

# CONTACTS

If you have any questions regarding your 2019 – 2020 benefit elections, please contact Professional Enrollment Concepts' Benefits Services Center. You may also contact the providers at their given contact methods below.



# BENEFITS SERVICES CENTER (866) 332-1287

Monday – Friday: 8:00am – 7:00pm CST Saturday: 9:00am – 3:00pm CST



# **BROKER**

FBMC Benefits Management (800) 872-0345

# **MEDICAL**

Aetna-TRS (800) 222-9205 www.trsactivecareaetna.com

# DENTAL

Humana Group: #673256 (800) 233-4013 www.humana.com

# **VISION**

Superior Vision Group: #327500 (800) 507-3800 www.superiorvision.com

# **ACCIDENT**

Guardian Group: #552019 (800) 541-7846 www.guardiananytime.com

# HSA / FSA / COBRA

Discovery Benefits Group: #32649 (866) 451-3399 www.discoverybenefits.com

# BASIC LIFE / AD&D VOLUNTARY LIFE DISABILITY

OneAmerica Group: #618696 (800) 553-5318 www.employeebenefits.aul.com

# **HOSPITAL INDEMNITY**

MetLife Group: #174572 (800) 438-6388 www.metlife.com

# UNIVERSAL LIFE CRITICAL ILLNESS

Trustmark (866) 332-1287 www.trustmarksolutions.com

## **MASA**

MASA Global Emergency Assis.: (800) 643-9023 Customer Serv.:(800) 423-3226 www.masaglobal.com

# LEGALSHIELD IDSHIELD

LegalShield (903) 533-9123 www.legalshieldusa.com

# CONTENTS

Introduction4
Eligibility5
Medical Insurance6
Health Savings Account9
Flexible Spending Account10
MASA12
Dental13
Vision14
Life / AD&D15
EAP16
Travel Assistance17
Universal Life with Long-Term Care18
Short-Term Disability19
Long-Term Disability19
Hospital Indemnity20
Critical HealthEvents21
Accident Insurance22
IDShield Plus & LegalShield23

# INTRODUCTION

**Longview ISD** will be utilizing Professional Enrollment Concepts' (PEC) services for our benefit communication and enrollment this year. PEC's Benefit Counselors will provide you with a detailed explanation of your entire benefit program. They will review your benefits with you on an individual, confidential basis. They will also be able to discuss any personal situations you may have that could potentially impact your benefit decision.

Each year, we strive to offer comprehensive and competitive benefit plans to our employees. In the following pages, you will find a summary of our **benefit plan for September 1 to August 31**. Please read this Guidebook carefully as you prepare to make your elections for the 2019 – 2020 Plan Year.

This Benefits Guidebook describes the highlights of Longview ISD's benefits program in non-technical language. Your specific rights to benefits under the plan are governed solely, and in every respect, by the official plan documents and not the information in this guidebook. If there is any discrepancy between the description of the program elements as contained in this Benefits Guidebook and the official plan documents, the language in the official plan documents shall prevail as accurate. Please refer to the plan-specific documents published by each of the respective carriers for detailed plan information. Any and all elements of Longview ISD's benefits program may be modified in the future, at any time, to meet Internal Revenue Service rules or otherwise as decided by Longview ISD.

# **How to Enroll**

To enroll in your benefits as a new hire or to make changes during open enrollment call PEC at (866) 332-1287 to speak with a Benefit Counselor.

Before you speak with a Benefit Counselor, please have the following information ready: dependents' names, birth dates, social security numbers, addresses, and phone numbers.



Benefits Services Center (866) 332-1287

Monday – Friday: 8:00am – 7:00pm CST

Saturday: 9:00am – 3:00pm CST



# **ELIGIBILITY**

**HIPAA** (Health Insurance Portability and Accountability Act) requires that we comply with certain privacy issues in order for us to assist you in the future with any claims issues, we will require written authorization from you on a carrier specific form.

# **Eligibility**

Longview ISD provides Full-Time Team Members who work a minimum of 20 hours per week, and are at least age 18 the opportunity to purchase the following benefits for you and your eligible dependents: Medical, Dental, Vision, Basic and Voluntary Life, Accidental Death & Dismemberment (AD&D), Voluntary Short Term Disability (VSTD) and Voluntary Long Term Disability (VLTD). All part-time employees who are actively at work and are scheduled to work at least 5 hours weekly are eligible for the Basic Life and AD &D benefit.

# **Benefit Coverage**

Benefits are available the first of the month following your date of hire.

# **Pre-Existing Conditions**

Pre-existing conditions may apply to some lines of coverage. Pre-existing condition exclusions on enrollees of any age no longer apply to the medical plans.

# **Termination of Coverage**

If you terminate your employment with Longview ISD all of your benefits will terminate the last day of the month employed.

# Important!

Remember that you are "locked in" to your benefit election for the next plan year unless you have a change in family status. Some examples of this would include:

- Marriage or Divorce
- Birth or Adoption
- Death of a Dependent
- Loss or Gain of Spouse's Employment
- CHIPRA (Children's Health Insurance Program Reauthorization Act)

Changes may **NOT** be made during the year UNLESS there is a change in family status! Coverage will begin on the first of the month following the date the event occurs provided the completed enrollment form and applicable supporting documents are received by TR within 30 days of the event (except for CHIPRA—60 days to notify TR).



# MEDICAL INSURANCE

Nobody plans on getting sick or hurt, but most people will need Medical Care at some point in their lives.

Longview ISD offers three choices for health insurance. These plans have different levels of copays, deductibles, and out-of-pocket maximums. To make an informed decision, please continue reading for brief descriptions of your coverage options.

The Medical program, administered by Aetna-TRS, provides the framework for your health and well-being. To better meet the varying needs of our employees, Longview ISD offers the following Medical plans.

# TRS-ActiveCare 2019–20 what's new & what's changing



# **TRS-ActiveCare Changes**

Medical Coverage	TRS-ActiveCare 1-HI	)	TRS-ActiveCare Sele ActiveCare Select Wh		TRS-ActiveCare 2 Note: This is a closed plate presently enrolled in TRS to remain in this plan for enrollments will be allo	-ActiveCare 2 are eligible 2019-20. <b>No new</b>
	2018 — 19 Plan Year	2019 — 20 Plan Year	2018 — 19 Plan Year	2019 — 20 Plan Year	2018 — 19 Plan Year	2019 — 20 Plan Year
In-network out-of-pocket max Individual/Family	\$6,650/\$13,300	\$6,750/\$13,500	\$7,350/\$14,700	\$7,900/\$15,800	\$7,350/\$14,700	\$7,900/\$15,800
Out-of-network out-of-pocket max Individual/Family	\$13,300/\$26,600	\$20,250/\$40,500	N/A	N/A	\$14,700/\$29,400	\$23,700/\$47,400
Out-of-network inpatient hospital	You pay 40% after deductible	Plan pays up to \$500 per day cap of covered charges after deductible; you pay the excess over the \$500 per day cap	N/A	N/A	You pay \$150 copay per day plus 40% after deductible (\$750 maximum copay per admission; \$2,250 maximum copay per plan year)	over the \$500 per
Prescription Coverage   Generic drugs						
Retail copay/coinsurance (up to 31-days supply)	You pay 20% after deductible, except for certain generic preventive drugs that are covered at 100%	No change	You pay \$20, no deductible	You pay \$15, no deductible	You pay \$20, no deductible	No change
Retail maintenance copay/coinsurance (after 1st fill; up to 31-day supply)	You pay 20% after deductible	No change	You pay \$35, no deductible	You pay \$30, no deductible	You pay \$35, no deductible	No change
Prescription Coverage   Preferred brand	d drugs					
Retail copay/coinsurance (up to 31-days supply)	You pay 20% after deductible	You pay 25% after deductible	You pay \$40 after drug deductible	You pay 25% after drug deductible (min. \$40*; max. \$80)	You pay \$40 after drug deductible	You pay 25% after drug deductible (min. \$40*; max. \$80)
Retail maintenance copay/coinsurance (after 1st fill; up to 31-day supply)	You pay 20% after deductible	You pay 25% after deductible	You pay \$60 after drug deductible	You pay 25% after drug deductible (min. \$60*; max. \$120)	You pay \$60 after drug deductible	You pay 25% after drug deductible (min. \$60*; max. \$120)
Mail order & Retail Plus copay/coinsurance (60 to 90-day supply)	You pay 20% after deductible	You pay 25% after deductible	You pay \$105 after drug deductible	You pay 25% after drug deductible (min. \$105*; max. \$210)	You pay \$105 after drug deductible	You pay 25% after drug deductible (min. \$105*; max. \$210)
Prescription Coverage   Non-preferred	brand drugs					
Retail copay/coinsurance (up to 31-days supply)	You pay 50% after deductible	No change	You pay 50% after drug deductible	No change	You pay 50% after drug deductible (min. \$65*; max. \$130)	You pay 50% after drug deductible (min. \$100*; max. \$200)
Retail maintenance copay/coinsurance (after 1st fill; up to 31-day supply)	You pay 50% after deductible	No change	You pay 50% after drug deductible	No change	You pay 50% after drug deductible (min. \$90*; max. \$180)	You pay 50% after drug deductible (min. \$105*; max. \$210)
Mail order & Retail Plus copay/coinsurance (60 to 90-day supply)	You pay 50% after deductible	No change	You pay 50% after drug deductible	No change	You pay 50% after drug deductible (min. \$180*; max. \$360)	You pay 50% after drug deductible (min. \$215*; max. \$430)

<sup>\*</sup>If the cost of the drug is less than the minimum, you will pay the cost of the drug

# **Medical Premiums**

	Per Paycheck Deductions: ActiveCare 1-HD		
	Monthly	Custodian	Café / Bus
<b>Employee Only</b>	\$153.00	\$76.5	\$102.00
Employee + Spouse	\$841.00	\$420.50	\$560.67
Employee + Child(ren)	\$497.00	\$248.50	\$331.33
Family	\$1,190.00	\$595.00	\$793.33

	Per Paycheck Deductions: ActiveCare Select		
	Monthly	Custodian	Café / Bus
<b>Employee Only</b>	\$331.00	\$165.50	\$220.67
Employee + Spouse	\$1,142.00	\$571.00	\$761.33
Employee + Child(ren)	\$677.00	\$338.50	\$451.33
Family	\$1,493.00	\$746.50	\$995.33

	Per Paycheck Deductions: ActiveCare 2		
	Monthly	Custodian	Café / Bus
Employee Only	\$627.00	\$313.50	\$418.00
Employee + Spouse	\$1,795.00	\$897.50	\$1,196.67
Employee + Child(ren)	\$1,042.00	\$521.00	\$694.67
Family	\$2,164.00	\$1,082.00	\$1,442.67





# THE FASTEST-GROWING HSA ON THE MARKET



ONE ONLINE ACCOUNT, ONE
MOBILE APP AND ONE DEBIT
CARD FOR ALL OF YOUR
BENEFITS



ABILITY TO CHECK
BALANCE AND REQUEST
DISTRIBUTIONS OR
CONTRIBUTIONS ON THE GO



A LOW INVESTMENT THRESHOLD AND ENHANCED INVESTMENT EXPERIENCE



NO SURPRISE
PARTICIPANT FEES



TOOLS AND RESOURCES FOR SPENDERS, SAVERS AND INVESTORS

# **Health Savings Account Overview**

A Health Savings Account (HSA) lets you make the most of your earnings by setting aside tax-free dollars for medical, dental and vision expenses. HSAs are individually owned and provide a triple-tax advantage. You can deposit money tax-free, it will grow tax-free until you use it, and your withdrawals are tax-free when used on eligible expenses.

## **Eligibility**

You must be enrolled in a High-Deductible Health Plan (HDHP) to get an HSA, which can be used to pay for out-of-pocket expenses until you've met your deductible, at which point your health plan kicks in. While you can't be enrolled in a general purpose Flexible Spending Account and an HSA at the same time, you can pair an HSA with a Limited FSA.

#### **Spending**

The HSA covers qualifying medical, dental and vision expenses. To find out which specific expenses are eligible, view our searchable eligibility list at <a href="https://www.biscoveryBenefits.com/eligibleexpenses">www.biscoveryBenefits.com/eligibleexpenses</a>.

Discovery Benefits makes it easy to access your HSA funds with:

The Discovery Benefits debit card, which

can be used to pay for eligible expenses, so you'll reduce your out-ofpocket costs.

· Our mobile



app, which provides a fast and secure way to check your balance, track expenses and move funds between your HSA and your bank account.

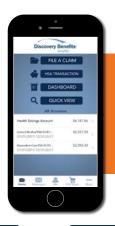
Saving

To take the guesswork out of election decisions, we offer a free savings calculator to help you decide how much to set aside. Calculate your savings today at www.DiscoveryBenefits.com/hsacalculator.

#### Investing

We make it easy to invest by offering a low HSA investment threshold of \$1,000. Once your HSA reaches that amount, you're able to invest in interest-bearing accounts or mutual funds without ever leaving your online account. View your investment options at <a href="https://www.DiscoveryBenefits.com/hsainvestments">www.DiscoveryBenefits.com/hsainvestments</a>.

We also offer an Investment Guidance Tool on your online account to help you determine which investments are right for you. And, since all of your HSA dollars carry over from year to year, HSAs are a valuable long-term investment option.



DOWNLOAD THE APP FOR FREE ON APPLE AND ANDROID DEVICES

















www.DiscoveryBenefits.com

01/23/18



# **FLEXIBLE SPENDING ACCOUNT (FSA)**

**EMPLOYEE HANDOUT** 

# AN FSA THAT SIMPLIFIES SAVINGS



ONE ONLINE ACCOUNT, ONE
MOBILE APP AND ONE DEBIT
CARD FOR ALL OF YOUR
BENEFITS



AVERAGE DEBIT CARD AUTO-SUBSTANTIATION RATE OF MORE THAN 85 PERCENT



EASY DOCUMENTATION UPLOADING USING OUR MOBILE APP



THOUSANDS OF ELIGIBLE EXPENSES FOR PURCHASE AT THE FSA STORE

# Flexible Spending Account Overview

A Flexible Spending Account (FSA) allows you to budget and save for qualified medical expenses incurred over the course of your plan year. Dollars invested in an FSA are tax-free, and the entire election amount is available on the first day of the plan year. That makes an FSA a great tool for saving money, especially when big expenses are anticipated.

## Types of FSAs

## **Medical FSA**

Pair a traditional health plan with a Medical FSA, which covers eligible medical, dental and vision expenses.

## Limited FSA

If you have a High-Deductible Health Plan and a Health Savings Account, you're eligible to enroll in a Limited FSA alongside your HSA to maximize savings. These funds can be used for qualifying dental and vision expenses.

## **Dependent Care Account (DCA)**

A DCA allows you to put money aside for dependent care for children up to age 13, a disabled dependent of any age or a disabled spouse.

You may receive reimbursement up to the current balance in your account at the time the request is made. To be eligible for a DCA, you and your spouse (if applicable) must work, be looking for work or be full-time students.



#### **Using Funds**

For easy access to your FSA funds, you can swipe your Discovery Benefits debit card and avoid out-of-pocket costs. If you use your card at a provider with an Inventory Information Approval System (IIAS), the expense will automatically be approved at the point of sale. If the card is swiped at a merchant that meets the IRS' 90% rule, you may need to provide documentation to show the expense is eligible.

### **Eligible Expenses**

Common eligible expenses for a Medical FSA are prescriptions, hearing aids, orthopedic goods, doctor visits and dentist visits, while a Limited FSA is limited to dental and vision expenses. A DCA covers expenses such as work-related daycare and elderly care costs. To find out which specific expenses are eligible, view our searchable eligibility list at

www.DiscoveryBenefits.com/eligibleexpenses.

#### **Substantiation**

The IRS requires FSA participants to provide documentation (e.g. an Explanation of Benefits) to show that an expense is FSA-eligible. You can easily upload documentation to a claim by logging in to your online account or taking a photo of your documentation with your phone's camera and uploading it through the Discovery Benefits mobile app.

















www.DiscoveryBenefits.com

01/23/18

# **HOW IT WORKS**

## **MEDICAL FSA**



Pair a traditional health plan with a Medical FSA, which covers eligible medical, dental and vision expenses. The medical expenses must primarily alleviate or prevent a physical or mental defect or illness. **Note:** If you're enrolled in a Health Savings Account (HSA), you're not eligible for a Medical FSA.

Examples of eligible expenses include doctor visits, physical therapy, speech therapy, surgeries, hearing aids, ambulance costs, acupuncture and all Limited FSA eligible expenses.

# 66

# **LIMITED FSA**

If you're participating in a High-Deductible Health Plan and an HSA, you're eligible to enroll in a Limited FSA alongside your HSA to maximize savings. These funds can be used for qualifying dental and vision expenses.

Examples of eligible expenses include dental exams, vision exams, prescription glasses, laser-eye surgeries, contact lenses, orthodontics and dentures.



# **DEPENDENT CARE ACCOUNT (DCA)**

A DCA allows you to put money aside for dependent care for children up to age I3, a disabled dependent of any age or a disabled spouse. To be eligible for a DCA, you and your spouse (if applicable) must work, be looking for work or be full-time students. You can be enrolled in both an HSA and DCA.

Examples of eligible expenses include preschool and after-school care, daycare providers and summer day camps.

Only those enrolled in an HDHP are eligible to contribute to an HSA, while those with traditional health plans can sign up for a Medical FSA. However, HSA participants can maximize their tax-free savings by combining their HSA with a Limited FSA, which covers dental and vision expenses.

	HSA	FSA
Owner	Employee-owned	Employer-owned
Eligibility	Must be enrolled in an HDHP	Anyone is eligible, although you can't be enrolled in both an HSA and a Medical FSA
Carryover	All funds can carry over from year to year	Depending on your employer's plan, you may be eligible to carry over up to \$500 per year. Beyond that, any unused funds are forfeit at the end of the plan year
Portability	The HSA is portable, so the funds in the account stay with you wherever you go	FSAs are employer-owned accounts, so the funds are forfeit if you change jobs
Investment Options	You can invest HSA funds	You cannot invest FSA funds
Maximum Contributions (2019)	Self: \$3,500 Self (age 55+): \$4,500 Family: \$7,000 Family (age 55+): \$8,000	FSA Maximum Reduction: \$2,700 DCFSA Maximum Reduction (single): \$5,000 DCFSA Maximum Reduction (joint): \$5,000 DCFSA Maximum Reduction (married filling separate): \$2,500
Substantiation	You will want to keep all documentation in case you are ever subject of an IRS audit	The IRS requires substantiation for some FSA expenses to show the eligibility of the expense
Availability of Funds	Only the funds that have been contributed are available to cover expenses	All funds for the plan year are available on the first day







## **EMERGENCY TRANSPORTATION COSTS**

MASA MTS is here to protect its members and their families from the shortcomings of health insurance coverage by providing them with comprehensive financial protection for lifesaving emergency transportation services, both at home and away from home.

Many American employers and employees believe that their health insurance policies cover most, if notall ambulance expenses. The truth is, they DO NOT!

Even after insurance payments for emergency transportation, you could receive a bill up to \$5,000 for ground ambulance and as high as \$70,000 for air ambulance. The financial burdens for medical transportation costs are very real.



# **HOW MASA IS DIFFERENT**

Across the US there are thousands of ground ambulance providers and hundreds of air ambulance carriers. ONLY MASA offers comprehensive coverage since MASA is a PAYER and not a PROVIDER!

ONLY MASA provides over 1.6 million members with coverage for BOTH ground ambulance and air ambulance transport, REGARDLESS of which provider transports them.

Members are covered ANYWHERE in all 50 states and Canada!

Additionally, MASA provides a repatriation benefit: if a member is hospitalized more than 100 miles from home, MASA can arrange and pay to have them transported to a hospital closer to their place of residence.

Please note: Family coverage includes dependent children up to the age of 21 and dependent children who are student up to the age of 23.



# Any Ground. Any Air. Anywhere.™

# **OUR BENEFITS**

Benefit *	Emergent Plus \$14/Month	Emergent Ground \$9/Month
Emergent Ground Transportation	U.S./Canada	U.S./Canada
Emergent Air Transportation	U.S./Canada	
Non-Emergent Air Transportation	U.S./Canada	
Repatriation	U.S./Canada	





A MASA Membership prepares you for the unexpected and gives you the peace of mind to access vital emergency medical transportation no matter where you live, for a minimal monthly fee.

- One low fee for the entire family
- NO deductibles
- NO health questions
- Easy claims process

# For more information, please contact

Your Broker or MASA Representative

**EVERY FAMILY DESERVES A MASA MEMBERSHIP** 



# DENTAL

Humana gives you the freedom to choose whether you would like to visit a participating dentist or an out-of-network dentist. There are considerable cost savings when using a dentist who is in the Humana Network. The following is a summary of the major plan provisions.

	Dental Traditional Plus 09		
	In-Network	Out-of-Network <sup>1</sup>	
Annual Deductible	\$50 indv.; \$150 family	\$50 indv.; \$150 family	
Annual Maximum	\$1,000	\$1,000	
Preventive Services oral exams, cleanings, X-rays sealants, fluoride treatments	100%	100%	
<b>Basic Services</b> fillings, periodontal maintenance, space maintainers, basic extractions	80% after deductible	80% after deductible	
Major Services crowns, dentures, bridges, root canals, extractions	50% after deductible	50% after deductible	
Orthodontia	50% (up to \$1,500 lifetime max)	50% (up to \$1,500 lifetime max)	

<sup>1.</sup> Members are responsible for coinsurance, co-payments, and any charges above the allowable amounts.

	Monthly Deductions
<b>Employee Only</b>	\$31.04
Employee + Spouse	\$61.00
Employee + Child(ren)	\$66.84
Family	\$99.90







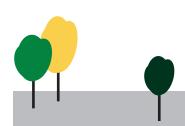
# **VISION**

Your vision health is an important part of complete wellness. Superior Vision is pleased to present to you vision benefits designed to give you and your covered family members the care, value, and service to help maintain good vision and overall health. This plan encourages yearly exams along with the frames and lenses you want.

	Vision PPO		
	In-Network	Out-of-Network	
Copays	-		
Exam	\$	10	
Materials	\$25		
Exams (yearly)	Covered in full	\$35 allowance	
Lenses (yearly)			
Single Vision		\$25 allowance	
Bifocals	Covered in full	\$40 allowance	
Trifocals		\$45 allowance	
Lenticular		\$80 allowance	
Frames (once every 2 years)	\$125 allowance	\$70 allowance	
Contacts <sup>1</sup>			
Non-Elective	Covered in full	\$150 allowance	
Elective	\$150 allowance	\$80 allowance	
Lasik Correction <sup>2</sup>	\$200 al	lowance	

- 1. Contact lenses are in lieu of eyeglasses and frames
- 2. Lasik Vision Correction is in lieu of eyewear benefit

	Monthly Deductions
Employee Only	\$8.33
Employee + Spouse	\$12.49
Employee + Child(ren)	\$14.39
Family	\$21.58







# LIFE / AD&D

You do everything you can for your loved ones—not because you have to but because you want to. Whether you're looking for coverage for a specific period or a lifetime, with the right Life / AD&D Insurance coverage, you can rest knowing your loved ones will be able to live out their dreams-no matter what the future holds.

# **BASIC TERM**

Longview ISD provides all full-time and part-time employees who are actively at work and are scheduled to work at least 5 hours weekly are eligible for Basic Life and Accidental Death and Dismemberment (AD&D) insurance (coverage is based on class category). This \$10,000 coverage is at no charge to you and is active for the duration of your employment.

Please note: The benefit reduces to 65% at age 65, to 40% at age 70, and to 25% at age 75.



# **Employee**

Coverage: Increments of \$10,000 to a maximum of the lesser of 5 times pay or \$500,000.

Minimum Benefit: \$10,000 **Guaranteed Issuance: \$150.000** 



# **Spouse**

**Coverage:** Increments of \$5,000 to a maximum of \$100,000 (not to exceed 50% of employee's Voluntary Life Benefit) Minimum Benefit: \$5,000 **Guaranteed Issuance: \$25,000** 



# Child - 6 months to age 26

Minimum Benefit: \$5,000 **Guaranteed Issuance:** \$10,000

Limiting Age: 26

# **OLUNTARY**

With One America's Voluntary Life and AD&D Insurance, Longview ISD gives you the opportunity to buy valuable life insurance coverage for yourself, your spouse, and your dependent children — all at affordable group rates.

Monthly Deductions (per \$10,000)				
Age	Employee	Spouse		
0-19	\$0.64	\$0.73		
20-24	\$0.64	\$0.73		
25-29	\$0.64	\$0.73		
30-34	\$0.72	\$0.76		
35-39	\$0.80	\$0.89		
40-44	\$1.20	\$1.23		
45-49	\$1.60	\$2.01		
50-54	\$2.50	\$3.57		
55-59	\$4.32	\$6.15		
60-64	\$6.56	\$13.73		
65-69	\$10.88	\$23.91		
70-74	\$17.20	\$41.76		
75+	\$17.20	\$41.76		

**Child Coverage: Monthly Deductions** 

\$10,000

Please speak with a Benefits Counselor

for personalized rates.

\$1.99

If employee enrolls in \$10k this year only, they

can add an additional

I step increment of \$10k each year with no Medical questions.



# Call Your ComPsych® GuidanceResources® program anytime for confidential assistance.

Call: 855.387.9727

Go online: guidanceresources.com

TDD: 800.697.0353

Your company Web ID: **ONEAMERICA3** 

Personal issues, planning for life events or simply managing daily life can affect your work, health and family. Your GuidanceResources program provides support, resources and information for personal and work-life issues. The program is company-sponsored, confidential and provided at no charge to you and your dependents. This flyer explains how GuidanceResources can help you and your family deal with everyday challenges.

# **Confidential Counseling**

### 3 Session Plan

This no-cost counseling service helps you address stress, relationship and other personal issues you and your family may face. It is staffed by GuidanceConsultants<sup>™</sup>—highly trained master's and doctoral level clinicians who will listen to your concerns and quickly refer you to in-person counseling (up to 3 sessions per issue per year) and other resources for:

- > Stress, anxiety and depression
- Relationship/marital conflicts
- > Problems with children
- > lob pressures
- > Grief and loss
- Substance abuse

# **Financial Information and Resources**

# Discover your best options.

Speak by phone with our Certified Public Accountants and Certified Financial Planners on a wide range of financial issues, including:

- > Getting out of debt
- > Credit card or loan problems
- > Tax questions

- > Retirement planning
- > Estate planning
- > Saving for college

# **Legal Support and Resources**

## Expert info when you need it.

Talk to our attorneys by phone. If you require representation, we'll refer you to a qualified attorney in your area for a free 30-minute consultation with a 25% reduction in customary legal fees thereafter. Call about:

- > Divorce and family law
- Debt and bankruptcy
- Landlord/tenant issues
- > Civil and criminal actions
- Contracts

#### Real estate transactions

# **Work-Life Solutions**

# Delegate your "to-do" list.

Our Work-Life specialists will do the research for you, providing qualified referrals and customized resources for:

- > Child and elder care
- Moving and relocation
- Making major purchases
- College planning
- > Pet care
- > Home repair

OneAmerica is the marketing name for American United Life Insurance Company(R) (AUL). AUL markets ComPsych services. ComPsych Corporation is not an affiliate of AUL and is not a OneAmerica company.

Copyright © 2015 ComPsych Corporation, All rights reserved.

To view the ComPsych HIPAA privacy notice, please go to www.guidanceresources.com/privacy.

# GuidanceResources® Online

Knowledge at your fingertips.

GuidanceResources Online is your one stop for expert information on the issues that matter most to you...relationships, work, school, children, wellness, legal, financial, free time and more.

- > Timely articles, HelpSheets<sup>sM</sup>, tutorials, streaming videos and self-assessments
- > "Ask the Expert" personal responses to your questions
- > Child care, elder care, attorney and financial planner searches

# **Free Online Will Preparation**

Get peace of mind.

EstateGuidance® lets you quickly and easily write a will on your computer. Just go to www.guidanceresources.com and click on the EstateGuidance link. Follow the prompts to create and download your will at no cost. Online support and instructions for executing and filing your will are included. You can:

- > Name an executor to manage your estate
- > Choose a guardian for your children
- > Specify your wishes for your property
- > Provide funeral and burial instructions

Just call or click to access your services.



Your ComPsych® GuidanceResources® Program

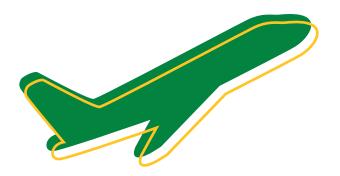
**CALL ANYTIME** Call: 855.387.9727

TDD: 800.697.0353

Online: guidanceresources.com

Your company Web ID: ONEAMERICA3

Copyright © 2015 ComPsych Corporation. All rights reserved



# TRAVEL ASSISTANCE

Note: Free benefit!

# Providing you peace of mind when traveling

Emergencies happen, but help is now only a phone call or email away. Generali Global Assistance® offers a suite of services to help you in your time of need — from small inconveniences like losing your medication to life-threatening situations — all delivered with a caring, human touch.

Find comfort in knowing you and your loved ones are protected by the Travel Assistance benefit when traveling more than 100 miles from home on a trip that lasts 90 days or less for business or pleasure. The Travel Assistance benefit protects you when covered under a OneAmerica® group life insurance contract. It also extends coverage to your spouse, domestic partner and children, even when they are traveling without you. The Travel Assistance benefit requires no additional premium; however, exclusions do apply.

#### Medical assistance services

**Medical and dental referral** to assist in finding physicians, dentists and medical facilities.

**Replacement of medication or eyeglasses** that have been lost or stolen, with guarantee of reimbursement by you.

**Medical monitoring** and review of documentation utilizing professional case managers and medical professionals to ensure appropriate care is received.

**Visitation** with a family member or a friend if you are traveling alone and must be hospitalized for at least seven days or are listed as in critical condition.

**Dependent children assistance** in the event you are hospitalized, including payment for their trip home and a qualified escort to accompany them.

**Traveling companion assistance** in the event they must cancel their travel arrangements due to medical emergencies.

**Emergency evacuation** in the event you must be transported to a medical facility or home under medical supervision. **Repatriation or cremation of remains** in the event of death while traveling.

**Trip interruption** to arrange alternate transportation and accommodations necessary due to a medical emergency.

**Emergency medical payment** to cover medical and dental care expenses in the case of sudden, unexpected illness or injury during your trip, with guarantee of reimbursement by you.

# Personal assistance services

**Pre-trip informational services** including: visa, passport, immunization requirements, weather conditions, travel advisories and more.

Language interpretation for all major languages.

**Location or replacement of lost or stolen items** such as luggage, documents and personal possessions.

**Emergency cash** advance subject to guarantee of reimbursement by you.

**Emergency travel arrangements** when appropriate, such as airline changes or hotel and car rental reservations.

**Legal assistance** and advanced bail bond will be arranged, where permitted by law, with guarantee of reimbursement by you.

**Emergency message relay** via tollfree, direct or collect access.

**Vehicle return** arranged and paid for if you become physically unable to operate a non-commercial vehicle due to a medical emergency.

Pet return home coordinated if covered traveler is hospitalized.

Upon verification of coverage, Generali Global Assistance will arrange and cover the cost of the following services, subject to policy limits and eligibility:

- Emergency evacuation: \$1,000,000
   Combined Single Limit (CSL)
- Medically necessary repatriation: Included in CSL
- Repatriation or cremation of remains: Up to \$25,000

# If traveling alone:

- Visit of family member or friend: Up to \$5,000
- Return of minor children: Up to \$5,000
- Traveling companion transportation: Up to \$5,000
- Vehicle return: Up to \$2,500
- Bereavement transportation: Up to \$2,500
- Pet return: Up to \$1,000



# For assistance call:

1-866-294-2469 (US/Canada)

+1-240-330-1509 (call collect from other locations) or email ops@europassistance-usa.com



# UNIVERSAL LIFE WITH LONG-TERM CARE

Trustmark's fully-portable Universal Life solutions address differing employee needs for permanent life insurance. This is available for employees, their spouse, and their children. This plan offers flexible, comprehensive benefits and enables you to adjust your death benefit, cash value, and premiums as your financial needs change.

**Benefit Range:** \$5,000 - \$300,000



#### Vou

• **Age range:** 18 to 64

Guaranteed Issuance: \$200,000



# **Spouse / Domestic Partner**

• **Age range:** 18 to 64

• Guaranteed Issuance: \$20,000



# **Dependent Children/Grandchildren**

• Age range: <23 for children; <19 years for grandchildren

• Guaranteed Issuance: Amount of coverage purchased by \$4.31 per week

# **Plan Highlights**

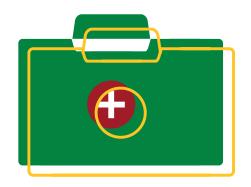
- Accelerated Death Benefit or (Terminal Illness Benefit): Accelerates 75% of death benefit when life expectancy is 24 months or fewer.
- Long-Term Care (LTC): Death benefit accelerates 4% per month up to 25 months when receiving assisted living, home healthcare, adult day care, or skilled nursing home care. Payments proportionately reduce the death benefit. Subject to a 90-day waiting period and pre-existing condition limitation of 12/12 (meaning benefits are not payable for a loss due to a pre-existing condition that starts during the first 12 months after the effective date of this feature).
- Death Benefit Restoration: Fully restores the death benefit reduced by Long-Term Care.

Please note: The benefit reduces by 66.67% at age 70.

	Non-Smoker Monthly Premiums (Defined Benefit)			
Issue Age	\$25,000	\$50,000	\$100,000	\$150,000
35	\$17.35	\$31.20	\$58.91	\$86.62
45	\$27.38	\$51.15	\$98.69	\$146.23
55	\$45.03	\$86.44	\$169.28	\$252.11

	Smoker Monthly Premiums (Defined Benefit)			
Issue Age	\$25,000	\$50,000	\$100,000	\$150,000
35	\$23.47	\$43.45	\$83.41	\$123.37
45	\$40.65	\$77.69	\$151.78	\$225.86
55	\$76.48	\$149.36	\$295.11	\$440.86

Please speak with a Benefits Counselor for personalized rates.



# SHORT-TERM DISABILITY

One America's Short-Term Disability Insurance is designed to maximize flexibility and simplicity. Non-occupational coverage will provide benefits to you when unable to work due to a covered illness or injury (including pregnancy). You can receive payments for up to 12 weeks for as long as you remain disabled and would suffer monetarily as a result. The Maximum Benefit will vary based on the waiting period chosen.

**Benefit Amount:** 60% of weekly salary (up to \$1,750 per week)

**Elimination Period:** Your choice between 7, 14, or 30 days following injury or illness **Benefit Duration:** Please speak with a benefits counselor for benefit duration period.

Pre-Existing Conditions: 3-month look-back / 12-month waiting

You can use the money however you choose, be it for groceries, out-of-pocket expenses, or anything else. The cost is based on your age upon coverage and will not increase when moving into the next age bracket.

Please speak with a Benefits Counselor for personalized rates.



# LONG-TERM DISABILITY

Long-Term Disability Insurance provides income replacement benefits for you and your family in the unfortunate event you are unable to work due to injury, illness, or pregnancy. This covers injuries and illnesses from both on- or off-the-job.

**Benefit Amount:** 60% of monthly salary (up to \$7,500) **Elimination Period:** 90 days following injury or illness

Benefit Duration: Please speak with a benefits counselor for benefit duration period.

Pre-Existing Conditions: 3-month look-back / 12-month waiting

Please speak with a Benefits Counselor for personalized rates.



# HOSPITAL INDEMNITY

MetLife's Hospital Indemnity Insurance is designed to help provide financial protection for covered individuals by paying a benefit due to a hospitalization. Employees can use the benefit to meet the out-of-pocket expenses and extra bills that can occur. No medical questions need to be answered to receive this benefit. Hospital Indemnity lumpsum benefits are paid directly to the employee based on the amount of coverage listed (regardless of the actual cost of treatment). This also includes a **Health Screening Benefit of \$100 per person per year**.

Please note: The benefit reduces to 75% at age 65, and to 50% at age 70.

	Hospital Indemnity Schedule of Benefits		
	Benefit Name	Benefit Limits	Payout
Admission Benefit	Admission	Once per calendar year	\$1,000
	ICU Admission	Once per calendar year	\$1,000
Confinement Benefit	Confinement	3 days per year	\$200
	ICU Confinement	3 days per year	\$200
Health Screening Benefit	Health Screening	Once per calendar year per insured person	\$100

	Monthly Deductions		
<b>Employee Only</b>	\$23.58		
Employee + Spouse	\$43.87		
Employee + Child(ren)	\$38.85		
Family	\$59.13		

Please see full Benefit Plan documents for covered Health Screening Benefits.



Trustmark's Critical HealthEvents plan protects you and your family in the event of a serious illness or other medical condition with portable coverage. Payments are made directly to the employee and can be applied to claims, household bills, or other expenses as needed. In addition, the Benefit Pool available to you refills at the first day of the year.

Maximum Total Benefit: 100% of up to \$50,000

# **Pre-Existing Condition Limitation<sup>1</sup>:**

12 months prior; excluded for 12 months

# **Health Screening Benefit<sup>2</sup>:** \$50

1. If you are presently covered by Unum for Critical Illness, the Pre-Existing Condition Limitation will be waived and the current benefit amounts will be honored by Trustmark. New enrollees are subject to the Pre-Existing Condition Limitation.

2. Eligible screenings include: Follow-up diagnostics; Mammography; Pap smear; Flexible sigmoidoscopy; Hemoccult analysis; Colonoscopy; PSA; Doppler carotid screening; EKG / ECG; CT colonography; HP Vaccine; CA125 test; and Skin cancer screening



# **Employee:**

\$10,000 - \$50,000

Guaranteed Issuance: \$20,000



# **Spouse / Domestic Partner:**

50% of the employee's Initial Benefit Guaranteed Issuance: \$10,000



# **Dependent Child(ren):**

10% of the employee's Initial Benefit Guaranteed Issuance: \$2,000

## 10% of Initial Benefit

- Invasive basal / squamous cell skin cancer
- In situ cancer
- Benign brain, spinal cord, and cranial nerve tumors
- Myelodysplastic syndrome
- Initial diagnosis of coronary artery disease (following assessment and treatment)
- Transient Ischemic Attack (including RIND)

## **50% of Initial Benefit**

- Stage 1 melanoma
- Stage 1 and 2 cancers (no involvement of lymph nodes)
- Coronary artery obstruction
- Clinically-diagnosed heart attack
- Stroke with <30 days impairment
- Clinically-diagnosed stroke

## 100% of Initial Benefit

- Stage 3 or higher cancer
- Stage 2 (with involvement of lymph nodes)
- Stage 2 melanoma
- Stage 1 or higher<sup>3</sup>
- Heart attack
- Stroke with >30 days impairment
- Amyotrophic Lateral Sclerosis

Please speak with a Benefits Counselor for personalized rates.

<sup>3.</sup> Including: pancreas, liver, lung, esophagus, leukemia, biliary tract, head and neck, lymphoma, and multiple myeloma



# ACCIDENT **INSURANCE**

**Accident Insurance** - Benefit Amounts

You do everything you can to keep your family safe, but accidents do happen. Take comfort knowing you have help to manage the medical costs associated with accidental injuries that occur both on- and off-the-job. Guardian's Accident Insurance provides additional coverage to help cover medical expenses and living costs when you unexpectedly get hurt. In addition, Accident Insurance provides a Health Screening Benefit of \$50 per insured person per calendar year.

Please speak with a Benefits Counselor and refer to the Schedule of Benefits provided by Guardian for the full list of coverages.

Accident Follow-Up Treatment	\$75 (up to 6 treatments)
Accidental Death Benefit Rider	Employee: \$50,000 Spouse: \$25,000 Child(ren): \$5,000
Accidental Death Benefit Rider: Common Carrier	Employee: \$100,000 Spouse: \$50,000 Child(ren): \$10,000
Ambulance: Ground Ambulance: Air	\$200 \$1,500
Appliance	\$125
Blood, Plasma, and Platelets	\$300
Burns	Up to \$12,000
Concussion	\$100
Dislocation	Up to \$4,800
Doctor's Office Visit	\$100
<b>Emergency Dental</b>	\$100 – \$400
Emergency Room Treatment	\$200
Eye Injury	\$300
Fractures	Up to \$6,000
Health Screening Benefit	\$50 per year
Herniated Disc	\$750
Hospital Admission	\$1,250
Hospital Confinement	\$250 per day (up to 365 days)
Hospital ICU Admission	\$2,500
Hospital ICU Confinement	\$500 per day (up to 15 days)
Laceration	Up to \$500
Lodging	\$150 per day (up to 30 days)
Physical Therapy	\$35 per day (up to 10 days)
Prosthetic Devices Single Multiple	\$750 \$1,500
<b>Tendon / Ligament / Rotator Cuff</b> Single Multiple	\$750 \$1,500
Transportation	\$600 (3 times per accident)

	<b>Monthly Deductions</b>
<b>Employee Only</b>	\$17.42
Employee + Spouse	\$29.69
Employee + Child(ren)	\$30.82
Family	\$43.09

# The LegalShield Membership Includes:

- Dedicated Law Firm
- Legal Advice/Consultation on unlimited personal issues
- Letters/Calls made on your behalf
- Contracts/Documents Reviewed up to 15 pages
- Lawyers prepare your Will/Living Will/Health Care Power of Attorney/Financial Power of Attorney
- Speeding Ticket Assistance (available 15 days after enrollment)
- IRS Audit Assistance
- Trial Defense (if named defendant/respondent in a covered civil action suit)
- 25% Preferred Member Discount (bankruptcy, criminal charges, DUI, personal injury, etc.)
- 24/7 Emergency Access for covered situations





Put your law firm and Identity Theft Protection in the Palm of your hand with the LegalShield and IDShield mobile apps

LegalShield legal plans cover the member; member's spouse; never married dependent children under 21 living at home; dependent children under the age 18 for whom the member is the legal guardian; never married dependent children up to age 23 if a full-time college student; or physically or mentally disabled dependent children.

IDShield plans are available at individual or family rates. A family rate covers the member, the member's spouse and 10 dependents up to the age of 26.

This is general overview and is for illustrative purposes only. Plans and services vary from state to state. See a plan contract for your state of residence for complete terms, covereage, amounts, conditions and exclusions.

# The IDShield Membership Includes:

## Privacy & Security Monitoring

# NEW! High risk account monitoring.

Comprehensive identity protection service and financial account number monitoring that leaves nothing to chance by monitoring your name, SSN, date of birth, email address (up to 10), phone numbers (up to 10), driver's license, passport numbers and medical ID numbers (up to 10). Additionally, we'll give you peace of mind with credit score tracking, financial activity alerts and sex offender searches. With the family plan, Minor Identity Protection is included and provides monitoring for up to 10 children under the age of 18 for no additional cost.

#### Social Media Monitoring

Allows you to monitor multiple social media accounts and content feeds for privacy and reputational risks.

## **Credit Monitoring**

Gain access to continuous credit monitoring through TransUnion that you can access immediately via the service portal dashboard on myidshield.com or through the free IDShield mobile app. Credit activity will be reported promptly via an email alert and mobile push notification.

## Credit Inquiry Alerts

# NEW! Instant hard inquiry alerts.

Receive alerts when a creditor requests your TransUnion credit file for the purposes of opening a new credit account or when a creditor requests a credit file for changes that would result in a new financial obligation.

# Consultation

Your identity protection plan includes 24/7/365 live support for covered emergencies, unlimited consultation, identity alerts, data breach notifications and lost wallet protection.

#### **Full Service Restoration**

If your identity is stolen, our complete recovery services from our Licensed Private Investigators will ensure that it will be restored to its pre-theft status.

	Legal + Individual IDShield	Legal + Family IDShield
LegalShield	\$15.95	\$15.95
IDShield	\$8.95	\$18.95
Combined	\$24.90	\$30.90

For more information, contact us!

Mark Seguin - TBG Solutions Inc. MyLegalShieldUSA.com Mark@MyLegalShieldUSA.com / 903.533.9123

# LegalShield Service Definition Listing



# Advice & Consultation

Provider Network

#### **Attorney Advice & Consultation**

Covered

LegalShield gives the member the ability to talk to an attorney on any of his/her legal matters without worrying about high hourly rates. The monthly membership fee provides access to legal advice on any legal matter, no matter how traumatic or trivial the issue.

Under this service, an attorney from the Provider Law Firm will discuss the situation with the member, explain the member's rights and options and recommend a course of action.

#### Letters and Phone Calls Written/Made on the Member's Behalf

Covered

If, after researching the member's legal situation, the Provider Law Firm handling the matter feels the best course of action to resolve the issue is to make a phone call or write a letter on the member's behalf the Provider Law Firm will do so at no additional cost to the member.

#### **Personal Document Review**

Covered

Our document review service provides members access to the Provider Law Firm for review of any legal documents that are 10 pages in length or less to include, but not limited to:

- Affidavits
- Deeds
- Demand letters
- Mortgages
- Notes
- Leases
- Contracts

Covered

# **Business Document Review**

The Provider Law Firm will also review one business legal document of 10 pages or less per membership year that the member is signing on behalf of a business so long as the business is a sole proprietorship owned by the member.

Trial Defense Covered

This membership provides representation to a member who is a defendant in a covered civil action or covered criminal action. The Provider Law Firm will provide advice and consultation regarding criminal and civil litigation matters and answer general questions. More specific services including representation in court and negotiation of settlement will be provided under the preferred member discount.

The Provider Law Firm will provide representation to the member or member's spouse as a defendant for a covered civil action or covered job related criminal action.

Please note the time required to give notice to courts to file an answer varies by state. You should consult with your Provider Law Firm as soon you are aware of a legal matter. This is a general overview of your legal plan coverage for illustration purposes only. See a plan contract for complete terms, coverage, amounts, conditions and exclusions. Some of the benefits are not available in New York and Washington and are not available in Canada.

If additional legal services are necessary beyond the amount of coverage provided based on the contract provisions then the member is entitled to the preferred member discount. The Provider Law Firm is the law firm designated by LegalShield to represent its members in your geographic area, and the Provider Law Firm may designate other law firms to provide covered services.

Marketed by: Pre-Paid Legal Services, Inc. dba LegalShield<sup>SM</sup> and subsidiaries; Pre-Paid Legal Casualty<sup>SM</sup>, Inc.; Pre-Paid Legal Access, Inc.; In FL: Pre-Paid Legal Services, Inc. of Florida; In VA: Legal Service Plans of Virginia; and PPL Legal Care of Canada Corporation BOOK.SDL 53911 (4/2013) © 2013 LegalShield<sup>SM</sup>, Ada, OK





# IDShield Services and Features for Employee Benefit Members

# **Identity Consultation Services**

As a member, you will have unlimited access to identity consultation services provided from our Licensed Private Investigators. The investigator will advise on best practices for identity management tailored to your specific situation. If an identity theft event is discovered, the investigator will recommend that a case be opened for restoration and you'll have 24/7/365 access to Member Support for emergency situations. Our Licensed Private Investigators will be available to answer additional questions regarding identity theft and fraud issues from 7 a.m. to 7 p.m. CT, Monday through Friday excluding major holidays. You will also receive the following consultative services:

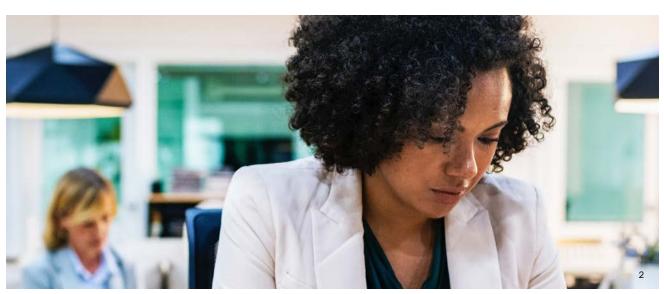
# **Privacy and Security Best Practice**

- Consult on best practices for the use and protection of your Social Security number and Personal Identifying Information (PII).
- Provide consultation on current trends related to identity theft and fraud issues.
- Discuss best practices for financial transactions.
- Consult on best practices for consumer privacy.

- Discuss tactics and best practices while shopping and communicating online.
- Give you the knowledge to help protect your identity by knowing your rights under federal and state laws.
- Help interpret and analyze your credit report.
- Take steps to reduce pre-approved credit card offers.
- Consult on issues regarding a public record inquiry or background search.
- · Credit Freeze consultation.
- Consultation on common scams and schemes, including email and social media.

## **Event-Driven Consultation Support**

- Lost/Stolen wallet assistance.
- Data exposure/Data breach safeguards.
- With your permission, facilitate the placement of a 90-day fraud security alerts with credit monitory agencies. If permission is not given, we can still provide you with a list of phone numbers for placing fraud alerts.



# Notes

# Notes



# **LONGVIEW ISD**

**2019 — 2020** PLAN YEAR