

SOUTHWEST INDEPENDENT SCHOOL DISTRICT



2023 - 2024 EMPLOYEE MEDICAL BENEFIT GUIDE

WELCOME SOUTHWEST ISD

Southwest is committed to providing you and your family with high quality benefits at an affordable cost. You know your healthcare needs best, so we encourage you to take care of your own health and well-being. Please review the benefits and resources in this guide to help you make an informed decision.

TERMS TO KNOW

Network:

A group of health care providers, including doctors, hospitals, and other health care providers, which have agreed to provide care at lower costs.

Co-pay:

A set dollar amount you pay for network services, i.e., doctor's office visits, emergency room care and prescription drugs.

Deductible:

The dollar amount you must pay for covered medical expenses each year before the plan pays for certain services. The deductible does not apply to in-network preventative care and any services where you pay a co-pay.

Coinsurance:

The percentage of your medical costs you must pay for certain services after you meet your annual deductible.

Out-of-Pocket Maximum:

The maximum amount you must pay toward covered medical expenses in a calendar year. Once you pay this amount, the plan pays the entire cost of covered services for the rest of the year. Deductibles and co-pays apply to the out-of-pocket maximum.

If any discrepancy exists between the guide and the official plan documents or policies, the official plan documents will govern.

2023-2024 Humana Medical Plan Rates

Monthly Rates	HDHP PPO	BRONZE PPO	SILVER HMO	GOLD PPO
Employee	\$21.36	\$22.09	\$183.63	\$492.50
Employee & Spouse	\$417.72	\$419.17	\$999.22	\$1,680.98
Employee & Children	\$378.08	\$379.47	\$529.97	\$917.58
Employee & Family	\$893.35	\$895.68	\$1,351.15	\$2,054.01

SOUTHWEST ISD generously contributes \$375 per month towards the cost of your medical premiums!!

** Rates reflect the \$375 Southwest ISD contributes to your medical premiums monthly. The rates listed are the monthly employee cost for medical coverage.

2023-2024 HUMANA Medical Plan Overview

In-Network	HDHP PPO	BRONZE PPO	SILVER HMO	GOLD PPO
Deductible (Employee / Family)	\$3,000 / \$6,000	\$3,500 / \$7,000	\$1,200 / \$2,400	\$1,000 / \$2,000
Co-Insurance % (in/out of network)	80/50	80/50	80	80/50
Maximum Out-of-Pocket (in network)	\$6,350 / \$12,700	\$8,500 / \$17,100	\$7,900 / \$15,800	\$7,900 / \$15,800
Primary Care Doctor Visit	20% Coinsurance / Deductible	\$20.00 Copay	\$30.00 Copay	\$30.00 Copay
Specialty Doctor Visit	20% Coinsurance / Deductible	\$70.00 Copay	\$70.00 Copay	\$70.00 Copay
Emergency Room Visit	20% Coinsurance / Deductible	20% Coinsurance / Deductible	\$350.00 Copay	\$350.00 Copay
Urgent Care	20% Coinsurance / Deductible	\$100.00 Copay	\$100.00 Copay	\$100.00 Copay
Doctor on Demand Virtual Physician Visits	\$0 - \$56 depending on service	\$0	\$0	\$0

Prescriptions

RX Plan	20% Coinsurance / Deductible	\$5 / \$25 / \$70 / \$150 / \$450	\$15 / \$35 / \$55 / 25%	\$15 / \$35 / \$55 / 25%
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- Walgreens is NO LONGER In Network with Humana.
- You must use CVS, HEB, or Walmart for all prescriptions.


Quality care that's virtually there 24/7

Doctor On Demand® is there for your everyday health needs

See a **board-certified doctor**—for nonemergency care—in minutes from your home, office or while you're traveling in the United States, from your smartphone, tablet or computer. It's easy.

For everyday health needs, Doctor On Demand usually costs less than a visit to the emergency room or urgent care.



DOCTOR ON DEMAND	COST
 Everyday health concerns <ul style="list-style-type: none">• Colds, flu and sore throat• Upper respiratory infections• Skin and eye problems• Urinary tract infections• Prescriptions and refills• Labs and screenings	\$0–\$56
 Mental health services <ul style="list-style-type: none">• Depression• Stress• Anxiety• Trauma• Other nonemergency mental health concerns	The same cost as an in-office mental health visit



Download the Doctor On Demand app today

- 1 Go to the App store or Google Play to get it on your smartphone or tablet. You can also visit DoctorOnDemand.com.
- 2 Enter your health insurance information; select Humana and enter your group ID and member ID.
- 3 Enter a payment method (you'll always see your cost upfront).
- 4 See a doctor within minutes.

Humana.

dr. on demand

Doctor on Demand
1-800-997-6196

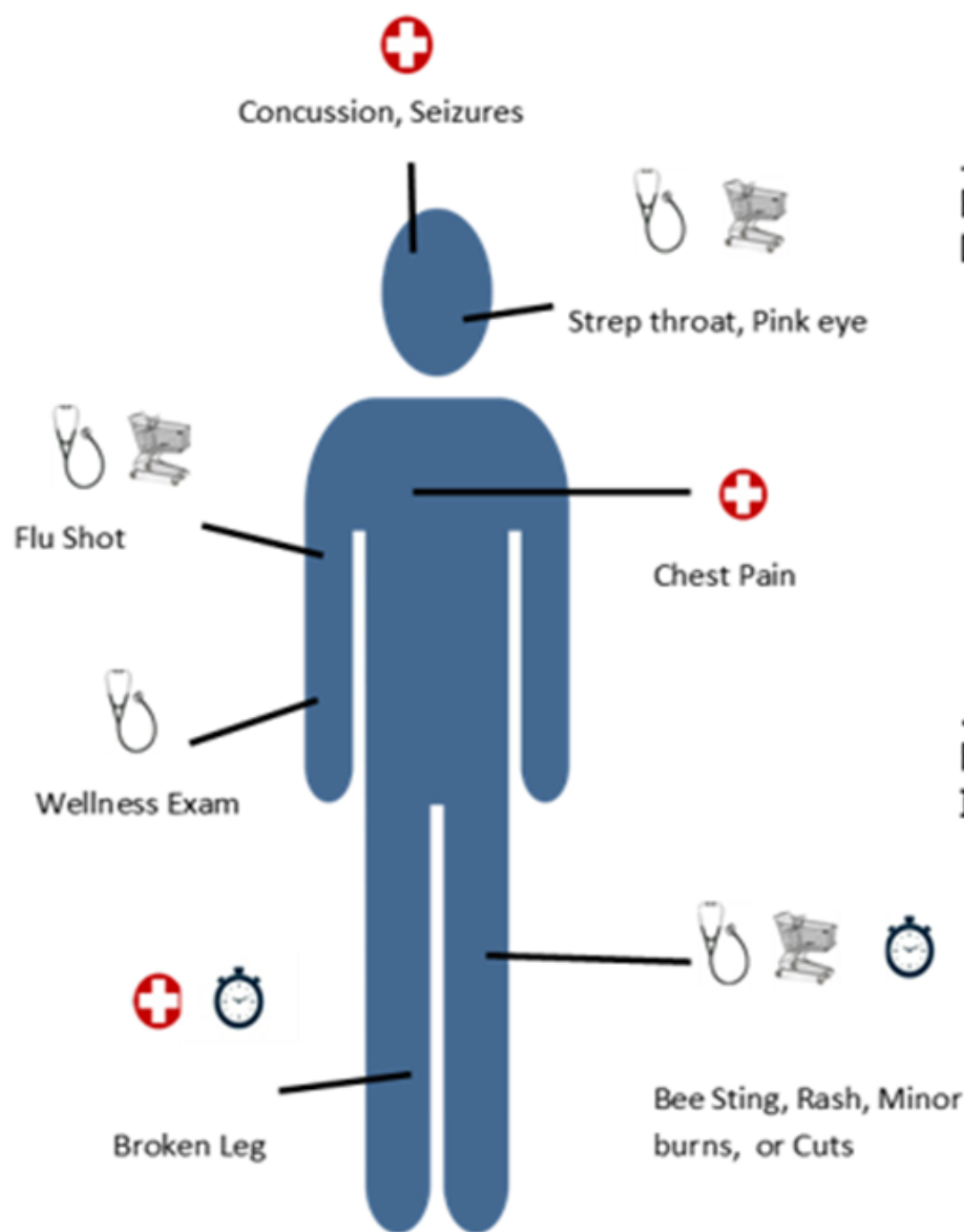
You will pay 100% at the hospital until you meet your deductible under all plans.

KNOW WHERE TO GO

Save time and money by knowing your urgent care options

You never know when you may need medical care. So, it is always good to understand your options. If your health or life is in danger, call 911 or go to the nearest emergency room.

But go elsewhere for non-life-threatening events.



Where to go	What to go for
Emergency room 	Concussions, Seizures Chest pain, Broken Bones, Stroke symptoms
Urgent Care Center 	Broken bones, Sprains, Strains, Bites, Rashes, Burns, Cuts
Primary Care Doctor's Office 	Wellness Exams, Sprains, Strains, Bites, Rashes, Burns, Cuts, Healthy Lifestyle screening, Strep throat, Pink eye, Flu shot, Chronic disease management
Retail Walk-In Clinic 	Sprains, Strains, Bites, Rashes, Burns, Cuts, Healthy Lifestyle screening, Strep throat, Pink eye, Flu Shot

			
Emergency Room	Doctor's Office/ Primary Care	Urgent Care Center	Retail Walk-In Clinic

Tip: Try to avoid any Free Standing emergency room visits. They are commonly NOT in network. This helps you save the most money. (Free Standing is an ER not attached to a hospital)

Qualifying Event

Each year during annual open enrollment, you may elect your benefits for the coming year. Once you have enrolled, **you may not** change your benefit coverage unless you have a “qualifying event” as listed below:

Change in family status, such as:

- Marriage, divorce, or legal separation
- Death of a spouse or dependent child
- Birth or adoption of a child, or change in custody of a child
- Loss of employment by employee, spouse, or dependent, and ineligibility of a dependent child (i.e., a child reached the age limit under the plan or is no longer eligible as a dependent)
- Gained health insurance elsewhere

Change in your employment status causing a gain or loss of coverage for you and/or your dependents, such as:

- Returning from unpaid leave of absence
- Reduction in work hours

Other changes resulting in a gain or loss of coverage for you or your dependents, such as:

- Spouse and/or your dependent child enrolls in or makes changes to benefits during his/her open enrollment period
- Gain or loss of eligibility for Medicare/Medicaid for yourself, spouse, or dependent child

Unless you experience one of these changes in family status, you may not add or drop your insurance for that benefit year. You must provide the appropriate documentation and complete a benefit change form within 30 days of the qualifying event to make changes. The change to your enrollment will take effect the date of the event.

Important Contact Information

Benefit	Provider Name	Contact Information
Medical	Humana	1-866-427-7478
Doctor on Demand	Humana	1-800-997-6196
Questions regarding physicians, bills, or pharmacists	Robinson-Barrett Insurance	210-485-1855

CONTACT US



210-485-1855



www.barrettinsurance-services.com



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