# RAYMONDVILLE ISD 2023-2024 BENEFITS GUIDE







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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

Raymondville 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 claim forms, important phone number, and enrollment information.

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

https://ffbenefits.ffga.com/raymondvilleisd



### HOW TO ENROLL

#### 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. 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.

#### **ON-SITE ENROLLMENT**

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. Visit your EBC to view the on-site enrollment schedule.

### **ELIGIBILITY**

#### **ELIGIBILITY**

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

#### **NEW EMPLOYEES**

You have 31 days from your actively-at-work date to make benefit elections. To enroll please contact your First Financial representative Nick Sullenger at (956) 998-8117.

#### **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.

#### 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 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

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 BASISI					

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

# MEDICAL

Plan Design Plan Features  Coordinated Care  Uncoordinated Care  1,000 individual / \$3,000 family  20% coinsurance after deductible \$4,000 individual / \$8,000 family RBP/HealthSmart/Cash Pay PCP Required  Primary Care Primary Care Specialist Virtual Health Gare Facilities  Urgent Care Emergency Care  Dutpatient Surgery  Prescription Drug Benefits Drug Deductible Days Supply  Generics Plan Coordinated Care Uncoordinated Care Uncoordinated Care Uncoordinated Care Uncoordinated S4,000 individual / \$8,000 family RBP/HealthSmart/Cash Pay Yes No No charge - plan pays 100% No charge - plan pays 100% No charge - plan pays 100% S50 copay (not subject to deductible) \$10 Per Consultation \$10 Per Consultation \$10 Per Consultation \$10 Per Consultation \$250 copay (not subject to deductible) \$250 copay (not subject to deductible) \$250 copay (not subject to deductible)  Prescription Drug Benefits Drug Deductible None None  Days Supply  30 day 30 Day  Generics \$10 copay \$50 copay Preferred Brand Not covered/MAP 20% coinsurance (no deductible) MAP Vocationsurance (no deductible) MAP Specialty S00 coinsurance (no deductible) MAP			
Individual/Family Deductible  Coinsurance  \$0	<u> </u>	I	Partnership Plan
Coinsurance    SO   20% coinsurance after deductible		Coordinated Care	Uncoordinated Care
Sa,000 individual / \$8,000 family   S4,000 individual / \$8,000 family   RBP/HealthSmart/Cash Pay   RBP/HealthSmart/Cash Pay   Yes   No	Individual/Family Deductible	\$0	1,000 individual / \$3,000 family
Ind/Fam Out of Pocket Network Network PCP Required RBP/HealthSmart/Cash Pay Yes No  PCP Referral to Specialist Preventive Care No charge - plan pays 100% No charge - plan pays 100% Primary Care Primary Care Specialist Virtual Health Virtual Health Specialites  Urgent Care Emergency Care Outpatient Surgery Prescription Drug Benefits Drug Deductible Days Supply  Generics Preferred Brand No covered/MAP 20% coinsurance (no  Ave Specialist Services if amily RBP/HealthSmart/Cash Pay Rb Prescription Pay Spoops 100% No charge - plan pays 100% No charge - p	Coinsurance	•	20% coinsurance after deductible
Network   PCP Required   RBP/HealthSmart/Cash Pay   Yes   No	Ind/Fam Out of Bocket		\$4,000 individual / \$8,000 family
PCP Referral to Specialist Doctor Visits Preventive Care No charge - plan pays 100% No charge - plan pays 100% Primary Care Primary Care No charge \$25 copay if care is coordinated Virtual Health Care Facilities  Urgent Care Emergency Care  Emergency Care  Prescription Drug Benefits Drug Deductible Days Supply  Generics PCP Referral to Specialist Yes No No No charge - plan pays 100% Specialist Special		·	· ·
PCP Referral to Specialist Doctor Visits Preventive Care  No charge - plan pays 100%  No charge - plan pays 100%  Primary Care  No charge   \$35 copay (not subject to deductible)   \$25 copay if care is coordinated   \$50 copay (not subject to deductible)   \$10 Per Consultation  Care Facilities  Urgent Care  Emergency Care  Emergency Care  Socialist Virtual Health Care Facilities  \$25 copay if care is coordinated   \$50 copay (not subject to deductible)   \$10 Per Consultation  \$25 copay if care is coordinated   \$50 copay (not subject to deductible)   \$250 copay (not s		Ť	
Doctor Visits Preventive Care  Primary Care  No charge - plan pays 100%  S10 copay (not subject to deductible)  S25 copay (not subject to deductible)  S25 copay (not subject to deductible)  No charge - plan pays 100%  S10 Per Consultation  S250 copay (not subject to deductible)  S250 copay (not subject to deductible)  No charge - plan pays 100%  S10 Per Consultation  S10 Per Consultation  S250 copay (not subject to deductible)  S2	PCP Required	Yes	No
Preventive Care  Primary Care  No charge - plan pays 100%  No charge - plan pays 100%  No charge - plan pays 100%  No charge   \$35 copay (not subject to deductible)   \$25 copay if care is coordinated   \$50 copay (not subject to deductible)   \$10 Per Consultation   \$10 Per Consultation  Care Facilities  Urgent Care   \$25 copay if care is coordinated   \$50 copay (not subject to deductible)   Emergency Care   \$250 copay   \$250 copay (not subject to deductible)   No charge for professional services if care is coordinated; \$300 copay for facility   20% coinsurance (after deductible)  Prescription Drug Benefits  Drug Deductible   None   None  Days Supply   30 day   30 Day  Generics   \$10 copay   \$10 copay  Preferred Brand   \$50 copay   \$50 copay  Non-preferred Brand   Not covered/MAP   Not covered/MAP   20% coinsurance (no		Yes	No
Primary Care  Specialist Virtual Health Care Facilities  Urgent Care  Emergency Care  Outpatient Surgery  Prescription Drug Benefits Drug Deductible  Days Supply  Generics  Primary Care  No charge \$25 copay if care is coordinated \$50 copay (not subject to deductible) \$10 Per Consultation \$10 Per Consultation \$10 Per Consultation \$10 Per Consultation \$250 copay (not subject to deductible) \$250 copay (not subject to deductible) \$250 copay (not subject to deductible)  Prescription Drug Benefits Drug Deductible  None  None  None  Preferred Brand  Not copay  Not covered/MAP 20% coinsurance (no			
\$25 copay if care is coordinated \$50 copay (not subject to deductible) \$10 Per Consultation \$10 Per Consultation  Care Facilities  Urgent Care  Emergency Care  \$250 copay (not subject to deductible) \$250 copay (not subject to deductible)  \$250 copay (not subject to deductible)  No charge for professional services if care is coordinated; \$300 copay for facility  Prescription Drug Benefits  Drug Deductible  None  None  None  Pays Supply  30 day  30 Day  Generics  \$10 copay \$50 copay \$10 copay \$50 copay  Not covered/MAP 20% coinsurance (no	Preventive Care	No charge - plan pays 100%	No charge - plan pays 100%
Specialist Virtual Health Care Facilities  Urgent Care Emergency Care  Outpatient Surgery  Prescription Drug Benefits Drug Deductible Days Supply  Generics Preferred Brand  Non-preferred Brand  Non-preferred Brand  Virtual Health \$10 Per Consultation	Primary Care	No charge	\$35 copay (not subject to deductible)
Virtual Health Care Facilities  Urgent Care Emergency Care  Segment Surgery  Prescription Drug Benefits Drug Deductible Days Supply  Generics Preferred Brand  Non-preferred Brand  Virtual Health \$10 Per Consultation		\$25 copay if care is	
Virtual Health       \$10 Per Consultation       \$10 Per Consultation         Care Facilities       \$25 copay if care is coordinated       \$50 copay (not subject to deductible)         Emergency Care       \$250 copay No charge for professional services if care is coordinated; \$300 copay for facility       20% coinsurance (after deductible)         Prescription Drug Benefits       None       None         Days Supply       30 day       30 Day         Generics       \$10 copay       \$10 copay         Preferred Brand       \$50 copay       \$50 copay         Non-preferred Brand       Not covered/MAP 20% coinsurance (no       Not covered/MAP Not covered/MAP	Specialist	coordinated	\$50 copay (not subject to deductible)
Urgent Care  Emergency Care  \$250 copay (not subject to deductible)  \$250 copay (not subject to deductible)  No charge for professional services if care is coordinated; \$300 copay for facility  Prescription Drug Benefits  Drug Deductible  None  None  None  Preferred Brand  Not covered/MAP  20% coinsurance (no  Not covered/MAP  20% coinsurance (no	•	\$10 Per Consultation	
\$25 copay if care is coordinated \$50 copay (not subject to deductible)  Emergency Care  \$250 copay \$250 copay (not subject to deductible)  No charge for professional services if care is coordinated; \$300 copay for facility 20% coinsurance (after deductible)  Prescription Drug Benefits  Drug Deductible  None  None  None  Pays Supply  30 day  30 Day  Generics  \$10 copay  \$50 copay  Non-preferred Brand  Not covered/MAP  20% coinsurance (no		<b>,</b>	<b>,</b> 20 1 01 001 001 001
Urgent Care  Emergency Care  \$250 copay No charge for professional services if care is coordinated; \$300 copay for facility  Prescription Drug Benefits Drug Deductible  Days Supply  Generics  \$10 copay  \$50 copay (not subject to deductible)  None  None  None  None  None  \$10 copay  Preferred Brand  Not covered/MAP 20% coinsurance (no	care radifices	¢2E conquif caro is	
Emergency Care  \$250 copay No charge for professional services if care is coordinated; \$300 copay for facility  Prescription Drug Benefits Drug Deductible  None  None  None  Pays Supply  Generics  \$10 copay  Preferred Brand  Not covered/MAP 20% coinsurance (no	Umant Cara	• • •	
No charge for professional services if care is coordinated; \$300 copay for facility 20% coinsurance (after deductible)  Prescription Drug Benefits Drug Deductible None None  Days Supply 30 day 30 Day  Generics \$10 copay \$10 copay Preferred Brand \$50 copay \$50 copay  Non-preferred Brand Not covered/MAP 20% coinsurance (no	Orgent Care	000.4	\$50 copay (not subject to deductible)
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Outpatient Surgery  Prescription Drug Benefits Drug Deductible  None  None  Days Supply  Generics  \$10 copay  \$50 copay  Preferred Brand  Non-preferred Brand  Not covered/MAP 20% coinsurance (after deductible)  None  None  None  None  None  None  None  Not covered/MAP 20% coinsurance (no			
Prescription Drug Benefits Drug Deductible  Days Supply  Generics  \$10 copay  Preferred Brand  Non-preferred Brand  Not covered/MAP 20% coinsurance (after deductible)  20% coinsurance (after deductible)  None  None  None  \$10 copay  \$50 copay  Not covered/MAP 20% coinsurance (no		_ ·	
Prescription Drug Benefits  Drug Deductible  None  None  None  Days Supply  30 day  30 Day  Generics  \$10 copay  \$10 copay  Preferred Brand  \$50 copay  Non-preferred Brand  Not covered/MAP 20% coinsurance (no		coordinated; \$300 copay for	
Drug Deductible       None       None         Days Supply       30 day       30 Day         Generics       \$10 copay       \$10 copay         Preferred Brand       \$50 copay       \$50 copay         Non-preferred Brand       Not covered/MAP Not covered/MAP 20% coinsurance (no       Not covered/MAP	Outpatient Surgery	facility	20% coinsurance (after deductible)
Drug Deductible       None       None         Days Supply       30 day       30 Day         Generics       \$10 copay       \$10 copay         Preferred Brand       \$50 copay       \$50 copay         Non-preferred Brand       Not covered/MAP Not covered/MAP 20% coinsurance (no       Not covered/MAP			
Days Supply  30 day  30 Day  Generics  \$10 copay  \$10 copay  Preferred Brand  \$50 copay  Non-preferred Brand  Not covered/MAP  20% coinsurance (no			
Generics \$10 copay \$10 copay  Preferred Brand \$50 copay \$50 copay  Non-preferred Brand Not covered/MAP Not covered/MAP 20% coinsurance (no	Drug Deductible	None	None
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Preferred Brand \$50 copay \$50 copay  Non-preferred Brand Not covered/MAP Not covered/MAP 20% coinsurance (no	Days Supply	30 day	30 Day
Preferred Brand \$50 copay \$50 copay  Non-preferred Brand Not covered/MAP Not covered/MAP 20% coinsurance (no			
Preferred Brand \$50 copay \$50 copay  Non-preferred Brand Not covered/MAP Not covered/MAP 20% coinsurance (no	Generics	\$10 copay	\$10 copay
Non-preferred Brand  Not covered/MAP  Not covered/MAP  20% coinsurance (no	33.135	1	7 pw)
20% coinsurance (no	Preferred Brand	\$50 copay	\$50 copay
20% coinsurance (no	Non-preferred Brand	Not covered/MAP	Not covered/MAP
		20% coinsurance (no	
, , ,	Specialty		20% coinsurance (no deductible) MAP

# DENTAL INSURANCE

#### CIGNA | www.cigna.com | 1.800.244.6224

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 MONTHLY PREMIUMS				
LOW HIGH				
<b>EMPLOYEE ONLY</b> \$23.79 \$35		\$35.45		
<b>EMPLOYEE + SPOUSE</b> \$46.98 \$69.10				
<b>EMPLOYEE + CHILD(REN)</b> \$51.72 \$74.53				
<b>EMPLOYEE + FAMILY</b> \$72.62 \$104.13				



#### Cigna Healthcare Financial Exhibit for:

#### Raymondville ISD (Low Plan)

Effective Date: October 01, 2023



This is a summary of benefits for your dental plan.

All deductibles, plan maximums, and service specific maximums (dollar and occurrence) cross accumulate between in and out of network. Your DPPO\*\* plan allows you to see any licensed dentist, but using an in-network dentist may minimize your out-of-pocket expenses.

Plan Design	Total Cigna DPPO Network**	Out-of-Network	
Calendar Year Maximum		Progressive Plan	
(Class I, II, III, IX Expenses)	Class I applies	Class I applies	
(γ	Year 1: \$750, Year 2: \$850	Year 1: \$750, Year 2: \$850	
	Year 3: \$950, Year 4: \$1050	Year 3: \$950, Year 4: \$1050	
Calendar Year Deductible			
Per Individual	\$50	\$50	
Per Family	\$150	\$150	
Class I Expenses - Preventive & Diagnostic Care			
Oral Exams	100%, No Deductible	100%, No Deductible	
Cleanings			
Routine X-rays			
Fluoride Application			
Sealants			
Space Maintainers (limited to non-orthodontic treatment)			
Non-Routine X-rays			
Emergency Care to Relieve Pain			
Class II Expenses - Basic Restorative Care			
Fillings	60%, After Deductible	60%, After Deductible	
Oral Surgery - Simple Extractions	,	,	
Oral Surgery - All Except Simple Extraction			
Surgical Extraction of Impacted Teeth			
Anesthetics			
Minor Periodontics			
Major Periodontics			
Root Canal Therapy / Endodontics			
Brush Biopsy			
Class III Expenses - Major Restorative Care			
Relines, Rebases, and Adjustments	40%, After Deductible	40%, After Deductible	
Repairs - Bridges, Crowns, and Inlays	40 %, Alter Deductible	40%, Aitel Deductible	
Repairs - Dentures			
Crowns/Inlays/Onlays			
Stainless Steel/Resin Crowns			
Dentures			
Bridges			
Class IV Expenses - Orthodontia			
Piaco II Expenses - Orthodonia	Not Covered	Not Covered	
Class IX Expenses - Implants	400/ 45 5 1 271	400/ 40 5 1 111	
Plan Calendar Year Max	40%, After Deductible \$750	40%, After Deductible \$750	
Dental Plan Reimbursement Levels	Based on Contracted Fees	90th Percentile of Submitted Charges	
Additional Member Responsibility in		Yes, the difference between the	
excess of Coinsurance	None	member's dentist's billed charges and dental plan reimbursement level***	
Student/Dependent Age		26/26	
Progression	Members progress to the next level by utilizing Class I services in the prior year.		

P0010 Network

#### Cigna Healthcare Financial Exhibit for:

#### Raymondville ISD (High Plan)

Effective Date: October 01, 2023



This is a summary of benefits for your dental plan.

All deductibles, plan maximums, and service specific maximums (dollar and occurrence) cross accumulate between in and out of network. Your DPPO\*\* plan allows you to see any licensed dentist, but using an in-network dentist may minimize your out-of-pocket expenses.

Plan Design	Total Cigna DPPO Network**	Out-of-Network
Calendar Year Maximum	Progressive Plan	
(Class I, II, III, IX Expenses)	Class I applies	Class I applies
	Year 1: \$1500, Year 2: \$1600	Year 1: \$1500, Year 2: \$1600
	Year 3: \$1700, Year 4: \$1800	Year 3: \$1700, Year 4: \$1800
Calendar Year Deductible		
Per Individual	\$50	\$50
Per Family	\$150	\$150
Class I Expenses - Preventive & Diagnostic Care		-
Oral Exams	100%, No Deductible	100%, No Deductible
Cleanings		
Routine X-rays		
Fluoride Application		
Sealants		
Space Maintainers (limited to non-orthodontic treatment)		
Non-Routine X-rays		
Emergency Care to Relieve Pain		
Class II Expenses - Basic Restorative Care	-	<u>'</u>
Fillings	80%, After Deductible	80%, After Deductible
Oral Surgery - Simple Extractions		
Oral Surgery - All Except Simple Extraction		
Surgical Extraction of Impacted Teeth		
Anesthetics		
Minor Periodontics		
Major Periodontics		
Root Canal Therapy / Endodontics		
Brush Biopsy		
Class III Expenses - Major Restorative Care	<u> </u>	
Relines, Rebases, and Adjustments	50%, After Deductible	50%, After Deductible
Repairs - Bridges, Crowns, and Inlays	50 %, Aitel Deductible	30%, Alter Deductible
Repairs - Dentures		
Crowns/Inlays/Onlays Stainless Steel/Resin Crowns		
Dentures		
Bridges		
Class IV Expenses - Orthodontia	FOOV No Orth - D - durable	500/ No O-4h - D
Coverage for Eligible Children Only	50%, No Ortho Deductible	50%, No Ortho Deductible
Lifetime Maximum	\$1500	\$1500
Class IX Expenses - Implants		
·	50%, After Deductible	50%, After Deductible
Plan Calendar Year Max	\$1500	\$1500
Dental Plan Reimbursement Levels	Based on Contracted Fees	90th Percentile of Submitted Charges
	Yes, the difference between the member's dentist's billed charges and dental plan reimbursement level***	
Additional Member Responsibility in excess of Coinsurance	None	member's dentist's billed charges and
		member's dentist's billed charges and

# VISION INSURANCE

Superior Vision | www.superior.com | 1.800.507.3800

Proper vision care is essential to your overall well-being. Regular eye exams at any age will help prevent eye disease and keep your vision strong for years to come.

Your employer provides you with a vision plan to take care of you and your family's needs. You must enroll in the vision plan each plan year and premiums are typically paid through payroll deduction. Here are just a few of the areas where you will save money with your plan:

- Eye exams
- Eyeglasses

- Contact lenses
- Eye surgeries

Vision correction

VISION MONTHLY PREMIUMS			
EMPLOYEE ONLY	\$7.47		
EMPLOYEE + SPOUSE \$12.77			
EMPLOYEE + CHILD(REN) \$13.39			
EMPLOYEE + FAMILY \$20.29			





See yourself healthy.

#### Vision Plan Benefits for Raymondville ISD

Co-Pays	
Exam	\$10
Materials	\$25

Monthly Premiums		
Emp. only	\$7.47	
Emp. + spouse	\$12.77	
Emp. + child(ren)	\$13.39	
Emp. + family	\$20.29	

Services/Frequency		
Exam	12 months	
Frame	12 months	
Lenses	12 months	
Contact Lenses	12 months	

(Based on date of service)

#### **Benefits**

	<u>In-Network</u>	<u>Out-of-Network</u>
Exam	Covered in full	Up to \$35 retail
Frames	\$125 retail allowance	Up to \$70 retail
Lenses (standard) per pair		
Single Vision	Covered in full	Up to \$25 retail
Bifocal	Covered in full	Up to \$40 retail
Trifocal	Covered in full	Up to \$45 retail
Progressive	See description <sup>1</sup>	Up to \$45 retail
Lenticular	Covered in full	Up to \$80 retail
Contact Lenses <sup>2</sup>	\$150 retail allowance	Up to \$80 retail
Medically Necessary Contact Lenses	Covered in full	Up to \$150 retail
Lasik Vision Correction \$200 allowance <sup>3</sup>		allowance <sup>3</sup>

Co-pays apply to in-network benefits; co-pays for out-of-network visits are deducted from reimbursements

#### **Discount Features**

Non-Covered Eyewear Discount: Members may also receive a discount of 20% from a participating provider's usual and customary fees for eyewear purchases which exceed the benefit coverage (except disposable contact lenses, for which no discount applies). This includes eyeglass frames which exceed the selected benefit coverage, specialty lenses (i.e. progressives) and lens "extras" such as tints and coatings. Eyewear purchased from a Walmart Vision Center does not qualify for this additional discount because of Walmart's "Always Low Prices" policy.

SuperiorVision.com
Customer Service
800.507.3800

The Plan discount features are not insurance.

All allowances are retail; the member is responsible for paying the provider directly for all non-covered items and/or any amount over the allowances, minus available discounts. These are not covered by the plan.

Discounts are subject to change without notice.

Disclaimer: All final determinations of benefits, administrative duties, and definitions are governed by the Certificate of Insurance for your vision plan. Please check with your Human Resources department if you have any questions

<sup>&</sup>lt;sup>1</sup>Covered to provider's in-office standard retail lined trifocal amount; member pays difference between progressive and standard retail lined trifocal, plus applicable co-pay

<sup>&</sup>lt;sup>2</sup> Contact lenses and related professional services (fitting, evaluation and follow-up) are covered in lieu of eyeglass lenses and frames benefit

<sup>&</sup>lt;sup>3</sup> Lasik Vision Correction is in lieu of eyewear benefit, subject to routine regulatory filings and certain exclusions and limitations

### 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 reimburse yourself for out-of-pocket medical expenses not covered under your medical plan. Your employer has chosen the \$610 carryover option for your Medical FSA plan. This option allows you the opportunity to carry over up to \$610 of unclaimed Medical FSA funds into the following plan year. Keep in mind that balances more than \$610 will be forfeited under the use-it-or-lose-it rule.

#### Your maximum contribution amount for 2023 is \$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 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 FSA**

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

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

#### **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

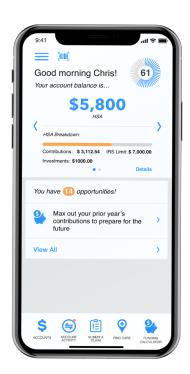
#### **BENEFITS CARD**

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 Store™ 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

#### **FSA 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.

	2023	2024
HSA Contribution Limit	• Self Only: <b>\$3,850</b>	• Self Only: <b>\$4,150</b>
	• Family: <b>\$7,750</b>	• Family: <b>\$8,300</b>
HDHP Minimum Deductibles	• Self Only: <b>\$1,500</b>	• Self Only: <b>\$1,600</b>
	• Family: <b>\$3,000</b>	• Family: <b>\$3,200</b>
\$1,000 catch-up contributions (age 55 or older)		

#### **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.

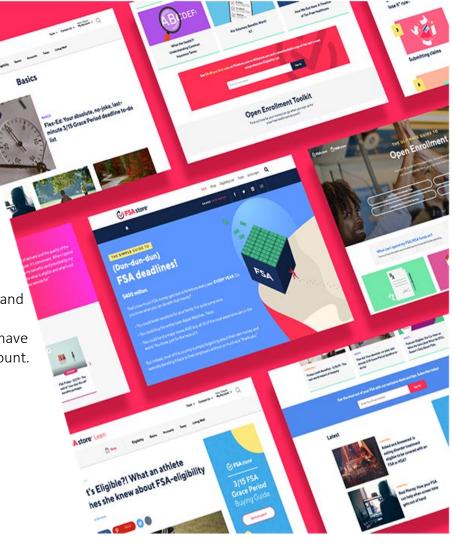
### HSA RESOURCES

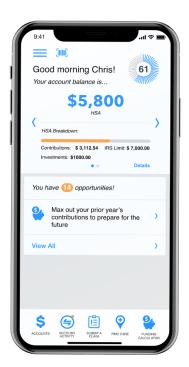
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#### VIEW YOUR ACCOUNT DETAILS ONLINE

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!





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



# TERM LIFE & AD&D INSURANCE

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

#### EMPLOYER-PAID TERM LIFE & AD&D INSURANCE

Life insurance protects your loved ones. It pays a benefit so they can afford to pay for funeral expenses, pay off debt and maintain their current standard of living. It is one of the best ways to show you care. Your employer provides all eligible employees a <\$XX,XXX> policy. 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.

American Fidelity | www.americanfidelity.com | 1.800.654.8489

#### **VOLUNTARY TERM LIFE INSURANCE**

Voluntary life insurance is term life coverage you can purchase in addition to the basic life plan provided by your employer. It will cover you for a specific period of time while you are employed. Plan amounts are offered in tiers so you can choose the amount of coverage that works best for you and your family. Because it's a group plan, premiums are typically lower, so it's more affordable to gain the peace of mind that life insurance provides. Limitations apply, please see policy for details. Visit the Employee Benefits Center for more details.

## TEXAS LIFE — PERMANENT LIFE

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 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.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 you are unable to work due to those reasons. You can 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.guardianlife.com | 1.800.541.7846

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.

# CRITICAL ILLNESS INSURANCE

Aflac | www.aflac.com 1.800.992.3522

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**

Aflac | www.aflac.om | 1.800.992.3522

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

### **GAP INSURANCE**

#### American Fidelity | www.americanfidelity.com | 1.800.654.8489

You may think major medical insurance is enough to cover your needs, but the reality is that many plans may only cover a portion of your overall expenses. It's important to protect yourself in the event of a sudden hospitalization.

A Hospital Gap Insurance plan pays benefits directly to you and is designed to help cover the gap between what your traditional medical plan will cover and the out-of-pocket expenses you will pay. The plan may include benefits you can use to help pay for inpatient hospital stays and surgeries, doctor's office treatments and diagnostic testing costs.

With Hospital Gap Insurance, you can have peace of mind knowing that unexpected medical expenses will less of a financial burden for you and your family members.

### HOSPITAL INDEMNITY INSURANCE

Guardian | www.guardianlife.com | 1.800.541.7846

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!

# IDENTITY THEFT PROTECTION

#### ID Watchdog | www.idwatchdog.com | 1.800.970.5182

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.

### MEDICAL TRANSPORT

#### MASA | 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.

### TELEHEALTH

MDLive | www.MDLIVE/benadmin.com | 1.888.539.2649

Studies show that more than 50 percent of doctor's office visits can be handled over the phone. With the Telehealth program, you can get a diagnosis quicker and spend less time in the waiting room.

Board Certified physicians will diagnose your illness, recommend treatment, and prescribe medication via telephone or video. You can contact them from anywhere – home, work, school, even while on vacation. They can treat common health issues like acid reflux, allergies, asthma, cold and flu, sinus infections, rashes, sore throat and more.

It's like having a doctor on call whenever you need medical advice. Access is only a call or click away!

### **COBRA**

First Financial Administrators, Inc. | www.ffga.com | 1.800.523.8422, option 4

Life is full of unexpected events that may impact your health insurance coverage. Under the Consolidated Omnibus Budget Reconciliation Act, better known as COBRA, you have the right to continue your group health coverage such as medical, dental, vision insurance and flexible spending accounts for a limited period of time.

#### **HIGHLIGHTS**

- Temporary continuation of coverage that generally lasts for 18 months due to employment termination or reduction of hours of work, divorce, death or a child no longer qualifying as a dependent. Certain qualifying events, or a second qualifying event during the initial period of coverage, may permit a beneficiary to receive a maximum of 36 months of coverage.
- Either you or your family member are responsible for notifying your employer of a divorce, legal separation or child losing dependent status within 60 days of the event. In the case of termination, death or reduction in hours, your employer will be responsible for letting the provider know that you have the right to continue coverage under COBRA.
- Benefits will remain identical to what you had while employed. However, you will be responsible for paying the full premium, plus any applicable fees.

# 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!

#### **HIGHLIGHTS**

- 100% FREE to use.
- Unlock discounts on thousands of medications.
- Save up to 80% on prescription medication Often beats your copay!
- Download the Clever RX app by using the information on your card below to unlock exclusive savings at over 60,000 pharmacies nationwide.
- Available to use now!

Use Clever RX every time you pay for a medication for instant savings! Download the app or visit the site to price a drug: https://partner.cleverrx.com/ffga.



# **CONTACT INFORMATION**

RAYMONDVILLE ISD BENEFITS OFFICE

419 FM 3168 | Raymondville, TX 78580 956.424.9504 | www.raymondvilleisd.org FIRST FINANCIAL GROUP OF AMERICA
Nick Sullenger, Account Manager
956.998.8117 | nick.sullenger@ffga.com

CONTACTS			
BENEFIT	CARRIER	WEBSITE	PHONE
Medical	BCBS	Coming Soon	<phone></phone>
Dental	Cigna	www.cigna.com	(800) 244-6224
Vision	Superior	www.superior.com	(800) 507-3800
Flexible Spending Accounts	FFGA FSA Department	https://ffa.wealthcareportal.com/page/home	(866) 853.3539
Health Savings Accounts	FFGA HSA Department	https://ffa.wealthcareportal.com/page/home	(866) 853.3539
Term Life & AD&D	Blue Cross Blue Shield	www.bcbstx.com/ancillary	(877) 442.4207
Permanent Life	Texas Life	www.texaslife.com	(800) 283-9233
Disability Insurance	American Fidelity	www.americanfidelity.com	(800) 654-8489
Cancer Insurance	Guardian	www.guardianlife.com	(8000 541-7846
Critical Illness Insurance	Aflac	http://www.aflacgroupinsurance.com	(800) 433-3036
Accident Insurance	Aflac	http://www.aflacgroupinsurance.com	(800) 992-3522
Gap Insurance	American Fidelity	www.americanfidelity.com	(8000 654-8489
Hospital Indemnity Insurance	Guardian	www.guardianlife.com	(8000 541-7846
Identity Theft Protection	ID Watchdog	www.idwatchdorg.com	(800) 970-5182
Medical Transport	MASA	www.masamts.com	(800) 643-9023
Telehealth	MDLive	www.mdlive/benadmin.com	(888) 539-2649
COBRA	First Financial Administrators, Inc.	www.ffga.com	(800) 523-8422, option 4
Prescription Drug Savings	Cleaver RX	https://partner.cleverrx.com/ffga	(800) 873-1195