

MAGNOLIA ISD 2024-2025 BENEFITS GUIDE



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

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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

A guide to your benefits!

Magnolia 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/magnoliaisd/>



How to Enroll

Benefits Enrollment



On-Site Enrollment

When it's time to enroll in your benefits, your FFGA Account Representative will be on-site to assist you with making your elections. Visit your EBC to view the on-site enrollment schedule.

Online Enrollment

To begin online enrollment, click on the enroll now button below or 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.

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. Your New Hire Enrollment elections will be made in FEnroll or by contacting your First Financial Account Manager, John Brick.

Existing Employees

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

Mid-year Benefit Changes

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

Qualifying Life Events Include:

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

Declining Coverage

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

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 – 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
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.*

Substitute Teachers and Variable-Hour Employees

Important Terms

- **ACA RULES:** Due to Federal Regulations under the Affordable Care Act (ACA), all employees must enroll with SSN in or decline coverage for themselves and their dependents under a medical plan
- **SUBSTITUTE TEACHERS AND VARIABLE-HOUR EMPLOYEES:** You are eligible for the district medical plan; however, you will be responsible for the full monthly premium of the plan, no district contribution will be included.
- **Please Note:** As a substitute, variable-hour employee, you will be responsible for paying your first month TRS ActiveCare health benefit premium in advance to Magnolia ISD payroll department by electronic payment (see payment info below in blue). All future payments must be made to the payroll department by the 3rd of the month of coverage or risk being canceled due to non-payment.
- As a substitute, variable - hour employee, this premium must be paid out of pocket to the district.
- If you do not receive a confirmation page at the end of your enrollment, it will be marked "Pending". Once your enrollment period ends, your pending elections will be automatically approved. If you do not wish to enroll in these elections, you **MUST** log back into Ffenroll, before your enrollment period ends, and **WAIVE** the election.

Online Magnolia ISD offers an electronic payment option.

Click on the link below to make an electronic payment for your benefit premiums.

All payments must be made through the electronic payment system.

<https://www.cognitofrms.com/MagnoliaISD/misdmedicalpremiumpayment>

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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://www.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.

Medical Rates

TRS-Active Care Primary	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$452	\$350	\$102	\$51
Employee + Spouse	\$1,221	\$350	\$871	\$435.50
Employee + Child(ren)	\$769	\$350	\$419	\$209.50
Employee + Family	\$1,537	\$350	\$1,187	\$593.50

TRS-ActiveCare Primary +	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$530	\$350	\$180	\$90
Employee + Spouse	\$1,378	\$350	\$1,028	\$514
Employee + Child(ren)	\$901	\$350	\$551	\$275.50
Employee + Family	\$1,749	\$350	\$1,399	\$699.50

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

TRS-ActiveCare HD	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$465	\$350	\$115	\$57.50
Employee + Spouse	\$1,256	\$350	\$906	\$453
Employee + Child(ren)	\$791	\$350	\$441	\$220.50
Employee + Family	\$1,581	\$350	\$1,231	\$615.50

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	\$350	\$663	\$331.50
Employee + Spouse	\$2,402	\$350	\$2,052	\$1,026
Employee + Child(ren)	\$1,507	\$350	\$1,157	\$578.50
Employee + Family	\$2,841	\$350	\$2,491	\$1,245.50

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+

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

2024-2025 TRS ActiveCare Plan Highlights and Changes

	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 referrals required to see specialists Not compatible with a Health Savings Account 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 Primary Care Provider referrals required to see specialists Not compatible with a Health Savings Account No out-of-network coverage 	<ul style="list-style-type: none"> 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	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	

How to Calculate Your Monthly Premium

Total Monthly Premium

– Your Employer Contribution

– **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](tel:1-866-355-5999).

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

**Pre-certification for genetic and specialty testing may apply. Contact a PHG at [1-866-355-5999](tel:1-866-355-5999) with questions.

www.trs.texas.gov

ANNOUNCING YOUR NEW HEALTHCARE BENEFIT

* This is not an insurance plan. Next Level PRIME is only associated with the Next Level Medical providers and does not include specialist visits, advanced imaging, medications, emergency room or hospitalization.

September 1st Magnolia ISD will be offering a NEW opportunity for employees and their eligible dependents to receive an amazing benefit. **Next Level PRIME** is affordable care at only \$75 per month and covers the employee, spouse, and eligible children under age 26.

WHAT IS NEXT LEVEL PRIME?

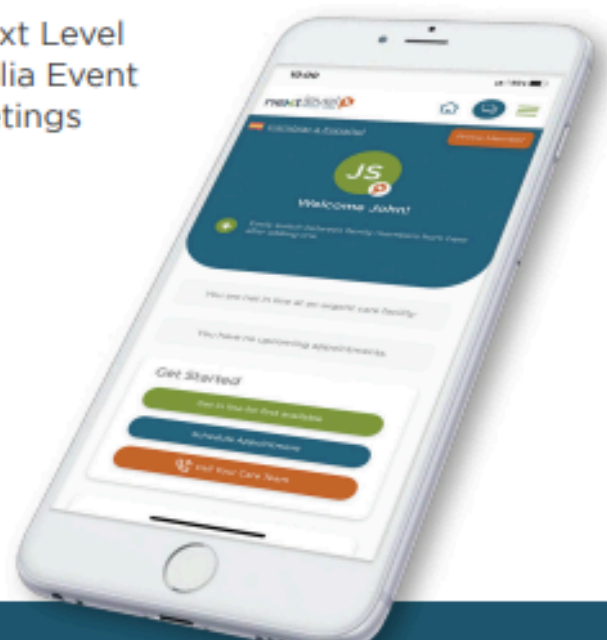
Next Level PRIME offers all of these amazing benefits:

- ✕ Access to 43+ Next Level Urgent Care locations
- ✕ Direct primary care 7 days a week from 9 a.m. – 9 p.m.
- ✕ Urgent care 7 days a week from 9 a.m. – 9 p.m.
- ✕ Preventive & Chronic Care 7 days a week from 9 a.m. – 9 p.m.
- ✕ Virtual medical telemedicine visits 24 hour 7 days a week
- ✕ Nurse Care Navigators to assist with all healthcare concerns/questions
- ✕ Health & Wellness Coaching
- ✕ Weight Loss Solutions
- ✕ Behavioral Health & Emotional Wellness Counseling
- ✕ No copays or additional out of pocket expense at the time of service (prescriptions not included in PRIME)

HOW TO LEARN MORE

Magnolia ISD employees can learn more about the Next Level PRIME membership during the Benefits Fair at Magnolia Event Center July 19th or at the onsite open enrollment meetings starting July 31st – August 7th.

Scan the QR code or go to the App store and download the Next Level Urgent Care App.



Flexible Spending Accounts

First Financial Administrators, Inc. | www.ffga.com | 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. | www.ffga.com |
 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	<ul style="list-style-type: none"> • Self: \$4,150 • Family: \$8,300 	<ul style="list-style-type: none"> • Self Only: \$4,300 • Family: \$8,550
Health Insurance Deductible Limits	<ul style="list-style-type: none"> • Self Only: \$1,600 • Family: \$3,200 	<ul style="list-style-type: none"> • Self Only: \$1,650 • Family: \$3,300

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

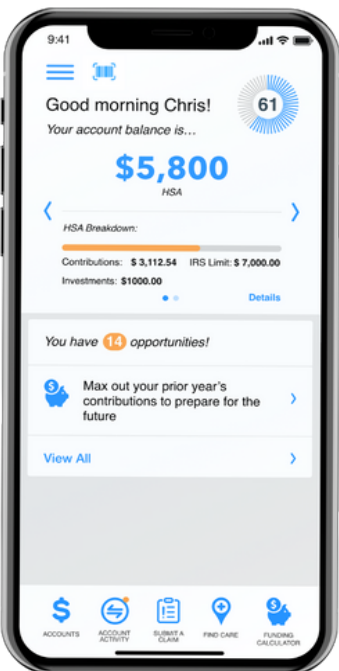
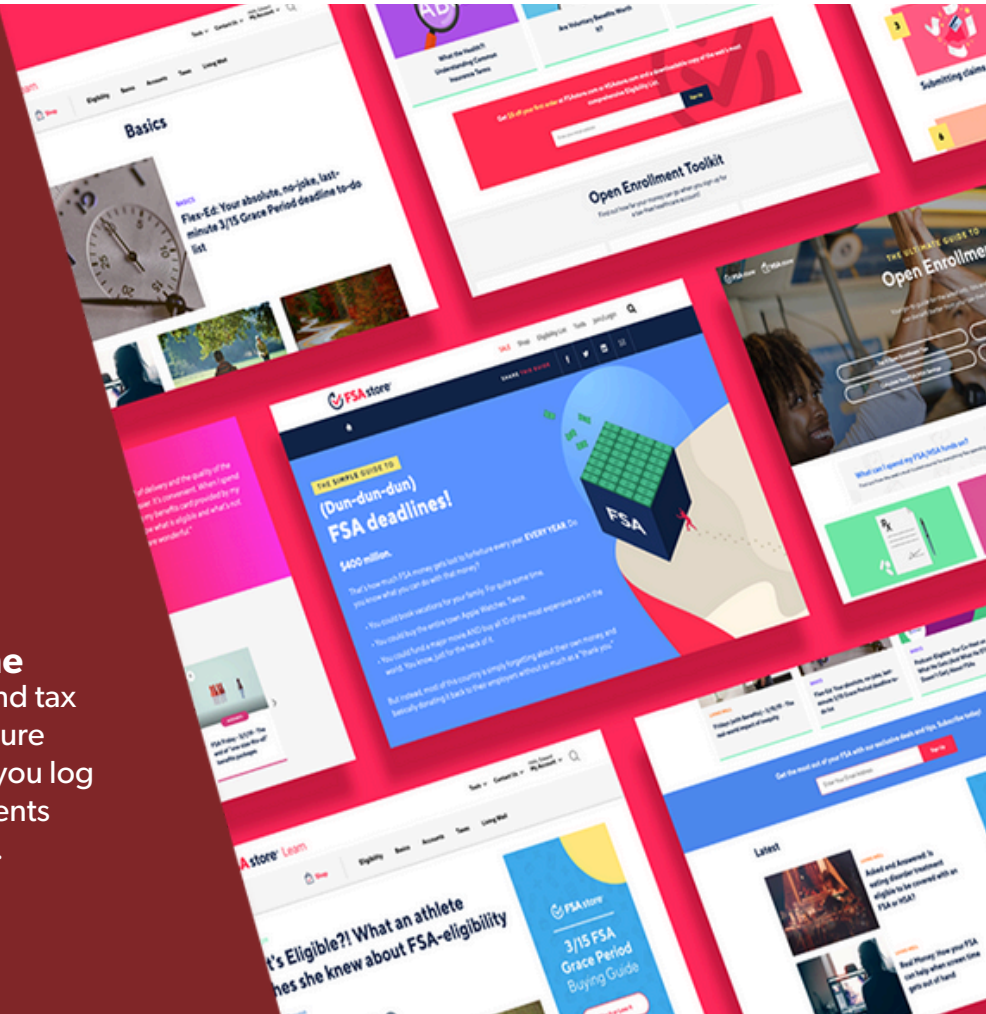
FSA & HSA Resources

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.



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.



Dental Insurance

Plan Choices



MetLife | www.metlife.com | 800.942.0854

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 Plans:

- PPO High Plan has In-or out-of-network and Mac Low Plan you must stay "in-network" to avoid high out of pocket costs
- Save money by visiting a Preferred Provider list of "in-network" dentists
- Exams, x-rays and cleanings are covered at 100% in-network
- Annual deductible of \$50 per individual; \$150 per family; annual maximum benefit of \$1,500 per person
- Basic restorative care (e.g., fillings, extractions & gum treatments) is paid at 80% up to annual maximum
- Major services (e.g., crowns, dentures, & implants) are covered at 50% up to annual maximum
- Orthodontia for dependent children under age 26 with a Lifetime maximum of \$1,000 per person

PPO Dental Semi-Monthly Premiums

	MAC Low Plan	High Plan
Employee Only	\$18.48	\$22.91
Employee + Spouse	\$37.10	\$45.98
Employee + Children	\$41.47	\$51.39
Employee + Family	\$52.49	\$65.05

DHMO Plans:

- No deductibles
- No exclusion for pre-existing conditions No annual maximum
- Must choose from the Directory of Dentists that have a more limited network – you need to choose a PCP; if you need to change to another dentist you will need to call MetLife and change – it takes 20 work days to change in system for you to be able to go to the new in-network with the DHMO dentist.

Dental DHMO Semi-Monthly Premiums

Employee Only	\$7.99
Employee + Spouse	\$15.17
Employee + Children	\$15.97
Employee + Family	\$24.75

Vision Insurance

Davis Vision | www.davisvision.com | 888.790.9910

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:

- \$10 co-pay for eye exam
- \$10 co-pay for eyeglasses or contacts
- \$130 towards eyeglasses plus 20% off overage OR \$130 towards contacts plus 15% off overage
- You must use an in-network Davis Vision provider dependents up to 26 years

Vision Semi-Monthly Premium	
Employee Only	\$4.17
Employee + Spouse	\$8.48
Employee + Child(ren)	\$8.73
Family	\$12.09



Term Life & AD&D

Employer-Paid & Voluntary

SunLife | www.sunlife.com/us | 800.247.6875

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 \$10,000. 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

» LEARN MORE



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.

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

The Standard | www.standard.com | 281.517.5466

Disability insurance can help protect your income in the even you become sick, injured, or pregnant, and the doctor says you're unable to work. It pays a monthly benefit amount based on a percentage of your gross income, so you may continue to pay for everyday living expenses. During the annual open enrollment period, you may increase your monthly benefit by \$100, \$200, or \$300 or decrease your benefit waiting period by one level without being subject to the preexisting condition exclusion

Visit the Employee Benefit Center at <https://benefits.ffga.com/magnoliaisd> and view policy for more details or speak to a First Financial Account Manager to assist with questions.

Plan Highlights below:

- Guaranteed Issue coverage for everyone; pre-existing condition limitations only apply on new levels of coverage elected or for any enhancements to the plan
- Pre-existing conditions will not be covered until after 12 months of continuous coverage
- Pre-existing condition Waiver – is a very limited but Standard does offer one. For the first 90 days from the date of the disability, Standard will pay full benefits even if you have a pre-existing condition. The 90 days does include the unpaid days for the elimination period you choose, so if you have a 60 day wait and are still out it would pay up to 30 additional days. After 90 days, Standard would continue benefits, ONLY IF the pre-existing condition exclusion did not apply.
- Based on your individual need, you can select from multiple elimination (waiting) periods- 0/3 days, 14 days, 30 days, 60 days, 90 days and 180 days
- 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
- The cost depends the amount of coverage selected, and on how quickly you want benefits to begin – known as elimination periods (waiting periods).
- The plan will be eligible to pay AFTER you meet your elimination / waiting period. Example: You have a 30 day waiting period and you are not able to work per doctor for 3 months, the plan would start to pay after you satisfied the waiting period of 30 day and pay for the next 2 months in this case.
- Your monthly benefit will pay you in \$100 increments; up to 66 2/3% of your salary or maximum of \$8,000/month Disability insurance will pay you if you are medically disabled-up to the age of 65; if you are unable to return to work Please if you have a pre-existing condition, speak with a First Financial representative to go over that limitation exclusion and the limited waiver if apply.

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.

Visit the Employee Benefit Center at <https://benefits.ffga.com/magnoliaisd> and view policy for more details or speak to a First Financial Account Manager to assist with questions

Plan Highlights below:

GUARANTEED ISSUE FOR ALL EMPLOYEES AND DEPENDENTS

- 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
- Pays for Hospital confinement, extended care facilities, hospice care, surgery, among other things

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

Certain pre-existing condition limitations apply for one year for those who are not currently in the group cancer plan. 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

MetLife | www.metlife.com | 800.438.6388

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.

Visit the Employee Benefit Center at <https://benefits.ffga.com/magnoliaisd> and view policy for more details or speak to a First Financial Account Manager to assist with questions.

Plan Highlights are below:

GUARANTEED ISSUE FOR EMPLOYEES, SPOUSE, AND ELIGIBLE CHILD(REN) NO MEDICAL HISTORY REQUIRED!

- Low and High plans available to meet your needs
- Plan pays lump-sum benefit amount of \$15,000 (Low Plan) or \$30,000 (High Plan)

Recurrence benefits also exist on some of the conditions below— please see more details by visiting the Employee Benefit Center at <https://benefits.ffga.com/magnoliaisd>

- Wellness benefit pays you \$50 (Low Plan) or \$100 (High Plan) for annual health screening test Plan will pay up to 300% of the benefit for each person on the plan
- No Pre-existing conditions on the benefits, but it has to occur new after the effective date of your coverage
- Age-banded Rates for both plans are listed in the Reference Center; rates lock in at the age you attain your coverage!



Accident Insurance

Aetna | <https://ffbenefits.ffga.com/magnoliaisd/accident/> | 800.872.3862

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

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

Accident Insurance		
Monthly Premium	Low Plan	High Plan
Employee	\$6.26	\$9.02
Employee + Spouse	\$12.53	\$18.05
Employee + Children	\$13.15	\$18.95
Employee + Family	\$19.42	\$27.98



Identity Theft Protection

» LEARN MORE

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.

ID Theft Protection Semi-Monthly Premiums

Coverage Tier	Basic	Plus	Premium
Employee	Free	\$4.00	\$7.50
Employee + Spouse	N/A	\$7.50	\$11.00
Employee + Child(ren)	N/A	\$6.50	\$10.00
Employee + Family	N/A	\$10.00	\$13.50



Legal Plan

» LEARN MORE



ARAG | www.araglegal.com | 800.247.4184

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

Legal Semi-Monthly Premiums	
Plan	Employee/Family
Ultimate Advisor	\$9.00
Ultimate Advisor Plus	\$11.75

Medical Transport

MASA | www.masamts.com | 877.503.0585

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

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

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

Medical Transport Semi-Monthly Premiums	
Plan	Employee/Family
Emergent Plus	\$7.00
Platinum	\$19.50



Voluntary Retirement Plans

» LEARN MORE



TCG Advisors | <https://tcgservices.com/enroll/> | 512.600.5200

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 a pre-tax basis for your retirement. Contributions are conveniently made through payroll deduction, so money is moved from your paycheck into the account automatically. Plus, your employer may even match your contributions based on how much you put into the plan. 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 or ROTH basis. One significant way the 457(b) differs from the 403(b) is that distributions are never subject to the 10 percent tax for early withdrawal.

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.

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

403(b) Retirement Plans

TCG Advisors | <https://tcgservices.com/enroll/> | 512.600.5200

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.

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

457(b) Retirement Plans



TCG Advisors | <https://tcgservices.com/enroll/> | 512.600.5200

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.

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

TeleHealth - Recuro

» LEARN MORE

Recuro Health | <https://recurohealth.com> | 855.6RECURO



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!

Recuro Semi-Monthly Premium

Employee/Family

\$5.00

Hospital Indemnity Insurance

The Standard | www.standard.com | 281.517.5466

» LEARN MORE

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!

Visit the Employee Benefit Center at <https://benefits.ffga.com/magnoliaisd> and view policy for more details or speak to a First Financial Account Manager to assist with questions.

Hospital Indemnity Insurance

Monthly Premium	Low Plan	High Plan
Employee	\$9.43	\$18.86
Employee + Spouse	\$15.93	\$31.85
Employee + Children	\$13.35	\$26.69
Employee + Family	\$23.77	\$47.54



COBRA



First Financial Administrators, Inc. | <https://ffbenefits.ffga.com/magnoliaisd/cobra/> | 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 Coordinator
Cell: 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.

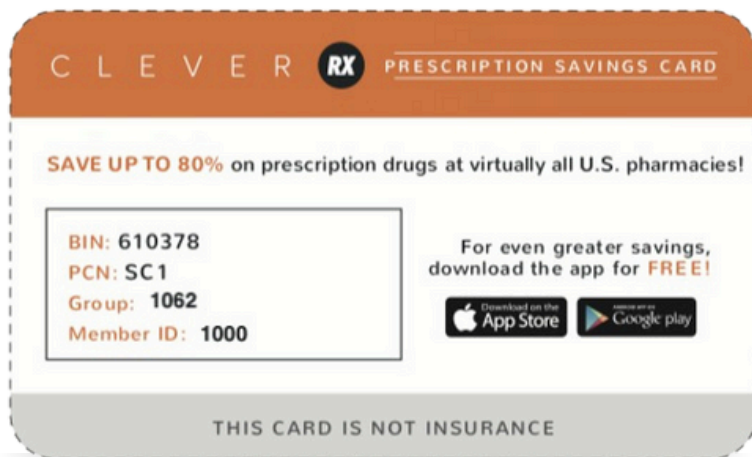
Let the experts at First Financial assist you through this process.

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

Contact Information

John Brick, Sr. Account Administrator
832.859.5865 / john.brick@ffga.com

31141 Nichols Sawmill Road
Magnolia, TX 77355

Felicia Parker, Benefits Coordinator
281.252.2527 / fparker@magnoliaisd.org

BENEFIT	CARRIER	WEBSITE	PHONE
Medical	Blue Cross Blue Shield of Texas	www.bcbstx.com/trsactivecare	866.355.5999
Prescription Benefits	Express Scripts	www.express-scripts.com/trsactivecare	844.367.6108
Flexible Spending Accounts	First Financial Administrators, Inc.	www.ffga.com	866.853.3539
Health Savings Accounts	First Financial Administrators, Inc.	www.ffga.com	866.853.3539
Accident	Aetna	https://ffbenefits.ffga.com/magnoliaisd/accident/	800.872.3862
Dental	MetLife	www.metlife.com/dental	800.942.0854
Vision	Davis Vision	www.davisvision.com	888.790.9910
Disability Insurance	The Standard	www.standard.com	281.517.5466
Cancer	American Fidelity	www.americanfidelity.com	800.662.1113
Critical Illness	MetLife	www.metlife.com/criticalillness	800.438.6388
Group Term Life	SunLife	www.sunlife.com/us	800.247.6875
Permanent Life	Texas Life	www.texaslife.com	800.283.9233
Hospital Indemnity	The Standard	www.standard.com	281.517.5466
Legal Plan	ARAG	www.araglegalcenter.com	800.247.4184
ID Theft Protection	iLOCK360	www.ilock360.com	855.287.8888
Telehealth	Recuro Health	https://recurohealth.com/	855.6RECURO
Medical Transport	MASA	www.masamts.com	877.503.0585
Retirement 403(b) & 457(b)	TCG	https://tcgservices.com/enroll/	800.943.9179
COBRA	First Financial Administrators, Inc.	https://ffbenefits.ffga.com/magnoliaisd/cobra/	800.523.8422