

LAPORTE ISD 2023-2024 BENEFITS GUIDE



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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

YOUR ONE-STOP-SHOP FOR BENEFIT INFORMATION

La Porte ISD and First Financial 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 claims, important phone numbers, and enrollment information.

There is no need to register for site access. Type the URL below into your browser and you will be directed to your Employee Benefits Center.

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

HOW TO ENROLL

ONLINE ENROLLMENT

NEW ENROLLMENT PLATFORM

To begin online enrollment, visit <https://benefits.ffga.com/laporteisd> and click on How to Enroll.

LOGIN

- Login: Your Employee ID or Social Security Number (no dashes)
- PIN (first login only): The last four digits of your Social Security Number and the last two digits of the year you were born (six digits total)
- New PIN: The first time you log in you will be required to change your PIN. Please make note your new PIN because you will use it from that point forward.

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 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.

ELIGIBILITY

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.

EXISTING EMPLOYEES

When it's time to enroll in your benefits, your First Financial 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 <https://benefits.ffga.com/laporteisid>

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 & 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.**

FREQUENTLY ASKED QUESTIONS

What is Guaranteed Issue (GI)?

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

What is a "pre-existing condition"?

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

What is a deductible?

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

What is a co-pay?

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

What does out-of-pocket maximum mean?

Your out-of-pocket maximum is the most you have to pay each year toward your medical services or prescription drugs before your insurance pays for all your care. This amount does not include what you pay in premiums. The Affordable Care Act limits the out-of-pocket maximums. In 2023, for one adult, it can be no more than \$9,100 and for a family, it can be no more than \$18,200.

What does EOB mean?

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

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

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

SECTION 125 PLANS

SECTION 125 PLAN INFORMATION AND RULES

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

HERE'S HOW IT WORKS

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

IS IT RIGHT FOR ME?

The savings you may experience with a Section 125 Plan are outlined in the example below. For instance, you could potentially take home about \$70 more each month if you participated in your employer's Section 125 Plan – that's a savings of \$840 a year!

You cannot change your benefit elections for the plan year unless the benefits office receives notification in writing within 31 days of the status change. If the benefits office is not notified within 31 days of the status change, no benefit change can be made until the next annual open enrollment.

IRS specified changes in family status include:

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

SECTION 125 PLAN SAMPLE PAYCHECK		
	WITHOUT S125	WITH S125
Monthly Salary	\$2,000	\$2,000
Less Medical Deductions	-N/A	-\$250
Taxable Gross Income	\$2,000	\$1,750
Less Taxes (Fed/State at 20%)	-\$400	-\$350
Less Estimated FICA (7.65%)	-\$153	-\$133
Less Medical Deductions	-\$250	-N/A
Take Home Pay	\$1,197	\$1,267

YOU COULD SAVE \$70 PER MONTH IN TAXES BY PAYING FOR YOUR BENEFITS ON A PRE-TAX BASIS!

**The figures in the sample paycheck above are for illustrative purposes only.*

MEDICAL

TRS-ACTIVECARE

The district's 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.

BCBSTX

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://www.express-scripts.com/trsactivecare> 1.844.367.6108 ***NEW RX PLAN FOR 23-24 Starting Friday, Sept. 1, 2023, Express Scripts will be the new pharmacy benefits manager (PBM) for TRS-ActiveCare. We're here to help you understand your prescription benefits and make it convenient and affordable for you and our family to get the prescription medications you may need.

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

<https://www.trs.texas.gov/Pages/healthcare-trsactivecare-2023-24-plans.aspx>

2023-24 TRS-ActiveCare Plan Highlights Sept. 1, 2023 – Aug. 31, 2024



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 District and State Contributions

⊖ **Your Premium**

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

Wellness Benefits at No Extra Cost*

Being healthy is easy with:

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

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

New Rx Benefits!

- Express Scripts is your new pharmacy benefits manager! CVS pharmacies and most of your preferred pharmacies and medication are still included.
- Certain specialty drugs are still \$0 through SaveOnSP.

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

Monthly Premiums	Total Premium	Your Premium	Total Premium	Your Premium	Total Premium	Your Premium
Employee Only	\$432	\$	\$507	\$	\$444	\$
Employee and Spouse	\$1,167	\$	\$1,319	\$	\$1,199	\$
Employee and Children	\$735	\$	\$862	\$	\$755	\$
Employee and Family	\$1,469	\$	\$1,674	\$	\$1,510	\$

Plan Features	In-Network Coverage Only	In-Network Coverage Only	In-Network	Out-of-Network
Type of Coverage	In-Network Coverage Only	In-Network Coverage Only	In-Network	Out-of-Network
Individual/Family Deductible	\$2,500/\$5,000	\$1,200/\$2,400	\$3,000/\$6,000	\$5,500/\$11,000
Coinsurance	You pay 30% after deductible	You pay 20% after deductible	You pay 30% after deductible	You pay 50% after deductible
Individual/Family Maximum Out of Pocket	\$7,500/\$15,000	\$6,900/\$13,800	\$7,500/\$15,000	\$20,250/\$40,500
Network	Statewide Network	Statewide Network	Nationwide Network	
PCP Required	Yes	Yes	No	

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

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

Prescription Drugs				
Drug Deductible	Integrated with medical	\$200 deductible per participant (brand drugs only)	Integrated with medical	
Generics (31-Day Supply/90-Day Supply)	\$15/\$45 copay; \$0 copay for certain generics	\$15/\$45 copay	You pay 20% after deductible; \$0 coinsurance for certain generics	
Preferred	You pay 30% after deductible	You pay 25% after deductible	You pay 25% after deductible	
Non-preferred	You pay 50% after deductible	You pay 50% after deductible	You pay 50% after deductible	
Specialty (31-Day Max)	\$0 if SaveOnSP eligible; You pay 30% after deductible	\$0 if SaveOnSP eligible; You pay 30% after deductible	You pay 20% after deductible	
Insulin Out-of-Pocket Costs	\$25 copay for 31-day supply; \$75 for 61-90 day supply	\$25 copay for 31-day supply; \$75 for 61-90 day supply	You pay 25% after deductible	

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

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

Total Premium	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
Nationwide Network	
No	

\$30 copay	You pay 40% after deductible
\$70 copay	You pay 40% after deductible

\$50 copay	You pay 40% after deductible
You pay a \$250 copay plus 20% after deductible	
\$0 per medical consultation	
\$12 per medical consultation	

\$200 brand deductible	
\$20/\$45 copay	
You pay 25% after deductible (\$40 min/\$80 max)/ You pay 25% after deductible (\$105 min/\$210 max)	
You pay 50% after deductible (\$100 min/\$200 max)/ You pay 50% after deductible (\$215 min/\$430 max)	
\$0 if SaveOnSP eligible; You pay 30% after deductible (\$200 min/\$900 max)/ No 90-day supply of specialty medications	
\$25 copay for 31-day supply; \$75 for 61-90 day supply	

What's New and What's Changing



This table shows you the changes between 2022-23 premium price and this year's 2023-24 regional price for your Education Service Center.

		2022-23 Total Premium	New 2023-24 Total Premium	Change in Dollar Amount	Key Plan Changes
TRS-ActiveCare Primary	Employee Only	\$395	\$432	\$37	<ul style="list-style-type: none"> Individual maximum-out-of-pocket decreased by \$650. Previous amount was \$8,150 and is now \$7,500. Family maximum-out-of-pocket decreased by \$1,300. Previous amount was \$16,300 and is now \$15,000. Teladoc virtual mental health visit copay decreased from \$70 to \$0.
	Employee and Spouse	\$1,113	\$1,167	\$54	
	Employee and Children	\$709	\$735	\$26	
	Employee and Family	\$1,332	\$1,469	\$137	
TRS-ActiveCare HD	Employee Only	\$407	\$444	\$37	<ul style="list-style-type: none"> Individual maximum-out-of-pocket increased by \$450 to match IRS guidelines. Previous amount was \$7,050 and is now \$7,500. Family maximum-out-of-pocket increased by \$900 to match IRS guidelines. Previous amount was \$14,100 and is now \$15,000. <p>These changes apply only to in-network amounts.</p>
	Employee and Spouse	\$1,145	\$1,199	\$54	
	Employee and Children	\$731	\$755	\$24	
	Employee and Family	\$1,370	\$1,510	\$140	
TRS-ActiveCare Primary+	Employee Only	\$496	\$507	\$11	<ul style="list-style-type: none"> Family deductible decreased by \$1,200. Previous amount was \$3,600 and is now \$2,400. Primary care provider and mental health copays decreased from \$30 to \$15. Teladoc virtual mental health visit copay decreased from \$70 to \$0.
	Employee and Spouse	\$1,212	\$1,319	\$107	
	Employee and Children	\$798	\$862	\$64	
	Employee and Family	\$1,523	\$1,674	\$151	
TRS-ActiveCare 2 (closed to new enrollees)	Employee Only	\$1,013	\$1,013	\$0	<ul style="list-style-type: none"> No changes. This plan is still closed to new enrollees.
	Employee and Spouse	\$2,402	\$2,402	\$0	
	Employee and Children	\$1,507	\$1,507	\$0	
	Employee and Family	\$2,841	\$2,841	\$0	

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

Effective: Sept. 1, 2023

MEDICAL RATES

TRS-ActiveCare HD	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$444.00	\$400.00	\$44.00	\$22.00
Employee + Child(ren)	\$755.00	\$400.00	\$355.00	\$177.50
Employee + Spouse	\$1,199.00	\$400.00	\$799.00	\$399.50
Employee + Family	\$1,510.00	\$400.00	\$1,110.00	\$555.00

TRS-ActiveCare Primary	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$432.00	\$400.00	\$32.00	\$16.00
Employee + Child(ren)	\$735.00	\$400.00	\$335.00	\$167.50
Employee + Spouse	\$1,167.00	\$400.00	\$767.00	\$383.50
Employee + Family	\$1,469.00	\$400.00	\$1,069.00	\$534.50

The TRS AC-Primary and TRS AC-Primary+ plans require you to provide a Primary Care Physician (PCP)

TRS-ActiveCare Primary +	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$507.00	\$400.00	\$107.00	\$53.50
Employee + Child(ren)	\$862.00	\$400.00	\$462.00	\$231.00
Employee + Spouse	\$1,319.00	\$400.00	\$919.00	\$459.50
Employee + Family	\$1,674.00	\$400.00	\$1,274.00	\$637.00

The TRS AC-Primary and TRS AC-Primary+ plans require you to provide a Primary Care Physician (PCP)

TRS-ActiveCare 2	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$1,013.00	\$400.00	\$613.00	\$306.50
Employee + Child(ren)	\$1,507.00	\$400.00	\$1,107.00	\$553.50
Employee + Spouse	\$2,402.00	\$400.00	\$2,002.00	\$1,001.00
Employee + Family	\$2,841.00	\$400.00	\$2,441.00	\$1,220.50

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

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.

DENTAL INSURANCE

Delta Dental | www.deltadentalins.com | 1.800.521.2651 PPO 1.800.422.4234 DHMO

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
- Crowns
- Root Canals

DHMO Plan #787736

- No claim forms
- No exclusions or pre existing conditions
- No annual maximum
- Coverage only available in the state of Texas
- Must choose from the directory of dentist- must call 1(800)442-4234 to assign yourself a dentist prior to making an appointment
- Orthodontia coverage for up to 24 months for child dependents under the age of 26

PPO Plan #18428

- Have the freedom to choose any licensed dentist in- or out- of network
- Save money by visiting a Preferred Provider list of "in-network" dentist
- Exams,x-rays and cleanings are covered at 100% "in-network" dentists
- Annual deductible of \$50 per individual; \$150 per family; annual maximum benefit of \$1,000 per person
- Basic Resorative care (e.g., fillings, root canals & gum treatments) are paid at 80% up to annual maximum
- Major services are covered at 50% up to annual maximum
- Twelve month waiting period for major services
- Orthodontia for children up to the age of 26 with a lifetime maximum of \$1,000

DELTA DENTAL PREMIUMS		
SEMI MONTHLY PREM	DHMO	PPO
EMPLOYEE	\$9.63	\$20.74
EMPLOYEE + DEP	\$18.32	\$41.46
EMPLOYEE + CHILDREN		\$36.89
EMPLOYEE + FAMILY	\$27.47	\$57.36

VISION INSURANCE

Ameritas/VSP | www.ameritas.com | 1.800.877.7195

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
- \$10 co-pay for eye exam
- \$10 co-pay for eyeglass basic lenses or contacts
- \$150 toward eyeglasses OR \$150 towards contact lens allowance
- You must use in-network provider for less out-of-pocket expense
- Exam-once every 12 months; Frame & lenses or contact lenses-once every 12 months

VISION SEMI MONTHLY PREM	
AMERITAS/VSP CHOICE PLAN	
EMPLOYEE ONLY	\$5.24
EMPLOYEE + SPOUSE	\$10.50
EMPLOYEE + CHILD(ren)	\$10.50
EMPLOYEE + FAMILY	\$15.28



FLEXIBLE SPENDING ACCOUNTS

First Financial Administrators, Inc. | www.ffga.com | 1.866.853.3539
P.O. Box 161968 | Altamonte Springs, FL 32716

MEDICAL FSA

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

Your maximum contribution amount for 2023 is \$3,050.

- 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 INFORMATION

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 \$5,000 per tax year for reimbursement of dependent care services.
If you are married and file a separate tax return, the limit is \$2,500.**

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.

If I contribute to a Dependent Care Account, can I also write-off my daycare expenses on my taxes?

No, you may not. If you use the Dependent Care Account, you save money up-front on your taxes. Your per-paycheck deductions are taken out of your paycheck before you pay taxes on your income. Thus, your taxable income is less, and you pay less in taxes.

What kinds of care does this cover?

Before-school and after-school care

- Expenses for preschool/nursery school
- Extended day programs
- Au pair services (amounts paid for the actual care of the dependent)
- Babysitter (in or out of the home)
- Nanny services (amounts paid for the actual care of the dependent)
- Summer day camp for your qualifying child under the age of 13
- Elder day care for a qualifying individual

Can I use the dependent care account to fund elder care for my mother/father/spouse?

Yes, you may use your Dependent Care account to fund care for individuals who qualify as your dependent child under the age of 13 who lives with you for more than half the year (and for whom you are the custodial parent in cases of divorce) your spouse, or other tax dependent, who is incapable of self-care and lives with you for more than half the year.

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FSA RESOURCES

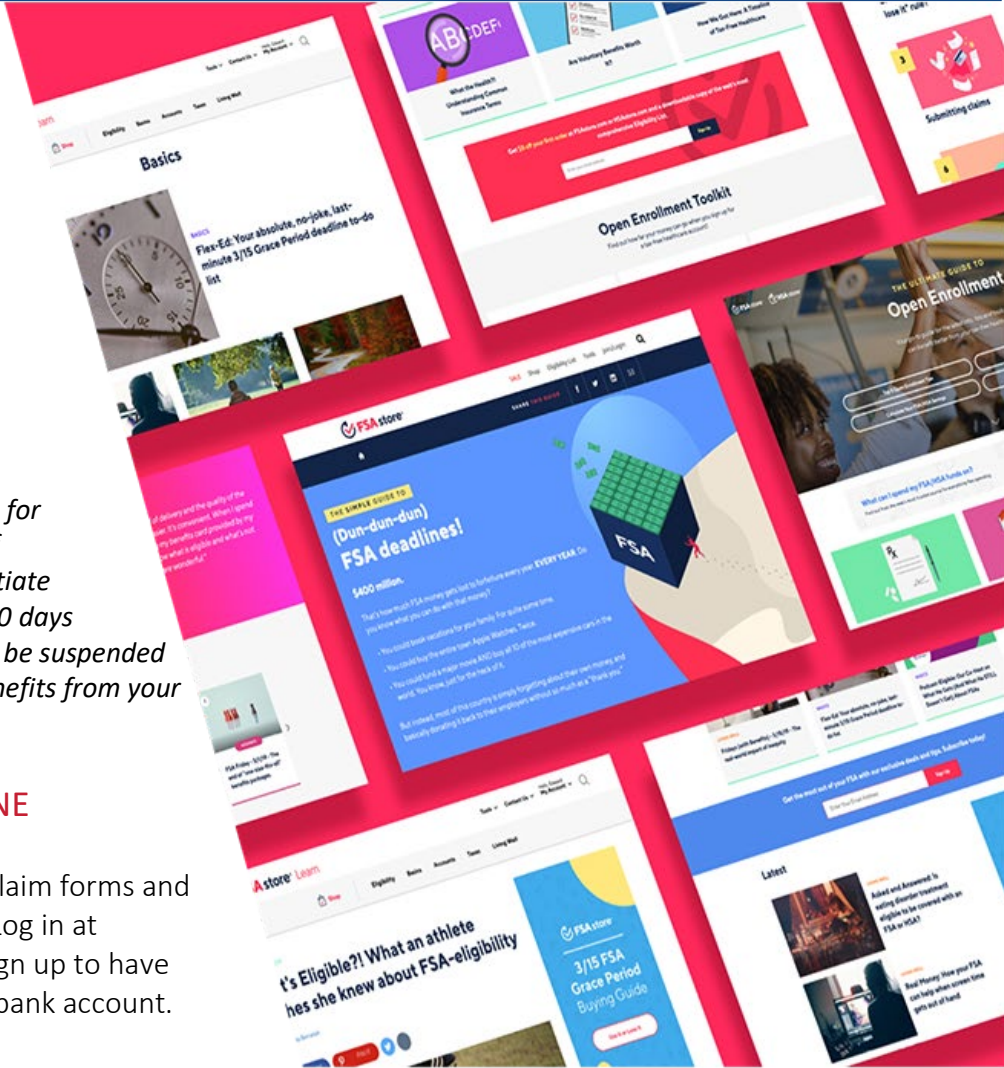
BENEFITS CARD

The First Financial Benefits Card is available to all employees that participate in a Medical FSA and/or a Dependent Care FSA. 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.

The IRS requires validation of most transactions for FSAs. You must submit receipts for validation of expenses when requested. If you fail to substantiate by providing a receipt to First Financial within 60 days of the purchase or date of service your card will be suspended until the necessary receipt or explanation of benefits from your insurance provider is received.

VIEW YOUR ACCOUNT DETAILS ONLINE

Sign up to view your account balance, find claim forms and check claims status on our secure website. Log in at www.ffga.com. After you log in, you may sign up to have reimbursements directly deposited to your bank account. View the [Portal Log-in Guide](#) now!

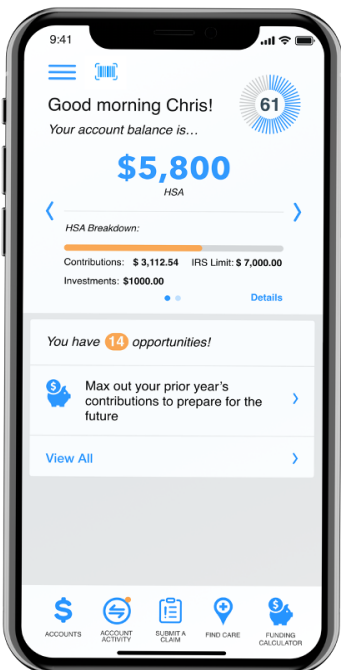


FF MOBILE ACCOUNT APP

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 StoreSM or Google Play StoreTM. View the FF Mobile Account App [User Guide](#) and [Quick Reference Guide](#).

FSA STORE

First Financial has partnered with the FSA Store to bring you an easy-to-use online store to better understand and manager 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 store at <http://www.ffga.com/individuals/#stores> for more details and special deals.



HEALTH SAVINGS ACCOUNTS

First Financial Administrators, Inc. | www.ffga.com | 1.866.853.3539
P.O. Box 161968 | Altamonte Springs, FL 32716

HEALTH SAVINGS ACCOUNTS

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.

	2023	2024
HSA Contribution Limit	<ul style="list-style-type: none">Self Only: \$3,850Family: \$7,750	<ul style="list-style-type: none">Self Only: \$4,150Family: \$8,300
HDHP Minimum Deductibles	<ul style="list-style-type: none">Self Only: \$1,500Family: \$3,000	<ul style="list-style-type: none">Self Only: \$1,600Family: \$3,200
<i>\$1,000 catch-up contributions (age 55 or older)</i>		

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.

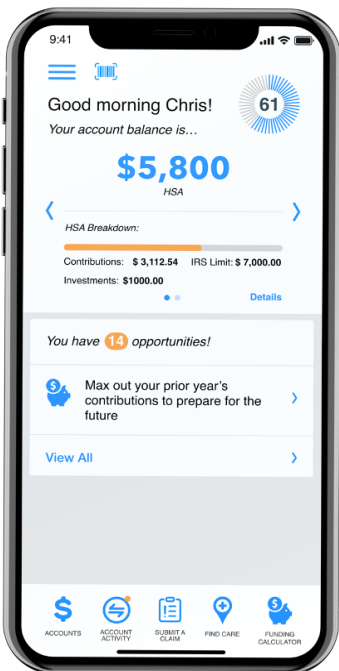
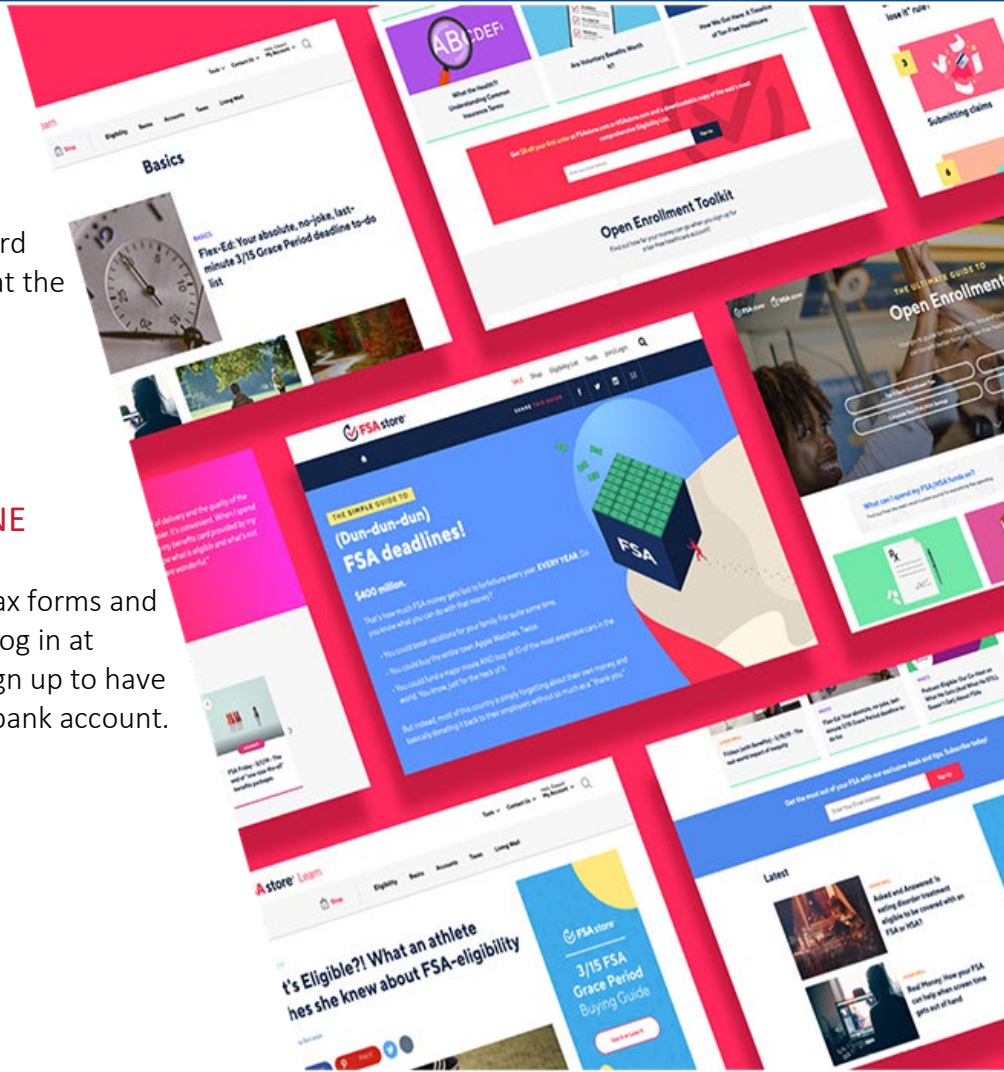
HSA RESOURCES

BENEFITS CARD

The First Financial Benefits Card is available to all employees that participate in a 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. After you log in, you may sign up to have reimbursements directly deposited to your bank account. View the [Portal Log-in Guide](#) now!



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 StoreSM or Google Play StoreTM. View the FF Mobile Account App [User Guide](#) and [Quick Reference Guide](#).

HSA STORE

First Financial has partnered with the HSA Store to bring you an easy-to-use online store to better understand and manager 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 store at <http://www.ffga.com/individuals/#stores> for more details and special deals.



TERM LIFE & AD&D INSURANCE

Sunlife | www.sunlife/us.com | 800-247-6875 #245044

EMPLOYER-PAID TERM LIFE & AD&D INSURANCE

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. Your employer provides all eligible employees with a \$15,000 policy. The coverage is 100% paid for by your employer. This is a term life policy that is in effect while you are employed.

VOLUNTARY TERM LIFE INSURANCE

Voluntary life insurance is term life coverage you can purchase in addition to the basic life plan provided by your employer. It will cover you for a specific period while you are employed. Plan amounts are offered in tiers so you can choose the amount of coverage that works best for you and your family. 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. Limitations apply, please see policy for details. Visit the Employee Benefits Center for more details.

This year ONLY, SunLife is giving LPISD Employees and their dependents a limited Guaranteed Issue (GI) on the Voluntary GTL. You can enroll up to \$200,000 for Employees and up to \$30,000 for Spouse without EOI (Evidence of insurability and go through underwriting process for approval or denial decision). IF you are enrolling over those limits you will be subject to insurability and must complete a health questionnaire (EOI) prior to coverage being issued. If no health questionnaire is filled out and APPROVED by SunLife, there will be no additional coverage in force for those who have applied for coverage or any increases in coverages over the GI amounts above. During your enrollment on the website, you must press the link provided for the EOI questionnaire. If you are unable to completely fill-out the application on-line, please print out the application located on Benefitsolver enrollment site in the Reference Center on your home page.

For Existing Employees:

Age banded rates for employees, spouse, and children. The policy will age the insured as of their age on September 1 of each year and rates will be based on your age-band for that plan year.

- Coverage available for spouse and child(ren) only if you have coverage for yourself
- Employee: may apply for coverage in \$10,000 increments up to a maximum of \$500,000
- Spouse: \$10,000 increments to a maximum of \$250,000 (not to exceed 100% of employee coverage)
- Child(ren): \$5,000 increments to a maximum of \$10,000 if you have coverage for yourself

- Guaranteed Issue up to 5x annual salary to a maximum of \$200,000 of coverage for employees
- Guaranteed Issue for Spouse coverage in increments of \$10,000 up to \$30,000 of coverage

For New Hires within 31 days:

Age banded rates for employees, spouse, and children. The policy will age the insured as of their age on September 1 of each year and rates will be based on your age-band for that plan year.

- Coverage available for spouse and child(ren) only if you have coverage for yourself
- Guaranteed Issue up to 5x annual salary to a maximum of \$200,000 of coverage for employees
- Guaranteed Issue for Spouse coverage in increments of \$10,000 up to \$30,000 of coverage (cannot exceed 100% of employee coverage)
- Guaranteed Issue for Child(ren) coverage up to \$10,000

TEXAS LIFE – PERMANENT LIFE

Texas Life | 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.

HIGHLIGHT

- 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.

Highlights:

- Portable – you can take it with you when you leave the district for the same premium you pay now
- Coverage to age 121
- Coverage for child(ren) & grandchild(ren) up to \$50,000
- Employees age 49 and under : eligible to receive up to \$300,000 coverage; **Express Issue**
- Employees age 50-65: eligible to receive up to \$100,000 coverage; **Express Issue**
- Spouses up to age 60: **Express Issue** coverage up to \$50,000; rate varies based on spouse age
- No scheduled rate increase
- Chronic Illness Rider- pays up to 92% policy value to help cover cost of long term care if you cannot perform 2 of the 5 ADL (Assisted Daily Living) functions. **Chronic illness rider is NOW included for spouse up to \$50,000.**

Rates can be found in the Employee Benefit Center at <https://benefits.ffga.com/laporteisid>

HOSPITAL INDEMNITY INSURANCE

MetLife | www.metlife.com | 800-438-6388

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!

- Normal Pregnancy is covered
- No pre-existing condition limitation
- Newborn Confinement Benefit - \$25 a day for up to 2 days
- Plan is Portable - take it with you when leave the district

Benefit	Plan Pay You
Admission in Hospital	\$500
Confinement in Hospital	\$100 per day (up to 31 days)
Admission to ICU	\$1000
Confinement in ICU	\$200 per day (up to 31 days)
Inpatient Rehab Unit	\$100 per day (up to 15 days)

*****PLEASE NOTE: Any benefit payable will reduced by 25% of the amount listed for that benefit in the schedule if the covered person's attained age is 65 to 69.**

Any benefit payable will reduced by 50% of the amount listed for that benefit in the schedule if the covered person's attained age is 70 or older.***

HOSPITAL INDEM SEMI MONTHLY PREM	
COVERAGE TIER	PREMIUM
EMPLOYEE ONLY	\$7.28
EMPLOYEE + SPOUSE	\$12.68
EMPLOYEE + CHILD(ren)	\$12.68
EMPLOYEE + FAMILY	\$18.28

DISABILITY INSURANCE

UNUM | www.unum.com | 800-858-6843 #124859

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?

FEATURES

- **Guaranteed Issue coverage for everyone; pre-existing condition limitations only apply on all new levels of coverage elected or for any enhancements to the plan. Pre-existing conditions are not paid for the first 12 months of coverage.**
- Based on your individual need, you can select from multiple elimination periods- 0/7 days, 14 days, 30 days, 60 days, 90 days and 180 days
- The cost depends on the amount of coverage selected, and on how quickly you want benefits to begin (Elimination period / aka - waiting period)
- Your monthly benefit will pay you in \$100 increments: up to 66⅔% of your salary or maximum of \$7,500/month
- **Disability insurance will pay you as long as you are medically disabled-up to the age of 65; if the doctor states you are unable to return to work**
- **If you select an elimination period of 30 days or less, your waiting period is waived upon in-patient hospital admittance of 24 hours or more**

Rates can be found in the Employee Benefit Center at <https://benefits.ffga.com/laporteisd>

CANCER INSURANCE

American Fidelity | www.americanfidelity.com | 800-662-1113

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.

Highlights include:

- Benefits are paid directly to you and coverage can be for you or your entire family
- Pays you based upon a schedule of 25 benefits; some of the key benefits include:
 - ~Pays up to \$10,000(low plan) or \$15,000(high plan) annually for chemotherapy, radiation, and immunology
 - ~Pays up to \$10,000(low plan) or \$15,000(high plan) annually for blood, plasma, and platelets
- Both HIGH and LOW plans pay you upon initial cancer diagnosis- \$2,500 for low; \$5,000 for high
- Both HIGH and LOW plans include an Intensive Care Unit (ICU) rider that will pay \$600 daily, up to 45 days, if you are confined to the ICU for ANY reason
- Pays ambulance benefit, \$200 for ground, and \$2,000 for air
- Wellness screening Benefit - \$25 per year for Low plan, \$75 per year for High plan
- The plan is portable after 12 months of continuous coverage so you can take it with you when you leave the district
- Pays for Hospital confinement, extended care facilities, hospice care, surgery, among other things

CANCER INSURANCE		
SEMIMONTHLY PREM	BASIC	ENHANCED
EMPLOYEE	\$7.90	\$13.43
EMPLOYEE + FAMILY	\$15.80	\$26.90

Certain pre-existing condition limitations apply for one year. A pre-existing condition is a disease or physical condition for which symptoms existed or medical advice or treatment was recommended or received within the twelve-month period prior to the effective date of coverage. AFA does not pay for any loss due to a pre-existing condition during the first 12 months of coverage

CRITICAL ILLNESS INSURANCE

Aflac | www.aflac.com | 800-433-3036

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, 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.

- **Guaranteed issue** - no medical questions to answer (12-month pre-existing condition limitation)
- Plan can cover employee and child(ren) and you can elect coverage for spouse also
- Plan pays lump-sum benefit amount in \$10,000 increments up to \$50,000.
- Wellness benefit pays you \$50 for annual health screening test on employee and spouse (if covered on policy)
- A percentage of the basic benefit is payable for each covered person in each category and a recurrence benefit is payable in the critical illness and cancer categories
- The plan is portable so you can take it with you when you leave the district
- Age-banded Rates for the plan are listed in the Reference Center, rates lock in once your coverage is elected and effective.

Covered Illnesses

- Heart Attack or Stroke
- Benign Brain Tumor
- Major Organ and/or Bone Marrow Transplant
- Coma
- Multiple Sclerosis
- Kidney Failure
- Sickle Cell Anemia, Rabies, Polio, & more– (25%)
- Coronary Artery By-Pass (25%)
- Other Listed Conditions – Partial Benefit

ACCIDENT INSURANCE

MetLife | www.metlife.com | 800-438-6388

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

Highlights:

- **Guaranteed Issue for employees**
- Plan is fully portable, even if you leave the district
- Coverage available for employee, spouse and children for accidents-both on and off the job
- No deductibles required
- Pays directly to the employee, based on the schedule of benefits
- Coverage includes- but is not limited to- fractured bones, third degree burns, concussions, broken teeth, emergency room treatment, ambulance, and hospital confinement

ACCIDENT INSURANCE		
SEMI MONTHLY PREM	LOW	HIGH
EMPLOYEE	\$3.40	\$4.94
EMPLOYEE + SPOUSE	\$6.71	\$9.70
EMPLOYEE + CHILD(ren)	\$8.09	\$11.65
EMPLOYEE + FAMILY	\$9.54	\$13.75

IDENTITY THEFT PROTECTION

ILock360 | www.ILOCK360.com | 855-287-8888

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.

Highlights include:

- All employees eligible for Identity Theft
- Protection coverage
- Monitors your identity 24/7/365
- Personal email address required to sign up for this program
- Once you are sent an initial email notification of your coverage, you will need to register your on-line account
- Plan can protect individual or family
- Dependents are covered up to 18 years of age

ID THEFT PROTECTION INSURANCE		
SEMI MONTHLY PREM	PLUS	PREMIUM
EMPLOYEE	\$4.00	\$7.50
EMPLOYEE + SPOUSE	\$7.50	\$11.00
EMPLOYEE + CHILD(ren)	\$6.50	\$10.00
EMPLOYEE + FAMILY	\$10.00	\$13.75

VOLUNTARY RETIREMENT PLANS

TCG Group Holdings | www.tcgservices.com | 800-943-9179

403(b) RETIREMENT PLAN

Research shows that Americans are living well past retirement years. Are you saving enough to be able to enjoy those years? A 403(b) plan can help you get there.

It's an IRS-approved retirement plan that allows you to set aside money on an after-tax basis for your retirement. Contributions are conveniently made through payroll deduction, so money is moved from your paycheck into the account automatically. Now is the time to take full advantage of this opportunity to maximize your retirement savings!

457(b) RETIREMENT PLAN

The 457(b) plan is an employer-sponsored voluntary retirement savings plan that allows you to save money for retirement on a tax-deferred basis. The plan contains most of the same features of the 403(b) plan but is different in one unique way. Distributions from a 457(b) Deferred Compensation Plan are not subject to the 10 percent excise tax for early withdrawal.

CONTRIBUTION LIMITS

In 2023, you can contribute 100 percent of your includible compensation up to \$22,500, whichever is less. If you are age 50 or older, you can contribute up to an additional \$7,500 for a total of \$30,000.

403(b) RETIREMENT PLANS

TCG Group Holdings | www.tcgservices.com | 800-943-9179

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

A 403(b) is a voluntary retirement plan that allows you to save money in a pre-tax (Traditional) or after-tax (Roth) account. Contributions to the plan are salary-deducted from your paycheck and automatically deposited into your 403(b)-retirement savings account. Early withdrawals from a 403(b) account are subject to a 10% early withdrawal tax.

TCG is the 403(b)-plan administrator—managing your contributions, distributions, and personal updates. Money and investments are held with the vendor of your choice. To get started, visit www.tcgservices.com/documents and find your employer's 403(b) Approved Vendor List. Open an account by contacting one of the approved 403(b) providers directly. Next, register your access to your 403(b) administration account with TCG and set up salary deferrals at www.tcgservices.com/enroll.

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

In 2023, you can contribute 100 percent of your includible compensation up to \$22,500, whichever is less. If you are age 50 or older, you can contribute up to an additional \$7,500 for a total of \$30,000. *All investing involves risk. Past performance is not a guarantee of future returns.*

For assistance enrolling or if you'd like to speak with a Retirement Plan Specialist, please call the TCG Advisors Hotline at 512-600-5204 or visit www.tcgservices.com/telewealth.

457(b) RETIREMENT PLANS

TCG Group Holdings | www.tcgservices.com | 800-943-9179

A 457(b) plan is a Tax Deferred Retirement Plan available to employees of state and local governmental agencies, including public school employees. They are like 401(k) plans because they allow you to place a percentage of your salary into an employer-sponsored plan that helps you save for retirement. You will not have to pay taxes on what you contribute, or your earnings made until you withdraw the money.

A 457(b) is an employer-sponsored, voluntary retirement plan that allows you to save money in a pre-tax (Traditional) or after-tax (Roth) account. Contributions to the plan are salary-deducted from your paycheck and automatically deposited into your 457(b)-retirement savings account. Early withdrawals from a 457(b) account are not subject to a 10% percent early withdrawal tax upon separating from the employer. Plan investments are overseen by a committee made up of superintendents and chief financial officers, giving participants the assurance educators are looking for their best interest. The plan does not have any surrender charges or penalties upon distribution. To get started, simply visit www.tcgservices.com/enroll

BENEFITS

- Investment options: fixed annuities, variable annuities, or mutual funds
- Flexibility: start, stop, and adjust your contributions as allowed by your employer's plan
- Receive periodic account statements
- No 10% federal penalty on interest or earnings for early withdrawal
- No current federal income taxes on the money you put into the plan until it is time to take withdrawals

CONTRIBUTION LIMITS

In 2023, you can contribute 100 percent of your includible compensation up to \$22,500, whichever is less. If you are age 50 or older, you can contribute up to an additional \$7,500 for a total of \$30,000. *All investing involves risk. Past performance is not a guarantee of future returns.*

For assistance enrolling or if you'd like to speak with a Retirement Plan Specialist, please call the TCG Advisors Hotline at 512-600-5204 or visit www.tcgservices.com/telewealth.

TELEHEALTH

Recuro | www.recurohealth.com | 855-935-5842

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!

- Highlights Include:
- \$0 Co-Pay
- Unlimited use for you and your dependents
- You do not need medical insurance with LPISD to use this plan

TELEMEDICINE		
SEMI MONTHLY PREM	PLUS	
EMPLOYEE + FAMILY	\$5.00	

EMPLOYEE ASSISTANCE PROGRAM

SupportLinc | www.supportlinc.com | 1.800.475.3327

At some point in our lives, each of us faces a problem or situation that is difficult to resolve. The SupportLinc employee assistance program (EAP) is a confidential resource that helps you deal with life's challenges and the demands that come with balancing home and work.

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.

The Employee Assistance Program is a total life assistance tool for you and your dependents provided by LPIISD.

Highlights include:

- Available 24/7/365 via phone, online resources, and the eConnect Mobile App
- Free 30 min in person consult with an attorney at no charge
- Up to 3 face to face visits with a licensed professional Counselor
- EAP is available at no charge and is 100% confidential between participant and medical clinician
- EAP will help with anxiety, depression, marriage and relationship problems, grief and loss, substance abuse, anger management, work related pressures, stress and more.

Phone: 800-475-3EAP (3327) | SMS Text Support to 51230 | Web: www.supportlinc.com

Please review the plan summary on <https://benefits.ffga.com/laporteisd> for additional information.

FINANCIAL WELLNESS

Finpath | www.finpathway.com | 800-943-9179

The overall financial health and wellbeing of our employees is a very important issue for our District. Having useful tools under your belt, can help you manage your immediate, and future financial needs. That's where Finpath comes in. FinPath is a workplace benefit designed to help improve your financial spending habits, budgeting, and decision making. This is a FREE District paid service for you to help your family prioritize your short- and long-term financial goals!

Helps you:

- improve credit scores and debt
- save money and budget your income
- improve your financial decision-making

Includes:

- Learning Modules
- Planning toolkits
- Live Advisor Support

You are responsible for signing up for and participating in this free program through their website.

CATASTROPHIC LEAVE BANK

Eligible employees may select to become members of the Catastrophic Sick Leave Bank through the Benefit Solver website viewable by all employees when electing/declining benefits selections during the annual Open Enrollment period.

All fulltime or permanent part-time employees of the District, who have two(2) days of available leave as of September 1 of the current school year, are eligible for initial membership in the Catastrophic Sick Leave Bank. Please see more information on <https://benefits.ffga.com/laporteisd>

COBRA

First Financial Administrators, Inc. | www.ffga.com | 1.800.523.8422, option 4

Life is full of unexpected events that may impact your health insurance coverage. Under the Consolidated Omnibus Budget Reconciliation Act, better known as COBRA, you have the right to continue your group health coverage such as medical, dental, vision insurance and flexible spending accounts for a limited period of time.

HIGHLIGHTS

- Temporary continuation of coverage that generally lasts for 18 months due to employment termination or reduction of hours of work, divorce, death or a child no longer qualifying as a dependent. Certain qualifying events, or a second qualifying event during the initial period of coverage, may permit a beneficiary to receive a maximum of 36 months of coverage.
- Either you or your family member are responsible for notifying your employer of a divorce, legal separation or child losing dependent status within 60 days of the event.
- In the case of termination, death or reduction in hours contact Benefit Specialist (281)604-7054

MOBILE PHONE APPLICATIONS

Helpful resources in the palm of your hand!

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



AFmobile Access your American Fidelity Cancer account with AFmobile. Here you can manage your benefits by filing and tracking claims, viewing the policy to see what's covered. You can also manage personal information, elect text and email notifications, or use it to contact American Fidelity



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



ExpressScripts 1.844.367.6108 ***NEWRXPLAN FOR23-24 Starting Friday, Sept. 1, 2023, Express Scripts will be the new pharmacy benefits manager (PBM)for TRS-ActiveCare. We're here to help you understand your prescription benefits and make it convenient and affordable for you and your family to get the prescription medications you may need.



eConnect Mobile App eConnect® provides participants with mobile access to helpful resources for a variety of behavioral health, wellbeing, and productivity-related concerns. The app also contains a summary of each client's unique program, as well as the ability to connect immediately with a licensed and experienced behavioral health clinician



FF Flex Mobile All of your Flexible Spending Account information at the tip of your fingers. With the FF FlexMobile App you can submit claims, view account balance & history, see claim status, view alerts, upload receipts and documentation and more!



MyChoice Mobile App with the MyChoice Mobile App, we provide all the tools necessary for employees to access their benefit choices when and where they need it most. Features include Current Benefits, Upload Dependents, Future Elections, Beneficiaries, Messages, ID cards, Contact Information and more.



UNUM Customer App Easily manage your claim 24/7 on all your mobile devices. Features include reporting a new claim, check the status of your existing claim, upload documents, review recent activity, or contact UNUM.



RECURO Access to board certified doctors is just a click away. Recuro provides virtual healthcare by connecting you to U.S. board certified doctors within minutes wherever you are, at home, work, or while traveling

CLEVER RX

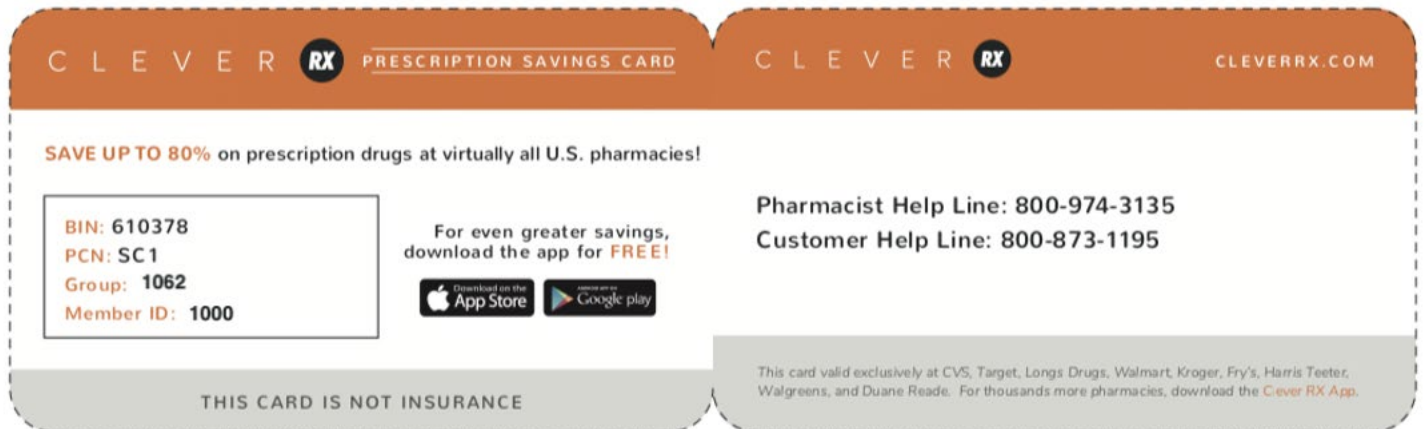
Clever RX | <https://partner.cleverrx.com/ffga> | 1.800.873.1195

Clever RX helps you save money by using a prescription drug savings card. They partner with the healthcare community to bring state-of-the-art, money-savings tools to participants. It helps you save up to 80% off prescriptions drugs and often beats the average copay. Plus, it's completely free. Thanks to Clever RX, you will never overpay for prescriptions again!

HIGHLIGHTS

- 100% FREE to use.
- Unlock discounts on thousands of medications.
- Save up to 80% on prescription medication – Often beats your copay!
- Download the Clever RX app by using the information on your card below to unlock exclusive savings at over 60,000 pharmacies nationwide.
- Available to use now!

Use Clever RX every time you pay for a medication for instant savings! Download the app or visit the site to price a drug: <https://partner.cleverrx.com/ffga>.



CONTACT INFORMATION

LAPORTE ISD BENEFITS OFFICE

Lupe Lara, Benefits Specialist

1002 San Jacinto | La Porte, TX 77571

(281)604-7054

LARAG@LPISD.ORG

FIRST FINANCIAL GROUP OF AMERICA

Joe Quijada, Senior Account Manager

(281)690-8198 / joe.quijada@ffga.com

CONTACTS

BENEFIT	CARRIER	PHONE	WEBSITE
Medical	BCBS	866.355.5999	www.bcbstx.com/trsactivecare
Pharmacy	Express Scripts	844.367.6108	www.express-scripts.com/trsactivecare.com
Dental PPO	Delta Dental #18428	800-521-2651	www.deltadentalins.com
Dental DHMO	Delta Dental #78736	800-422-4234	www.deltadentalins.com
Vision	Ameritas / VSP	800-877-7195	www.ameritas.com
Hospital Indemnity	MetLife	800-438-6388	www.metlife.com
Cancer	American Fidelity	800-662-1113	www.americanfidelity.com
Critical Illness	Aflac	800-433-3036	www.aflac.com
Disability	UNUM #124859	800-858-6843	www.unum.com
Permanent Life	Texas Life	800-283-9233	www.texaslife.com
Group Life	Sunlife #245044	800-247-6875	www.sunlife.com/us
Identity Theft	iLock360	855-287-8888	www.ilock360.com
Accident	Metlife	800-438-6388	www.metlife.com
Telemedicine	Recuro	855-935-5842	www.recurohealth.com
Employee Assistance Program (EAP)	SupportLinc	800-475-3327	www.supportlinc.com
Retirement Savings 403(b)&457(b)	TCG Group Holdings	800-943-9179	www.tcgservices.com
FSA, Dependent Care & HSA	FFGA	866-853-3539	www.ffga.com



LA PORTE ISD'S EMPLOYEE BENEFITS CENTER

Your benefits guide

WELCOME!

We are pleased to provide eligible employees a competitive benefits package that includes both employer-paid and voluntary products. We have worked closely with First Financial (FFGA) to provide you with a variety of benefits and resources to help you reach your healthcare and retirement needs. Details of all available benefits can be found on this website. Be sure to read the product descriptions carefully so you are well prepared before enrollment begins. If you have questions, feel free to reach out to your First Financial Account Representative!



NEW HIRES

You have 31 days from your actively-at-work date to make benefit elections.

OPEN ENROLLMENT

Open enrollment begins July 10 – August 17, 2023.

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.

This site 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.

ADDITIONAL RESOURCES & NOTICES

[Common Benefit Terms](#)

FIRST FINANCIAL GROUP OF AMERICA

16945 Northchase Drive, Ste.
1800, Houston, TX 77060

Email Us: [Click here](#)

Phone: 800-523-8422

Local Phone: 281-847-8422

Fax: 281-847-8424



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[FFGA Legal Notice](#)