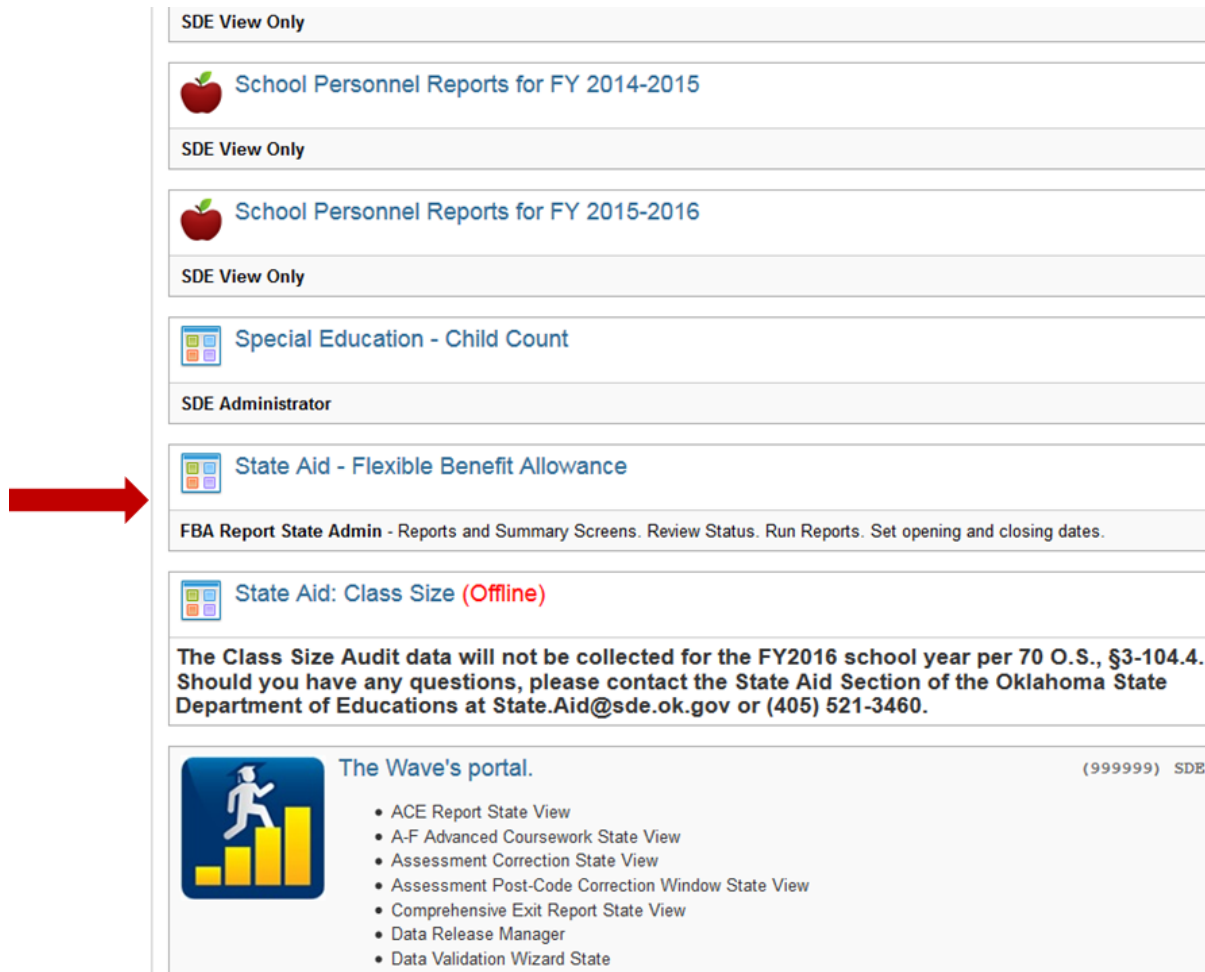# Flexible Benefit Allowance
District User Guide

Below you will find the link to the new FBA Application for the January 1, 2016 Count in SSO.

October 1, 2015, data is also on the electronic FBA forms if the districts and/or RAOs want to review.

Note: If there are <u>corrections on the Oct. 1 count</u>, then the district shall contact their RAO to notify State Aid to release for the district to adjust. This can ONLY be done <u>prior to the January 1 count submission</u>.

<https://sdeweb01.sde.ok.gov/SSO2/>

All of the individual boxes need a numeric digit.   If there is no amount, then a zero "0" needs to be inserted for the formulas to work.

RAOs can release any reports that have been "Certified" but not any that are just "Audit Complete."

New item on this report*: **This district does not qualify to participate in the Flexible Benefit Allowance for Current Fiscal Year**. This should be checked for any district/charter school that <u>does not participate in the State health insurance program</u>. Once this has been checked, no other data can be entered.

The State Aid—Flexible Benefit Allowance (FBA) application was created to allow districts to report their FBA information in a digital format to save both time and postage.   FBA is available to both districts (for initial data entry) and RAO's (for auditing purposes).   Users are granted permission to access the application through the regular Single Sign on process.   Initially OMES established user access for all Superintendents, RAO's and state office personnel. Future access will be granted through a ticket to the OMES helpdesk.

There are two district roles and 4 state office roles for this application.   They are:

DISTRICT

- Superintendent– Access to update all fields except RAO Notes. They can review RAO Notes. This is the only role allowed to Certify the report.

- FBA Report Access- Access to update all fields except RAO notes. They can review RAO Notes. This role cannot Certify the report.

Flexible Benefit Allowance

70 O.S. §§ 26-101 through 26-105

District Name   CODIST#

October Data Collection ® Status: **In Progress**

This district does not qualify to participate in the Flexible Benefit Allowance program ☐ 1
Number of Staff Identified for Flexible Benefit Allowance for Current Fiscal Year

Certified Personnel
Payment of Insurance 2 How is your insurance paid? (Choose one) Month of Coverage ◯ In Arrears of Coverage ◉ In Advance of Coverage ◯

1) Mark this box if your District does NOT qualify or wish to participate in the Flexible Benefit Allowance program. If you have marked this box, you will not complete the rest of the information.   Simply mark this box and Certify the report.   The RAO will audit the report and complete it.

2) Choose one option that indicates when the district pays for the personnel's insurance. **You will complete this information separately for Certified and Support personnel.**

Report below (1 & 2) a "head count" of all certified personnel as identified on the "Oklahoma Annual Certified Personnel report" (excluding Superintendents). Be sure to include personnel from **all funds**. **Verify all counts by reentering the correct number.**

(1) FBA as Insurance (Major Medical Insurance)

Start of Contract: 11

July (6/6)	6	6		1
Aug (5/7)	220	223		2
Sept (4/8)	0	0		3
Total	226	229		

Total should equal total employees for this category
Total will be multiplied by $526.88/$571.04 for adjusted allocation

(2) In Lieu of FBA (Taxable Compensation)

Start of Contract:

July (6/6)	0	0		4
Aug (5/7)	17	14		5
Sept (4/8)	0	0		6
Total	17	14		

Total should equal total employees for this category
Total will be multiplied by $69.71 for adjusted allocation

District Note (1)   7

District Note (2)   8

RAO's Note (1)   9

RAO's Note (2)   10

1) Enter the number of certified personnel identified as accepting FBA as their Insurance and who's contract started in the month of July.

2) Enter the number of certified personnel identified as accepting FBA as their Insurance and who's contract started in the month of August.

3) Enter the number of certified personnel identified as accepting FBA as their Insurance and who's contract started in the month of September.

4) Enter the number of certified personnel identified as accepting cash in lieu of FBA and who's contract started in the month of July.

5) Enter the number of certified personnel identified as accepting cash in lieu of FBA and who's contract started in the month of August.

6) Enter the number of certified personnel identified as accepting cash in lieu of FBA and who's contract started in the month of September.

7) & 8) Enter any information you would like the RAO or State Aid SDE staff to know about the people receiving this type of FBA.   Notes are not required in any field and all note fields have a 500 character limit.

9) & 10) RAO's will enter any information they would like the district and State Aid SDE staff to understand.   Notes are not required in any field and all note fields have a 500 character limit.

11) Compare previous counts in gray to the left of counts entered.

Support Personnel	
Payment of Insurance (See instructions on page 3) How is your insurance paid? (Choose one) Month of Coverage ⚪ In Arrears of Coverage ◉ In Advance of Coverage ⚪	

Report below (3 & 4) only those support personnel employed a minimum of six (6) or more hours per day who hold a "position" that is defined as a minimum of 172 days or a minimum of 1,032 hours per year from **all funds**.

(3) FBA as Insurance (Major Medical Insurance)					(4) In Lieu of FBA (Taxable Compensation)				
Start of Contract: **11**					Start of Contract:				
July (6/6)	49	49	⬍	**1**	July (6/6)	8	8	⬍	**4**
Aug (5/7)	114	112	⬍	**2**	Aug (5/7)	44	45	⬍	**5**
Sept (4/8)	0	0	⬍	**3**	Sept (4/8)	0	0	⬍	**6**
Total	163	161	⬍		Total	52	53	⬍	

Total should equal total employees for this category
Total will be multiplied by $526.88/$571.04 for adjusted allocation

Total should equal total employees for this category
Total will be multiplied by $189.69 for adjusted allocation

District Note (3) **7**	District Note (4) **8**
RAO's Note (3) **9**	RAO's Note (4) **10**

- Choose one option that indicates when the district pays for the personnel's insurance. **You will complete this information separately for Certified and Support personnel.**

1) Enter the number of support personnel identified as accepting FBA as their Insurance and who's contract started in the month of July.

2) Enter the number of support personnel identified as accepting FBA as their Insurance and who's contract started in the month of August.

3) Enter the number of support personnel identified as accepting FBA as their Insurance and who's contract started in the month of September.

4) Enter the number of support personnel identified as accepting cash in lieu of FBA and who's contract started in the month of July.

5) Enter the number of support personnel identified as accepting cash in lieu of FBA and who's contract started in the month of August.

6) Enter the number of support personnel identified as accepting cash in lieu of FBA and who's contract started in the month of September.

7) & 8) Enter any information you would like the RAO or State Aid SDE staff to know about the people receiving this type of FBA. Notes are not required in any field and all note fields have a 500 character limit.

9) & 10) RAO's will enter any information they would like the district and State Aid SDE staff to understand. Notes are not required in any field and all note fields have a 500 character limit.

11) Compare previous counts in gray to the left of counts entered.

Superintendent View:

I hereby confirm that this report is true and correct according to the records on file in this office.　　　　Certify　1

Save data for later　Save　Print form　Print
　　　　　　　　　　　2　　　　　　　3
　　　　　　　　　　　　District Summary Report　4

Ver. 1.1.2.0　　　　　　　　　　Contact us: State.Aid@sde.ok.gov - (405) 521-3460

1) Choose this button when you believe your report is correct and you are ready to Certify the report. Once the report is certified, the button will gray out and be unavailable.

2) Choose this button when you have entered data that you would like to save but you are not ready to Certify the report.

3) Choose this button to print a hard copy of this page for your files.　The page can be printed at anytime.

4) Choose this link to review the District Summary Report

District Summary Report:

The report opens in a window within the FBA application and has it's own scroll bar.　It is simply a more printer friendly display of the information currently entered in the district submission.　It can be saved in multiple formats including XML (webpage), PDF, Excel and Word.　Once it is saved it can be viewed and printed as any standard file of its type.

| ⏮ ◀ 1　of 1 ▶ ⏭ | [   ] Find \| Next　💾▾ 🔄 |

FBA (District Summary Report)

Submission: October 2016　　　　　　　District Name: WAGONER

Certified Personnel　　　　　　　　(73I019)

Coverage　　　　Month of Coverage
Type:

Number As Insurance:

July	1
August	6
September	0

District Notes:

RAO Notes:

Number in Lieu:

July	1

Note: If there are <u>corrections on the Oct. 1 count</u>, then the district shall contact their RAO to notify State Aid to release for the district to adjust. This can ONLY be done <u>prior to the January 1 count submission</u>. District will need to make notes about changes.