LA PORTE ISD 2024-2025 BENEFITS GUIDE





Joe Quijada, Sr. Account Manager 281.690.8198 joe.quijada@ffga.com

Lupe Lara, Benefits Specialist 281.604.7054 larag@lpisd.org

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Employee Benefits Center

A guide to your benefits!

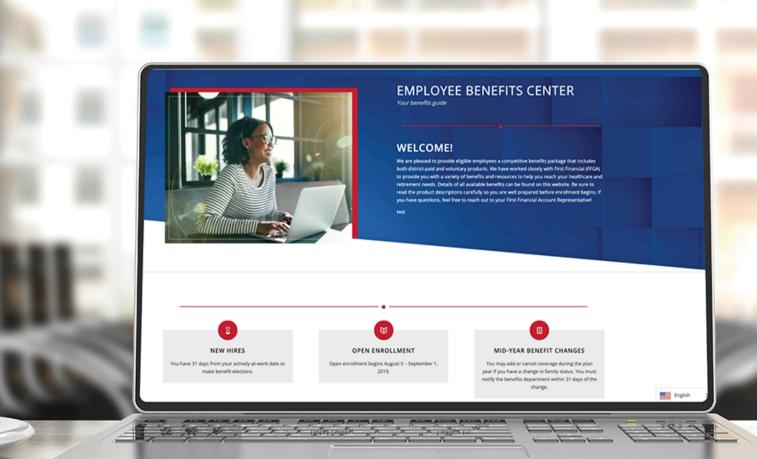
La Porte ISD and FFGA are excited to provide you with a custom website filled with information about your benefits. Visit the Employee Benefits Center to see current benefit options for your employer as well as find claim forms, important phone numbers and enrollment information.

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/laporteisd/



How to Enroll Benefits Enrollment

New Enrollment Platform

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 to view the on-site enrollment schedule.

Online Enrollment

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

Enroll Now

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 to a new PIN. Please note your new PIN because you will use the new PIN 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 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.

After Open Enrollment has ended:

You can only make changes to your benefits during July 8 - August 16, 2024. Once open enrollment has ended, you can only log in and view your benefits. No changes can be made without a Qualified Life Event.

Enrollment Assistance Center Instructions

Call 855-765-4473 and follow the prompts to be connected to your local FFGA branch office. Hours of operation are 8 a.m. to 5 p.m. (local time) Monday through Friday. There is an option to leave a voice message for a representative to call you back. Phone calls will be returned as soon as possible or the next business day if it is after hours.

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. Medical Insurance can be active on work date or the first day of the following month of hire. All other benefits start on the first day of the following month of the hire date.

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 are all considered qualified life events.

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.**

Section 125 Plans

Section 125 Plan Information & 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.

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

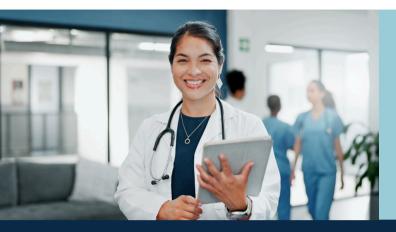
Section 125 Plan Sample Paycheck						
	Without S125 With S125					
Monthly Salary	\$2,000	\$2,000				
Less Medical Deductions	-N/A	-\$250				
Tax Gross Income	\$2,000	\$1,750				
Less Taxes (Fed/State at 20%)	-\$400	-\$350				
Less Estimated FICA (7.65%)	-\$153	-\$133				
Less Medical Deductions	-\$250	-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 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

TRS-Active Care Primary	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$471	\$400	\$71	\$35.50
Employee + Spouse	\$1,272	\$400	\$872	\$436
Employee + Child(ren)	\$801	\$400	\$401	\$200.50
Employee + Family	\$1,602	\$400	\$1,202	\$601

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

TRS-ActiveCare Primary +	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$553	\$400	\$153	\$76.50
Employee + Spouse	\$1,438	\$400	\$1,038	\$519
Employee + Child(ren)	\$941	\$400	\$541	\$270.50
Employee + Family	\$1,825	\$400	\$1,425	\$712.50

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

TRS-ActiveCare HD	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$484	\$400	\$84	\$42
Employee + Spouse	\$1,307	\$400	\$907	\$453.50
Employee + Child(ren)	\$823	\$400	\$423	\$211.50
Employee + Family	\$1,646	\$400	\$1,246	\$623

TRS-ActiveCare 2	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$1,013	\$400	\$613	\$306.50
Employee + Spouse	\$2,402	\$400	\$2,002	\$1,001
Employee + Child(ren)	\$1,507	\$400	\$1,107	\$553.50
Employee + Family	\$2,841	\$400	\$2,441	\$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 keep it.

Once Active Care 2 has been dropped, the plan cannot be re-elected.

If you were enrolled in The Baylor Scott & White Health plan, you will automatically be re-enrolled in ActiveCare Primary+

2024-2025 TRS ActiveCare Plan Highlights and Changes

	TRS-ActiveCare Primary	TRS-ActiveCare Primary+	TRS-ActiveCare HD
Plan Summary	Lowest premium of all three plans Copays for doctor visits before you meet your deductible Statewide network Primary Care Provider referrals required to see specialists Not compatible with a Health Savings Account No out-of-network coverage	Copays for many services and drugs Higher premium	Compatible with a Health Savings Account Nationwide network with out-of-network coverage No requirement for Primary Care Providers or referrals Must meet your deductible before plan pays for non-preventive care

Plan Features				
Type of Coverage	In-Network Coverage Only	In-Network Coverage Only	In-Network	Out-of-Network
Individual/Family Deductible	\$2,500/\$5,000	\$1,200/\$2,400	\$3,200/\$6,400	\$6,400/\$12,800
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	\$8,050/\$16,100	\$20,250/\$40,500
Network	Statewide Network	Statewide Network Statewide Network Nationwide Network		e Network
PCP Required	Yes	Yes	No	

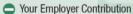
Doctor Visits				
Primary Care	\$30 copay	\$15 copay	You pay 30% after deductible	You pay 50% after deductible
Specialist	\$70 copay	\$70 copay	You pay 30% after deductible	You pay 50% after deductible

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)	ply) \$15/\$45 copay; \$0 copay for certain generics \$15/\$45 copay You pay 20		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	

How to Calculate Your Monthly Premium

Total Monthly Premium



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.

Primary Plans & Mental Health

 Both Primary and Primary+ offer \$0 virtual mental health visits with any in-network provider.

Compare Prices for Common Medical Services

REMEMBER:

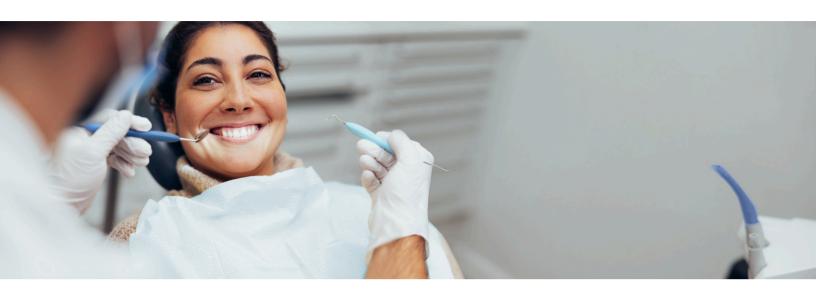
Call a Personal Health Guide 24/7 to help you find the best price for a medical service. Reach them at 1-866-355-5999.

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

^{**}Pre-certification for genetic and specialty testing may apply. Contact a PHG at 1-866-355-5999 with questions.

Dental Insurance

Plan Choices



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
- Crown
- Root Canals

PPO Dental Semi-Monthly Premiums				
Employee Only	\$22.35			
Employee + Spouse	\$44.68			
Employee + Children	\$39.76			
Employee + Family	\$61.81			

DHMO Dental Semi-Monthly Premiums			
Employee Only	\$10.35		
Employee + One	\$19.68		
Employee + Family	\$29.52		

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 paid through payroll deduction. Here are just a few of the areas where you will save money with your plan:

• Eye Exams

Contact lenses

Vision correction

• Eyeglasses

• Eye surgeries

Vision Semi-Monthly Premium			
Employee Only	\$5.24		
Employee + Spouse	\$10.50		
Employee + Children	\$10.50		
Employee + Family	\$15.28		



Flexible Spending Accounts

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

Medical FSA

A Medical Flexible Spending Account (Medical FSA) is an IRS-approved program to help you save taxes and pay for out-of-pocket medical expenses not covered under your medical plan. If your plan includes a grace period option, you have additional time to incur and claim against unused funds in the new plan year. Keep in mind that remaining balances after the grace period is exhausted will be forfeited under the use-it-or-lose-it rule.

Your maximum contribution amount for 2024 is \$3,200.

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 \$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.

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. | <u>www.ffga.com</u> | 1.866.853.3539 P.O. Box 161968 | Altamonte Springs, FL 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.

	2024	2025
HSA Contribution Limits	Self: \$4,150Family: \$8,300	Self Only: \$4,300Family: \$8,550
Health Insurance Deductible Limits	Self Only: \$1,600Family: \$3,200	Self Only: \$1,650Family: \$3,300

\$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. After you log in, you may sign up to have reimbursements directly deposited to your bank account.



Good morning Chris! Your account balance is... \$5,800 HSA Breakdown: Contributions: \$3,112.54 IRS Limit: \$7,000.00 Investments: \$1000.00 Investments: \$1000.00 Details You have (1) opportunities! Max out your prior year's contributions to prepare for the future View All SAMA OUT OF THE CAME OF TH

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 & AD&D

Employer-Paid & Voluntary

SunLife | www.sunlife.com/us | 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 a \$15,000 policy. The cost of this policy is paid for 100% 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 of time 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.



Texas Life

Permanent Life



TexasLife | 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.

Disability Insurance

UNUM | www.unum.com | 800.858.6843 #124859

Why Do I Need Disability 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?

Disability Highlights

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 663/3% 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



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!

Plan Highlights:

- 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	Benefit Amount
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 Indemnity Insurance		
Semi-Monthly Premium		
Employee Only	\$7.82	
Employee + Spouse	\$12.68	
Employee + Children	\$12.68	
Employee + Family	\$18.28	

Cancer Insurance

Plan Options



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.

Cancer Insurance			
Semi-Monthly Premium Basic Enhanced			
Employee	\$7.90	\$15.81	
Employee + Family	\$13.43	\$26.90	

Critical Illness Insurance

Aflac | www.aflac.com | 800.433.3036

Prepare For the Unexpected

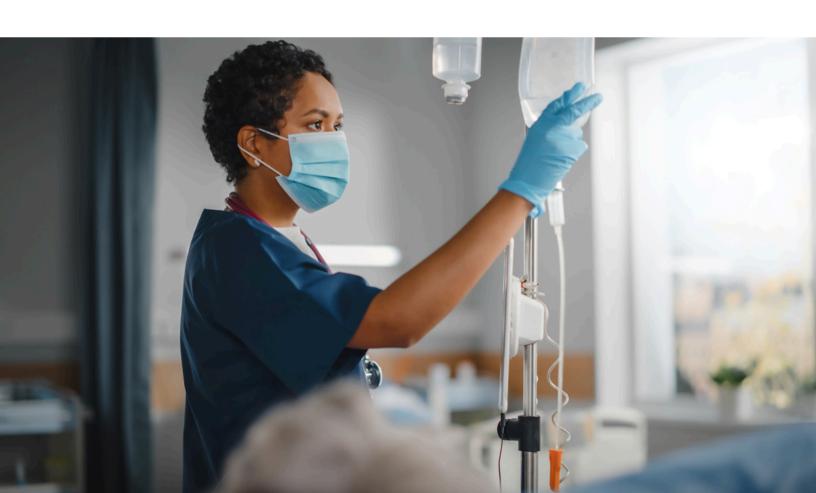
If you've heard of heart attacks, strokes, organ transplants or paralysis, then you're familiar with critical illness. It's likely you or someone you know has experienced one of these life-altering events. Often times, a critical illness has a powerful impact on people's lives, affecting their livelihood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

Plan Highlights

- 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



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

Accident Insurance			
Semi-Monthly Premium	Low	High	
Employee	\$3.40	\$4.94	
Employee + Spouse	\$6.71	\$9.70	
Employee + Children	\$8.09	\$11.65	
Employee + Family	\$9.54	\$13.75	



Identity Theft Protection

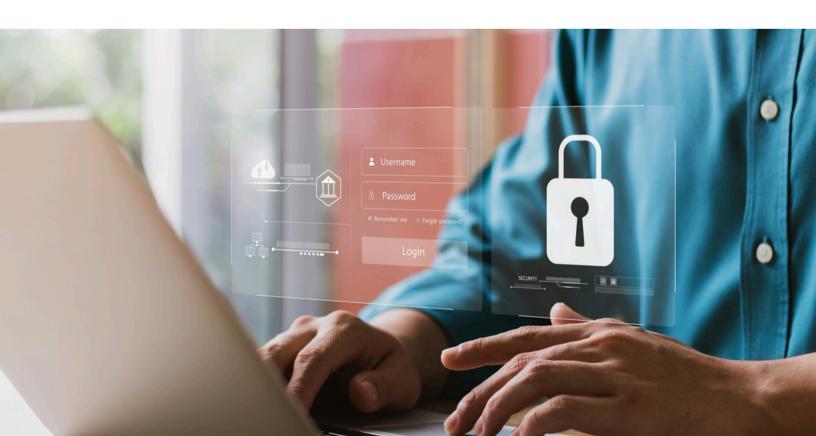
iLock360 | www.ilock360.com | 855.287.8888

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.

Identity Theft Protection Insurance			
Semi-Monthly Premium	Plus	Premium	
Employee	\$4.00	\$7.50	
Employee + Spouse	\$7.50	\$11.00	
Employee + Children	\$6.50	\$10.00	
Employee + Family	\$10.00	\$13.75	



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!

New plan feature

Behavioral Health care including psychiatry, therapy and counseling, health risk assessment, risk stratification, and integrated prescriptions

Telemedicine Protection Insurance	
Semi-Monthly Premium	
Telemedicine/Telehealth +	\$5.50

403(b) Retirement Plans

First Financial Administrators, Inc. | www.ffga.com | 800-523-8422, option 2 | 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			
2023 2024			
\$22,500	\$23,000		

Participants aged 50 and older at any time during the calendar year are permitted to contribute an additional \$7,500.

457(b) Retirement Plans



First Financial Administrators, Inc. | www.ffga.com | 800-523-8422, option 2 | retirement@ffga.com

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 similar to 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.

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		
2023 2024		
\$22,500	\$23,000	

Participants aged 50 and older at any time during the calendar year are permitted to contribute an additional \$7,500.

Employee Assistance Program

SupportLinc | www.supportlinc.com | 1.800.475.3327

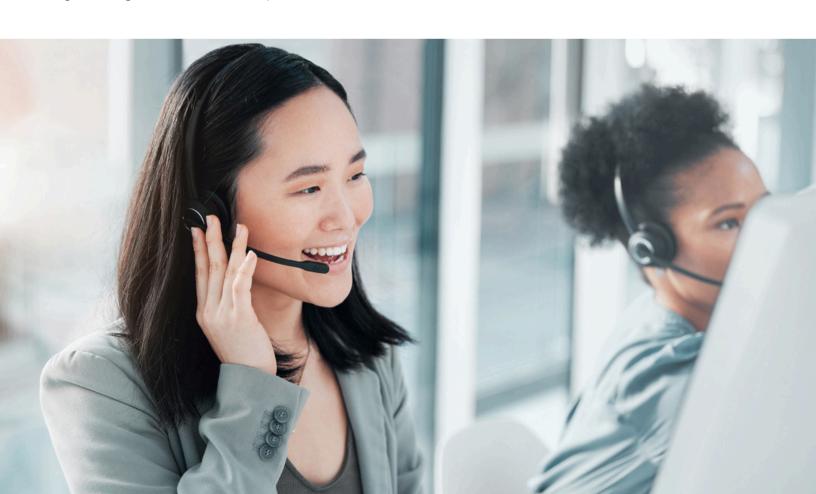
Life pulls us in many different directions. Between kids, personal relationships, extracurricular activities, and family time, it seems like we don't have enough time in a day to fit it all in. When life gets you stressed, call the employee assistance line provided by your employer. It offers 24/7 access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

Plan Highlights:

- 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.



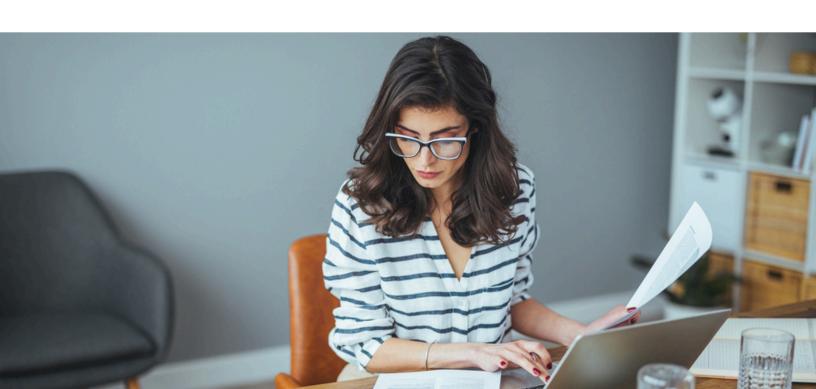
COBRA

First Financial Administrators, Inc. | www.ffga.com | 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.

COBRA 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, your employer will be responsible for letting the provider know that you have the right to continue coverage under COBRA.
- Benefits will remain identical to what you had while employed. However, you will be responsible for paying the full premium, plus any applicable fees.



Medicare & Age 65



FFMS | https://www.ffga.com/medicare-solutions | 800-523-8422

Questions to Consider Before Retiring

- Do I **plan** to Retire?
- Am I **eligible** to Enroll?
- When can I enroll?
- Do I really **want** to enroll?
- **Should** I enroll now or wait?
- What happens if I **don't** enroll when I'm eligible?

Robert Dawson FFMS CoordinatorCell: 281-889-9382

Whether or not you intend to retire yet, these questions and more may occur as you approach age 65.

Planning for your future is important, and you don't have to do it alone.

Let the experts at First Financial assist you through this process.

Clever RX

Clever RX | https://partner.cleverrx.com/ffga | 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!

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.

Clever RX 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 to unlock exclusive savings at over 60,000 pharmacies nationwide.
- Available to use now!

Contact Information

La Porte ISD Benefits Office

Lupe Lara, Benefits Specialist 1002 San Jacinto Rd | La Porte, TX 77571 281.604.7054

First Financial Group of America Joe Quijada, Sr. Account Manager

Joe Quijada, Sr. Account Manager 281.690.8198 / joe.quijada@ffga.com

Product	Carrier	Website	Phone
Medical	TRS/ BCBS	www.bcbstx.com/trsactivecare	866.355.5999
Pharmacy	Express Scripts	www.express-scripts.com	844.367.6108
Dental	Delta Dental PPO Group #: 18428 DHMO Group #: 78736	www.deltadentalins.com	PPO: 800.521.2651 DHMO: 800.422.4234
Vision	Ameritas/VSP	www.ameritas.com	800.877.7195
Hospital Indemnity	MetLife	www.metlife.com	800.438.6388
Cancer	American Fidelity	www.americanfidelity.com	800.662.1113
Critical Illness	Aflac	www.aflac.com	800.433.3036
Disability	Unum #124859	www.unum.com	800.858.6843
Permanent Life	TexasLife	www.texaslife.com	800.283.9233
Group Life	SunLife #245044	www.sunlife.com/us	800.247.6875
Identity Theft	iLOCK360	www.ilock360.com	855.287.8888
Accident	MetLife	www.metlife.com	800.438.6388
Telemedicine	Recuro	www.recurohealth.com	855.935.5842
Employee Assistance Program	SupportLinc	www.supportlinc.com	800.475.3327
Retirement Savings	TCG Group Holdings	www.tcgservices.com	800.943.9179

www.ffga.com

866.853.3539

FFGA

FSA, Dependent Care, & HSA