Hemphill ISD BENEFITS GUIDE

2024 - 2025 Plan Year SUPPLEMENTAL ENROLLMENT



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This guide contains a summary of the benefits offered by your employer. If there is a conflict between the terms of this outline of benefits and the actual contracts, the terms of the contracts will prevail

EMPLOYEE BENEFITS CENTER

YOUR ONE-STOP SHOP FOR BENEFIT INFORMATION

Hemphill ISD and First Financial are excited to provide you with a custom website filled with information about your benefits. Visit the site or scan the QR code below with your phone to see current benefit options, enrollment information, claims information, and important phone numbers.

https://ffbenefits.ffga.com/hemphillisd/



To enroll online, visit the link above or scan the QR code on the left. Then click the "How To Enroll" heading at the top.

Home Benefit Plans & Premiums How To Enroll Contacts Check My HSA/FSA



WHAT'S NEW & CHANGING

NEW FOR 2024-2025

- > 457b and 403b Retirement Plans
 - o Allows you to save in a pre-tax account for your future
 - o Contributions to the plan are salary deducted and deposited into your retirement account
 - o Early withdrawals are not subject to a 10% excise tax

CHANGES FOR 2024-2025

> TRS rate changes



HOW TO ENROLL

ON-SITE ENROLLMENT (May 7 & 8, 2024)

When it's time to enroll in your benefits, your First Financial Account Representative will be on-site to assist you with making your elections. You can email Hemphill's First Financial account manager, Valeria Clinkscales, for assistance. valeria.clinkscales@ffga.com

Visit your EBC for more benefits information. ffbenefits.ffga.com/hemphillisd

ONLINE ENROLLMENT

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

LOGIN

- Login: Your Employee ID or Social Security Number (no dashes)
- PIN (first login only): The last four digits of your Social Security Number and the last two digits of the year you were born (six digits total)
- New PIN: The first time you log in you will be required to change to a new PIN. Please note your new PIN because you will use the new PIN from that point forward.

VIEW CURRENT BENEFITS

After logging in, you will arrive at the "Welcome" screen. Your current benefits and premium deductions will be listed on this screen.

VIEW/ADD DEPENDENTS

Click "Next" to view your dependents. If you plan to add dependents, you will need to enter their social security numbers and birth dates. It is very important to make sure the social security numbers and birth dates listed are correct.

BEGIN FLECTIONS

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 qualified life event.

ELIGIBILITY

ELIGIBILITY

Eligible employees must be actively at work on the plan effective date (9/1) for new benefits to be effective.

NEW EMPLOYEES

You have 31 days from your actively-at-work date to make benefit elections. Your New Hire Enrollment elections will be made with *Amanda McClelland* in your district Benefits office. You can also reach out to your First Financial benefits representative, Valerie Clinkscales at 281-272-7618 or email her directly at Valeria.Clinkscales@ffga.com.

EXISTING EMPLOYEES

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

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:

Marriage	Divorce	Annulment
Death of a Spouse	Birth	Adoption
Legal Separation	Death of a Dependent Child	Loss of Health Coverage

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.

Know your options

Hemphill ISD provides a wide array of valuable benefits, from medical coverage to life insurance, dental plans and wellness programs. Remember, elections are locked in unless you experience Qualifying Life Event.

Take your time. Study your options.

Everyone has different needs, health challenges, budgets, and goals. By choosing your options carefully, you and your family can get the coverage that fits your needs.

SECTION 125 PLANS

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 must do is enroll.

IS IT RIGHT FOR ME?

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

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

IRS specified changes in family status include:

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

SEC	TION 125 PLAN SAMPLE PA	YCHECK
	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	R BENEFITS ON A PRE-TAX BASIS!

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

FREQUENTLY ASKED QUESTIONS

WHAT IS GUARANTEE ISSUE (GI)?

Also referred to as Guaranteed Acceptance, GA, means that you can't be turned down for health reasons. Guaranteed Issue is typically offered during initial enrollment for benefits.

WHAT IS A "PRE-EXISTING CONDITION"?

A pre-existing condition is a disease or physical condition for which symptoms existed or medical advice or treatment was recommended or received prior to the effective date of coverage.

WHAT IS A DEDUCTIBLE?

A deductible is what you must pay for your health care before your insurance pays its part. Most plans have deductibles, which start over when you "PLAN YEAR" starts over. For example, if your plan has a \$1000 deductible and you have surgery that costs \$5,000, you'll pay \$1,000 before your insurer helps you cover your bills.

WHAT IS A CO-PAY OR CO-INSURANCE?

A copay is a small, fixed amount -often \$10 or \$30- that you pay for covered services like a prescription or a doctor's visit. Some health plans also apply coinsurance to certain services. With it, you pay a percentage of the total cost of care. For example, if you have a 20% coinsurance, and your doctor's appointment costs \$300, you will pay \$60, if you have met your deductible.

WHAT DOES OUT-OF-POCKET MAXIMUM MEAN?

Your out-of-pocket maximum is the most you must pay each year toward your medical services or prescription drugs before your insurance pays for all of your care. This amount does not include what you pay in premiums. The Affordable Care Act limits the out-of-pocket maximums.

WHAT DOFS FOR MFAN?

After you've visited your doctor or had a procedure in a hospital, you'll receive an Explanation of Benefits (EOB) form explaining how much of the charges your insurance will pay. The EOB isn't a bill itself, but it can tell you what your doctor may charge you. Look for the words "due from patient" to see how much you may owe after your insurance pays.

BEFORE YOU GET CERTAIN TESTS OR PROCEDURES, DO YOU NEED PERMISSION FROM YOUR HEALTH INSURANCE PLAN?

If your doctor says you need a test or procedure, your health plan may have to give permission if it is to be covered by insurance. Giving that permission is called preauthorization or referral. Your plan's overview of benefits lists what care needs to be preauthorized. If you don't get the preauthorization when it's required, your health plan will not pay its part of the costs.

MEDICAL

Blue Cross Blue Shield | http://www.bcbstx.com/trsactivecare | 1.866.355.5999

TRS ACTIVECARE – MEDICAL ENROLLMENT SUMMER 2024

The district's medical plans are offered through TRS. There are four medical plans to choose from. In and out-of-network options, comprehensive prescription drug coverage and special health and wellness programs. TRS-ActiveCare has been designed to flexibly meet the needs of nearly half a million public education employees.

ACTIVECARE PRIMARY

If you're currently in TRS-Activecare Primary and you make no change during Annual Enrollment, this will be your plan next year.

- Lower premium
- Copays for doctor visits before you meet deductible
- Statewide network
- PCP referrals required to see specialists
- Not compatible with health savings account (HSA)
- Compatible with flexible spending account (FSA)
- No out-of-network coverage

ACTIVECARE HD

If you're currently in TRS-ActiveCare HD and you make no change during Annual Enrollment, this will be your plan next year.

- Lower premium
- Compatible with health savings account (HSA)
- Nationwide network with out-of-network coverage
- No requirement for PCPs or referrals
- Must meet deductible before plan pays for non-preventive care

ACTIVECARE PRIMARY+ (Primary Plus)

If you're currently in TRS-ActiveCare Primary+ and you make no changes during Annual Enrollment, this will be your plan next year.

- Lower deductible than HD and primary plans
- Copays for many services and drugs
- Higher premium
- Statewide network
- PCP referrals required to see specialists
- Not compatible with a health savings account (HSA)
- No out-of-network coverage
- Compatible with flexible spending account (FSA)

ACTIVECARE 2

If you're currently in TRS-ActiveCare 2, and you make no changes during Annual Enrollment, you will remain in TRS-ActiveCare 2 next year. This plan is closed and not accepting new enrollees. If you're currently enrolled in TRS-ActiveCare 2, you can remain in this plan.

- Closed to new enrollees
- Copays for many drugs and services

MEDICAL

TRS-ACTIVECARE PLAN PRESCRIPTION BENEFITS

Express Scripts | https://www.express-scripts.com/trsactivecare | 1.844.367.6108

WORKING COUPLES

If you and your spouse both work for Hemphill ISD, each of you may have coverage, but only one of you can cover your eligible dependents. In addition, only one employee can enroll in the Voluntary Term life insurance on their spouse.

If you have not received your cards, please call or log-into the BCBS website starting 9/1 to create an account and print temporary cards or request new ones.

HOW TO LOCATE YOUR PCP:

Visit <u>bcbstx.com/trsactivecare</u>
Click "Doctors and Hospitals"
Select the desired medical plan
Enter your city/zip code
Select search criteria

Select your doctor and click "view profile" The 10-digit PCP ID will be located directly under the Doctor's name and begin with an H.

Helpful Medical Enrollment Information

By visiting www.bcbstx.com/trsactivecare members can look up doctors and facilities, get ID cards and see which plan is best for them and more. Register online to find additional plan information pertinent to your specific needs. You may also call Blue Cross Blue Shield to identify whether your doctors, hospital, or health facility will remain "In-Network".

Check if your current physician is with the Blue Cross Blue Shield Statewide Network 1-866-355-5999

2024-25 TRS-ActiveCare Plan Highlights Sept. 1, 2024 - Aug. 31, 2025

Monthly Premium How to Calculate Your

 Your Employer Contribution **Total Monthly Premium**

Your Premium

Ask your Benefits Administrator for your district's specific premiums.

No Extra Cost* Wellness Benefits at

Being healthy is easy with:

- \$0 preventive care
- 24/7 customer service
- One-on-one health coaches
- Weight loss programs
- Nutrition programs
- Ovia[™] pregnancy support
- TRS Virtual Health
- Mental health benefits
- And much more!

*Available for all plans.

See the benefits guide for more details.

Mental Health Primary Plans &

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

All TRS-ActiveCare participants have three plan options. Each includes a wide range of wellness benefits.

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

Monthly Premiums	Total Premium	Employer Contribution	Your Premium	Total Premium	Employer Contribution	Your Premium	Total Premium	Employer Contribution	Your Premium
Employee Only	\$469	\$225	\$244	\$551	\$225	\$326	\$484	\$225	\$259
Employee and Spouse	\$1,267	\$225	\$1,042	\$1,433	\$225	\$1,208	\$1,307	\$225	\$1,082
Employee and Children	\$798	\$225	\$573	\$937	\$225	\$712-	\$823	\$225	\$598
Employee and Family	\$1,595	\$225	\$1,370	\$1,819	\$225	\$1,594	\$1,646	\$225	\$1,421
Plan Features	0			0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		•		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Type of Coverage	l-ul	In-Network Coverage Only	/	In-N	In-Network Coverage Only		In-Network	Out	Out-of-Network
Individual/Family Deductible		\$2,500/\$5,000			\$1,200/\$2,400		\$3,200/\$6,400	\$6,	\$6,400/\$12,800
Coinsurance	t noA	You pay 30% after deductible	ile	You pa	You pay 20% after deductible	е	You pay 30% after deductible		You pay 50% after deductible
Individual/Family Maximum Out of Pocket		\$8,050/\$16,100			\$6,900/\$13,800		\$8,050/\$16,100	\$20	\$20,250/\$40,500
Network		Statewide Network			Statewide Network		Nat	Nationwide Network	
PCP Required		Vac			V _P c			No	

۰					
	You pay 50% after deductible	You pay 30% after deductible	\$70 copay	\$70 copay	Specialist
	You pay 50% after deductible	You pay 30% after deductible	\$15 copay	\$30 copay	Primary Care
					Doctor Visits

 al consultation	\$42 per medical consultation	\$12 per medical consultation	\$12 per medical consultation	TRS Virtual Health-Teladoc®
 al consultation	\$30 per medical consultation	\$0 per medical consultation	\$0 per medical consultation	TRS Virtual Health-RediMD™
 fter deductible	You pay 30% after deductible	You pay 20% after deductible	You pay 30% after deductible	Emergency Care
 You pay 50% after deductible	You pay 30% after deductible You pay 50% after deductible	\$50 copay	\$50 copay	Urgent Care
				mediate Care

Prescription Drugs			
Drug Deductible	Integrated with medical	\$200 deductible per participant (brand drugs only)	Integrated with medical
Generics (31-Day Supply/90-Day Supply)	\$15/\$45 copay; \$0 copay for certain generics	\$15/\$45 copay	You pay 20% after deductible; \$0 coinsurance for certain generics
Preferred	You pay 30% after deductible	You pay 25% after deductible	You pay 25% after deductible
Non-preferred	You pay 50% after deductible	You pay 50% after deductible	You pay 50% after deductible
Specialty (31-Day Max)	\$0 if SaveOnSP eligible; You pay 30% after deductible	\$0 if SaveOnSP eligible; You pay 30% after deductible	You pay 20% after deductible
Insulin Out-of-Pocket Costs	\$25 copay for 31-day supply; \$75 for 61-90 day supply	\$25 copay for 31-day supply; \$75 for 61-90 day supply	You pay 25% after deductible

This plan is closed and not accepting new enrollees. If you're currently enrolled in TRS-ActiveCare 2, you can remain in this plan.

RS ACTIVECARE

TRS-ActiveCare 2

- Closed to new enrollees
 Current enrollees can choose to stay in plan
- Lower deductible
- Copays for many services and drugs
 Nationwide network with out-of-network coverage
- No requirement for Primary Care Providers or referrals

\$1 507	\$2,402	\$1,013	Total Premium
	-	-	Employer Contribution
	-	-	Your Premium

\$2,841

ĺo	No
e Network	Nationwide Network
\$23,700/\$47,400	\$7,900/\$15,800
You pay 40% after deductib	You pay 20% after deductible
\$2,000/\$6,000	\$1,000/\$3,000
Out-of-Network	In-Network

\$70 copay	\$30 copay	
You pay 40% after deductible	You pay 40% after deductible	

\$12 per medical consultation	\$0 per medical consultation	You pay a \$250 copay plus 20% after deductible	\$50 copay	
al consultation	al consultation	us 20% after deductible	You pay 40% after deductible	

\$25 copay for 31-day supply; \$75 for 61-90 day supply

Compare Prices for Common Medical Services

REMEMBER:

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

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

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

DENTAL INSURANCE

Sun Life | www.sunlife.com/us | 1.800.347.6875

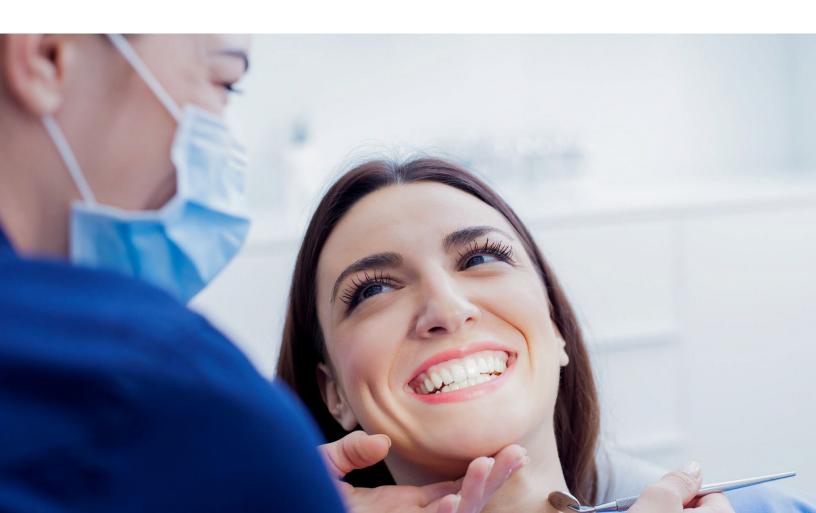
Taking care of your oral health is not a luxury, it is a necessity to long-term optimal health. Dental insurance can greatly reduce your costs when it comes to preventative, restorative, and emergency procedures. Review the plan benefits to see which option is best for you and your family's dental needs. A range of procedures may be covered, such as:

- Comprehensive Exams
- Cleanings
- X-Rays

- Fillings
- Tooth Extractions
- General Anesthesia

- Crowns
- Root Canals

DENTAL INSURANCE				
MONTHLY PREMIUMS				
EMPLOYEE ONLY \$39.20				
EMPLOYEE + SPOUSE	\$74.46			
EMPLOYEE + CHILD(REN)	\$90.22			
EMPLOYEE + FAMILY	\$134.95			



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 INSURANCE				
MONTHLY PREMIUMS				
EMPLOYEE ONLY \$9.28				
EMPLOYEE + 1	\$15.00			
EMPLOYEE + 2	\$25.44			



FLEXIBLE SPENDING ACCOUNTS

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

MEDICAL FSA

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

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

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 with be forfeited.
- Use your benefits card to pay for qualified expenses upfront without spending money out of pocket.
- Keep all receipts in case you need to substantiate a claim for tax purposes.

NOTE: The IRS requires proof that all expenses are eligible. Keep all receipts in case you need to substantiate a claim for tax purposes. Your receipt must include the date of purchase or service, amount you were required to pay after insurance, description of the product or service, merchant or provider name, and the patient's name.

DEPENDENT CARE ESA

With a Dependent Care Flexible Spending Account, you can set aside part of your pay on a pre-tax basis to pay for eligible dependent care expenses like childcare, babysitters, and adult day care.

You may allocate up to \$5,000 per tax year for reimbursement of dependent care services. If you are married and file a separate tax return, the limit is \$2,500.

HIGHLIGHTS

- Eligible dependents must be claimed as an exemption on your tax return.
- Eligible dependents must be children under age 13 or an adult dependent incapable of self-care.
- Funds become available as contributions are made to your account.
- Keep all receipts in case you need to substantiate a claim for tax purposes.
- Balances will be forfeited at the end of the runoff or grace period.

FSA RESOURCES

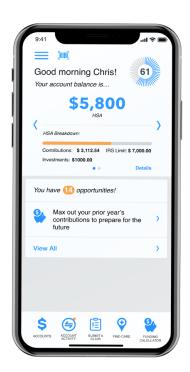
BENEFITS CARD

The First Financial Benefits Card is available to all employees that participate in a 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 any eligible dependents who 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 60 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.

VIEW YOUR ACCOUNT DETAILS ONLINE

Sign up to view your account balance, find claim forms and check claims status on our secure website. Log in at www.ffga.com. After you log in, you may sign up to have reimbursements directly deposited to your bank account. View the **Portal Log-in Guide** now!



FF MOBILE ACCOUNT APP

With the FF Mobile Account App, you can submit claims, view account balance and history, check claims status, view alerts, upload receipts and documentation and more! The FF Mobile Account App is available for Apple® and Android™ devices on either the App StoresM or Google Play Store[™]. View the FF Mobile Account App User Guide and Quick Reference Guide.

t's Eligible?! What an athlete

hes she knew about FSA-eligibility

ESA STORE

First Financial has partnered with the FSA Store to bring you an easy-to-use online store to better understand and manager your account. You can shop for eligible medical items like bandages and contact solution, browse for products and services using the Eligibility List and visit the Learning Center to find answers to commonly asked questions. Visit the store at

http://www.ffga.com/individuals/#stores for more details and special deals.



HEALTH SAVINGS ACCOUNTS

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

HEALTH SAVINGS ACCOUNTS

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.

Your maximum contribution amounts for 2024 are \$4,150 for self only coverage and \$8,300 for families.

HIGHLIGHTS

- Balances roll over from year to year and earn interest along the way.
- Portable you keep it even after you leave employment.
- Tax advantages invest money in mutual funds to grow your tax savings for either future healthcare costs or retirement.
- Pay for expenses with a benefits debit card that gives you immediate access to your money at the time of purchase.
- Expenses also can be reimbursed through our online portal, online bill pay directly to your provider or submitting a distribution request form.
- Receipts are not required for reimbursement but be sure to save them for tax purposes.

WHO CAN PARTICIPATE IN AN HSA?

- You must be enrolled in a qualified High Deductible Health Plan (HDHP).
- You cannot be enrolled in Tricare or Medicare or covered under your spouse's traditional (non-HDHP) health care plan.
- You cannot participate in a general-purpose Flexible Spending Account (FSA) or Health Reimbursement Arrangement.
- Limited Purpose Flexible Spending Accounts are permitted (dental and vision expenses only).
- You cannot participate if your spouse has a general-purpose FSA or HRA at their place of employment.
- You cannot participate if you are being claimed as a dependent on another person's tax return.

HSA RESOURCES

BENEFITS CARD

The First Financial Benefits Card is available to all employees that participate in a Health Savings Account. The Benefits Card gives you immediate access to your money at the point of purchase. Cards are available for participating employees, their spouse and any eligible dependents who are at least 18 years old.

VIEW YOUR ACCOUNT DETAILS ONLINE

Sign up to view your account balance, find tax forms and check claims status on our secure website. Log in at **www.ffga.com**. After you log in, you may sign up to have reimbursements directly deposited to your bank account. View the **Portal Log-in Guide** now!



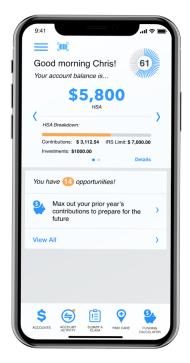
FF MOBILE ACCOUNT APP

With the FF Mobile Account App, you can submit claims, view account balance and history, check claims status, view alerts, upload receipts and documentation and more! The FF Mobile Account App is available for Apple® and Android™ devices on either the App Store™ or Google Play Store™. View the FF Mobile Account App User Guide and Quick Reference Guide.

HSA STORE

First Financial has partnered with the HSA Store to bring you an easy-to-use online store to better understand and manager your account. You can shop for eligible medical items like bandages and contact solution, browse for products and services using the Eligibility List and visit the Learning Center to find answers to commonly asked questions. Visit the store at

http://www.ffga.com/individuals/#stores for more details and special deals.





LIFE INSURANCE

BCBSTX | www.bcbstx.com/ancillary | 1.877.442.4207

EMPLOYER-PAID TERM LIFE

Life insurance protects your loved ones. It pays a benefit so they can afford to pay for funeral expenses, pay off debt and maintain their current standard of living. It is one of the best ways to show you care. Your employer provides all eligible employees with a benefit of \$10,000. The cost of this policy is paid for 100% by your employer. This is a term life policy that is only in effect while you are a district employee. These policies do not continue beyond retirement.

VOLUNTARY TERM LIFE INSURANCE

Voluntary life insurance is term life coverage you can purchase in addition to the basic life plan provided by your employer. It will cover you for a specific period of time, only while you are employed as a district employee. Plan amounts are offered in tiers so you can choose the amount of coverage that works best for you and your family. Because it's a group plan, premiums are typically lower, so it's more affordable to gain the peace of mind that life insurance provides. Limitations apply, including no coverage after retirement. This policy does not continue after retirement or if you leave the district. Please see policy details by visiting the Employee Benefits Center for more details. ffga.com/hemphillisd

TEXAS LIFE — PERMANENT LIFE

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.

HIGHLIGHTS

- You own the policy, even if you change jobs or retire.
- The policy remains in force until you die or up to age 121 if you pay the necessary premium on time.
- It is a permanent, universal life policy which means you can rest easy knowing your loved ones will be well taken care of when you're gone.

DISABILITY INSURANCE

American Fidelity | www.americanfildelity.com | 1.800.662.1113

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. Please choose carefully. Contact your representative to identify the plan differences and what is not covered or excluded.

Hemphill ISD Group Disability Comparison

Disability Plan Features:	Hemphill ISD Long Term Disability	New Hemphill ISD Long Term Disability 2023
Benefit Schedule	Choice of Benefit amount in increments of \$100—ranging from \$200 to \$7,500	Choice of Benefit amount in increments of \$100—ranging from \$200 to \$10,000
Maximum Monthly Benefit	Up to 70% of monthly earnings, less deductible sources of income	Up to 66 2/3% of monthly earnings, less deductible sources of income
Minimum Monthly Benefit	\$100 or 10%, whichever is greater	\$100 or 10%, whichever is greater
Elimination Period Injury/Sickness	Choice of 14, 30, 60, 90 & 150 days	Choice of 7 , 14, 30, 60, 90 & 150 days
Maximum Benefit Period	Up to Social Security Normal Retirement Age (SSNRA) for Injury and Sickness	Up to Social Security Normal Retirement Age (SSNRA) for Injury and Sickness
Hospital Confinement Benefit	Benefit will be payable on the first day the Insured is confined as a patient in a hospital for up to 60 days of confinement.	Benefit will be payable on the first day th Insured is confined as a patient in a hospital for up to 60 days of confinemen The remainder of the Insured's Eliminatio Period will be waived. Available plans wit an elimination period of 30 days or less.
Deductible Sources of Income	Immediate Adjustments	All plans pay in addition to Sick Leave for the first 12 months of disability.
Guarantee Issue Amount	\$7,500	\$10,000
Minimum Participation	Greater of 20% or 10 lives	Greater of 20% or 10 lives
Own Occupation Period	12 months	24 months
Disabled and Working	Included	Included
Pre-Existing Condition Period	12-month lookback/24 months continuous coverage; 1 month benefit for disability due to pre-ex conditions	3-month lookback/12 months continuous coverage; 1 month benefit for disability due to pre-ex conditions
Mental & Nervous Limitation	2 years	2 years
Drug & Alcohol Limitation	15 days	2 years
Special Conditions Limitations	2 years	2 years
Physician Expense Benefit	Up to \$150 for Injury; \$50/sickness	Not Included
Family Care Benefit	Insured will receive up to 25% of benefit up to 24 months of disability benefit	Not Included
Waiver of Premium	First of the month following 180 days of disability	First of the month following 90 days of disability

HOSPITAL INDEMNITY INSURANCE

Aetna | www.aetna.com | 1.800.607.3366

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!

- Hospital Stay Admission pays benefit for your initial stay. Low = \$1000 / High = \$2000
- Daily Hospital stay begins on day 2 of your stay. Low = \$100 / High = \$200
- ICU care pays a benefit of \$200 for the Low plan and \$400 for the High plan
- Newborn routine care pays a benefit after the birth of your child. Low = \$100 / High = \$200

HOSPITAL INDEMNITY PREMIUMS					
LOW PLAN HIGH PLAN					
EMPLOYEE	\$15.38	\$30.76			
EMPLOYEE + SPOUSE	\$34.21	\$68.42			
EMPLOYEE + CHILD(REN)	\$26.24	\$52.48			
EMPLOYEE + FAMILY \$43.41 \$86.82					

CANCER INSURANCE

American Fidelity | www.americanfidelity.com | 1.800.654.8489

Thousands of Americans are diagnosed with cancer each day. No doubt, the news is devastating, both personally and financially. It's impossible to anticipate a cancer diagnosis, but it is possible to prepare for it with a cancer insurance plan.

It is likely that your major medical coverage will not cover all the costs associated with a cancer diagnosis. Supplementing your major medical with cancer insurance may help you pay for related expenses, such as copays and deductibles, specialists, experimental treatment, specialty hospitals, travel expenses, in-home care and more.

Premiums are paid through convenient payroll deduction to ensure your policy remains in force if you should need it. Benefits are paid directly to you, so you can choose how to spend the money.

Visit the Employee Benefits Center and view policy for more details. ffbenefits.ffga.com/hemphillisd

CANCER INSURANCE					
MONTHLY PREMIUM BASIC ENHANCED					
EMPLOYEE	\$15.80	\$31.62			
EMPLOYEE + FAMILY	\$26.86	\$53.80			

12-month pre-existing condition:

The plan doesn't cover pre-existing conditions. A pre-existing condition is any sickness or loss for which medical advice or treatment was received or recommended within 12 months prior to the effective date of coverage.

Actively at work:

If you are not actively at work when coverage is scheduled to become effective, your coverage does not take effect until you complete your first day at work.

CRITICAL ILLNESS INSURANCE

Aetna | www.aetna.com | 1.800.607.3366

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 ffbenefits.ffga.com/hemphillisd and view policy for more details.

Highlights include:

- Guaranteed issue for entire family no medical history required
- Wellness benefit pays you \$100 (High Plan) for annual health screening test
- Covers Heart Attack, Stroke, Major Organ Transplant, Alzheimer's, Cancer, Kidney Failure, Skin Cancer (partial benefit), Coronary Artery by-pass, and many other partial benefit conditions.

CRITICAL ILLNESS PLAN

You may enroll in one option only

Non-Tobacco Rates

Employee Face Amount: \$10,000 Employee Face Amount: \$20,000

Age Band*	Employee	Employee + Spouse	Employee + Child	Family	Age Band*	Employee	Employee + Spouse	Employee + Child	Family
<25	\$3.22	\$6.14	\$3.22	\$6.14	<25	\$5.19	\$9.56	\$5.19	\$9.56
25-29	\$3.86	\$7.11	\$3.86	\$7.11	25-29	\$6.44	\$11.43	\$6.44	\$11.43
30-34	\$5.03	\$8.86	\$5.03	\$8.86	30-34	\$8.73	\$14.86	\$8.73	\$14.86
35-39	\$6.70	\$11.36	\$6.70	\$11.36	35-39	\$12.03	\$19.80	\$12.03	\$19.80
40-44	\$9.30	\$15.26	\$9.30	\$15.26	40-44	\$17.18	\$27.53	\$17.18	\$27.53
45-49	\$12.16	\$19.55	\$12.16	\$19.55	45-49	\$22.84	\$36.01	\$22.84	\$36.01
50-54	\$17.27	\$27.24	\$17.27	\$27.24	50-54	\$32.94	\$51.22	\$32.94	\$51.22
55-59	\$24.24	\$37.71	\$24.24	\$37.71	55-59	\$46.73	\$71.93	\$46.73	\$71.93
60-64	\$35.47	\$54.57	\$35.47	\$54.57	60-64	\$68.98	\$105.36	\$68.98	\$105.36

^{*}Rates are based on the subscribers current age but will increase as you move into a higher age band.

ACCIDENT INSURANCE

Aetna | www.aetna.com | 1.800.607.3366

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

- Concussions
- Lacerations
- Broken teeth

- Emergency room visits
- Ambulance, ground or air
- Intensive care unit

ACCIDENT INSURANCE					
MONTHLY PREMIUM LOW PLAN HIGH PLAN					
EMPLOYEE	\$8.67	\$13.43			
EMPLOYEE + SPOUSE	\$14.86	\$22.76			
EMPLOYEE + CHILD(REN)	\$17.15	\$27.04			
EMPLOYEE + FAMILY	\$22.92	\$35.84			

MEDICAL TRANSPORT

Masa MTS | www.masamts.com | 1.800.643.9023

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

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

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

MEDICAL TRANSPORT			
MONTHLY PREMIUM EMERGENT PLUS			
EMPLOYEE	\$14.00		
EMPLOYEE + FAMILY	\$14.00		

LEGAL & IDENTITY PROTECTION

LegalShield | www.legalshield.com/info/hemphillisd | 1.866.470.1694

Protect yourself and your family from the fastest growing crime in the US: Identity Theft. A low monthly cost provides protection by scouring the dark web for any compromised accounts and restores your identity with 24/7/365 support. This protection saves you money and time by relying on a service to handle all the details involved when your identity is stolen. Available to employee and family.

Highlights include:

- All employees eligible for Identity Theft Protection coverage
- Monitors your identity 24/7/365
- Personal email address required to sign up for this program
- Premium plan monitors all 3 credit bureaus
- Benefits of the preparation of Living Trusts, Living Wills, Powers of Attorney and Will
- Preparation/ Review of Affidavits, Deeds, Demand Letters, Document Reviews, Mortgages and Promissory Notes

LEGAL SHIELD + ID SHIELD					
PLAN INDIVIDUAL FAMILY					
Legal Shield	\$21.95	\$21.95			
ID Shield	\$12.95	\$22.95			
Dual Plan (Both Legal & IDShield)	\$34.90	\$41.90			

Voluntary Retirement



TCG Group Holdings | www.tcgservices.com | 1.800.943.9179

Research shows that Americans are living longer and their number of years in retirement is increasing. While your TRS pension may be enough to cover expenses during your initial retirement years, the reduced monthly income may not be sufficient for costly factors such as medical bills, taxes, and your desired standard of living. Contributing to a retirement savings plan can help supplement your pension during retirement. Most plans allow you to make adjustments to your contribution amount at any time.

HELPIS AVAILABLE

For assistance enrolling or if you'd like to speak with a Retirement Plan Specialist, please call the TCG Advisors Hotline at 512-600-5204 or visit www.tcgservices.com/open-enrollment.

457(b) RETIREMENT PLAN

457(b) is an employer-sponsored, voluntary retirement plan that allows you to save in a pre-tax (Traditional) account. Contributions to the plan are salary-deducted from your paycheck and automatically deposited into your 457(b) retirement savings account. Early withdrawals from a 457(b) account are not subject to a 10% percent excise tax. The 457(b) plan offers employees personalized guidance and flexible strategies to start the process of saving for retirement.

TCG delivers investment advice and plan administration solutions that are transparent and cost-effective. The plan does not have any surrender charges or penalties upon distribution. To get started, simply visit www.tcgservices.com/enroll and establish your account.

403(b) RETIREMENT PLAN

403(b) is a voluntary retirement plan that allows you to save money in a pre-tax (Traditional) account. Contributions to the plan are salary-deducted from your paycheck and automatically deposited into your 403(b) retirement savings account. Early withdrawals from a 403(b) account are subject to a 10% excise tax.

TCG is the 403(b) plan administrator managing your contributions, distributions, and personal updates. Money and investments are held with the vendor of your choice. To get started, visit www.tcgservices.com/documents and find your employer's 403(b) Approved Vendor List. Open an account by contacting one of the approved 403(b) providers directly. Next, register your access to your TCG 403(b) administration account and set up salary deferrals at www.tcgservices.com/enroll.

CONTRIBUTION LIMITS

In 2024, you can contribute 100 percent of your compensation up to \$23,000, whichever is less. If you are age 50 or older, you can contribute up to an additional \$7,500 for a total of \$30,500. You may simultaneously contribute to both 403(b) and 457(b) plans.

How to Enroll

Enroll Online Today!

www.tcgservices.com

Click Enroll (upper right-hand corner)

Enter your Employer's Name Select 457(b) Savings Plan

Follow the instructions to complete your enrollment. If you need assistance accessing the plan, please contact TCG at (800) 943-9179 Monday – Friday, 8:00 a.m. – 7:00 p.m.

How Much May I Contribute?

You may contribute up to the IRS maximum contribution limit of \$23,000. If you are age 50 or over, you may contribute and additional \$7,500 (\$30,500 total)



Your decision to start now could help you accumulate more at retirement. Look at the difference you can make in your total potential account value by putting away just a few dollars more of your pay on a pre-tax basis.

Start Today!	Contribute \$200 Monthly	Contribute \$500 Monthly
Potential Account Value in 10 Years	\$31,634	\$79,085
Potential Account Value in 25 Years	\$131,675	\$329,187

This is a hypothetical illustration based on the following assumptions:

The indicated contribution rate remains constant through the period shown and earns a 6% rate of return, compounded annually.

All investments involve some degree of risk. The funds in your plan are offered by prospectus, which contains more information regarding the investment objectives, risk, and expenses associated with each fund. Please be sure to review the prospectus before deciding to invest.





FFInvest 457(b) Retirement Plan

We are excited to announce the FFInvest Retirement Plan that is now available. The FFInvest 457(b) Retirement Plan is a comprehensive plan funded by Net Asset Value Mutual Funds. It is a competitive & simple, yet flexible plan with a 401(k) type of approach.

Plan Highlights:

• Multiple Investment Options

The plan provides 30 different investment options to take advantage of changing investment market conditions. Some of the fund options include choices by TIAA Cref, Vanguard and Fidelity.

- Roth (After-Tax) Deduction Option Available
- Rollovers/Transfers

Rollovers/Transfers are accepted into the plan from other retirement plans, including IRA's

• Retirement Savings Contributions Credit (Saver's Credit)

An individual may be able to take a tax credit of up to \$1,000 (\$2,000 if filing jointly) for making eligible contributions to an employer-sponsored retirement plan.

NO IRS Penalty

NO 10% IRS penalty for withdrawals prior to age $59 \frac{1}{2}$

• NO Front-End Sales Charge

There are NO sales charges taken from contributions. This means that 100% of all contributions are invested and start working for you.

• NO Deferred Sales Charge

• Client Friendly Technology & Communication

- » Support Portal
- » Toll-free telephone number: 1-800-943-9179
- » Interactive website: www.tcgservices.com
- » Personalized Benefit Projections
- » Loan Option
- » Blog / Calculators
- » Video Library
- » Quarterly eStatement

For Questions or Information on how to enroll in the FFInvest 457(b) Retirement Plan, please contact ffinvest@tcgservices.com.

Contribution Limits for 2024

\$23,000 - under age 50

\$30,500 – age 50 and over

Enroll Online Now!

- ENROLL NOW
- » Go to https://tcgservices.com/
- » Click Enroll (upper right-hand corner)
- » Search for your Employer
- » Click Enroll in the 457(b) Savings Plan

If you have questions, please contact TCG Administrators at 1-800-943-9179, Monday -Friday, 8:00 a.m. to 7:00 p.m. CST.



CONTACT INFORMATION

HEMPHILL ISD BENEFITS OFFICE

Belinda Gay 1000 Milam Ave. Hemphill, TX 75948 409.787.3371

belinda.gay@hemphillisd.com

FIRST FINANCIAL GROUP OF AMERICA

Valerie Clinkscales, Sr. Exec. Administrator 281.272.7618

valeria.clinkscales@ffga.com

CONTACTS				
BENEFIT	CARRIER	WEBSITE	PHONE	
Medical	BCBS	http://www.bcbstx.com/trsactivecare	866.355.5999	
Dental	SunLife	www.sunlife.com/us	800-247-6875	
Vision	Ameritas	www.ameritas.com	800-487-5553	
FSA/DCA/HSA	FFGA	www.ffga.com	866-853-3539	
Group Life Insurance	BCBSTX	www.bcbstx.com/ancillary	877-442-4207	
Permanent Life Insurance	Texas Life	www.texaslife.com	800-283-9233	
Hospital Indemnity	Aetna	www.aetna.com	800-607-3366	
Disability	AFA	www.americanfidelity.com	800-662-1113	
Cancer	AFA	www.americanfidelity.com	800-662-1113	
Critical Illness	Aetna	www.aetna.com	800-607-3366	
Accident	Aetna	www.aetna.com	800-607-3366	
Legal/Identity Theft	LegalShield	www.legalshield.com	800-821-6400	
Medical Transport	MASA	www.masamts.com	800-643-9023	
Retirement	TCG	www.tcgservices.com	800-943-9179	