



EAST CENTRAL ISD

EMPLOYEE BENEFITS GUIDE

2023 - 2024 Plan Year



EMPLOYEE BENEFITS CENTER

YOUR ONE-STOP-SHOP FOR BENEFIT INFORMATION

East Central ISD and First Financial are excited to provide you with a custom website filled with information about your benefits. Visit the Employee Benefits Center to see current benefit options for your employer, as well as find claims, important phone number, and enrollment information.

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

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

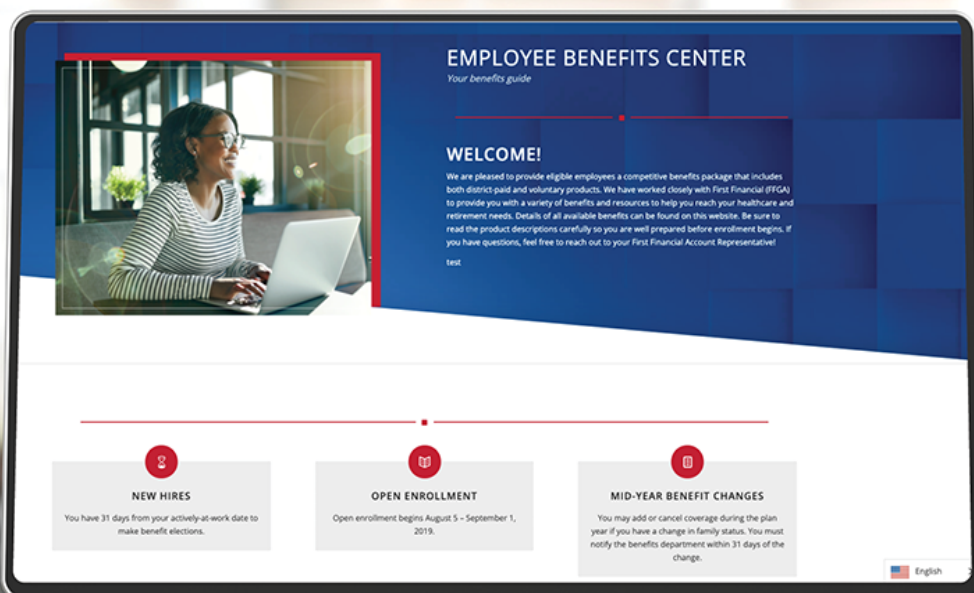


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East Central ISD offers eligible employees a competitive benefits package that includes both district-paid and voluntary products. We have worked closely with First Financial (FFGA) to provide you with a variety of benefits and resources to help you reach your healthcare and retirement needs. Details of all available benefits can be found on the Employee Benefits Center website, <https://ffbenefits.ffga.com/eastcentralisd/>.

Be sure to read the product descriptions carefully so you are well prepared before enrollment begins. If you have questions, feel free to reach out to your First Financial Account Manager or your Benefits department.

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East Central ISD Benefits Office

6634 New Sulphur Spring Rd | San Antonio TX 78263 | 210.648.7861

ELIGIBILITY

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

BENEFITS ENROLLMENT

EMPLOYEE BENEFITS CENTER

The Employee Benefits Center (EBC) is a one-stop-shop for you to find all things benefits related. On the website, you'll find open enrollment and plan year dates, benefit descriptions, carrier contact information, product brochures, claim forms and enrollment details. Visit <https://ffbenefits.ffga.com/eastcentralisd/> today!

NEW EMPLOYEES

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

EXISTING EMPLOYEES

When it's time to enroll in your benefits, your First Financial Account Representative will be onsite 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.

Online Enrollment

ENROLL ONLINE

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

- Login: Your Employee ID or Social Security Number (no dashes)
- PIN (first login only): The last four digits of your social 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 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.

MID-YEAR BENEFIT CHANGES

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

QUALIFYING LIFE EVENTS INCLUDE:

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

DECLINING COVERAGE

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

SECTION 125 PLAN INFORMATION AND RULES

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

Here's How It Works

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

Is It Right for Me?

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

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

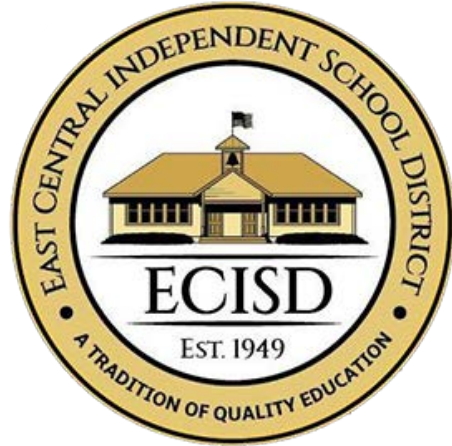
IRS specified changes in family status include:

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

SECTION 125 PLAN SAMPLE PAYCHECK		
	WITHOUT S125	WITH S125
Monthly Salary	\$2,000	\$2,000
Less Medical Deductions	-N/A	-\$250
Taxable Gross Income	\$2,000	\$1,750
Less Taxes (Fed/State at 20%)	-\$400	-\$350
Less Estimated FICA (7.65%)	-\$153	-\$133
Less Medical Deductions	-\$250	-N/A
Take Home Pay	\$1,197	\$1,267
YOU COULD SAVE \$70 PER MONTH IN TAXES BY PAYING FOR YOUR BENEFITS ON A PRE-TAX BASIS!		

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

2023-24 UBC Rate Sheet



Wellness Benefits at No Extra Cost

- Free Generic Drugs
- Free Recuro 24/7 Virtual Acute & Behavioral Health
- Free access to ECISD Health and Wellness Center
- Free Health Care Concierge

Things to Know

Personal Health Assessment (PHA) Incentive

ECISD is offering a PHA discount starting on 9/1/23 for employees who enroll in coverage by and complete a PHA by July 31, 2023.

\$25 credit - Employee only & Employee/Child
 \$50 credit - Employee/Spouse & Employee/Family

Plan Summaries

	HD PLAN		BASIC PLAN		ENHANCED PLAN	
	<ul style="list-style-type: none"> • Lowest Premiums available • No PCP Referrals • Free Generic Drugs 		<ul style="list-style-type: none"> • Lower Annual Deductibles than HD Plan • No PCP Referrals • Free Generic Drugs 		<ul style="list-style-type: none"> • Lowest Annual Deductibles available • No PCP Referrals • Free Generic Drugs 	
Monthly Premiums						
Employee Only	\$105	\$80 with PHA	\$125	\$100 with PHA	\$302	\$277 with PHA
Employee and Spouse	\$812	\$762 with PHA	\$831	\$781 with PHA	\$1,144	\$1,094 with PHA
Employee and Child	\$396	\$371 with PHA	\$410	\$385 with PHA	\$670	\$620 with PHA
Employee and Family	\$1,072	\$1,022 with PHA	\$1,117	\$1,067 with PHA	\$1,545	\$1,495 with PHA
Plan Features	Baptist	CIGNA OAP	Baptist	CIGNA OAP	Baptist	CIGNA OAP
Individual/Family Deductible	\$1,500/\$3,000	\$3,000/\$6,000	\$1,250/\$2,500	\$2,500/\$5,000	\$600/\$1,200	\$1,200/\$2,400
Type of Coverage	In-Network Coverage		In-Network Coverage		In-Network Coverage	
Coinsurance	You pay 20% after deductible		You pay 20% after deductible		You pay 20% after deductible	
Individual/Family Maximum Out-of-Pocket	\$9,000/\$18,000		\$9,000/\$18,000		\$9,000/\$18,000	
Primary Care Provider (PCP) Required	No		No		No	
Doctor Visits						
Primary Care	20% after deductible		20% after deductible		20% after deductible	
Specialist	20% after deductible		20% after deductible		20% after deductible	
ECISD Health and Wellness Center	\$0		\$0		\$0	
Recuro 24/7 Acute & Behavioral Health	\$0		\$0		\$0	
Immediate Care	Baptist	CIGNA OAP	Baptist	CIGNA OAP	Baptist	CIGNA OAP
Urgent Care	\$50 Copay	\$100 Copay	\$50 Copay	\$100 Copay	\$50 Copay	\$100 Copay
Emergency Care	\$250 Copay then 20% after deductible		\$250 Copay then 20% after deductible		\$250 Copay then 20% after deductible	
Recuro 24/7 Acute & Behavioral Health	\$0		\$0		\$0	
Prescription Drugs						
Drug Deductible	\$250 Brand / Specialty Only		\$250 Brand / Specialty Only		\$250 Brand / Specialty Only	
Generics (30 day Supply/90 day supply)	\$0 Retail and Mail Order		\$0 Retail and Mail Order		\$0 Retail and Mail Order	
Preferred Brand	30% Retail / \$175 Mail Order		30% Retail / \$175 Mail Order		30% Retail / \$175 Mail Order	
Non-Preferred Brand	30% Retail / \$175 Mail Order		30% Retail / \$175 Mail Order		30% Retail / \$175 Mail Order	
Specialty	50% to a maximum of \$1500 a month		50% to a maximum of \$1500 a month		50% to a maximum of \$1500 a month	
Out-of-Network Coverage						
Individual/Family Deductible	\$6,000/\$12,000		\$5,000/\$8,000		\$3,000/\$6,000	
Coinsurance	You pay 40% after deductible		You pay 40% after deductible		You pay 40% after deductible	
Individual/Family Maximum Out-of-Pocket	Unlimited		Unlimited		Unlimited	

Employee Health Benefits 2023-24



East Central ISD Which Plan is Right for You?



Questions to Consider

- How much coverage do I need?
- How often do I access health care?
- Are my doctors in-network?
- Do I prefer higher premiums or pay as I go?
- Do I have regular prescriptions?

Benefits for UBC Members

The Cigna Open Access Plus Network provides you with access to healthcare professionals nationwide to address your health concerns. The UBC plans offer a range of coverage options to best meet the needs of you and your family. This provides you a great deal of flexibility and the option to save significantly on your health insurance premiums.

Choice and Control

The Cigna Open Access Plus Network provides access to 17,000 facilities and more than 1,000,000 healthcare professionals.

Need Assistance?
help@UBC-Benefits.com

- Cigna Nationwide Network with over 1 million healthcare professionals
- Lower deductible when using Baptist Health network.
- No referral necessary to see a specialist
- Lower Out-of-Pocket maximums
- In- and Out-of-Network Benefits
- Two options for In-Network benefits
- Free access to East Central Health and Wellness Center



HD - Medical Plan

Overview

The ECISD HD plan serves as the primary High Deductible plan option, with low cost monthly premiums in exchange for higher annual deductibles. With in- and out-of-network benefits, no need for physician referrals, and free generic drugs, this plan provides the highest premium savings to plan members, with the greatest overall annual savings potential.

The UBC benefit plans provide access to the East Central Health and Wellness Center for you and your covered dependents, over the age of 2. All services performed at the Wellness Center are done at no cost for you and your covered dependents. And just like visiting your primary doctor, all information is confidential.

Covered	Monthly Premium	Monthly Premium with PHA
<ul style="list-style-type: none">Employee	<ul style="list-style-type: none">\$105	<ul style="list-style-type: none">\$80
<ul style="list-style-type: none">Employee + Spouse	<ul style="list-style-type: none">\$812	<ul style="list-style-type: none">\$762
<ul style="list-style-type: none">Employee + Child(ren)	<ul style="list-style-type: none">\$396	<ul style="list-style-type: none">\$371
<ul style="list-style-type: none">Employee + Family	<ul style="list-style-type: none">\$1,072	<ul style="list-style-type: none">\$1,022



HD - plan quick-reference

Refer to plan documents for limitations and additional information.

HD - Medical Plan

Feature	Your Baptist Health Network Costs	Your Cigna Network Costs	Your Out-of-Network Costs
Annual Deductible	\$1,500 individual \$3,000 family	\$3,000 individual \$6,000 family	\$6,000 individual \$12,000 family
Coinsurance (after the annual deductible)	20% after deductible	20% after deductible	40% after deductible
Annual Out-of-Pocket Maximum	\$9,000 individual \$18,000 family	\$9,000 individual \$18,000 family	Unlimited
Physician Services			
Office Visits - Primary	20% after deductible	20% after deductible	40% after deductible
Office Visits - Specialist	20% after deductible	20% after deductible	40% after deductible
Urgent Care Visits	\$50 copay	\$100 copay	40% after deductible
Emergency Care* (True Emergency Only)	\$250 copay then 20% after deductible	\$250 copay then 20% after deductible	\$250 copay then 20% after deductible
East Central - Health and Wellness Center	Plan pays 100%, no deductible	Plan pays 100%, no deductible	N/A
Recuro 24/7 Acute & Behavioral Health	Plan pays 100%, no deductible	Plan pays 100%, no deductible	N/A
Prescription Drugs			
Drug Deductible	\$250 Brand / Specialty Only		
Generic (30/90 Day Supply)	\$0 Retail and Mail Order		
Preferred Brand	30% Retail / \$175 Mail Order		
Non-Preferred Brand	30% Retail / \$175 Mail Order		
Specialty	50% to a maximum of \$1500 a month		

*Non-Emergency Use of Emergency Rooms is Not Covered

Refer to plan documents for limitations and additional information.

HD - Medical Plan (continued)

Feature	Your Baptist Health Network Costs	Your Cigna Network Costs	Your Out-of-Network Costs
Maternity Services			
Routine Prenatal Care	20% after deductible	20% after deductible	40% after deductible
Delivery in Hospital	20% after deductible	20% after deductible	40% after deductible
Newborn Care in Hospital (Routine)	20% after deductible	20% after deductible	40% after deductible
Additional Services			
Inpatient Hospital	20% after deductible	20% after deductible	40% after deductible
Outpatient Surgery	20% after deductible	20% after deductible	40% after deductible
Lab & X-ray Outpatient (minor)	20% after deductible	20% after deductible	40% after deductible
Hospital Emergency Care (True Emergency Only)	20% after deductible	20% after deductible	40% after deductible
Chiropractic	20% after deductible	20% after deductible	40% after deductible
Preventative Care*			
Well-Child Care	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Well-Woman Care	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Routine Screening Mammography	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Adult Health Assessments	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Immunizations	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Screening Colonoscopy	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible

*Subject to Affordable Care Act requirements.

Basic - Medical Plan

Overview

The ECISD Basic plan is designed to provide plan members a secondary offering with lower annual deductibles, in exchange for slightly higher monthly premiums. This plan provides in- and out-of network benefits, no need for physician referrals, free generic drugs, and lower annual deductibles than the HD plan.

The UBC benefit plans provide access to the East Central Health and Wellness Center for you and your covered dependents, over the age of 2. All services performed at the Wellness Center are done at no cost for you and your covered dependents. And just like visiting your primary doctor, all information is confidential.

Covered	Monthly Premium	Monthly Premium with PHA
• Employee	• \$125	• \$100
• Employee + Spouse	• \$831	• \$871
• Employee + Child(ren)	• \$410	• \$385
• Employee + Family	• \$1,117	• \$1,067



Basic - plan quick-reference

Refer to plan documents for limitations and additional information.

Basic - Medical Plan

Feature	Your Baptist Health Network Costs	Your Cigna Network Costs	Your Out-of-Network Costs
Annual Deductible	\$1,250 individual \$2,500 family	\$2,500 individual \$5,000 family	\$5,000 individual \$8,000 family
Coinsurance (after the annual deductible is met.)	20% after deductible	20% after deductible	40% after deductible
Annual Out-of-Pocket Maximum	\$9,000 individual \$18,000 family	\$9,000 individual \$18,000 family	Unlimited
Physician Services			
Office Visits - Primary	20% after deductible	20% after deductible	40% after deductible
Office Visits - Specialist	20% after deductible	20% after deductible	40% after deductible
Urgent Care Visits	\$50 copay	\$100 copay	40% after deductible
Emergency Care* (True Emergency Only)	\$250 copay then 20% after deductible	\$250 copay then 20% after deductible	\$250 copay then 20% after deductible
East Central - Health and Wellness Center	Plan pays 100%, no deductible	Plan pays 100%, no deductible	N/A
Telehealth - WellVia	Plan pays 100%, no deductible	Plan pays 100%, no deductible	N/A
Prescription Drugs			
Drug Deductible	\$250 Brand / Specialty Only		
Generic (30/90 Day Supply)	\$0 Retail and Mail Order		
Preferred Brand	30% Retail / \$175 Mail Order		
Non-Preferred Brand	30% Retail / \$175 Mail Order		
Specialty	50% to a maximum of \$1500 a month		

*Non-Emergency Use of Emergency Rooms is Not Covered

Refer to plan documents for limitations and additional information.

Basic - Medical Plan (continued)

Feature	Your Baptist Health Network Costs	Your Cigna Network Costs	Your Out-of-Network Costs
Maternity Services			
Routine Prenatal Care	20% after deductible	20% after deductible	40% after deductible
Delivery in Hospital	20% after deductible	20% after deductible	40% after deductible
Newborn Care in Hospital (Routine)	20% after deductible	20% after deductible	40% after deductible
Additional Services			
Inpatient Hospital	20% after deductible	20% after deductible	40% after deductible
Outpatient Surgery	20% after deductible	20% after deductible	40% after deductible
Lab & X-ray Outpatient (minor)	20% after deductible	20% after deductible	40% after deductible
Hospital Emergency (True Emergency Only)	20% after deductible	20% after deductible	40% after deductible
Chiropractic	20% after deductible	20% after deductible	40% after deductible
Preventative Care*			
Well-Child Care	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Well-Woman Care	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Routine Screening Mammography	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Adult Health Assessments	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Immunizations	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Screening Colonoscopy	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible

*Subject to Affordable Care Act requirements

Enhanced - Medical Plan

Overview

The ECISD Enhanced plan provides the lowest annual deductibles with the same high quality medical benefits, in exchange for the highest monthly premiums. Combining the best aspects from all other plan offerings, this plan provides: In- and out-of network benefits, no need for physician referrals, free generic drugs, and the lowest annual deductibles available.

The UBC benefit plans provide access to the East Central Health and Wellness Center for you and your covered dependents, over the age of 2. All services performed at the Wellness Center are done at no cost for you and your covered dependents. And just like visiting your primary doctor, all information is confidential.

Covered	Monthly Premium	Monthly Premium with PHA
• Employee	• \$302	• \$277
• Employee + Spouse	• \$1,144	• \$1,094
• Employee + Child(ren)	• \$670	• \$620
• Employee + Family	• \$1,545	• \$1,495



Enhanced - plan quick-reference

Refer to plan documents for limitations and additional information.

Enhanced - Medical Plan

Feature	Your Baptist Health Network Costs	Your Cigna Network Costs	Your Out-of-Network Costs
Annual Deductible	\$600 individual \$1,200 family	\$1,200 individual \$2,400 family	\$3,000 individual \$6,000 family
Coinsurance (after the annual deductible is met.)	20% after deductible	20% after deductible	40% after deductible
Annual Out-of-Pocket Maximum	\$9,000 individual \$18,000 family	\$9,000 individual \$18,000 family	Unlimited
Physician Services			
Office Visits - Primary	20% after deductible	20% after deductible	40% after deductible
Office Visits - Specialist	20% after deductible	20% after deductible	40% after deductible
Urgent Care Visits	\$50 copay	\$100 copay	40% after deductible
Emergency Care* (True Emergency Only)	\$250 copay then 20% after deductible	\$250 copay then 20% after deductible	\$250 copay then 20% after deductible
East Central - Health and Wellness Center	Plan pays 100%, no deductible	Plan pays 100%, no deductible	N/A
Telehealth - WellVia	Plan pays 100%, no deductible	Plan pays 100%, no deductible	N/A
Prescription Drugs			
Drug Deductible	\$250 Brand / Specialty Only		
Generic (30/90 Day Supply)	\$0 Retail and Mail Order		
Preferred Brand	30% Retail / \$175 Mail Order		
Non-Preferred Brand	30% Retail / \$175 Mail Order		
Specialty	50% to a maximum of \$1500 a month		

*Non-Emergency Use of Emergency Rooms is Not Covered

Refer to plan documents for limitations and additional information.

Enhanced - Medical Plan (continued)

Feature	Your Baptist Health Network Costs	Your Cigna Network Costs	Your Out-of-Network Costs
Maternity Services			
Routine Prenatal Care	20% after deductible	20% after deductible	40% after deductible
Delivery in Hospital	20% after deductible	20% after deductible	40% after deductible
Newborn Care in Hospital (Routine)	20% after deductible	20% after deductible	40% after deductible
Additional Services			
Inpatient Hospital	20% after deductible	20% after deductible	40% after deductible
Outpatient Surgery	20% after deductible	20% after deductible	40% after deductible
Lab & X-ray Outpatient (minor)	20% after deductible	20% after deductible	40% after deductible
Hospital Emergency Care (True Emergency Only)	20% after deductible	20% after deductible	40% after deductible
Chiropractic	20% after deductible	20% after deductible	40% after deductible
Preventative Care*			
Well-Child Care	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Well-Woman Care	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Routine Screening Mammography	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Adult Health Assessments	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Immunizations	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible
Screening Colonoscopy	Plan pays 100%, no deductible	Plan pays 100%, no deductible	40% after deductible

*Subject to Affordable Care Act requirements.

FINDING A DOCTOR IN OUR DIRECTORY IS EASY



Is your doctor or hospital in your plan's Cigna network? Cigna's online directory makes it easy to find who (or what) you're looking for.

SEARCH YOUR PLAN'S NETWORK IN FOUR SIMPLE STEPS



Step 1

Go to [Cigna.com](https://www.cigna.com), and click on "Find a Doctor" at the top of the screen. Then, under "How are you Covered?" select "Employer or School."



Step 2

Change the geographic location to the city/state or zip code you want to search. Select the search type and enter a name, specialty or other search term. Click on one of our suggestions or the magnifying glass icon to see your results.



Step 3

Answer any clarifying questions, and then verify where you live (as that will determine the networks available).



Step 4

Optional: Select one of the plans offered by your employer during open enrollment. **(OAP) Network Open Access Plus**

That's it! You can also refine your search results by distance, years in practice, specialty, languages spoken and more.

Search first. Then choose Cigna.

There are so many things to love about Cigna. Our directory search is just the beginning.

After you enroll, you'll have access to [myCigna.com](https://www.mycigna.com) – your one-stop source for managing your health plan, anytime, just about anywhere. On [myCigna.com](https://www.mycigna.com), you can estimate your health care costs, manage and track claims, learn how to live a healthier life and more.

Questions? Call **1-800-Cigna24**

Together, all the way.®



Offered by: Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company or their affiliates.

Providers and facilities that participate in the Cigna network are independent practitioners solely responsible for the treatment provided to their patients. They are not agents of Cigna. Product availability may vary by location and plan type and is subject to change. All group health insurance policies and health benefit plans contain exclusions and limitations. For costs and details of coverage, see your plan documents.

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TAKE CONTROL OF YOUR HEALTH



“ I am so pleased with the level of care and time you guys take to spend with each person, I feel I am getting on the right track, what you guys do is phenomenal. ”



TALK TO A DIABETES & MEDICATION EXPERT

Tria Health is coming to your plan! Tria provides private, confidential conversations with a Tria pharmacist by phone. Tria Health’s pharmacists are Certified Diabetes Care and Education Specialists (CDCES). Your pharmacist will help you:

- Make sure your medications are working as intended.
- Ensure your health conditions are well managed.
- Help you save money - Tria saves an average of \$250 per year! ¹
- Answer any questions you have about your health.
- Coordinate care with your doctor(s) - Over 95% of recommendations made by Tria Health were accepted by an individual’s physician. ¹

Our goal is to ensure you live a happy and active life and reduce the risk of serious health complications.

PARTICIPANTS CAN EARN UP TO \$150

Complete a consultation with a Tria pharmacist, and receive a \$50 Tria Health Prepaid MasterCard. You are not required to change your medications, pharmacy or doctor to receive this benefit. You can receive up to \$150 within a 12-month period.

THIS PROGRAM BEGINS SEPTEMBER 1, 2023.

Look for a postcard in your mailbox in September.

Tria may contact certain members directly by phone.

1. 2021 Tria Health Book of Business



We make healthcare easier



Health Advocate offers a unique level of healthcare, insurance and well-being support to help you reach your best health.

Our experts will do the work to ensure that you get the right information and assistance at the right time. Our services are completely confidential and available to you, your spouse, dependents, parents and parents-in-law at no cost.

Connect to all your benefits through a single toll-free number

- We can answer questions about your entire benefits package
- If you need to reach a specific benefit, we can connect you right away

Support for every type of medical condition

- Explain health conditions, diagnoses and treatments; research treatment options
- Answer questions so you can make the right choices for your care

Coordinate medical care and services

- Facilitate any necessary pre-authorizations and coordinate benefits
- Research and arrange second opinions; transfer medical records

Take the hassle out of healthcare

- Find the right in-network doctors and make appointments
- Review medical bills to find errors or duplicate charges; resolve claims and billing issues



866.799.2731


Email: answers@HealthAdvocate.com



Web: HealthAdvocate.com/members

HealthAdvocateSM




Your health
is important
We're here to help

Your employer has partnered with Health Advocate to offer you personalized support to improve your health and well-being, all at no cost to you!
This guide contains an overview of the many ways we can help.

HealthAdvocateSM



Expert help when you need it most

Your Health Advocate services gives you access to experts who can support you in handling a wide range of healthcare issues and help you take full advantage of all your benefits. **We'll get to the heart of your issue, no matter how complex.**

We'll help you:



Quickly connect to all of your benefits



Get answers to your **insurance and claims questions** and **resolve billing issues**



Find the right **in-network doctors**, make appointments and **transfer medical records**



Make **informed decisions** about medical conditions and diagnoses



Find and explore the **latest treatment** options and arrange **second opinions**



Coordinate services related to all aspects of your care

Connect with us no matter where you are



Visit our website or app to learn more about your Health Advocate services. Plus...



Instantly interact with a Health Advocate expert



Get up-to-date **benefits information**, insurance information and other details



Access trusted **health information** and **helpful tips**



Learn how to **reduce healthcare costs**, including **prescription costs**



Open a case and download forms



View important **news alerts**

HealthAdvocate.com/members



We support the whole family

Our services are available to employees, spouses, dependents, parents and parents-in-law at **no cost to you.**



+



Dear Plan Member,

We're excited to welcome you to the RxBenefits family. As a friendly reminder, we have partnered with East Central ISD and OptumRx to bring you best-in-class pharmacy benefits. Our goal is to ensure your safety, make every effort to reduce your out-of-pocket costs, and promptly address any questions or issues that may arise to ensure you get the maximum value from your new benefits plan.

This packet is designed exclusively for you, and includes the following helpful resources that provide important information about your pharmacy plan:

- **Prescription Benefit Coverage for East Central ISD**
This document gives you an easy-to-understand breakdown of all the important details of the coverage through your new pharmacy plan.
- **Member Services Support Contact Information**
Our professional member services representatives are available to support you should any questions or issues arise.
- **Details on Accessing OptumRx's Website & Mobile App**
East Central ISD has selected OptumRx as your backend claims manager, giving you access to one of the largest national pharmacy networks. OptumRx's web portal and app will help you manage your medications anywhere, anytime, search for the nearest retail pharmacy, and check drug interactions.
- **Information on How to Sign-Up for Mail Order**
Get up to a three-month supply of your maintenance medication(s) delivered safely and reliably right to your door. Save time and money!

Your permanent ID card(s) will be distributed to you shortly by OptumRx, or your medical vendor. If you need to fill a prescription before your card(s) arrives, simply provide all of the information on the card below to the pharmacy to process your request.





RxBIN: 610011

RxPCN: IRX

RxGRP: RXBENEFIT

Beginning June 1, 2022, please contact RxBenefits with questions regarding prescription coverage:

Plan Members call Member Support: 800.933.0765
Pharmacists call Pharmacy Help Desk: 800.880.1188

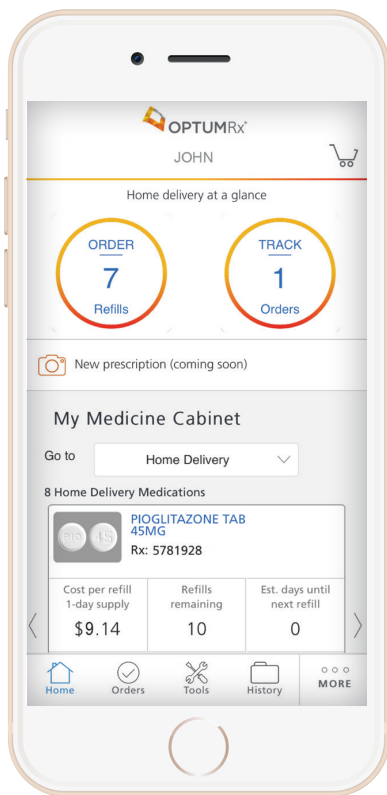
As always, RxBenefits' Member Services team is available to answer any questions you may have. You can reach them Monday – Friday from 7:00 a.m. to 8:00 p.m. CT by calling 800.933.0765 or emailing CustomerCare@rxbenefits.com.

Please reach out to us at any time if you have any questions or concerns. We are thrilled to be partnering with you to take your pharmacy benefit to the next level.

Sincerely,
Your RxBenefits Team



The OptumRx app



The OptumRx® App makes the online pharmacy experience as simple as possible. You can easily:

- Refill or renew a home delivery prescription
- Transfer a retail prescription to home delivery
- Find drug prices and lower-cost options
- View your prescription claim history or order status
- Locate a pharmacy
- Access your ID card, if your plan allows
- Set up refill reminders
- Track your order



Download the OptumRx App now
from the Apple® App Store or Google Play™.





Member Services Quick Reference Card

Member Services for Member Support

RxBenefits' experienced, high-performing call center team delivers a superior level of service.

Availability

Member Services assists you with questions or concerns regarding your pharmacy benefits such as:

- Benefit Details
- Claims Status
- Pharmacy Network
- Coverage Determination/Inquiries
- Mail and Specialty Scripts
- Pharmacy Information

800.933.0765 or
CustomerCare@rxbenefits.com
7:00 AM to 8:00 PM CT
Monday – Friday

Key Details on Common Issues

Pharmacy Benefits & Coverage Inquiries

As plan members, you and your dependents can call for questions related to:

- Coverage Questions
- Clinical Programs
- Copay
- Deductible Issues

Paper Claims

Submit prescription receipts along with your specific PBM's claim form to be processed for direct reimbursement. Claims should be mailed to the address listed on your ID card or fax them to RxBenefits at 205.449.5225.



Medical Plan Benefits Questions?



ubc-benefits.com/ecisd-benefits
(case sensitive)

help@ubc-benefits.com

Specific Medical Coverage Questions?



Allegiance Customer Service Line:

(855) 999-6809

Questions About Prescription Cost and Coverage?



RxBenefits Help Line

(800) 933-0765






frequently asked questions.

Know Your Care  **ATC**

How do I schedule an appointment?

There are three convenient ways to schedule an appointment:

-  Call 800.993.8244
-  Visit www.careatc.com/patients
-  Download the CareATC App

Use the CareATC mobile app and online patient portal to easily schedule appointments anytime, anywhere 24/7.

Is there a co-pay or cost to use the East Central Health & Wellness Center?

As long as you and your dependents are on the UBC/Cigna Medical plan, there is never a charge or co-pay to use the health center.

What do I need for my first visit?

- **New Patient Paperwork** – this can be completed at www.careatc.com/patients
- **Valid I.D.**
- **Medical Insurance Card**
- **List of Current Medications**

How long will my appointment take?

- Sick (Acute) visits take 15-20 minutes.
- Chronic and complex visits could take 30 minutes.

Please arrive 15 minutes prior to your first appointment.



**THE
POWER
TO BE WELL**

The Mobile App

Made to Keep You Moving



Activate Your Account

With the CareATC mobile app, you can take your wellness with you – anywhere, anytime! When it comes to managing your health, we make every effort to ensure that you can safely and securely access the information that matters most.

To help everyone get the most from this benefit, it's important that each member on your health plan age 18 and over create their own account.

Get Started

Securely activate your account by downloading the **CareATC app** or visiting www.careatc.com/activate.

4 Easy Steps:

1: Tell Us About Yourself

Provide personal details. It is important you double check that this matches your employer records.

2: Verify Your Identity

Complete a short verification quiz.

3: Create Your Account

Set up your username and password.

4: Set Up Your Recovery Options

Provide a phone number and/or email address to recover login information.

If you have trouble registering, or logging into the Patient Portal or Mobile app, you can call the Patient Access Center at 800.993.8244.

Download the app to:

- Schedule In-Person or Virtual Care Appointments
- Access 24/7 Telemedicine *(For select groups)*
- Message Your Primary Care Team
- Complete and Review Forms and Documents
- View Your Medical Record
- Submit Prescription Refill Requests
- View Your Personal Health Assessment (PHA) Results
- Map Available Clinic Locations
- Access Exclusive Health Education Content



Three easy ways to schedule an appointment:

 CareATC App  www.careatc.com/patients  800.993.8244

For all employees, spouse and dependents (ages 2+) covered on the
East Central ISD-UBC Cigna Medical Plan

You can **SAVE BIG** at the East Central ISD Health and Wellness Center

Powered by **CareATC**

East Central ISD-UBC Cigna Medical Plan

PRIMARY CARE

Copay - out of pocket

URGENT CARE

\$175 average cost

HOSPITAL ER

\$2000 average cost

ER Free-Standing

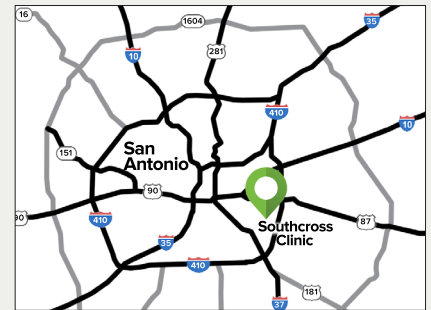
\$4000 average cost

East Central ISD Health and Wellness Center

- Primary care
- Lab work on-site
- Over-the-counter medications dispensed on-site

\$0

Great care. No out of pocket.



Access to quality health care is just around the corner!

East Central ISD is partnering with CareATC to provide primary and preventative health care available **free of charge** to all employees, spouse and dependents (ages 2+) covered on the **East Central ISD-UBC Cigna Medical Plan**

East Central ISD Health and Wellness Center

4243 E Southcross, Ste 202
San Antonio, TX 78222

Mon/Fri 7am - 11am / 12 pm - 4pm
Tu/Wed/Thurs 8am - 12pm/1pm-5pm



\$0 Pay nothing, get everything

- \$0 Copay
- \$0 Deductible
- \$0 Coinsurance
- \$0 Primary, preventive, illness and injury care
- \$0 Chronic disease management
- \$0 Labs and medications provided at your visit
- Fast, easy appointment access
- Little to no wait time
- More time with your provider

Available treatments and services include

- Adult Immunizations
- Allergies / Asthma Annual
- Physicals
- Cold / Congestion / Flu
- Diabetes Management
- Generic Medications
- High Blood Pressure
- High Cholesterol
- Lab Work / Tests
- Minor Injuries
- Sport Physicals
- Thyroid Disorders
- Tobacco Cessation
- Well Woman Exams

Under HIPAA regulations, all patient information is confidential.

Three ways to schedule an appointment: ☎ 800.993.8244 🖥 www.careatc.com/patients 📱 CareATC app

Identity Theft Protection



iLOCK360 | www.iLOCK360.com | 1.855.287.8888

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.

Telehealth



Recuro | www.recurohealth.com | 844.979.0313

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 are able to 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!



Virtual Therapy

Getting Started

INTRODUCTION

Receive comprehensive therapy and counseling from Recuro's Clinical Social Workers and Marriage & Family Therapists. Your therapist will work with you to reach your emotional wellness goals, developing a personalized plan and tracking progress over time.

HOW TO ACCESS

01

Sign up with the Recuro Care app or visit the webpage below to access:
"member.recurohealth.com"

02

Enter your employer member ID

03

Create your username and password

04

Complete intake and wellness assessment

05

Schedule your consult



\$0

Consults

Example Conditions Treated

- Anger Mgmt
- Anxiety
- Bipolar
- Depression
- Eating Disorder
- Sleep Disorder
- Addiction
- Substances
- Grief / Loss
- PTSD
- OCD
- And More...



Virtual Urgent Care

Getting Started

INTRODUCTION

Access board-certified physicians 24/7, 365 days a year for urgent medical needs. Doctors will discuss your symptoms, confirm a diagnosis, and prescribe any needed medication. Video and telephone-based visits are available, with an average wait time of just ten minutes.

Consult Fee: \$0

HOW TO ACCESS

01

Sign up with the Recuro Care app or visit the webpage below to access:
["member.recurohealth.com"](https://member.recurohealth.com)

02

Enter your employer member ID

03

Create your username and password

04

Complete your medical history

05

Schedule your consult



Example Conditions Treated

- Acne / Rash
- Allergies
- Cold / Flu
- GI Issues
- Ear Problems
- Fever
- Insect Bites
- Nausea
- Pink Eye
- Respiratory
- UTI's
- And More...

*Registering your account is not required to use the service, you can call 855.6RECURO anytime for 24/7 access to doctors.





Ever wonder what it would be like to lose weight and feel better ?

Wondr™ is a skills-based digital weight loss program offered by East Central ISD—at no cost to you*—that has helped hundreds of thousands of people in different stages of health:

- Lose weight
- Feel their best mentally and physically
- Use practical, clinically-proven health skills that become life skills

APPLY TODAY

Learn more at wondrhealth.com/ECISD

*Restrictions and eligibility info can be found at wondrhealth.com/ECISD



BEFORE

Cheryl F.
Benefits Manager

Lost 26 lbs
Gained Confidence



Dental Insurance



Ameritas | www.ameritas.com | 1.800.487.5553
QCD Dental | www.qcdofamerica.com | 1.800.229.0304

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 the right to see which option is best for you and your family's dental needs. A range of procedures may be covered, such as:

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

AMERITAS DENTAL MONTHLY PREMIUMS		
	LOW	HIGH
EMPLOYEE ONLY	\$20.00	\$36.00
EMPLOYEE + SPOUSE	\$41.00	\$73.00
EMPLOYEE + CHILD(REN)	\$44.00	\$76.00
EMPLOYEE + FAMILY	\$60.00	\$104.00

QCD DENTAL MONTHLY PREMIUMS	
EMPLOYEE ONLY	\$0.00
EMPLOYEE + 1	\$8.00
EMPLOYEE + FAMILY	\$12.00

High Plan Dental Summary

Policy# 010-47939 Effective Date: 9/1/2023

Plan Benefit	
Type 1	100%
Type 2	80%
Type 3	50%
Deductible	\$50/Calendar Year Type 2 & 3 Waived Type 1 3 Family Maximum
Maximum (per person)	\$1,250 per calendar year
Allowance	U&C
Dental Rewards*	Included
Waiting Period	None

Orthodontia Summary - Child Only Coverage

Allowance	U&C
Plan Benefit	50%
Lifetime Maximum (per person)	\$1,000
Waiting Period	None

Sample Procedure Listing (Current Dental Terminology © American Dental Association.)

Type 1	Type 2	Type 3
<ul style="list-style-type: none"> • Routine Exam (2 per benefit period) • Bitewing X-rays (1 per benefit period) • Full Mouth/Panoramic X-rays (1 in 5 years) • Cleaning (2 per benefit period) • Fluoride for Children 13 and under (1 per benefit period) • Sealants (age 13 and under) • Space Maintainers 	<ul style="list-style-type: none"> • Restorative Amalgams • Restorative Composites (anterior and posterior teeth) • Endodontics (nonsurgical) • Periodontics (nonsurgical) • Simple Extractions • Complex Extractions • Anesthesia 	<ul style="list-style-type: none"> • Onlays • Crowns (1 in 8 years per tooth) • Crown Repair • Endodontics (surgical) • Periodontics (surgical) • Denture Repair • Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 8 years)

Monthly Rates

Employee Only (EE)	\$36.00
EE + Spouse	\$73.00
EE + Children	\$76.00
EE + Spouse & Children	\$104.00

Ameritas Information

We're Here to Help: This plan was designed specifically for the associates of East Central ISD. At Ameritas Group, we do more than provide coverage - we make sure there's always a friendly voice to explain your benefits, listen to your concerns, and answer your questions. Our customer relations associates will be pleased to assist you 7 a.m. to midnight (Central Time) Monday through Thursday, and 7 a.m. to 6:30 p.m. on Friday. You can speak to them by calling toll-free: 800-487-5553. For plan information any time, access our automated voice response system or go online to ameritas.com.

Dental Health Scorecard

How would you rate your dental health? In 2016, you can receive your Dental Health Report Card by signing into your secure member account online. The assessment is based on claims submitted and offers suggestions to improve your dental health. Ameritas members can access the personalized report card by going to ameritas.com, click Account Access in the top right corner and choose the Dental/Vision/Hearing drop down. Select the Secure Member Account link and sign in to see your report.

Rx Savings

Our valued plan members and their covered dependents can save on prescription medications at over 60,000 pharmacies across the nation including CVS, Walgreens, Rite Aid and Walmart. This Rx discount is offered at no additional cost, and it is not insurance. To receive this Rx discount, Ameritas plan members just need to visit us at ameritas.com and sign into (or create) a secure member account where they can access and print an online-only Rx discount savings ID card.

Low Dental Plan Summary

Policy# 010-47939 Effective Date: 9/1/2023

Plan Benefit	
Type 1	100%
Type 2	50%
Type 3	50%
Deductible	\$50/Calendar Year Type 2 & 3 Waived Type 1 3 Family Maximum
Maximum (per person)	\$1,000 per calendar year
Allowance	Discounted Fee
Dental Rewards®	Included
Waiting Period	None

Orthodontia Summary - Child Only Coverage

Allowance	U&C
Plan Benefit	50%
Lifetime Maximum (per person)	\$1,000
Waiting Period	None

Sample Procedure Listing (Current Dental Terminology © American Dental Association.)

Type 1	Type 2	Type 3
<ul style="list-style-type: none"> Routine Exam (2 per benefit period) Bitewing X-rays (1 per benefit period) Full Mouth/Panoramic X-rays (1 in 5 years) Cleaning (2 per benefit period) Fluoride for Children 13 and under (1 per benefit period) Sealants (age 13 and under) Space Maintainers 	<ul style="list-style-type: none"> Restorative Amalgams Restorative Composites (anterior and posterior teeth) Simple Extractions 	<ul style="list-style-type: none"> Onlays Crowns (1 in 8 years per tooth) Crown Repair Endodontics (nonsurgical) Endodontics (surgical) Periodontics (nonsurgical) Periodontics (surgical) Denture Repair Prosthodontics (fixed bridge; removable complete/partial dentures) (1 in 8 years) Complex Extractions Anesthesia

Monthly Rates

Employee Only (EE)	\$20.00
EE + Spouse	\$41.00
EE + Children	\$44.00
EE + Spouse & Children	\$60.00

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Rx Savings

Our valued plan members and their covered dependents can save on prescription medications at over 60,000 pharmacies across the nation including CVS, Walgreens, Rite Aid and Walmart. This Rx discount is offered at no additional cost, and it is not insurance. To receive this Rx discount, Ameritas plan members just need to visit us at ameritas.com and sign into (or create) a secure member account where they can access and print an online-only Rx discount savings ID card.



The QCD of America Dental & Vision Benefit Program is a managed cost program offering a large selection of highly qualified private practice dental and optical professionals.

The QCD Philosophy

QCD believes that you should pay the lowest monthly cost possible for comprehensive dental and vision benefit coverage for your family. The member benefits from significant cost savings when and if services are used.

Do not pay high premiums for dental benefits – pay for your services when and if used. It just makes good financial sense!

Monthly Cost

	Monthly
Employee Only	\$0.00
Employee + One	\$8.00
Employee + Family	\$12.00

Why Select QCD?

When selecting dental benefits, QCD makes good financial sense. QCD allows you to allocate more of your benefit expenditures to your rising medical costs.

A single dental procedure (Root Canal and Crown) could cost you as much as \$2000 with no coverage. The QCD program will allow you to save **up to 60%** on the total cost – that could be as much as **\$1200 in savings** and enough to fund your family's monthly dental and vision benefit costs for several years.

Need more information?

- Contact our Membership Services Department 972.726.0444 or 1.800.229.0304
- See the last page for your enrollment form
- Visit our website at www.qcdofamerica.com

Welcome to the Future of Dental & Vision Benefits...Today!

Vision Insurance



Ameritas | www.ameritas.com | 1.800.487.5553

Proper vision care is essential to your overall wellbeing. Regular eye exams at any age will help prevent eye disease and keep your vision strong for years to come. Your employer provides you with a vision plan to take care of you and your family’s needs. You must enroll in the vision plan each plan year and premiums are typically paid through payroll deduction. Here are just a few of the areas where you will save money with your plan:

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

VISION MONTHLY PREMIUMS	
EMPLOYEE ONLY	\$8.80
EMPLOYEE + SPOUSE	\$17.40
EMPLOYEE + CHILD(REN)	\$15.92
EMPLOYEE + FAMILY	\$24.52

Plan 1: Focus® Plan Summary

Effective Date: 9/1/2023

	VSP Choice Network + Affiliates	Out of Network
Deductibles		
	\$10 Exam	\$10 Exam
	\$25 Eye Glass Lenses or Frames*	\$25 Eye Glass Lenses or Frames
Annual Eye Exam	Covered in full	Up to \$45
Lenses (per pair)		
Single Vision	Covered in full	Up to \$30
Bifocal	Covered in full	Up to \$50
Trifocal	Covered in full	Up to \$65
Lenticular	Covered in full	Up to \$100
Progressive	See lens options	NA
Contacts		
Fit & Follow Up Exams	Member cost up to \$60	No benefit
Elective	Up to \$150	Up to \$120
Medically Necessary	Covered in full	Up to \$210
Frame Allowance	\$150**	Up to \$70
Frequencies (months)		
Exam/Lens/Frame	12/12/12	12/12/12
	Based on date of service	Based on date of service

*Deductible applies to a complete pair of glasses or to frames, whichever is selected.

**The Costco and Walmart allowance will be the wholesale equivalent.

Lens Options (member cost)*

	VSP Choice Network + Affiliates (Other than Costco)	Out of Network
Progressive Lenses	Up to provider's contracted fee for Lined Bifocal Lenses. The patient is responsible for the difference between the base lens and the Progressive Lens charge.	Up to Lined Bifocal allowance.
Std. Polycarbonate	Covered in full for dependent children	No benefit
	\$33 adults	
Solid Plastic Dye	\$15	No benefit
	(except Pink I & II)	
Plastic Gradient Dye	\$17	No benefit
Photochromatic Lenses (Glass & Plastic)	\$31-\$82	No benefit
Scratch Resistant Coating	\$17-\$33	No benefit
Anti-Reflective Coating	\$43-\$85	No benefit
Ultraviolet Coating	\$16	No benefit

*Lens Option member costs vary by prescription, option chosen and retail locations.

LASIK Advantage®

Lifetime Benefit Earned (Each Eye)	Year One	Year Two	Year Three
Plan Benefit	\$150	\$150	\$150

Monthly Rates

Employee Only (EE)	\$8.80
EE + Spouse	\$17.40
EE + Children	\$15.92
EE + Spouse & Children	\$24.52

Flexible Spending Accounts



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

HEALTHCARE FSA

A Health Flexible Spending Account (Health FSA) is an IRS-approved program to help you save taxes and reimburse yourself for out-of-pocket medical expenses not covered under your medical plan. Your employer has chosen the \$500 roll-over option for your Health FSA plan. This option allows you the opportunity to roll over up to \$500 of unclaimed Health FSA funds into the following plan year. Keep in mind that balances more than \$500 will be forfeited under the use-it-or-lose-it rule.

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

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 so you don't have to spend 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: 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 name.

FSA RESOURCES

BENEFITS CARD

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

- **The IRS requires validation of most transactions for FSAs.** You must submit receipts for validation of expenses when requested. If you fail to substantiate by providing a receipt to First Financial within 90 days of the purchase or date of service your card will be suspended until the necessary, receipt or explanation of benefits from your insurance provider is received.
- **Dependent Care FSA Contributions are not loaded upfront.** Funds become available as contributions are made to your account.

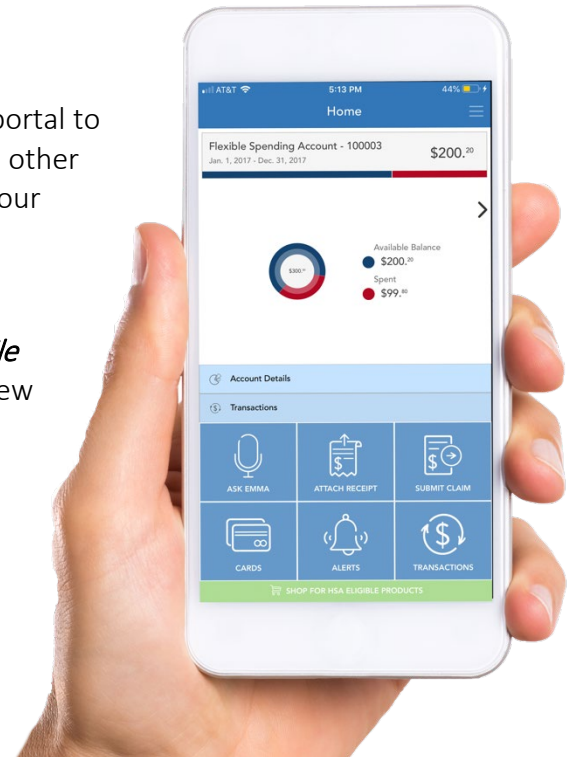
ONLINE FSA PORTAL

Flexible Spending Account participants can log in to their online FSA portal to access account balances, check on claims, upload receipts and access other account details. Visit <https://ffga.com/individuals> to login or set up your account.

FF MOBILE APP

Managing your benefit accounts on the go is made easy with *FF Mobile App*. This powerful, intuitive mobile application gives you access to view your account balances, update your profile, submit a claim and much more – right from your Android or Apple device.

- Access account Information
- View card details and profile information
- Submit FSA claims using an electronic claim form
- View pending claims
- Upload receipts and documentation
- Receive alerts
- Update direct deposit information



FSA STORE

First Financial has partnered with the FSA Store to bring you an easy to use online store to better understand and manage your FSA. An online marketplace that connects consumers to FSA-eligible products, seasonal deals, and account support resources such as open enrollment guides and educational videos.

Visit <http://www.ffga.com/fsaextras> for more details & special deals!

- Shop for eligible items from bandages to wheelchairs and thousands of products in between
- Browse or search for eligible products and services using the Eligibility List
- Visit the Learning Center to help find answers to questions you may have about your account.

Life Insurance



Blue Cross Blue Shield | www.bcbstx.com/ancillary | 1.877.442.4207

EMPLOYER-PAID TERM LIFE 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. Your employer provides all eligible employees \$40,000 (with a 50% reduction at age 70). 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.

Life Insurance



Texas Life | www.texaslife.com | 1.800.283.9233

TEXAS LIFE INSURANCE - PERMANENT, PORTABLE LIFE INSURANCE

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

HIGHLIGHT

- You own the policy, even if you change jobs or retire.
- The policy remains in force until you die or up to age 121, as long as 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.



**GROUP BENEFIT PROGRAM SUMMARY
For EAST CENTRAL ISD / TEEBC TRUST F021842 - 327**

The death of a family provider can mean that a family will not only find itself facing the loss of a loved one, but also the loss of financial security. With our Group Term Life plan, an employee can achieve peace of mind by giving their family the security they can depend on.

EMPLOYER PAID BASIC GROUP TERM LIFE/AD&D (Revised 10/01/2022)

Eligibility	Class 1 – All Eligible TRS Bus Drivers who work 10 hours per week. Class 2 – All Eligible other employees who work 20 hours per week. Insurance is effective the first of the month following date of hire.
Group Term Life/AD&D Benefit:	\$40,000
Guarantee Issue Amount – Employee	\$40,000
Age Reduction Schedule	Life and AD&D benefits reduce by 50% of the original amount at age 70. Benefits terminate at retirement.
Waiver of Premium	If an employee is unable to engage in any occupation as a result of injury or sickness for a minimum of 9 months, prior to age 60, premium will be waived for the employee's life insurance benefit until the employee is no longer disabled or reaches age 65, whichever occurs first.
Definition of Disability	Diagnosed by a doctor to be completely unable, because of sickness or injury to engage in any occupation for wage or profit or any occupation for which they become qualified by education, training or experience.
Accelerated Death Benefit (ADB)	Upon the employee's request, this benefit pays a lump sum up to 75% of the employee's Life insurance, if diagnosed with a terminal illness and has a life expectancy of 12 months or less. Minimum: \$7,500. Maximum: \$250,000. The amount of group term life insurance otherwise payable upon the employee's death will be reduced by the ADB.
Conversion Privilege	Included.
Beneficiary Resource Services	Includes grief, legal and financial counseling for beneficiaries, funeral planning; and online legal library, including templates to create a legal will and other legal documents.
Travel Resource Services	Helps travelers deal with the unexpected that may take place while traveling. Services include emergency medical assistance, financial, legal and communication assistance, and access to other critical services and resources available via the internet.

This piece is for illustrative purposes only. The disability and life insurance policies referenced may not be available in all states. All policies are subject to issue limitations, exclusions and other coverage conditions, which may include a waiting period for pre-existing conditions. Only the policy can provide the actual terms of coverage.

Insurance products issued by Dearborn Life Insurance Company, 701 E. 22nd St. Suite 300, Lombard, IL 60148. Blue Cross and Blue Shield of Texas is the trade name of Dearborn Life Insurance Company, an independent licensee of the Blue Cross and Blue Shield Association. BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.



GROUP ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) PROGRAM SUMMARY

Group AD&D is an additional death benefit that pays in the event a covered employee dies or is dismembered in a covered accident. AD&D benefit is 24-hour coverage.

AD&D Schedule of Loss*	Principal Sum
Loss of Life	100%
Loss of Both Hands or Both Feet	100%
Loss of One Hand and One Foot	100%
Loss of Speech and Hearing	100%
Loss of Sight of Both Eyes	100%
Loss of One Hand and the Sight of One Eye	100%
Loss of One Foot and the Sight of One Eye	100%
Quadriplegia	100%
Paraplegia	75%
Hemiplegia	50%
Loss of Sight of One Eye	50%
Loss of One Hand or One Foot	50%
Loss of Speech or Hearing	50%
Loss of Thumb and Index Finger of Same Hand	25%
Uniplegia	25%

* Loss must occur within 365 days of the accident.

AD&D Product Features Included:

- Seatbelt and Airbag Benefits
- Repatriation Benefit
- Education Benefit

Exclusions – Unless specifically covered in the policy, or required by state law, we will not pay any AD&D benefit for any loss that, directly or indirectly, results in any way from or is contributed to by:

1. disease of the mind or body, or any treatment thereof;
2. infections, except those from an accidental cut or wound;
3. suicide or attempted suicide;
4. intentionally self-inflicted injury;
5. war or act of war;
6. travel or flight in any aircraft while a member of the crew;
7. commission of, or participation in a felony;
8. under the influence of certain drugs, narcotics, or hallucinogen unless properly used as prescribed by a physician; or
9. intoxication as defined in the jurisdiction where the accident occurred;
10. participation in a riot.

This piece is for illustrative purposes only. The disability and life insurance policies referenced may not be available in all states. All policies are subject to issue limitations, exclusions and other coverage conditions, which may include a waiting period for pre-existing conditions. Only the policy can provide the actual terms of coverage.

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BENEFIT PROGRAM SUMMARY
For EAST CENTRAL ISD / TEEBC TRUST F021842 - 327

SUPPLEMENTAL GROUP TERM LIFE (Revised 10/01/2022)

Eligibility	Class 1 – All Eligible TRS Bus Drivers who work 10 hours per week. Class 2 – All Eligible other employees who work 20 hours per week. Insurance is effective the first of the month following date of hire.
Group Term Life Benefit: Employee	\$10,000 - \$250,000, in increments of \$10,000, not to exceed 5 times your annual earnings.
Guarantee Issue Amount – Employee	Under age 60 – \$150,000 Ages 60 to 69 – \$75,000 Age 70 & Older - \$10,000
Group Term Life Benefit: Spouse (Includes Domestic Partners)	\$5,000 - \$50,000, in increments of \$5,000, not to exceed 50% of the employee benefit amount.
Guarantee Issue Amount – Spouse	\$20,000
Group Term Life Benefit: Child(ren)	Option I - \$5,000 Option II - \$10,000
Age Reduction Schedule	Employee Basic Life/ADD and Employee & Spouse Supplemental Group Term Life benefits reduce by 50% of the original amount at age 70. Benefits terminate at retirement.
Employee Contribution	100%
Waiver of Premium	If an employee is unable to engage in any occupation as a result of injury or sickness for a minimum of 9 months, prior to age 60, premium will be waived for the employee's life insurance benefit until the employee is no longer disabled or reaches age 65, whichever occurs first.
Accelerated Death Benefit (ADB)	Upon the employee's request, this benefit pays a lump sum up to 75% of the employee's Life insurance, if diagnosed with a terminal illness and has a life expectancy of 12 months or less. Minimum: \$7,500. Maximum: \$250,000. The amount of group term life insurance otherwise payable upon the employee's death will be reduced by the ADB.
Portability Feature (Life coverage)	Included. (Employee)
Conversion Privilege (Life coverage)	Included.
Exclusions	One-year suicide exclusion applies to Supplemental Group Term Life coverage. AD&D exclusions are the same as Basic AD&D exclusions.

This piece is for illustrative purposes only. The disability and life insurance policies referenced may not be available in all states. All policies are subject to issue limitations, exclusions and other coverage conditions, which may include a waiting period for pre-existing conditions. Only the policy can provide the actual terms of coverage.

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EAST CENTRAL ISD / TEEBC TRUST F021842 - 327

Eligibility

Class 1 - All Eligible TRS Bus Drivers who work 10 hours per week.
Class 2 - All Eligible other Employees who work 20 hours per week.
Insurance is effective the first of the month following date of hire.

Supplemental Life Insurance

Employee Benefit: **\$10,000 - \$250,000 in \$10,000 increments, not to exceed 5 X Base Annual earnings**
Spouse Benefit: **\$5,000 - \$50,000 in \$5,000 increments, but not to exceed 50% of the employee benefit.**

Note: Spouse may not have coverage unless the employee has coverage.

Child Coverage

Live Birth to Age 26 Option I - \$5,000 Option II - \$10,000

Employee/Spouse: Life benefits reduce by 50% of the original amount at age 70. All benefits terminate at retirement.

Guarantee Issue:

Employee: Under Age 60 - \$150,000
Ages 60 to 69 - \$75,000
Age 70 or Over - \$10,000
Spouse: \$20,000

Supplemental Life Insurance

Monthly Premium Cost (Based on 12 payroll deductions per year)

**EMPLOYEE & SPOUSE
Supplemental Life**

Monthly rates per \$1,000

Age	Rates
Under 25	\$0.034
25-29	\$0.034
30-34	\$0.043
35-39	\$0.068
40-44	\$0.085
45-49	\$0.128
50-54	\$0.196
55-59	\$0.366
60-64	\$0.519
65-69	\$0.876
70+	\$1.496

Dependent Life (Children)

Monthly Premium per Family

\$5,000	\$0.50
\$10,000	\$1.00

EMPLOYEE Benefit Amount	ATTAINED AGE											
	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+	
\$10,000	\$0.34	\$0.34	\$0.43	\$0.68	\$0.85	\$1.28	\$1.96	\$3.66	\$5.19	\$8.76	\$14.96	
\$20,000	\$0.68	\$0.68	\$0.86	\$1.36	\$1.70	\$2.56	\$3.92	\$7.32	\$10.38	\$17.52	\$29.92	
\$30,000	\$1.02	\$1.02	\$1.29	\$2.04	\$2.55	\$3.84	\$5.88	\$10.98	\$15.57	\$26.28	\$44.88	
\$40,000	\$1.36	\$1.36	\$1.72	\$2.72	\$3.40	\$5.12	\$7.84	\$14.64	\$20.76	\$35.04	\$59.84	
\$50,000	\$1.70	\$1.70	\$2.15	\$3.40	\$4.25	\$6.40	\$9.80	\$18.30	\$25.95	\$43.80	\$74.80	
\$60,000	\$2.04	\$2.04	\$2.58	\$4.08	\$5.10	\$7.68	\$11.76	\$21.96	\$31.14	\$52.56	\$89.76	
\$70,000	\$2.38	\$2.38	\$3.01	\$4.76	\$5.95	\$8.96	\$13.72	\$25.62	\$36.33	\$61.32	\$104.72	
\$80,000	\$2.72	\$2.72	\$3.44	\$5.44	\$6.80	\$10.24	\$15.68	\$29.28	\$41.52	\$70.08	\$119.68	
\$90,000	\$3.06	\$3.06	\$3.87	\$6.12	\$7.65	\$11.52	\$17.64	\$32.94	\$46.71	\$78.84	\$134.64	
\$100,000	\$3.40	\$3.40	\$4.30	\$6.80	\$8.50	\$12.80	\$19.60	\$36.60	\$51.90	\$87.60	\$149.60	
\$110,000	\$3.74	\$3.74	\$4.73	\$7.48	\$9.35	\$14.08	\$21.56	\$40.26	\$57.09	\$96.36	\$164.56	
\$120,000	\$4.08	\$4.08	\$5.16	\$8.16	\$10.20	\$15.36	\$23.52	\$43.92	\$62.28	\$105.12	\$179.52	
\$130,000	\$4.42	\$4.42	\$5.59	\$8.84	\$11.05	\$16.64	\$25.48	\$47.58	\$67.47	\$113.88	\$194.48	
\$140,000	\$4.76	\$4.76	\$6.02	\$9.52	\$11.90	\$17.92	\$27.44	\$51.24	\$72.66	\$122.64	\$209.44	
\$150,000	\$5.10	\$5.10	\$6.45	\$10.20	\$12.75	\$19.20	\$29.40	\$54.90	\$77.85	\$131.40	\$224.40	
SPOUSE (Employee attained Age)												
\$5,000	\$0.17	\$0.17	\$0.22	\$0.34	\$0.43	\$0.64	\$0.98	\$1.83	\$2.60	\$4.38	\$7.48	
\$10,000	\$0.34	\$0.34	\$0.43	\$0.68	\$0.85	\$1.28	\$1.96	\$3.66	\$5.19	\$8.76	\$14.96	
\$15,000	\$0.51	\$0.51	\$0.65	\$1.02	\$1.28	\$1.92	\$2.94	\$5.49	\$7.79	\$13.14	\$22.44	
\$20,000	\$0.68	\$0.68	\$0.86	\$1.36	\$1.70	\$2.56	\$3.92	\$7.32	\$10.38	\$17.52	\$29.92	

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

Issue Age (ALB)	Monthly Premiums for Life Insurance Face Amounts Shown									GUARANTEED PERIOD Age to Which Coverage is Guaranteed at Table Premium
	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	
15D-1										81
2-4										80
5-8										79
9-10										79
11-16										77
17-20		13.05	23.85	34.65	45.45	67.05	88.65	110.25	131.85	75
21-22		13.33	24.40	35.48	46.55	68.70	90.85	113.00	135.15	74
23		13.60	24.95	36.30	47.65	70.35	93.05	115.75	138.45	75
24-25		13.88	25.50	37.13	48.75	72.00	95.25	118.50	141.75	74
26		14.43	26.60	38.78	50.95	75.30	99.65	124.00	148.35	75
27-28		14.70	27.15	39.60	52.05	76.95	101.85	126.75	151.65	74
29		14.98	27.70	40.43	53.15	78.60	104.05	129.50	154.95	74
30-31		15.25	28.25	41.25	54.25	80.25	106.25	132.25	158.25	73
32		16.08	29.90	43.73	57.55	85.20	112.85	140.50	168.15	74
33		16.63	31.00	45.38	59.75	88.50	117.25	146.00	174.75	74
34		17.45	32.65	47.85	63.05	93.45	123.85	154.25	184.65	75
35		18.55	34.85	51.15	67.45	100.05	132.65	165.25	197.85	76
36		19.10	35.95	52.80	69.65	103.35	137.05	170.75	204.45	76
37		19.93	37.60	55.28	72.95	108.30	143.65	179.00	214.35	77
38		20.75	39.25	57.75	76.25	113.25	150.25	187.25	224.25	77
39		22.13	42.00	61.88	81.75	121.50	161.25	201.00	240.75	78
40	10.75	23.50	44.75	66.00	87.25	129.75	172.25	214.75	257.25	79
41	11.52	25.43	48.60	71.78	94.95	141.30	187.65	234.00	280.35	80
42	12.40	27.63	53.00	78.38	103.75	154.50	205.25	256.00	306.75	81
43	13.17	29.55	56.85	84.15	111.45	166.05	220.65	275.25	329.85	82
44	13.94	31.48	60.70	89.93	119.15	177.60	236.05	294.50	352.95	83
45	14.71	33.40	64.55	95.70	126.85	189.15	251.45	313.75	376.05	83
46	15.59	35.60	68.95	102.30	135.65	202.35	269.05	335.75	402.45	84
47	16.36	37.53	72.80	108.08	143.35	213.90	284.45	355.00	425.55	84
48	17.13	39.45	76.65	113.85	151.05	225.45	299.85	374.25	448.65	85
49	18.12	41.93	81.60	121.28	160.95	240.30	319.65	399.00	478.35	85
50	19.22	44.68	87.10	129.53	171.95					86
51	20.54	47.98	93.70	139.43	185.15					87
52	21.97	51.55	100.85	150.15	199.45					88
53	23.07	54.30	106.35	158.40	210.45					88
54	24.17	57.05	111.85	166.65	221.45					88
55	25.38	60.08	117.90	175.73	233.55					89
56	26.48	62.83	123.40	183.98	244.55					89
57	27.80	66.13	130.00	193.88	257.75					89
58	29.01	69.15	136.05	202.95	269.85					89
59	30.33	72.45	142.65	212.85	283.05					89
60	31.18	74.58	146.90	219.23	291.55					90
61	32.61	78.15	154.05	229.95	305.85					90
62	34.37	82.55	162.85	243.15	323.45					90
63	36.13	86.95	171.65	256.35	341.05					90
64	38.00	91.63	181.00	270.38	359.75					90
65	40.09	96.85	191.45	286.05	380.65					90
66	42.40									90
67	44.93									91
68	47.68									91
69	50.43									91
70	53.29									91

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

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

Issue Age (ALB)	Monthly Premiums for Life Insurance Face Amounts Shown									GUARANTEED PERIOD Age to Which Coverage is Guaranteed at Table Premium
	Includes Added Cost for Accidental Death Benefit (Ages 17-59) and Accelerated Death Benefit for Chronic Illness (All Ages)									
	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	
15D-1										81
2-4										80
5-8										79
9-10										79
11-16										77
17-20		18.55	34.85	51.15	67.45	100.05	132.65	165.25	197.85	71
21-22		19.38	36.50	53.63	70.75	105.00	139.25	173.50	207.75	71
23		20.20	38.15	56.10	74.05	109.95	145.85	181.75	217.65	72
24-25		20.75	39.25	57.75	76.25	113.25	150.25	187.25	224.25	71
26		21.30	40.35	59.40	78.45	116.55	154.65	192.75	230.85	72
27-28		21.85	41.45	61.05	80.65	119.85	159.05	198.25	237.45	71
29		22.13	42.00	61.88	81.75	121.50	161.25	201.00	240.75	71
30-31		24.88	47.50	70.13	92.75	138.00	183.25	228.50	273.75	72
32		25.70	49.15	72.60	96.05	142.95	189.85	236.75	283.65	72
33		25.98	49.70	73.43	97.15	144.60	192.05	239.50	286.95	72
34		26.25	50.25	74.25	98.25	146.25	194.25	242.25	290.25	71
35		28.18	54.10	80.03	105.95	157.80	209.65	261.50	313.35	72
36		29.00	55.75	82.50	109.25	162.75	216.25	269.75	323.25	72
37		30.93	59.60	88.28	116.95	174.30	231.65	289.00	346.35	73
38		31.75	61.25	90.75	120.25	179.25	238.25	297.25	356.25	73
39		33.95	65.65	97.35	129.05	192.45	255.85	319.25	382.65	74
40	16.14	36.98	71.70	106.43	141.15	210.60	280.05	349.50	418.95	76
41	17.13	39.45	76.65	113.85	151.05	225.45	299.85	374.25	448.65	77
42	18.34	42.48	82.70	122.93	163.15	243.60	324.05	404.50	484.95	78
43	19.88	46.33	90.40	134.48	178.55	266.70	354.85	443.00	531.15	80
44	20.65	48.25	94.25	140.25	186.25	278.25	370.25	462.25	554.25	80
45	21.75	51.00	99.75	148.50	197.25	294.75	392.25	489.75	587.25	81
46	22.63	53.20	104.15	155.10	206.05	307.95	409.85	511.75	613.65	81
47	23.73	55.95	109.65	163.35	217.05	324.45	431.85	539.25	646.65	82
48	24.72	58.43	114.60	170.78	226.95	339.30	451.65	564.00	676.35	82
49	26.15	62.00	121.75	181.50	241.25	360.75	480.25	599.75	719.25	83
50	27.36	65.03	127.80	190.58	253.35					83
51	28.57	68.05	133.85	199.65	265.45					83
52	30.33	72.45	142.65	212.85	283.05					84
53	31.87	76.30	150.35	224.40	298.45					85
54	33.30	79.88	157.50	235.13	312.75					85
55	34.84	83.73	165.20	246.68	328.15					85
56	36.60	88.13	174.00	259.88	345.75					85
57	38.36	92.53	182.80	273.08	363.35					86
58	40.23	97.20	192.15	287.10	382.05					86
59	42.10	101.88	201.50	301.13	400.75					86
60	43.28	104.83	207.40	309.98	412.55					86
61	45.81	111.15	220.05	328.95	437.85					86
62	48.23	117.20	232.15	347.10	462.05					87
63	50.65	123.25	244.25	365.25	486.25					87
64	53.07	129.30	256.35	383.40	510.45					87
65	55.71	135.90	269.55	403.20	536.85					87
66	58.57									88
67	61.65									88
68	64.84									88
69	68.25									88
70	71.88									89

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

Disability Insurance



American Fidelity | www.americanfidelity.com | 1.800.654.8489

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 of time you are unable to work due to those reasons. You are able to 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?

Cancer Insurance



Guardian | www.guardiananytime.com | 1.800.627.4200

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 of 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.

Critical Illness Insurance



AFLAC | www.aflacgroupinsurance.com | 1.800.433.3036

If you've heard of heart attacks, strokes, organ transplants or paralysis, then you're familiar with critical illness. It's likely you or someone you know has experienced one of these life-altering events. Often 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.

Accident Insurance



Allstate | www.allstatebenefits.com | 1.800.521.3535

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

Hospital Indemnity Insurance



AFLAC | www.aflacgroupinsurance.com | 1.800.433.3036

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!

Legal Plan



LegalShield | www.legalshield.com | 1.800.654.7757

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.

Employee Assistance Program



American Fidelity | americanfidelity.mysupportportal.com | 1.800.295.8323

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 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.

You can decide which MASA MTS plan will provide you with the ultimate peace of mind at an affordable rate when it comes to protecting your family from massive out-of-pocket ambulance charges.



MEMBERSHIP BENEFITS COMPARISON

DID YOU KNOW?

25 MILLION **PEOPLE**

are sent to the emergency room through ground or air ambulance **every year**.



Insurance companies **may not** cover all air and ground ambulance expenses which can result in excessive bills.



\$5,000



\$60,000

MEMBERSHIP BENEFITS COMPARISON

A MASA MTS Membership provides the ultimate peace of mind at an affordable rate for emergency ground and air transportation service within the United States and Canada, regardless of whether the provider is in or out of a given group healthcare benefits network.

After the group health plan pays its portion, MASA MTS works with providers to deliver our members' \$0 in out-of-pocket costs for emergency transport.

	EMERGENT PLUS MEMBERSHIP	PLATINUM MEMBERSHIP
Emergent Air Transportation	●	●
Emergent Ground Transportation	●	●
Non-Emergency Inter-Facility Transportation	●	●
Repatriation/ Recuperation	●	●
Escort Transportation		●
Visitor Transportation		●
Return Transportation		●
Mortal Remains Transportation		●
Minor Return		●
Organ Retrieval/ Organ Recipient Transportation		●
Vehicle Return		●
Pet Return		●
Worldwide Coverage		●
	\$14 /MONTH	\$39 /MONTH

**Contact Your MASA MTS Representative,
to learn more about membership plan options.**

@ jfloyd@masamts.com / Bcalahan@masamts.com

 (830) 377-8637 or (956) 252-6818

The information provided in this product sheet is for informational purposes only. The benefits listed, and the descriptions thereof, do not represent the full terms and conditions applicable for usage and may only be offered in some memberships. Premiums vary depending on the benefits selected. Commercial Air and Worldwide coverage are not available in all territories. For a complete list of benefits, premiums, and full terms and conditions please refer to the applicable member service agreement for your territory. MASA MTS products and services are not available where prohibited. For Florida residents, Medical Air Services Association of Florida, Inc. is doing business as MASA MTS and is a prepaid limited health service organization licensed under Chapter 636, Florida Statutes, license number: 65-0265219 operating in Florida at 1250 S. Pine Island Road, Suite 500, Plantation, FL 33324. MASA Global, MASA MTS and MASA TRS are registered trade names of Medical Air Services Association, Inc., an Oklahoma corporation.

Clever RX



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

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

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CONTACT INFORMATION



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EMPLOYEE BENEFITS CENTER – <https://ffbenefits.ffga.com/eastcentralisd>

The Employee Benefits Center (EBC) is a one-stop-shop for you to find all things benefits related. On the website, you'll find open enrollment and plan year dates, benefit descriptions, carrier contact information, product brochures, claim forms and enrollment details. Visit <https://ffbenefits.ffga.com/eastcentralisd> today.

