# EMPLOYEE BENEFITS | Plan Year: September 1, 2020 – August 31, 2021 OVERVIEW GUIDE

**Open Enrollment:** luly 15 - August 14, 2020

# Lewisville ISD 2020 - 2021



## What's Inside?

S125 PLAN INFORMATION FLEXIBLE SPENDING ACCOUNTS **BENEFITS AT A GLANCE CONTACT INFORMATION** FREQUENTLY ASKED QUESTIONS **ENROLLMENT SCHEDULE** 

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#### **LISD Benefits Office**

LEWISVILLE ISD 469-948-8104 | EMAIL: benefits@lisd.net



**To Enroll Online Visit:** www.lisd.net/benefits



# **EMPLOYEE BENEFIT CHECKLIST**

This is the perfect time to plan expenses for the school year and do a thorough check-up on your benefits for the 2020-2021 plan year.

		✓ Check		
_	r TRS ActiveCare Medical enrollmee open enrollment period, you wil	the contract of the contract o		
	CURRENT MEDICALPLANS	NEW MEDICAL PLANS		
	-	NEW TRS ActiveCare Primary *		
	TRS ActiveCare Select	TRS ActiveCare Primary + *		
	TRS ActiveCare-1HD	TRS ActiveCare HD		
	TRS ActiveCare 2 (closed plan)	TRS ActiveCare 2 (closed plan)		
	Baylor Scott & White HMO	Baylor Scott & White HMO		
* For thes	e plans you MUST select a Prima	ry Care Physician (PCP) when y	ou Enroll	
Not all plans auto-renew. You MUST enroll if:  • You plan to participate in a Flexible Spending Account (FSA)  • You plan to participate in the Dependent Childcare Reimbursement Plan  • You plan to change your Sick Leave Bank election  • You need to change your existing plans.  New Voluntary Benefits!  Lewisville ISD now offers the following additional benefits which will take effect September 1, 2020.				
<ul> <li>MetLife Critical Illness Plan</li> <li>Texas Life Permanent - Portable Life Insurance</li> <li>MASA Emergent Transport</li> </ul>				
If you make no changes, your current elections (including plan type and enrolled dependents) will carry over to the 2020-2021 plan year for the following benefits:  • Health Savings Account (HSA) • MetLife Dental • United HealthCare Vision • Standard Disability • Sick Leave Bank • UNUM Voluntary Life Insurance • LegalEase Legal Plan				





# Open Enrollment 2020

BEGINS: July 15, 2020 ENDS: August 14, 2020

#### WHEN ENROLLING HAVE READY

- ✓ Social Security Numbers and dates of birth for your Spouse and all eligible Dependents
- ✓ Any Status/Life Event or address changes
- ✓ Questions about available benefits
- ✓ Look over the new medical plan changes and options. If choosing the TRS Primary or Primary+ Plans you will need to search for your Doctor with this link <a href="www.bcbstx.com/trsactivecare">www.bcbstx.com/trsactivecare</a> and have the 10 digit PCP number ready to input into the enrollment system.

#### **ONLINE ENROLLMENT:**

- 1. You will find the enrollment website by visiting: <a href="https://www.lisd.net/benefits">https://www.lisd.net/benefits</a>
- 2. Click on the picture to access the Learning Hub:



- 3. Log into the system:
  - a. Use your assigned LISD Network Username & Password to log into the LISD Portal
  - b. When logged into Learning Hub click on the "My Benefits" icon you will be directed to your personal Home Page in the On-line Benefits System.
- 4. After you log on then click on "Open Enrollment" on the left side of the home page.

#### PHONE ENROLLMENT:

A benefits advisor can help you enroll and answer any questions you may have by calling the Enrollment Assistance Center. There is even an option to leave a voice message for a representative to call you back. Please see the schedule on page 4 to see when you can call.

Enrollment Assistance Center (during Open Enrollment only)

Monday - Friday ~ 8 am - 5 pm (please refer to schedule on next page)

855-765-4473 - Press Option 1 For Dallas

#### **NEW HIRES TO LEWISVILLE ISD**

#### Welcome to Lewisville ISD!

✓ You have 31 days from your "actively at work date" to complete the online New Hire Enrollment.

After 31 days the portal will be closed and you will not be eligible for benefits until open enrollment for the following plan year. https://www.lisd.net/benefits



# Open Enrollment Assistance Center Schedule

LEWISVILLE ISD (	CAMPUS	CALL IN DATE
<ul><li>Lewisville High School</li><li>Marcus High School</li><li>Dale Jackson Career Center</li></ul>	<ul><li>Lewisville Learning Center</li><li>Virtual Learning Academy</li><li>Night School (Jump Start Prog)</li></ul>	July 15
<ul><li>Juvenile-Alternative ED</li><li>Hebron High School</li><li>The Colony High School</li></ul>	<ul><li>LISD Career Center East</li><li>Hebron 9th Grade Center</li><li>Colony Natatorium</li></ul>	July 16
<ul><li>Flower Mound High School</li><li>Marcus 9th Grade Center</li><li>Lewisville Harmon 9th/10th</li></ul>	<ul><li>Flower Mound 9th Grade Center</li><li>Lewisville Killough 9th/10th</li></ul>	July 17
<ul> <li>Hedrick Middle School</li> <li>Griffin Middle School</li> <li>Lamar Middle School</li> <li>Lakeview Middle School</li> </ul>	<ul><li>Arbor Creek Middle School</li><li>Forestwood Middle School</li><li>Briarhill Middle School</li></ul>	July 20
<ul> <li>Delay Middle School</li> <li>Huffines Middle School</li> <li>Mckamy Middle School</li> <li>Creek Valley Middle School</li> </ul>	<ul><li>Downing Middle School</li><li>Durham Middle School</li><li>Shadow Ridge Middle School</li></ul>	July 21
<ul><li>Killian Middle School</li><li>Central Elementary</li><li>Lakeland Elementary</li><li>Degan Elementary</li></ul>	<ul><li>Camey Elementary</li><li>Timber Creek Elementary</li><li>Peters Colony Elementary</li></ul>	July 22
<ul> <li>Highland Village Elementary</li> <li>Stewarts Creek Elementary</li> <li>Flower Mound Elementary</li> <li>Indian Creek Elementary</li> <li>Mcauliffe Elementary</li> </ul>	<ul> <li>Owen Elementary</li> <li>Creekside Elementary</li> <li>Donald Elementary</li> <li>Hebron Valley Elementary</li> <li>Ethridge</li> </ul>	July 23
<ul> <li>Garden Ridge Elementary</li> <li>Morningside Elementary</li> <li>Heritage Elementary</li> <li>Old Settlers Elementary</li> <li>Parkway Elementary</li> </ul>	<ul> <li>Polser Elementary</li> <li>Prairie Trail Elementary</li> <li>Valley Ridge Elementary</li> <li>Forest Vista Elementary</li> </ul>	July 24
<ul> <li>Bridlewood Elementary</li> <li>Wellington Elementary</li> <li>Southridge Elementary</li> <li>Homestead Elementary</li> <li>Bluebonnet Elementary</li> </ul>	<ul><li>Tom Hicks Elementary</li><li>Liberty Elementary</li><li>Castle Hills Elementary</li><li>Vickery Elementary</li></ul>	July 27
<ul><li>Rockbrook Elementary</li><li>Coyote Ridge Elementary</li><li>Lillie Jackson Early Childhood</li></ul>	<ul><li>Independence Elementary</li><li>Lewisville Elementary School</li><li>Mill Street Elementary</li></ul>	July 28
Special Ed Instructional	Technology	July 29
<ul><li>Campus Support Services</li><li>Communities in Schools</li></ul>	West Aquatic Center	July 30
Facility Services	Food Service	July 31
<ul> <li>Administrative Office (ESC)</li> <li>Student Services</li> <li>Legal Services</li> <li>Communications</li> <li>Employee Services</li> <li>Employee Benefits</li> <li>Purchasing</li> <li>Accounting/Finance</li> <li>SAPP</li> <li>Fine Arts</li> <li>Special Education</li> <li>Assessment &amp; Accountability</li> <li>Warehouse</li> <li>Instruct Materials Warehouse</li> </ul>	<ul> <li>Contract Management</li> <li>Chief of Schools ES N</li> <li>Chief of Schools Middle</li> <li>Chief of Schools High</li> <li>Chief of Schools EL S</li> <li>Safety and Security</li> <li>Guidance and Counseling</li> <li>Secondary Curr &amp; Programs</li> <li>Professional Learning</li> <li>Digital Learning</li> <li>Health Services</li> <li>Athletics</li> <li>Career &amp; Technology</li> </ul>	August 3

## SECTION 125 PLAN INFORMATION AND RULES

A Section 125 Plan provides a tax-saving way to pay for eligible medical or dependent care expenses. The funds are automatically deducted from your paycheck on a pre-tax basis.

#### HERE'S HOW IT WORKS

A Section 125 Plan reduces your taxes and increases your spendable income by allowing you to deduct the cost of eligible benefits from your earnings before tax. Plus, the plan is available to you at no cost, and you're already eligible; all you have to do is enroll.

#### IS IT RIGHT FOR ME?

The savings you may experience with a Section 125 Plan are outlined below. By utilizing the Section 125 Plan, you would have \$70 more every month to apply toward insurance benefits or other needs. That's a savings of \$840 a year!

#### WHICH BENEFITS ARE ELIGIBLE?

Medical, Dental, Vision, Hospital Indemnity, and Flexible Spending Accounts (FSA)

#### WHEN CAN I MAKE CHANGES TO MY BENEFITS?

No changes are permitted until the annual enrollment period, unless you have an IRS S125 qualified event. You have 31 days from and including the date of the event to alter your benefits. Qualified events include but are not limited to marriage, divorce, and the gain or loss of a dependent.



#### NEED TO MAKE CHANGES?

You're able to change your election each year during your annual benefits enrollment, but the only time Internal Revenue Code regulations allow you to make a change during the plan year itself is if you experience a qualified event. Some examples include:

- · Change in legal married status
- Change in number of dependents
- Termination or commencement of employment
- Dependent satisfies or ceases to satisfy dependent eligibility requirements
- Change in residence or worksite that affects eligibility for coverage



#### FSA Plan Year is:

# Flexible Spending Accounts

September 1, 2020 – August 31, 2021

#### **FSA Max:**

## **Medical FSA**

The maximum you can set aside each year is \$2,750.

Medical Flexible Spending Accounts (FSA) allow you to set aside pre-tax payroll deductions each paycheck to pay for out of pocket medical, dental and vision expenses for you and your family.

During open enrollment you will estimate the amount you think you will need during the year. This amount will be taken out of each paycheck. Your full annual election will be available to you at the beginning of the plan year.

Lewisville ISD has selected the grace period option, you have an additional 2 1/2 months to incur and claim against unused funds in the new plan year. Keep in mind that remaining balances after the grace period is exhausted will be forfeited under the use-it-or-lose-it rule.

#### Save your Receipts!

The IRS requires validation of transactions. Upon request, you will have 60 days from the date of the transaction to provide documentation. Failure to provide documentation will result in suspension of your card privileges until the necessary documentation is received.

# Dependent Care FSA

With a Dependent Care Flexible Spending Account (FSA), you can set aside part of your pay on a pre-tax basis to pay for eligible dependent care expenses, such as:

- Day Care Centers
- Before/After School Care
- Mothers-Day-Out Program
- Nursery Schools
- Babysitters
- Nanny
- Au Pair/Day Camps

This account allows you to pay for day care expenses for your qualifying dependent/child with pre-tax dollars while you (and your spouse) are working, seeking employment, and/or attending school as a full time student (for at least five months of the year).

Eligible dependents must be claimed as an exemption on your tax return. For full plan details, view the FSA Booklet available on the Employee Benefit Center.

You may allocate up to \$5,000 per tax year for reimbursement of dependent day care services.

(\$2,500 if you are married and file a separate tax return).



# RESOURCES FOR FSA MANAGEMENT

## FLEXIBLE BENEFITS CARD

The Flex Benefits Card is available to all employees that participate in an IRS Medical FSA and or an IRS Dependent Care FSA. The Benefits Flex Card gives you immediate access to your money at the point of purchase. Cards are available for participating employees, their spouse and eligible dependents that are at least 18 years old.

The IRS requires validation of most transactions. You must submit receipts for validation of expenses when requested. If you fail to substantiate by providing a receipt to First Financial within 60 days of the purchase or date of service your card will be disabled and you will not be able to use it again until the necessary receipt or explanation of benefits from your insurance provider is received.

## **FLEX PORTAL**

Our FSA Portal is a secure online site that you can access by logging into your account on www.ffga.com.

- Access account information
- View card details and profile information
- Submit claims using an electronic claim form
- View pending claims

- Upload receipts and documentation
- Receive alerts
- Sign up for direct deposit for manual claims
- Register your phone to receive text alerts

### FF FLEX MOBILE APP

With the FF Flex Mobile App you can submit claims, view account balance & history, see claim status, view alerts, upload receipts and documentation and more! The FF Flex Mobile App is available for Apple® or Android<sup>TM</sup> devices on the App Store<sup>SM</sup> or the Google Play Store<sup>TM</sup>.

You must have your Flex Benefits Card number to register your account on the FF Flex Mobile App.

### **FSA STORE**

First Financial has partnered with the FSA Store to bring you an easy to use online store to better understand and manage your FSA. Visit <a href="http://www.ffga.com/fsaextras">http://www.ffga.com/fsaextras</a> for more details & special deals!

- Shop at FSA Store for eligible items from bandages to wheel chairs and thousands of other products
- Browse or search for eligible products and services using the FSA Eligibility List
- Visit the FSA Learning Center to help find answers to questions you may have about your FSA



# **Health Savings Accounts**

YOU MUST BE ENROLLED IN THE TRS ACTIVECARE HIGH DEDUCIBLE HEALTH CARE PLAN TO BE ELIGIBLE TO ENROLL IN A HEALTH SAVINGS ACCOUNT.

## What is a Health Savings Account?

HSAs were created to help control healthcare costs. They provide a savings vehicle that allows you to set aside money to pay for higher deductibles associated with lower monthly premium High Deductible Health Plans (HDHP). The money you save in monthly insurance premiums may be for eligible medical expenses you incur in the future. Your HSA balance rolls over from year-to-year earning interest along the way. The account is portable. Upon retirement or separation of service, you take the HSA with you because it's your money and your account.

HSA Plan Year is: September 1, 2020 to August 31, 2021 HSA MAX: The maximum you can set aside each year is \$3,550 for self only and \$7,100 for family (age 55 or older can make an additional \$1,000 catch-up contribution)

#### Key Advantages of an HSA

- »No end-of-year forfeiture of fund
- »Portable account
- »Provides an excellent savings vehicle for healthcare expenses
- »No monthly account fees
- »Free statements when you opt in for electronic
- »The money you put in to the account is deducted from your paycheck before tax
- »The interest and earnings you make on the account grow tax free
- »Distributions for eligible medical expenses are tax free

#### **FACTS:**

- »Money is not available up front
- »You cannot have both Flex or HSA for Medical use.
- »There is a \$1.25 monthly fee for paper statements, but you may opt out online at www.ffga.com

#### Keep good records of your expenses!

Receipts are NOT required at the time of distribution. Be sure to keep receipts for all of your medical expenses, for which you received a reimbursement, for at least three years for tax-reporting purposes. Keep track of your receipts and payments by using the portal to see balances, view transactions, create reports, and upload receipts.

# Who can participate in an HSA and are there any restrictions?

- »You must be enrolled in a qualified High Deductible Health Plan (HDHP)
- »You cannot be enrolled in Tricare or Medicare or covered under your spouse's traditional (non-HDHP) health care plan
- »You or your spouse (at their place of employment) cannot participate in a general purpose Flexible Spending Account (FSA) or Health Reimbursement Arrangement
- »You cannot participate if you are being claimed as a dependent on another person's tax return

# What is CIP Verification and Why is it required?

The Customer Identification Program (CIP) is a combination of requirements set forth in the US Patriot Act. It states that all financial institutions must verify the identity of individuals wishing to conduct financial transactions with them. A Health Savings Account is a bank account established with UMB and is therefore required to follow the CIP verification process. The verification process reviews your SSN, home mailing address, date of birth, and full legal name against two federal databases. UMB will send you information regarding the CIP process after Open Enrollment.

IF THE REQUESTED DOCUMENTATION IS NOT RECEIVED WITHIN 60 DAYS, THE ACCOUNT WILL BE CLOSED AND YOU MUST RE-APPLY IN ORDER TO OPEN UP YOUR HSA ACCOUNT.



# APPS YOU WILL BE HAPPY YOU INSTALLED!

### **Benefitsolver**

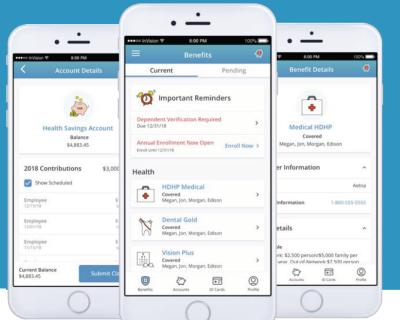
MyChoice App - Have ALL your benefit info at your fingertips, everywhere you go!

# All their benefits information is in the palm of their hand.

The MyChoice<sup>SM</sup> Mobile App puts the power of Benefitsolver® in the palm of members' hands giving them access to their benefits information where and when they need it.



**MyChoice** 







## **TRS Health**

TRS Health App-Brand NEW! Teladoc, e-ID Card, Caremark Pharmacy, find drug costs, and more!



The TRS Health App, powered by BCBS, is now live in the Apple and Google Play stores! With the app, get access to all your TRS-ActiveCare medical and pharmacy benefits at your fingertips To download and register, go to Google Play or the Apple App Store and:

- Open the app and click on "Create Account". Enter the requested information.
- Create a user ID and password.

  Or simply scan the QR code above to be immediately directed to the app

# FF Flex Mobile App

Access Account Information, View Card Details & Profile Information, Submit Claims, View Pending claims, **Upload Receipts & Documentation.** 





#### DOWNLOAD OUR FF FLEX MOBILE APP

The FF Flex Mobile App is available for Apple® or Android<sup>™</sup> devices on the App Store<sup>™</sup> or the Google Play Store™. First Financial's FF Flex Mobile App gives you quick and easy access to your accounts. Now you can securely check balances, request a reimbursement, upload receipts, and view transaction details ...all from your smart phone or tablet!



To Enroll Online Visit: www.lisd.net/benefits

## Medical -TRS Active Care

#### Important Items This Year:

The plan administrator is changing to Blue Cross Blue Shield (BCBS) this year. If you are in TRS AC-Select plans, and do not make change plans, you will be moved to the TRS AC-Primary+ plan. TRS AC-Primary Plan is new this year, if you want to be on that plan you will need to actively elect it.

The TRS AC-Primary and TRS AC-Primary+ plans require you to provide a Primary Care Physican (PCP) when you enroll for your benefits. To find a BCBS Doctor, please visit www.bcbstx.com/trsactivecare

#### NEW!

TRS-ActiveCare Primary	TRS Total (Monthly)	District Contribution (Monthly)		Employee Rate (Semi-monthly)
Employee Only	\$386.00	\$326.00	\$60.00	\$30.00
Employee + Spouse	\$1,089.00	\$388.00	\$701.00	\$350.50
Employee + Child(ren)	\$695.00	\$372.00	\$323.00	\$161.50
Employee + Family	\$1,301.00	\$393.00	\$908.00	\$454.00

TRS-ActiveCare HD	TRS Total (Monthly)	District Contribution (Monthly)	Employee Rate (Monthly)	Employee Rate (Semi-monthly)
Employee Only	\$397.00	\$326.00	\$71.00	\$35.50
Employee + Spouse	\$1,120.00	\$388.00	\$732.00	\$366.00
Employee + Child(ren)	\$715.00	\$372.00	\$343.00	\$171.50
Employee + Family	\$1,338.00	\$393.00	\$945.00	\$472.50

#### NEW!

TRS-ActiveCare Primary +	TRS Total (Monthly)	District Contribution (Monthly)	Employee Rate (Monthly)	Employee Rate (Semi-monthly)
Employee Only	\$514.00	\$358.00	\$156.00	\$78.00
Employee + Spouse	\$1,264.00	\$388.00	\$876.00	\$438.00
Employee + Child(ren)	\$834.00	\$372.00	\$462.00	\$231.00
Employee + Family	\$1,588.00	\$393.00	\$1,195.00	\$597.50

If you are currently in the Select plans you will be moved over to the Primary+; if you would like a different plan, please go in and elect at the Open Enrollment time period.

TRS-ActiveCare 2 (Closed to New Enrollments)		District Contribution (Monthly)		Employee Rate (Semi-monthly)
Employee Only	\$937.00	\$358.00	\$579.00	\$289.50
Employee + Spouse	\$2,222.00	\$388.00	\$1,834.00	\$917.00
Employee + Child(ren)	\$1,393.00	\$372.00	\$1,021.00	\$510.50
Employee + Family	\$2,627.00	\$393.00	\$2,234.00	\$1,117.00

The TRS Active Care 2 plan will be closed to any changes or new enrollments. Only those employees staying in the plan will get to keep it. Once Active Care 2 has been dropped, the plan cannot be re-elected.

Baylor Scott & White HMO	TRS Total (Monthly)	District Contribution (Monthly)		Employee Rate (Semi-monthly)
Employee Only	\$551.10	\$358.00	\$193.10	\$96.55
Employee + Spouse	\$1,382.06	\$388.00	\$994.06	\$497.03
Employee + Child(ren)	\$883.50	\$372.00	\$511.50	\$255.75
Employee + Family	\$1,478.56	\$393.00	\$1,085.86	\$542.78

# 2020-21 TRS-ActiveCare Plan Highlights Sept. 1, 2020 - Aug. 31, 2021



#### **What's New**

- Primary plan with a lower premium and copays
- Primary+ (formerly Select) decreased premiums by up to 8%
- **Broader networks** of health care providers
- Lower premiums for families with children

# Leverage Your \$0 Preventive Care\*

- Annual routine physicals (ages 12+)
- Annual mammogram (ages 40+)
- Annual OBGYN exam & pap smear (ages 18+)
- Annual prostate cancer screening (ages 45+)
- Well-child care (unlimited up to age 12)
- Healthy diet/obesity counseling (unlimited to age 22; ages 22+ get twenty-six visits per year)
- Smoking cessation counseling (8 visits per year)
- Breastfeeding support (six per year)
- Colonoscopy (ages 50+ once every ten years)

\*Available for all plans. See benefits guides for more details.

#### **Did You Know**

- Our provider search tool will be available in June.
- Choosing a PCP helps you meet your health goals faster.
- Generic medications save money!
   Ask your provider if your medicine has a generic.

All TRS-ActiveCare participants have **three plan options**. Each is designed with the unique needs of our members in mind.

	NEW: TRS-ActiveCare Primary	TRS-ActiveCare HD	TRS-ActiveCare Primary+
Plan summary	Lower premium     Copays for doctor visits before you meet deductible     Statewide network     PCP referrals required to see specialists     Not compatible with health savings account (HSA)     No out-of-network coverage	Similar to current 1-HD Lower premium Compatible with health savings account (HSA) Nationwide network with out-of-network coverage No requirement for PCPs or referrals Must meet deductible before plan pays for non-preventive care	Simpler version of the current Select plan Lower deductible than HD and primary plans Copays for many services and drugs Higher premium Statewide network PCP referrals required to see specialists Not compatible with a health savings account (HSA) No out-of-network coverage
If you make no changes during Annual Enrollment, you'll have the following plan	Only employees that choose this new plan during Annual Enrollment will be enrolled in it.	If you're currently in TRS-ActiveCare 1-HD and you make no change during Annual Enrollment, this will be your plan next year.	If you're currently in TRS-ActiveCare Select and you make no changes during Annual Enrollment, this will be your plan next year.

Total Monthly Premiums					
Employee Only	\$386	\$397	\$514		
Employee and Spouse	\$1,089	\$1,120	\$1,264		
Employee and Children	\$695	\$715	\$834		
Employee and Family	\$1,301	\$1,338	\$1,588		

Plan Features				
Type of Coverage	In-Network Coverage Only	In-Network	Out-of-Network	In-Network Coverage Only
Individual/Family Deductible	\$2,500/\$5,000	\$2,800/\$5,600	\$5,500/\$11,000	\$1,200/\$3,600
Coinsurance	You pay 30% after deductible	You pay 20% after deductible	You pay 40% after deductible	You pay 20% after deductible
Individual/Family Maximum Out-of-Pocket	\$8,150/\$16,300	\$6,900/\$13,800	\$20,250/\$40,500	\$6,900/\$13,800
Network	Statewide Network	Nationwide Network		Statewide Network
Primary Care Provider (PCP) Required	Yes	No		Yes

<b>Doctor Visits</b>				
Primary Care	\$30 copay	You pay 20% after deductible	You pay 40% after deductible	\$30 copay
Specialist	\$70 copay	You pay 20% after deductible	You pay 40% after deductible	\$70 copay
TRS Virtual Health	\$0 per consultation	\$30 per consultation		\$0 per consultation

Immediate Care				
Urgent Care	\$50 copay	You pay 20% after deductible	You pay 40% after deductible	\$50 copay
Emergency Care	You pay 30% after deductible	You pay 20%	after deductible	You pay 20% after deductible
TRS Virtual Health	\$0 per consultation	\$30 per consultation		\$0 per consultation

Prescription Drugs				
Drug Deductible	Integrated with medical	Integrated with medical	\$200 brand deductible	
Generics (30-Day Supply / 90-Day Supply)	\$15/\$45 copay	You pay 20% after deductible	\$15/\$45 copay	
Preferred Brand	You pay 30% after deductible	You pay 25% after deductible	You pay 25% after deductible	
Non-preferred Brand	You pay 50% after deductible	You pay 50% after deductible	You pay 50% after deductible	
Specialty	You pay 30% after deductible	You pay 20% after deductible	You pay 20% after deductible	

This plan is closed and not accepting new enrollees. If you're currently enrolled in TRS-ActiveCare 2, you can remain in this plan.

#### **TRS-ActiveCare 2**

- · Closed to new enrollees
- Current enrollees can choose to stay in plan
- Lower deductible
- Copays for many drugs and services
- · Nationwide network with out-of-network coverage
- No requirement for PCPs or referrals

If you're currently in TRS-ActiveCare 2, and you make no changes during Annual Enrollment, you will remain in TRS-ActiveCare 2 next year.

\$937
\$2,222
\$1,393
\$2,627

In-Network	Out-of-Network		
\$1,000/\$3,000	\$2,000/\$6,000		
You pay 20% after deductible	You pay 40% after deductible		
\$7,900/\$15,800	\$23,700/\$47,400		
Nationwide Network			
No			

\$30 copay	You pay 40% after deductible		
\$70 copay	You pay 40% after deductible		
\$0 per consultation			

\$50 copay	You pay 40% after deductible		
You pay a \$250 copay plus 20% after deductible			
\$0 per consultation			

\$200 brand deductible	
\$20/\$45 copay	
You pay 25% after deductible (\$40 min/\$80 max)/ You pay 25% after deductible (\$105 min/\$210 max)	
You pay 50% after deductible (\$100 min/\$200 max)/ You pay 50% after deductible (\$215 min/\$430 max)	
You pay 20% after deductible (\$200 min/\$900 max)/	

No 90-Day Supply of Specialty Medications

## 2020-21 Health Maintenance Organization Plans and Premiums for Select Regions of the State

**REMEMBER:** 

Remember that when you choose an HMO, you're choosing a regional network.

TRS also contracts with HMOs in certain regions of the state to bring participants in those areas another regional plan option.

Central and North Texas Baylor Scott & White HMO Brought to you by TRS-ActiveCare  You can choose this plan if you live in one these counties: Austin, Bastrop, Bell, Blanco, Bosque, Brazos, Burleson, Burnet, Caldwell, Collin, Coryell, Dallas, Denton, Ellis, Erath, Falls, Freestone, Grimes, Hamilton, Hays, Hill, Hood, Houston, Johnson, Lampasas, Lee, Leon, Limestone, Madison, McLennan, Milam, Mills, Navarro, Robertson, Rockwall, Somervell, Tarrant, Travis, Walker, Waller, Washington, Williamson		South Texas Blue Essentials HMO Brought to you by TRS-ActiveCare	West Texas Blue Essentials HMO Brought to you by TRS-ActiveCare  You can choose this plan if you live in one these counties: Andrews, Armstrong, Bailey, Borden, Brewster, Briscoe, Callahan, Carson, Castro, Childress, Cochran, Coke, Coleman, Collingsworth, Comanche, Concho, Cottle, Crane, Crockett, Crosby, Dallam, Dawson, Deaf Smith, Dickens, Donley, Eastland, Ector, Fisher, Floyd, Gaines, Garza, Glasscock, Gray, Hale, Hall, Hansford, Hartley, Haskell, Hemphill, Hockley, Howard, Hutchinson, Irion, Jones, Kent, Kimble, King, Knox, Lamb, Lipscomb, Llano, Loving, Lubbock, Lynn, Martin, Mason, McCulloch, Menard, Midland, Mitchell, Moore, Motley, Nolan, Ochiltree, Oldham, Parmer, Pecos, Potter, Randall, Reagan, Reeves, Roberts, Runnels, San Saba, Schleicher, Scurry, Shackelford, Sherman, Stephens, Sterling, Stonewall, Sutton, Swisher, Taylor, Terry, Throckmorton, Tom Green, Upton, Ward, Wheeler, Winkler, Yoakum	
		You can choose this plan if you live in one these counties: Cameron, Hildalgo, Starr, Willacy		
Total Monthly Premiums				
Employee Only	\$551.10	\$491.54	\$534.42	
Employee and Spouse	\$1,382.06	\$1,182.52	\$1,287.58	
Employee and Children	\$883.50	\$766.96	\$835.68	
Employee and Family	\$1,478.56	\$1,258.52	\$1,370.12	
Plan Features				
Type of Coverage	In-Network Coverage Only	In-Network Coverage Only	In-Network Coverage Only	
Individual/Family Deductible	\$950/\$2,850	\$500/\$1,000	\$950/\$2,850	
Coinsurance	You pay 20% after deductible			
Individual/Family Maximum Out-of-Pocket	\$7,450/\$14,900			
Doctor Visits				
Primary Care	\$20 copay	\$25 copay	\$20 copay	
Specialist	\$70 copay	\$60 copay	\$70 copay	
Immediate Care			·	
Urgent Care	\$50 copay	\$75 copay	\$50 copay	
<u> </u>	\$500 copay after deductible	You pay 20% after deductible	\$50 copay before deductible plus 25% after	
Emergency Care	φουο copay arter deductions	Tou pay 20 % arter deductible	deductible	
Prescription Drugs				
Drug Deductible	\$150 (excl. generics)	\$100	\$150	
Days Supply	30-Day Supply / 90-Day Supply	30-Day Supply / 90-Day Supply	30-Day Supply / 90-Day Supply	
Generics	\$5/\$12.50 copay	\$10/\$30 copay	\$5/\$12.50 copay ACA Preventative: \$0	
Preferred Brand	30% after deductible	\$40/\$120 copay	30% after deductible	
Non-preferred Brand	50% after deductible	\$65/\$195 copay	50% after deductible	
Specialty 15%/25% after deductible (preferred/nonpreferred)		You pay 20% after deductible	15%/25% after deductible (preferred/nonpreferred)	

trs.texas.gov

# Scott and White Health Plan • trs.swhp.org

# TRS-ActiveCare 2020-2021 Summary of Benefits

Fully Covered Healthcare Services			
Preventive Services	No Charge		
Standard Lab and X-Ray	No Charge		
Disease Management and Complex Case Management	No Charge		
Well Child Care Annual Exams	No Charge		
Immunizations (age appropriate)	No Charge		
Nurse Advice Line	1-877-505-7947		
Telehealth (MyBSWHealth and MDLIVE)	\$0 copay go to trs.swhp.org		
Plan Provisions			
Annual Deductible	\$950 Individual/ \$2,850 Family		
Annual out-of-pocket maximum (including medical and prescription co-pays and co-insurance)	\$7,450 Individual/ \$14,900 Family (includes combined Medical and Rx copays, deductibles and coinsurance)		
Lifetime Raid Renefit Maximum	None		

Lifetime Paid Benefit Maximum	None		
Outpatient Services			
Primary Care <sup>1</sup>	<b>\$20 Copay</b> First Primary Care Visit for Illness - \$0 Copay <sup>2</sup>		
Primary Care Dependents <sup>1</sup> (under age 19)	\$0 Copay <sup>2</sup>		
After-Hours Primary Care Clinics	\$20 copay		
Specialty Care	\$70 copay		
Other Outpatient Services	20% after deductible <sup>3</sup>		
Diagnostic/Radiology Procedures	20% after deductible		
Eye Exam (one annually)	No Charge		
Allergy Serum & Injections	20% after deductible		
Inpatient Services			
Overnight hospital stay: includes all medical services including semi-private room or intensive care	\$150 per day <sup>4</sup> and 20% of charges after deductible		
Maternity Care			
Prenatal Care	No Charge		
Inpatient Delivery	\$150 per day <sup>4</sup> and 20% of charges after deductible		
Expecting the Best® Maternity Program <sup>7</sup>	No Charge		
Equipment and Supplies			
Preferred Diabetic Supplies and Equipment - Rx only	\$5/\$12.50 copay; no deductible		
Non-Preferred Diabetic Supplies and Equipment - Rx only	30% after Rx deductible		
Durable Medical Equipment/ Prosthetics	20% after deductible		

<i>3</i> 213411	irriary or	Deficites		
Home Health Service	s			
Home Health Care Vis	it	\$70 copay		
Worldwide Emergend	y Care			
Ambulance and Helicop	\$40 c	copay and 20% of charges after deductible		
Emergency Room <sup>6</sup>	\$50	0 copay after deductible		
Urgent Care Facility		\$50 copay		
Prescription Drugs				
Annual Benefit Maximu	ım	Unlimited		
Rx Deductible per Indiv Does not apply to preferred		\$150		
Ask an SWHP Pharmacy representative how to save money on your prescriptions.	Retail Quantity (Up to a 30-day supply)	Maintenance Quantity (Up to a 90-day supply) Available at BSW Pharmacies, in-network retail pharmacies and mail order		
ACA Preventive*	\$0 copay	\$0 copay		
Preferred Generic	\$5 copay	\$12.50 copay		
Preferred Brand	30% after Rx deductible	30% after Rx deductible		
Non-Preferred	50% after Rx deductible	50% after Rx deductible		
Online Refills	trs.s	swhp.org		
Mail Order		3SWH: 1-855-388-3090 OptumRx: 1-855-205-9182		
Specialty Medication (up to a 30-day supply)	s			
Tier 1 Tier 2 Tier 3	15% after	15% after Rx deductible 15% after Rx deductible 25% after Rx deductible		
Diagnostic & Therape	eutic Services			
Physical and Speech Th	erapy	\$70 copay		
Manipulative Therapy <sup>5</sup>		20% without office visit plus 20% with office visit		
Wellness				
Naturally Slim <sup>7</sup>		No Charge		
Well-Being Assessmen	t <sup>7</sup>	No Charge		
Digital Health Coaching	g <sup>7</sup>	No Charge		

<sup>1</sup>Including all services billed with office visit



<sup>&</sup>lt;sup>2</sup>Does not apply to wellness or preventive visits

<sup>&</sup>lt;sup>3</sup>Includes other services, treatments, or procedures received at time of office visit

<sup>4\$750</sup> maximum copay per admission and 20% after deductible

<sup>535</sup> visits per year maximum

<sup>&</sup>lt;sup>6</sup>Copay waived if admitted within 24 hours

 $<sup>{}^{7}\</sup>mbox{See}$  member guide for additional information

<sup>\*</sup>See list of ACA preventive drugs on the Pharmacy Benefits page at trs.swhp.org.

# 2020-21 HMO Rates and Benefit Changes



Changes effective September 1, 2020

Coverage Tier/Benefit	2019-2020	2020-2021
Employee Only	\$558.54	\$551.10
Employee and Spouse	\$1,306.58	\$1,382.06
Employee and Child(ren)	\$876.76	\$883.50
Employee and Family	\$1,457.28	\$1,478.56
Deductible	\$950	\$950
Out-of-Pocket Maximum	Individual - \$7,450 Family - \$14,900	Individual - \$7,450 Family - \$14,900
Copays	Primary care office visit copay \$20; copay for first visit for illness waived, does not apply to wellness or preventive visits; \$0 copay for dependents under 19 for primary care.  Specialist copay \$70	Primary care office visit copay \$20; copay for first visit for illness waived, does not apply to wellness or preventive visits; \$0 copay for dependents under 19 for primary care.  Specialist copay \$70
Emergency and Urgent Care	Emergency \$500 copay after the de- ductible. Urgent Care \$50	Emergency \$500 copay after the de- ductible. Urgent Care \$50
Pharmacy	Group Value Formulary 3-Tier coverage	Group Value Formulary 3-Tier coverage
Telehealth (MyBSWHealth and MDLIVE)	n/a	\$0 copay go to <b>trs.swhp.org</b>





# TRS-ActiveCare: What's New and What's Changing

Effective: Sept. 1, 2020

We listened to what your district leadership had to say about providing you enhanced health plan choices. Here are some key changes you'll see for each plan.

		Total Premium Before Your District Contribution			
		Current 2019-20 Total Premium	New 2020-21 Total Premium	Change in Dollar Amount	Key Plan Changes
	Employee Only		\$386.00		New plan with lowest premium and copays for doctor visits and
TRS-ActiveCare	Employee and Spouse		\$1,089.00		generic drugs before you meet the deductible.  • Statewide network.  • Participants must select a primary care provider who will make
Primary (New!)	Employee and Children		\$695.00		
	Employee and Family		\$1,301.00		referrals to specialists.
	Employee Only	\$378.00	\$397.00	\$19.00	<ul> <li>Less than \$20 increase in premiums for employee-only tier and reduced premiums for tiers with children.</li> <li>New deductible cap for individuals on family plans means coinsurance coverage takes effect sooner.</li> <li>Increase in deductible (+\$50 individual/+\$100 family) and maximum out-of-pocket (+\$150 individual/+\$300 family) to align with IRS guidelines</li> </ul>
TRS-ActiveCare HD	Employee and Spouse	\$1,066.00	\$1,120.00	\$54.00	
(formerly 1-HD)	Employee and Children	\$722.00	\$715.00	<b>- \$7.00</b>	
	Employee and Family	\$1,415.00	\$1,338.00	<b>- \$77.00</b>	
	Employee Only	\$556.00	\$514.00	- \$42.00	<ul> <li>8% reduction in premiums for all tiers.</li> <li>Reduced maximum-out-of-pocket by \$1,000 for individuals and \$2,000 for family plans.</li> <li>Statewide network.</li> <li>Participants must select a primary care provider who will make referrals to specialists.</li> </ul>
TRS-ActiveCare	Employee and Spouse	\$1,367.00	\$1,264.00	- \$103.00	
Primary+ (formerly Select)	Employee and Children	\$902.00	\$834.00	- \$68.00	
(iornicity ocicot)	Employee and Family	\$1,718.00	\$1,588.00	- \$130.00	
TRS-ActiveCare 2 (closed to new enrollees)	Employee Only	\$852.00	\$937.00	\$85.00	<ul> <li>TRS-ActiveCare 2 has experienced a decline in membership and a steady rise in high cost claims. To keep pace with higher health care costs, premiums for TRS-ActiveCare 2 will increase by 10%.</li> <li>This plan is closed to new enrollees.</li> </ul>
	Employee and Spouse	\$2,020.00	\$2,222.00	\$202.00	
	Employee and Children	\$1,267.00	\$1,393.00	\$126.00	
	Employee and Family	\$2,389.00	\$2,627.00	\$238.00	

At a Glance				
	Primary	HD	Primary+	
Premiums	Lowest	Lower	Higher	
Deductible	Mid-range	High	Low	
Copays	Yes	No	Yes	
Network	Statewide	Nationwide	Statewide	
PCP Required?	Yes	No	Yes	
HSA-eligible?	No	Yes	No	





To Enroll Online Visit: www.lisd.net/benefits

### **Dental-Metlife**

#### Unmarried dependents covered up to age 26

Visiting the dentist can help you and your family keep a great smile as well as maintaining good health. These plans are designed to help you keep your teeth in the best shape possible. This is how they work:

Dental	Standard Plan	Basic Plan
Annual deductible	\$50 per individual; \$150 per family	\$0 per individual; \$0 per family
Annual maximum*	\$1500 per person	\$1000 per person
Preventative care (e.g., cleaning, exam, x-rays)	100% paid	Covered at 50%
Basic filing services (e.g., fillings, extractions	Covered at 80% after deductible is met	Covered at 50%
Major Services (e.g., crowns, root canals)	Covered at 50% after deductible is met	Covered at 50%
Orthodontia for eligible children and adults	\$1500 per person	N/A

Please Note: The dental plans are MAC (Maximum Allowable Charge) plans. The Maximum Allowable Charges are based on negotiated rates with contracted PPO dentists. If you utilize the PPO in-network dentist, the plans will benefit you and pay a larger amount for your dental services. Out-of-netowrk dentists are not regulated and can charge any amount for their services. If you choose an out-of-network dentist, the plans will only pay the same amounts they pay the in-network dentists and YOU are responsible for the difference. Referred to as "balance billed".

Question for your dentist is: Are you an In-Network dentist for "MetLife PDP Plus Network"?

MetLife Dental Insurance						
	Monthly	y Rates	Semi-mon	thly Rates		
Coverage Tier	Standard Plan	Basic Plan	Standard Plan	Basic Plan		
Employee Only	\$45.42	\$23.90	\$22.71	\$11.95		
Employee + Spouse	\$90.84	\$47.78	\$45.42	\$23.89		
Employee + Child(ren)	\$92.66	\$48.74	\$46.33	\$24.37		
Employee + Family	\$138.08	\$72.64	\$69.04	\$36.32		

### Vision Plan-United HealthCare Vision

### Unmarried dependents covered up to age 26

Keeping up with routine eye exams is extremely important—regardless of how good your current vision might be. On top of providing you with prescriptions for glasses or contacts, your eye doctor can check you for diseases or infections. This plan is designed to help you and your family's vision stay as healthy as possible.

Highlights include:

- Richer benefits with <u>in-network</u> providers
- \$10 co-pay for eye exam
- \$25 co-pay for eyeglasses or contacts
- \$130 frame allowance OR \$125 contact lens allowance
- This plan allows for new frames every 24 months

United Health Care-Spectra Vision Plan				
Coverage Tier	Monthly Rates	Semi-monthly Rates		
Employee Only	\$8.38	\$4.19		
Employee + Spouse	\$15.33	\$7.66		
Employee + Child(ren)	\$16.06	\$8.03		
Employee + Family	\$24.78	\$12.39		

This is an outline of benefits only. If there is a conflict between the terms of this outline of benefits and the contract, the terms of the contract will prevail. Please see a Benefits Advisor or review plan summary in the Reference Center at www.benefitsolver.com for additional information.

To Enroll Online Visit: www.lisd.net/benefits

## Critical Illness Plan - Metlife

### Unmarried dependents covered up to age 26 - Guaranteed Issue

If you experience an event such as a heart attack or stroke, Critical Illness Insurance may help. It pays a lump sum amount to help with expenses that may not be covered by major medical insurance – house payments, everyday expenses, lost income, and more.

Highlights include:

- Plan pays a lump-sum benefit amount of \$10,000,\$20,000 or \$30,000, offered guaranteed issue for employees and their spouse. Spouse and Children are eligible for 100% of the employee benefit amount
- Coverage is up to 500% of Benefit amount chosen for each person on the plan
- Guaranteed Issue for all employees, spouse and children
- No Pre-existing conditions apply.
- Recurrence Benefit will apply to certain illness
- Rates for all plans are listed in <a href="https://www.lisd.net/benefits">https://www.lisd.net/benefits</a>

•	Heart Attack
•	Stroke
•	Major Organ Transplant
•	Alzheimer's Disease
•	Cancer
•	Kidney Failure
•	Skin Cancer – Partial Benefit
•	Coronary Artery By-Pass
•	22 Other Listed Conditions – Partial Benefit

	MetLife Critical Illness Plan Sample Rates shown are for \$10,000						
	<u>Monthly Rates</u> Semi-monthly Rates						
AGE	AGE Employee Employee + Employee + Only Spouse Children						
<29	\$6.20	\$12.60	<u>\$7.90</u>	<u>\$14.30</u>			
	\$3.10	\$6.30	\$3.95	\$7.15			
30-39	\$8.50	\$18.40	\$10.20	<u>\$20.01</u>			
	\$4.25	\$9.20	\$5.10	\$10.01			
40-49	\$14.80	\$34.50	<u>\$16.50</u>	\$36.20			
	\$7.40	\$17.25	\$8.25	\$18.10			

Rates lock in at your issue age of the Critical Illness policy.

Please see enrollment system for other age bands; based on employee's age as of the Plan Year, September 1.

# Emergency Ambulance Service -MASA

#### Unmarried dependents covered up to age 26

In the event of an emergency, an ambulance ride to the hospital can be extremely expensive. Most people assume that their health insurance will cover most, if not all of the costs for ground or air emergency transports. Usually, the opposite is true, leaving you with financially crippling bills. Coverage with MASA Emergency Ambulance Service can help you prepare for the unexpected with a plan that gives you access to vital emergency medical transportation for a minimal monthly fee. Benefits include:

- One low fee for peace of mind for emergent transport costs
- No deductibles
- Easy claim process
- No health questions
- Basic Coverage Area includes
   U.S., Canada, Mexico, and Caribbean
   (excluding Cuba)

MASA Medical Tr	ansport Plan	
Family Coverage with eligible dependents	Monthly	Semi-Monthly
Emergent Plus - Ground & Air	\$14.00	\$7.00



To Enroll Online Visit: www.lisd.net/benefits

## **HOSPITAL INDEMNITY PLAN-AFLAC**

#### Unmarried dependents covered up to age 26 - Guaranteed Issue

The Aflac Group Hospital Indemnity Plan provides cash benefits *directly to you* that help pay for some of the costs - medical and nonmedical - associated with a covered hospital stay due to a sickness or accidental injury. NO PREGNANCY LIMITATION!

Highlights include:

Occurrence	Pays
Hospital Admission (per confinement) Once per covered sickness or accident per calendar year	\$1000
Hospital Confinement (per day) 31 days max per covered sickness or covered accident	\$200
Hospital Intensive Care (per day) 10 days max per covered sickness or covered accident	\$200

AFLAC Hospital Indemnity Plan				
Coverage Tier	Monthly Rates	Semi-Monthly Rates		
Employee Only	\$21.24	\$10.62		
Employee + Spouse	\$42.56	\$21.28		
Employee + Child(ren)	\$34.26	\$17.13		
Employee + Family	\$55.58	\$27.79		



# **Disability-The Standard**

Disability insurance pays a cash benefit and is designed to help protect you if you can't work due to a covered injury or sickness. It pays a monthly benefit amount based on how much you elect up in \$100 increments up to 662/3% of your gross income or a maximum of \$8,000 a month, so you may continue to pay for everyday living expenses and focus on recovering. Highlights include:

- Guaranteed issue open enrollment every year, but any new or enhanced coverage has a 12 month pre-existing condition limitation
- Pregnancy covered same as any illness 12 month pre-existing limitation applies
- Premiums vary based on which plan you select Plan A or Plan B, how much coverage you select, and how long of an "elimination period" you select; elimination periods are how long you are willing to wait after being diagnosed as "medically disabled" before the plan begins to pay your monthly disability benefit until the doctor says you are physically able to return to work.
  - Plan A pays illness & injury up to age 65
  - Plan B pays illness for up to 5 years & injury up to age 65
  - Elimination periods for illness/accident are 14 days, 30 days, 60 days, or 90 days
    - > If you select an elimination period with 30 days or less, your waiting period is waived upon in-patient hospital admittance of 24 hours or more
- See rate chart at <a href="http://benefits.ffga.com/lewisvilleisd">http://benefits.ffga.com/lewisvilleisd</a> or on enrollment site at <a href="www.lisd.net/">www.lisd.net/</a> benefits



To Enroll Online Visit: www.lisd.net/benefits

# Permanent, Portable Life Insurance-Texas Life

#### Dependent coverage can be elected

Ensuring your family is financially covered in the event of a loss is an important way of showing them you care about their needs. Life Insurance can help. Portable, Individual Life Insurance policies may help your family in the event of your death. The application process is simple. You only have to answer three health questions, and there are no medical exams required. You may also apply for this coverage for yourself, your spouse and minor children and grandchildren.

- Portable you can take it with you when you leave the district
- Coverage to age 121
- No scheduled rate increase
- Employees age 49 and under: eligible to receive up to \$300,000 coverage; Express Issue
- Employees age 50-65: eligible to receive up to \$100,000 coverage; Express Issue
- Spousal Express Issue coverage up to \$50,000; varies based on spouse's age
- Coverage for child(ren) & grandchild(ren) up to \$50,000

## **Group Life - UNUM**

# Dependent coverage can only be carried on one employee, if both work for LISD. Unmarried dependents covered up to age 26

Although no dollar amount can ever be placed on the value of your life, this insurance plan can provide stability and protection to your loved ones after you are gone. Lewisville ISD provides all eligible employees with a \$15,000 Basic Life and AD&D policy. Here's how this plan works:

- Amounts of coverage still in underwriting after September 1, 2020, the effective date of coverage will be the first day of the
  month following the date of approval by Unum
- Employees <u>with current coverage</u> can increase coverage by \$10,000 increments to a maximum of the Guaranteed Issue amount up to \$150,000 this year without health questions for approval
- Employees without current coverage can elect 5 times their salary up to \$500,000 of voluntary employee coverage but are subject to health questions
- Coverage available for spouse and child(ren) only if you have coverage for yourself

#### Existing Employees—subject to underwriting

- Employee: Increments of \$10,000 up to 5 times salary not to exceed \$500,000
- Spouse: Increments of \$5,000 up to 50% of the employee's election up to \$250,000
- Child(ren): Increments of \$1,000 up to \$10,000
- Spouse and dependent child(ren) coverage is limited to 50% of the employee's coverage election

#### New Hires (within 31 days of hire)—Guaranteed issue

- Employee: Increments of \$10,000, beginning at \$10,000 up to a maximum of \$150,000
- Spouse: Increments of \$5,000 up to \$25,000
- Child(ren): Up to \$10,000
- Spouse and dependent child(ren) coverage is limited to 50% of the employee's coverage election.
- · Dependent coverage can only be carried on one employee, if both work for the district

Voluntary AD&D is also available and is ALWAYS Guaranteed Issue. Options for AD&D coverage are as follow:

- Employee: Up to 5 times salary in \$10,000 increments, not to exceed \$500,000
- Spouse: Up to 50% of employee amount in \$5,000 increments, not to exceed \$250,000
- Child(ren): Up to 50% of employee amount in \$1,000 increments, not to exceed \$10,000

PLEASE NOTE: For any amounts that are subject to health and underwriting guidelines for approval, you will be prompted to complete the Evidence of Insurability and submit. If the Evidence of Insurability is not completed by August 31, 2020, the elected coverage will be declined.



To Enroll Online Visit: www.lisd.net/benefits

## Legal Plan - Legal Ease

#### Unmarried dependents covered up to age 26

LegalGuard offers valuable benefits to shield your family and savings from unexpected personal issues.

#### Highlights include:

- An attorney with expertise specific to your personal legal matter
- Access to a national network of attorneys with exceptional experience that are matched to meet your needs
- In- and out-of-network coverage
- Concierge help navigation common individual or family legal issues

Legal Ease	Legal Plan	
Family Coverage with eligible dependents	Monthly	Semi-Monthly
LegalGuard	\$15.18	\$7.59



## Sick Leave Bank

The Sick Leave Bank provides additional paid sick leave days to Bank members faced with extended illness, surgery, or disability that keeps them from doing their job. All employees working 30 hours or more per week are eligible to join the Sick Leave Bank. One local personal day is donated in order to join the Bank. Enrollment is during Open Enrollment each school year or within 31 days of date of employment or eligibility for membership. You must be able to earn at least one local personal day from the beginning of employment to the end of that Sick Leave Bank year to be eligible for membership.

What you need to know on the Sick Leave Bank:

- Bank year begins on July 1
- Members may withdraw up to 25 fully paid sick leave Bank days per year with a 100-day lifetime maximum withdrawal.
- Pregnancy has special restrictions and limitations.
- Absence for personal illness or injury must be at least 10 consecutive work days
- Restricted bereavement and critical care leave for immediate family members can be Sick Leave Bank days. No minimum absence is required.
- Workers' Compensation absences are covered; subject to other rules.
- You must first use all accumulated leave before using Bank days.
- Elective procedures are not covered.

Sick Leave Bank rules, procedures and applications are at lisd.net/benefits. Please call the Benefits Office at 469-948-8073 if you have any questions.



To Enroll Online Visit: www.tcgservice.com/open-enrollment

# RETIREMENT OPTIONS

Research shows that Americans are living longer and their number of years in retirement is increasing. While your TRS pension may be enough to cover expenses during your initial retirement years, the reduced monthly income may not be sufficient for costly factors such as medical bills, taxes, and your desired standard of living. Contributing to a retirement savings plan can help supplement your pension during retirement. On your 457(b) or 403(b) deductions, most plans allow you to make adjustments to your contribution amount or set up a new plan at any time.

#### **HELP IS AVAILABLE**

For assistance enrolling or if you'd like to speak with a Retirement Plan Specialist, please call the TCG Advisors Hotline at 512-600-5204 or 800-943-9179 Option 3.

Online help, you can visit www.tcgservices.com/open-enrollment.

#### 457(b) RETIREMENT PLAN

457(b) is an employer-sponsored, voluntary retirement plan that allows you to save money in a pre-tax (Traditional) or after-tax (Roth) account. Contributions to the plan are salary-deducted from your paycheck and automatically deposited into your 457(b) retirement savings account. Early withdrawals from a 457(b) account are not subject to a 10% percent excise tax. The 457(b) plan offers employees personalized guidance and flexible strategies to start the process of saving for retirement. TCG delivers investment advice and plan administration solutions that are transparent and cost-effective. The plan does not have any surrender charges or penalties upon distribution. To get started, simply visit www.tcgservices.com/open-enrollment and establish your account.

### 403(b) RETIREMENT PLAN

403(b) is a voluntary retirement plan that allows you to save money in a pre-tax (Traditional) or after-tax (Roth) account. Contributions to the plan are salary-deducted from your paycheck and automatically deposited into your 403(b) retirement savings account. Early withdrawals from a 403(b) account are subject to a 10% excise tax. TCG is the 403(b) plan administrator—managing your contributions, distributions, and personal updates. Money and investments are held with the vendor of your choice. To get started, visit <a href="www.tcgservices.com/documents">www.tcgservices.com/documents</a> and find your employer's 403(b) Approved Vendor List. Open an account by contacting one of the approved 403(b) providers directly. Next, register your access to your TCG 403(b) administration account and set up salary deferrals at <a href="www.tcgservices.com/enroll">www.tcgservices.com/enroll</a>.

#### **CONTRIBUTION LIMITS**

In 2020, you can contribute 100 percent of your compensation up to \$19,500, whichever is less. If you are age 50 or older, you can contribute up to an additional \$6,500 for a total of \$26,000. You may simultaneously contribute to both 403(b) and 457(b) plans.

# Frequently Asked Questions

### What is Guaranteed Issue (GI)?

Also referred to as Guaranteed Acceptance, or GA, means that you can't be turned down for health reasons. Guaranteed Issue is typically offered during initial enrollment for benefits.

### What is a "pre-existing condition"?

A pre-existing condition is a disease or physical condition for which symptoms existed or medical advice or treatment was recommended or received prior to the effective date of coverage.

#### What is a deductible?

A deductible is what you must pay for your health care before your insurance pays its part. Most plans have deductibles, which start over when your "PLAN YEAR" starts over. For example, if your plan has a \$1,000 deductible and you have surgery that costs \$5,000, you'll pay \$1,000 before your insurer helps you cover your bills.

### What is a co-pay?

A copay is a small, fixed amount—often \$15 or \$20—that you pay for covered services like a prescription or a doctor's visit. Some health plans also apply coinsurance to certain services. With it, you pay a percentage of the total cost of care. For example, if you have a 20% coinsurance, and your doctor's appointment costs \$300, you'd pay \$60. That's if you've met your deductible.

### What does out-of-pocket maximum mean?

Your out-of-pocket maximum is the most you have to pay each year toward your medical services or prescription drugs before your insurance pays for all your care. This amount does not include what you pay in premiums. The Affordable Care Act limits the out-of-pocket maximums. In 2020, for one adult, it can be no more than \$8,200, and for a family, it can be no more than \$16,400.

#### What does EOB mean?

After you've visited your doctor or had a procedure in a hospital, you'll receive an explanation of benefits (EOB) form explaining how much of the charges your insurance will pay. The EOB isn't a bill itself, but it can tell you what your doctor may charge you. Look for the words "due from patient" to see how much you may owe after your insurance pays.

# Before you get certain tests or procedures, do you need permission from your health insurance plan?

If your doctor says you need a test or procedure, your health plan may have to give permission if it's to be covered by insurance. Giving that permission is called pre-authorization. Your plan's overview of benefits lists what care needs to be preauthorized. If you don't get it when it's required, your health plan won't pay its part of the costs.

# **Mobile Phone Applications**

#### Helpful resources in the palm of your hand!

There are plenty of free phone applications that can help you with your health insurance benefits. You can download them on your apple or android device and use them when you need them!



#### BCBSTX App

With the Blue Cross Blue Shield of Texas Mobile App, your health care is always at your fingertips. You can look up the status of a claim, search for a doctor or urgent care facility, view your id card information, find contact information, check deductible and out of pocket amounts and more.



#### CVS/pharmacy

Staying healthy, saving time, spending less. Put the convenience of CVS in your pocket with the free CVS mobile app. Manage and refill prescriptions, save with ExtraCare deals, find a clinic, print photos and family health care information.



#### FF Flex Mobile

For those with the First Financial FSA or HSA- All of your Flexible Spending Account information at the tip of your fingers. With the FF Flex Mobile App you can submit claims, view account balance & history, see claim status, view alerts, upload receipts and documentation and more!



#### MetLife

Securely access your account to find an in-network dentist in your area, view your id card, change your dental office, view your plan and claim summary. Additional products and features will be added with future updates.



#### MyAflac

On the move? Take MyAflac with you. Life- and expenses - don't stop when you have an accident or unexpected illness. Neither does MyAflac Mobile. With this easy-to-use app you can file a claim, upload information needed for claims processing, view secured messages and policy details and stay in touch-wherever you are.



#### TRS Health App

TRS-ActiveCare Health care benefits right at your fingertips. The TRS Health App helps you easily navigate everything you need in one place. Easily contact an Aetna Concierge, find a local pharmacy, or even talk to a Doctor with the Teledoc services provided through TRS.



#### **United Healthcare App**

Managing health care on the go just got easier with the UnitedHealthcare app! Using the healthSafe ID you can securely access your app to find in-network eye doctors, see reviews and ratings for eye doctors, share your insurance card, and more.





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#### **DUSTY GALLAGHER, ACCOUNT MANAGER**

OFFICE: 800-883-0007 | EMAIL: DUSTY.GALLAGHER@FFGA.COM

#### **LISD BENEFITS**

Lewisville ISD 469-948-8104 | EMAIL: benefits@lisd.net

Benefit	Vendor	Phone	Website
Medical	TRS ActiveCare	866-355-5999	www.bcbstx.com/trsactivecare
Dental	MetLife	800-942-0854	www.metlife.com
Vision	United Healthcare	800-638-3120	www.myuhcvision.com
Disability	The Standard	800-247-6888 or 855-757-4717	www.standard.com
Medical Transport	MASA	800-423-3226	www.masamts.com
Critical Illness	MetLife	800-942-0854	www.metlife.com
Hospital Indemnity	Aflac	800-992-3522	www.aflac.com
Individual Permanent Life	Texas Life	800-283-9233	www.texaslife.com
Group Life	Unum	800-421-0344	www.unum.com
Legal Plan	LegalEASE	800-248-9000	www.legaleaseplan.com
457 and 403(b) Retirement Plans	TCG Administrators	800-943-9179	www.tcgservices.com
Flexible Spending Accounts (FSA)	First Financial	866-853-3539	www.ffga.com
Health Savings Accounts (HSA)	First Financial	866-853-3539	www.ffga.com

# LISD benefit plan rates PLAN YEAR Sept. 1, 2020 - Aug. 31, 2021

# lisd.net/benefits

### For complete plan summaries

TRS n	nedical ins	urance						
			Monthly pay rate	s			Before you deci	de
Tier		ActiveCare Primary	ActiveCare HD	ActiveCare Primary +	ActiveCare 2*	Scott & White HMO	The NEW TRS Active	
Employee	e only	\$60.00	\$71.00	\$156.00	\$579.00	\$193.10	and Primary+ plans are State Network Only, so there are no out of network benefits. Both require you to provide a Primary Care	
Employe	e + spouse	\$701.00	\$732.00	\$876.00	\$1,834.00	\$994.06		
Employe	e + children	\$323.00	\$343.00	\$462.00	\$1,021.00	\$511.50	Physician when you e	nroll. Look up
Employe	e + family	\$908.00	\$945.00	\$1,195.00	\$2,234.00	\$1,085.86	TRS-ActiveCare Primary + Plan provide	
. ,	,		Semi-monthly pay ra	tes - Facility Services		. ,	bcbstx.com/trsactiveca	
Employee	e only	\$30.00	\$35.50	\$78.00	\$289.50	Find a Doctor tab.  \$96.55  Search our online Provider		vider
	e + spouse	\$350.50	\$366.00	\$438.00	\$917.00	\$497.03	Finderdirectory to see doctors and facilities a	
. ,	e + children	\$161.50	\$171.50	\$231.00	\$510.50	\$255.75	network. If you need h TRS medical plans, pl	
	e + family	\$454.00	\$472.50	\$597.50	\$1,117.00	\$542.78	Personal Health Guide	
Lilipioyo	o · lamily	,	·	·	. ,	φ042.70	1-886-355-5999	
			rates - Child Nutrition,	Extended School Day, \$98.53	-	\$121.96	Also, there are no out-	
Employee		\$37.89	, .	,	\$365.68	,	You must choose from network of doctors loca	a limited
	e + spouse	\$442.74	\$462.32	\$553.26	\$1,158.32	\$627.83	Dallas-Fort Worth area	a. Look up
' '	e + children	\$204.00	\$216.63	\$291.79	\$644.84	\$323.05	Scott & White HMO pro trs.swhp.org	oviders at
Employee	e + family	\$573.47	\$596.84	\$754.74	\$1,410.95	\$685.80	before chosing this health plan.	
Poole	d rates per	month	*Active	Care 2 is a closed plan: I	No New Enrollments -	10% increase this year	To be eligible for poo	
Employe	e + family	ActiveCare Primary \$573.00	ActiveCare HD \$610.00	ActiveCare Primary + \$860.00	ActiveCare 2 \$1.899.00	Scott & White HMO  \$750.56  both employee and spouse must work for LISD.		
	plan -	ψο: σισσ	ψο το.σο	ψουσ.σο	ψ1,000.00	,	LEmergent Trans	nort
	Healthcare Vis	sion	Monthly pay rates	Semi-monthly	19 pay rates			
Employe	ee only		\$8.38	\$4.19	\$5.29	Employee + family	ates Semi-Monthly	19 pay rates
	ee + spouse		\$15.33	\$7.66	\$9.68	* 1amily \$14.00	\$7.00	\$8.85
	ee + children		\$16.06	\$8.03	\$10.14	Flexible spendir	ng accounts	
	ee + family		\$24.78	\$12.39	\$15.65			
Hosp	ital Indemn	ity -					d in a Flexible Spend limited to how much	
	Hospital Inde	nnity	Monthly pay rates	Semi-monthly	19 pay rates	you can set aside		i income
Employe	e + spouse		\$21.24 \$42.56	\$10.62 \$21.28	\$13.41 \$26.88	Health care reimbu	rsement limit	¢0.750
	e + children		\$34.26	\$17.13	\$20.66	Dependent care rei		\$2,750 \$5.000
Employe	e + family		\$55.58	\$27.79	\$35.10	Health savings a		φ5,000
New -	· MetLife Cr	itical Illness				Ticular savings of	100041113	
Age	Sample ra	tes shown are for \$10,000 Iment system for other age bands	Monthly pay rates	Semi-monthly	19 pay rates		olled in TRS-Active (	
	Employee only		\$6.20	\$3.10	\$3.92	aside each year.	how much income	you can set
<29	Employee + sp Employee + ch		\$12.60 \$7.90	\$6.30 \$3.95	\$7.96 \$4.99	,		
	Employee + ci		\$14.30	\$3.93 \$7.15	\$9.03	Employee only		\$3,550
	Employee enly	,	\$8.50	\$4.25	\$5.37	Age 55 and older		\$4,500
	Employee only		040.40	\$9.20	\$11.62	Family		\$7,100
30-39	Employee + sp		\$18.40 \$10.20		¢c 11	,		
30-39		nildren	\$10.20	\$5.10	\$6.44 \$12.64	Age 55 and older		\$8,000
30-39	Employee + sp Employee + cl	nildren mily	\$10.20 \$20.01 \$14.80		\$6.44 \$12.64 \$9.35			
30-39	Employee + sp Employee + cl Employee + fa	nildren mily / pouse	\$10.20 \$20.01	\$5.10 \$10.01	\$12.64			



REAL

INNOVATION.

LIMITLESS

OPPORTUNITY.

Dental plans			
MetLife Standard Dental maximum of \$1,500 per insured person	Monthly pay rates	Semi-monthly	19 pay rates
Employee only	\$45.42	\$22.71	\$28.69
Employee + spouse	\$90.84	\$45.42	\$57.37
Employee + children	\$92.66	\$46.33	\$58.52
Employee + family	\$138.08	\$69.04	\$87.21
MetLife Basic Dental maximum of \$1,000 per insured person			
Employee only	\$23.90	\$11.95	\$15.09
Employee + spouse	\$47.78	\$23.89	\$30.18
Employee + children	\$48.74	\$24.37	\$30.78
Employee + family	\$72.64	\$36.32	\$45.88
UNUM Voluntary Life	INUM Voluntary Life Standard long-term disability		

UNUM Voluntary Life		Standard long-term disability		
New HIres within 31 days of Hire - Employee guarantee issue: \$150,000 or 5x salary Spouse guarantee issue: \$25,000 Child guarantee issue: \$10,000 Age Rates per month per \$1,000		Guarantee issue open enrollment every year Waiver of elimination period upon hospitalization with 30 day elimination period or less Pregnancy covered same as any illness - 12 month pre-existing limitation		
Under 30	\$.036	Can elect up to 66 2/3% of salary to a max of \$8,000		
30-34	\$.045	Disch so with an object to the confe		
35-39	\$.063	Plan A - pays sickness & injury to age 65		
40-44	\$.099	Elimination (waiting)	Rate per month per \$100 of coverage	
45-49	\$.171	14 day	\$3.32	
50-54	\$.297	30 day	\$2.82	
55-59	\$.423	60 day	\$1.82	
60-64	\$.504	90 day	\$1.58	
65-69	\$.900	Plan B - pays sickness for 5 years & injury to age 65		
70-74	\$1.539	Elimination (waiting)	Rate per month per	
75+	\$3.087	period	\$100 of coverage	
UNUM Child Life		14 day	\$2.93	
Coverage amount	Child rates per month	30 day	\$2.52	
\$2,000	\$.50	60 day	\$1.63	
\$4,000	\$.99	90 day	\$1.41	
\$6,000	\$1.49	Legalease legal plan		
\$8,000	\$1.98			
\$10,000	\$2.48	Monthly	\$15.18	
UNUM Voluntary AD&D		Semi-monthly	\$7.59	
Rate per month per \$10,000 \$.03		19-pay	\$9.59	
Texas Life - Permanent Portable Life				
Employees Express Issue coverage up to \$300,000 coverage; varies based on employee				

age Spousal Express issue Coverage up to \$50,000; varies based on spouse age

All new and continuing members, or if you used any SLB days during the 2020-21year

Sick Leave Bank

Benefit	Phone & Web Site
Medical	866-355-5999
www.bc	bstx.com/trsactivecare
Dental	800-942-0854
	www.metlife.com
Vision	800-638-3120
:	www.myuhcvision.com
Disability	800-247-6888 or
,	855-757-4717
	www.standard.com
Medical Transport	800-423-3226
	www.masamts.com
Critical Illness	800-942-0854
	www.metlife.com
Hospital Indemnity	800-992-3522
,	www.aflac.com
Individual	800-283-9233
Permanent Life	www.texaslife.com
Group Term Life	800-421-0344
Group remittile	
	www.unum.com
Legal Plan	800-248-9000
<u>w</u>	ww.legaleaseplan.com
457 and 403(b)	800-943-9179
Retirement Plans	www.tcgservices.com
Flexible Spending	866-853-3539
Accounts (FSA)	www.ffga.com
Health Savings Accounts	866-853-3539

www.ffga.com

(HSA)

1 local day