

Dakota County United Educators Dental Reimbursement Fund

Information for Job Share and Part-time Employees

6950 146th Street West Suite 114 Apple Valley MN 55124 952-432-4033 www.dcue.org, under the Dental Tab

Enroll

1) Send your completed Election Notice <u>and</u> complete the Online Enrollment found on our website: www.dcue.org, under the Dental Members tab.

2) Once your Election Notice has been received you will be emailed a confirmation letter to your District email address.

3) An auto-pay link was emailed with your Election Notice/Status update letters. Follow these instructions to setup autopay, only if you want to elect coverage.

Claims cannot be processed until completed documents have been received and automatic payment of premium has been setup and collected.

Coverage

By electing coverage, you are responsible to remain on the plan and pay each month's premium for the duration of the plan year, or the duration of your status as a Job Share or eligible Part-time employee.

DCUE Dental Plan Year: September 1 – August 31

<u>Eligible Employees:</u> Job Share & Part-time Employees: Eligible part-time employees have an FTE of .5-.74 FTE

Premium Payments

- Premium payments are due on the 1st of the month.

- The starting month you are responsible for can be found on your Election Notice.

- We only accept monthly payment through our auto-pay system. A link will be emailed to you <u>annually</u> to set up your auto-pay.

-Your payment will be automatically deducted on the 1st of each month.

-You can pay for the plan year's premiums in full with one check at the start of a plan year if you do not wish to have monthly payments automatically withdrawn.

- Late Premium Letters will be mailed to you if your payment is not received by the 15th of the month.

-Premium amounts change based on contract negotiations. Your premium amount is indicated on your election notice/Status update letter.

Receipts

If you would like a Fiscal Year End receipt please indicate that on your COBRA Election Notice.

You can contact our office at any time to receive an up to date receipt of your premium payments.

You can also retrieve receipts from your auto-pay account.

A Verification Letter can be generated if needed for your Health Care Savings Account. Please let us know if/when you may need one.