

**WAUNAKEE COMMUNITY SCHOOL DISTRICT  
BOARD OF EDUCATION HUMAN RESOURCES COMMITTEE MEETING.**

Tuesday, December 6, 2022

9:00 AM

Waunakee Community School District  
905 Bethel Circle  
Waunakee, WI 53597

Members of the public may attend Board of Education meetings in-person, and will be asked to check in with District personnel when you arrive.

Public comments will be limited to 3 minutes. The Board will allow 30 Minutes for public comments.

Public comments may be sent to Rebecca McDonough at [district\\_administrator@waunakee.k12.wi.us](mailto:district_administrator@waunakee.k12.wi.us) up to one hour before the start of the Board meeting. All comments will be reviewed by the Board members. Emailed comments will be reviewed by the board but not read out loud. Emailed comments sent during any part of the board meeting (Board Development, Closed session, Open session) will be forwarded to the board but may or may not be reviewed by the board until after the board adjourns. Comments must include the commentator's name, address, and must identify their connection to the District (if any) and any group they are representing in order to be considered by the Board.

If you would like to address the Board in-person during the public comments section of the meeting, you will be greeted in the lobby of the building, asked to check in with District personnel when you arrive so that you can be recognized and address the Board when your name is called.

A recording of the meeting will be posted on the District webpage within 24 hours of the meeting time.

**AGENDA**

**I. CALL TO ORDER**

**II. ROLL CALL**

**III. APPROVE AGENDA**

**IV. PUBLIC COMMENTS**

**V. SCHOOL HEALTH WORKFORCE DEVELOPMENT GRANT**

**3**

**To strengthen the school nurse and health service workforce, the Department of Health Services has awarded this funding to CESA #1 to help local public and non-public schools' health services in their recovery from the impacts from COVID-19.**

**This grant is available through June 30, 2023. All qualifiable activities must take place between July 1, 2022 and June 30, 2023 and be based on the two strategies outlined in the attachment.**

**Based on our current full-time staffing and the one-time nature of the funds, administratively we are recommending the disbursement of the grant via retention bonuses to current health staff. Attached is a potential disbursement plan.**

**VI. DISCUSSION OF THE INSURANCE COMMITTEE'S PROGRESS TOWARDS THE HEALTH PLAN FOR 23/24**

**5**

As the Insurance Committee reviews potential plan changes for the 23/24 school year, the group is seeking some budgetary feedback for the parameters of the expenditure. Example plan structures within different district budgetary contribution levels are provided for reference.

**VII. SUMMER SCHOOL WAGES**

For administrative efficiency, the Summer School Administration and Human Resources are seeking to tie wage increases to the prior year's base wage increase. For example, a 4.7% increase for Summer School 2023 would result in teachers delivering enrichment courses being paid \$31.41 (\$30 in 2022) and those teaching remedial courses being paid \$36.65 (\$35 in 2022).

**VIII. INCENTIVIZING CURRENT WCSD EMPLOYEES TO BECOME EMERGENCY BUS DRIVERS FOR WCSD / LAMERS ROUTES / TRIPS.**

Discussion of the exploration of incentives for current employees to become licensed bus drivers, simultaneously being employed by both WCSD and Lamers.

Ideas include:

1. Allow hourly employees to remain on the clock for their WCSD role, as they are driving for Lamers, and being paid by Lamers as well.
2. Allow salaried employees to do the same.
3. Offer a WCSD bonus for successful licensure in addition to any bonus offered by Lamers.

**IX. ADJOURN**

“Any person who has a qualifying disability as defined by the Americans with Disabilities Act who requires assistance with access or materials should contact the Waunakee Community School District Office at 849-2000, 905 Bethel Circle Drive Waunakee, WI 53597, at least twenty-four hours prior to the commencement of the meeting so that necessary arrangements can be made to accommodate the request.”

School Health Workforce Development Grant  
Summary Page for HR Committee  
November 2022

Purpose: Over the last two years, Wisconsin school nurses have experienced direct impacts in their abilities to respond and recover from the COVID-19 pandemic. To strengthen the school nurse and health service workforce, the Department of Health Services has awarded this funding to CESA #1 to help local public and non-public schools' health services in their recovery from the impacts from COVID-19.

This grant is available through June 30, 2023. All qualifiable activities must take place between July 1, 2022 and June 30, 2023 and be based on the two strategies outlined below.

Strategy 1: Recruitment and Retention: To support schools in recruiting and retaining school health staff, to include school nurses, aides and other support staff, funding has been allocated to CESAs for Wisconsin schools.

Allowable Activities Include:

Hiring full time nurses for 1 year (2022-2023) • Increasing part-time school nurse positions to full-time positions for one year (2022-23) • Supporting retention of school nurses, including: Retention bonuses

*WCSD Strategy 1 Amount = \$26,159.10*

Strategy 2: Wellness, Training and Memberships: A present and healthy school health workforce is one of many starting points for establishing a healthy school environment for Wisconsin pupils. Through this strategy, funding is made available to support the school nurse wellness, as well as provide professional opportunities.

Wellness Allowable Activities Awards not to exceed \$500 will be made to support the wellness of Wisconsin school nurses. Eligibility is limited to full-time (37 hours or more per week) RN and LPN school nurses employed by a school district. This funding is allowable for: • State and National Park passes • Gym Memberships • Fitness classes (virtual/in-person) • Yoga classes (virtual/in-person) • Physiotherapy and chiropractors

Training and Memberships Schools that employ RN or LPN school nurses regardless of FTE status will be reimbursed for the establishment or renewal of WASN/NASN memberships.

*WCSD Strategy 2 Amount = \$1,760.00*

*WCSD Total Award = \$27,919.19*

*WCSD Health Office Staffing:*

*2 Full-time School Nurses*

*6 Full-time Health Assistants (one per building)*

<b>Strategy 1 - Retention Bonuses via DHS Grant</b>			
<b>Staff Role</b>	<b>Name</b>	<b>Hire Date</b>	<b>Proposed Bonus</b>
<b>Nurses</b>			
	Jenny Sydow**	9/2017	\$7,564.00
	Ashley Weier	2/2022	\$4,692.00
<b>Health Assistant</b>			
	Sarah Dickman	9/2021	\$1,000.00
	Julie Block**	8/1994	\$3,100.00
	Diane Laubenstein**	8/1995	\$3,100.00
	Jamie Jelle	5/2022	\$500.00
	Tammy Willborn**	12/2015	\$3,100.00
	Nola Luhtala**	9/2011	\$3,100.00
** Staff worked through COVID pandemic			

# Waunakee Community School District



## GROUP MEDICAL INSURANCE Options for 7/1/23 - 3% District Increase

Year	Current		Projected Renewal - Rate Cap		Copay and Deductible Increase		Copay and Deductible Increase		Deductible Increase		HSA Option
Carrier	 DeanHealthPlan <small>A member of SSM Health</small>		 DeanHealthPlan <small>A member of SSM Health</small>		 DeanHealthPlan <small>A member of SSM Health</small>		 DeanHealthPlan <small>A member of SSM Health</small>		 DeanHealthPlan <small>A member of SSM Health</small>		 DeanHealthPlan <small>A member of SSM Health</small>
Platform / Network											
Plan	Dean HMO	Dean POS	Dean HMO	Dean POS	Dean HMO	Dean POS	Dean HMO	Dean POS	Dean HMO	Dean POS	Dean HMO
<b>In-Network Benefits</b> <i>For more details please refer to the Summary of Benefits &amp; Coverage</i>											
<b>COVERAGE BASICS</b>											
Deductible (Single / Family)	\$100/\$200	\$100/\$200	\$100/\$200	\$100/\$200	\$500 / \$1,000	\$500 / \$1,000	\$750 / \$1,500	\$750 / \$1,500	\$1,000 / \$2,000	\$1,000/\$2,000	\$3,000 / \$6,000
Coinsurance	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Ded/Coinsurance Limit (Single / Family)	\$100/\$200	\$100/\$200	\$100/\$200	\$100/\$200	\$500 / \$1,000	\$500 / \$1,000	\$750 / \$1,500	\$750 / \$1,500	\$1,000 / \$2,000	\$1,000/\$2,000	\$3,000 / \$6,000
Out-of-Pocket Maximum (Single / Family)	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$3,000 / \$6,000
<b>ADDITIONAL COVERAGE DETAILS</b>											
Primary Care OV / Specialist Care OC	\$30 Copay	\$30 Copay	\$30 Copay	\$30 Copay	\$60 Copay	\$60 Copay	\$50 Copay	\$50 Copay	\$30 Copay	\$30 Copay	Ded / 100% Coins
Urgent Care / Emergency Room	\$30 Copay / \$100 Copay	\$30 Copay / \$100 Copay	\$30 Copay / \$100 Copay	\$30 Copay / \$100 Copay	\$120 Copay / \$250 Copay	\$120 Copay / \$250 Copay	\$50 Copay / \$100 Copay	\$50 Copay / \$100 Copay	\$30 Copay / \$100 Copay	\$30 Copay / \$100 Copay	Ded / 100% Coins
Prescription Drugs <i>Tier 1 / Tier 2 / Tier 3 / Tier 4</i>	\$10 / \$25 / \$50	\$10 / \$25 / \$50	\$10 / \$25 / \$50 / 30%	\$10 / \$25 / \$50 / 30%	\$10 / \$25 / \$50 / 30%	\$10 / \$25 / \$50 / 30%	\$10 / \$25 / \$50 / 30%	\$10 / \$25 / \$50 / 30%	\$10 / \$25 / \$50 / 30%	\$10 / \$25 / \$50 / 30%	Ded / 100% Coins
	Current		Projected Renewal - Rate Cap		Copay and Deductible Increase		Copay and Deductible Increase		Deductible Increase		HSA Option
<b>Active Employees Only</b>	Dean HMO	Dean POS	Full Census								
Employee Only	115	11	126								
Family Coverage	281	35	316								
Total Employees	396	46	442								
<b>Average Monthly Premiums</b>	Estimated Premiums		Estimated Premiums		Estimated Premiums		Estimated Premiums		Estimated Premiums		Estimated Premiums
Employee Only	721.48	807.31	785.69	879.16	750.34	839.60	742.48	830.81	742.48	830.81	557.84
Family Coverage	1,623.33	1,816.45	1,767.81	1,978.11	1,688.26	1,889.10	1,670.58	1,869.32	1,670.58	1,869.32	1,255.14
<b>Total Monthly Premium Cost</b>	\$539,125.93	\$72,456.16	\$587,108.14	\$78,904.76	\$560,688.27	\$75,354.04	\$554,817.19	\$74,565.00	\$554,817.19	\$74,565.00	\$416,846.78
<b>Total Annual Premium Cost</b>	\$7,338,985.08		\$7,992,154.75		\$7,632,507.79		\$7,552,586.24		\$7,552,586.24		\$5,674,429.87
<b>Percentage Change</b>			8.90%		4.00%		2.91%		2.91%		-22.68%
<b>Employer Premium Contribution Percentages</b>	88% of the HMO plan		88% of the HMO plan		88% of the HMO plan		88% of the HMO plan		88% of the HMO plan		88%
Employee Only	88%		88%		88%		88%		88%		88%
Family Coverage	88%		88%		88%		88%		88%		88%
<b>Employer Monthly Premium Contributions</b>											
Employee Only	634.90	634.90	691.41	691.41	660.30	660.30	653.38	653.38	653.38	653.38	490.90
Family Coverage	1,428.53	1,428.53	1,555.67	1,555.67	1,485.66	1,485.66	1,470.11	1,470.11	1,470.11	1,470.11	1,104.53
<b>Total Monthly Employer Premium Contribution</b>	\$474,430.82	\$56,982.49	\$516,655.16	\$62,053.93	\$493,405.68	\$59,261.51	\$488,239.13	\$58,640.97	\$488,239.13	\$58,640.97	\$366,825.16
<b>Total Annual Employer Premium Contribution</b>	\$6,376,959.71		\$6,944,509.12		\$6,632,006.21		\$6,562,561.12		\$6,562,561.12		\$4,930,601.47
<b>Percentage Change</b>			8.90%		4.00%		2.91%		2.91%		-22.68%
<b>HSA Contributions</b>											
Annual Contribution for Employee Only											1950.00
Annual Contribution for Family Coverage											4400.00
<b>Total Annual HSA Contributions</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,460,650.00
<b>Total Monthly Employer Cost</b>	\$474,430.82	\$56,982.49	\$516,655.16	\$62,053.93	\$493,405.68	\$59,261.51	\$488,239.13	\$58,640.97	\$488,239.13	\$58,640.97	\$488,546.00
<b>Total Annual Employer Cost</b>	\$6,376,959.71		\$6,944,509.12		\$6,632,006.21		\$6,562,561.12		\$6,562,561.12		\$6,566,701.47
<b>Percentage Change</b>			8.90%		4.00%		2.91%		2.91%		2.98%
<b>Employee Monthly Premium Contributions</b>											
Employee Only	86.58	172.41	94.28	187.75	90.04	179.30	89.10	177.43	89.10	177.43	66.94
Family Coverage	194.80	387.92	212.14	422.44	202.59	403.43	200.47	399.21	200.47	399.21	150.62
<b>Total Monthly Employee Premium Contribution</b>	\$64,695.11	\$15,473.67	\$70,452.98	\$16,850.83	\$67,282.59	\$16,092.54	\$66,578.06	\$15,924.03	\$66,578.06	\$15,924.03	\$50,021.61
<b>Total Annual Employee Premium Contribution</b>	\$962,025.37		\$1,047,645.63		\$1,000,501.58		\$990,025.12		\$990,025.12		\$743,828.40
<b>Percentage Change</b>			8.90%		4.00%		2.91%		2.91%		-22.68%

*Plan information shown is for comparison purposes only and does not represent all features or limitations. If any discrepancy exists between benefits shown and carriers' proposals, the carrier proposal controls. Final rates and acceptance subject to actual enrollment and effective date.*

*Unless specifically otherwise provided in a written agreement created between the parties, USI's standard of care and legal duty to its clients to provide insurance products and services is: to follow the instructions of the insured, in good faith.*

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# Waunakee Community School District



## GROUP MEDICAL INSURANCE Options for 7/1/23 - 0% District Increase

Year	Current		Projected Renewal - Rate Cap		Copay and Deductible Increase		Deductible Increase		7/1/23 HSA Plan	
Carrier	 DeanHealthPlan <small>A member of SSM Health</small>		 DeanHealthPlan <small>A member of SSM Health</small>		 DeanHealthPlan <small>A member of SSM Health</small>		 DeanHealthPlan <small>A member of SSM Health</small>		 DeanHealthPlan <small>A member of SSM Health</small>	
Platform / Network										
Plan	Dean HMO	Dean POS	Dean HMO	Dean POS	Dean HMO	Dean POS	Dean HMO	Dean POS	Dean HMO	
<b>In-Network Benefits</b> <i>For more details please refer to the Summary of Benefits &amp; Coverage</i>										
<b>COVERAGE BASICS</b>										
Deductible (Single / Family)	\$100/\$200	\$100/\$200	\$100/\$200	\$100/\$200	\$1,000 / \$2,000	\$1,000 / \$2,000	\$1,500 / \$3,000	\$1,500 / \$3,000	\$3,000 / \$6,000	
Coinsurance	100%	100%	100%	100%	100%	100%	80%	80%	100%	
Ded/Coinsurance Limit (Single / Family)	\$100/\$200	\$100/\$200	\$100/\$200	\$100/\$200	\$1,000 / \$2,000	\$1,000 / \$2,000	\$1,500 / \$3,000	\$1,500 / \$3,000	\$3,000 / \$6,000	
Out-of-Pocket Maximum (Single / Family)	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$7,150 / \$14,300	\$3,000 / \$6,000	
<b>ADDITIONAL COVERAGE DETAILS</b>										
Primary Care OV / Specialist Care OC	\$30 Copay	\$30 Copay	\$30 Copay	\$30 Copay	\$60 Copay	\$60 Copay	\$30 Copay	\$30 Copay	Ded / 100% Coins	
Urgent Care / Emergency Room	\$30 Copay / \$100 Copay	\$30 Copay / \$100 Copay	\$30 Copay / \$100 Copay	\$30 Copay / \$100 Copay	\$120 Copay / \$250 Copay	\$120 Copay / \$250 Copay	\$30 Copay / \$100 Copay	\$30 Copay / \$100 Copay	Ded / 100% Coins	
Prescription Drugs <i>Tier 1 / Tier 2 / Tier 3 / Tier 4</i>	\$10 / \$25 / \$50	\$10 / \$25 / \$50	\$10 / \$25 / \$50 / 30%	\$10 / \$25 / \$50 / 30%	\$10 / \$25 / \$50 / 30%	\$10 / \$25 / \$50 / 30%	\$10 / \$25 / \$50 / 30%	\$10 / \$25 / \$50 / 30%	Ded / 100% Coins	
<b>Summary of Costs</b>										
<b>Active Employees Only</b>										
	<u>Dean HMO</u>	<u>Dean POS</u>	<u>Full Census</u>							
Employee Only	115	11	126							
Family Coverage	281	35	316							
Total Employees	396	46	442							
<b>Estimated Premiums</b>										
Employee Only	721.48	807.31	785.69		879.16	722.84	808.83	718.91	804.43	557.84
Family Coverage	1,623.33	1,816.45	1,767.81		1,978.11	1,626.38	1,819.86	1,617.54	1,809.97	1,255.14
<b>Total Monthly Premium Cost</b>	<b>\$539,125.93</b>	<b>\$72,456.16</b>	<b>\$587,108.14</b>		<b>\$78,904.76</b>	<b>\$540,139.49</b>	<b>\$72,592.38</b>	<b>\$537,203.95</b>	<b>\$72,197.85</b>	<b>\$416,846.78</b>
<b>Total Annual Premium Cost</b>	<b>\$7,338,985.08</b>		<b>\$7,992,154.75</b>		<b>\$7,352,782.37</b>		<b>\$7,312,821.60</b>		<b>\$5,674,429.87</b>	
<b>Percentage Change</b>			8.90%		0.19%		-0.36%		-22.68%	
<b>Employer Premium Contribution Percentages</b>										
88% of the HMO plan										
Employee Only	88%		88%		88%		88%		88%	
Family Coverage	88%		88%		88%		88%		88%	
<b>Employer Monthly Premium Contributions</b>										
Employee Only	634.90	634.90	691.41		691.41	636.10	636.10	632.64	632.64	490.90
Family Coverage	1,428.53	1,428.53	1,555.67		1,555.67	1,431.22	1,431.22	1,423.44	1,423.44	1,104.53
<b>Total Monthly Employer Premium Contribution</b>	<b>\$474,430.82</b>	<b>\$56,982.49</b>	<b>\$516,655.16</b>		<b>\$62,053.93</b>	<b>\$475,322.75</b>	<b>\$57,089.62</b>	<b>\$472,739.47</b>	<b>\$56,779.35</b>	<b>\$366,825.16</b>
<b>Total Annual Employer Premium Contribution</b>	<b>\$6,376,959.71</b>		<b>\$6,944,509.12</b>		<b>\$6,388,948.39</b>		<b>\$6,354,225.84</b>		<b>\$4,930,601.47</b>	
<b>Percentage Change</b>			8.90%		0.19%		-0.36%		-22.68%	
<b>HSA Contributions</b>										
Annual Contribution for Employee Only									1725.00	
Annual Contribution for Family Coverage									3900.00	
<b>Total Annual HSA Contributions</b>	<b>\$0.00</b>		<b>\$0.00</b>		<b>\$0.00</b>		<b>\$0.00</b>		<b>\$1,294,275.00</b>	
<b>Total Monthly Employer Cost</b>	<b>\$474,430.82</b>	<b>\$56,982.49</b>	<b>\$516,655.16</b>		<b>\$62,053.93</b>	<b>\$475,322.75</b>	<b>\$57,089.62</b>	<b>\$472,739.47</b>	<b>\$56,779.35</b>	<b>\$474,681.41</b>
<b>Total Annual Employer Cost</b>	<b>\$6,376,959.71</b>		<b>\$6,944,509.12</b>		<b>\$6,388,948.39</b>		<b>\$6,354,225.84</b>		<b>\$6,380,351.47</b>	
<b>Percentage Change</b>			8.90%		0.19%		-0.36%		0.05%	
<b>Employee Monthly Premium Contributions</b>										
Employee Only	86.58	172.41	94.28		187.75	86.74	172.73	86.27	171.79	66.94
Family Coverage	194.80	387.92	212.14		422.44	195.17	388.65	194.11	386.54	150.62
<b>Total Monthly Employee Premium Contribution</b>	<b>\$64,695.11</b>	<b>\$15,473.67</b>	<b>\$70,452.98</b>		<b>\$16,850.83</b>	<b>\$64,816.74</b>	<b>\$15,502.76</b>	<b>\$64,464.47</b>	<b>\$15,418.51</b>	<b>\$50,021.61</b>
<b>Total Annual Employee Premium Contribution</b>	<b>\$962,025.37</b>		<b>\$1,047,645.63</b>		<b>\$963,833.98</b>		<b>\$958,595.75</b>		<b>\$743,828.40</b>	
<b>Percentage Change</b>			8.90%		0.19%		-0.36%		-22.68%	

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