



2025 Plan Year Benefits

PRICES LISTED BELOW ARE SEMI-MONTHLY - (PER PAYCHECK)

BENEFITS AVAILABLE	Medical Rates (Rates are per paycheck after \$310 District contribution)							
	Tier	BCBS HD	BCBS Standard	BCBS Enhanced				
Medical (BCBS) *High Deductible *Standard *Enhanced	Employee ONLY	\$66.00	\$93.50	\$166.65				
	Employee + Spouse	\$469.70	\$568.15	\$699.60				
	Employee + Children	\$265.10	\$331.11	\$393.25				
	Family	\$668.25	\$789.80	\$864.05				
Dental (MetLife) *Low Plan *High Plan	Medical Details	BCBS HD	BCBS Standard	BCBS Enhanced				
	Network	Blue Choice PPO	Blue Essentials HMO	Blue Essentials HMO				
	Deductible	\$3500/\$7000	\$4000/\$8000	\$2000/\$4000				
	Office Visit PCP/Specialty	20% after deductible	\$35/\$70	\$25/\$50				
Vision *Low Plan *High Plan	Preventative Care	Covered 100%	Covered 100%	Covered 100%				
	Emergency Room	20% after deductible	20% after deductible	20% after deductible				
	Inpatient Admission	20% after deductible	20% after deductible	20% after deductible				
	All other services	20% after deductible	20% after deductible	20% after deductible				
Disability Accident	Generic/Preferred/Non-Preferred	20%	\$15/20%/20%	\$15/\$35/\$55				
	Generic/Preferred/Non-Preferred	20%	\$30/20%/20%	\$30/\$70/\$110				
Cancer Insurance Critical Illness	Specialiaty	20%	\$250	\$200				
	Met Life Dental Benefits Summary Low Plan							
Hospital Indemnity Insurance ER Paid & Term Life AD&D Texas Life Insurance Retirement Plans Health FSA Dependent Care FSA Health Savings Account Employee Assistance Program Financial Wellness COBRA Medicare and Age 65 Clever RX	Employee ONLY	\$11.67	Preventative	100%				
	Employee + Spouse	\$22.22	Basic Services	80%				
	Employee + Children	\$28.53	Major Services	50%				
	Family	\$33.22	Orthodontics	\$1,000				
Met Life Dental Benefits Summary High Plan (Larger Network of Dentists)								
Employee ONLY	\$17.14	Preventative	100%					
Employee + Spouse	\$32.78	Basic Services	80%					
Employee + Children	\$42.08	Major Services	50%					
Family	\$48.99	Orthodontics	\$1,000					
GCCISD offers basic Group Term Life Insurance and Accidental Death & Dismemberment at not cost to you in the amount of \$30,000. You have the option to purchase addition Term or Whole Life.								
Vision	Met Life Vision (Low Plan)				Met Life Vision (High Plan)			
Services	Coverage	Co-Pay	Level	Rate	Coverage	Co-Pay	Level	Rate
Eye Examination	12 months	\$10.00	EE	\$4.36	12 months	\$10.00	EE	\$6.60
Lenses	12 months	None	EE+Sp	\$9.32	12 months	None	EE+Sp	\$14.11
Frames	12 months	\$10.00	EE+Child	\$9.07	12 months	None	EE+Child	\$13.72
Contact Lens	12 months	\$10.00	Family	\$13.74	12 months	None	Family	\$20.79
Texas Whole Life Insurance		Guaranteed Issue			Accident Plan - Aetna			
Employee	Portable Policy Builds Cash Value	Up to \$300,000			Employee	\$3.02		
Spouse	Portable Policy Builds Cash Value	Up to \$150,000			Employee + Spouse	\$6.04		
Children	Portable Policy Builds Cash Value	Up to \$50,000			Employee + Children	\$7.24		
					Family	\$8.59		
AD&D - Employee, Spouse & Child \$0.015 per \$1000					Recuro Telehealth Employee/Family - \$5.00			

Critical Illness - Aetna		Cancer Plan - Guardian	
The Aetna Critical Illness Plan pays benefits when a doctor diagnoses you with a covered serious illness or condition. For instance, a heart attack, stroke, cancer and more.* You can use the benefits to help pay out-of-pocket medical costs. Or you can use the benefits for everyday expenses.	\$30,000 Benefit for a covered diagnosis	Employee Only	\$8.91
		Employee + Spouse	\$17.35
		Employee + Children	\$11.39
		Family	\$19.83
Long Term Disability Employee Only	Educator Disability coverage pays you a portion of your earnings if you cannot work because of a disabling illness or injury. You may purchase coverage that will pay you a monthly flat rate dollar benefit in \$100 increments between \$200 and \$8,000 that cannot exceed 66 2/3% of your gross (before tax) monthly earnings.		
Health Savings Account (High Deductible Plan)- FFGA		Flexible Spending Accounts - FFGA	
<p>A Health Savings Account (HSA) is a great way to help you control your healthcare costs. It works in conjunction with a qualified High Deductible Health Plan (HDHP) to combine tax-free savings earmarked for qualified medical expenses. An HSA allows you to set aside money to pay for higher deductibles associated with a lower monthly premium HDHP. The money you save in monthly insurance premiums is reserved for eligible medical expenses you incur in the future. Eligible expenses include things like co-pays and deductibles, prescriptions, vision expenses, dental care, therapy and medical supplies.</p>		<p>A Health Flexible Spending Account (FSA) is an IRS-approved program to help you save taxes and pay for out-of-pocket medical expenses not covered under your medical plan. Your plan includes a 2.5 month grace period option. Keep in mind that remaining balances after the grace period is exhausted will be forfeited under the use-it-or-lose-it rule. Contributions limits for 2025: \$3300</p> <p>With a Dependent Care Flexible Spending Account, you can set aside part of your pay on a pre-tax basis to pay for eligible dependent care expenses like child care, babysitters and adult day care. Eligible dependents must be claimed as an exemption on your tax return.</p>	
Hospital Indemnity Plan - Aetna		Section 125 Rules	
Employee Only	\$11.81	<p>Plans include: Medical, Dental, Vision, Critical Illness, Cancer, Accident, Flexible Spending (Medical and Dependent Care). You must make an election each plan year to continue your eligibility for cafeteria (Section 125) plan benefits. A benefit cannot be changed during the plan year unless you have a qualifying family status change. These changes include but are not limited to: (changes must be made within 31 days)</p> <ul style="list-style-type: none"> * Marriage or Divorce * Birth, Adoption * Death of a spouse or child * Change in a spouse's or dependent's employment status * Change in eligibility status of a dependent 	
Employee + Spouse	\$23.24		
Employee + Children	\$13.62		
Family	\$26.95		
Offsets out-of-pocket costs for hospitalization			
Optional Retirement Plans (Tax Shelter Annuities)		 <p>Scan the QR code to learn more about the plans that are available this plan year!</p>	
457 and 403(b) Accounts			
Allows you to set aside money before taxes to save towards retirement. For more information please contact TCG at (800) 943-9179			
Frequent Contact Numbers			
Benefits Office	(281) 707-3236		
Blue Cross Blue Shield	(877) 299-2377		
FFGA	(855) 465-4473 Opt 3		
403(b) and 457 Retirement	(800) 943-9179		
Online Enrollment			
<p>Login: Your Employee ID or Social Security Number with no dashes.</p> <p>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 make a not of your new PIN because you will use that new PIN from the point forward.</p>			

Email questions to benefits@gccisd.net