

2022-2023



# Employee Benefit Guide

*Improving our wellness together*

# CONTACTS

If you have any questions regarding your 2022 – 2023 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

Scan QR code to view electronic benefit guide.



**WELLNESS**

VirginPulse  
(888) 671-9395  
[www.virginpulse.com](http://www.virginpulse.com)

**BASIC LIFE / AD&D  
VOLUNTARY LIFE**

The Standard  
Group: 760828  
(800) 628-8600  
[www.standard.com](http://www.standard.com)

**EAP**

Health Advocate  
(888) 293-6948  
[www.healthadvocate.com/standard3](http://www.healthadvocate.com/standard3)

**TRAVEL ASSISTANCE**

The Standard  
Group: 760282  
(855) 935-5842  
[www.standard.com](http://www.standard.com)

**UNIVERSAL LIFE**

Trustmark  
Group: 0443300000  
(800) 918-8877  
[www.trustmarksolutions.com](http://www.trustmarksolutions.com)

**MEDICAL**

TRS ActiveCare  
Blue Cross Blue Shield  
Group: 385000 TRS AC HD  
Group: 385003 TRS AC Primary  
Group: 385001 TRS AC Primary +  
Group: 385002 TRS AC 2  
(866) 355-5999  
[www.bcbstx.com/trsactivecare](http://www.bcbstx.com/trsactivecare)

**DENTAL**

Humana  
Group: 673256  
(800) 233-4013  
[www.humana.com](http://www.humana.com)

**VISION**

Humana  
Group: 673256  
(866) 995-9316  
[www.humana.com](http://www.humana.com)

**MASA**

MASA Global  
Group: B2BLVSD  
Emergency Assis.: (800) 643-9023  
Customer Serv.:(800) 423-3226  
[www.masaglobal.com](http://www.masaglobal.com)

**TELEHEALTH**

WellVia  
Group: 13946  
(855) 935-5842  
[www.wellviasolutions.com](http://www.wellviasolutions.com)

**HSA / FSA / COBRA**

Discovery Benefits  
Group: 32649  
(866) 451-3399  
[www.discoverybenefits.com](http://www.discoverybenefits.com)

**DISABILITY**

The Standard  
Group: 760828  
(281) 517-5466 Pre-claim  
(866) 757-4717 Post-claim

**ACCIDENT  
CRITICAL ILLNESS  
HOSPITAL INDEMNITY**

The Standard  
Group: 760828  
(866) 851-2429  
[www.standard.com](http://www.standard.com)

**LEGALSHIELD  
IDSHIELD**

LegalShield  
Group: 2191  
(903) 533-9123  
[www.mylegalshieldusa.com](http://www.mylegalshieldusa.com)

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# 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, 2022 to August 31, 2023**. Please read this Guidebook carefully as you prepare to make your elections for the 2022 – 2023 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 to speak with a Benefit Counselor.



**Benefits Services Center**  
**(866) 332-1287**

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

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

## Online Benefits

For your convenience, you may enroll online by visiting <https://trustmark.benselect.com/enroll>

Follow the login format listed here to access your online benefit enrollment.

**For online enrollment, use the following format as your login information:**

**Employee ID or SSN:** Your social security number  
**PIN:** Last four of your social followed by last two of your birth year

**Example:**

John Smith  
SSN: 123-45-6789 | DOB: 01-27-1993  
**Emp. ID or SSN:** 123456789  
**PIN:** 678993

# 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 enroll in the following benefits for you and your eligible dependents: Medical, Dental, Vision, Voluntary Life and AD&D, Universal Life, Educator Disability, Telehealth, Hospital Indemnity, Critical Illness with Cancer, Accident, Medical Transport, Identity Theft, Legal Services, Flexible Spending Accounts, and Health Savings Account. Employer Paid benefit of Basic Life and AD&D in the amount of \$10,000 is also provided.

All Part-Time Team Members who are actively at work and are scheduled to work at least 5 hours weekly are eligible for the Employer Paid benefit of Basic Life and AD&D in the amount of \$10,000.

## 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

Life, Long Term Disability, EAP and FSA coverage ends as of the date an employee terminates. All other benefits will stay in effect until the last day of the month in which termination occurs.

## 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 Business Office within 30 days of the event (except for CHIPRA—60 days to notify the Business Office).



## NEW FOR 2022: VIRGIN PULSE WELLNESS PROGRAM

Join Longview ISD’s **free** wellness program to get active, eat better and live well. The best part? It’s fun, with friends—and you can earn rewards!

We’re excited to announce that we’ve teamed up with Virgin Pulse to offer a new wellbeing program that will help us make healthy choices, be well together, and inspire all of us to live better every day!

The Virgin Pulse platform makes it easy, giving you access to fun new wellness offerings, challenges and programs that give you the choice, support and flexibility you need to reach your wellness goals—and it’s all brought together within the top-rated Virgin Pulse app!

### What’s in it for me?

- **Create your own wellness journey!** Build healthy habits, track your physical activity, take advantage of digital coaching (Journeys) and much more!
- **Feeling up for a challenge?** Invite your co-workers or friends and family members to participate in a personal challenge
- **Get a picture of your health.** Take the **Health Check survey** and get recommendations specific to your wellbeing
- **Invite your spouse:** Did you know your spouse is eligible to join the wellness program? Invite your spouse to join and create their own personal account like yours.

Join today! Get the Virgin Pulse mobile app or go to [join.virginpulse.com/lisd](https://join.virginpulse.com/lisd)



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# 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 employees working at least 20+ hours weekly a flat coverage amount for Basic Life and Accidental Death and Dismemberment (AD&D) insurance. **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.

## VOLUNTARY

With The Standard’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.

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 8 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 100% of employee’s Voluntary Life Benefit)  
**Minimum Benefit:** \$5,000  
**Guaranteed Issuance:** \$25,000



**Child – 6 months to age 26**

**Minimum Benefit:** \$10,000  
**Guaranteed Issuance:** \$10,000  
**Limiting Age:** 26

Monthly Deductions (per \$1,000)		
Age	Employee	Spouse
<20	\$0.064	\$0.068
25-29	\$0.064	\$0.068
30-34	\$0.072	\$0.071
35-39	\$0.080	\$0.085
40-44	\$0.120	\$0.118
45-49	\$0.160	\$0.196
50-54	\$0.250	\$0.352
55-59	\$0.432	\$0.610
60-64	\$0.656	\$1.368
65-69	\$1.088	\$2.386
70+	\$1.720	\$4.171

Child Coverage: Monthly Deductions	
<b>\$10,000</b>	\$1.99

*Please speak with a Benefits Counselor for personalized rates.*



# A helping hand when you need it.

Rely on the support, guidance and resources of your Employee Assistance Program.

There are times in life when you might need a little help coping or figuring out what to do. Take advantage of the Employee Assistance Program,<sup>1</sup> which includes WorkLife Services and is available to you and your family in connection with your group insurance from Standard Insurance Company (The Standard). It's confidential — information will be released only with your permission or as required by law.

## Connection to Resources, Support and Guidance

You, your dependents (including children to age 26)<sup>2</sup> and all household members can contact the program's master's-level counselors 24/7. Reach out through the mobile EAP app or by phone, online, live chat, and email. You can get referrals to support groups, a network counselor, community resources or your health plan. If necessary, you'll be connected to emergency services.

Your program includes up to three counseling sessions per issue. Sessions can be done in person, on the phone, by video or text.

### EAP services can help with:

-  Depression, grief, loss and emotional well-being
-  Family, marital and other relationship issues
-  Life improvement and goal-setting
-  Addictions such as alcohol and drug abuse
-  Stress or anxiety with work or family
-  Financial and legal concerns
-  Identity theft and fraud resolution
-  Online will preparation and other legal documents



### Contact EAP

**888.293.6948**  
(TTY Services: 711)  
24 hours a day,  
seven days a week

[healthadvocate.com/standard3](http://healthadvocate.com/standard3)

NOTE: It's a violation of your company's contract to share this information with individuals who are not eligible for this service.

With EAP, personal assistance is immediate, confidential and available when you need it.

## WorkLife Services

WorkLife Services are included with the Employee Assistance Program. Get help with referrals for important needs like education, adoption, daily living and care for your pet, child or elderly loved one.

## Online Resources

Visit [healthadvocate.com/standard3](http://healthadvocate.com/standard3) to explore a wealth of information online, including videos, guides, articles, webinars, resources, self-assessments and calculators.

<sup>1</sup> The EAP service is provided through an arrangement with Health Advocate<sup>SM</sup>, which is not affiliated with The Standard. Health Advocate<sup>SM</sup> is solely responsible for providing and administering the included service. EAP is not an insurance product and is provided to groups of 10–2,499 lives. This service is only available while insured under The Standard's group policy.

<sup>2</sup> Individual EAP counseling sessions are available to eligible participants 16 years and older; family sessions are available for eligible members 12 years and older, and their parent or guardian. Children under the age of 12 will not receive individual counseling sessions.

Standard Insurance Company | 1100 SW Sixth Avenue, Portland, OR 97204 | [standard.com](http://standard.com)

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.



# TRAVEL ASSISTANCE

*Note: Free benefit!*

## Providing you peace of mind when traveling

The Standard through Assist America, Inc. offers you this service. Travel Assistance can help employees and their families prepare for trips and during critical situations while away from home. The program can assist participants with finding qualified medical providers, legal services or with the replacement of lost credit cards and passports.

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 180 days or less for business or pleasure. The Travel Assistance benefit protects you when covered under a The Standard 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.

Please note: Participants MUST contact Assist America as soon as possible to use Travel Assistance.

### Plan Highlights

#### Personal Support

- Pre-trip informational services
- Location lost or stolen items
- Legal referral and bail
- Interpretation and translation services
- Crime information

Travel Assistance is not travel insurance. Travel Assistance provides specific support services while traveling. Travel insurance provides monetary compensation for losses that occur while traveling. Visit full program description document for additional explanation of what Travel Assistance covers and how you can use it. Contact Assist America for additional details and questions.

#### Medical Emergency Support

- Medical monitoring
- Medical and dental search and referral
- Dispatch of doctors
- Assistance with replacement of medication, medical devices and eyeglasses or corrective lenses
- Transfer of insurance information and medical records
- Assistance with Vaccine and blood transfers
- Facilitation of hospital admission

#### Emergency Support

- Assistance with Emergency Travel Arrangements
- Emergency Cash Advance
- Emergency Message Relay
- Evacuation in Case of Political or Natural Disaster
- Emergency Trauma Counseling

#### Emergency Transport for Travelers

- Emergency Medical Evacuation
- Repatriation of Mortal Remains
- Medical Repatriation

#### Emergency Transport for Others

- Care of Minor Children
- Compassionate Visit
- Return of Traveling Companion
- Return of Pet or Service Animal
- Evacuation Transport for Family Members
- Vehicle Return

#### DOWNLOADING THE ASSIST AMERICA MOBILE APP

Participants can get the app by following these easy steps:

- 1) Visit Google Play or the App Store
- 2) Find the Assist America Mobile App
- 3) Enter reference number and participant name

#### Your Assist America Reference Number:

01-AA-STD-5201



#### ACTIVATING SERVICES

Participants who require assistance while traveling more than 100 miles away from home, or in a foreign country, should contact Assist America's 24/7 Operations Center in one of the following ways:

- Use the Tap for Help button on the mobile app
- 1-800-872-1414 (Toll-free call within the U.S.)
- 1-609-986-1234 (Collect call outside the U.S.)
- Email [medservices@assistamerica.com](mailto:medservices@assistamerica.com)

For more information about Assist America, visit [assistamerica.com](http://assistamerica.com).

If you have questions about your insurance policy, please contact The Standard at **888.937.4783**.



# 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



### You

- **Age range:** 18 to 64
- **Guaranteed Issuance:** \$20 per week not to exceed \$200,000



### Spouse / Domestic Partner

- **Age range:** 18 to 64
- **Guaranteed Issuance:** \$3 per week or \$20,000, whichever is greater



### Dependent Children/Grandchildren

- **Age range:** <23 for children; <19 years for grandchildren
- **Guaranteed Issuance:** \$3.02 up to \$4.31 per week

Please note: Guaranteed Issue amounts are illustrated for new hires. Employee must be covered in order to apply for spouse/child coverage and to retain spouse/child coverage.

## 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.

Issue Age	Non-Smoker Monthly Premiums (Defined Benefit)			
	\$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

Issue Age	Smoker Monthly Premiums (Defined Benefit)			
	\$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.*

# MEDICAL INSURANCE



## 2022-23 TRS-ActiveCare Plan Highlights Sept. 1, 2022 – Aug. 31, 2023

All TRS-ActiveCare participants have **three plan options**. Each includes a wide range of wellness benefits.

	TRS-ActiveCare Primary	TRS-ActiveCare Primary+	TRS-ActiveCare HD
Plan Summary	<ul style="list-style-type: none"> <li>Lowest premium of all three plans</li> <li>Copays for doctor visits before you meet your deductible</li> <li>Statewide network</li> <li>Primary Care Provider (PCP) referrals required to see specialists</li> <li>Not compatible with a Health Savings Account (HSA)</li> <li>No out-of-network coverage</li> </ul>	<ul style="list-style-type: none"> <li>Lower deductible than the HD and Primary plans</li> <li>Copays for many services and drugs</li> <li>Higher premium</li> <li>Statewide network</li> <li>PCP referrals required to see specialists</li> <li>Not compatible with a Health Savings Account (HSA)</li> <li>No out-of-network coverage</li> </ul>	<ul style="list-style-type: none"> <li>Compatible with a Health Savings Account (HSA)</li> <li>Nationwide network with out-of-network coverage</li> <li>No requirement for PCPs or referrals</li> <li>Must meet your deductible before plan pays for non-preventive care</li> </ul>

Plan Features				
Type of Coverage	In-Network Coverage Only	In-Network Coverage Only	In-Network	Out-of-Network
Individual/Family Deductible	\$2,500/\$5,000	\$1,200/\$3,600	\$3,000/\$6,000	\$5,500/\$11,000
Coinsurance	You pay 30% after deductible	You pay 20% after deductible	You pay 30% after deductible	You pay 50% after deductible
Individual/Family Maximum Out of Pocket	\$8,150/\$16,300	\$6,900/\$13,800	\$7,050/\$14,100	\$20,250/\$40,500
Network	Statewide Network	Statewide Network	Nationwide Network	
PCP Required	Yes	Yes	No	

Doctor Visits				
	TRS-ActiveCare Primary	TRS-ActiveCare Primary+	TRS-ActiveCare HD	TRS-ActiveCare HD
Primary Care	\$30 copay	\$30 copay	You pay 30% after deductible	You pay 50% after deductible
Specialist	\$70 copay	\$70 copay	You pay 30% after deductible	You pay 50% after deductible

Immediate Care				
	TRS-ActiveCare Primary	TRS-ActiveCare Primary+	TRS-ActiveCare HD	TRS-ActiveCare HD
Urgent Care	\$50 copay	\$50 copay	You pay 30% after deductible	You pay 50% after deductible
Emergency Care	You pay 30% after deductible	You pay 20% after deductible	You pay 30% after deductible	
TRS Virtual Health-RediMD™	\$0 per medical consultation	\$0 per medical consultation	\$30 per medical consultation	
TRS Virtual Health-Teladoc®	\$12 per medical consultation	\$12 per medical consultation	\$42 per medical consultation	

Prescription Drugs				
Drug Deductible	TRS-ActiveCare Primary	TRS-ActiveCare Primary+	TRS-ActiveCare HD	TRS-ActiveCare HD
Generics (30-Day Supply/90-Day Supply)	\$15/\$45 copay; \$0 copay for certain generics	\$15/\$45 copay	You pay 20% after deductible; \$0 coinsurance for certain generics	
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	\$0 if PrudentRx eligible; You pay 30% after deductible	\$0 if PrudentRx eligible; You pay 30% after deductible	You pay 20% after deductible	
Insulin Out-of-Pocket Costs	\$25 copay for 31-day supply; \$75 for 61-90 day supply	\$25 copay for 31-day supply; \$75 for 61-90 day supply	You pay 25% after deductible	

## How to Calculate Your Monthly Premium

Total Monthly Premium

- ⊖ Your District and State Contributions

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- ⊖ Your Premium

Ask your Benefits Administrator for your district's specific premiums.

## Things to Know

- TRS's Texas-sized purchasing power enables access to broad networks without county boundaries.
- Specialty drug insurance means you're covered, no matter what life throws at you.

## Wellness Benefits at No Extra Cost\*

Being healthy is easy with:

- \$0 preventive care
- 24/7 customer service
- One-on-one health coaches
- Weight loss programs
- Nutrition programs
- Ovia™ pregnancy support
- TRS Virtual Health
- Mental health benefits
- And much more!

\*Available for all plans. See the benefits guide for more details.

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 services and drugs
- Nationwide network with out-of-network coverage
- No requirement for PCPs or referrals

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 Blue Cross Blue Shield-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.

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

\$50 copay	You pay 40% after deductible
You pay a \$250 copay plus 20% after deductible	
\$0 per medical consultation	
\$12 per medical 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)
\$0 if PrudentRx eligible; You pay 30% after deductible (\$200 min/\$900 max)/ No 90-day supply of specialty medications
\$25 copay for 31-day supply; \$75 for 61-90 day supply

### Learn the Terms

- **Premium:** The monthly amount you pay for health care coverage.
- **Deductible:** The annual amount for medical expenses you're responsible to pay before your plan begins to pay its portion.
- **Copay:** The set amount you pay for a covered service at the time you receive it. The amount can vary by the type of service.
- **Coinurance:** The portion you're required to pay for services after you meet your deductible. It's often a specified percentage of the costs; i.e. you pay 20% while the health care plan pays 80%.
- **Out-of-Pocket Maximum:** The maximum amount you pay each year for medical costs. After reaching the out-of-pocket maximum, the plan pays 100% of allowable charges for covered services.

## Compare Prices for Common Medical Services

### REMEMBER:

Log into Blue Access for Members<sup>SM</sup> at [www.bcbstx.com/trsactivecare](http://www.bcbstx.com/trsactivecare) to use the cost estimator tool. This will help you find the best prices through different providers.

Benefit	TRS-ActiveCare Primary	TRS-ActiveCare Primary+	TRS-ActiveCare HD		TRS-ActiveCare 2	
	In-Network Only	In-Network Only	In-Network	Out-of-Network	In-Network	Out-of-Network
Diagnostic Labs*	Office/Independent Lab: You pay \$0	Office/Independent Lab: You pay \$0	You pay 30% after deductible	You pay 50% after deductible	Office/Independent Lab: You pay \$0	You pay 40% after deductible
	Outpatient: You pay 30% after deductible	Outpatient: You pay 20% after deductible			Outpatient: You pay 20% after deductible	
High-Tech Radiology	You pay 30% after deductible	You pay 20% after deductible	You pay 30% after deductible	You pay 50% after deductible	You pay 20% after deductible + \$100 copay per procedure	You pay 40% after deductible + \$100 copay per procedure
Outpatient Costs	You pay 30% after deductible	You pay 20% after deductible	You pay 30% after deductible	You pay 50% after deductible	You pay 20% after deductible (\$150 facility copay per incident)	You pay 40% after deductible (\$150 facility copay per incident)
Inpatient Hospital Costs	You pay 30% after deductible	You pay 20% after deductible	You pay 30% after deductible	You pay 50% after deductible (\$500 facility per day maximum)	You pay 20% after deductible (\$150 facility copay per day)	You pay 40% after deductible (\$500 facility per day maximum)
Freestanding Emergency Room	You pay \$500 copay + 30% after deductible	You pay \$500 copay + 20% after deductible	You pay \$500 copay + 30% after deductible	You pay \$500 copay + 50% after deductible	You pay \$500 copay + 20% after deductible	You pay \$500 copay + 40% after deductible
Bariatric Surgery	Facility: You pay 30% after deductible	Facility: You pay 20% after deductible	Not Covered	Not Covered	Facility: You pay 20% after deductible (\$150 facility copay per day)	Not Covered
	Professional Services: You pay \$5,000 copay + 30% after deductible	Professional Services: You pay \$5,000 copay + 20% after deductible			Professional Services: You pay \$5,000 copay + 20% after deductible	
	Only covered if rendered at a BDC+ facility	Only covered if rendered at a BDC+ facility			Only covered if rendered at a BDC+ facility	
Annual Vision Exam (one per plan year; performed by an ophthalmologist or optometrist)	You pay \$70 copay	You pay \$70 copay	You pay 30% after deductible	You pay 50% after deductible	You pay \$70 copay	You pay 40% after deductible
Annual Hearing Exam (one per plan year)	\$30 PCP copay \$70 specialist copay	\$30 PCP copay \$70 specialist copay	You pay 30% after deductible	You pay 50% after deductible	\$30 PCP copay \$70 specialist copay	You pay 40% after deductible

\*Pre-certification for genetic and specialty testing may apply. Contact a Personal Health Guide at 1-866-355-5999 with questions.

# MEDICAL PREMIUMS

Per Paycheck Deductions: ActiveCare Primary			
	Monthly	Custodian(24	Café / Bus (18
Employee Only	\$183.00	\$91.50	\$122.00
Employee + Spouse	\$926.00	\$463.00	\$617.33
Employee + Child(ren)	\$509.00	\$254.50	\$339.33
Family	\$1,153.00	\$576.50	\$768.67

Per Paycheck Deductions: ActiveCare HD			
	Monthly	Custodian	Café / Bus
Employee Only	\$198.00	\$99.00	\$132.00
Employee + Spouse	\$964.00	\$482.00	\$642.67
Employee + Child(ren)	\$534.00	\$267.00	\$356.00
Family	\$1,197.00	\$598.50	\$798.00

Per Paycheck Deductions: ActiveCare Primary +			
	Monthly	Custodian	Café / Bus
Employee Only	\$288.00	\$144.00	\$192.00
Employee + Spouse	\$1,029.00	\$514.50	\$686.00
Employee + Child(ren)	\$600.00	\$300.00	\$400.00
Family	\$1,352.00	\$676.00	\$901.33

Per Paycheck Deductions: ActiveCare 2			
	Monthly	Custodian	Café / Bus
Employee Only	\$788.00	\$394.00	\$525.33
Employee + Spouse	\$2,177.00	\$1,088.50	\$1,451.33
Employee + Child(ren)	\$1,282.00	\$641.00	\$854.67
Family	\$2,616.00	\$1,308.00	\$1,744.00





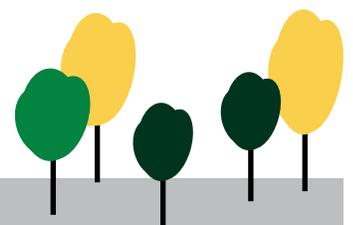
# DENTAL

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>
<b>Annual Deductible</b>	\$50 indiv.; \$150 family	\$50 indiv.; \$150 family
<b>Annual Maximum</b>	\$1,000	\$1,000
<b>Preventive Services</b> oral exams, cleanings, X-rays sealants, fluoride treatments	100% no deductible	100% no deductible
<b>Basic Services</b> fillings, periodontal maintenance, space maintainers, basic extractions	80% after deductible	80% after deductible
<b>Major Services</b> crowns, dentures, bridges, root canals, extractions	50% after deductible	50% after deductible
<b>Orthodontia (Adult/Child)</b>	50% (up to \$1,500 lifetime max)	50% (up to \$1,500 lifetime max)

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

	Monthly Deductions
<b>Employee Only</b>	\$32.42
<b>Employee + Spouse</b>	\$63.71
<b>Employee + Child(ren)</b>	\$69.81
<b>Family</b>	\$104.33





# VISION

Your vision health is an important part of complete wellness. Humana 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 (Member Cost)	Out-of-Network (Reimbursement)
<b>Copays</b>		
Exam (yearly)	\$10	Up to \$30
Retinal Imaging <sup>1</sup>	Up to \$39	Not Covered
<b>Contacts Exams</b>		
Standard (lens fit & follow-up)	Up to \$40	Not Covered
Premium (lens fit & follow-up)	10% of retail	Not Covered
<b>Lenses (yearly)</b>		
Single Vision		Up to \$25
Bifocals	\$15	Up to \$40
Trifocals		Up to \$60
Lenticular		Up to \$100
<b>Frames (yearly)</b>	\$130 allowance, 20% off balance over \$130	\$65 allowance
<b>Contacts<sup>2</sup> (yearly)</b>		
Conventional	\$130 allowance, 15% off balance over \$130	\$104 allowance
Disposable	\$130 allowance	\$104 allowance
Medically Necessary	Covered in full	\$200 allowance
<b>Lasik or PRK<sup>3</sup></b>	15% off retail price or 5% off promotional price	

1. Member costs may exceed \$39 with certain providers. Members may contact their participating provider to determine what costs or discounts are available.
2. Contact lenses are in lieu of eyeglasses and frames.
3. US Laser Network, owned and operated by LCA Vision. Since LASIK or PRK vision correction is an elective procedure, performed by specialty trained providers, this discount may not always be available from a provider in your immediate location.

	Monthly Deductions
<b>Employee Only</b>	\$6.88
<b>Employee + Spouse</b>	\$10.32
<b>Employee + Child(ren)</b>	\$11.89
<b>Family</b>	\$17.84





## 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 not all ambulance expenses. The truth is, they DONOT!

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.



**Any Ground. Any Air. Anywhere.™**

## OUR BENEFITS

Benefit*	Emergent Plus \$14/Month
Emergent Ground Transportation	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 claim process

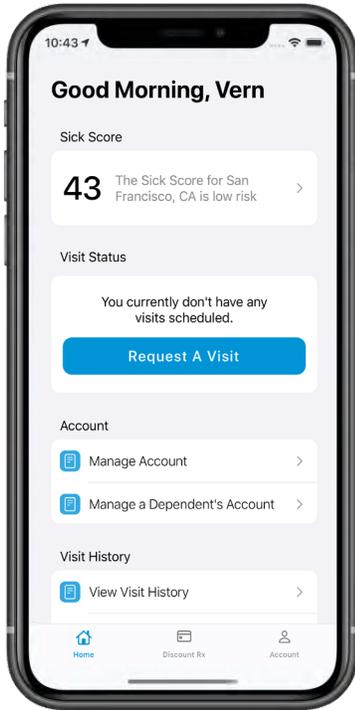
**EVERY FAMILY DESERVES A MASA MEMBERSHIP**



\* Please refer to the MSA for a detailed explanation of benefits and eligibility.



Accessible Care • Secure Sessions • Virtual Access



# Why WellVia?

## 24/7/365 Access to Doctors

Primary Care - Pediatrics - Urgent Care

WellVia has a national network of board certified, state licensed doctors offering medical consultations 24 hours a day, 7 days a week! WellVia doctors diagnose acute non emergent medical conditions and prescribe medications when clinically appropriate.

### Why choose to use WellVia over Teladoc?

1. If you are on the TRS ActiveCare HD plan Virtual Consults are \$30 a visit, with WellVia all Virtual Consults are \$0.
2. Virtual Care through TRS is only available to those employees and dependents who are on the TRS health plan. WellVia is available to all legal dependents regardless if they are on the health plan or not.

## HEALTHCARE THAT MAKES CENTS

Type of Visit	Average Cost
Primary Care	\$100
Urgent Care	\$150
Emergency Room	\$1400
<b>WELLVIA</b>	<b>\$0</b>

2013 Medical Expenditure Panel Survey / MEPS

## COMMON CONDITIONS TREATED

- Acid Reflux
- Allergies
- Asthma
- Bladder Infection
- Bronchitis
- Cold & Flu
- Infections
- Nausea
- Rashes
- Sinus Conditions
- Sore Throat
- Thyroid Conditions
- Urinary Tract Infection
- and more...

[www.WellViaSolutions.com](http://www.WellViaSolutions.com)



Member Services: (855) WELLVIA

Disclaimer: WellVia Services are for non-emergency conditions only. WellVia does not replace the primary care doctor, services are not considered insurance or a Qualified Health Plan under the Patient Protection and Affordable Care Act. WellVia doctors do not prescribe DEA controlled substances (schedule I-IV) and do not guarantee that a prescription will be written. Available nationwide where allowable by law. For updated full disclosures, please visit [www.wellviasolutions.com](http://www.wellviasolutions.com).



Feeling Better is just a Call or Click Away



## Talk to a Doctor Now

Our Board Certified doctors diagnose, recommend treatment and prescribe medication via phone or video from anywhere – your home, classroom, or while on vacation.

**\$10.00** Monthly Fee for your entire family!

**\$0** Per Consult Unlimited Use

## When to Use WellVia

70% of primary care visits can be handled over the phone  
 40% of urgent care doctor visits can be handled over the phone

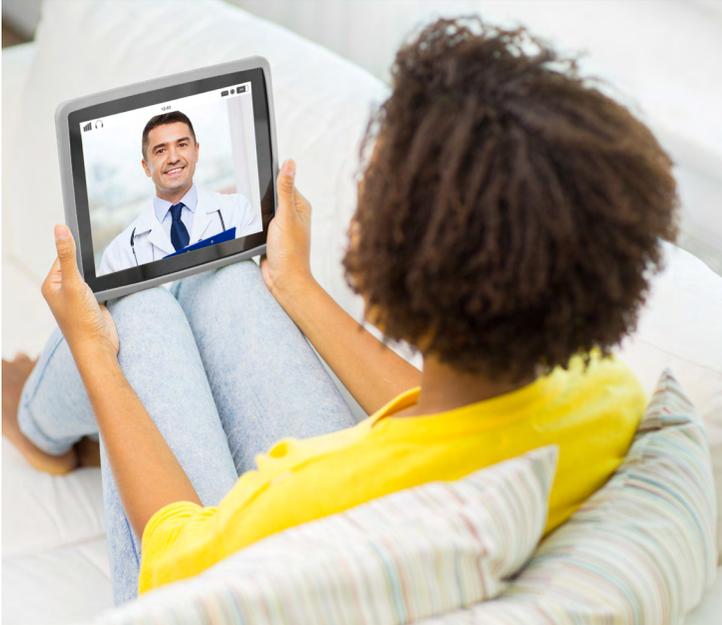
- ✓ Acid reflux
- ✓ Allergies
- ✓ Asthma
- ✓ Bronchitis
- ✓ Cold & Flu
- ✓ Sinus Infections
- ✓ Nausea
- ✓ Rashes
- ✓ Sore throat
- ✓ UTI's
- ✓ Upper Respiratory
- ✓ And more...



Disclaimer: WellVia services are for non-emergency conditions only. WellVia does not replace the primary care doctor, services are not considered insurance or a Qualified Health Plan under the member Protection and Affordable Care Act. WellVia doctors do not prescribe DEA controlled substances (schedule I-IV) and does not guarantee that a prescription will be written and operates within state regulations. For updated full disclosures, please visit [www.wellviasolutions.com](http://www.wellviasolutions.com)

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# WELLVIA®



## Access to Virtual Therapy

With WellVia you can virtually connect with a Psychiatrist or Licensed Counselor through secure and private Phone and Video sessions, whenever and wherever you need it. WellVia is removing the barriers to care so you can receive behavioral health services virtually. Simply make an appointment on your lunch break, while traveling, or weekends to utilize this service anytime, anywhere.

Accessible Care • Secure Sessions • Virtual Access

## Behavioral Health Conditions Treated

- ✓ Stress Management
- ✓ Child & Adolescent Issues
- ✓ Panic Disorders
- ✓ Life Changes
- ✓ Men's/Women's Issues
- ✓ Parenting
- ✓ Post Partum Depression
- ✓ Eating Disorders
- ✓ Trauma & PTSD
- ✓ Depression
- ✓ Relationship Issues
- ✓ And More...

Our Behavioral Health Platform is always accessible at no additional cost to you. When you would like to setup a secure virtual session with one of our Licensed Counselors or Psychiatrists, your cost is minimal.

- ✓ **Licensed Counselor** (\$85)
- ✓ **Psychiatrist** (\$225 initial visit/\$95 follow-up visit)

## How It Works



[www.WellViaSolutions.com](http://www.WellViaSolutions.com)



Member Services: (855) WELLVIA



Disclaimer: Internet/Wi-Fi connection is needed for computer access. Data charges may apply when using a tablet or smartphone. Check phone carrier's plan for details. Phone/Video consultations for behavioral health are available by appointment. WellVia is not an insurance product nor a prescription fulfillment warehouse. WellVia operates subject to state regulations and may not be available in certain states. WellVia does not guarantee that a prescription will be written. WellVia does not prescribe DEA-controlled substances, non-therapeutic drugs and certain other drugs that may be harmful because of their potential for abuse. \*Medication Management may not be available in all states. WellVia Providers reserve the right to deny care for potential misuse of services. WellVia and the WellVia logo are registered trademarks of WellSpring Telehealth, LLC and may not be used without written permission. For updated full disclosures, please visit [www.wellviasolutions.com](http://www.wellviasolutions.com)





# HEALTH SAVINGS ACCOUNT (HSA)

## EMPLOYEE HANDOUT

### 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 [www.DiscoveryBenefits.com/eligibleexpenses](http://www.DiscoveryBenefits.com/eligibleexpenses).

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-of-pocket 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.



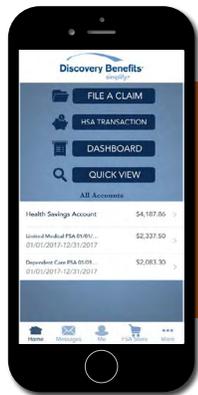
#### Saving

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](http://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 [www.DiscoveryBenefits.com/hsainvestments](http://www.DiscoveryBenefits.com/hsainvestments).

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**



## RESOURCES

**ELIGIBLE EXPENSE LIST**  
[www.DiscoveryBenefits.com/eligibleexpenses](http://www.DiscoveryBenefits.com/eligibleexpenses)

**HSA CALCULATOR**  
[www.DiscoveryBenefits.com/hsacalculator](http://www.DiscoveryBenefits.com/hsacalculator)

**MOBILE APP VIDEO**  
[www.DiscoveryBenefits.com/mobileappvideo](http://www.DiscoveryBenefits.com/mobileappvideo)

**HSA VIDEOS**  
[www.DiscoveryBenefits.com/hsavideos](http://www.DiscoveryBenefits.com/hsavideos)



[www.DiscoveryBenefits.com](http://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

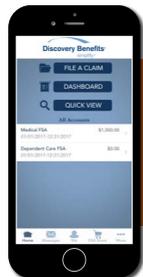
For easy access to your FSA funds, you can swipe your Discovery Benefits debit card and avoid out-of-pocket costs. If you use your card at a provider with an Inventory Information Approval System (IIAS), the expense will automatically be approved at the point of sale. If the card is swiped at a merchant 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](http://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.



DOWNLOAD THE APP FOR FREE ON APPLE AND ANDROID DEVICES



## RESOURCES

 **ELIGIBLE EXPENSE LIST**  
[www.DiscoveryBenefits.com/eligibleexpenses](http://www.DiscoveryBenefits.com/eligibleexpenses)

 **FSA CALCULATOR**  
[www.DiscoveryBenefits.com/fsacalculator](http://www.DiscoveryBenefits.com/fsacalculator)

 **MOBILE APP VIDEO**  
[www.DiscoveryBenefits.com/mobileappvideo](http://www.DiscoveryBenefits.com/mobileappvideo)

 **FSA 101 VIDEO**  
[www.DiscoveryBenefits.com/fsa101](http://www.DiscoveryBenefits.com/fsa101)

 **FSA STORE**  
[www.DiscoveryBenefits.com/fsastore](http://www.DiscoveryBenefits.com/fsastore)



[www.DiscoveryBenefits.com](http://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.

## 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 13, 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
<b>Owner</b>	Employee-owned	Employer-owned
<b>Eligibility</b>	Must be enrolled in an HDHP	Anyone is eligible, although you can't be enrolled in both an HSA and a Medical FSA
<b>Carryover</b>	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
<b>Portability</b>	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
<b>Investment Options</b>	You can invest HSA funds	You cannot invest FSA funds
<b>Maximum Contributions (2022)</b>	Self: \$3,650 Self (age 55+): \$4,650 Family: \$7,300 Family (age 55+): \$8,300	FSA Maximum Reduction: \$2,850 DCFSA Maximum Reduction (single): \$5,000 DCFSA Maximum Reduction (joint): \$5,000 DCFSA Maximum Reduction (married filing separate): \$2,500
<b>Substantiation</b>	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
<b>Availability of Funds</b>	Only the funds that have been contributed are available to cover expenses	All funds for the plan year are available on the first day



# 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:** 66.67% of monthly salary (up to \$8,000)

**Elimination Period:** 90 days following injury or illness

**Benefit Duration:** Please speak with a benefits counselor about 7, 14, 30, 60, 90, & 180 day benefit duration options.

**Pre-Existing Conditions:** For the first 90 days of disability benefits will be covered even if you have a condition subject to the preexisting condition. After 90 days, we will continue benefits only for conditions for which the preexisting condition exclusion or limitation does not apply.

## Understanding Your Plan Design

- **Own Occupation Definition of Disability:** For the benefit waiting period and the first 24 months for which LTD benefits are paid, you are considered disabled when you are unable as a result of physical disease, injury, pregnancy or mental disorder to perform with reasonable continuity the material duties of your own occupation AND are suffering a loss of at least 20 percent of your indexed predisability earnings when working in your own occupation. You are not disabled merely because your right to perform your own occupation is restricted, including a restriction or loss of license.
- **Any Occupation Definition of Disability:** After the own occupation period of disability, you will be considered disabled if you are unable as a result of physical disease, injury, pregnancy or mental disorder to perform with reasonable continuity the material duties of any occupation.
- **Deductible Income:** Deductible income is income you receive or are eligible to receive while LTD benefits are payable.

### Additional Features

- 24-Hour coverage
- Rehabilitation Plan
- Reasonable Accommodation Expense Benefit
- Rehabilitation Incentive Benefit
- Employee Assistance Program
- Survivors Benefit
- First Day Hospital Benefit
- Family Care Expenses Benefit

*Please speak with a Benefits Counselor for personalized rates.*



# HOSPITAL INDEMNITY

The Standard'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 lump-sum benefits are paid directly to the employee based on the amount of coverage listed (regardless of the actual cost of treatment).

Plan also includes a **Health Screening Benefit of \$200** per person per year.

Hospital Indemnity Schedule of Benefits		
	Benefit Limits	Payout
<b>Hospital Admission</b>	Once per calendar year	\$1,000
<b>Daily Hospital Confinement<sup>1</sup></b>	per day, up to 15 days per stay	\$250
<b>Daily Critical Care Unit Confinement<sup>1,2</sup></b>	per day, up to 15 days per stay	\$250
<b>Health Screening Benefit</b>	Once per calendar year per insured person	\$200

1. Defined as a stay for at least 20 consecutive hours in a hospital setting.  
 2. Payable in addition to the Hospital Admission and Daily Hospital Confinement benefit you may be eligible to receive.

Monthly Deductions	
<b>Employee Only</b>	\$19.75
<b>Employee + Spouse</b>	\$34.50
<b>Employee + Child(ren)</b>	\$29.00
<b>Family</b>	\$50.70

*Please see page 28, Health Maintenance Screening, for more information.*



# CRITICAL ILLNESS

The Standard's Critical Illness 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.

Plan also includes a **Health Screening Benefit of \$100** per person per year.

*Please see page 28, Health Maintenance Screening, for more information.*

**Maximum Total Benefit:** 100% of up to \$30,000

**Pre-Existing Condition Limitation:**

12 months prior; excluded for 12 months

1. 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

**Covered Conditions**

**100% of Initial Benefit**

- Heart attack
- Stroke
- Cancer (cancer that has spread beyond initial tissue)
- End stage renal (kidney) failure
- Major organ failure
- Coma
- Paralysis of two or more limbs
- Loss of sight
- Occupational HIV
- Occupational Hepatitis
- ALS (Lou Gehrig's Disease)
- Advanced Alzheimer's Disease
- Advanced Multiple sclerosis
- Advanced Parkinson's disease
- Benign brain tumor
- Bone marrow transplant
- Loss of hearing
- Loss of speech



**Employee:**

\$10,000 – \$30,000  
Guaranteed Issuance: Up to \$30,000



**Spouse / Domestic Partner:**

50% of the employee's Initial Benefit  
Guaranteed Issuance: Up to \$15,000



**Dependent Child(ren):**

50% of the employee's Initial Benefit  
Guaranteed Issuance: \$2,500

Please note: Guaranteed Issue amounts are illustrated for new hires.

**25% of Initial Benefit**

- Severe coronary artery disease with recommendation for bypass
- Cancer that has not spread beyond initial tissue, also known as Carcinoma in situ

Please note: Payment of benefit is subject to the terms and conditions of the policy. Diagnosis and recommendation must occur after your coverage becomes effective.

*Please speak with a Benefits Counselor for personalized rates.*



# ACCIDENT INSURANCE

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**. The Standard's Accident Insurance provides additional coverage to help cover medical expenses and living costs when you unexpectedly get hurt.

Plan also includes a **Health Screening Benefit of \$100** per insured person per calendar year.

*Please see page 28, Health Maintenance Screening, for more information.*

	Accident Insurance - Benefit Amounts
Accident Follow-Up Treatment	\$70 (up to 3 treatments)
Accidental Death Benefit Rider	Employee: \$100,000 Spouse: \$50,000 Child(ren): \$25,000
Accidental Death Benefit Rider: Common Carrier	100% of Accidental Death
Ambulance: Ground	\$600
Ambulance: Air	\$1,500
Appliance	\$200
Blood, Plasma, and Platelets	\$600
Burns	Up to \$15,000
Concussion	\$200
Dislocation	Up to \$7,000
Doctor's Office Visit	\$60
Emergency Dental	Up to \$350
Emergency Room Treatment	\$200
Eye Injury	\$300
Fractures	Up to \$10,500
Health Screening Benefit	\$100 per year
Herniated Disc	\$1,000
Hospital Admission	\$1,500
Hospital Confinement	\$400 per day (up to 365 days)
Hospital ICU Admission	\$1,000
Hospital ICU Confinement	\$200 per day (up to 15 days)
Laceration	Up to \$800
Lodging	\$200 per day (up to 30 days)
Physical Therapy	\$50 per day (up to 4 days)
Prosthetic Devices	
Single	\$1,000
Multiple	\$2,000
Tendon / Ligament / Rotator Cuff	
Single	\$1,000
Multiple	\$1,500
Transportation	\$200 (up to 30 days per accident)

	Monthly Deductions
Employee Only	\$15.02
Employee + Spouse	\$23.87
Employee + Child(ren)	\$28.21
Family	\$44.20

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

# Health Maintenance Screening

Get a Cash Benefit Each Year for Covered Wellness Exams



Regular checkups are important for the things you depend on — especially your health. You and your covered dependents will receive a cash benefit each calendar year when completing any one of the 20 tests list below. It's all part of the Health Maintenance Screening Benefit that comes with your group insurance from Standard Insurance Company.

## Approved Tests:

- ✓ Abdominal aortic aneurysm ultrasound
- ✓ Ankle Brachial Index (ABI) screening for peripheral vascular disease
- ✓ Biopsies for cancer
- ✓ Bone density screening
- ✓ Breast ultrasound
- ✓ Cancer antigen 125 (CA 125) blood test for ovarian cancer
- ✓ Cancer antigen 15-3 (CA 15-3) for breast cancer
- ✓ Carcinoembryonic antigen (CEA) blood test for colon cancer
- ✓ Colonoscopy
- ✓ Complete Blood Count (CBC)
- ✓ Comprehensive Metabolic Panel (CMP)
- ✓ COVID-19 testing and antibody testing for COVID-19<sup>1</sup>
- ✓ Electrocardiogram (EKG)
- ✓ Hemocult stool analysis
- ✓ Hemoglobin A1C
- ✓ Human Papillomavirus (HPV) vaccination
- ✓ Lipid panel
- ✓ Mammography
- ✓ Mental Health Assessment<sup>1</sup>
- ✓ Pap smears or thin prep pap test
- ✓ Prostate specific (PSA) test
- ✓ Stress test on a bicycle or treadmill

Novel infectious disease and mental health assessment tests are not approved in all states or on all products. Please reference your certificate of coverage to confirm these tests are available.

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon, in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

<sup>1</sup> Test not available in the state of New York.

Schedule your health screening test today, submit your claim and receive your cash benefit.



**Standard Insurance Company**  
1100 SW Sixth Avenue  
Portland OR 97204

[standard.com](http://standard.com)

GP0614-ACC

SI 17629

Health Maintenance Screening EE  
(2/21)



# Have You Ever

- Needed your Will prepared or updated?
- Signed a contract?
- Received a moving traffic violation?
- Been denied a warranty or insurance claim?
- Been overcharged or had a billing dispute?
- Purchased or leased a home?
- Worried about being a victim of identity theft?
- Been concerned about your child's identity?
- Lost your wallet?
- Been involved in a data breach?
- Had someone commit tax or employment fraud in your name?
- Had your driver's license or medical information stolen/used?

## The LegalShield Membership Includes:

- **Dedicated Law Firm** Direct access, no call center
- **Legal Advice/Consultation** on unlimited personal or business issues
- **Letters/Calls** made on your behalf (initial letter or call on an unlimited basis)
- **Contracts/Documents** Reviewed Up to 10 pages per document
- **Will Preparation** - Last Will and Testament (for the named member)
- **Moving Traffic Violations** - (must be on the road legally) 15 day waiting period
- **IRS Audit Assistance** (begins with the tax return due April 15th of the year you enroll)
- **Trial Defense** (if named defendant/respondent in a covered civil action suit)
- **25% Preferred Member Discount** (bankruptcy, criminal charges, DUI, and other matters outside of normal coverage)
- **24/7 Emergency Access** for covered situations

## The IDShield Membership Includes:

- **Continuous Credit Monitoring** IDShield continuously monitors your credit report. If changes occur, you'll receive an instant alert.
- **High Risk Application and Transaction Monitoring** We monitor the largest proprietary database of new account application data to detect potentially fraudulent new accounts when an application is submitted.
- **Dark Web Monitoring** Monitors your Personally Identifiable Information (PII) across the dark web, where criminals purchase personal data.
- **Username/Password (Credential) Monitoring** This powerful feature helps protect against takeovers of your social, financial and other online accounts.
- **Identity Threat & Credit Threat Alerts** You'll receive a threat alert if your PII is found.
- **Unlimited Consultation** On any cyber security issue.
- **Full-Service Restoration** Our Licensed Private Investigators will work tirelessly to restore your identity to its pre-theft status.
- **24/7 Emergency Access** We're here in the event of an identity theft emergency.

 Put your law firm and identity theft protection in the palm of your hand with the LegalShield & IDShield mobile apps

Plan	Family Price <small>(pay period)</small>	Individual Price <small>(pay period)</small>
LegalShield	\$15.95	\$15.95
IDShield	\$18.95	\$8.95
Combined	\$30.90	\$24.90

Prepared for: CompanyName Here, <https://customurwithpriceinfohere.com>

For more information, contact your Independent Associate:

*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 is a product of Pre-Paid Legal Services, Inc. d/b/a LegalShield ("LegalShield"). LegalShield provides access to identity theft, protection and restoration services. For complete terms, coverage and conditions, please see [www.idshield.com](http://www.idshield.com). All Licensed Private Investigators are licensed in the state of Oklahoma. LegalShield/IDShield is not an insurance carrier. Certain limitations apply. IDShield plans are available at individual or family rates. A family rate covers the member, member's spouse and up to 10 dependents up to the ages 18. It also provides consultation and restoration for dependent children age 18 to 26. This is a general overview and is for illustrative purposes only. Plans and services vary from state to state. See plan details for your state of residence for complete terms, coverage, amounts, conditions and limitations.*

# 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

### Business Document Review

Covered

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.

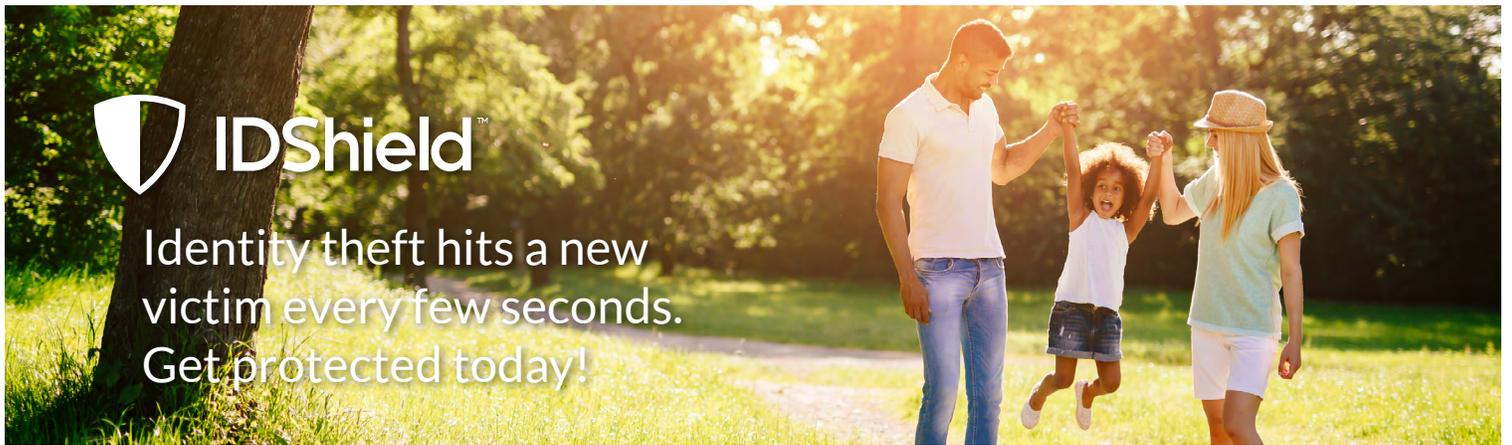
The Provider Law Firm will provide representation to the member or member's spouse as a defendant for a covered civil action or covered job related criminal action.

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





Identity theft hits a new victim every few seconds. Get protected today!

## Have You Ever...

- Worried about being a victim of identity theft?
- Been concerned about your child's identity?
- Lost your wallet?
- Worried about entering personal information online?
- Feared the security of your medical information?
- Been pursued by a collection agency?

### The IDShield Membership Includes:

#### Credit Monitoring and Alerts

Continuously monitors your data and sends an alert via push notification to the IDShield mobile app, email and member portal if any discrepancies are found.

#### Financial Account Monitoring

Financial accounts monitored include checking, savings, 401k accounts, loans and more.

#### Security Monitoring

High risk account monitoring. We monitor your financial account numbers such as SSN, credit cards (up to 10) and bank accounts (up to 10). Additionally, we'll give you peace of mind with credit score track-ing, financial activity alerts and sex offender searches. And with the family plan, Minor Identity Protection is included and provides monitoring for up to 8 children under the age of 18 for no additional cost.

#### Social Media Monitoring

Let us help you protect yourself by monitoring multiple social media accounts and content feeds for privacy and reputational risks.

#### Monthly Score Tracker

The credit score tracker allows you to watch your TransUnion credit score on a monthly basis with a map that shows a 12-month historic view of your credit trends, starting from the month of your membership activation.

#### Unlimited Consultation

You don't need to have an issue to get support from identity theft specialists. They can advise you on best practices to help you keep your identity safe.

#### Stay Connected with Our Mobile App

Download our free IDShield mobile app, so you can have 24/7 assistance for emergencies - right in the palm of your hand!

#### \$1 Million Identity Fraud Protection Plan

If you incur expenses as a result of a stolen identity event, this policy covers lost wages, elder and child care, travel, legal defense fees and stolen funds via electronic transfers.

#### Full-Service Restoration and Unlimited Service Guarantee

You cannot put a price on your identity. If your identity is stolen, we will do whatever it takes, for as long as it takes, to restore it to its pre-theft status.

	Family Price	Individual Price
IDShield	\$18.95	\$8.95

IDShield is a product of Pre-Paid Legal Services, Inc. d/b/a LegalShield ("LegalShield"). LegalShield provides access to identity theft protection and restoration services. IDShield plans are available at individual or family rates. For complete terms, coverage and conditions, please see an identity theft plan. All Licensed Private Investigators are licensed in the state of Oklahoma. An Identity Fraud Reimbursement Policy ("Policy") is issued through a nationally recognized carrier. LegalShield/IDShield is not an insurance carrier. This covers certain identity fraud expense reimbursement and legal costs as a result of a covered identity fraud. The amount of coverage is dependent on the type of identity theft plan. See a Policy for complete terms, coverage, conditions and limitations related to family members who are eligible for coverage under the Policy. For a summary description of benefits for the Policy coverage see <https://idshield.cloud/summary-of-benefits>.

FOR MORE INFORMATION PLEASE CONTACT AN INDEPENDENT ASSOCIATE:





# 2022 - 2023 EMPLOYEE BENEFITS