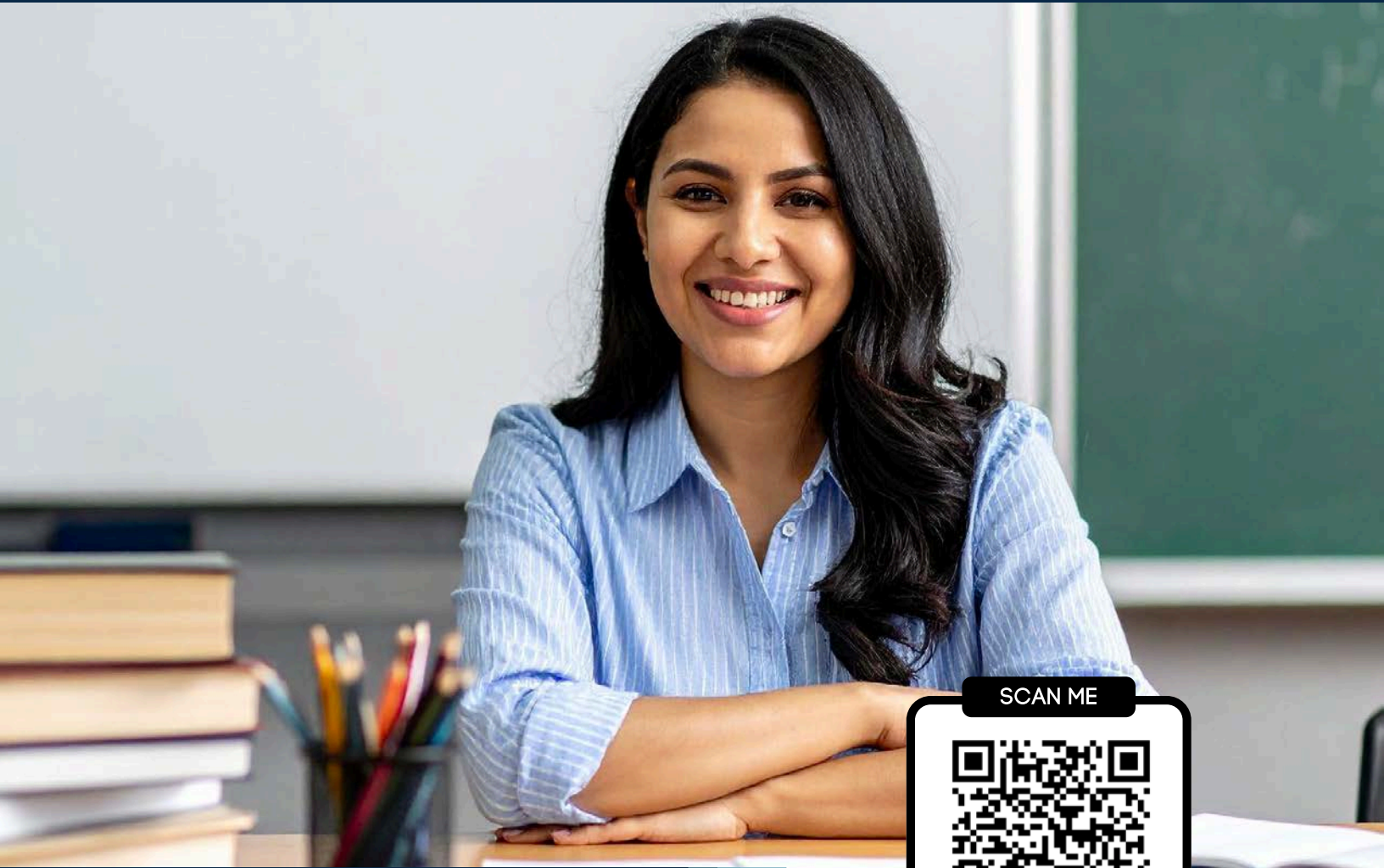


# FREDERICKSBURG ISD 2026-2027 BENEFITS GUIDE



Sr. Account Administrator  
Edith Bergman  
281-272-7638  
edith.bergman@ffga.com

[ffbenefits.ffga.com/fredericksburgisd](https://ffbenefits.ffga.com/fredericksburgisd)

Megan Klein, Payroll Specialist  
830-997-9551  
megank@fisd.org

# Contents

- EMPLOYEE BENEFITS CENTER
- HOW TO ENROLL
- BENEFIT ELIGIBILITY & COVERAGE
- MEDICAL
- DENTAL
- VISION
- FSA
- HSA
- FSA & HSA RESOURCES
- VOLUNTARY SUPPLEMENTAL INSURANCE PRODUCTS
  - TERM LIFE & AD&D
  - TEXAS LIFE
  - DISABILITY INSURANCE
  - CANCER INSURANCE
  - CRITICAL ILLNESS INSURANCE
  - ACCIDENT ONLY INSURANCE
  - HOSPITAL INDEMNITY INSURANCE
  - LEGAL PLAN
  - MEDICAL TRANSPORT
  - 403(b) RETIREMENT PLANS
  - FFINVEST
  - EMPLOYEE ASSISTANCE PROGRAM
  - TELEHEALTH
  - COBRA
- BENEFIT CONTACT INFORMATION

*This guide contains a summary of the benefits offered by your employer. If there is a conflict between the terms of this outline of benefits and the actual contracts, the terms of the contracts will prevail.*

# Employee Benefits Center

## A guide to your benefits!

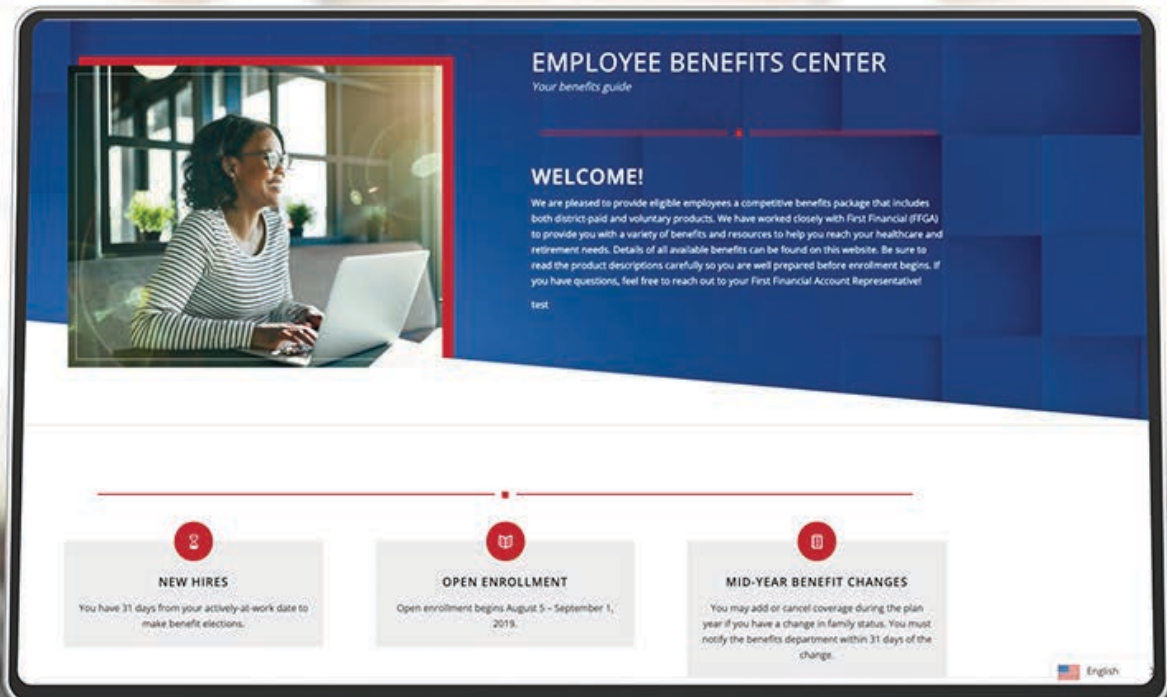
Fredericksburg ISD and FFGA are excited to provide you with a custom website filled with information about your benefits. Visit the Employee Benefits Center to see current benefit options for your employer as well as find claim forms, important phone numbers and enrollment information.

There's no need to register for site access. Simply type the URL below into your browser and you will be directed to your Employee Benefits Center.



*Scan the QR code to learn more about the plans that are available this plan year!*

<https://ffbenefits.ffga.com/fredericksburgisd>



# How to Enroll

## Benefits Enrollment

### On-Site Enrollment

When it's time to enroll in your benefits, your FFGA Account Representative will be on-site to assist you with making your elections. Visit your EBC for more information.

### Online Enrollment

To begin online enrollment, visit <https://ffga.benselect.com/Enroll/login.aspx>.

### Enroll Now

#### Username & Password

- Username
  - The Username is either your social security number or your Employee ID.
- Password
  - Instructions to access your initial password will be provided to you prior to open enrollment.
  - Upon initial login, the password will be required to be changed.
  - Remember your password as you will use this to sign your enrollment confirmation form and to login in the future.

#### View Current Benefits

After logging in, you will arrive at the welcome screen. Your current benefits and premium deductions will be listed on this screen.

#### View/Add Dependents

Click next to view your dependents. It is very important to make sure the social security numbers and birth dates listed are correct. If you plan to add dependents, you will need to enter their legal name, social security numbers and birth dates.

#### Begin Elections

Click next again to begin making your benefit elections. Remember, no changes to your elections can be made during the plan year unless you have either a qualified mid-year change under Section 125 or a special enrollment event.

# Benefit Eligibility & Coverage

## Employee Coverage

### Eligibility

Eligible employees must be actively at work on the plan effective date for new benefits to be effective.

### New Employees

You have 31 days from your actively-at-work date to make benefit elections. Insurance coverage becomes effective on the first day of the month that follows a waiting period of 30 calendar days.

### Existing Employees

When it's time to enroll in your benefits, your FFGA Account Representative will be available to assist you with making your elections. Your elections can be made anytime during annual enrollment online from your work or home computer. Before enrollment, take time to educate yourself on the available benefits and what options would work best for you and your family by visiting the Employee Benefits Center.

### Mid-year Benefit Changes

You may add or cancel coverage during the plan year if you have a change in family status. You must notify the benefits department within 31 days of the change.

### Qualifying Life Events Include:

- Changes in household, including marriage, divorce, legal separation, annulment, death of a spouse, birth, adoption, placement for adoption or death of a dependent child
- Loss of health coverage, attributable to your spouse's employment, losing existing health coverage including job-based, individual and student plans, losing eligibility for Medicare, Medicaid, or CHIP, turning 26 and losing coverage through a parent's plan

### Declining Coverage

If you are eligible for benefits, but wish to DECLINE coverage, please complete the online enrollment either on your work or home computer. Under each option, you will need to select "waive." **You must still complete the beneficiary information.**

# Medical Coverage

## TRS-ActiveCare



Your medical plans are offered through TRS. From in- and out-of-network options to comprehensive prescription drug coverage and special health and wellness programs, TRS-ActiveCare has been designed to flexibly meet the needs of nearly half a million public education employees.

Blue Cross Blue Shield of Texas | <https://www.bcbstx.com/trsactivecare/> | 1.866.355.5999

### TRS-ActiveCare Primary

- Copays for doctor visits and generic prescriptions before you meet deductible
- Statewide Network
- Participants must select a primary care provider who will make referrals to specialists
- No out-of-network coverage
- Employee will receive two (2) ID cards (BCBS & Express Scripts)

### TRS-ActiveCare HD

- Must meet deductible before plan pays for non-preventive care
- In-network and out-of-network benefits – separate out-of-network deductible/out-of-pocket maximum  
Nationwide network
- Deductible applies to medical and pharmacy
- No requirement for PCP or referrals
- Compatible with health savings account (HSA)
- Employee will receive two (2) ID cards (BCBS & Express Scripts)

### TRS-ActiveCare Primary +

- Copays for many services and drugs
- Statewide Network
- Participants must select a primary care provider who will make referrals to specialists
- No out-of-network coverage
- Employee will receive 2 ID cards (BCBS & Express Scripts)

### TRS-ActiveCare 2 - Closed to New Enrollees

- Copays for many drugs and services
- Nationwide network with out-of-network coverage
- Employee will receive two (2) ID cards (BCBS & Express Scripts)

### TRS-ActiveCare Plan Prescription Benefits

Express Scripts | <https://info.express-scripts.com/trsactivecare/> | 1.844.367.6108

When you enroll in a BCBSTX Plan, you automatically receive prescription drug coverage through Express Scripts which gives you access to a large, national network of retail pharmacies.

# TRS ActiveCare Medical Premiums

Medical Monthly Premiums				
	Primary	Primary+	HD	AC2
Employee Only	\$156	\$249	\$175	\$648
Employee + Spouse	\$1,042	\$1,232	\$1,093	\$2037
Employee + Children	\$521	\$679	\$553	\$1142
Employee + Family	\$1,407	\$1,662	\$1,471	\$2476

Monthly Premiums shown above include the Employer contribution of \$365.00

For more information, please refer to the TRS-ActiveCare website.



# 2026-27 TRS-ActiveCare Plan Highlights Sept. 1, 2026 – Aug. 31, 2027



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

## How to Calculate Your Monthly Premium

- Total Monthly Premium
- − Your Employer Contribution

---

- − Your Premium

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

## Being Healthy is Easy

- \$0 preventive services
- One-on-one health coaches
- Weight loss programs and nutrition
- TRS Virtual Health
- Member Rewards is even better. Now you'll get a check when you use Member Rewards and choose low-cost, high-quality doctors and facilities – up to \$599\* per tax year.
- Airrosti Remote Recovery gives you in-home virtual physical therapy to relieve common aches and pains at no cost.\*

\*Eligibility rules may apply.

See the Annual Enrollment Guide for more details.

## Mental Health

You have in-office and virtual benefits:

- TRS-ActiveCare Primary Plan: \$30 copay for office visits or \$0 with Teladoc
- TRS-ActiveCare Primary+ Plan: \$15 copay for office visits or \$0 with Teladoc
- TRS-ActiveCare HD Plan: 30% coinsurance after deductible or \$42 with Teladoc
- TRS-ActiveCare 2 Plan: \$20 copay for office visits or \$12 with Teladoc

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

Monthly Premiums	Total Premium	Employer Contribution	Your Premium	Total Premium	Employer Contribution	Your Premium	Total Premium	Employer Contribution	Your Premium
Employee Only	\$521			\$614			\$540		
Employee and Spouse	\$1,407			\$1,597			\$1,458		
Employee and Children	\$886			\$1,044			\$918		
Employee and Family	\$1,772			\$2,027			\$1,836		

Plan Features	In-Network Coverage Only	In-Network Coverage Only	In-Network	Out-of-Network
Individual/Family Deductible	\$2,500/\$5,000	\$1,200/\$2,400	\$3,400/\$6,800	\$6,800/\$13,600
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	\$8,050/\$16,100	\$6,900/\$13,800	\$8,300/\$16,600	\$20,500/\$41,000
PCP Required	Yes	Yes	No	

Doctor Visits	Primary Care	Specialist	Primary Care	Specialist
	\$30 copay	\$70 copay	\$15 copay	\$70 copay
			You pay 30% after deductible	You pay 50% after deductible
			You pay 30% after deductible	You pay 50% after deductible

Immediate Care	Urgent Care	Emergency Care	Urgent Care	Emergency Care
	\$50 copay	You pay 30% after deductible	\$50 copay	You pay 20% after deductible
			You pay 30% after deductible	You pay 30% after deductible
			You pay 30% after deductible	You pay 30% after deductible
			You pay 30% after deductible	You pay 30% after deductible

Prescription Drugs	Drug Deductible	Generics (31-Day Supply/90-Day Supply)	Preferred (Max does not apply if brand is selected and generic is available)	Non-preferred	Specialty (31-Day Max)	Insulin Out-of-Pocket Costs
	Integrated with medical	\$15/\$45 copay; \$0 copay for certain generics	You pay 30% after deductible	You pay 50% after deductible	You pay 30% after deductible; \$0 if SaveOnSP eligible	\$25 copay for 31-day supply; \$75 for 61- to 90-day supply
	\$200 deductible per participant (brand drugs only)	\$15/\$45 copay	You pay 25% after deductible (\$100 max)/ You pay 25% after deductible (\$265 max)	You pay 50% after deductible	You pay 20% after deductible (\$500 max); \$0 if SaveOnSP eligible	\$25 copay for 31-day supply; \$75 for 61- to 90-day supply
	Integrated with medical	You pay 20% after deductible; \$0 coinsurance for certain generics	You pay 25% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 25% after deductible

This plan is closed to new enrollees. Current TRS-ActiveCare 2 participants can stay enrolled.

TRS-ActiveCare 2
<ul style="list-style-type: none"> <li>• Closed to new enrollees</li> <li>• Current enrollees can choose to stay in the plan</li> <li>• Lower deductible</li> <li>• Copays for many services and drugs</li> <li>• Nationwide network with out-of-network coverage</li> <li>• No requirement for Primary Care Providers or referrals</li> </ul>

Total Premium	Employer Contribution	Your Premium
\$1,013		
\$2,402		
\$1,507		
\$2,841		

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
No	

Tier 1: \$20 copay Tier 2: \$40 copay	You pay 40% after deductible
Tier 1: \$55 copay Tier 2: \$85 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)
You pay 30% after deductible (\$200 min/\$900 max); \$0 if SaveOnSP eligible
\$25 copay for 31-day supply; \$75 for 61- to 90-day supply

# Hospital Indemnity Insurance

Aetna | [www.myaetnasupplemental.com](http://www.myaetnasupplemental.com) | 800-607-3366

Hospital stays are costly. If you or a family member find yourself in the hospital due to a sudden accident or illness, you may struggle financially, even if you have a good medical plan. With a hospital indemnity plan, you can rest assured those extra expenses won't be a financial burden.

Unlike medical plans, there are no deductibles to meet with a hospital indemnity plan. As soon as you incur a qualified event, you can file a claim and start receiving benefits.

The plan pays a lump sum benefit in a previously specified amount. The money can be used for medical costs, insurance deductibles, groceries, transportation, childcare – the choice is up to you!

## Hospital Indemnity Insurance Monthly Premiums

	Low	High
Employee Only	\$20.41	\$34.82
Employee + Spouse	\$44.13	\$74.43
Employee + Children	\$33.04	\$56.22
Employee + Family	\$53.23	\$90.33



# Welcome addition

## Aetna Hospital Indemnity Plan

Life happens fast. One minute you're thinking about having a baby — and the next you're driving to the hospital. You're nervous about the delivery and how much it's going to cost. Be better prepared for moments like these with the Aetna Hospital Indemnity Plan.



## We pay *you* cash benefits



### It's your money to spend

**Our hospital indemnity plan pays you** lump-sum cash benefits for a planned or an unplanned hospital stay. This includes stays due to an injury, surgery, an illness— or even delivering a baby. Use the money to help cover medical bills or everyday living expenses like daycare or groceries. The choice is yours. You can also sign up for direct deposit to get your benefits faster.

### Our plan works with your health plan

We won't deny coverage based on your health. There are no doctor exams to take or medical questions to answer. And we pay you even if you have other insurance coverage. This means it pairs well with your major medical plan.

Insurance plans are offered and/or underwritten by Aetna Life Insurance Company (Aetna).

## An Aetna Simplified Claims Experience™

To file a claim, it takes about 90 seconds or less. Just upload a PDF or picture of your medical bill. You can also complete a paper form and return it by mail or fax to Aetna® Voluntary Plans.

If your claim is approved, we'll mail you a check or deposit cash directly into your bank account.

### Manage your plan online

After you become a member, register at [MyAetnaSupplemental.com](https://MyAetnaSupplemental.com) or on the **My Aetna Supplemental** app. Or simply scan the QR code. Use your personal email address to keep accessing your account and getting important reminders — even if you leave your company.



## Our bundle of joy didn't cost us a bundle

*"Hospital stays are costly, so we have the Aetna Hospital Indemnity Plan. After we delivered, I filed a claim online. The money was deposited quickly into our checking account.\* We used some of it towards our deductible. And the rest to buy a baby stroller. I wish we had this plan last year when I had surgery."*

— Louis and Carla\*



\*FOR CLAIM PROCESSING: Sometimes you may need to provide documentation if the benefit doesn't create a medical claim, or we need more details to process your claim.

\*FOR COVERAGE LIMITATIONS: Benefits paid for a covered hospital stay that occurs on or after the coverage effective date.

\*FOR MEMBER TESTIMONIAL: The above member story is for illustrative purposes and doesn't reflect events experienced by actual participants.

### **THIS IS A SUPPLEMENT TO HEALTH INSURANCE AND IS NOT A SUBSTITUTE FOR MAJOR MEDICAL COVERAGE.**

This is a hospital confinement indemnity plan. This plan provides limited benefits. It pays fixed dollar benefits for covered services without regard to the health care provider's actual charges. The benefits payments are not intended to cover the full cost of medical care. Members are responsible for making sure the providers' bills get paid. These benefits are paid in addition to any other health coverage members may have.

### **THIS PLAN DOES NOT COUNT AS MINIMUM ESSENTIAL COVERAGE UNDER THE AFFORDABLE CARE ACT.**

Policies are insured by Aetna Life Insurance Company (Aetna). Not all services are covered. See plan documents for a complete description of benefits, exclusions and limitations of coverage. Plan features and availability may vary by location and are subject to change. Refer to [Aetna.com](https://Aetna.com) for more information about Aetna plans.

**Policy forms issued in Oklahoma include:** AL VOL HPol-Hosp 01, AL VOL HCOC-Hosp 01.

**Policy forms issued in Missouri include:** AL VOL HPOL-Hosp 01.

# Inpatient Stays

Covered Benefit	Low	High
<p><b>Hospital stay - Admission</b> Provides a lump sum benefit for the initial day of your stay in a hospital. <i>Maximum 1 stay per plan year</i></p>	\$1,000	\$2,000
<p><b>Hospital stay - Daily</b> Pays a daily benefit, beginning on day two of your stay in a non-ICU room of a hospital. <i>Maximum 30 days per plan year</i></p>	\$150	\$200
<p><b>Hospital stay - (ICU) Daily</b> Pays a daily benefit, beginning on day two of your stay in an ICU room of a hospital. <i>Maximum 30 days per plan year</i></p>	\$300	\$400
<p><b>Newborn routine care</b> Provides a lump-sum benefit after the birth of your newborn. This will not pay for an outpatient birth.</p>	\$200	\$200
<p><b>*Observation unit</b> Provides a lump sum benefit for the initial day of your stay in an observation unit as the result of an illness or accidental injury. <i>Maximum 1 day per plan year</i></p>	\$200	\$200
<p><i>*Observation Unit can be treated as Hospital Stay if your period of observation lasts more than 24 hours in a row.</i></p>		
<p><b>Substance abuse stay - Daily</b> Pays a daily benefit for each day you have a stay in a hospital or substance abuse treatment facility for the treatment of substance abuse. <i>Maximum 30 days per plan year</i></p>	\$150	\$200
<p><b>Mental disorder stay - Daily</b> Pays a daily benefit for each day you have a stay in a hospital or mental disorder treatment facility for the treatment of mental disorders. <i>Maximum 30 days per plan year</i></p>	\$150	\$200
<p><b>Rehabilitation unit stay - Daily</b> Pays a benefit each day of your stay in a rehabilitation unit immediately after your hospital stay due to an illness or accidental injury. <i>Maximum 30 days per plan year</i></p>	\$75	\$100

**Important Note:**

**All daily inpatient stay benefits begin on day two and count toward the plan year maximum .**

# TeleHealth



Recuro | [www.recurohealth.com](http://www.recurohealth.com) | 855-673-2876

Studies show that more than 50 percent of doctor's office visits can be handled over the phone. With the Telehealth program, you can get a diagnosis quicker and spend less time in the waiting room.

Board Certified physicians will diagnose your illness, recommend treatment, and prescribe medication via telephone or video. You can contact them from anywhere – home, work, school, even while on vacation. They can treat common health issues like acid reflux, allergies, asthma, cold and flu, sinus infections, rashes, sore throat and more.

It's like having a doctor on call whenever you need medical advice. Access is only a call or click away!

## Telehealth Monthly Premiums

Employee + Family

\$9.00

# Dental Insurance



Metlife | <https://mybenefits.metlife.com> | 800-275-3648

Taking care of your oral health is not a luxury, it is a necessity to long-term optimal health. Dental insurance can greatly reduce your costs when it comes to preventative, restorative, and emergency procedures. Review the plan benefits to see which option is best for you and your family's dental needs. A range of procedures may be covered, such as:

- Comprehensive Exams
- Cleanings
- X-Rays
- Fillings
- Tooth Extractions
- General Anesthesia
- Crown
- Root Canals

Dental Monthly Premiums			
	Low	Mid	High
Employee Only	\$17.15	\$35.14	\$48.47
Employee + 1 Dependent	\$33.82	\$71.23	\$96.66
Employee + 2 or more Dependents	\$59.50	\$119.91	\$155.06

## Dental

Metropolitan Life Insurance Company

### Plan Design for: Fredericksburg Isd

**Original Plan Effective Date: September 1, 2026**

#### Network: PDP Plus

The Preferred Dentist Program was designed to help you get the dental care you need and help lower your costs. You get benefits for a wide range of covered services — both in and out of the network. The goal is to deliver cost-effective protection for a healthier smile and a healthier you.

Coverage Type:	In-Network <sup>1</sup> % of Negotiated Fee <sup>2</sup>	Out-of-Network <sup>1</sup> % of R&C Fee <sup>4</sup>
<b>Type A</b> - Preventive	100%	100%
<b>Type B</b> - Basic Restorative	80%	80%
<b>Type C</b> - Major Restorative	0%	0%
<b>Deductible<sup>3</sup></b>		
Individual	\$75	\$75
Family	\$225	\$225
<b>Annual Maximum Benefit:</b>		
Per Individual	\$1000	\$1000
<b>Dependent Age:</b>	Eligible for benefits until the day that he or she turns 26.	
<p>1. "In-Network Benefits" refers to benefits provided under this plan for covered dental services that are provided by a participating dentist. "Out-of-Network Benefits" refers to benefits provided under this plan for covered dental services that are not provided by a participating dentist. Utilizing an out-of-network dentist for care may cost you more than using an in-network dentist.</p> <p>2. Negotiated fees refer to the fees that in-network dentists have agreed to accept as payment in full for certain services, subject to any co-payments, deductibles, cost sharing and benefits maximums. Negotiated fees are subject to change. Negotiated fees do not apply to non-covered services in states that prohibit limitations for services not covered under a plan. Participating providers in these states may charge their non-negotiated fees for non-covered services.</p> <p>3. Applies to Type B and C services only.</p> <p>4. Out-of-network benefits are payable for services rendered by a dentist who is not a participating provider. The Reasonable and Customary charge is based on the lowest of:</p> <ul style="list-style-type: none"> <li>the dentist's actual charge (the 'Actual Charge'),</li> <li>the dentist's usual charge for the same or similar services (the 'Usual Charge') or</li> <li>the usual charge of most dentists in the same geographic area for the same or similar services as determined by MetLife (the 'Customary Charge'). For your plan, the Customary Charge is based on the 90th percentile. Services must be necessary in terms of generally accepted dental standards.</li> </ul>		

## Dental

Metropolitan Life Insurance Company

### Plan Design for: Fredericksburg Isd

**Original Plan Effective Date: September 1, 2026**

#### Network: PDP Plus

The Preferred Dentist Program was designed to help you get the dental care you need and help lower your costs. You get benefits for a wide range of covered services — both in and out of the network. The goal is to deliver cost-effective protection for a healthier smile and a healthier you.

Coverage Type:	In-Network <sup>1</sup> % of Negotiated Fee <sup>2</sup>	Out-of-Network <sup>1</sup> % of R&C Fee <sup>4</sup>
<b>Type A</b> - Preventive	100%	100%
<b>Type B</b> - Basic Restorative	80%	80%
<b>Type C</b> - Major Restorative	50%	50%
<b>Type D</b> - Orthodontia	50%	50%
<b>Deductible<sup>3</sup></b>		
Individual	\$50	\$50
Family	\$150	\$150
<b>Annual Maximum Benefit:</b>		
Per Individual	\$1500	\$1500
<b>Orthodontia Lifetime Maximum - Ortho applies to Adult and Child</b>	Up to dependent age limit	
	\$1000 per Person	\$1000 per Person
<b>Dependent Age:</b>	Eligible for benefits until the day that he or she turns 26.	
<p>1. "In-Network Benefits" refers to benefits provided under this plan for covered dental services that are provided by a participating dentist. "Out-of-Network Benefits" refers to benefits provided under this plan for covered dental services that are not provided by a participating dentist. Utilizing an out-of-network dentist for care may cost you more than using an in-network dentist.</p> <p>2. Negotiated fees refer to the fees that in-network dentists have agreed to accept as payment in full for certain services, subject to any co-payments, deductibles, cost sharing and benefits maximums. Negotiated fees are subject to change. Negotiated fees do not apply to non-covered services in states that prohibit limitations for services not covered under a plan. Participating providers in these states may charge their non-negotiated fees for non-covered services.</p> <p>3. Applies to Type B and C services only.</p> <p>4. Out-of-network benefits are payable for services rendered by a dentist who is not a participating provider. The Reasonable and Customary charge is based on the lowest of:</p> <ul style="list-style-type: none"> <li>the dentist's actual charge (the 'Actual Charge'),</li> <li>the dentist's usual charge for the same or similar services (the 'Usual Charge') or</li> <li>the usual charge of most dentists in the same geographic area for the same or similar services as determined by MetLife (the 'Customary Charge'). For your plan, the Customary Charge is based on the 90th percentile. Services must be necessary in terms of generally accepted dental standards.</li> </ul>		

## Dental

Metropolitan Life Insurance Company

### Plan Design for: Fredericksburg Isd

**Original Plan Effective Date: September 1, 2026**

#### Network: PDP Plus

The Preferred Dentist Program was designed to help you get the dental care you need and help lower your costs. You get benefits for a wide range of covered services — both in and out of the network. The goal is to deliver cost-effective protection for a healthier smile and a healthier you.

Coverage Type:	In-Network <sup>1</sup> % of Negotiated Fee <sup>2</sup>	Out-of-Network <sup>1</sup> % of R&C Fee <sup>4</sup>
<b>Type A</b> - Preventive	100%	100%
<b>Type B</b> - Basic Restorative	80%	80%
<b>Type C</b> - Major Restorative	50%	50%
<b>Type D</b> - Orthodontia	50%	50%
<b>Deductible<sup>3</sup></b>		
Individual	\$50	\$50
<b>Annual Maximum Benefit:</b>		
Per Individual	\$1750	\$1750
<b>Orthodontia Lifetime Maximum - Ortho applies to Adult and Child</b>	Up to dependent age limit	
	\$1000 per Person	\$1000 per Person
<b>Dependent Age:</b>	Eligible for benefits until the day that he or she turns 26.	
<p>1. "In-Network Benefits" refers to benefits provided under this plan for covered dental services that are provided by a participating dentist. "Out-of-Network Benefits" refers to benefits provided under this plan for covered dental services that are not provided by a participating dentist. Utilizing an out-of-network dentist for care may cost you more than using an in-network dentist.</p> <p>2. Negotiated fees refer to the fees that in-network dentists have agreed to accept as payment in full for certain services, subject to any co-payments, deductibles, cost sharing and benefits maximums. Negotiated fees are subject to change. Negotiated fees do not apply to non-covered services in states that prohibit limitations for services not covered under a plan. Participating providers in these states may charge their non-negotiated fees for non-covered services.</p> <p>3. Applies to Type B and C services only.</p> <p>4. Out-of-network benefits are payable for services rendered by a dentist who is not a participating provider. The Reasonable and Customary charge is based on the lowest of:</p> <ul style="list-style-type: none"> <li>the dentist's actual charge (the 'Actual Charge'),</li> <li>the dentist's usual charge for the same or similar services (the 'Usual Charge') or</li> <li>the usual charge of most dentists in the same geographic area for the same or similar services as determined by MetLife (the 'Customary Charge'). For your plan, the Customary Charge is based on the 90th percentile. Services must be necessary in terms of generally accepted dental standards.</li> </ul>		

# Vision Insurance

Ameritas | [www.ameritas.com](http://www.ameritas.com) | 800-487-5553

Proper vision care is essential to your overall well-being. Regular eye exams at any age will help prevent eye disease and keep your vision strong for years to come.

Your employer provides you with a vision plan to take care of you and your family's needs. You must enroll in the vision plan each plan year and premiums are typically paid through payroll deduction. Here are just a few of the areas where you will save money with your plan:

- Eye Exams
- Eyeglasses
- Contact lenses
- Eye surgeries
- Vision correction

Vision Monthly Premium		
	Low	High
Employee Only	\$5.81	\$9.52
Employee + One	\$11.04	\$17.60
Employee + Family	\$16.20	\$25.84



### Low Vision Plan Summary

Effective Date: 9/1/2026

	EyeMed Insight Network	Out of Network
<b>Deductibles</b>		
	\$10 Exam	No deductible
	\$25 Eye Glass Lenses	
	Covered in full	Up to \$35
<b>Annual Eye Exam</b>		
<b>Lenses (per pair)</b>		
<b>Single Vision</b>	Covered in full	Up to \$25
<b>Bifocal</b>	Covered in full	Up to \$40
<b>Trifocal</b>	Covered in full	Up to \$55
<b>Lenticular</b>	20% discount	No benefit
<b>Progressive</b>	See lens options	NA
<b>Contacts</b>		
<b>Fit &amp; Follow Up Exams</b>		
Standard	Standard: Member cost up to \$40	No benefit
Premium (Allowance)	Premium: 10% off of retail	No benefit
<b>Elective</b>	Up to \$130	Up to \$104
<b>Medically Necessary</b>	Covered in full	Up to \$200
<b>Frame Allowance</b>	\$130	Up to \$65
<b>Frequencies (months)</b>		
Exam/Lens/Frame	12/12/24	12/12/24
	Based on date of service	Based on date of service

### Lens Options (member cost)

	EyeMed Insight Network	Out of Network
<b>Progressive Lenses</b>		
Standard	\$65 + lens deductible	No benefit
Premium		
Tier 1	\$85 + lens deductible	No benefit
Tier 2	\$95 + lens deductible	No benefit
Tier 3	\$110 + lens deductible	No benefit
Tier 4	\$65 plus 80% of charge less \$120 allowance	No benefit
<b>Std. Polycarbonate</b>	\$40	No benefit
<b>Tint (solid and gradient)</b>	\$15	No benefit
<b>Scratch Resistant Coating</b>	\$15	No benefit
<b>Anti-Reflective Coating</b>		
Standard	\$45	No benefit
Premium		
Tier 1	\$57	No benefit
Tier 2	\$68	No benefit
Tier 3	80% of the charge	No benefit
<b>Ultraviolet Coating</b>	\$15	No benefit
<b>Plastic Photochromatic/Transition</b>	\$75	No benefit
<b>Lasik or PRK</b>	Average discount of 15% off retail price or 5% off promotional price at US Laser Network participating providers.	No benefit

### Monthly Rates

Employee Only (EE)	\$5.81
EE + 1 Dependent	\$11.04
EE + 2 or more Dependents	\$16.20

### High Vision Plan Summary

Effective Date: 9/1/2026

	EyeMed Insight Network	Out of Network
<b>Deductibles</b>		
	\$10 Exam	No deductible
	\$25 Eye Glass Lenses	
	Covered in full	Up to \$35
<b>Annual Eye Exam</b>		
<b>Lenses (per pair)</b>		
<b>Single Vision</b>	Covered in full	Up to \$25
<b>Bifocal</b>	Covered in full	Up to \$40
<b>Trifocal</b>	Covered in full	Up to \$55
<b>Lenticular</b>	20% discount	No benefit
<b>Progressive</b>	See lens options	NA
<b>Contacts</b>		
<b>Fit &amp; Follow Up Exams</b>		
Standard	Standard: Member cost up to \$40	No benefit
Premium (Allowance)	Premium: 10% off of retail	No benefit
<b>Elective</b>	Up to \$200	Up to \$144
<b>Medically Necessary</b>	Covered in full	Up to \$200
<b>Frame Allowance</b>	\$200	Up to \$90
<b>Frequencies (months)</b>		
Exam/Lens/Frame	12/12/12	12/12/12
	Based on calendar year	Based on calendar year

### Lens Options (member cost)

	EyeMed Insight Network	Out of Network
<b>Progressive Lenses</b>		
Standard	Covered in full	No benefit
Premium		
Tier 1	\$85 + lens deductible	No benefit
Tier 2	\$95 + lens deductible	No benefit
Tier 3	\$110 + lens deductible	No benefit
Tier 4	\$65 plus 80% of charge less \$120 allowance	No benefit
<b>Std. Polycarbonate</b>	\$40	No benefit
<b>Tint (solid and gradient)</b>	\$15	No benefit
<b>Scratch Resistant Coating</b>	Covered in full	No benefit
<b>Anti-Reflective Coating</b>		
Standard	\$45	No benefit
Premium		
Tier 1	\$57	No benefit
Tier 2	\$68	No benefit
Tier 3	80% of the charge	No benefit
<b>Ultraviolet Coating</b>	Covered in full	No benefit
<b>Plastic Photochromatic/Transition</b>	\$75	No benefit
<b>Lasik or PRK</b>	Average discount of 15% off retail price or 5% off promotional price at US Laser Network participating providers.	No benefit

### Monthly Rates

Employee Only (EE)	\$9.52
EE + 1 Dependent	\$17.60
EE + 2 or more Dependents	\$25.84

# Flexible Spending Accounts

First Financial Administrators, Inc. | [www.ffga.com](http://www.ffga.com)  
1-866-853-3539 P.O. Box 161968 | Altamonte Springs, F.L. 32716

## Medical FSA

A Medical Flexible Spending Account (Medical FSA) is an IRS-approved program to help you save taxes and reimburse yourself for out-of-pocket medical expenses not covered under your medical plan. Your employer has chosen the \$680 carryover option for your Medical FSA plan. This option allows you the opportunity to carry over up to \$680 of unclaimed Medical FSA funds into the following plan year. Keep in mind that balances more than \$680 will be forfeited under the use-it-or-lose-it rule.

**Your maximum contribution amount for 2026 is \$3,400.**

### Medical FSA Highlights

- Contributions are automatically deducted from your paycheck on a pre-tax basis, which helps reduce your taxable income and increase your spendable income.
- Your full election will be available to you at the beginning of the plan year.
- Be conservative – any money left in your account at the end of the plan year will be forfeited.
- Use your benefits card to pay for qualified expenses upfront without spending money out of pocket.
- Keep all receipts in case you need to substantiate a claim for tax purposes.

**NOTE: The IRS requires proof that all expenses are eligible. Keep all receipts in case you need to substantiate a claim for tax purposes. Your receipt must include the date of purchase or service, amount you were required to pay after insurance, description of the product or service, merchant or provider name, and the patient's name.**

## Dependent Care FSA

With a Dependent Care Flexible Spending Account, you can set aside part of your pay on a pre-tax basis to pay for eligible dependent care expenses like childcare, babysitters, and adult day care.

**You may allocate up to \$7,500 per tax year for reimbursement of dependent care services.**

**If you are married and file a separate tax return, the limit is \$3,750.**

### Dependent Care FSA Highlights

- Eligible dependents must be claimed as an exemption on your tax return.
- Eligible dependents must be children under age 13 or an adult dependent incapable of self-care.
- Funds become available as contributions are made to your account.
- Keep all receipts in case you need to substantiate a claim for tax purposes.
- Balances will be forfeited at the end of the runoff or grace period.

# Health Savings Account

First Financial Administrators, Inc. | [www.ffga.com](http://www.ffga.com) | 1-866-853-3539  
 P.O. Box 161968 | Altamonte Springs, F.L. 32716

A Health Savings Account (HSA) is a great way to help you control your healthcare costs. It works in conjunction with a qualified High Deductible Health Plan (HDHP) to combine tax-free savings earmarked for qualified medical expenses. An HSA allows you to set aside money to pay for higher deductibles associated with a lower monthly premium HDHP. The money you save in monthly insurance premiums is reserved for eligible medical expenses you incur in the future. Eligible expenses include things like co-pays and deductibles, prescriptions, vision expenses, dental care, therapy and medical supplies.

## Health Savings Account Highlights

- Balances roll over from year to year and earn interest along the way.
- Portable – you keep it even after you leave employment.
- Tax advantages – invest money in mutual funds to grow your tax savings for either future healthcare costs or retirement.
- Pay for expenses with a benefits debit card that gives you immediate access to your money at the time of purchase.
- Expenses also can be reimbursed through our online portal, online bill pay directly to your provider or submitting a distribution request form.
- Receipts are not required for reimbursement but be sure to save them for tax purposes.

## Who Can Participate in an HSA?

- You must be enrolled in a qualified High Deductible Health Plan (HDHP).
- You cannot be enrolled in Tricare or Medicare or covered under your spouse’s traditional (non-HDHP) health care plan.
- You cannot participate in a general purpose Flexible Spending Account (FSA) or Health Reimbursement Arrangement.
- Limited Purpose Flexible Spending Accounts are permitted (dental and vision expenses only).
- You cannot participate if your spouse has a general purpose FSA or HRA at their place of employment.
- You cannot participate if you are being claimed as a dependent on another person’s tax return.

	2025	2026
HSA Contribution Limits	<ul style="list-style-type: none"> <li>• Self: \$4,300</li> <li>• Family: \$8,550</li> </ul>	<ul style="list-style-type: none"> <li>• Self Only: \$4,400</li> <li>• Family: \$8,750</li> </ul>
Health Insurance Deductible Limits	<ul style="list-style-type: none"> <li>• Self Only: \$1,650</li> <li>• Family: \$3,300</li> </ul>	<ul style="list-style-type: none"> <li>• Self Only: \$1,700</li> <li>• Family: \$3,400</li> </ul>

\$1,000 catch-up contributions (age 55 or older)

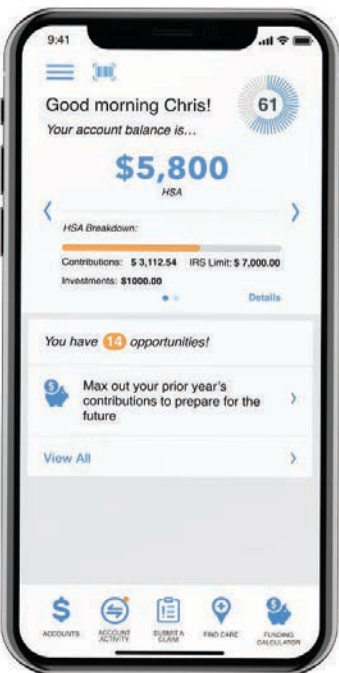
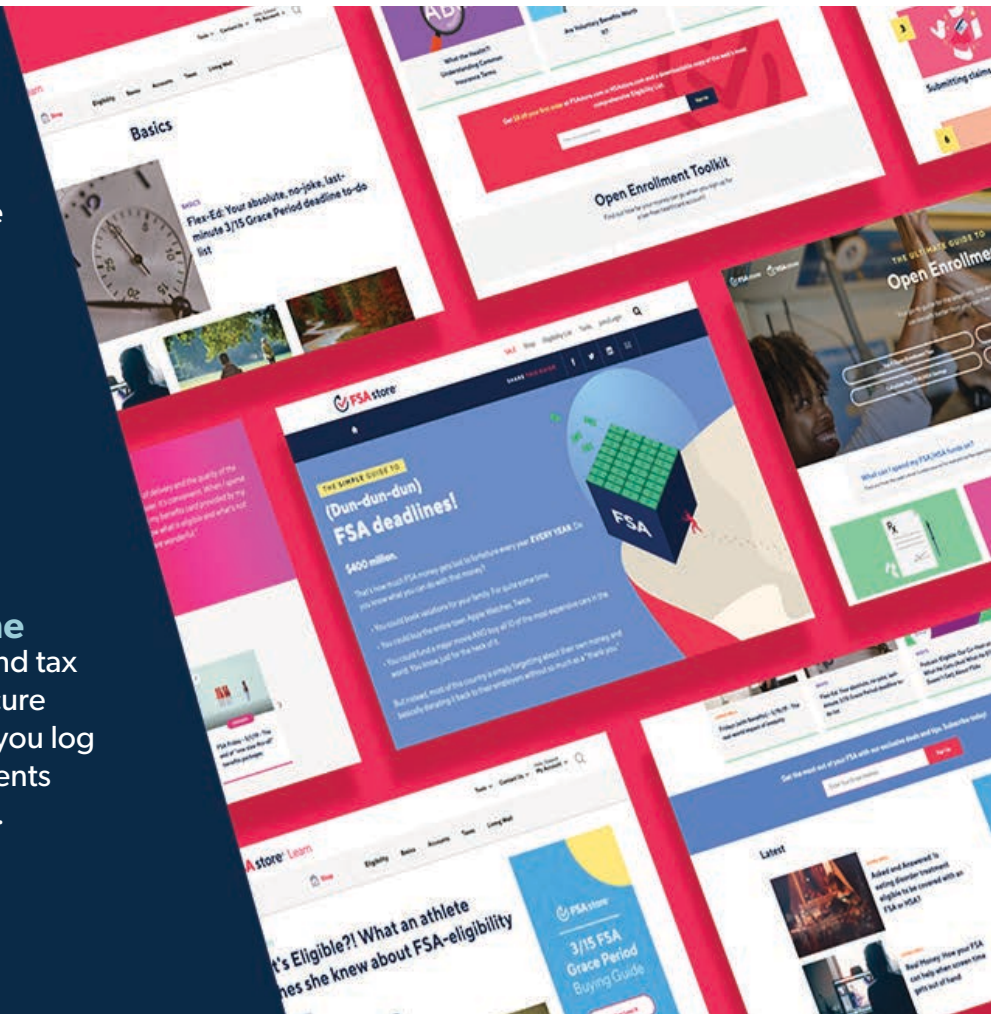
# FSA & HSA Resources

## Benefits Card

The FFGA Benefits Card is available to all employees that participate in a Flexible Spending Account or Health Savings Account. The Benefits Card gives you immediate access to your money at the point of purchase. Cards are available for participating employees, their spouse and any eligible dependents who are at least 18 years old.

## View Your Account Details Online

Sign up to view your account balance, find tax forms and check claims status on our secure website. Log in at [www.ffga.com](http://www.ffga.com). After you log in, you may sign up to have reimbursements directly deposited to your bank account.



## FF Mobile Account App

With the FF Mobile Account App, you can submit claims, view account balance and history, check claims status, view alerts, upload receipts and documentation and more! The FF Mobile Account App is available for Apple® and Android™ devices on either the App Store or Google Play Store.

## FSA/HSA Store

FFGA has partnered with the FSA Store and HSA Store to bring you easy-to-use online stores to better understand and manage your account. You can shop for eligible medical items like bandages and contact solution, browse for products and services using the Eligibility List and visit the Learning Center to find answers to commonly asked questions. Visit the stores at <http://www.ffga.com/individuals/#stores> for more details and special deals.



# Term Life

American Fidelity | [www.americanfidelity.com](http://www.americanfidelity.com) | 800-654-889

Life insurance protects your loved ones. It pays a benefit so they can afford to pay for funeral expenses, pay off debt and maintain their current standard of living. It is one of the best ways to show you care. During this year's open enrollment, you can increase your life insurance protection with a Term Life plan offered by your employer

- Term life insurance is term life coverage you can purchase in addition to Permanent life insurance. It will cover you for the term life of the policy even if you leave the district.
- Plan amounts are offered in tiers so you can choose the amount of coverage that works best for you and your family.
- You can cover your dependents.
- Because it's a group plan, premiums are typically lower, so it's more affordable to gain the peace of mind that life insurance provides.
- You have the option to add riders to your policy, such as Accidental Death and Dismemberment Rider and Accelerated Benefit Rider for Long Term Care Illness.



# Strengthen Your Family's Financial Plan

Life insurance is an essential piece of a robust financial plan. While there is no replacement for losing a loved one, **Term Life Insurance** can help protect your family in your absence. It supplies short-term coverage at a competitive price. Term Life Insurance can help fill temporary needs for those on a limited budget.



Life insurance provided by your employer is a significant benefit. However, it may not be enough protection to provide for your loved ones.

A term life policy can help supplement your existing coverage. Plus, you own this policy, meaning you can take it to a different job or retirement.



## Why You Need Life Insurance

Consider the following expenses when choosing the right life insurance plan for you.

- Final Expenses**  
Funeral Costs • Unpaid Medical Bills
- Income Replacement**  
Mortgage/Rent • Other Loans
- Nest Egg**  
Estate Planning • Retirement Goals

<sup>1</sup>LIMRA: Study Finds COVID-19 Spurs Greater Interest in Life Insurance; March 23, 2021; <sup>2</sup>According to the 2023 Insurance Barometer Study by LIMRA and Life Happens LIMRA: 2023 Insurance Barometer Study; May 5, 2023; P7.

**Term Life Insurance** is a great option for your working and earning years when costs are usually at their highest.

Premiums will remain the same for the initial term period selected.<sup>3</sup>The death benefit will not change for the life of the policy, and death benefits are generally paid tax free.

## Three Easy Steps to Get Covered

- 1 Select a Term Period**  
Choose from a 10, 20, or 30 year term.
- 2 Answer Three Health Questions<sup>4</sup>**  
Only three health questions are required to issue coverage. You do not have to take part in any invasive medical exams.
- 3 Get Death Benefit Coverage Immediately<sup>5</sup>**  
Your death benefit coverage starts when you sign the application.

<sup>3</sup>Rates will be adjusted on each renewed term period. <sup>4</sup>Issuance of the policy may depend on the answer to these questions. <sup>5</sup>Interim coverage for death will be in force from the date your application is signed if, on such date, the proposed insured is insurable per our underwriting guidelines for the requested coverage per the terms of the policy. This interim coverage for death will remain in force until the earlier of 1) the date a policy becomes effective, 2) the date we decline the application, or 3) the date we notify the proposed insured that they are ineligible for interim coverage. The employee and/or spouse must remain actively at work during the interim coverage period. If the death of the proposed insured occurs during the interim coverage period, the first month's premium will be subtracted from the policy proceeds. Interim coverage is only for death benefits under the base policy, Children's Term Rider and Spouse Term Rider. No interim coverage benefits are available under any Waiver of Premium Rider, Accidental Death and Dismemberment Rider, or Accelerated Benefit Rider for Long Term Illness. <sup>6</sup>Example is based on a 20-year term, monthly, non-tobacco, base policy with no attached riders. See your American Fidelity account manager for specific ages, rates, term periods or face amounts. <sup>7</sup>Premiums remain level for the initial term period selected. If you choose the 10 or 20-Year Term Life Plan, the renewal date will be every 10 or 20 years until the policy anniversary following age 70 or 60, respectively. Thereafter, premiums are renewable annually. The 30-Year Term Life Plan is renewable annually after the initial term period. All term plans expire on the policy anniversary following age 90. Rates will be adjusted on each renewed term period.

EMPLOYEE ISSUE AGES
<p>10 Year Term: 17-65  20 Year Term: 17-60  30 Year Term: 17-50</p>
EMPLOYEE ISSUE MAXIMUM
<p>Ages 17-49: \$300,000  Ages 50-65: \$100,000</p>
GUARANTEED LEVEL DEATH BENEFIT
<p>Receive the full face amount of your policy provided no accelerated benefits are paid.</p>

SPOUSE ISSUE AGES AND MAXIMUMS
<p>Ages 17-49: \$50,000  Ages 50-60: \$25,000</p>
RATES BASED ON ISSUE AGE AND TOBACCO STATUS
<p>Premiums will be based on your age on the date your policy becomes effective. You may be eligible for reduced rates if you are a non-tobacco user.</p>
RENEWABLE AND CONVERTIBLE <sup>7</sup>
<p>Renew your coverage to age 90. You may convert to a whole life policy before age 70.</p>

# Enhance Your Plan

## Waiver of Premium Rider

This rider waives the premium if the base insured becomes totally disabled, as defined in the rider, for at least six consecutive months. Premiums are waived for the base policy and any attached riders. The issue age is 17-60. The rider terminates at age 65.

## Accidental Death and Dismemberment Rider

This rider provides coverage upon death, dismemberment, or paralysis of the base insured before age 70 if such death, dismemberment, or paralysis results from accidental causes, as defined in the rider. This rider also provides an additional 10% seat belt benefit if the police accident report certifies the base insured was wearing a properly fastened seat belt at the time of death. Benefits are payable once per covered accident.

## Spouse Term Rider

This rider provides Term Life Insurance coverage for your spouse. The premiums for this rider are based on the spouse's age and tobacco usage. Coverage may be renewed for each additional renewal period up to the spouse's age of 90 while the base policy is active. Premiums are guaranteed to remain the same during the initial term period. <sup>7</sup>Premiums adjust upon renewal. The face amount must be equal to or less than the base policy.

## Children's Term Rider

This rider provides Term Life Insurance protection for all eligible children between the ages of one month through 19. Three benefit levels are available: \$10,000, \$20,000, and \$30,000. Coverage remains on each child until age 26 or the child's marriage before age 26. Your covered child may also convert this rider for up to five times the amount of coverage (subject to a \$100,000 limit) to any form of permanent insurance offered by American Fidelity. One premium covers all eligible children.

### Accelerated Benefit Rider for Long Term Illness

(Available with 30-Year Term Life Only)

This rider provides for two equal advances of a portion of the base policy's death benefit due to a Long Term Illness if we receive satisfactory proof of Long Term Illness before each annual payment. Coverage is available on the base insured only.

SAMPLE 20-YEAR TERM NON-TOBACCO MONTHLY PREMIUM RATES <sup>6</sup>					
	\$25K*	\$50K*	\$100K	\$150K	\$300K
25	\$6.50	\$9.00	\$16.00	\$20.00	\$38.00
35	\$7.50	\$11.50	\$21.00	\$27.50	\$53.00
45	\$11.75	\$20.50	\$39.00	\$56.00	\$110.00
55	\$25.25	\$38.50	\$75.00	n/a	n/a

\*Shaded amounts available for spouse base policy purchases.  
Premium and amount of benefits vary dependent upon level selected at time of application.

Social Security numbers are required at the time of application for spouses and dependents.  
Additional riders are subject to our general underwriting criteria and coverage is not guaranteed. Rider availability may vary by state.

Third Party Notice: The owner has the right to designate a third party to receive notice of lapse or termination of an individual life insurance policy due to nonpayment of premium. Such notice will be sent to the policy owner and the third party at least 30 calendar days before cancellation. This designation may be done at this time, or at any time the policy is in force. Please contact us to request a form to designate, change or update this information at a later date. M3437.R118

# Texas Life

## Permanent Life



Texas Life | [www.texaslife.com](http://www.texaslife.com) | 800-283-9233

### **Texas Life Insurance - Permanent, Portable Life Insurance**

The peace of mind voluntary, permanent life insurance provides is unmatched. It is a solid companion to your group life insurance plan. Texas Life provides life insurance that you can keep for a lifetime. The plan is easy to purchase, pay for, and keep through the convenience of payroll deduction. Coverage is affordable and dependable. Plus, Texas Life has over a century of experience protecting families and giving the peace of mind only permanent life insurance can provide.

### **Texas Life - Permanent Life Highlights**

- You own the policy, even if you change jobs or retire.
- The policy remains in force until you die or up to age 121 if you pay the necessary premium on time.
- It is a permanent, universal life policy which means you can rest easy knowing your loved ones will be well taken care of when you're gone.

# WOW!

## VOLUNTARY PERMANENT LIFE INSURANCE YOU CAN KEEP

PURELIFE-PLUS

### Highlights



#### PORTABLE

Take it with you when you change jobs or retire<sup>1</sup>



#### EASY TO PAY

Pay for it through convenient payroll deductions



#### NO EXAMS

Qualify by answering just 3 questions<sup>2</sup>



#### COVER DEPENDENTS

Cover your spouse, children and grandchildren<sup>3</sup>



#### TERMINAL ILLNESS BENEFIT

Get a living benefit if you become terminally ill<sup>4</sup>



#### CHRONIC ILLNESS BENEFIT

Cover care expenses if you become chronically ill, if selected<sup>5</sup>

**TEXASLIFE**  
INSURANCE COMPANY

**IFFGA**  
Benefit Solutions Simplified



## The Ideal Complement

Our voluntary permanent life insurance product can be an ideal complement to the group term and optional term life insurance your employer might provide. This voluntary permanent universal life product is yours to keep, even when you change jobs or retire, as long as you pay the necessary premium. Group and voluntary term life insurance may be portable if you change jobs, but even if you can keep them after you retire, they usually cost more and decline in death benefit.

## No Exams Or Needles!

You can qualify by answering just 3 quick questions.<sup>2</sup>

During the last six months, has the proposed insured:

1. Been actively at work on a full time basis, performing usual duties?
2. Been absent from work due to illness or medical treatment for a period of more than 5 consecutive working days?
3. Been disabled or received tests, treatment or care of any kind in a hospital or nursing home or received chemotherapy, hormonal therapy for cancer, radiation, dialysis treatment, or treatment for alcohol or drug abuse?

## Product Features

- **High Death Benefit.** Written on a minimal cash-value Universal Life frame, PURELIFE-PLUS features one of the highest death benefits per payroll-deducted dollar offered at the worksite.<sup>6</sup>
- **Refund of Premium.** Unique in the workplace, PURELIFE-PLUS offers you a refund of 10 years' premium, should you surrender the contract if initial specified premium paid for ever increases. (*Conditions apply.*)
- **Minimal Cash Value.** Designed to provide a high death benefit at a reasonable premium, PURELIFE-PLUS helps provide peace of mind for you and your beneficiaries while freeing investment dollars to be directed toward such tax-favored retirement plans as 403(b), 457 and 401(k).
- **Long Guarantees.** Enjoy the assurance of a contract that has a guaranteed death benefit to age 121 and level premium for a significant period of time (after the premium guaranteed period, premiums may go down, stay the same, or go up).<sup>7</sup>

# Additional Benefits

## Accidental Death Benefit Rider

Included in the contract at the option of your employer, the Accidental Death Benefit Rider covers all employees and spouses between the ages of 17-59.<sup>9</sup> This rider costs \$0.08 per \$1,000 of the contract's face amount per month and pays the insured's beneficiary double the death benefit<sup>10</sup> if the insured dies within 180 days of an accident from injuries incurred in that accident.<sup>11</sup> The benefit is payable through the insured's age 65. See the complete list of exceptions to coverage on the back page.

## Accelerated Death Benefit Due to Terminal Illness Rider<sup>4</sup>

Should you be diagnosed as terminally ill with the expectation of death within 12 months, you will have the option to receive 92% of the death benefit, minus a \$150 administrative fee. Included with your contract at no additional cost, this valuable living benefit helps give you peace of mind knowing that, should you need it, you can take the large majority of your death benefit while still alive.

## Accelerated Death Benefit Due To Chronic Illness Rider

This valuable living benefit will be included upon approval in the life contract for employees and their spouses at an additional cost.<sup>5</sup> This rider can help offset the unplanned expense of care should the insured be faced with a qualifying disabling chronic illness or Severe Cognitive Impairment. Here's how it works:

- If, for a period of 90 days, you're no longer able to perform any two of the six Activities of Daily Living or if you suffer Severe Cognitive Impairment, you can receive a living benefit.<sup>12</sup>
  - Example: You own a \$100,000 Texas Life insurance policy with the Chronic Illness rider. A medical professional certifies that you can no longer perform two of the six Activities of Daily Living or have suffered Severe Cognitive Impairment. You can apply for a lump sum of \$92,000 minus a \$150 administrative fee.<sup>13</sup>
- The money is yours to do with as you choose: you do not have to go to a nursing home, convalescent center or receive home health care to receive the cash.
- The cost to add this valuable living benefit to your life insurance policy is minimal – just 10% of the policy's base premium.

See last page for disclosures and footnotes

*According to the Center for Disease Control, accidents continue to be a leading cause of death in the U.S.<sup>8</sup>*



**PureLife-plus — Standard Risk Table Premiums — Non-Tobacco — Express Issue**

Issue Age (ALB)	Monthly Premiums for Life Insurance Face Amounts Shown									GUARANTEED PERIOD Age to Which Coverage is Guaranteed at Table Premium
	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	
17-20		13.05	23.85	34.65	45.45	67.05	88.65	110.25	131.85	75
21-22		13.33	24.40	35.48	46.55	68.70	90.85	113.00	135.15	74
23		13.60	24.95	36.30	47.65	70.35	93.05	115.75	138.45	75
24-25		13.88	25.50	37.13	48.75	72.00	95.25	118.50	141.75	74
26		14.43	26.60	38.78	50.95	75.30	99.65	124.00	148.35	75
27-28		14.70	27.15	39.60	52.05	76.95	101.85	126.75	151.65	74
29		14.98	27.70	40.43	53.15	78.60	104.05	129.50	154.95	74
30-31		15.25	28.25	41.25	54.25	80.25	106.25	132.25	158.25	73
32		16.08	29.90	43.73	57.55	85.20	112.85	140.50	168.15	74
33		16.63	31.00	45.38	59.75	88.50	117.25	146.00	174.75	74
34		17.45	32.65	47.85	63.05	93.45	123.85	154.25	184.65	75
35		18.55	34.85	51.15	67.45	100.05	132.65	165.25	197.85	76
36		19.10	35.95	52.80	69.65	103.35	137.05	170.75	204.45	76
37		19.93	37.60	55.28	72.95	108.30	143.65	179.00	214.35	77
38		20.75	39.25	57.75	76.25	113.25	150.25	187.25	224.25	77
39		22.13	42.00	61.88	81.75	121.50	161.25	201.00	240.75	78
40	10.75	23.50	44.75	66.00	87.25	129.75	172.25	214.75	257.25	79
41	11.52	25.43	48.60	71.78	94.95	141.30	187.65	234.00	280.35	80
42	12.40	27.63	53.00	78.38	103.75	154.50	205.25	256.00	306.75	81
43	13.17	29.55	56.85	84.15	111.45	166.05	220.65	275.25	329.85	82
44	13.94	31.48	60.70	89.93	119.15	177.60	236.05	294.50	352.95	83
45	14.71	33.40	64.55	95.70	126.85	189.15	251.45	313.75	376.05	83
46	15.59	35.60	68.95	102.30	135.65	202.35	269.05	335.75	402.45	84
47	16.36	37.53	72.80	108.08	143.35	213.90	284.45	355.00	425.55	84
48	17.13	39.45	76.65	113.85	151.05	225.45	299.85	374.25	448.65	85
49	18.12	41.93	81.60	121.28	160.95	240.30	319.65	399.00	478.35	85
50	19.22	44.68	87.10	129.53	171.95					86
51	20.54	47.98	93.70	139.43	185.15					87
52	21.97	51.55	100.85	150.15	199.45					88
53	23.07	54.30	106.35	158.40	210.45					88
54	24.17	57.05	111.85	166.65	221.45					88
55	25.38	60.08	117.90	175.73	233.55					89
56	26.48	62.83	123.40	183.98	244.55					89
57	27.80	66.13	130.00	193.88	257.75					89
58	29.01	69.15	136.05	202.95	269.85					89
59	30.33	72.45	142.65	212.85	283.05					89
60	31.18	74.58	146.90	219.23	291.55					90
61	32.61	78.15	154.05	229.95	305.85					90
62	34.37	82.55	162.85	243.15	323.45					90
63	36.13	86.95	171.65	256.35	341.05					90
64	38.00	91.63	181.00	270.38	359.75					90
65	40.09	96.85	191.45	286.05	380.65					90
66	42.40									90
67	44.93									91
68	47.68									91
69	50.43									91
70	53.29									91

**CHILDREN AND GRANDCHILDREN (NON-TOBACCO)**  
with Accidental Death Rider  
Grandchild coverage available through age 18.

Issue Age	Premium		Guaranteed Period
	\$25,000	\$50,000	
15D-1	9.25	16.25	81
2-4	9.50	16.75	80
5-8	9.75	17.25	79
9-10	10.00	17.75	79
11-16	10.25	18.25	77
17-20	12.25	22.25	75
21-22	12.50	22.75	74
23	12.75	23.25	75
24-25	13.00	23.75	74
26	13.50	24.75	75

**Indicates Spouse Coverage Available**

PureLife-plus is permanent life insurance to Attained Age 121 that can never be cancelled as long as you pay the necessary premiums. After the Guaranteed Period, the premiums can be lower, the same, or higher than the Table Premium. See the brochure under "Permanent Coverage".

Form ICC18-PRFNG-NI-18, Form Series PRFNG-NI-18 or PRFNG-NI-20-OHIO

Accelerated Death Benefit for Chronic Illness Rider Form ICC15-ULABR-CI-15, ULABR-CI-15 or CA-ULABR-CI-18

Accidental Death Benefit Form ICC 07-ULCL-ADB-07 or Form Series ULCL-ADB-07

**PureLife-plus – Standard Risk Table Premiums – Tobacco – Express Issue**

Issue Age (ALB)	Monthly Premiums for Life Insurance Face Amounts Shown									GUARANTEED PERIOD Age to Which Coverage is Guaranteed at Table Premium
	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	
17-20		18.55	34.85	51.15	67.45	100.05	132.65	165.25	197.85	71
21-22		19.38	36.50	53.63	70.75	105.00	139.25	173.50	207.75	71
23		20.20	38.15	56.10	74.05	109.95	145.85	181.75	217.65	72
24-25		20.75	39.25	57.75	76.25	113.25	150.25	187.25	224.25	71
26		21.30	40.35	59.40	78.45	116.55	154.65	192.75	230.85	72
27-28		21.85	41.45	61.05	80.65	119.85	159.05	198.25	237.45	71
29		22.13	42.00	61.88	81.75	121.50	161.25	201.00	240.75	71
30-31		24.88	47.50	70.13	92.75	138.00	183.25	228.50	273.75	72
32		25.70	49.15	72.60	96.05	142.95	189.85	236.75	283.65	72
33		25.98	49.70	73.43	97.15	144.60	192.05	239.50	286.95	72
34		26.25	50.25	74.25	98.25	146.25	194.25	242.25	290.25	71
35		28.18	54.10	80.03	105.95	157.80	209.65	261.50	313.35	72
36		29.00	55.75	82.50	109.25	162.75	216.25	269.75	323.25	72
37		30.93	59.60	88.28	116.95	174.30	231.65	289.00	346.35	73
38		31.75	61.25	90.75	120.25	179.25	238.25	297.25	356.25	73
39		33.95	65.65	97.35	129.05	192.45	255.85	319.25	382.65	74
40	16.14	36.98	71.70	106.43	141.15	210.60	280.05	349.50	418.95	76
41	17.13	39.45	76.65	113.85	151.05	225.45	299.85	374.25	448.65	77
42	18.34	42.48	82.70	122.93	163.15	243.60	324.05	404.50	484.95	78
43	19.88	46.33	90.40	134.48	178.55	266.70	354.85	443.00	531.15	80
44	20.65	48.25	94.25	140.25	186.25	278.25	370.25	462.25	554.25	80
45	21.75	51.00	99.75	148.50	197.25	294.75	392.25	489.75	587.25	81
46	22.63	53.20	104.15	155.10	206.05	307.95	409.85	511.75	613.65	81
47	23.73	55.95	109.65	163.35	217.05	324.45	431.85	539.25	646.65	82
48	24.72	58.43	114.60	170.78	226.95	339.30	451.65	564.00	676.35	82
49	26.15	62.00	121.75	181.50	241.25	360.75	480.25	599.75	719.25	83
50	27.36	65.03	127.80	190.58	253.35					83
51	28.57	68.05	133.85	199.65	265.45					83
52	30.33	72.45	142.65	212.85	283.05					84
53	31.87	76.30	150.35	224.40	298.45					85
54	33.30	79.88	157.50	235.13	312.75					85
55	34.84	83.73	165.20	246.68	328.15					85
56	36.60	88.13	174.00	259.88	345.75					85
57	38.36	92.53	182.80	273.08	363.35					86
58	40.23	97.20	192.15	287.10	382.05					86
59	42.10	101.88	201.50	301.13	400.75					86
60	43.28	104.83	207.40	309.98	412.55					86
61	45.81	111.15	220.05	328.95	437.85					86
62	48.23	117.20	232.15	347.10	462.05					87
63	50.65	123.25	244.25	365.25	486.25					87
64	53.07	129.30	256.35	383.40	510.45					87
65	55.71	135.90	269.55	403.20	536.85					87
66	58.57									88
67	61.65									88
68	64.84									88
69	68.25									88
70	71.88									89

**CHILDREN AND GRANDCHILDREN (TOBACCO)**  
 with Accidental Death Rider  
 Grandchild coverage available through age 18.

PureLife-plus is permanent life insurance to Attained Age 121 that can never be cancelled as long as you pay the necessary premiums. After the Guaranteed Period, the premiums can be lower, the same, or higher than the Table Premium. See the brochure under "Permanent Coverage".

Form ICC18-PRFNG-NI-18, Form Series PRFNG-NI-18 or PRFNG-NI-20-OHIO  
 Accelerated Death Benefit for Chronic Illness Rider Form ICC15-ULABR-CI-15, ULABR-CI-15 or CA-ULABR-CI-18  
 Accidental Death Benefit Form ICC 07-ULCL-ADB-07 or Form Series ULCL-ADB-07

Issue Age	Premium		Guaranteed Period
	\$25,000	\$50,000	
17-20	17.25	32.25	71
21-22	18.00	33.75	71
23	18.75	35.25	72
24-25	19.25	36.25	71
26	19.75	37.25	72

**Indicates Spouse Coverage Available**

# Income Protection Insurance

American Fidelity | [www.americanfidelity.com](http://www.americanfidelity.com) | 800-654-8489

## Why Do I Need Income Protection Insurance?

Have you ever wondered what would happen to your income if you had an accidental injury, sickness, or pregnancy? That is why you need disability coverage. It replaces a portion of income for the period you are unable to work due to those reasons. You can choose the benefit amount, which is the amount of your income to replace, and the waiting period that you begin receiving payments.

How do you decide if you need disability insurance? Consider these questions when making your decision:

- How much employer leave do you have?
- Do you have savings?
- Do you have other income you can rely on, such as from your spouse or from child support?
- How close are you to retirement?
- Could you go on Social Security Disability or take a Disability Retirement?
- What are your other sources of income?





# AF™ Long-Term Disability Income Insurance

Enhanced Plus Plans

Marketed by:



EMPLOYER BENEFIT SOLUTIONS FOR YOUR INDUSTRY

## Focus on Recovery, Not Expenses

How would you cover your everyday expenses if you experienced an Injury or Sickness and couldn't work for a period of time? AF™ Long-Term Disability Income Insurance provides a steady benefit to cover everyday expenses while you are unable to work due to a covered Disability.

### Plan Highlights



#### Benefits are Payable Directly to You

You have the freedom to use the funds for your daily expenses such as: groceries, mortgage, daycare, etc.



#### Customized to Meet Your Individual Needs

You can select a benefit amount and elimination period that best meets your financial needs.



#### Return-to-Work Benefit

Employees may receive a partial benefit for going back to work part-time while still on Disability.

### Choose the Right Plan for You

**BENEFITS BEGIN** on the day of Disability due to a covered Injury or Sickness.

Plan I	On the 1st/4th day	Plan IV	On the 61st day
Plan II	On the 15th day	Plan V	On the 91st day
Plan III	On the 31st day	Plan VI	On the 151st day



**Injury** means physical harm or damage to the body you sustained which results directly from an accidental bodily Injury, is independent of disease or bodily infirmity; and takes place while your coverage is active.



**Sickness** means a disease or illness (including pregnancy). Disability must begin while your coverage is active.



**Hospital** - the term "Hospital" shall not include an institution used by you as a place for rehabilitation; a place for rest or for the aged; a nursing or convalescent home; a long-term nursing unit or geriatrics ward; or an extended care facility for the care of convalescent, rehabilitative, or ambulatory patients.



**Disability** or disabled for the first 12 months of Disability means that you are unable to perform the material and substantial duties of your regular occupation. After that, Disability means you are unable to perform the material and substantial duties of any gainful occupation for wage or profit for which you are reasonably qualified by training, education, or experience.

# Benefit Policy Schedule

Several benefit options are available to you. You may participate in the plan under any one of the benefit levels outlined below, provided the Monthly Disability Benefit level selected does not exceed 70% of your monthly compensation.

Monthly Salary	Monthly Disability Benefit	Accidental Death Benefit	Monthly Premiums					
			Plan I (1st/4th)	Plan II (15th)	Plan III (31st)	Plan IV (61st)	Plan V (91st)	Plan VI (151st)
\$286.00 - \$428.99	\$200.00	\$20,000.00	\$10.16	\$7.28	\$5.80	\$4.92	\$4.16	\$3.12
\$429.00 - \$571.99	\$300.00	\$20,000.00	\$15.24	\$10.92	\$8.70	\$7.38	\$6.24	\$4.68
\$572.00 - \$714.99	\$400.00	\$20,000.00	\$20.32	\$14.56	\$11.60	\$9.84	\$8.32	\$6.24
\$715.00 - \$857.99	\$500.00	\$20,000.00	\$25.40	\$18.20	\$14.50	\$12.30	\$10.40	\$7.80
\$858.00 - \$999.99	\$600.00	\$20,000.00	\$30.48	\$21.84	\$17.40	\$14.76	\$12.48	\$9.36
\$1,000.00 - \$1,142.99	\$700.00	\$20,000.00	\$35.56	\$25.48	\$20.30	\$17.22	\$14.56	\$10.92
\$1,143.00 - \$1,285.99	\$800.00	\$20,000.00	\$40.64	\$29.12	\$23.20	\$19.68	\$16.64	\$12.48
\$1,286.00 - \$1,428.99	\$900.00	\$20,000.00	\$45.72	\$32.76	\$26.10	\$22.14	\$18.72	\$14.04
\$1,429.00 - \$1,571.99	\$1,000.00	\$20,000.00	\$50.80	\$36.40	\$29.00	\$24.60	\$20.80	\$15.60
\$1,572.00 - \$1,714.99	\$1,100.00	\$20,000.00	\$55.88	\$40.04	\$31.90	\$27.06	\$22.88	\$17.16
\$1,715.00 - \$1,857.99	\$1,200.00	\$20,000.00	\$60.96	\$43.68	\$34.80	\$29.52	\$24.96	\$18.72
\$1,858.00 - \$1,999.99	\$1,300.00	\$20,000.00	\$66.04	\$47.32	\$37.70	\$31.98	\$27.04	\$20.28
\$2,000.00 - \$2,142.99	\$1,400.00	\$20,000.00	\$71.12	\$50.96	\$40.60	\$34.44	\$29.12	\$21.84
\$2,143.00 - \$2,285.99	\$1,500.00	\$20,000.00	\$76.20	\$54.60	\$43.50	\$36.90	\$31.20	\$23.40
\$2,286.00 - \$2,428.99	\$1,600.00	\$20,000.00	\$81.28	\$58.24	\$46.40	\$39.36	\$33.28	\$24.96
\$2,429.00 - \$2,571.99	\$1,700.00	\$20,000.00	\$86.36	\$61.88	\$49.30	\$41.82	\$35.36	\$26.52
\$2,572.00 - \$2,714.99	\$1,800.00	\$20,000.00	\$91.44	\$65.52	\$52.20	\$44.28	\$37.44	\$28.08
\$2,715.00 - \$2,857.99	\$1,900.00	\$20,000.00	\$96.52	\$69.16	\$55.10	\$46.74	\$39.52	\$29.64
\$2,858.00 - \$2,999.99	\$2,000.00	\$20,000.00	\$101.60	\$72.80	\$58.00	\$49.20	\$41.60	\$31.20
\$3,000.00 - \$3,142.99	\$2,100.00	\$20,000.00	\$106.68	\$76.44	\$60.90	\$51.66	\$43.68	\$32.76
\$3,143.00 - \$3,285.99	\$2,200.00	\$20,000.00	\$111.76	\$80.08	\$63.80	\$54.12	\$45.76	\$34.32
\$3,286.00 - \$3,428.99	\$2,300.00	\$20,000.00	\$116.84	\$83.72	\$66.70	\$56.58	\$47.84	\$35.88
\$3,429.00 - \$3,571.99	\$2,400.00	\$20,000.00	\$121.92	\$87.36	\$69.60	\$59.04	\$49.92	\$37.44
\$3,572.00 - \$3,714.99	\$2,500.00	\$20,000.00	\$127.00	\$91.00	\$72.50	\$61.50	\$52.00	\$39.00
\$3,715.00 - \$3,857.99	\$2,600.00	\$20,000.00	\$132.08	\$94.64	\$75.40	\$63.96	\$54.08	\$40.56
\$3,858.00 - \$3,999.99	\$2,700.00	\$20,000.00	\$137.16	\$98.28	\$78.30	\$66.42	\$56.16	\$42.12
\$4,000.00 - \$4,142.99	\$2,800.00	\$20,000.00	\$142.24	\$101.92	\$81.20	\$68.88	\$58.24	\$43.68
\$4,143.00 - \$4,285.99	\$2,900.00	\$20,000.00	\$147.32	\$105.56	\$84.10	\$71.34	\$60.32	\$45.24
\$4,286.00 - \$4,428.99	\$3,000.00	\$20,000.00	\$152.40	\$109.20	\$87.00	\$73.80	\$62.40	\$46.80
\$4,429.00 - \$4,571.99	\$3,100.00	\$20,000.00	\$157.48	\$112.84	\$89.90	\$76.26	\$64.48	\$48.36
\$4,572.00 - \$4,714.99	\$3,200.00	\$20,000.00	\$162.56	\$116.48	\$92.80	\$78.72	\$66.56	\$49.92
\$4,715.00 - \$4,857.99	\$3,300.00	\$20,000.00	\$167.64	\$120.12	\$95.70	\$81.18	\$68.64	\$51.48
\$4,858.00 - \$4,999.99	\$3,400.00	\$20,000.00	\$172.72	\$123.76	\$98.60	\$83.64	\$70.72	\$53.04
\$5,000.00 - \$5,142.99	\$3,500.00	\$20,000.00	\$177.80	\$127.40	\$101.50	\$86.10	\$72.80	\$54.60
\$5,143.00 - \$5,285.99	\$3,600.00	\$20,000.00	\$182.88	\$131.04	\$104.40	\$88.56	\$74.88	\$56.16
\$5,286.00 - \$5,428.99	\$3,700.00	\$20,000.00	\$187.96	\$134.68	\$107.30	\$91.02	\$76.96	\$57.72
\$5,429.00 - \$5,571.99	\$3,800.00	\$20,000.00	\$193.04	\$138.32	\$110.20	\$93.48	\$79.04	\$59.28

# Benefit Policy Schedule (continued)

Monthly Salary	Monthly Disability Benefit	Accidental Death Benefit	Monthly Premiums					
			Plan I (1st/4th)	Plan II (15th)	Plan III (31st)	Plan IV (61st)	Plan V (91st)	Plan VI (151st)
\$5,572.00 - \$5,714.99	\$3,900.00	\$20,000.00	\$198.12	\$141.96	\$113.10	\$95.94	\$81.12	\$60.84
\$5,715.00 - \$5,857.99	\$4,000.00	\$20,000.00	\$203.20	\$145.60	\$116.00	\$98.40	\$83.20	\$62.40
\$5,858.00 - \$5,999.99	\$4,100.00	\$20,000.00	\$208.28	\$149.24	\$118.90	\$100.86	\$85.28	\$63.96
\$6,000.00 - \$6,142.99	\$4,200.00	\$20,000.00	\$213.36	\$152.88	\$121.80	\$103.32	\$87.36	\$65.52
\$6,143.00 - \$6,285.99	\$4,300.00	\$20,000.00	\$218.44	\$156.52	\$124.70	\$105.78	\$89.44	\$67.08
\$6,286.00 - \$6,428.99	\$4,400.00	\$20,000.00	\$223.52	\$160.16	\$127.60	\$108.24	\$91.52	\$68.64
\$6,429.00 - \$6,571.99	\$4,500.00	\$20,000.00	\$228.60	\$163.80	\$130.50	\$110.70	\$93.60	\$70.20
\$6,572.00 - \$6,714.99	\$4,600.00	\$20,000.00	\$233.68	\$167.44	\$133.40	\$113.16	\$95.68	\$71.76
\$6,715.00 - \$6,857.99	\$4,700.00	\$20,000.00	\$238.76	\$171.08	\$136.30	\$115.62	\$97.76	\$73.32
\$6,858.00 - \$6,999.99	\$4,800.00	\$20,000.00	\$243.84	\$174.72	\$139.20	\$118.08	\$99.84	\$74.88
\$7,000.00 - \$7,142.99	\$4,900.00	\$20,000.00	\$248.92	\$178.36	\$142.10	\$120.54	\$101.92	\$76.44
\$7,143.00 - \$7,285.99	\$5,000.00	\$20,000.00	\$254.00	\$182.00	\$145.00	\$123.00	\$104.00	\$78.00
\$7,286.00 - \$7,428.99	\$5,100.00	\$20,000.00	\$259.08	\$185.64	\$147.90	\$125.46	\$106.08	\$79.56
\$7,429.00 - \$7,571.99	\$5,200.00	\$20,000.00	\$264.16	\$189.28	\$150.80	\$127.92	\$108.16	\$81.12
\$7,572.00 - \$7,714.99	\$5,300.00	\$20,000.00	\$269.24	\$192.92	\$153.70	\$130.38	\$110.24	\$82.68
\$7,715.00 - \$7,857.99	\$5,400.00	\$20,000.00	\$274.32	\$196.56	\$156.60	\$132.84	\$112.32	\$84.24
\$7,858.00 - \$7,999.99	\$5,500.00	\$20,000.00	\$279.40	\$200.20	\$159.50	\$135.30	\$114.40	\$85.80
\$8,000.00 - \$8,142.99	\$5,600.00	\$20,000.00	\$284.48	\$203.84	\$162.40	\$137.76	\$116.48	\$87.36
\$8,143.00 - \$8,285.99	\$5,700.00	\$20,000.00	\$289.56	\$207.48	\$165.30	\$140.22	\$118.56	\$88.92
\$8,286.00 - \$8,428.99	\$5,800.00	\$20,000.00	\$294.64	\$211.12	\$168.20	\$142.68	\$120.64	\$90.48
\$8,429.00 - \$8,571.99	\$5,900.00	\$20,000.00	\$299.72	\$214.76	\$171.10	\$145.14	\$122.72	\$92.04
\$8,572.00 - \$8,713.99	\$6,000.00	\$20,000.00	\$304.80	\$218.40	\$174.00	\$147.60	\$124.80	\$93.60
\$8,714.00 - \$8,856.99	\$6,100.00	\$20,000.00	\$309.88	\$222.04	\$176.90	\$150.06	\$126.88	\$95.16
\$8,857.00 - \$8,999.99	\$6,200.00	\$20,000.00	\$314.96	\$225.68	\$179.80	\$152.52	\$128.96	\$96.72
\$9,000.00 - \$9,142.99	\$6,300.00	\$20,000.00	\$320.04	\$229.32	\$182.70	\$154.98	\$131.04	\$98.28
\$9,143.00 - \$9,285.99	\$6,400.00	\$20,000.00	\$325.12	\$232.96	\$185.60	\$157.44	\$133.12	\$99.84
\$9,286.00 - \$9,428.99	\$6,500.00	\$20,000.00	\$330.20	\$236.60	\$188.50	\$159.90	\$135.20	\$101.40
\$9,429.00 - \$9,570.99	\$6,600.00	\$20,000.00	\$335.28	\$240.24	\$191.40	\$162.36	\$137.28	\$102.96
\$9,571.00 - \$9,713.99	\$6,700.00	\$20,000.00	\$340.36	\$243.88	\$194.30	\$164.82	\$139.36	\$104.52
\$9,714.00 - \$9,856.99	\$6,800.00	\$20,000.00	\$345.44	\$247.52	\$197.20	\$167.28	\$141.44	\$106.08
\$9,857.00 - \$9,999.99	\$6,900.00	\$20,000.00	\$350.52	\$251.16	\$200.10	\$169.74	\$143.52	\$107.64
\$10,000.00 - \$10,142.99	\$7,000.00	\$20,000.00	\$355.60	\$254.80	\$203.00	\$172.20	\$145.60	\$109.20
\$10,143.00 - \$10,285.99	\$7,100.00	\$20,000.00	\$360.68	\$258.44	\$205.90	\$174.66	\$147.68	\$110.76
\$10,286.00 - \$10,428.99	\$7,200.00	\$20,000.00	\$365.76	\$262.08	\$208.80	\$177.12	\$149.76	\$112.32
\$10,429.00 - \$10,570.99	\$7,300.00	\$20,000.00	\$370.84	\$265.72	\$211.70	\$179.58	\$151.84	\$113.88
\$10,571.00 - \$10,713.99	\$7,400.00	\$20,000.00	\$375.92	\$269.36	\$214.60	\$182.04	\$153.92	\$115.44
\$10,714.00 - And Over	\$7,500.00	\$20,000.00	\$381.00	\$273.00	\$217.50	\$184.50	\$156.00	\$117.00

# Cancer Insurance



American Fidelity | [www.americanfidelity.com](http://www.americanfidelity.com) | 800-654-8489

Thousands of Americans are diagnosed with cancer each day. No doubt, the news is devastating, both personally and financially. It's impossible to anticipate a cancer diagnosis, but it is possible to prepare for it with a cancer insurance plan.

It is likely that your major medical coverage will not cover all the costs associated with a cancer diagnosis. Supplementing your major medical with cancer insurance may help you pay for related expenses, such as copays and deductibles, specialists, experimental treatment, specialty hospitals, travel expenses, in-home care and more.

Premiums are paid through convenient payroll deduction to ensure your policy remains in force if you should need it. Benefits are paid directly to you, so you can choose how to spend the money. Visit the Employee Benefits Center and view policy for more details.

Cancer Insurance		
Monthly Premium	Basic	Enhanced Plus
Employee	\$15.80	\$31.62
Employee + Family	\$26.86	\$53.80



## Group Cancer Insurance

## Focus on the fight.

A cancer diagnosis may be both a physical and emotional drain. But thanks to advances in medicine and procedures to treat cancer, more and more people are beating the disease. However, with these advances also comes the continuing rise in the cost of cancer treatment.

**Limited Benefit Group Cancer Insurance** offers a solution to help you and your family focus on fighting the disease.

### Did You Know?

New cancer cases in America are diagnosed at the rate of about 5,255 per day.

*American Cancer Society: Cancer Facts and Figures 2022, P4*

## Plan Benefit Highlights

- **Helps cover expenses**  
for cancer treatment, transportation, hospitalization and more.
- **Benefits are paid directly to you**  
to be used however you see fit.
- **Portable to take with you**  
even if you leave employment.
- **Coverage options are available**  
for you, your spouse and your children under age 26.

## Benefits designed to help cover costs.

With over 25 benefits specifically designed to help with the financial impact of being diagnosed, **Group Cancer Insurance** may help pay for costs not covered by your primary medical insurance.

### Examples:



#### Diagnostic and Prevention

Annual benefit to help pay for covered diagnostic testing or screening. This benefit also qualifies for quick processing.



#### Travel Expenses

This benefit may help pay for qualified transportation and lodging for the patient and family.

# Plan Benefit Highlights

BENEFITS	BASIC	ENHANCED PLUS
<b>Radiation Therapy/Chemotherapy/Immunotherapy</b> Actual charges per 12 month period	\$10,000	\$15,000
<b>Administrative/Lab Work</b> Per calendar month	\$50	\$75
<b>Hormone Therapy</b> Per treatment per calendar month up to a max of 12 per calendar year	\$50	\$50
<b>Experimental Treatment</b>	Paid in the same manner and under the same maximums as any other treatment	
<b>Blood, Plasma, and Platelets Basic:</b> Per day, up to \$10,000 per calendar year <b>Enhanced Plus:</b> Per day, up to \$15,000 per calendar year	\$200	\$300
<b>Medical Imaging</b> Per image up to 2 per calendar year	\$200	\$300
<b>Surgical</b>	\$20 surgical unit/ Max per operation: \$2,000	\$40 surgical unit/ Max per operation: \$4,000
<b>Anesthesia</b>	25% of the amount paid for covered surgery	
<b>Second and Third Surgical Opinion</b> Per diagnosis	\$300	\$300
<b>Outpatient Hospital or Ambulatory Surgical Center</b> Per day of surgery	\$200	\$600
<b>Bone Marrow or Stem Cell Transplant Patient Provided</b> Per calendar year <b>Donor Provided</b> Per calendar year	\$500 \$1,500	\$1,500 \$4,500
<b>Prosthesis and Orthotic and Related Services</b> <b>Surgical</b> 1 per site, lifetime max of 2 devices per covered person <b>Non-surgical</b> 1 per site, lifetime max of 3 devices per covered person <b>Hair Prosthesis</b> Once per life	\$1,000 \$100 \$100	\$2,000 \$200 \$200
<b>Hospital Confinement</b> Per day <b>Day 1-30</b> <b>Day 31+</b>	\$100 \$200	\$300 \$600
<b>U.S. Government/Charity Hospital</b> Paid in lieu of most benefits per day Inpatient and outpatient	\$100	\$300
<b>Extended Care Facility</b> Per day, up to the same number of days of paid hospital confinement	\$100	\$300
<b>Home Health Care</b> Per day, up to the same number of days of paid hospital confinement	\$100	\$300
<b>Hospice Care Basic:</b> Per day, up to \$18,000 lifetime max <b>Enhanced Plus:</b> Per day, up to \$54,000 lifetime max	\$100	\$300
<b>Inpatient Special Nursing Services</b> Per day	\$100	\$300

BENEFITS	BASIC	ENHANCED PLUS
<b>Dread Disease</b> Per day while hospital confined <b>Day 1-30</b> <b>Day 31+</b>	\$100 \$200	\$300 \$600
<b>Donor</b>	\$1,000/donation	
<b>Drugs and Medicine</b> <b>Inpatient</b> Per confinement <b>Outpatient</b> \$50 per prescription up to maximum shown per calendar month	\$50 \$50	\$200 \$100
<b>Attending Physician</b> While hospital confined, per day	\$50	\$50
<b>Transportation &amp; Lodging (Patient &amp; Family Member)</b> <b>Transportation</b> \$1,500 max per round trip, max 12 trips per calendar year <b>Lodging</b> Per day, up to 90 days per calendar year	Coach fare or \$.50/mile by car \$50	Coach fare or \$.50/mile by car \$75
<b>Ambulance</b> <b>Ground</b> Per trip, up to 2 per confinement <b>Air</b> Per trip, up to 2 per confinement	\$200 \$2,000	\$200 \$2,000
<b>Physical or Speech Therapy</b> Per visit, up to 4 per calendar month, lifetime max of \$1,000.	\$50	\$50
<b>Diagnostic and Prevention</b> One per calendar year	\$25	\$75
<b>Cancer Screening Follow-Up</b> One per calendar year	\$25	\$75
<b>Waiver of Premium</b> Employee only	After 90 days of continuous disability	
<b>Internal Cancer Diagnosis</b> One per covered person per lifetime, benefits reduce 50% at age 70	\$2,500	\$5,000
<b>Heart Attack or Stroke Diagnosis</b> One per covered person per lifetime, benefits reduce 50% at age 70	N/A	\$5,000
<b>Hospital Intensive Care Unit</b> Per day, up to 30 days per confinement; benefits reduced 50% at age 70 <b>Ambulance</b>		\$600 \$100

Unless otherwise indicated, benefits are for a specified indemnity amount listed in the above schedule and are subject to applicable maximums. Refer to the following pages for more complete descriptions and limits to this plan.

MONTHLY PREMIUMS	BASIC	ENHANCED PLUS
Individual	\$15.80	\$31.62
Family	\$26.86	\$53.80

The premium and benefit amounts vary depending upon the plan selected.

# Critical Illness Insurance

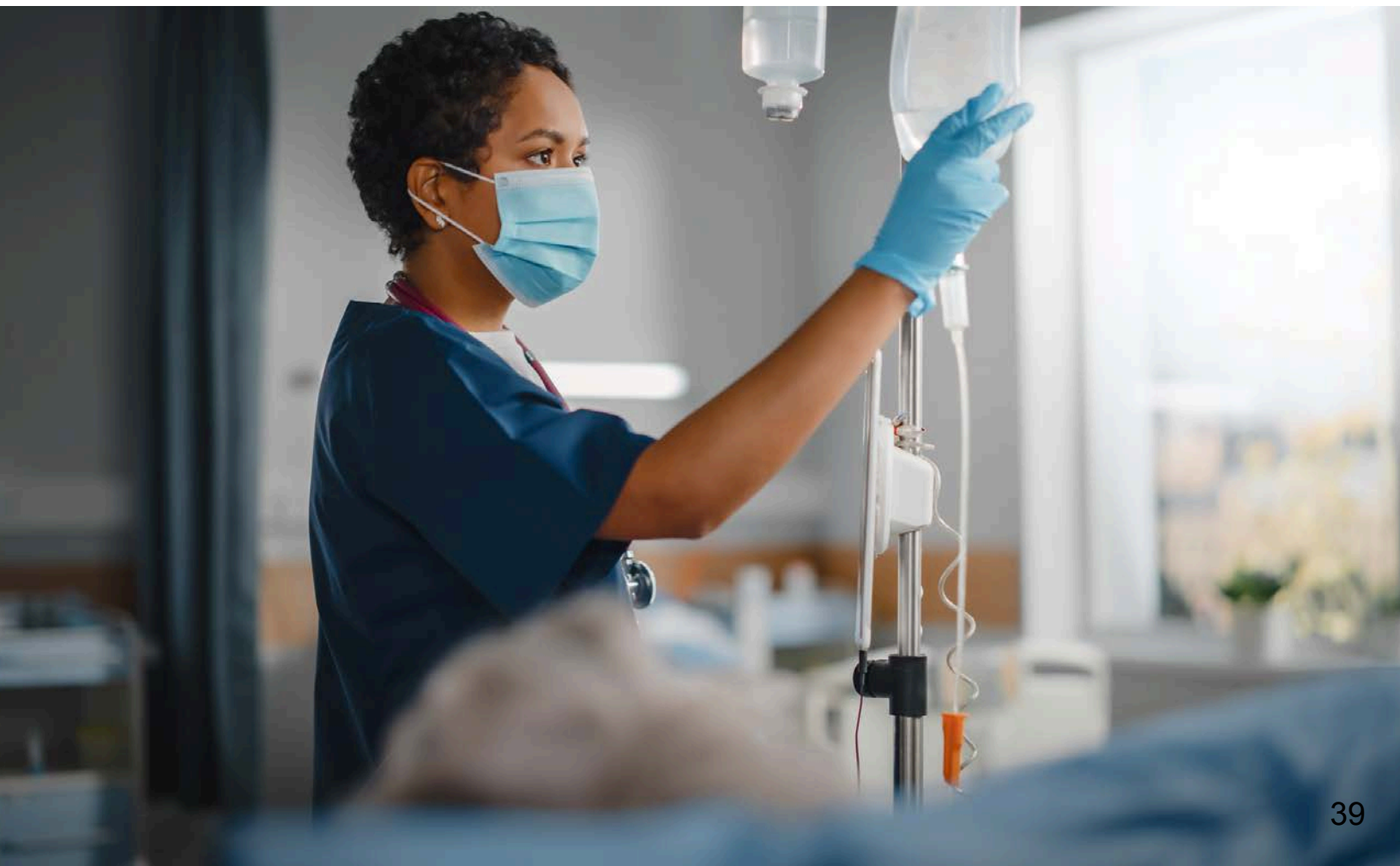
Aflac (Group #23589) | [www.aflacgroupinsurance.com](http://www.aflacgroupinsurance.com) | 800-433-3036

## Prepare For the Unexpected

If you've heard of heart attacks, strokes, organ transplants or paralysis, then you're familiar with critical illness. It's likely you or someone you know has experienced one of these life-altering events. Often times, a critical illness has a powerful impact on people's lives, affecting their livelihood and finances.

A critical illness plan can help with the treatment costs of covered illnesses. Benefits are paid directly to you, unless otherwise assigned, giving you the choice of how to spend the money. Plus, there are plans available to provide coverage for you, your spouse and dependent children.

Prepare now for the unexpected with a critical illness insurance plan. The plan helps you focus on getting well rather than worrying about finances. Visit the Employee Benefits Center and view policy for more details.



## Here's why the Aflac Group Critical Illness plan may be right for you.

For more than 60 years, Aflac has been dedicated to helping provide individuals and families peace of mind and financial security when they've needed it most. The Aflac Group Critical Illness plan is just another innovative way to help make sure you're well protected.

But it doesn't stop there. Having group critical illness insurance from Aflac means that you may have added financial resources to help with medical costs or ongoing living expenses.

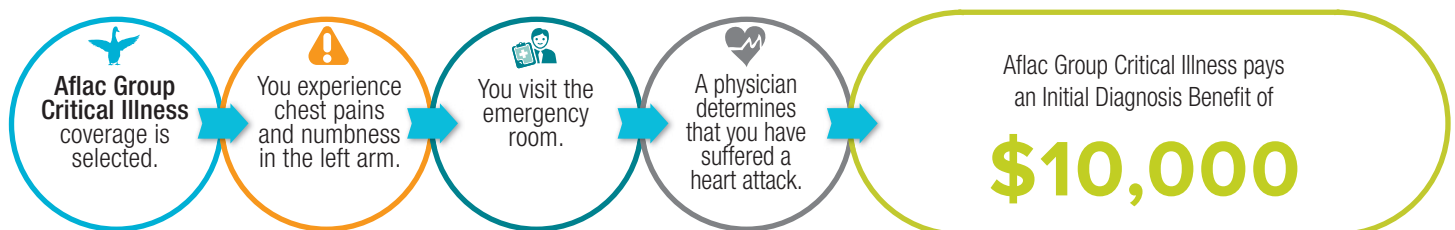
### The Aflac Group Critical Illness plan benefits include:

- Critical Illness Benefit payable for:
  - Cancer
  - Heart Attack (Myocardial Infarction)
  - Stroke
  - Kidney Failure (End-Stage Renal Failure)
  - Major Organ Transplant
  - Bone Marrow Transplant (Stem Cell Transplant)
  - Sudden Cardiac Arrest
  - Coronary Artery Bypass Surgery
  - Non-Invasive Cancer
  - Skin Cancer
- Health Screening Benefit

### Features:

- Benefits are paid directly to you, unless otherwise assigned.
- Coverage is available for you, your spouse, and dependent children.
- Coverage may be continued (with certain stipulations). That means you can take it with you if you change jobs or retire.

### How it works



Amount payable based on \$10,000 Initial Diagnosis Benefit.

## Benefits Overview

### COVERED CRITICAL ILLNESSES:

<b>CANCER</b> (Internal or Invasive)	100%
<b>HEART ATTACK</b> (Myocardial Infarction)	100%
<b>STROKE</b> (Ischemic or Hemorrhagic)	100%
<b>MAJOR ORGAN TRANSPLANT</b> (25% of this benefit is payable for insureds placed on a transplant list for a major organ transplant)	100%
<b>KIDNEY FAILURE</b> (End-Stage Renal Failure)	100%
<b>BONE MARROW TRANSPLANT</b> (Stem Cell Transplant)	100%
<b>SUDDEN CARDIAC ARREST</b>	100%
<b>NON-INVASIVE CANCER</b>	25%
<b>CORONARY ARTERY BYPASS SURGERY</b>	25%

#### INITIAL DIAGNOSIS

We will pay a lump sum benefit upon initial diagnosis of a covered critical illness when such diagnosis is caused by or solely attributed to an underlying disease. Cancer diagnoses are subject to the cancer diagnosis limitation. Benefits will be based on the face amount in effect on the critical illness date of diagnosis.

#### ADDITIONAL DIAGNOSIS

We will pay benefits for each different critical illness after the first when the two dates of diagnoses are separated by at least 6 consecutive months. Cancer diagnoses are subject to the cancer diagnosis limitation.

#### REOCCURRENCE

We will pay benefits for the same critical illness after the first when the two dates of diagnoses are separated by at least 6 consecutive months. Cancer diagnoses are subject to the cancer diagnosis limitation.

#### CHILD COVERAGE AT NO ADDITIONAL COST

Each dependent child is covered at 50 percent of the primary insured's benefit amount at no additional charge. Children-only coverage is not available.

#### SKIN CANCER BENEFIT

We will pay \$250 for the diagnosis of skin cancer. We will pay this benefit once per calendar year.

#### WAIVER OF PREMIUM

If you become totally disabled due to a covered critical illness prior to age 65, after 90 continuous days of total disability, we will waive premiums for you and any of your covered dependents. As long as you remain totally disabled, premiums will be waived up to 24 months, subject to the terms of the plan.

### SUCCESSOR INSURED BENEFIT

If spouse coverage is in force at the time of the primary insured's death, the surviving spouse may elect to continue coverage. Coverage would continue at the existing spouse face amount and would also include any dependent child coverage in force at the time.

### HEALTH SCREENING BENEFIT (Employee and Spouse only)

We will pay \$100 for health screening tests performed while an insured's coverage is in force. We will pay this benefit once per calendar year.

This benefit is only payable for health screening tests performed as the result of preventive care, including tests and diagnostic procedures ordered in connection with routine examinations. This benefit is payable for the covered employee and spouse.

**This benefit is not paid for dependent children.**

### PROGRESSIVE DISEASES RIDER

<b>AMYOTROPHIC LATERAL SCLEROSIS</b> (ALS or Lou Gehrig's Disease)	100%
<b>SUSTAINED MULTIPLE SCLEROSIS</b>	100%

This benefit is paid based on your selected Progressive Disease Benefit amount. We will pay the benefit shown upon diagnosis of one of the covered diseases if the date of diagnosis is while the rider is in force.

### OPTIONAL BENEFITS RIDER

<b>BENIGN BRAIN TUMOR</b>	100%
<b>ADVANCED ALZHEIMER'S DISEASE</b>	25%
<b>ADVANCED PARKINSON'S DISEASE</b>	25%

These benefits will be paid based on the face amount in effect on the critical illness date of diagnosis. We will pay the optional benefit if the insured is diagnosed with one of the conditions listed in the rider schedule if the date of diagnosis is while the rider is in force.

The plan has limitations and exclusions that may affect benefits payable. This brochure is for illustrative purposes only. Refer to your certificate for complete details, definitions, limitations, and exclusions.

## SPECIFIED DISEASES RIDER

Illnesses Covered Under Plan:

Addison's Disease • Cerebrospinal Meningitis • Diphtheria • Huntington's Chorea • Legionnaire's Disease • Malaria • Muscular Dystrophy • Myasthenia Gravis • Necrotizing Fasciitis • Osteomyelitis • Poliomyelitis (Polio) • Rabies • Sickle Cell Anemia • Systemic Lupus • Systemic Sclerosis (Scleroderma) • Tetanus • Tuberculosis.

Benefits are payable if an insured is diagnosed with one of the diseases listed.

25%

## CHILDHOOD CONDITIONS RIDER

<b>CYSTIC FIBROSIS</b>	50%
<b>CEREBRAL PALSY</b>	50%
<b>CLEFT LIP OR CLEFT PALATE</b>	50%
<b>DOWN SYNDROME</b>	50%
<b>PHENYLALANINE HYDROXYLASE DEFICIENCY DISEASE (PKU)</b>	50%
<b>SPINA BIFIDA</b>	50%
<b>TYPE 1 DIABETES</b>	50%

### One Time Benefit Amount

<b>AUTISM SPECTRUM DISORDER (ASD)</b>	\$3,000
---------------------------------------	---------

Benefits are payable if a dependent child is diagnosed with one of the conditions listed and the date of diagnosis is while the rider is in force. (In Indiana, diagnosis must not be specifically excluded by the plan.)

# Accident Insurance

Metlife (group #5929273 | [www.metlife.com](http://www.metlife.com) | 800-275-4638)

The costs associated with an injury can add up. Between hospital visits, exams and treatment, out-of-pocket costs could put you in a financial hardship. An accident plan pays benefits directly to you so you can determine where to spend the money. It's comforting to know that an accident insurance policy can be there through all stages of your care, from initial treatment to follow-up care. Accident coverage is available to you through payroll deduction and may provide a benefit for costs associated with:

- Concussions
- Lacerations
- Broken teeth
- Emergency room visits
- Ambulance, ground or air
- Intensive care unit

## Accident Insurance Monthly Premiums

	Low	High
Employee Only	\$8.10	\$15.40
Employee + Spouse	\$12.23	\$23.21
Employee + Children	\$15.66	\$29.71
Employee + Family	\$20.15	\$38.22



## Accident Insurance

Benefits that may help cover costs such as those not covered by your medical plan.

**Fredericksburg  
Independent  
School District**

### Accident Insurance Benefits

With MetLife Accident Insurance, you'll have a choice of two plans (called the "Low Plan" and the "High Plan") that provide payments regardless of any other insurance payments you may receive<sup>1</sup>. Here is a summary of some of the covered events/services<sup>2</sup>.

Benefit Type	Low Plan Benefits	High Plan Benefits
<b>Accidental Injury Benefits</b>		
Fracture* (depending on the fracture and type of repair)	\$50 – \$3,000	\$100 – \$6,000
Dislocation* (depending on the dislocation and type of repair)	\$50 – \$3,000	\$100 – \$6,000
Second- or Third- Degree Burn (depending on degree of burn and percentage of burnt skin)	\$50 – \$5,000	\$100 – \$10,000
Concussion	\$200	\$400
Coma	\$5,000	\$10,000
Laceration (depending on the length of the cut and type of repair)	\$25 – \$200	\$50 – \$400
Broken Tooth	Crown: \$100 / Filling: \$25 / Extraction: \$50	Crown: \$200 / Filling: \$50 / Extraction: \$100
Eye Injury	\$200	\$300
<b>Accident - Medical Services &amp; Treatment Benefits</b>		
Ambulance	Ground: \$200 / Air: \$750	Ground: \$300 / Air: \$1,000
Emergency Care (depending on location of care)	\$25 – \$50	\$50 – \$100
Non-Emergency Initial Care	\$25	\$50
Physician Follow-Up	\$50	\$75
Therapy Services (including physical therapy)	\$15	\$25
Medical Testing	\$100	\$200
Medical Appliances (depending on the appliance)	\$50 – \$500	\$100 – \$1,000
Transportation	\$200	\$400
Benefit Type	Low Plan Benefits	High Plan Benefits
Pain Management (for epidural anesthesia)	\$50	\$100
Prosthetic Device	One device: \$500 More than one device: \$1,000	One device: \$750 More than one device: \$1,500
Modification	\$500	\$1,000
Blood/Plasma/Platelets	\$300	\$400



## Accident Insurance

Surgical Repair (depending on the type of surgery)	\$100-\$500	\$150-\$750
Exploratory Surgery	\$100	\$150
Other Outpatient Surgery	\$150	\$300
<b>Hospital Benefits*</b>		
Admission*	\$500 for the day of admission	\$1,000 for the day of admission
Intensive Care Unit (ICU) Supplemental Admission	\$1,000 for the day of admission	\$2,000 for the day of admission
Confinement* (paid for up to 365 days per accident)	\$100 per day	\$200 per day
ICU Supplemental Confinement (paid for up to 30 days per accident)	\$200 per day	\$400 per day
Inpatient Rehabilitation (paid for up to 15 days per accident)	\$100 per day	\$200 per day
<b>Accidental Death Benefit</b>		
Accidental Death Benefit*	\$25,000 \$75,000 for accidental death on common carrier*	\$50,000 \$150,000 for accidental death on common carrier*
<b>Accidental Dismemberment, Functional Loss &amp; Paralysis Benefits</b>		
Dismemberment/Functional Loss (depending on the injury)	\$250 - \$10,000	\$500 - \$50,000
Paralysis (depending on the number of limbs)	\$5,000 - \$10,000	\$25,000 - \$50,000
<b>Other Benefits</b>		
Lodging Benefit* - for a companion of a covered person who is hospitalized	\$100 per day	\$200 per day

\* Notes Regarding Certain Benefits Fracture and Dislocation benefits – Chip fractures may be paid at a reduced percentage of the Fracture Benefit and partial dislocations may be paid at a reduced percentage of the Dislocation Benefit.

- Hospital Benefits – "Hospital" does not include certain facilities such as nursing homes, convalescent care or extended care facilities. Please consult your certificate for details.
- The Admission Benefit is not payable for Emergency Room treatment or outpatient treatment. The payment of the admission benefit requires a Confinement. Hospital Confinement requires the assignment to a bed as a resident inpatient in a Hospital (including an Intensive Care Unit of a Hospital) on the advice of a Physician or confinement in an observation area within a Hospital for a period of no less than 20 continuous hours on the advice of a Physician. Please consult your certificate for details.
- Accidental Death Benefit – The benefit amount will be reduced by the amount of any accidental dismemberment/functional loss/paralysis benefits and modification benefit paid for injuries sustained by the covered person in the same accident for which the accidental death benefit is being paid.
- Common Carrier Benefit - Common Carrier refers to airplanes, trains, buses, trolleys, subways and boats. Certain conditions apply.
- Lodging Benefit – The lodging benefit is not available in all states. It provides a benefit for a companion accompanying a covered insured while hospitalized, provided that lodging is at least a certain number of miles from the insured's primary residence as defined in the certificate.
- Organized Sports Activity Injury Benefit Rider – The Organized Sports Activity Injury Benefit Certificate Rider may not be available in all states. Proof of registration in an Organized Sports Activity in which an Accident occurred is required at time of claim. See your certificate for details.

### Benefit Payment Example

Kathy's daughter, Molly, was riding her bike to school. On her way there she fell to the ground, was knocked unconscious, and was taken to the local emergency room (ER) by ambulance for treatment. The ER doctor diagnosed a concussion and a broken tooth. He ordered a CT scan to check for facial fractures too, since Molly's face was very swollen. Molly was released to her primary care physician for follow-up treatment, and her dentist repaired her broken tooth with a crown. Depending on her health insurance, Kathy's out-of-pocket costs could run into hundreds of dollars to cover expenses like insurance co-payments and deductibles. MetLife Group Accident Insurance payments can be used to help cover these unexpected costs.

#### Covered Event<sup>3</sup>

#### Benefit Amount

# Medical Transport

MASA | [www.masamts.com](http://www.masamts.com) | 954-334-8261

Americans today suffer from a false sense of security that their medical coverage will pay for all costs associated with emergency or critical care transport. The reality is that a majority of Americans are only partially covered for these high costs.

Most medical plans will only pay a portion of costs leaving you with the remainder of the bill. There is also the possibility of your medical provider denying your claim altogether, which means you would be responsible for paying the entire bill.

With medical transport protection, you will have zero out-of-pocket expenses for any emergent air or ground transport from anywhere in the United States, regardless of who transports you. You will receive medical emergency transportation solutions to help cover your out-of-pocket medical transport costs when your insurance falls short.

## Medical Transport Insurance Monthly Premiums

	Emergent Premier	Platinum
Employee + Family	\$17.00	\$39.00



# MASA<sup>®</sup> Emergent Premier

Strengthen your emergency  
medical transportation protection



## Membership includes:



### Emergency Ground Ambulance Transport Protection<sup>2</sup>

If you ever need an emergency ground ambulance, MASA will pay for your eligible out-of-pocket expenses.



### Emergency Air Ambulance Transport Protection<sup>2</sup>

If a first responder or doctor says air transport is medically necessary during your serious emergency, MASA will pay for your eligible out-of-pocket flight expenses.



### Hospital to Hospital Ground Ambulance Transport Protection<sup>2</sup>

If your doctor orders a ground ambulance to move you to another hospital for specialized care, MASA will pay for your eligible out-of-pocket expenses.



### Hospital to Hospital Air Ambulance Transport Protection<sup>2</sup>

If your doctor orders an air ambulance to transfer you to a different hospital with the necessary level of care, MASA will pay for your eligible out-of-pocket expenses.



### Emergency Water Ambulance Transport Protection<sup>3</sup>

If you experience a serious medical emergency, MASA will reimburse your eligible out-of-pocket costs up to \$2,500 when you're transported by a watercraft staffed with emergency personnel who provide care and stabilization during transport.

## About MASA

Founded in 1974, Medical Access & Service Advantage (MASA<sup>®</sup>) is the leading Emergency Transportation protection built to enhance healthcare plans by protecting against out-of-pocket costs associated with emergency medical transport. Today, as a global organization with 14 international locations and services in all 50 states and Canada, MASA serves more than 2 million members with emergency and non-emergency transportation cost-reimbursement services and so much more.

1: United States | 2: United States and Canada | 3: United States, Canada, Mexico, and the Caribbean | 4: Worldwide: to include any region with the exclusion of Antarctica and not prohibited by U.S. law or U.S. travel advisories. Contingent upon ten (10) day notice of travel

This material is for informational purposes only and does not provide any coverage. Not all MASA products and services are available to residents of all states. The benefits listed, and the descriptions thereof, do not represent the full terms and conditions applicable for usage and may only be offered in some memberships or policies. Premiums and benefits vary depending on the plan selected. For additional information and disclosures about MASA plans, visit: <https://info.masaglobal.com/disclaimers>



### **Treat and No Transport<sup>1</sup>**

If emergency first responders treat you during an emergency but determine you don't need to be transported, MASA will reimburse up to \$500 for eligible out-of-pocket expenses. *(Limited to two reimbursements per consecutive 12-month period beginning from plan effective date.)*



### **Repatriation to Hospital Near Home Transport<sup>3</sup>**

After a hospital stay more than 100 miles away from home, MASA will help arrange and pay for air or ground transportation so you can return home to recover.



### **Minor Return Transport Protection<sup>3</sup>**

If a child under 18 is left without a guardian due to your ambulance transport, MASA will reimburse eligible expenses to safely return them to family or a responsible caregiver.



### **Pet Return Transport Protection<sup>3</sup>**

If your pet is left behind after an ambulance transport, MASA will reimburse eligible expenses to bring them home safely.



### **Sick While Away From Home Expense Protection<sup>4</sup>**

If you get sick or contract a qualifying communicable disease more than 100 miles from home, MASA will reimburse eligible expenses like lodging, meals, medical visits for proof of illness, testing, and airline re-booking.



### **Post-Admission Continued Care Transport Protection<sup>1</sup>**

MASA will reimburse up to \$500 in eligible expenses for non-emergency ground transport or ride-shares between medical facilities, rehab, long-term care, hospice, or back home for continued care.

# MASA<sup>®</sup> Platinum

Strengthen your emergency  
medical transportation protection



## Membership includes:



### Emergency Ground Ambulance Transport Protection<sup>2</sup>

If you ever need an emergency ground ambulance, MASA will pay for your eligible out-of-pocket expenses.



### Emergency Air Ambulance Transport Protection<sup>2</sup>

If a first responder or doctor says air transport is medically necessary during your serious emergency, MASA will pay for your eligible out-of-pocket flight expenses.



### Hospital to Hospital Ground Ambulance Transport Protection<sup>2</sup>

If your doctor orders a ground ambulance to move you to another hospital for specialized care, MASA will pay for your eligible out-of-pocket expenses.



### Hospital to Hospital Air Ambulance Transport Protection<sup>2</sup>

If your doctor orders an air ambulance to transfer you to a different hospital with the necessary level of care, MASA will pay for your eligible out-of-pocket expenses.



### Emergency Water Ambulance Transport Protection<sup>3</sup>

If you experience a serious medical emergency, MASA will reimburse your eligible out-of-pocket costs up to \$2,500 when you're transported by a watercraft staffed with emergency personnel who provide care and stabilization during transport.

## About MASA

Founded in 1974, Medical Access & Service Advantage (MASA<sup>®</sup>) is the leading Emergency Transportation protection built to enhance healthcare plans by protecting against out-of-pocket costs associated with emergency medical transport. Today, as a global organization with 14 international locations and services in all 50 states and Canada, MASA serves more than 2 million members with emergency and non-emergency transportation cost-reimbursement services and so much more.

1: United States | 2: United States and Canada | 3: United States, Canada, Mexico, and the Caribbean | 4: Worldwide: to include any region with the exclusion of Antarctica and not prohibited by U.S. law or U.S. travel advisories. Contingent upon ten (10) day notice of travel

This material is for informational purposes only and does not provide any coverage. Not all MASA products and services are available to residents of all states. The benefits listed, and the descriptions thereof, do not represent the full terms and conditions applicable for usage and may only be offered in some memberships or policies. Premiums and benefits vary depending on the plan selected. For additional information and disclosures about MASA plans, visit: <https://info.masaglobal.com/disclaimers>



### **Treat and No Transport<sup>1</sup>**

If emergency first responders treat you during an emergency but determine you don't need to be transported, MASA will reimburse up to \$500 for eligible out-of-pocket expenses. *(Limited to two reimbursements per consecutive 12-month period beginning from plan effective date.)*



### **Repatriation to Hospital Near Home Transport<sup>4</sup>**

After a hospital stay more than 100 miles away from home, MASA will help arrange and pay for air or ground transportation so you can return home to recover.



### **Patient Return Transport<sup>4</sup>**

After being discharged from the hospital following an emergency more than 100 miles from home, MASA will arrange and pay for your commercial flight back home.



### **Companion Emergency Transport Protection<sup>3</sup>**

MASA will reimburse eligible out-of-pocket expenses related to having a companion ride with you during emergency transport.



### **Hospital Visitor Air Transport<sup>3</sup>**

If you're hospitalized more than 100 miles away from home, MASA will arrange and pay for round-trip air transportation for someone you choose to be with you.



### **Minor Return Transport Protection<sup>3</sup>**

If a child under 18 is left without a guardian due to your ambulance transport, MASA will reimburse eligible expenses to safely return them to family or a responsible caregiver.



### **Pet Return Transport Protection<sup>3</sup>**

If your pet is left behind after an ambulance transport, MASA will reimburse eligible expenses to bring them home safely.



### **Vehicle & RV Return<sup>3</sup>**

If your vehicle or RV is left unattended after an ambulance transport, MASA will help arrange and pay to get it back to your home or rental location.



### **Organ Retrieval Transport<sup>1</sup>**

MASA will reimburse eligible out-of-pocket expenses to transport an organ needed for your transplant.



### **Organ Recipient Transport<sup>1</sup>**

If you need an organ transplant, MASA will help arrange and pay for your flight to the airport closest to where the surgery will take place.



### **Mortal Remains Return Transport<sup>4</sup>**

In the unfortunate event a member passes away more than 100 miles from home, MASA will help support and reimburse eligible expenses to bring their remains home.

# Legal Plan



Legal Plan | <https://www.metlife.com/insurance/legal-plans/> | 800-821-6400

Have you ever found yourself in need of legal advice, but aren't sure where to go? A voluntary group legal plan helps fill that need. It provides you with access to professional lawyers at a low monthly rate. For just a few dollars a month, you can consult with a lawyer about having your will prepared, reviewing documents, contesting a traffic ticket, lawsuits, divorce and so much more. Expert legal advice is available at your fingertips.

## Legal Insurance Monthly Premiums

Employee + Family

\$19.50

# Empowering employees through easy access to legal help

Legal issues occur throughout life, when employees are getting married, buying a home, becoming a caregiver or handling financial matters like debt or tax audits. Dealing with these matters can be costly and time consuming, taking employees away from work and impacting their overall well-being.

We provide your employees with the cost-effective, multi-channel access to legal help they need to easily handle costly legal matters in their life—helping them to feel more financially and emotionally secure.

## Flexibility to handle matters how employees want

We want your employees to get the help they need how they want it. That’s why we allow them to choose their attorney from our network, or outside of it, or use our digital tools to handle matters.<sup>1</sup> With a large network of attorneys and the ability to complete estate planning or download self-help documents on our website, employees have the flexibility to choose how they want to handle their legal matter.

## Wide range of coverage for a diverse workforce

<b>LGBTQ+</b>	<ul style="list-style-type: none"> <li>• Adoption</li> <li>• Creating estate planning documents to recognize same-sex partners</li> <li>• Name and gender marker change</li> </ul>
<b>Caregivers</b>	<ul style="list-style-type: none"> <li>• Nursing home agreements</li> <li>• Reviewing Medicare/Medicaid documents</li> <li>• Reviewing parents’ estate planning documents</li> </ul>
<b>Veterans/ Military</b>	<ul style="list-style-type: none"> <li>• Assistance with real estate or rental issues</li> <li>• Guardianship</li> <li>• Updating or creating estate planning documents</li> </ul>
<b>International employees</b>	<ul style="list-style-type: none"> <li>• Access to attorneys out of the country<sup>2</sup></li> <li>• Assistance with immigration issues</li> <li>• Translation services for Call Center and Attorneys</li> </ul>
<b>Those just starting out</b>	<ul style="list-style-type: none"> <li>• Assistance with rental issues and landlords</li> <li>• Reviewing leases</li> <li>• Student loan debt assistance</li> </ul>

## The MetLife Legal Plans Difference



Telephone and office consultations, demand letters and document review on **unlimited number** of personal legal matters



**Over 18,000** attorneys in all 50 states and many U.S. territories who have an average of 25 years of experience and are subject to a comprehensive set of criteria



**Best-in-class** digital experience to find attorneys and complete estate planning



We’re focused on providing **exceptional customer service** and are appropriately staffed for peak call volume

## Helping your employees navigate life's twists and turns.

<b>Money Matters</b>	<ul style="list-style-type: none"> <li>Debt Collection Defense</li> <li>Financial Wellness Programs<sup>3</sup></li> <li>Identity Restoration<sup>4</sup></li> </ul>	<ul style="list-style-type: none"> <li>Identity Theft Defense</li> <li>Negotiations with Creditors</li> <li>Personal Bankruptcy</li> </ul>	<ul style="list-style-type: none"> <li>Promissory Notes</li> <li>Tax Audit Representation</li> <li>Tax Collection Defense</li> </ul>
<b>Home &amp; Real Estate</b>	<ul style="list-style-type: none"> <li>Boundary &amp; Title Disputes</li> <li>Deeds</li> <li>Eviction Defense</li> <li>Foreclosure</li> </ul>	<ul style="list-style-type: none"> <li>Mortgages</li> <li>Property Tax Assessments</li> <li>Refinancing &amp; Home Equity Loan</li> <li>Sale or Purchase of Home</li> </ul>	<ul style="list-style-type: none"> <li>Security Deposit Assistance</li> <li>Tenant Negotiations</li> <li>Zoning Applications</li> </ul>
<b>Estate Planning</b>	<ul style="list-style-type: none"> <li>Codicils</li> <li>Complex Wills</li> <li>Healthcare Proxies</li> </ul>	<ul style="list-style-type: none"> <li>Living Wills</li> <li>Powers of Attorney (Healthcare, Financial, Childcare, Immigration)</li> </ul>	<ul style="list-style-type: none"> <li>Revocable &amp; Irrevocable Trusts</li> <li>Simple Wills</li> </ul>
<b>Family &amp; Personal</b>	<ul style="list-style-type: none"> <li>Adoption</li> <li>Affidavits</li> <li>Conservatorship</li> <li>Demand Letters</li> <li>Divorce (20 hours)</li> <li>Garnishment Defense</li> <li>Guardianship</li> </ul>	<ul style="list-style-type: none"> <li>Immigration Assistance</li> <li>Juvenile Court Defense, Including Criminal Matters</li> <li>Name Change</li> <li>Parental Responsibility Matters</li> <li>Personal Property Issues</li> </ul>	<ul style="list-style-type: none"> <li>Prenuptial Agreement</li> <li>Protection from Domestic Violence</li> <li>Review of ANY Personal Legal Document</li> <li>School Hearings</li> </ul>
<b>Civil Lawsuits</b>	<ul style="list-style-type: none"> <li>Administrative Hearings</li> <li>Civil Litigation Defense</li> </ul>	<ul style="list-style-type: none"> <li>Disputes Over Consumer Goods &amp; Services</li> <li>Incompetency Defense</li> </ul>	<ul style="list-style-type: none"> <li>Pet Liabilities</li> <li>Small Claims Assistance</li> </ul>
<b>Elder-Care Issues</b>	<ul style="list-style-type: none"> <li>Consultation &amp; Document Review for Issues Related to Your Parents:</li> <li>Deeds</li> <li>Leases</li> </ul>	<ul style="list-style-type: none"> <li>Medicaid</li> <li>Medicare</li> <li>Notes</li> <li>Nursing Home Agreements</li> </ul>	<ul style="list-style-type: none"> <li>Powers of Attorney</li> <li>Prescription Plans</li> <li>Wills</li> </ul>
<b>Traffic &amp; Other Matters</b>	<ul style="list-style-type: none"> <li>Defense of Traffic Tickets<sup>5</sup></li> <li>Driving Privileges Restoration</li> </ul>	<ul style="list-style-type: none"> <li>Habeas Corpus</li> </ul>	<ul style="list-style-type: none"> <li>Repossession</li> </ul>
<b>Rate<sup>6</sup></b>	<b>Cost per employee per month (covers spouse and dependents):</b> <b>Employee Paid: \$19.50</b>		
<b>Additional Features:</b>	<b>Telephone advice, office consultations, demand letters and document review</b> on an unlimited number of personal legal matters.		
	For non-covered matters that are not otherwise excluded employees get <b>four additional hours</b> of network attorney time and services per plan year. <sup>7</sup>		
	<b>Reduced fees</b> for personal injury, probate and estate administration matters, provided by network attorneys.		
	Access to a <b>digital estate planning solution</b> for wills, living wills, power of attorney and living trusts.		
	<b>Over 1,700 self-help documents<sup>8</sup></b> are available to members and potential members on our website.		

- The Participant will be reimbursed according to the set fee schedule, the lesser of the maximum reimbursement amount or the attorney's actual charge. Your employees will be responsible to pay the difference, if any, between the plan's payment and the non-plan attorney's charge for services. MetLife Legal Plans is not responsible for legal work performed by out-of-network attorneys.
- Internationally, employees can see an attorney outside of our network and be reimbursed according to a set fee reimbursement schedule.
- MetLife administers the PlanSmart program and has arranged to have specially trained third party financial professionals offer financial education. The financial professionals providing financial education are not affiliated with MetLife but are providing the program under a service provider contract. Offered to groups with 500 or more employees. The MetLife Personal Finance app is available at no cost to all individuals and regardless of any MetLife relationship or project.
- Aura is a product of Aura Sub, LLC. Aura Sub, LLC. is not affiliated with MetLife, and the services and benefits they provide are separate and apart from any MetLife product.
- Does not cover DUI.
- Rate is standard and subject to change. A minimum enrollment of two employees is required.
- No more than a combined maximum total of four hours of attorney time and service are provided for the member, spouse and qualified dependents, annually.
- The self-help library is offered by Standard Legal. Standard Legal is not a corporate affiliate of MetLife Legal Plans.

Group legal plans are administered by MetLife Legal Plans, Inc., Cleveland, Ohio. In California, this entity operates under the name MetLife Legal Insurance Services. In certain states, group legal plans are provided through insurance coverage underwritten by Metropolitan General Insurance Company, Warwick, RI. Some services not available in all states. No service, including consultations, will be provided for: 1) employment-related matters, including company or statutory benefits; 2) matters involving the employer, MetLife and affiliates and plan attorneys; 3) matters in which there is a conflict of interest between the employee and spouse or dependents in which case services are excluded for the spouse and dependents; 4) appeals and class actions; 5) farm and business matters, including rental issues when the participant is the landlord; 6) patent, trademark and copyright matters; 7) costs and fines; 8) frivolous or unethical matters; 9) matters for which an attorney client relationship exists prior to the participant becoming eligible for plan benefits. Coverage for defense of criminal matters is excluded from insurance coverage for individuals located in New York. For all other personal legal matters, an advice and consultation benefit is provided. Additional representation is also included for certain matters. Please see your plan description for details.



# Identity Theft Protection



Metlife Aura | [metlife.com/identity-and-fraud-protection](https://metlife.com/identity-and-fraud-protection) | 844-931-2872

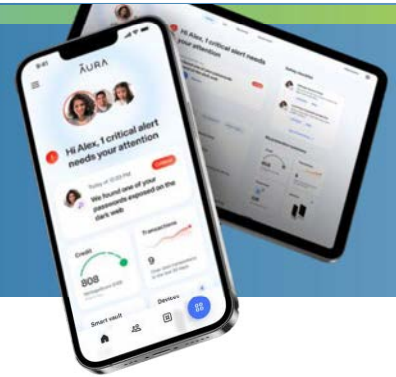
Millions of Americans report having their identity stolen each year. People are online and mobile more than any time in history, so it's no surprise that identity theft is on the rise. And it goes far beyond simply having your credit card number stolen. While credit card fraud is one of the highest reported types of identity theft, it also includes bank, loan, phone and tax-related fraud.

Identity theft insurance won't prevent your identity from being stolen. But it will be there to alert you if any suspicious activity is noticed under your name. The plan includes credit bureau monitoring, social security number usage and lost wallet protection. Accounts are monitored daily so you can rest easy knowing your identity is being protected even while you sleep. The sooner you can take action to close your accounts, the quicker you can recover your identity.

It takes years to establish a good reputation with credit lenders and employers. Make sure it remains yours by taking advantage of the identity theft insurance offered through your employer.



# Making digital security effortless for employees and their loved ones



MetLife + Aura Identity & Fraud Protection is an award-winning solution that provides employees and families with proactive protection from identity theft, scams and cybercrime — all in one place.

Our solution includes the following key pillars of protection:

### Identity Theft & Financial Fraud Protection

We make it effortless to keep personal info, credit, finances and assets secure with proactive controls, advanced threat detection and actionable alerts — all in one place.

### Scam & Cybercrime Prevention

Our powerful suite of advanced tools helps proactively catch and block scams, spam and phishing attempts to reduce distractions and bring peace of mind.

### Smart Family Safety

With family plans, employees can extend protection to unlimited children and any 10 adult loved ones they choose with no restrictions. Aura provides each adult their own private full-feature Aura account and a separate \$5M ID theft insurance policy.<sup>1</sup> Plus, employers may add-on an exclusive Life360 family safety bundle to Aura family plan offerings.<sup>2</sup>

### Digital Parenting & Mental Health

Aura's AI<sup>3</sup> tracks and analyzes patterns of kids' digital behavior, social connections and more to help parents understand their child's digital world and spot signs of meaningful changes in their well-being. Plus, includes easy-to-use tools to help parents protect their kids from fraudsters, cyberbullies, mature content and more.

### Services & Reimbursement

Manage digital security on the go via the highly rated Aura app. Get 24/7 US-based live member support, expert fraud resolution, an Aura-provided \$5M ID theft insurance policy,<sup>1</sup> an Aura-provided \$50K cyber insurance policy<sup>4</sup> and more.

### Voluntary Pricing\*

### +Life360 Bundle

Protection Individual	\$7.95	—
Protection Family		\$15.95
Protection Plus Individual	\$12.95	—
Protection Plus Family		\$21.95

All quoted rates are inclusive of state sales taxes as applicable.



## Identity Theft & Financial Fraud Protection

	PROTECTION Individual or Family	PROTECTION PLUS Individual or Family
Credit Monitoring & Alerts	1 Bureau	3 Bureaus
Credit Reports & Scores	1 Bureau	3 Bureaus
Monthly Credit Score Tracker & Insights <sup>5</sup>	✓	✓
Credit, Bank & Utility Account Freeze	✓	✓
Home & Vehicle Title Monitoring	✓	✓
Bank Fraud & Financial Transaction Monitoring	✓	✓
High-Risk Transaction Alerts	✓	✓
Utility Account Monitoring	✓	✓
Dark Web Monitoring	✓	✓
Digital Vault	✓	✓
SSN & Identity Authentication Alerts	✓	✓
Public & Court Records Monitoring	✓	✓
USPS Address Monitoring	✓	✓
Social Media Monitoring & Takeover Alerts	✓	✓
Social Media Privacy Checkup & Optimization	✓	✓
Automated Alerts Resolver*	✓	✓
Experian Credit Lock		✓
Credit Score Simulator		✓
Gamertag Monitoring		✓
Payday/Specialty Loan Block		✓

## Scam & Cybercrime Prevention

Automated Data Broker & Spam List Removal	✓	✓
National Do Not Call Registry	✓	✓
Google Search PII Cleanup	✓	✓
Digital Account Cleanup	✓	✓
Password Manager	✓	✓
Email Alias	✓	✓
Safe Web Browsing with Anti-Tracker & Ad-Blocker	✓	✓
IP Address Monitoring	✓	✓
Wi-Fi Security / VPN	2 devices per adult	Unlimited devices
Antivirus	2 devices per adult	Unlimited devices
Mobile Phone Takeover Protection	✓	✓
Unusual Transaction Alerts	✓	✓
Call Scam Protection		✓
Text Scam Protection		✓
Email Scam Protection		✓
Community Scam Sharing		✓

## Services, Restoration & Reimbursement

Aura-provided insurance policies:		
\$50K Cyber Insurance Policy <sup>4</sup>		✓
\$5M ID Theft Insurance Policy per enrolled adult <sup>1</sup>	✓	✓
Lost Wallet Protection + \$500 Emergency Cash	✓	✓
24/7 US-based Customer Support	✓	✓
White Glove Fraud Resolution Service	✓	✓
Full-service Restoration for Pre-existing ID Thefts	✓	✓
Online Resolution Case Tracker	✓	✓
Aura Account Security (2FA & Biometric)	✓	✓

## Digital Parenting & Mental Health (included with family plans)

	PROTECTION Family	PROTECTION PLUS Family
Child Mental Well-Being & Balance <sup>3</sup>		
Online Activity Trends & Benchmarking	✓	✓
Social Persona & Social Connections	✓	✓
Sentiment & Emotional Tone Analysis	✓	✓
Behavior Change Detection	✓	✓
Personalized Parent Insights & Recommendations	✓	✓
Safe Gaming	✓	✓
Cyberbullying & Online Predator Protection	✓	✓
Parental Controls		
Content Filtering & Blocking	✓	✓
Screen Time Management & Schedules	✓	✓
Safe Search & Pause the Internet	✓	✓
Online History & Usage	✓	✓
Child Identity Protection		
Child Identity Monitoring	✓	✓
3-Bureau Child Credit Freeze Wizard	✓	✓

## Smart Family Safety (included with family plans)

Add unlimited dependent minors + up to 10 adults	✓	✓
Unrestricted definition of adult family member	✓	✓
Private, full-feature Aura account for each adult	✓	✓
Separate \$5M Insurance Policy for each adult <sup>1</sup>	✓	✓
Sex Offender Geo Alerts	✓	✓
Secure Family Sharing – documents, passwords, alerts	✓	✓
@ Life360 Gold Family Safety Bundle		
- Location Tracking & History		
- Crash Detection with Emergency Dispatch		
- Driver Reports	✓	✓
- Roadside Assistance		
- Stolen phone protection up to \$250		

<sup>1</sup> As a component of becoming an Aura Plan member, Consumers receive identity theft insurance through a group policy issued to Aura which is underwritten and administered by American Bankers Insurance Company of Florida, an Assurant company, which is not an affiliate or subsidiary of MetLife. Checking & Savings Cash Recovery and 401(K) & HSA Cash Recovery are part of and not in addition to the Expense Reimbursement limit of liability. The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions and exclusions of coverage. Coverage may not be available in all jurisdictions.

<sup>2</sup> Life360 is a product of Life360, Inc. which is distributed by Aura and is not affiliated with MetLife, and the services and benefits they provide are separate and apart from any MetLife product. Features in Life360 plans bundled with MetLife + Aura Identity & Fraud Protection may differ from the Life360 consumer plans of the same name.

<sup>3</sup> Users are responsible for making their own parental decisions. Aura's services are not intended to diagnose, treat, cure or prevent any disease or medical condition. The services are for informational purposes and cannot replace the services of physicians or medical professionals. Always seek the advice of your physician or other qualified healthcare provider with any questions about medical conditions or treatment. Aura's services do not monitor for all content or a child's behavior in real time. Some alerts and/or insights are created using generative AI and may not be fully accurate, complete or timely.

<sup>4</sup> As a component of Aura's Protection Plus Individual, Protection Plus Family or Executive plans, Consumers receive cyber insurance through a group policy issued to Aura which is underwritten and administered by Houston Casualty Company, a Tokio Marine company, which is not an affiliate or subsidiary of MetLife. The description herein is a summary and intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions and exclusions of coverage. Coverage may not be available in all jurisdictions.

<sup>5</sup> The score you receive with Aura is provided for educational purposes to help you understand your credit. It is calculated using the information contained in your Equifax credit file. Lenders use many different credit scoring systems, and the score you receive with Aura is not the same score used by lenders to evaluate your credit.

Contact your benefits broker or MetLife representative today.

Scan to learn more or visit [metlife.com/identity-and-fraud-protection](https://metlife.com/identity-and-fraud-protection)



Both Aura and Life360 respect user privacy and do not and will not sell the personal information of Life360 members who subscribe to the Life360 services through Aura's employee benefits channel. The Life360 memberships available through Aura's employee benefits channel will be unique premium memberships, which means that ads will not be shown in the Life360 app to those members, and those members' data will not be used for ad purposes nor shared with Life360's advertising partner(s) or other third parties who are not service providers for Life360.

Aura is a product of Aura Sub, LLC. Aura Sub, LLC is not affiliated with MetLife, and the services and benefits they provide are separate and apart from any MetLife product.

No one can prevent all identity theft or monitor all transactions effectively.



# 457(b) RETIREMENT PLAN



The FFinvest Retirement Plan is a comprehensive plan, funded by Net Asset Value Mutual Funds. It is a competitive & simple, yet flexible plan with a 401(k) type of approach.

## PLAN HIGHLIGHTS

### Multiple Investment Options

- The plan provides 30+ different investment options , for savers and investors of all risk tolerances

### ROTH (After-Tax) Option

### Loan availability (subject to balance)

### Rollovers/Transfers

- Rollovers and Transfers are accepted into the plan from other retirement plans

### No Front-End or Deferred Sales Charges



## ENROLL ONLINE

### Go to [www.tcgservices.com](http://www.tcgservices.com)

- Click Enroll (upper right-hand corner)
- Search for your Employer
- Click Enroll in the 457(b) Savings Plan

If you have questions, please contact TCG Administrators at [\(800\) 943-9179](tel:8009439179)  
Monday - Friday, 8:00 a.m. - 7:00 p.m.

## 24/7, 365 ONLINE ACCESS VIA WEB OR MOBILE APP

Vast Learning Center located at  
[www.tcgservices.com](http://www.tcgservices.com)

- Video Library
- Retirement Rundown & Market Commentary
- Financial Calculators

Service from your FFGA Account Rep  
Dedicated email address: [FFInvest@ffga.com](mailto:FFInvest@ffga.com)

# 403(b) Retirement Plans

First Financial Administrators, Inc. | [www.ffga.com](http://www.ffga.com) |  
800-523-8422, option 2 | [retirement@ffga.com](mailto:retirement@ffga.com)

The 403(b) can be an excellent way to save money for retirement. It can serve as a supplement to a traditional pension plan or other retirement plan(s), or as a stand-alone plan. The 403(b) is a tax deferred retirement plan available to employees of educational institutions and certain non-profit organizations as determined by section 501(c)(3) of the Internal Revenue Code. Contributions and investment earnings in a 403(b) grow tax deferred until withdrawal (assumed to be retirement), at which time they are taxed as ordinary income. The 403(b) is named after the section of the IRS code governing it.

## How a 403(b) Works

Employees enroll and participate through their employer. Contributions to a 403(b) are made on a pre-tax basis through a Salary Reduction Agreement. This is an arrangement where the participating employee agrees to take a reduction in salary. The amount by which the salary is reduced is directed to investments offered through the employer and selected by the employee. These contributions are called elective deferrals and are excluded from the employee's taxable income. Contributions grow tax-deferred until the time of retirement when withdrawals are taxed as ordinary income.

## Benefits

- Tax deferred growth: no annual taxation on earnings
- Investment options: fixed annuities, variable annuities, or mutual funds
- Competitive interest rates
- Flexibility: start, stop, and adjust your contributions as allowed by your employer's plan.
- Receive periodic account statements

Contribution Limits	
2025	2026
\$23,500	\$24,500

Participants aged 50 and older at any time during the calendar year are permitted to contribute an additional \$8,000.

*All investing involves risk. Past performance is not a guarantee of future returns.*

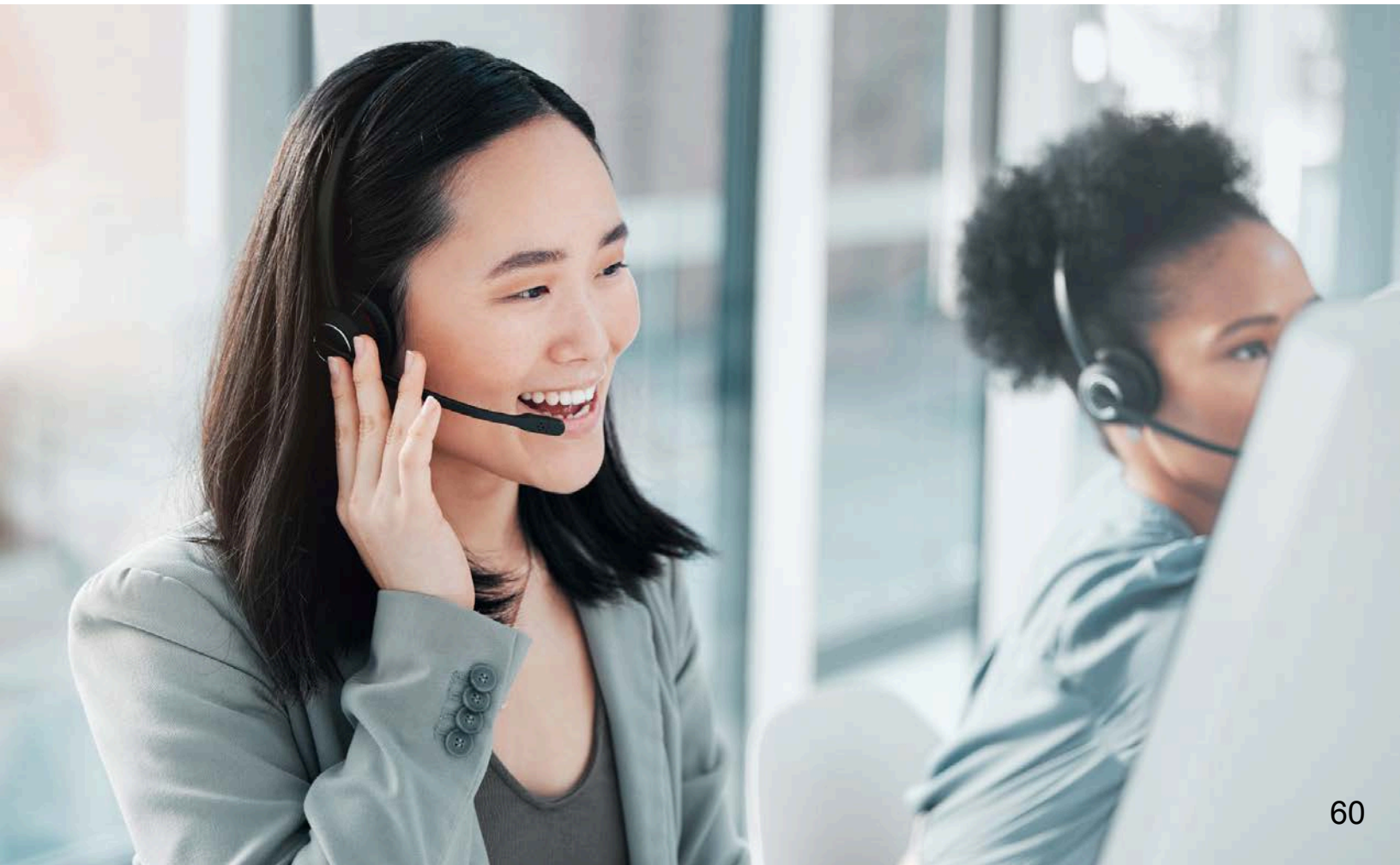
# Employee Assistance Program

American Fidelity | [www.supportlinc.com](http://www.supportlinc.com) | 800-745-3327

Life pulls us in many different directions. Between kids, personal relationships, extracurricular activities, and family time, it seems like we don't have enough time in a day to fit it all in. When life gets you stressed, call the employee assistance line provided by your employer. It offers 24/7 access to professionals who can help you successfully face emotional issues.

An employee assistance program, or EAP, is a free, voluntary program offered by your employer. With one phone call, you will have access to short-term counseling and confidential assessments whenever you have a personal or work-related problem.

Employee assistance programs address a wide range of issues including mental and emotional well-being, substance abuse and grief. Counselors are held to the highest ethical standard and are trained to keep your situation confidential. They work with you to determine the best way to address your needs and move you in a positive direction.



# Contact Information

Edith Bergman, Sr. Account Administrator  
281-272-7638  
[edith.bergman@ffga.com](mailto:edith.bergman@ffga.com)

Fredericksburg ISD Benefit Office  
110 W. Travis St.  
Fredericksburg, Texas 78624  
830-997-9551  
[www.fisd.org](http://www.fisd.org)

Customer Service  
512-707-9666  
[austin@ffga.com](mailto:austin@ffga.com)

Product	Carrier	Website	Phone
Medical	TRS	<a href="http://www.bcbsrx.com/activecare">www.bcbsrx.com/activecare</a>	866-355-5999
Dental	Metlife	<a href="https://mybenefits.metlife.com">https://mybenefits.metlife.com</a>	800-275-4638
Vision	Ameritas	<a href="http://www.ameritas.com">www.ameritas.com</a>	800-487-5553
FSA & HSA	FFGA	<a href="http://www.ffga.com">www.ffga.com</a>	866-853-3539
Term Life	American Fidelity	<a href="http://www.americanfidelity.com">www.americanfidelity.com</a>	800-654-8489
Hospital Indemnity	Aetna	<a href="http://www.myaetnasupplemental.com">www.myaetnasupplemental.com</a>	800-607-3366
Disability / Cancer	American Fidelity	<a href="http://www.americanfidelity.com">www.americanfidelity.com</a>	800-654-8489
ID Theft	Metlife / Aura	<a href="http://metlife.com/identity-and-fraud-protection">metlife.com/identity-and-fraud-protection</a>	844-931-2872
Critical Illness	Aflac	<a href="http://www.aflacgroupinsurance.com">www.aflacgroupinsurance.com</a>	800-433-3036
Accident	Metlife	<a href="https://mybenefits.metlife.com">https://mybenefits.metlife.com</a>	800-275-4638
Telehealth	Recuro	<a href="http://www.recurohealth.com">www.recurohealth.com</a>	855-673-2876
Legal Plan	Metlife	<a href="https://www.metlife.com/insurance/legal-plans/">https://www.metlife.com/insurance/legal-plans/</a>	800-821-6400
Medical Transport	MASA	<a href="http://www.masamts.com">www.masamts.com</a>	800-654-7757
EAP	American Fidelity	<a href="http://www.supportlinc.com">www.supportlinc.com</a>	800-475-3327
Retirement	FFGA	<a href="http://www.ffga.com">www.ffga.com</a>	800-523-8422 Opt. 2 <b>61</b>