_\_\_

Title

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Wellmark Blue Cross and Blue Shield is an Independent Licensee of the Blue Cross and Blue Shield Association.

**SBC Employer Data Form – Response Required**

1. Group Name: RED OAK CSD

2. Group Number: 80086-0005

3. My group is holding an Open Enrollment:  Yes  No

4. If yes, my group's enrollment period is:\*\*        /        /        -        /        /       

\*\* "Enrollment Period" is defined in ACA as the period in which employees can enroll within a plan or plans, and/or when written application materials are provided to employees, if sooner.

5. Date SBCs are needed, to include with open enrollment materials:        /        /       

6. Health Plan Renewal Month (e.g., January): JULY

7. Plan Year Month (e.g., January): JULY

8. Group SBC Contact Person Name/Title: SHIRLEY MAXWELL Deb Drey

9. Group SBC Contact Person E-mail: dreyd@roschools.org

10. Group SBC Contact Person Phone: 712 - 623 - 6600 Ext:       

11. Group SBC Contact Person Address: 1901 N Broadway Ste A Red Oak IA 51566  
Street City State Zip

I certify that the above information is accurate and that I am an authorized employee or owner of the employer with authority to sign on behalf of the employer.

\_\_\_\_\_  
Employer Signature Date

If you will NOT be using standard SBCs provided by Wellmark, please check the option below:

Our Self-Funded group will be developing our own SBCs to distribute.

Please Note: If you modify or opt out of using the standard, Wellmark-provided SBCs, please be aware that Wellmark will not be able to retain or distribute your customized SBCs to your employees.

*Wellmark is not providing, and does not provide, any legal advice with regard to compliance with the requirements of the Affordable Care Act (ACA), or any other federal or state law. This document is not intended, and shall not be construed, to provide any legal advice, and may not be relied upon as such. Regulations and guidance on specific provisions of the ACA and other federal laws, including but not limited to the transitional reinsurance program fee, have been and will continue to be provided by the U.S. Department of Health and Human Services (HHS) and/or other agencies. The information provided in this document reflects Wellmark's understanding of the most current information and is subject to change without further notice. For specific information regarding the application of these rules to your facts, or other compliance issues under applicable law, please consult the advice of your legal advisors.*

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## Health Care Reform Summary of Benefits and Coverage (SBC) Employer Data Form for Fully Insured Groups 101+ and All Self-Funded Groups

The Affordable Care Act (ACA) requires that all group health plans, group health plan administrators and health insurance issuers provide a Summary of Benefits and Coverage (SBC) to employees. The SBC is required to follow a standard format to provide information about coverage and benefits.

Wellmark provides SBCs to Fully Insured 101+ and all Self-Funded employer groups, so that they may distribute SBCs to employees and COBRA/Continuation beneficiaries as part of open enrollment or renewal, or in conjunction with the employer's plan year.

Wellmark provides an electronic solution for our Fully Insured 101+ and Self-Funded group customers. SBCs are emailed\* to employer groups. Employers should distribute and/or make SBCs available to employees during the specific events below. Please be aware that compliance and distribution of SBCs is a Plan Sponsor responsibility.

- 1. Open Enrollment Period:** All employees must receive SBCs by the first day employees can enroll in a plan, or when application materials are distributed, if sooner.
- 2. Auto-Renewing Groups (no Enrollment Period):** Self-Funded groups – SBCs must be provided to employees 30 days prior to renewal. Fully Insured groups – SBCs must be provided to employees no later than 7 days after issuance of coverage manual.
- 3. Enrollment:** Employees must receive SBCs when s/he changes plans or joins a plan throughout the year (i.e., new hires, special and late entrants).
- 4. Material Modification (outside of renewal):** Updated SBCs must be provided to all employees 60 days in advance of any change that requires the SBC to be changed.

More details on responsibilities concerning SBC applicability and accountability can be found on [WeKnowReform.com](http://WeKnowReform.com).

### Next Steps: Please review, complete and return the form on the next page.

To assist Wellmark in providing your SBCs within your compliance period, please provide/update the information on the next page, verified with your signature, and return it to your Wellmark representative or broker 30 days in advance of the date that you need SBCs. Thank you for your help as we work to assist you in complying with this ACA provision. If you have any questions, please contact your Wellmark representative.

*Please note:* To ensure SBCs are provided to you within the appropriate time, you will need to notify Wellmark of your final benefit decision(s) a minimum of 10 business days prior to your date of need.

\*Our standard approach to complying with the SBC requirement leverages electronic distribution to provide SBCs to employers (where employers may post electronic SBCs on their websites for employees to have anytime access). Employers using electronic distribution to provide SBCs to employees should abide by current Department of Labor electronic distribution guidelines. Options are also available to provide print/paper SBCs.

Note: Wellmark's BluesEnroll system provides access to SBCs for members using the system for self-serve enrollment.

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FOR ADMINISTRATIVE USE ONLY  
New Group: Group # \_\_\_\_\_  
Coverage Effective Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### CONFIRMATION OF MSP ADDENDUM

**ALL NEW AND RENEWAL GROUPS ARE REQUIRED TO SUBMIT A COMPLETED FORM. FAILURE TO SUBMIT A COMPLETED FORM WILL DELAY THE INITIAL ENROLLMENT OR RENEWAL PROCESS UNTIL THIS FORM IS SUBMITTED.**

#### Part A - Employer Information

Please complete a separate confirmation form for each Employer Tax Identification Number you use to report employee earnings to the Internal Revenue Service (IRS). See the Medicare Secondary Payer Definitions page (M-1756) for more information on terms shown in italics.

Employer Tax Identification Number: 

4	2	6	0	3	8	4	0	3
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Group Number (Renewing Groups Only): 80086-0005

Employer Name: Red Oak CSD

Employer Address: ~~2011 N 8th St~~ 1901 N Broadway Ste A

City: Red Oak State: IA Zip: 51566

Contact Person: Shirley Maxwell Deb Drey  
Telephone Number: 712-623-6600 E-mail Address (optional): dreyd@roschools.org

1. Did your organization make contributions on behalf of any employee who was covered under a *collectively bargained Health and Welfare Fund* (i.e., union plan) during the previous calendar year?  Yes  No
2. Did you have 20 or more *employees* for 20 or more calendar weeks (this includes all full-time, *part-time*, intermittent, *leased* and/or seasonal employees, not just those eligible or enrolled employees) during the previous or current calendar year? If no, in the event you experience a change, you must notify Wellmark when this change occurs.  Yes  No
3. Did you have 100 or more *employees* during 50 percent of your business days (this includes all full-time, *part-time*, intermittent, *leased* and/or seasonal employees, not just those eligible or enrolled employees) during the previous calendar year?  Yes  No
4. Did your organization participate in a *multi* or *multiple employer group health plan* (more than one employer in group, i.e., Multiple Employer Welfare Association) during the previous calendar year? If yes, what is the name and address of the *multi* or *multiple employer plan*?  Yes  No  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
5. Was your organization part of a commonly owned or commonly controlled group of organizations during the previous calendar year? If yes, what is the name and address of the *commonly owned/controlled entity*?  Yes  No  
Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Name: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

#### Part B - Employer Certification

I certify that the information provided is accurate and truthful. All information will be used to identify the Medicare Secondary Payer status of Medicare-enrolled employees.

Signature \_\_\_\_\_ Date \_\_\_\_\_ 20

Send completed MSP form based on following:			
IA & SD Large Groups (new or renewal)	IA & SD Small Groups (new or renewing with benefit changes)	IA Small Groups renewing with no benefit change - send this form to:	SD Small Groups renewing with no benefit change
Submit this completed MSP form with group's health plan new or renewal paperwork	Submit this completed MSP form with group's health plan new or renewal paperwork	Fax: (515) 376-9044 or Wellmark, Inc. PO Box 9232 - Mail Station 3W396 Des Moines, IA 50306-9232	Send this completed MSP form to: Wellmark, Inc. PO Box 5023 - Station 338 Sioux Falls, SD 57117-5023



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Blue Shield Association

## MEDICARE COMPLIANCE

The purpose of this communication is to notify employers of the mandatory reporting requirements of the Medicare, Medicaid, and SCHIP Extension Act of 2007 which were passed into law in July 2008. Your cooperation in providing the necessary employer data and data for each employee and dependent is needed in order to comply with the requirements.

The Section 111 mandates of the law help payers identify when the Centers for Medicare and Medicaid Services (CMS) should pay secondary to employer group health coverage. The goal includes reducing the amount CMS may pay as primary when they should have paid as secondary.

Under the requirements, all health plan, liability, no fault and workers compensation coverages must register with CMS as a Responsible Reporting Entity (RRE) and must report to CMS employer and member information. In order to fulfill the mandated requirements and report accurately to CMS, Wellmark, as a RRE, must gather and groups must provide the following information:

- Employer Tax Identification Number (ETIN)
- Evidence of status as a Commonly Owned/Controlled Group of Organizations, Multi/Multiple Employer Group health plan (such as an Association or Trust), Hour Bank or Union health plan
- Total number of group employees/group size
- Social Security Numbers (SSNs) or Health Insurance Claim Numbers (HICNs) of active employees, spouses, domestic partners
- SSNs or HICNs for those dependents with end stage renal disease (ESRD) or disabled
- Status of all employees and effective date of that status (i.e. active, COBRA, retired)
- Disability information begin or end dates, if known

Please take a moment to complete the Confirmation of Medicare Secondary Payer (MSP) Addendum form. This will allow us to capture your employer data for reporting to CMS. Member data is gathered through the use of the group's existing enrollment and eligibility data collection channels, which may include paper applications or electronic data exchanges and should be provided through those processes.

Failure to provide the group information requested on the attached Confirmation of MSP Addendum can result in penalties being assessed to the group including, but not limited to, \$1,000 per day per member for not accurately reporting to CMS and/or an excise tax equivalent to 25 percent of the employer's group health plan expenses for the relevant year.

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Red Oak Community School  
 Group Number: 80086-0005  
 Rating Period: 7/1/2018 through 6/30/2019  
 Fully Insured Trust Alternate Options

Iowa Educator Group Insurance Trust Premium with Consultant Fee

Trust/Benefit Name	Health OBS	Drug OBS	Ded	Coins	OPM	OV Copay	RX Ded	RX Copay	RX OPM	Single	Family	Single	Family	
											Wellmark Rates		Rates Including Consultant Fees	
Classic 100	167751-26	IN MED	\$100/\$200	10%/20%	\$500/\$500	N/A	N/A	N/A	N/A	\$730.99	\$2,151.83	\$764.99	\$2,185.83	
Classic 200	167755-22	IN MED	\$200/\$400	10%/20%	\$500/\$1,000	N/A	N/A	N/A	N/A	\$715.99	\$2,107.69	\$749.99	\$2,141.69	
Classic 250	167758-22	IN MED	\$250/\$500	15%/25%	\$500/\$1,000	N/A	N/A	N/A	N/A	\$694.71	\$2,045.03	\$728.71	\$2,079.03	
Classic 500	167761-28	IN MED	\$500/\$1,000	10%/20%	\$1,000/\$2,000	N/A	N/A	N/A	N/A	\$680.86	\$2,004.27	\$714.86	\$2,038.27	
Select 750	167774-23	265171-1	\$750/\$1,500	25%/35%	\$1,500/\$3,000	N/A	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$636.47	\$1,873.60	\$670.47	\$1,907.60	
Select 1250	167781-25	265171-1	\$1,250/\$2,500	25%/35%	\$2,500/\$5,000	N/A	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$607.29	\$1,787.71	\$641.29	\$1,821.71	
Select 1500	167785-22	265171-1	\$1,500/\$3,000	25%/35%	\$3,000/\$6,000	N/A	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$588.32	\$1,731.86	\$622.32	\$1,765.86	
Select 2000	156072-86	265171-1	\$2,000/\$4,000	20%/30%	\$4,000/\$8,000	N/A	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$567.60	\$1,670.87	\$601.60	\$1,704.87	
Select 2500	156071-34	265171-1	\$2,500/\$5,000	20%/30%	\$5,000/\$10,000	N/A	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$538.94	\$1,586.51	\$572.94	\$1,620.51	
Select 3000	156072-89	265196-1	\$3,000/\$6,000	25%/35%	\$6,000/\$12,000	N/A	\$50/\$100	\$8/\$35/\$50/\$50%	\$1,300/\$2,600	\$514.45	\$1,514.41	\$548.45	\$1,548.41	
Select 5000	156072-96	265196-2	\$5,000/\$10,000	25%/35%	\$6,000/\$12,000	N/A	\$50/\$100	\$8/\$35/\$50/\$50%	\$1,300/\$2,600	\$463.65	\$1,364.87	\$497.65	\$1,398.87	
Copay 500	156091-67	9015-218	\$500/\$1,000	20%/30%	\$1,000/\$2,000	\$10	N/A	\$10/\$20/\$30	\$250/\$500	\$679.61	\$2,000.59	\$713.61	\$2,034.59	
Copay Select 500	156090-37	9015-219	\$500/\$1,000	20%/30%	\$1,000/\$2,000	\$10/\$20	\$50/\$100	\$10/\$20/\$30	\$1,500/\$3,000	\$671.90	\$1,977.88	\$705.90	\$2,011.88	
Copay 750	156089-30	265211-1	\$750/\$1,500	20%/30%	\$1,500/\$3,000	\$10	N/A	\$10/\$25/\$40	\$1,500/\$3,000	\$649.56	\$1,912.12	\$683.56	\$1,946.12	
Copay Select 750	156088-29	265171-1	\$750/\$1,500	20%/30%	\$1,500/\$3,000	\$10/\$20	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$647.25	\$1,905.32	\$681.25	\$1,936.32	
Copay 1000	156087-59	9015-218	\$1,000/\$2,000	20%/30%	\$2,000/\$4,000	\$10	N/A	\$10/\$20/\$30	\$250/\$500	\$639.32	\$1,881.97	\$673.32	\$1,915.97	
Copay Select 1000	156086-84	9015-219	\$1,000/\$2,000	20%/30%	\$2,000/\$4,000	\$10/\$20	\$50/\$100	\$10/\$20/\$30	\$1,500/\$3,000	\$631.43	\$1,858.76	\$665.43	\$1,892.76	
Copay 1250	156084-36	9015-218	\$1,250/\$2,500	20%/30%	\$2,500/\$5,000	\$10	N/A	\$10/\$20/\$30	\$250/\$500	\$628.94	\$1,851.43	\$662.94	\$1,885.43	
Copay Select 1250	156083-27	9015-219	\$1,250/\$2,500	20%/30%	\$2,500/\$5,000	\$10/\$20	\$50/\$100	\$10/\$20/\$30	\$1,500/\$3,000	\$621.00	\$1,828.05	\$655.00	\$1,862.05	
Copay Select 1500	156581-98	265171-1	\$1,500/\$3,000	20%/30%	\$3,000/\$6,000	\$15/\$30	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$597.84	\$1,759.87	\$631.84	\$1,793.87	
Copay Select 2500	156581-101	265233-1	\$2,500/\$5,000	25%/35%	\$5,000/\$10,000	\$20/\$40	\$50/\$100	\$8/\$35/\$50/\$50%	\$1,500/\$3,000	\$535.49	\$1,576.34	\$569.49	\$1,610.34	
Copay Select 3000	156072-92	265196-1	\$3,000/\$6,000	25%/35%	\$6,000/\$12,000	\$25/\$50	\$50/\$100	\$8/\$35/\$50/\$50%	\$1,300/\$2,600	\$515.65	\$1,517.94	\$549.65	\$1,551.94	
HDHP 2000 NE	231118-12	265240-1	\$2,000/\$4,000	20%/40%	\$3,275/\$6,550	N/A	\$2,000/\$4,000	20%	\$2,275/\$6,550	\$497.58	\$1,464.73	\$531.58	\$1,498.73	
HDHP 2500 NE	243458-9	265244-1	\$2,500/\$5,000	N/A	\$2,500/\$5,000	N/A	\$2,500/\$5,000	N/A	\$2,500/\$5,000	\$499.56	\$1,470.58	\$533.56	\$1,504.58	
HDHP 3000 NE	243462-9	265248-1	\$3,000/\$6,000	N/A	\$3,000/\$6,000	N/A	\$3,000/\$6,000	N/A	\$3,000/\$6,000	\$477.37	\$1,405.24	\$511.37	\$1,439.24	
HDHP 5000 E	243465-9	265252-1	\$5,000/\$10,000	N/A	\$5,000/\$10,000	N/A	\$5,000/\$10,000	N/A	\$5,000/\$10,000	\$404.32	\$1,190.22	\$438.32	\$1,224.22	
Blue Advantage	3321-199	4182-81	N/A	10%	\$750/\$1,500	\$10	N/A	\$5/\$10	\$1,500/\$3,000	\$634.50	\$1,667.79	\$668.50	\$1,901.79	
Blue Advantage 750	3321-202	4182-82	\$750/\$1,500	10%	\$1,500/\$3,000	\$15	N/A	\$8/\$25/\$40	\$1,500/\$3,000	\$573.75	\$1,688.97	\$607.75	\$1,722.97	
Blue Access 500	3321-205	4182-83	\$500/\$1,000	10%	\$1,000/\$2,000	\$10	N/A	\$10/\$25/\$40	\$1,500/\$3,000	\$599.52	\$1,764.82	\$633.52	\$1,798.82	
Blue Access 1000	3321-208	4182-83	\$1,000/\$2,000	10%	\$2,000/\$4,000	\$10	N/A	\$10/\$25/\$40	\$1,500/\$3,000	\$564.44	\$1,661.55	\$598.44	\$1,695.55	
Blue Access 2000	3321-211	4182-82	\$2,000/\$4,000	20%	\$4,000/\$8,000	\$20/\$40	N/A	\$8/\$25/\$40	\$1,500/\$3,000	\$512.63	\$1,509.05	\$546.63	\$1,543.05	
Blue Choice 1500	156087-62	9015-220	\$1,500/\$3,000	20%/20%/40%	\$3,000/\$6,000	\$20/\$40	N/A	\$8/\$35/\$50	\$1,500/\$3,000	\$531.87	\$1,565.67	\$565.87	\$1,599.67	

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<input type="checkbox"/>	Blue Choice 2500	156087-65	9015-220	\$2,500/\$5,000	20%/20%/40%	\$5,000/\$10,000	\$20/\$40/ N/A	N/A	\$83/\$35/\$50	\$1,500/\$3,000	\$485.45	\$1,429.05	\$519.45	\$1,463.05
<input type="checkbox"/>	Value 1000	156091-70	9015-221	\$1,000/\$2,000	25%/50%	\$2,000/\$4,000	N/A	\$100/\$200	\$83/\$35/\$50	\$1,500/\$3,000	\$595.39	\$1,752.68	\$629.39	\$1,786.68
<input type="checkbox"/>	Value 2000	156091-73	9015-221	\$2,000/\$4,000	25%/50%	\$4,000/\$8,000	N/A	\$100/\$200	\$83/\$35/\$50	\$1,500/\$3,000	\$540.12	\$1,589.98	\$574.12	\$1,623.98
<input type="checkbox"/>	Value 3000	156091-76	9015-222	\$3,000/\$6,000	25%/50%	\$6,000/\$12,000	N/A	\$100/\$200	\$83/\$35/\$50	\$1,500/\$2,300	\$496.69	\$1,462.12	\$530.69	\$1,486.12
<input type="checkbox"/>	Value 4000	156091-79	9015-223	\$4,000/\$8,000	25%/50%	\$7,150/\$14,300	N/A	\$100/\$200	\$83/\$35/\$50	\$1,500/\$14,300	\$457.29	\$1,346.15	\$491.29	\$1,380.15
<input type="checkbox"/>	Value 5000	156091-82	9015-224	\$5,000/\$10,000	25%/50%	\$7,150/\$14,300	N/A	\$100/\$200	\$83/\$35/\$50	\$1,500/\$14,300	\$432.69	\$1,273.71	\$466.69	\$1,307.71
<input type="checkbox"/>	MV Plan 6350 E	211243-23	228388-15	\$6,350/\$12,700	N/A	\$6,350/\$12,700	N/A	\$6,350/\$12,700	N/A	\$6,350/\$12,700	\$374.86	\$1,103.49	\$408.86	\$1,137.49

**Comments:**

Some rates are Compatible Health Savings Account (HSA) Benefits. These rates do not include the employer/employee funded HSA account funding or the cost of the administration of these accounts. HSA Compatible plans that are embedded have an E after the trust benefit name and non-embedded HSA Compatible plans have an NE after the trust benefit name.

Wellmark Blue Cross and Blue Shield of Iowa reserves the right to re-evaluate any and all rates associated with this trust if enrollment fluctuates more than 10% from enrollment assumptions. This renewal is based on the overall trust enrollment of 9,370 enrolled contracts.

The premium quoted includes the Health Insurer Fee (HIF) as required by current law.

Wellmark is not providing any legal or professional advice with regard to compliance of any federal or state law, regulations, or guidance. Law, regulations and guidance on specific provisions has been and will continue to be provided by the appropriate federal and state agencies and regulators. The information provided reflects Wellmark's understanding of the most current information and is subject to change without further notice. Please note that plan benefits, rates, renewal rate adjustments, and rating impact calculations are subject to change and may be revised during a plan's rating period based on guidance and regulations issued by the appropriate federal and state agencies and regulators. Wellmark makes no representation as to the impact of plan changes on a plan's grandfathered status or interpretation or implementation of any other provisions of law or regulation.

Wellmark will not determine whether coverage is discriminatory or otherwise in violation of Internal Revenue Code Section 105(f). Wellmark also will not provide any testing for compliance with Internal Revenue Code Section 105(f). Wellmark will not be held liable for any penalties or other losses resulting from any employer offering coverage in violation of section 105(f). Wellmark will not determine whether any change in an Employer Administered Funding Arrangement affects a health plan's grandfathered health plan status under ACA or otherwise complies with ACA. Wellmark will not be held liable for any penalties or other losses resulting from any Employer Administered Funding Arrangement. For purposes of this paragraph, an "Employer Administered Funding Arrangement" is an arrangement administered by an employer in which the employer contributes toward the member's share of benefit costs (such as the member's deductible, coinsurance, or copayments) in the absence of which the member would be financially responsible. An Employer Administrative Funding Arrangement does not include the employer's contribution to health insurance premiums or rates.

Wellmark Premium Rates shown do not include commission or any consultant fee which may be charged by your consultant or service provider. The participating employer may view the monthly Wellmark Group Statement by registering for online statements at Wellmark.com.

Employer Signature: _____	Date: _____
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Wellmark Blue Cross and Blue Shield is an Independent Licensee of the Blue Cross and Blue Shield Association.

Red Oak Community School  
Group Number: 80086-0005

Rating Period: 7/1/2018 through 6/30/2019

Fully Insured Trust Alternate Options

Iowa Educator Group Insurance Trust Premium

REVISED

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Single Family  
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Trust Benefit Name	Health OBS	Drug OBS	Ded	Coins	OPM	OV Copay	RX Ded	RX Copay	RX OPM	Single	Family
Classic 100	167751-26	IN MED	\$100/\$200	10%/20%	\$500/\$500	N/A	N/A	N/A	N/A	\$730.99	\$2,151.83
Classic 200	167755-22	IN MED	\$200/\$400	10%/20%	\$500/\$1,000	N/A	N/A	N/A	N/A	\$715.99	\$2,107.69
Classic 250	167758-22	265171-1	\$250/\$500	15%/25%	\$500/\$1,000	N/A	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$694.71	\$2,045.03
Classic 500	167761-28	IN MED	\$500/\$1,000	10%/20%	\$1,000/\$2,000	N/A	N/A	N/A	N/A	\$680.86	\$2,004.27
Select 750	167774-23	265171-1	\$750/\$1,500	25%/35%	\$1,500/\$3,000	N/A	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$636.47	\$1,873.60
Select 1250	167781-25	265171-1	\$1,250/\$2,500	25%/35%	\$2,500/\$5,000	N/A	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$607.29	\$1,787.71
Select 1500	167785-22	265171-1	\$1,500/\$3,000	25%/35%	\$3,000/\$6,000	N/A	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$588.32	\$1,731.86
Select 2000	156072-86	265171-1	\$2,000/\$4,000	20%/30%	\$4,000/\$8,000	N/A	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$567.60	\$1,670.87
Select 2500	156071-34	265171-1	\$2,500/\$5,000	20%/30%	\$5,000/\$10,000	N/A	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$538.94	\$1,586.51
Select 3000	156072-89	265196-1	\$3,000/\$6,000	25%/35%	\$6,000/\$12,000	N/A	\$50/\$100	\$8/\$35/ >\$50/50%	\$1,300/\$2,600	\$514.45	\$1,514.41
Select 5000	156072-96	265196-2	\$5,000/\$10,000	25%/35%	\$6,000/\$12,000	N/A	\$50/\$100	\$8/\$35/ >\$50/50%	\$1,300/\$2,600	\$463.65	\$1,364.87
Copay 500	156091-67	9015-218	\$500/\$1,000	20%/30%	\$1,000/\$2,000	\$10	N/A	\$10/\$20/\$30	\$250/\$500	\$679.61	\$2,000.59
Copay Select 500	156090-37	9015-219	\$500/\$1,000	20%/30%	\$1,000/\$2,000	\$10/\$20	\$50/\$100	\$10/\$20/\$30	\$1,500/\$3,000	\$671.90	\$1,977.88
Copay 750	156089-30	265211-1	\$750/\$1,500	20%/30%	\$1,500/\$3,000	\$10	N/A	\$10/\$25/\$40	\$1,500/\$3,000	\$649.56	\$1,912.12
Copay Select 750	156088-29	265171-1	\$750/\$1,500	20%/30%	\$1,500/\$3,000	\$10/\$20	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$647.25	\$1,905.32
Copay 1000	156087-59	9015-218	\$1,000/\$2,000	20%/30%	\$2,000/\$4,000	\$10	N/A	\$10/\$20/\$30	\$250/\$500	\$639.32	\$1,881.97
Copay Select 1000	156086-84	9015-219	\$1,000/\$2,000	20%/30%	\$2,000/\$4,000	\$10/\$20	\$50/\$100	\$10/\$20/\$30	\$1,500/\$3,000	\$631.43	\$1,858.76
Copay 1250	156084-36	9015-218	\$1,250/\$2,500	20%/30%	\$2,500/\$5,000	\$10	N/A	\$10/\$20/\$30	\$250/\$500	\$628.94	\$1,851.43
Copay Select 1250	156083-27	9015-219	\$1,250/\$2,500	20%/30%	\$2,500/\$5,000	\$10/\$20	\$50/\$100	\$10/\$20/\$30	\$1,500/\$3,000	\$621.00	\$1,828.05
Copay Select 1500	156581-98	265171-1	\$1,500/\$3,000	20%/30%	\$3,000/\$6,000	\$15/\$30	\$50/\$100	\$10/\$25/\$40	\$1,500/\$3,000	\$597.84	\$1,759.87
Copay Select 2500	156581-101	265233-1	\$2,500/\$5,000	25%/35%	\$5,000/\$10,000	\$20/\$40	\$50/\$100	\$8/\$35/ >\$50/50%	\$1,500/\$3,000	\$535.49	\$1,576.34
Copay Select 3000	156072-92	265196-1	\$3,000/\$6,000	25%/35%	\$6,000/\$12,000	\$25/\$50	\$50/\$100	\$8/\$35/ >\$50/50%	\$1,300/\$2,600	\$515.65	\$1,517.94
HDHP 2000 NE	231118-12	265240-1	\$2,000/\$4,000	20%/40%	\$3,275/\$6,550	N/A	\$2,000/\$4,000	20%	\$3,275/\$6,550	\$497.58	\$1,464.73
HDHP 2500 NE	243458-9	265244-1	\$2,500/\$5,000	N/A	\$2,500/\$5,000	N/A	\$2,500/\$5,000	N/A	\$2,500/\$5,000	\$499.56	\$1,470.58
HDHP 3000 NE	243462-9	265248-1	\$3,000/\$6,000	N/A	\$3,000/\$6,000	N/A	\$3,000/\$6,000	N/A	\$3,000/\$6,000	\$477.37	\$1,405.24
HDHP 5000 E	243465-9	265252-1	\$5,000/\$10,000	N/A	\$5,000/\$10,000	N/A	\$5,000/\$10,000	N/A	\$5,000/\$10,000	\$404.32	\$1,190.22
Blue Advantage	3321-199	4182-81	N/A	10%	\$750/\$1,500	\$10	N/A	\$5/\$10	\$1,500/\$3,000	\$634.50	\$1,867.79
Blue Advantage 750	3321-202	4182-82	\$750/\$1,500	10%	\$1,500/\$3,000	\$15	N/A	\$8/\$25/\$40	\$1,500/\$3,000	\$573.75	\$1,688.97

Independent Licensee of the Blue Cross and Blue Shield Association

3/28/2018

<input type="checkbox"/>	Blue Access 500	3321-205	4182-83	\$500/\$1,000	10%	\$1,000/\$2,000	\$10	N/A	\$10/\$25/\$40	\$1,500/\$3,000	\$599.52	\$1,764.82
<input type="checkbox"/>	Blue Access 1000	3321-208	4182-83	\$1,000/\$2,000	10%	\$2,000/\$4,000	\$10	N/A	\$10/\$25/\$40	\$1,500/\$3,000	\$564.44	\$1,661.55
<input type="checkbox"/>	Blue Access 2000	3321-211	4182-82	\$2,000/\$4,000	20%	\$4,000/\$8,000	\$20/\$40	N/A	\$8/\$25/\$40	\$1,500/\$3,000	\$512.63	\$1,509.05
<input type="checkbox"/>	Blue Choice 1500	156087-62	9015-220	\$1,500/\$3,000	20%/20%/40%	\$3,000/\$6,000	\$20/\$40/ N/A	N/A	\$8/\$35/\$50	\$1,500/\$3,000	\$531.87	\$1,565.67
<input type="checkbox"/>	Blue Choice 2500	156087-65	9015-220	\$2,500/\$5,000	20%/20%/40%	\$5,000/\$10,000	\$20/\$40/ N/A	N/A	\$8/\$35/\$50	\$1,500/\$3,000	\$485.45	\$1,429.05
<input type="checkbox"/>	Value 1000	156091-70	9015-221	\$1,000/\$2,000	25%/50%	\$2,000/\$4,000	N/A	\$100/\$200	\$8/\$35/\$50	\$1,500/\$3,000	\$595.39	\$1,752.68
<input type="checkbox"/>	Value 2000	156091-73	9015-221	\$2,000/\$4,000	25%/50%	\$4,000/\$8,000	N/A	\$100/\$200	\$8/\$35/\$50	\$1,500/\$3,000	\$540.12	\$1,589.98
<input type="checkbox"/>	Value 3000	156091-76	9015-222	\$3,000/\$6,000	25%/50%	\$6,000/\$12,000	N/A	\$100/\$200	\$8/\$35/\$50	\$1,150/\$2,300	\$496.69	\$1,462.12
<input type="checkbox"/>	Value 4000	156091-79	9015-223	\$4,000/\$8,000	25%/50%	\$7,150/\$14,300	N/A	\$100/\$200	\$8/\$35/\$50	\$7,150/\$14,300	\$457.29	\$1,346.15
<input type="checkbox"/>	Value 5000	156091-82	9015-224	\$5,000/\$10,000	25%/50%	\$7,150/\$14,300	N/A	\$100/\$200	\$8/\$35/\$50	\$7,150/\$14,300	\$432.69	\$1,273.71
<input type="checkbox"/>	MV Plan 6350 E	211243-23	228388-15	\$6,350/\$12,700	N/A	\$6,350/\$12,700	N/A	\$6,350/\$12,700	N/A	\$6,350/\$12,700	\$374.86	\$1,103.49

**Comments:**

Some rates are Compatible Health Savings Account (HSA) Benefits. These rates do not include the employer/employee funded HSA account funding or the cost of the administration of these accounts. HSA Compatible plans that are embedded have an E after the trust benefit name and non-embedded HSA Compatible plans have an NE after the trust benefit name.

Wellmark Blue Cross and Blue Shield of Iowa reserves the right to re-evaluate any and all rates associated with this trust if enrollment fluctuates more than 10% from enrollment assumptions. This renewal is based on the overall trust enrollment of 9,370 enrolled contracts.

The premium quoted includes the Health Insurer Fee (HIF) as required by current law.

Wellmark is not providing any legal or professional advice with regard to compliance of any federal or state law, regulations, or guidance. Law, regulations and guidance on specific provisions has been and will continue to be provided by the appropriate federal and state agencies and regulators. The information provided reflects Wellmark's understanding of the most current information and is subject to change without further notice. Please note that plan benefits, rates, renewal rate adjustments, and rating impact calculations are subject to change and may be revised during a plan's rating period based on guidance and regulations issued by the appropriate federal and state agencies and regulators. Wellmark makes no representation as to the impact of plan changes on a plan's grandfathered status or interpretation or implementation of any other provisions of law or regulation.

Wellmark will not determine whether coverage is discriminatory or otherwise in violation of Internal Revenue Code Section 105(h). Wellmark also will not provide any testing for compliance with Internal Revenue Code Section 105(h). Wellmark will not be held liable for any penalties or other losses resulting from any employer offering coverage in violation of section 105(h). Wellmark will not determine whether any change in an Employer Administered Funding Arrangement affects a health plan's grandfathered health plan status under ACA or otherwise complies with ACA. Wellmark will not be held liable for any penalties or other losses resulting from any Employer Administered Funding Arrangement. For purposes of this paragraph, an "Employer Administered Funding Arrangement" is an arrangement administered by an employer in which the employer contributes toward the member's share of benefit costs (such as the member's deductible, coinsurance, or copayments) in the absence of which the member would be financially responsible. An Employer Administrative Funding Arrangement does not include the employer's contribution to health insurance premiums or rates.

Wellmark Premium Rates shown do not include commission or any consultant fee which may be charged by your consultant or service provider.

The participating employer may view the monthly Wellmark Group Statement by registering for online statements at Wellmark.com.

Employer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Note: This is a summary of benefits under this plan, not a statement of contract. The actual terms and conditions of coverage will be specified in the Group Insurance Policy issued by Wellmark or the Administrative Services Agreement between Wellmark and the entity below, as well as the Benefits Certificate and any amendments thereto.

**Benefit Summary - IOWA EDUCATORS TRUST**

Group Number/BU: 80086- Group Product Summary ID: **167774-23** Coverage Code:  
Alpha Prefix: XQH Benefit Dates: 7/1/2018 - 6/30/2019 Summary Status: **Rating Group**  
Account Manager: Bowlin, Sharon Broker: Mercer Health & Benefits

**IAED SELECT 750 PPO**

**Group Information RED OAK COMMUNITY SCHOOL DISTRICT**  
**Product/Version: Alliance Select (201009)**

**Account Signature X \_\_\_\_\_ Date X \_\_\_\_\_**

**General**

- Renewing group
- Fully insured
- This plan or policy does meet minimum value
- Group is a trust
- Name: The Educators Group
- Plan year begins on: 07/01
- Healthcare Reform Non-Grandfathered Plan
- Benefit period is calendar year
- BlueCard PPO - In states with no PPO or PPO specialty, providers are treated as PPO as determined by Wellmark and the local Blue plan

**Eligibility**

- An eligible child is married or unmarried and is under 26 years of age.
- An eligible child is an unmarried dependent full-time student regardless of age.
- An eligible child is disabled before age 26 and remains unmarried after age 26.
- An eligible child is unmarried and disabled while a full-time student after age 26.
- Dependent coverage terminates at the end of the month
- Two-way rate (single/family)
- Coverage for unmarried domestic partners includes both same and opposite sex domestic partners. Domestic relationship has to be in effect for 12 months prior to coverage
- Certificate coverage ends at the end of the month

Subrogation applies

Standard administration of coordination of benefits (COB)

Routine maternity benefits apply to employee/spouse/dependent

Do not include ERISA Information Requirements language

Coordination of benefits rules apply to members when Medicare is the primary payer

### **Preexisting Condition Exclusion Periods**

New hires and special enrollees are covered when first eligible.

New hires and special enrollees are NOT subject to preexisting condition exclusion periods

Late enrollees (a member who is not a new hire or special enrollee) may enroll at each group renewal.

Late enrollees are NOT subject to preexisting condition exclusion periods

### **Deductibles**

Coverage has benefit period deductibles

Single deductible for PPO and non-PPO providers is: \$ 750

Family deductible for PPO and non-PPO providers is: \$ 1,500

Member has benefits after single deductible met. Entire family has benefits after family deductible has been met (or if a two-person amount is listed, then for two-person contracts, entire family has benefits after the two-person deductible has been met)

Deductible from the previous 4th quarter will carry over to this benefit period deductible

Common accident deductible applies

Wellmark to Wellmark deductible credit applies. Deductible credits transfer from one Wellmark employer group to another Wellmark employer group as long as the member keeps the same identification number.

Physician services for well-child care are NOT subject to the deductible

Physician services for newborn care are NOT subject to the deductible

Facility services for well-child care are NOT subject to the deductible

Facility services for newborn's initial hospitalization are NOT subject to the deductible

PPO outpatient preventive care is NOT subject to the deductible

PPO office services and PPO independent lab fees are NOT subject to the deductible

PPO urgent care services are NOT subject to the deductible

Most outpatient x-ray/lab services from PPO facilities are NOT subject to the deductible

One postpartum home visit if released within 48 hours after a vaginal delivery/96 hours after a cesarean delivery is NOT subject to the deductible

Preventive care (other than routine vision exams) from PPO providers is NOT subject to the deductible

Preventive care from participating providers is NOT subject to the deductible

Routine vision exams from PPO providers are NOT subject to the deductible

Prosthetic limbs from PPO providers are NOT subject to the deductible

Telehealth services are NOT subject to the deductible

Other services NOT subject to the deductible are: Mammograms

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## **Copay**

Copays do NOT apply

## **Coinsurance**

Coinsurance for PPO providers is the following percentage: 25

Coinsurance for non-PPO providers is the following percentage: 35

Prosthetic limbs from PPO providers have the following coinsurance percentage: 20

One postpartum home visit if released within 48 hours after vaginal delivery/96 hours after cesarean delivery is NOT subject to coinsurance

Preventive care (other than routine vision exams) from PPO providers is NOT subject to coinsurance

Preventive care from participating providers is NOT subject to the coinsurance

Routine vision exams from PPO providers are NOT subject to coinsurance

## **Out of Pocket Maximum**

Out-of-pocket maximums apply

Single out-of-pocket maximum for PPO and non-PPO providers is: \$ 1,500

Family out-of-pocket maximum for PPO and non-PPO providers is: \$ 3,000

Member has benefits after single OPM met. Entire family has benefits after family OPM has been met (or if a two-person amount is listed, then for two-person contracts, entire family has benefits after the two-person OPM has been met)

Deductible amounts apply to the out-of-pocket maximum

Coinsurance for all services apply to the out-of-pocket maximum

Deductible from the previous 4th quarter will NOT carry over to the out-of-pocket maximum for this year

Coinsurance from the previous 4th quarter will NOT carry over to the out-of-pocket maximum for this year

Wellmark to Wellmark Out-of-Pocket credit applies. Out-of-Pocket credits transfer from one Wellmark employer group to another Wellmark employer group as long as the member keeps the same identification number.

Additional out-of-pocket maximum information: Prior Commercial Credit given for NEW Groups to the trust according to the following: Coinsurance from beginning of the calendar year, Deductible from 10/01 of prior year.

## **Lifetime Maximum**

Lifetime maximum is unlimited

Lifetime maximum for hospice respite is limited to 15 days inpatient/15 days outpatient

## **Facility Services**

Iowa Psychiatric Medical Institutions for Children are covered according to state mandate

The cost of blood and administration is covered

Nonparticipating facility claims are based on maximum allowable fee

You are covered for skilled nursing services received in a hospital or nursing facility with no limit. Services must be ordered and certified by your attending physician.

## **Practitioner Services**

Advanced nurse practitioners are covered

Physician assistants are covered

Licensed marriage family therapists are covered.

Licensed mental health counselors are covered.

Dental treatment for accidental injury is covered if completed within 12 months

Surgical removal of impacted teeth is covered as an inpatient with a concurrent medical condition. Outpatient services are covered without a concurrent medical condition

Treatment of temporomandibular joint disorder is covered, except for dental restorations/extractions, and orthodontic treatment

Chiropractor services are covered as medically necessary

ABA Therapy for the treatment of Autism is covered according to state mandate with the following annual maximums: Through age 6 - \$36,000; Age 7 through 13 - \$25,000; Age 14 through 18 - \$12,500; Age 19 and over - No benefits

### **Preventive Care/Immunizations/Mammography**

Preventive physical exams are covered. A separate gynecological exam is also covered

One preventive physical exam per member per benefit period is covered

Women's preventive care services are covered according to the ACA mandate

Immunizations are covered (Travel Immunization excluded)

Mammography benefits are covered one per benefit period

Preventive Pap smears are unlimited

One routine vision exam (including refraction) per benefit period is covered

Well-child and newborn care is covered according to mandate

Hearing aids are NOT covered

Routine hearing exams are NOT covered

### **Prescription Drugs/Contraceptives**

Retail drugs are covered under a Prescription Drug Program

Prescription drugs/items for smoking cessation are covered under a Rx Program; related exams are covered under health

Smoking cessation consultations are included as part of preventive care

Contraceptives are covered. Oral and drug delivery devices, such as insertable rings and patches, are covered under a Rx Program; injected, implanted, and medical devices, such as intrauterine devices and diaphragms, are covered under health

Contraceptives covered under health are included as part of preventive care

Most specialty drugs are covered under the Prescription Drug Program, NOT under Health. Additional information for specialty drugs can be found at Wellmark.com

### **Other Services**

Supplemental accidental injury benefits are NOT covered

Reminder Programs are available

Diabetic education programs are covered according to mandate

Hospice services are covered

Infertility services and prescription drugs for infertility are covered. \*Note: Artificial insemination, IVF, GIFT, ZIFT,

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and other transfer procedures are limited to the following per lifetime: \$ 25,000

Coverage for Home Medical Equipment is unlimited.

Bariatric surgery and related treatment is covered

Major organ transplants are covered. Prior approval required.

Transplants are NOT limited to Blue Distinction Centers for Transplant

Telehealth services provided by Doctor on Demand are covered for the following services:

Medical/Pediatric

Mental health services

#### **MHCD**

Mental health/chemical dependency treatment is covered

#### **Notification Requirements**

If you are admitted to a nursing facility, an acute rehabilitation facility, or a hospital outside the states of Iowa or South Dakota, you or someone acting on your behalf must contact us to pre-certify your admission. Refer to [www.wellmark.com](http://www.wellmark.com) for other services subject to precertification. Related facility services may be subject to a reduction for failure to follow notification requirements - refer to your coverage manual or plan description for details. All services are subject to reduction for failure to follow notification requirements.

Iowa Psychiatric Medical Institutions for Children is subject to precertification. Failure to pre-certify will result in a benefit reduction. All services are subject to reduction for failure to follow notification requirements

Reduction for failure to pre-certify is 50 percent

The amount of reduction will not exceed \$500 per admission

#### **Additional Information**

Orthopedic devices are covered, including: application of orthotic, impression, casting, fitting, training, shoes and trusses

#### **Certificate/ERISA Information**

Group Name to appear on certificate cover: The Educators Group

Include Continuation of Group Coverage to YC Section



Note: This is a summary of benefits under this plan, not a statement of contract. The actual terms and conditions of coverage will be specified in the Group Insurance Policy issued by Wellmark or the Administrative Services Agreement between Wellmark and the entity below, as well as the Benefits Certificate and any amendments thereto.

**Benefit Summary - IOWA EDUCATORS TRUST**

Group Number/BU: 80086- Group Product Summary ID: **167781-25** Coverage Code:  
Alpha Prefix: XQH Benefit Dates: 7/1/2018 - 6/30/2019 Summary Status: **Rating Group**  
Account Manager: Bowlin, Sharon Broker: Mercer Health & Benefits

**IAED SELECT 1250 PPO**

<b>Group Information</b> RED OAK COMMUNITY SCHOOL DISTRICT <b>Product/Version:</b> Alliance Select (201009)
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<b>Account Signature X</b> _____ <b>Date X</b> _____
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**General**

Renewing group

Fully insured

This plan or policy does meet minimum value

Group is a trust

Name: The Educators Group

Plan year begins on: 07/01

Healthcare Reform Non-Grandfathered Plan

Benefit period is calendar year

BlueCard PPO - In states with no PPO or PPO specialty, providers are treated as PPO as determined by Wellmark and the local Blue plan

**Eligibility**

An eligible child is married or unmarried and is under 26 years of age.

An eligible child is an unmarried dependent full-time student regardless of age.

An eligible child is disabled before age 26 and remains unmarried after age 26.

An eligible child is unmarried and disabled while a full-time student after age 26.

Dependent coverage terminates at the end of the month

Two-way rate (single/family)

Coverage for unmarried domestic partners includes both same and opposite sex domestic partners. Domestic relationship has to be in effect for 12 months prior to coverage

Certificate coverage ends at the end of the month

Subrogation applies

Standard administration of coordination of benefits (COB)

Routine maternity benefits apply to employee/spouse/dependent

Do not include ERISA Information Requirements language

Coordination of benefits rules apply to members when Medicare is the primary payer

### **Preexisting Condition Exclusion Periods**

New hires and special enrollees are covered when first eligible.

New hires and special enrollees are NOT subject to preexisting condition exclusion periods

Late enrollees (a member who is not a new hire or special enrollee) may enroll at each group renewal.

Late enrollees are NOT subject to preexisting condition exclusion periods

### **Deductibles**

Coverage has benefit period deductibles

Single deductible for PPO and non-PPO providers is: \$ 1,250

Family deductible for PPO and non-PPO providers is: \$ 2,500

Member has benefits after single deductible met. Entire family has benefits after family deductible has been met (or if a two-person amount is listed, then for two-person contracts, entire family has benefits after the two-person deductible has been met)

Deductible from the previous 4th quarter will carry over to this benefit period deductible

Common accident deductible applies

Wellmark to Wellmark deductible credit applies. Deductible credits transfer from one Wellmark employer group to another Wellmark employer group as long as the member keeps the same identification number.

Physician services for well-child care are NOT subject to the deductible

Physician services for newborn care are NOT subject to the deductible

Facility services for well-child care are NOT subject to the deductible

Facility services for newborn's initial hospitalization are NOT subject to the deductible

PPO outpatient preventive care is NOT subject to the deductible

PPO office services and PPO independent lab fees are NOT subject to the deductible

PPO urgent care services are NOT subject to the deductible

Most outpatient x-ray/lab services from PPO facilities are NOT subject to the deductible

One postpartum home visit if released within 48 hours after a vaginal delivery/96 hours after a cesarean delivery is NOT subject to the deductible

Preventive care (other than routine vision exams) from PPO providers is NOT subject to the deductible

Preventive care from participating providers is NOT subject to the deductible

Routine vision exams from PPO providers are NOT subject to the deductible

Prosthetic limbs from PPO providers are NOT subject to the deductible

Telehealth services are NOT subject to the deductible

Other services NOT subject to the deductible are: Mammograms

### **Copay**

Copays do NOT apply

## **Coinsurance**

Coinsurance for PPO providers is the following percentage: 25

Coinsurance for non-PPO providers is the following percentage: 35

Prosthetic limbs from PPO providers have the following coinsurance percentage: 20

One postpartum home visit if released within 48 hours after vaginal delivery/96 hours after cesarean delivery is NOT subject to coinsurance

Preventive care (other than routine vision exams) from PPO providers is NOT subject to coinsurance

Preventive care from participating providers is NOT subject to the coinsurance

Routine vision exams from PPO providers are NOT subject to coinsurance

## **Out of Pocket Maximum**

Out-of-pocket maximums apply

Single out-of-pocket maximum for PPO and non-PPO providers is: \$ 2,500

Family out-of-pocket maximum for PPO and non-PPO providers is: \$ 5,000

Member has benefits after single OPM met. Entire family has benefits after family OPM has been met (or if a two-person amount is listed, then for two-person contracts, entire family has benefits after the two-person OPM has been met)

Deductible amounts apply to the out-of-pocket maximum

Coinsurance for all services apply to the out-of-pocket maximum

Deductible from the previous 4th quarter will NOT carry over to the out-of-pocket maximum for this year

Coinsurance from the previous 4th quarter will NOT carry over to the out-of-pocket maximum for this year

Wellmark to Wellmark Out-of-Pocket credit applies. Out-of-Pocket credits transfer from one Wellmark employer group to another Wellmark employer group as long as the member keeps the same identification number.

Additional out-of-pocket maximum information: Prior Commercial Credit given for NEW Groups to the trust according to the following: Coinsurance from beginning of the calendar year, Deductible from 10/01 of prior year.

## **Lifetime Maximum**

Lifetime maximum is unlimited

Lifetime maximum for hospice respite is limited to 15 days inpatient/15 days outpatient

## **Facility Services**

Iowa Psychiatric Medical Institutions for Children are covered according to state mandate

The cost of blood and administration is covered

Nonparticipating facility claims are based on maximum allowable fee

You are covered for skilled nursing services received in a hospital or nursing facility with no limit. Services must be ordered and certified by your attending physician.

## **Practitioner Services**

Advanced nurse practitioners are covered

Physician assistants are covered

Licensed marriage family therapists are covered.

Licensed mental health counselors are covered.

Dental treatment for accidental injury is covered if completed within 12 months

Surgical removal of impacted teeth is covered as an inpatient with a concurrent medical condition. Outpatient services are covered without a concurrent medical condition

Treatment of temporomandibular joint disorder is covered, except for dental restorations/extractions, and orthodontic treatment

Chiropractor services are covered as medically necessary

ABA Therapy for the treatment of Autism is covered according to state mandate with the following annual maximums: Through age 6 - \$36,000; Age 7 through 13 - \$25,000; Age 14 through 18 - \$12,500; Age 19 and over - No benefits

### **Preventive Care/Immunizations/Mammography**

Preventive physical exams are covered. A separate gynecological exam is also covered

One preventive physical exam per member per benefit period is covered

Women's preventive care services are covered according to the ACA mandate

Immunizations are covered (Travel Immunization excluded)

Mammography benefits are covered one per benefit period

Preventive Pap smears are unlimited

One routine vision exam (including refraction) per benefit period is covered

Well-child and newborn care is covered according to mandate

Hearing aids are NOT covered

Routine hearing exams are NOT covered

### **Prescription Drugs/Contraceptives**

Retail drugs are covered under a Prescription Drug Program

Prescription drugs/items for smoking cessation are covered under a Rx Program; related exams are covered under health

Smoking cessation consultations are included as part of preventive care

Contraceptives are covered. Oral and drug delivery devices, such as insertable rings and patches, are covered under a Rx Program; injected, implanted, and medical devices, such as intrauterine devices and diaphragms, are covered under health

Contraceptives covered under health are included as part of preventive care

Most specialty drugs are covered under the Prescription Drug Program, NOT under Health. Additional information for specialty drugs can be found at [Wellmark.com](http://Wellmark.com)

### **Other Services**

Supplemental accidental injury benefits are NOT covered

Reminder Programs are available

Diabetic education programs are covered according to mandate

Hospice services are covered

Infertility services and prescription drugs for infertility are covered. \*Note: Artificial insemination, IVF, GIFT, ZIFT, and other transfer procedures are limited to the following per lifetime: \$ 25,000

Coverage for Home Medical Equipment is unlimited.

Bariatric surgery and related treatment is covered

Major organ transplants are covered. Prior approval required.

Transplants are NOT limited to Blue Distinction Centers for Transplant

Telehealth services provided by Doctor on Demand are covered for the following services:

Medical/Pediatric

Mental health services

#### **MHCD**

Mental health/chemical dependency treatment is covered

#### **Notification Requirements**

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Iowa Psychiatric Medical Institutions for Children is subject to precertification. Failure to pre-certify will result in a benefit reduction. All services are subject to reduction for failure to follow notification requirements

Reduction for failure to pre-certify is 50 percent

The amount of reduction will not exceed \$500 per admission

#### **Additional Information**

Orthopedic devices are covered, including: application of orthotic, impression, casting, fitting, training, shoes and trusses

#### **Certificate/ERISA Information**

Group Name to appear on certificate cover: The Educators Group

Include Continuation of Group Coverage to YC Section

Note: This is a summary of benefits under this plan, not a statement of contract. The actual terms and conditions of coverage will be specified in the Group Insurance Policy issued by Wellmark or the Administrative Services Agreement between Wellmark and the entity below, as well as the Benefits Certificate and any amendments thereto.

**Benefit Summary - IOWA EDUCATORS TRUST**

Group Number/BU: 80086- Group Product Summary ID: **167785-22** Coverage Code:  
Alpha Prefix: XQH Benefit Dates: 7/1/2018 - 6/30/2019 Summary Status: **Rating Group**  
Account Manager: Bowlin, Sharon Broker: Mercer Health & Benefits

**IAED SELECT 1500 PPO**

<b>Group Information</b> RED OAK COMMUNITY SCHOOL DISTRICT <b>Product/Version:</b> Alliance Select (201009)
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<b>Account Signature</b> x _____ <b>Date</b> x _____
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**General**

Renewing group

Fully insured

This plan or policy does meet minimum value

Group is a trust

Name: The Educators Group

Plan year begins on: 07/01

Healthcare Reform Non-Grandfathered Plan

Benefit period is calendar year

BlueCard PPO - In states with no PPO or PPO specialty, providers are treated as PPO as determined by Wellmark and the local Blue plan

**Eligibility**

An eligible child is married or unmarried and is under 26 years of age.

An eligible child is an unmarried dependent full-time student regardless of age.

An eligible child is disabled before age 26 and remains unmarried after age 26.

An eligible child is unmarried and disabled while a full-time student after age 26.

Dependent coverage terminates at the end of the month

Two-way rate (single/family)

Coverage for unmarried domestic partners includes both same and opposite sex domestic partners. Domestic relationship has to be in effect for 12 months prior to coverage

Certificate coverage ends at the end of the month

Subrogation applies

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Standard administration of coordination of benefits (COB)

Routine maternity benefits apply to employee/spouse/dependent

Do not include ERISA Information Requirements language

Coordination of benefits rules apply to members when Medicare is the primary payer

### **Preexisting Condition Exclusion Periods**

New hires and special enrollees are covered when first eligible.

New hires and special enrollees are NOT subject to preexisting condition exclusion periods

Late enrollees (a member who is not a new hire or special enrollee) may enroll at each group renewal.

Late enrollees are NOT subject to preexisting condition exclusion periods

### **Deductibles**

Coverage has benefit period deductibles

Single deductible for PPO and non-PPO providers is: \$ 1,500

Family deductible for PPO and non-PPO providers is: \$ 3,000

Member has benefits after single deductible met. Entire family has benefits after family deductible has been met (or if a two-person amount is listed, then for two-person contracts, entire family has benefits after the two-person deductible has been met)

Deductible from the previous 4th quarter will carry over to this benefit period deductible

Common accident deductible applies

Wellmark to Wellmark deductible credit applies. Deductible credits transfer from one Wellmark employer group to another Wellmark employer group as long as the member keeps the same identification number.

Physician services for well-child care are NOT subject to the deductible

Physician services for newborn care are NOT subject to the deductible

Facility services for well-child care are NOT subject to the deductible

Facility services for newborn's initial hospitalization are NOT subject to the deductible

PPO outpatient preventive care is NOT subject to the deductible

PPO office services and PPO independent lab fees are NOT subject to the deductible

PPO urgent care services are NOT subject to the deductible

Most outpatient x-ray/lab services from PPO facilities are NOT subject to the deductible

One postpartum home visit if released within 48 hours after a vaginal delivery/96 hours after a cesarean delivery is NOT subject to the deductible

Preventive care (other than routine vision exams) from PPO providers is NOT subject to the deductible

Preventive care from participating providers is NOT subject to the deductible

Routine vision exams from PPO providers are NOT subject to the deductible

Prosthetic limbs from PPO providers are NOT subject to the deductible

Telehealth services are NOT subject to the deductible

Other services NOT subject to the deductible are: Mammograms

### **Copay**

Copays do NOT apply

### **Coinsurance**

Coinsurance for PPO providers is the following percentage: 25

Coinsurance for non-PPO providers is the following percentage: 35

Prosthetic limbs from PPO providers have the following coinsurance percentage: 20

One postpartum home visit if released within 48 hours after vaginal delivery/96 hours after cesarean delivery is NOT subject to coinsurance

Preventive care (other than routine vision exams) from PPO providers is NOT subject to coinsurance

Preventive care from participating providers is NOT subject to the coinsurance

Routine vision exams from PPO providers are NOT subject to coinsurance

### **Out of Pocket Maximum**

Out-of-pocket maximums apply

Single out-of-pocket maximum for PPO and non-PPO providers is: \$ 3,000

Family out-of-pocket maximum for PPO and non-PPO providers is: \$ 6,000

Member has benefits after single OPM met. Entire family has benefits after family OPM has been met (or if a two-person amount is listed, then for two-person contracts, entire family has benefits after the two-person OPM has been met)

Deductible amounts apply to the out-of-pocket maximum

Coinsurance for all services apply to the out-of-pocket maximum

Deductible from the previous 4th quarter will NOT carry over to the out-of-pocket maximum for this year

Coinsurance from the previous 4th quarter will NOT carry over to the out-of-pocket maximum for this year

Wellmark to Wellmark Out-of-Pocket credit applies. Out-of-Pocket credits transfer from one Wellmark employer group to another Wellmark employer group as long as the member keeps the same identification number.

Additional out-of-pocket maximum information: Prior Commercial Credit given for NEW Groups to the trust according to the following: Coinsurance from beginning of the calendar year, Deductible from 10/01 of prior year.

### **Lifetime Maximum**

Lifetime maximum is unlimited

Lifetime maximum for hospice respite is limited to 15 days inpatient/15 days outpatient

### **Facility Services**

Iowa Psychiatric Medical Institutions for Children are covered according to state mandate

The cost of blood and administration is covered

Nonparticipating facility claims are based on maximum allowable fee



You are covered for skilled nursing services received in a hospital or nursing facility with no limit. Services must be ordered and certified by your attending physician.

### **Practitioner Services**

Advanced nurse practitioners are covered

Physician assistants are covered

Licensed marriage family therapists are covered.

Licensed mental health counselors are covered.

Dental treatment for accidental injury is covered if completed within 12 months

Surgical removal of impacted teeth is covered as an inpatient with a concurrent medical condition. Outpatient services are covered without a concurrent medical condition

Treatment of temporomandibular joint disorder is covered, except for dental restorations/extractions, and orthodontic treatment

Chiropractor services are covered as medically necessary

ABA Therapy for the treatment of Autism is covered according to state mandate with the following annual maximums: Through age 6 - \$36,000; Age 7 through 13 - \$25,000; Age 14 through 18 - \$12,500; Age 19 and over - No benefits

### **Preventive Care/Immunizations/Mammography**

Preventive physical exams are covered. A separate gynecological exam is also covered

One preventive physical exam per member per benefit period is covered

Women's preventive care services are covered according to the ACA mandate

Immunizations are covered (Travel Immunization excluded)

Mammography benefits are covered one per benefit period

Preventive Pap smears are unlimited

One routine vision exam (including refraction) per benefit period is covered

Well-child and newborn care is covered according to mandate

Hearing aids are NOT covered

Routine hearing exams are NOT covered

### **Prescription Drugs/Contraceptives**

Retail drugs are covered under a Prescription Drug Program

Prescription drugs/items for smoking cessation are covered under a Rx Program; related exams are covered under health

Smoking cessation consultations are included as part of preventive care

Contraceptives are covered. Oral and drug delivery devices, such as insertable rings and patches, are covered under a Rx Program; injected, implanted, and medical devices, such as intrauterine devices and diaphragms, are covered under health

Contraceptives covered under health are included as part of preventive care

Most specialty drugs are covered under the Prescription Drug Program, NOT under Health. Additional information

for specialty drugs can be found at Wellmark.com

### **Other Services**

Supplemental accidental injury benefits are NOT covered

Reminder Programs are available

Diabetic education programs are covered according to mandate

Hospice services are covered

Infertility services and prescription drugs for infertility are covered. \*Note: Artificial insemination, IVF, GIFT, ZIFT, and other transfer procedures are limited to the following per lifetime: \$ 25,000

Coverage for Home Medical Equipment is unlimited.

Bariatric surgery and related treatment is covered

Major organ transplants are covered. Prior approval required.

Transplants are NOT limited to Blue Distinction Centers for Transplant

Telehealth services provided by Doctor on Demand are covered for the following services:

Medical/Pediatric

Mental health services

### **MHCD**

Mental health/chemical dependency treatment is covered

### **Notification Requirements**

If you are admitted to a nursing facility, an acute rehabilitation facility, or a hospital outside the states of Iowa or South Dakota, you or someone acting on your behalf must contact us to pre-certify your admission. Refer to [www.wellmark.com](http://www.wellmark.com) for other services subject to precertification. Related facility services may be subject to a reduction for failure to follow notification requirements - refer to your coverage manual or plan description for details. All services are subject to reduction for failure to follow notification requirements.

Iowa Psychiatric Medical Institutions for Children is subject to precertification. Failure to pre-certify will result in a benefit reduction. All services are subject to reduction for failure to follow notification requirements

Reduction for failure to pre-certify is 50 percent

The amount of reduction will not exceed \$500 per admission

### **Additional Information**

Orthopedic devices are covered, including: application of orthotic, impression, casting, fitting, training, shoes and trusses

### **Certificate/ERISA Information**

Group Name to appear on certificate cover: The Educators Group

Include Continuation of Group Coverage to YC Section

Note: This is a summary of benefits under this plan, not a statement of contract. The actual terms and conditions of coverage will be specified in the Group Insurance Policy issued by Wellmark or the Administrative Services Agreement between Wellmark and the entity below, as well as the Benefits Certificate and any amendments thereto.

**Benefit Summary - IOWA EDUCATORS TRUST**

Group Number/BU: 80086- Group Product Summary ID: **265171-1** Coverage Code: F5Q  
Alpha Prefix: Benefit Dates: 7/1/2018 - 6/30/2019 Summary Status: **Rating Group**  
Account Manager: Bowlin, Sharon Broker: Mercer Health & Benefits

**RX OBS 265171-1**

**Group Information RED OAK COMMUNITY SCHOOL DISTRICT**

Product/Version: Prescription Drug Program - Custom (201112)

**Account Signature X** \_\_\_\_\_ **Date X** \_\_\_\_\_

**General**

Wellmark Blue Cross Blue Shield of Iowa

BlueRx Complete (3-tier)

Renewal

Fully insured arrangement

Large business group (751+)

Group is a Trust

Benefit period is defined as calendar year

Healthcare Reform Non-Grandfathered Plan (ACA required drugs are covered and member cost-share is waived according to preventive care guidelines. A complete list of recommendations and guidelines related to ACA preventive services can be found at [www.healthcare.gov](http://www.healthcare.gov))

Plan year begins on: 07/01

**Eligibility**

When benefits have been provided by another plan, Wellmark applies benefits the lesser of 1) the amount on the claim as the member's liability or 2) what we should have paid if the claim was submitted to us first.

**Payment**

Benefit Period Deductible (BPD):

Out-of-Pocket Maximum (OPM):

Single benefit period deductible is \$ 50

Single out-of-pocket maximum is \$ 1,500

Family benefit period deductible is \$ 100

Family out-of-pocket maximum is \$ 3,000

Wellmark to Wellmark deductible credit applies. Deductible credits transfer from one Wellmark employer group to another Wellmark employer group as long as the member keeps the same identification number

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Wellmark to Wellmark out-of-pocket credit applies. Out-of-pocket credits transfer from one Wellmark employer group to another Wellmark employer group as long as the member keeps the same identification number.

Benefit period deductible is waived for Tier 1 drugs

Member has benefits after single deductible met. Entire family has benefits after family deductible has been met (or if a two-person amount is listed, then for two-person contracts, entire family has benefits after the two-person deductible has been met)

Member has benefits after single OPM met. Entire family has benefits after family OPM has been met (or if a two-person amount is listed, then for two-person contracts, entire family has benefits after the two-person OPM has been met)

Days Supply (per member cost-share): 30 days

Payment Application (per member cost-share):

Tier 1 copayment is \$ 10

Tier 2 copayment is \$ 25

Tier 3 copayment is \$ 40

Specialty Drugs Payment Application (member cost-share per 30-day supply):

Preferred specialty drugs copayment is \$ 85

Non-preferred specialty drugs copayment is \$ 85

90-Day Supply:

At retail pharmacy: 90-day supply of drugs available for 3 copayments OR coinsurance per 90-day supply

Through mail order: 90-day supply of drugs available for 2 copayments OR coinsurance per 90-day supply

Product Selection Penalty Rule: When a brand drug is obtained and there is an equivalent generic drug available, the member is responsible for paying their payment obligation for the equivalent generic (i.e. lowest payment application) and any remaining cost difference up to the maximum allowed fee for the brand name drug.

Utilization Management Programs apply

## Benefits

Contraceptives are covered

Smoking Cessation: Prescription drugs only are covered

Coverage of specialty drugs NOT limited to Specialty Pharmacy Program

Prescription drugs covered when purchased through Participating and Non-Participating Pharmacies. Member must submit paper claim for reimbursement when purchased through a Non-Participating pharmacy.

## Certificate/ERISA Information

Group Name to appear on certificate cover: The Educators Group

Is Draft Required? Y

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## ROLE OF SCHOOL DISTRICT ADMINISTRATION

The purpose of school administration is to help create and to foster an environment in which students can learn most effectively. All administrative duties and functions should be appraised in terms of the goals and objectives and the mission statement created by the school district.

School district administrators have been given a great opportunity and responsibility to manage the school district, to provide educational leadership, and to implement the educational philosophy of the school district. They are responsible for the day-to-day operations of the school district. In carrying out these operations, the administrators are guided by board policies, the law, the needs of the students, and the wishes of the citizens in the school district community.

It is the responsibility of the administrators to implement and enforce the policies of the board, to oversee employees, to monitor educational issues confronting the school district, and to inform the board about school district operations. While the board holds the superintendent ultimately responsible for these duties, the principals are more directly responsible for educational results, for the administration of the school facilities and for the employees.

In this series of the board policy manual, the board defines the role and the employment of school district administrators. Policies in the 400 Series, "Employees," also apply to administrators unless a more specific policy exists in the 300 Series, "Administration."

Approved

Reviewed

Revised

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## MANAGEMENT

The board and the administration will work together to share information and decisions under the management team concept. The board and the administrators will work together in making decisions and setting goals for the school district. This effort is designed to obtain, share, and use information to solve problems, make decisions, and formulate school district policies and regulations.

It is the responsibility of each administrator to fully participate in the management of the school district by investigating, analyzing, and expressing their views on issues. Those board members or administrators with special expertise or knowledge of an issue may be called upon to provide information. Each board member and administrator will support the decisions reached on the issues confronting the school district.

The board is responsible for making the final decision in matters pertaining to the school district.

Approved July 14, 2011

Reviewed June 27, 2011

Revised <INSERT DATE HERE>

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ADMINISTRATORS

The superintendent, the building principals and any other administrators, for purposes of this Series (Series 300) of this Policy, shall be referred to collectively as “administrators.”

Superintendent of the School District

The superintendent shall be the head administrator and executive officer of the board and shall be directly responsible for the execution of the school district’s policies for the faithful and efficient observance of the school district’s rules by all employees throughout the system, and for the enforcement of all provisions of the law relating to the operation of the schools.

Other Administrators of the School District

The building principals and other administrators shall assist the superintendent and the board in the daily operation of the school district.

Approved <INSERT DATE HERE>

Reviewed

Revised

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## RECRUITMENT AND APPOINTMENT OF ADMINISTRATORS

### Superintendent

The board will employ a superintendent to serve as the chief executive officer of the board, to conduct the daily operations of the school district, and to implement board policy with the power and duties prescribed by the board and the law.

The board, as needed, may engage in a search for applicants for the position of superintendent of the school district. The services of a consultant may be engaged to assist in screening and/or selecting candidates to be interviewed by the board.

### Other Administrators

The board will employ building principals and other administrators, in addition to the superintendent, to assist in the daily operations of the school district. It is the responsibility of the superintendent to make a recommendation to the board for filling any administrative position. The board will act only on the superintendent's recommendation.

The services of a consultant may be engaged to assist in screening and/or selecting candidates to be interviewed by the board.

Approved July 14, 2011

Reviewed June 27, 2011

Revised <INSERT DATE HERE>



## ADMINISTRATOR CONTRACTS

The length of the contract for employment between an administrator and the board is determined by the board. The contract will state the length of the contract and the terms of employment. An administrator may be considered a probationary employee, as provided in Iowa law.

If an administrator's contract is not being renewed by the board, the contract will be extended automatically for additional one-year periods beyond the end of its term until it is modified or terminated as mutually agreed to by the parties or until the administrator's contract is terminated consistent with statutory termination procedures.

If an administrator wishes to resign, to be released from a contract, or to retire, the administrator must comply with board policies dealing with retirement, release, or resignation.

Approved July 14, 2011

Reviewed June 27, 2011

Revised <INSERT DATE HERE>

ADMINISTRATOR SALARY AND OTHER COMPENSATION

The board has complete discretion to set the salary of the superintendent and/or other administrators. The board authorizes the superintendent to recommend the salary of other administrators to the board. It is the responsibility of the board and/or the superintendent to set the salary and benefits of the superintendent and other administrators at a level that will include consideration of, but not be limited to, the economic condition of the school district and the training, experience, skill, and demonstrated competence of the administrator. The salary is set at the beginning of each contract term.

In addition to the salary and benefits, the administrator's actual and necessary expenses are paid by the school district when the administrator is performing work-related duties. It is within the discretion of the board to pay dues to professional organizations for the superintendent. It is within the discretion of the superintendent to pay dues to professional organizations for the administrator.

The board believes the administrator is to stay current on educational issues, and as such, the board may approve the payment of dues and other benefits or compensation over and above the administrator's contract. Approval of dues and other benefits or compensation will be included in the records of the board in accordance with board policy.

Approved July 14, 2011

Reviewed June 27, 2011

Revised <INSERT DATE HERE>

## ADMINISTRATOR DUTIES

### Superintendent

The board employs a superintendent of schools to serve as the chief executive officer of the board. The board delegates to the superintendent the authority to implement board policy and to execute decisions made by the board concerning the internal operations of the school district, unless specifically stated otherwise.

The superintendent is responsible for the implementation and execution of board policy and the observance of board policy by employees and students. The superintendent is responsible for overall supervision and discipline of employees and the education program. In executing the above-stated duties, the superintendent will consider the financial situation of the school district as well as the needs of the students.

Specifically the superintendent:

- Interprets and implements all board policies and all state and federal laws relevant to education;
- Supervises, either directly or through delegation, all activities of the school system according to, and consistent with, the policies of the board;
- Represents the board as a liaison between the school district and the community;
- Establishes and maintains a program of public relations to keep the public well-informed of the activities and needs of the school district, effecting a wholesome and cooperative working relationship between the school district and the community;
- Attends and participates in all meetings of the board, except when the superintendent has been excused, and makes recommendations affecting the school district;
- Reports to the board on such matters as deemed material to the understanding and proper management of the school district or as the board may request;
- Assumes responsibility for the overall financial planning of the district and for the preparation of the annual budget, and submits it to the board for review and approval;
- Establishes and maintains efficient procedures and effective controls for all expenditures of school district funds in accordance with the adopted budget, subject to the direction and approval of the board;
- Files, or causes to be filed, all reports required by law;
- Makes recommendations to the board for the selection of employees for the school district;
- Makes and records assignments and transfers of all employees pursuant to their qualifications;

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### ADMINISTRATOR DUTIES

- Employs such employees as may be necessary, within the limits of budgetary provisions and subject to the board's approval;
- Recommends to the board, for final action, the promotion, salary change, demotion, or dismissal of any employee;
- Prescribes rules for the classification and advancement of students, and for the transfer of students from one building to another in accordance with board policies;
- Summons employees of the school district to attend such regular and occasional meetings as are necessary to carry out the education program of the school district;
- Supervises methods of teaching, supervision, and administration in effect in the schools;
- Attends such conventions and conferences as are necessary to keep informed of the latest educational trends;
- Accepts responsibility for the general efficiency of the school system, for the development of the employees, and for the educational growth and welfare of the students;
- Defines educational needs and formulates policies and plans for recommendation to the board;
- Makes administrative decisions necessary for the proper functioning of the school district;
- Responsible for scheduling the use of buildings and grounds by all groups and/or organizations;
- Acts as the purchasing agent for the board, and establishes procedures for the purchase of books, materials and supplies;
- Approves vacation schedules for employees;
- Conducts periodic district administration meetings; and,
- Performs other duties as may be assigned by the board.
- Supervises the establishment or modification of the boundaries of school attendance and transportation areas subject to approval of the board.
- Directs studies of buildings and sites, taking into consideration population trends and the educational and cultural needs of the district in order to ensure timely decisions by the board and the electorate regarding construction and renovation projects.

This list of duties will not act to limit the board's authority and responsibility over the superintendent. In executing these duties and others the board may delegate, the superintendent will consider the school district's financial condition as well as the needs of the students in the school district.

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## ADMINISTRATOR DUTIES

### Other Administrators

The board will employ other administrators will to assist the superintendent in the day-to-day operations of the school district.

Building principals shall be responsible for the administration and operation of the attendance center(s) to which they are assigned. Each building principal, as chief administrator of the assigned attendance center, is responsible for the building and grounds, for the students and employees assigned to the attendance center, for school activities at the attendance center, for the education program offered in the attendance center, and the budget for the attendance center. The principal is considered the professional advisor to the superintendent in matters pertaining to the attendance center supervised by the principal.

Although the principals serve under the direction of the superintendent, duties of the principal may include, but not be limited to the following:

- Cooperate in the general organization and plan of procedure in the school under the principal's supervision;
- Supervision of the teachers in the principal's attendance center;
- Maintain the necessary records for carrying out delegated duties;
- Work with the superintendent in rating, recommending and selecting supervised employees whenever possible;
- Work with the superintendent in determining the education program to be offered and in arranging the schedules. As much of the schedule as possible should be made before school closes for summer vacation. In the matter of courses offered, the final approval rests with the superintendent who is in turn responsible to the board;
- Ensure that proper care is taken of all school books, supplies, materials, equipment, furniture and facilities;
- Instruct teachers to make a complete annual inventory of all school property contained in their individual rooms. This inventory is reviewed and filed with the board secretary;
- Investigate excessive cases of absence or tardiness of students and notify the parents or guardians of unexcused absence or tardiness. All such cases should be reported to the superintendent;
- Make such reports from time to time as the superintendent may require;
- Maintain the regular schedule of school hours established by the board and make no temporary changes in the schedule without the consent of the superintendent;
- Promptly notify the superintendent whenever ventilation, sanitation or heating of the building is unsatisfactory;

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### ADMINISTRATOR DUTIES

- Contribute to the formation and implementation of general policies and procedures of the school;
- Perform such other duties as may be assigned by the superintendent of schools.

This list of duties will not act to limit the board's authority and responsibility over the position of the administrators. In executing these duties and others the board may delegate, the administrators will consider the school district's financial condition as well as the needs of the students in the school district.

Approved July 14, 2011

Reviewed June 27, 2011

Revised <INSERT DATE HERE>

**Red Oak Community School District**

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## ADMINISTRATOR EVALUATION

### Superintendent

The board will conduct an ongoing evaluation of the superintendent's skills, abilities, and competence. At a minimum, the board will formally evaluate the superintendent on an annual basis. The goal of the superintendent's formal evaluation is to ensure the educational program for the students is carried out, promote growth in effective administrative leadership, clarify the superintendent's role, clarify the immediate priorities of the board, and develop a working relationship between the board and the superintendent.

The superintendent will be an educational leader who promotes the success of all students by:

- Facilitating the development, articulation, implementation, and stewardship of a vision of learning that is shared and supported by the school community.
- Advocating, nurturing and sustaining a school culture and instructional program conducive to student learning and staff professional development.
- Ensuring management of the organization, operations and resources for a safe, efficient and effective learning environment.
- Collaborating with families and community members, responding to diverse community interests and needs mobilizing community resources.
- Acting with integrity, fairness and in an ethical manner.
- Understanding the profile of the community, and responding to and influencing the larger political, social, economic, legal and cultural context.

The formal evaluation will be based upon the following principles:

- The evaluation criteria will be in writing, clearly stated and mutually agreed upon by the board and the superintendent. The criteria will be related to the job description and the school district's goals;
- At a minimum, the evaluation process will be conducted annually at a time agreed upon;
- Each board member will have an opportunity to individually evaluate the superintendent, and these individual evaluations will be compiled into an overall evaluation by the entire board;
- The superintendent will conduct a self-evaluation prior to discussing the board's evaluation, and the board as a whole will discuss its evaluation with the superintendent;
- The board may discuss its evaluation of the superintendent in closed session upon a request from the superintendent and if the board's discussion in open session will needlessly and irreparably injure the superintendent's reputation; and,

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## ADMINISTRATOR EVALUATION

- The individual evaluation by each board member, if individual board members so desire, will not be reviewed by the superintendent. Board members are encouraged to communicate their criticisms and concerns to the superintendent in the closed session. The board president will develop a written summary of the individual evaluations, including both the strengths and the weaknesses of the superintendent, and place it in the superintendent's personnel file to be incorporated into the next cycle of evaluations.

This policy supports and does not preclude the ongoing, informal evaluation of the superintendent's skills, abilities and competence.

### Other Administrators

The superintendent will conduct an ongoing process of evaluating the administrators on their skills, abilities, and competence. At a minimum, the superintendent will formally evaluate the administrators annually. The goal of the administrator's formal evaluation process is to ensure that the educational program for the students is carried out, student learning goals of the school district are met, promote growth in effective administrative leadership for the school district, clarify the administrator's role as defined by the board and the superintendent, ascertain areas in need of improvement, clarify the immediate priorities of the responsibilities listed in the job description, and develop a working relationship between the superintendent and the administrator.

The superintendent is responsible for designing an administrator evaluation instrument. The formal evaluation will include written criteria related to the job description. The superintendent, after receiving input from the administrators, will present the formal evaluation instrument to the board for approval.

The formal evaluation will also include an opportunity for the administrator and the superintendent to discuss the written criteria, the past year's performance and the future areas of growth. The evaluation is completed by the superintendent, signed by the administrator and filed in the administrator's personnel file.

The principal will be an educational leader who promotes the success of all students by:

- Facilitating the development, articulation, implementation, and stewardship of a vision of learning that is shared and supported by the school community.
- Advocating, nurturing and sustaining a school culture and instructional program conducive to student learning and staff professional development.
- Ensuring management of the organization, operations and resources for a safe, efficient and effective learning environment.



## ADMINISTRATOR EVALUATION

- Collaborating with families and community members, responding to diverse community interests and needs mobilizing community resources.
- Acting with integrity, fairness and in an ethical manner.
- Understanding the profile of the community, and responding to and influencing the larger political, social, economic, legal and cultural context.

Approved July 14, 2011

Reviewed June 27, 2011

Revised: <INSERT DATE HERE>

**Red Oak Community School District**

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ADMINISTRATOR PROFESSIONAL DEVELOPMENT

The board encourages the superintendent and other administrators to continue professional growth by being involved in professional organizations, attending conferences, continuing education, and participating in other professional activities.

It is the responsibility of the administrator to arrange the administrator's schedule in order to enable attendance at various conferences and events. If a conference or event requires the administrator to be absent from the office for more than three days, requires overnight travel, or involves unusual expense, the superintendent will bring it to the attention of the board president and the other administrators will bring it to the attention of the superintendent prior to attending the event.

The administrator may be required to report to the board after an event.

Approved July 14, 2011

Reviewed June 27, 2011

Revised <INSERT DATE HERE>

ADMINISTRATOR CONSULTING/OUTSIDE EMPLOYMENT

An administrative position is considered full-time employment. The board expects administrators to give the responsibilities of their positions in the school district precedence over other employment. An administrator may accept consulting or outside employment for pay as long as, in the judgment of the board, the work is conducted on the administrator's personal time and it does not interfere with the performance of the administrator's duties.

The board reserves the right, however, to request the administrator cease the outside employment as a condition of continued employment. The board will give the administrator thirty days notice to cease outside employment.

Approved July 14, 2011

Reviewed June 27, 2011

Revised <INSERT DATE HERE>

DEVELOPMENT AND ENFORCEMENT OF ADMINISTRATIVE REGULATIONS

Administrative regulations may be necessary to implement board policy. It is the responsibility of the superintendent to develop and enforce administrative regulations.

In developing the administrative regulations, the superintendent may consult with administrators or others likely to be affected by the regulations. Once the regulations are developed, employees, students and other members of the school district community will be informed in a manner determined by the superintendent.

The board will be kept informed of the administrative regulations utilized and their revisions. The board may review and recommend change of administrative regulations prior to their use in the school district if they are contrary to the intent of board policy.

Approved July 14, 2011

Reviewed June 27, 2011

Revised <INSERT DATE HERE>

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MONITORING OF ADMINISTRATIVE REGULATIONS

The administrative regulations will be monitored and revised when necessary. It is the responsibility of the superintendent to monitor and revise the administrative regulations.

The superintendent may rely on the board, administrators, employees, students, and other members of the school district community to inform the superintendent about the effect of and possible changes in the administrative regulations.

Approved July 14, 2011

Reviewed <INSERT DATE HERE>

Revised

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## ADMINISTRATIVE SUCCESSION OF AUTHORITY

In the absence of the superintendent, it is the responsibility of the other administrators to assume the superintendent's duties. If the absence of the superintendent is temporary, the successor shall be that individual or individuals temporarily appointed by the superintendent and communicated to the board president.

If the absence of the superintendent is temporary, the successor will assume only those duties and responsibilities of the superintendent that require immediate action. If the board determines the superintendent will be absent for an extended period of time, the board will appoint an acting superintendent to assume the responsibilities of the superintendent. The successor will assume the duties when the successor learns of the superintendent's absence or when assigned by the superintendent or the board.

References to "superintendent" in this policy manual will mean the "superintendent or the superintendent's designee" unless otherwise stated in the board policy.

Approved July 14, 2011

Reviewed June 27, 2011

Revised: <INSERT DATE HERE>

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## ADMINISTRATOR CODE OF ETHICS

Administrators, as part of the educational leadership in the school district community, represent the views of the school district. Their actions, verbal and nonverbal, reflect the attitude and the beliefs of the school district. Therefore, administrators will conduct themselves professionally and in a manner fitting to their position.

Each administrator will follow the code of ethics stated in this policy. Failure to act in accordance with this code of ethics or in a professional manner, in the judgment of the board, will be grounds for discipline up to, and including, discharge.

The professional school administrator:

- Upholds the honor and dignity of the profession in actions and relations with students, colleagues, Board members, and the public;
- Obeys local, state, and national laws; holds to high ethical and moral standards; and gives loyalty to this country and to the cause of democracy and liberty;
- Accepts the responsibility to master and contribute to the growing body of specialized knowledge, concepts, and skills which characterize school administration as a profession;
- Strives to provide the finest possible educational experiences and opportunities to the members of the District community;
- Seeks to preserve and enhance the prestige and status of the profession when applying for a position or entering into contractual agreements;
- Carries out in good faith the policies duly adopted by the local Board and the regulations of state authorities and renders professional service;
- Disallows consideration of private gain or personal economic interest to affect the discharge of professional responsibilities;
- Recognizes public schools are the public's business and seeks to keep the public informed about their schools; and,
- Supports and practices the management team concept.
- Makes the education and well-being of students the fundamental value of all decision making.
- Fulfills all professional duties with honesty and integrity and always acts in a trustworthy and responsible manner.
- Accepts responsibility and accountability for one's own actions and behaviors.
- Upholds the honor and dignity of the profession in actions and relations with students, colleagues, Board members, and the public

Approved July 14, 2011

Reviewed June 27, 2011

Revised <INSERT DATE HERE>



# SU Insurance Company



Quote: TW29024-7

## 2018 RENEWAL PROPOSAL

April 19, 2018

RED OAK COMMUNITY SCHOOL DISTRICT  
2011 NORTH 8<sup>TH</sup> STREET  
RED OAK, IA 51566

RENEWAL CHANGES	PREMIUM
<p><b>EQUIPMENT ADDS:</b> ADDED CATEGORY A650 TELEPHONES VMS/PBX, ADDED CATEGORY A660 TELEPHONES SYSTEM VOIP, ADDED CATEGORY A169 1:1 TABLETS (FROM 0 TO 2)</p> <p><b>EQUIPMENT DELETES:</b> DELETED (28) LAPTOPS (FROM 275 TO 247), DELETED (42) TABLETS (FROM 292 TO 250), DELETED ENVIRONMENTAL CONTROLS (HS ONLY), WALK-IN COOLER &amp; FREEZER (HS ONLY)</p>	
<b>PROPOSED 2018-2019 ANNUAL PREMIUM</b>	<b>\$117,666</b>

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EDUCATION SERVICE CENTER  
627 4<sup>th</sup> Street  
Sioux City, Iowa 51101  
PHONE: (712) 279-6083  
FAX: (712) 279-6081

Dr. Kim Buryanek  
Associate Superintendent

e-mail: [buryank@live.siouxcityschools.com](mailto:buryank@live.siouxcityschools.com)



### Contracted Service for Regular Education

The following \_\_\_\_\_ resident of your school district, is currently residing at Jackson Recovery Centers, Inc. and being provided educational services by the Sioux City Community School District. In keeping with Iowa Code 282.27, the responsibility for payment of educational services now belongs to the student's resident district. "The board of directors of each district of resident shall pay to the school district in which is located such psychiatric unit or institution, for the provision of educational services to the child, a portion of the district of residence's district cost per pupil for each of such children based upon the proportion that the time each child is provided educational services while in such unit or institution is to the total time for which the child is provided educational services during the normal school year."

These services shall be provided at the Jackson Recovery Centers, Inc.

Jackson Recovery Centers, Inc. shall provide instructional services and programs for the students referred in accordance with the state of Iowa Department of Education Rules and Regulations and in accordance with state laws governing such service and the delivery thereof.

The Sioux City Community School District will send an invoice for the cost of services.

This contract is for the regulation school year.

**Remittance should be sent to:** Sioux City Community School District  
Attn: Michelle Zimmerman  
627 4<sup>th</sup> Street  
Sioux City, IA 51101

Student	Admission Date	PMIC Program
---------	----------------	--------------

Parent Name and Address

Superintendent or Designee, Sending District	Date
<i>Kim Buryanek</i>	4-9-18
Superintendent or Designee, Receiving District	Date

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AGREEMENT  
BETWEEN THE  
RED OAK COMMUNITY SCHOOL DISTRICT  
AND  
THE RED OAK EDUCATION ASSOCIATION

2018-2020

**ARTICLE 1  
RECOGNITION**

**3. RECOGNITION**

The Red Oak Community School District is recognized as a public employer governed by the Board of Directors. The Red Oak Education Association, as determined and ordered by the Public Employee Relations Board, is recognized as the sole and exclusive bargaining agent for regular, hereinafter named, employees of the employer, including all:

Regular full-time certified and regular part-time certified teachers including counselors, librarians, and special education teachers under contract with the Red Oak Community School District, Red Oak, Iowa.

And excluding:

Substitute and interim teachers, teacher's aides, and teacher associates, and exchange teachers, and coordinator of athletics and intramurals and all other employees excluded by statute.

**B. DEFINITIONS**

1. The term "Board" as used in this Master Contract Agreement shall mean the Board of Directors of the Red Oak Community School District or its duly authorized representatives.
2. The term "employee" as used in this Master Contract Agreement shall mean all professional employees represented by the Association in the bargaining unit as defined and certified by the Public Employment Relations Board.
3. The term "Association" as used in this Master Contract Agreement shall mean the Red Oak Education Association or its duly authorized representatives or agents.

**ARTICLE 2  
BASE WAGE**

Base Salary      \$33,895

BA - \$33,895

BA+10 - \$34,573

BA+20 - \$35,590

BA+30 - \$36,607

BA+40 - \$37,285

MA - \$37,962

MA+10 - \$38,640

MA+20 - \$39,657

MA+30 - \$40,674

MA+40 - \$41,352

\*In addition to the base wage, all employees will receive a one hundred seventy-three dollars and 70 cents (\$173.70) per month additional payment.

\*\* Employees that have previously reached the top of BA Lane; top of BA+10 Lane and three career increments; and top of the BA+20 and six career increments will receive a one-time only career increment.

**ARTICLE 3  
LABOR MANAGEMENT COMMITTEE**

The Red Oak Education Association and the Red Oak School District agree to establish a joint Labor Management Committee. The purpose of this committee is to collaboratively discuss and make recommendations regarding employment matters not referred to in the master contract and other matters mutually agreed upon. This committee will be composed of equal representation of the Red Oak Education Association and management. Management will be represented by administration and school board. Recommendations will require school board approval before implementation.

**ARTICLE 4  
DURATION**

This Master Contract Agreement shall be effective July 1, 2018 and shall continue in effect through June 30, 2020.

The parties have signed this Master Contract Agreement as of 23<sup>rd</sup> day of April, 2018.

Red Oak Education Association

Red Oak Community School District

\_\_\_\_\_  
Deb Blomstedt, President

\_\_\_\_\_  
Mark Johnson, Board President

\_\_\_\_\_  
Deb Blomstedt, Chief Negotiator

\_\_\_\_\_  
Kathy Walker, Chief Negotiator



### Sponsor Positions

LAST	FIRST	DESCRIPTION	LAST	FIRST	DESCRIPTION
ADAMS	CURTIS	M.S. Art	LOMBARD	BARBARA	FB Cheer Sponsor
MATUSZESKI	TAYLOR	H.S. Instrumental Music	LOMBARD	BARBARA	BB Cheer Sponsor
MATUSZESKI	TAYLOR	H.S. Jazz Band	EUKEN	TERESA	Junior Class Prom Sponsor
CROUSE	NICHOLAS	Weight Training	MCFARLAND	CHERI	Wrestling Cheer
CONFER	AMY	Co M.S. Student Council	PANEC	KELEN	HS National Honor Society
REA	CHRISTINE	Co M.S. Student Council	PODLISKA	TIEGEN	HS Student Council Co-Sponsor
EUKEN	TERESA	Elem Art	ERICKSON	JANELLE	HS Student Council Co-Sponsor
BLAKE	KIRSTIN	Flag Corp	MANGOLD	KELSEY	HS Sm Gr Speech Asst.
HARDY	KEITH	Safety Patrol	MANGOLD	KELSEY	HS Lg Gr Speech Asst.
HORN	LAURA	HS Fall Play Director	ARTHERHOLT	LISA	HS Art
HEWETT	JOHN	MS Instrumental Music	ARTHERHOLT	LISA	HS Yearbook
HEWETT	JOHN	MS Jazz Band	WEMHOFF	LJNNEA	Elem Vocal Music (3/5 of 3%)
HORN	LAURA	HS Sm Gr Speech	MARSDEN	TERRA	Elem Vocal Music (2/5 of 3%)
HORN	LAURA	HS Lg Gr Speech	MARSDEN	TERRA	HS Musical Assistant
BRUMMETT	TERRA	HS Fall Play Asst Director			
MARSDEN	TERRA	MS Vocal Music			
MARSDEN	TERRA	MS Play Co-Sponsor	<b>Unused in 17-18</b>		
MARSDEN	TIMOTHY	HS Vocal Music	Debate		
MARSDEN	TIMOTHY	HS Mini Singers	H.S. School Paper		
MARSDEN	TIMOTHY	HS Musical Director	M.S. National Junior Honor Society		
MARSDEN	TIMOTHY	MS Play Co-Sponsor	Eye of the Tiger Book		
			M.S. Yearbook		
			MS Yearbook Assistant		
			M.S. Actors' Workshop		
			Science Fair		

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**RED OAK COMMUNITY SCHOOL DISTRICT & WEST CENTRAL COMMUNITY ACTION  
PRESCHOOL CONTRACTED SERVICES AGREEMENT**

West Central Community Action Head Start Program, hereinafter referred to as "Provider" and Red Oak Community School District, hereinafter referred to as "Partner" wish to enter into an agreement under which Partner shall furnish certain designated services necessary to implementation of West Central Community Action program operations funded by a Department of Health and Human Services Grant. For the purposes of this Agreement, the following terms and definitions shall be used:

<b>Terms</b>	<b>Definitions</b>
Provider	West Central Community Action (WCCA)
Provider Address	1408 "A" Highway 44 PO Box 709 Harlan, IA 51537-0709
Partner	Red Oak Community School District (ROCSD)
Partner Address	2011 N. 8 <sup>th</sup> Street Red Oak, IA 51566
Site Location	Inman Primary School 900 Inman Drive Red Oak, IA 51566
Applicable HHS Award No.	O7CH7064
Purpose of the Agreement:	<p>To improve availability and the quality of services for Red Oak Community School District children age 4 and their families.</p> <p>To support children's optimal development and readiness for school entry and success including children with special needs.</p> <p>To address the unique strengths and needs of the local population, such as homeless, migrant, or non-English speaking families.</p> <p>To promote collaboration regarding enrollment, shared use of transportation, facilities, and other resources, as appropriate.</p> <p>To promote further collaboration to reduce duplication and enhance efficiency of services.</p> <p>To define the roles and responsibilities of the</p>

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Terms	Definitions
<p>Agreement Guiding Principles:</p>	<p>Provider and Partner towards coordination and greater collaboration; enhance linkages and relationships; and exchange information on the provision of educational and non-educational services.</p> <p>Coordinate a comprehensive system of activities, policies, and procedures among the named parties which guide and support their delivery of services to children and their families.</p> <p>Communication and parent outreach for smooth transitions to kindergarten.</p> <p>Follow and implement the WCCA Head Start School Readiness/Transition Plan.</p> <ul style="list-style-type: none"> <li>• Will establish a transition meeting between Head Start staff and Kindergarten staff.</li> <li>• Assist families, administrators, and teachers in enhancing educational and developmental continuity and continuity of parental involvement in activities between WCCA and ROCSD classes through Parent Activity Information and Parent-Teacher Conferences.</li> <li>• Help parents (including grandparents and kinship caregivers, as appropriate) to understand the importance of parental involvement.</li> </ul> <p>Create and maintain a meaningful partnership to promote school readiness so that children from low-income families in the Head Start program, or who are preschool age, may receive comprehensive services to prepare them for elementary school and to address any potential “achievement gap”.</p> <p>Plan and implement strategies based on practice and research that have proven to support</p>



Terms	Definitions
<p>Program Description, Enrollment and Implementation:</p> <p>Confidentiality:</p> <p>Dispute Resolution:</p>	<p>children's school success.</p> <p>Respect the uniqueness of each locality's needs and resources.</p> <p>Promote the involvement of members of the early child care and education communities.</p> <p>Share commitment, cooperation, and collaboration for a coordinated service delivery system.</p> <p>All parties agree to integrate both eligible and non-eligible Head Start preschoolers. ROCSD families will provide financial information and complete a Head Start enrollment application, which will be used by the Provider to determine eligibility for twenty <b>(20)</b> four (4) year old children to receive Head Start Program services.</p> <p>The <u>Connect4Learning</u> Curriculum and the HS Performance Standards will be followed at the ROCSD Head Start Preschool Classroom.</p> <p>The Partner and Provider acknowledge confidentiality requirements that each must follow regarding the sharing and release, with the consent of families, of personally identifiable information regarding children and families. Each party will protect the rights of young children with respect to records and reports created, maintained, and used by each. It is the intent of this agreement to ensure that parents have rights of access and rights of privacy with respect to such reports and records, and that applicable State and Federal laws for exercise of these rights be strictly followed.</p> <p>The Partner and Provider will first attempt to resolve any disputes or to solve problems among themselves.</p> <p>Schedule Early Childhood meetings and</p>

Terms	Definitions
	<p>Administrative meetings two (2) times per year to review local agreements, plan collaborative activities, and resolve issues.</p> <p>Issues will be resolved as they arise at the lowest level possible. The chain of command will be followed.</p>
Covered Primary Services:	See Below:
Preschool Licensed Teacher:	<p>Salary and fringe benefits for a 1.0 FTE for a minimum of 36 weeks by a Preschool teacher whom holds a valid practitioner's license issued by the Board of Educational Examiners under Iowa Code chapter 272 and holds an endorsement from the Board of Educational Examiners that includes prekindergarten whom is employed by the Partner.</p>
Associate Teacher:	<p>Salary and fringe benefits for a 1.0 FTE for a minimum of 36 weeks by an Associate Teacher whom meets the minimum requirements of the Head Start Performance Standards and is employed by the Provider.</p>
Staff Substitutes:	<p>The Partner will provide a school district email and access to Associate Teacher substitute lists.</p>
Child Enrollments:	<p>The Partner will notify Provider of enrollment dates for preschool aged children.</p>
Classroom Space, Custodial and Maintenance Services:	<p>The Partner will provide at no cost to the Provider, custodial, maintenance, and repair services for the facilities, including trash and snow removal.</p>
Children and Adult Meals and Snacks:	<p>The Partner will provide meals and snacks for the children in the Program as required by the CACFP Program standards.</p>

Terms	Definitions
<p>Professional Development:</p> <p>On-Going Monitoring:</p>	<p>The Partner will claim reimbursement for all meals provided to Head Start children. Adult Volunteer meals and snacks will be billed to Head Start on a monthly basis at the negotiated rate for meals.</p> <p>The Partner will provide Professional Development opportunities as prescribed by the Department of Education at no cost to the Provider.</p> <p>The Provider will invite the Partner to Professional Development opportunities necessary to carry out the goals of the Program as prescribed by HHS at no cost to the Partner (including but not limited to; Pediatric CPR and First Aid and Universal Precautions).</p> <p>The Provider will conduct ongoing monitoring a minimum of three (3) times per year in the areas of: administration, health, nutrition, safety, family engagement, mental health and disabilities of the ROCSD Head Start Preschool classroom in accordance with the Head Start Performance Standards. The Provider will submit a Partner Monitoring Report within fifteen (15) days of the ongoing monitoring reviews. The Provider will conduct early childhood assessments two (2) times per month.</p>
<p>Non-Federal Share Match Documentation:</p> <p>Required Service Group for Primary Services:</p>	<p>The Partner will complete and submit to the Provider the Head Start Non-Federal Share Form at the beginning of the school year.</p> <p>Maximum of twenty <b>(20)</b> eligible 4 year old children will be counted and reported to the Provider upon the first day of preschool at the ROCSD Head Start Preschool Classroom for the 2018-19 school year. Eligible children may include 90% income eligible children and 10% of</p>

Terms	Definitions
	enrollment has been determined eligible for Special Education/Disability Services.
Minimum Services:	The ROCSD Head Start Preschool will follow the 2018-19 preschool calendar and the ROCSD will provide 1,020 hours of teacher contact time.
Agreement Funding for Services:	N/A.
Maximum Funding Amount:	N/A.
Schedule of Invoice(s) for Services:	N/A.
Reduction or Increase in the Statewide Voluntary Preschool Program Funding:	N/A.
Agreement Term:	<p>August 1, 2018 through May 31, 2019.</p> <p>The Provider and Partner are not bound by this agreement for more than the 2018-2019 school year, thus giving each the right to void this agreement with a thirty (30) day written notice or at the end of the school year. A review of the agreement and assessment of the program will be held at the end of the year (June and July 2019).</p>

The parties agree to abide by the specific terms and provisions of the following attachments which are incorporated into this agreement by reference and made a part of it:

- Basic Contract Provisions.
- ROCSD 2018 – 2019 School Calendar.
- Head Start Non-Federal Match Form.

**Signature Page**

**Partner:**

Red Oak Community School District:

By: \_\_\_\_\_  
Paul Griffin, Board President

Date: \_\_\_\_\_

**Provider:**

West Central Community Action:

By: \_\_\_\_\_  
Joel Dirks, Executive Director

Date: \_\_\_\_\_

## BASIC CONTRACT PROVISIONS

### I. PURPOSE AND SCOPE OF CONTRACT:

The purpose of this contract is to set out the terms and conditions of the agreement between the Provider and Partner.

Achievement of the goals and objectives of the Head Start Program requires commitment from all levels and persons involved in the program. Policies, regulations and guidelines contribute to the effective and efficient process necessary for goal attainment. Both parties encourage and expect philosophical commitment to the Head Start goals, as well as compliance with the approved grant application, the Preschool Contracted Services Agreement, all policies, regulations, and guidelines of HHS/ACF.

The services to be provided under this Agreement are designed to provide the following services at the same site setting and subject to the availability of funding:

- A. Transportation services to eligible rural children;
- B. Professional development for the ROCSD Head Start Preschool Classroom Teacher and Associate Teacher;
- C. Provider Monitoring Reports of ongoing monitoring of Head Start Performance Standards and
- D. Transition planning and implementation for children and families into the K-12 ROCSD system.

### II. PROVIDER SERVICE RESPONSIBILITIES:

Provider shall provide the specified Covered Primary Services at the designated Location(s) of Services for the specified Term of Agreement in accordance with Head Start Performance Standards. Number of four (4) year old children to be served is twenty **(20)**.

In addition to the specific provisions of this Agreement, Provider shall comply with all applicable state, federal, and local laws, rules, and regulations.

### III. FUNDING: N/A.

### IV. PROVIDER AND PARTNER METHODS FOR FISCAL MANAGEMENT:

The Provider and Partner shall maintain such records and accounts, including property, personnel, and financial, as are deemed necessary by the Department of Education to assure proper accounting for all funds provided for this program. These records will be made available for audit purposes and will be retained for four (4) years after the expiration date of this contract and any renewals of it, unless permission to destroy them is granted by both the Partner and the Iowa Department of Education.

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V. PARTNER PERSONNEL MANAGEMENT:

The Partner shall assure, certify, document and maintain that they are in compliance with the Head Start Performance Standard 1302.90 Personnel Policies:

There is a personnel management system covering staff that is consistent with the regulations set forth in Head Start Performance Standard (1302.90) and provides the Provider access to the Partner's personnel files, policies and procedures. This shall include, but not be limited to, a current organizational chart, performance appraisals and the sections that outline the Partner's policies on conducting interviews, verifying references, conduct a sex offender registry check and obtain one of the following: (i) State criminal history records, including fingerprint checks; or (ii) Federal Bureau of Investigation criminal history records, including fingerprint checks. The Partner has ninety (90) days after an employee is hired to complete the background check process by obtaining: (i) Whichever check listed above was not obtained prior to the date of hire; and, (ii) Child abuse and neglect state registry check, if available.

The Partner will establish and maintain written personnel policies and procedures that are approved by the ROCSD school board and are available to all district staff.

Before a person is hired, directly or through contract, including transportation staff and contractors, a program must conduct an interview, verify references, conduct a sex offender registry check and obtain one of the following: (i) State criminal history records, including fingerprint checks; or, (ii) Federal Bureau of Investigation criminal history records, including fingerprint checks. The district has 90 days after an employee is hired to complete the background check process by obtaining: (i) whichever check listed above of this section was not obtained prior to the date of hire; and, the child abuse and neglect state registry check, if available.

The Partner must review the information found in each employment application and complete background check to assess the relevancy of any issue uncovered by the complete background check including any arrest, pending criminal charge, or conviction and must use Child Care and Development Fund (CCDF) disqualification factors described in 42 U.S.C. 9858f(c)(1)(D) and 42 U.S.C. 9858f(h)(1) to determine whether the prospective employee can be hired or the current employee must be terminated.

The Partner must ensure a newly hired employee, consultant, or contractor does not have unsupervised access to children until the complete background check process is complete.

The Partner must conduct the complete background check for each employee, consultant, or contractor at least once every five (5) years which must include each of the four checks listed in above, and review and make employment decisions based on the information as described above, unless the program can demonstrate to the Provider that it has a more stringent system in place that will ensure child safety.

The Partner must consider current and former program parent for employment vacancies for which such parents apply and are qualified.

The Partner must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that: (i) Ensure staff, consultants, contractors, and volunteers implement positive strategies to support children's well-being and prevent and address challenging behavior; (ii) Ensure staff, consultants, contractors, and volunteers do not maltreat or endanger the health or safety of children, including, at a minimum, that staff must not:

(A) Use corporal punishment;

(B) Use isolation to discipline a child;

(C) Bind or tie a child to restrict movement or tape a child's mouth;

(D) Use or withhold food as a punishment or reward;

(E) Use toilet learning/training methods that punish, demean, or humiliate a child;

(F) Use any form of emotional abuse, including public or private humiliation, rejecting, terrorizing, extended ignoring, or corrupting a child;

(G) Physically abuse a child;

(H) Use any form of verbal abuse, including profane, sarcastic language, threats, or derogatory remarks about the child or child's family; or,

(I) Use physical activity or outdoor time as a punishment or reward;

(iii) Ensure staff, consultants, contractors, and volunteers respect and promote the unique identity of each child and family and do not stereotype on any basis, including gender, race, ethnicity, culture, religion, disability, sexual orientation, or family composition; (iv) Require staff, consultants, contractors, and volunteers to comply with program confidentiality policies concerning personally identifiable information about children, families, and other staff members in accordance with subpart C of part 1303 of this chapter and applicable federal, state, local, and tribal laws; and, (v) Ensure no child is left alone or unsupervised by staff, consultants, contractors, or volunteers while under their care.

The Partner will maintain personnel policies and procedures that include appropriate penalties for staff, consultants, and volunteers who violate the standards of conduct.

The Partner must ensure staff and program consultants or contractors are familiar with the ethnic backgrounds and heritages of families in the program and are able to serve and effectively communicate, either directly or through interpretation and translation, with children who are dual language learners and to the extent feasible, with families with limited English proficiency. If a majority of children in a classroom speak the same language, at least one classroom staff member must speak such language.

The Partner will ensure each staff member has an initial health examination; ensure that staff do not, because of communicable diseases, pose a significant risk to the health or safety of others in the classroom that cannot be eliminated or reduced by reasonable accommodations in accordance with the Americans with Disabilities Act and section 504 of the Rehabilitation Act.

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The Partner will make mental health and wellness information available to staff regarding health issues that may affect their job performance and provide regularly scheduled opportunities to learn about mental health, wellness and health education.

VI. PROVIDER AND PARTNER SUBMISSION OF REPORTS, RECORDS AND EVALUATIONS:

The Provider agrees to prepare, retain and permit the Partner to inspect, as Partner considers necessary, all records required for this program by the Iowa Department of Education and Provider regulations. The Partner further agrees that the Provider may carry out monitoring and evaluation activities to include; at a minimum, periodic observations of the daily program, conferring with staff and parents, validation of the Partner's self-assessment procedures and on-site visits to conduct specific activities. The Provider and Partner shall insure the cooperation of employees, policy groups and board members in those efforts.

The Provider agrees to submit to the Partner such reports as may be required by Iowa Department of Education, HHS/ACF directives or by the Partner, including (but not exclusive of) computer reports, Self-Assessment Instruments, improvement plans and financial reports. The Partner's representative shall have the right to inspect all such records and reports as related to the Head Start Program.

VII. PROVIDER GENERAL RESPONSIBILITY FOR SERVICE:

The Provider shall monitor, evaluate, and make assistance available to the Partner in conducting all activities under this Agreement.

VIII. PROVIDER SPECIFIC RESPONSIBILITIES FOR SERVICE:

Provider shall provide the following services:

- A. Direct grant requirement monitoring of the ROCSD Head Start Preschool Classroom activities through scheduled site visited by designated Provider staff and analysis of computerized program activity data.
- B. Assist in assuring education program improvement through routine site visits and provision of consulting services.
- C. Systematically provide information and consultation to the Partner about HHS/ACF rules and regulations to facilitate and support compliance efforts.
- D. Evaluate program costs and fiscal reports.
- E. Assist in assuring overall program quality and performance standard training requirements by providing regularly scheduled pre-service and in-service training and other career opportunities.
- F. Provide the specific personnel specified in the Covered Primary Services, which personnel shall report directly to the Provider.



IX. DISCRIMINATION CLAUSE:

The Provider and Partner will not discriminate against any person employed in the performance of this contract, or against any applicant for employment because of race, sex, age, creed, religion, color, national origin, sexual orientation, political affiliation, veteran's status, or handicapping condition. This requirement shall apply to, but not be limited to the following: employment, upgrading, demotion or transfer, selection for training, recruitment or recruitment advertising, layoff or termination, rates of pay or other forms of compensation and all other privileges, terms and conditions of employment. No person shall, on the grounds of race, religion, sex, creed, color, national origin, sexual orientation, political affiliation, veteran's status, or handicapping condition be excluded from participation in, be denied the benefits of, or be subject to discrimination in the performance of this contract.

X. POLITICAL ACTIVITY PROHIBITED:

None of the funds, materials, property, services contributed by the Provider or the Partner under this contract shall be used for any partisan political activity, (1) to further the election or defeat of any candidate for public office, or to pay directly or indirectly, the salary or expenses of either party to this contract or their agent, to engage in any activity designed to influence legislation or appropriations pending before Congress, (2) to provide voters or prospective voters with transportation to the polls or similar assistance in connection with any such election or (3) to assist any voter registration activity. Nothing in the above statement is intended in any way to inhibit or discourage any party from exercising its lawful rights to attempt to influence legislation pending before Congress as long as the costs are not charged to this Preschool Contracted Services Agreement or the Head Start Program.

XI. DRUG FREE ENVIRONMENT:

The Provider and Partner shall not permit use of drugs, alcohol, or tobacco by its employees or contractors at any Location used for Primary or Secondary Services, in any motor vehicles owned or provided by the Provider and Partner or otherwise used in conjunction with providing Primary or Secondary Services, or in any manner in the presence or in the view of the children and families being served under this agreement.

XII. COMPLIANCE WITH APPROVED PROGRAM:

The Provider and Partner agree to perform all activities authorized by this agreement in accordance with the approved work program, the approved program funding, and the grant conditions inclusive of Head Start Performance Standards, Program Instructions, CFR 45 (Administration of Grants), Audit Guide, Head Start guidelines and all other HHS/ACF directives.

XIII. SCHEDULE OF PAYMENT: N/A.

XIV. CHANGES IN SERVICE:

Either party may request changes in the scope of the services to be performed under this Agreement. Mutually agreed upon changes must be reduced to written form before they shall be enforceable by either party.

XV. COVENANT AGAINST CONTINGENT FEES:

The Provider and Partner warrants no person, selling agency or other organization has been employed or retained to solicit or secure this contract upon an agreement or understanding for a commission, percentage, brokerage or contingent fee. For breach or violation of this warrant, the Provider and/or Partner shall have the right to annul this contract or otherwise recover the full amount of any such commission, percentage, brokerage or contingent fee, or to seek such other legal remedies as may be available.

XVI. HOLD HARMLESS, IDEMNIFICATION AND TERMINATION OF AGREEMENT:

The Provider shall defend, indemnify, and hold harmless the Partner from and against any and all losses, claims, liabilities, damages, and expenses, including reasonable attorneys' fees and costs, arising out of any negligence, willful misconduct, violation of law, and/or breach of this Agreement by the Provider, its employees, or agents. The Partner shall defend, indemnify, and hold harmless the Provider from and against any and all losses, claims, liabilities, damages, and expenses, including reasonable attorneys' fees and costs, arising out of any negligence, willful misconduct, violation of law, and/or breach of this Agreement by the Provider, its employees, or agents. The provisions of this paragraph shall survive termination of this Agreement. Term and Termination. The term of this Agreement shall commence on August 1, 2018 and end on May 31, 2019. The parties may renew this Agreement for an additional term as mutually determined by the parties. Either party may terminate this Agreement upon written notice to the other party if the other party fails to comply with any of the provisions of this Agreement, provided written notice of the breach shall be given to the breaching party and the breaching party shall have at least ten (10) days to cure the breach. Either party may terminate this Agreement immediately upon written notice to the other party if the other party becomes the subject of a proceeding under state or federal law for relief of debtors, or if an assignment is made for the benefit of creditors. In addition, either party may terminate this Agreement, with or without cause, and without penalty, upon at least thirty (30) days' written notice.

The Partner or the Provider may terminate this agreement without cause at any time on thirty (30) days prior written notice to either party.

XVII. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION:

- A. The Partner and Provider each certifies that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- B. If the Partner or Provider is unable now, or at any time during the term of this agreement to certify to any of the statements in this certification, either party shall immediately provide an explanation in writing to the other party and this contract shall be subject to immediate termination by either party in the event participation is disallowed as a result of that debarment or suspension.

XVIII. PROVIDER AND PARTNER INSURANCE REQUIREMENTS:

General Liability:	\$1,000,000.00 each occurrence \$2,000,000.00 aggregate \$5,000.00 medical expense per person \$1,000,000.00 personal & adv injury \$2,000,000.00 products/completed op.
Excess Liability Umbrella:	\$1,000,000.00 each occurrence \$1,000,000.00 aggregate
Professional Liability:	\$2,000,000.00 each occurrence \$2,000,000.00 aggregate
Sexual Abuse Coverage:	\$50,000.00 each person \$250,000.00 maximum
Worker's Compensation:	\$500,000.00 each accident \$500,000.00 each employee \$500,000.00 total policy

**Red Oak Community SD**  
**Proposal Summary - 1,114 Students**  
**April 9, 2018**  
**Online Payments (OLP)**



Qty.	Initial Price - 1st Year	Annual Lic, Supt/Updates Subseq. Year
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**APPLICATION SOFTWARE & HARDWARE:**

**Other Applications, Hardware & Services:**

Campus Online Payments Setup Fee

1                      150

(1)

**APPLICATION SW & HW TOTAL**

**\$150                      \$0**

**PROFESSIONAL SERVICES:**

Implementation Management (Hours)

2                      \$360

(17)

Training / Consulting (Hours)

2                      300

(17)

**TOTAL PRICE - 1st Year**

**\$810**

(1) - Initial Purchase Price includes Annual Software License, Support and Updates for 1st Year.

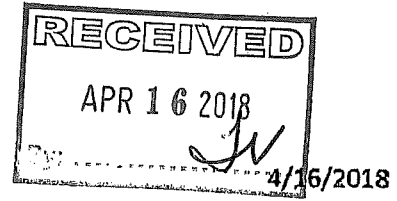
Pricing shown includes available discounts. Estimated future annual price is based on the same student count.

(17) - Proposal does not include reimbursable travel expenses, which will be billed (as accrued) at actual costs.

**NOTE: This proposal will be valid through May 22, 2018.**

**Proposal Provided By:**

Tobin R. Hannan  
 Sales Executive  
 Phone: 800.437.7457 x-119  
 Fax: 970.330.0839  
 E-Mail: thannan@cicesp.com



Hayley Perkins  
126 Briarwood Ct  
Evanston, WY 82930

Dear Mr. Messinger,

Please accept my resignation from my position as a teacher at Red Oak Middle School following my leave of absence for the 2017-2018 school year due to relocating to Wyoming.

I have enjoyed my years teaching in the Red Oak School District and will miss my fellow staff members and students. Thank you for giving me the opportunity to be a part of the district for so many years.

If you have any questions, do not hesitate to contact me.

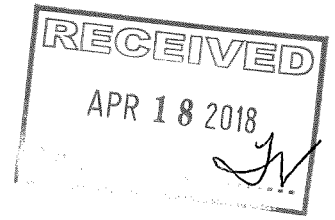
Sincerely yours,

A handwritten signature in cursive script that reads "Hayley Perkins".

Hayley Perkins  
(307)677-2464

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Red Oak Community School District  
Staff Selection Recommendation



Date: 4/18/18

Building: Admin HS MS WIS IPS ECC Trans  
(Please Circle All That Apply)

Position: HS Ag. Science & MS STEM

Name: TESSA MITTAG

Certified:

Lane: BA

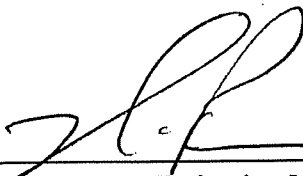
Step: 2

Salary: \$36,464

Classified:

Hourly Rate: N/A

Hours Per Day: N/A

  
\_\_\_\_\_  
Principal/Director

Please send form to Superintendent for Board Approval

Office Use Only

Background Check: \_\_\_\_\_

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## Tammi VanMeter

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**From:** Alan Spencer  
**Sent:** Friday, April 20, 2018 10:56 AM  
**To:** Tammi VanMeter; Tom Messinger  
**Subject:** Extended Day Plan  
**Attachments:** Extended Contract Outline.2018.docx

Let me know if you need anything modified.

I chose to add the actual list of what is done instead of limiting it to 21 days for Tess. She will be doing them all with me anyway.

Thanks for the help!  
Alan

Alan D. Spencer  
Agricultural Education Instructor/FFA Advisor  
Red Oak High School  
2011 North 8<sup>th</sup> Street  
Red Oak, IA 51566  
[spencera@roschools.org](mailto:spencera@roschools.org)  
<http://www.redoakschooldistrict.com/>

## Red Oak Agricultural Education Extended Day Plan

Prepared by Alan Spencer, Red Oak High School Ag Ed/FFA – 4/20/18

The following is a list of FFA and Ag Ed related activities during the year that occur outside of the regular 8-hour work day.

The new Middle School Ag Ed Instructor will participate in the same activities as the High School Ag Ed Instructor.

No extended contract covers the amount of days needed for the job. However, the contract is necessary to have the type of FFA Chapter the community deserves.

Activity	Days Outside of Regular Contract Time
212/360/Middle School Leadership Conferences	1
Ag Skills Career Development Events	6
Career Development Event Practices (before school/after school)	4
Career Development Event Practices (summer)	7
FFA Officer Training Retreat	3
FFA Toy Show	1.5
Iowa Association of Ag Educators Conference	3
Iowa FFA Agriscience Fair/State Science Fair	2
Iowa FFA Leadership Conference	2
Iowa State Fair	6
Local FFA Activities (banquet, degree ceremony, meetings)	4
Local Montgomery County Events (Cattlemen's Banquet/Junction Days, etc.)	4
Montgomery County Fair	7
National FFA Convention/National FFA Agriscience Fair	5
Professional Development (CASE Training)	11
Sub-District FFA Contest	0.5
Summer Livestock Judging Contests	5
SW District FFA Chapter Officer Leadership Training	1
SW District FFA Convention	1
SW District FFA Greenhand Fireup	0.5
SW District FFA Paperwork Evaluation	0.5
SW Regional Science Fair	2
Total Activity Days	77

For the first year, we are requesting a twenty-one (21) day extended contract. As middle school participation increase, we will be requesting that additional days be added.

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