

# ENROLLMENT GUIDELINES

## Summary of benefits effective 07/01/2021

It's that time of year again! Open enrollment is your opportunity to review your current benefit elections and make any necessary changes. Our benefit plan year starts on July 1, 2021 and will run through June 30, 2022.

### Medical and Prescription Drugs – Gravie / Aetna

- NEW medical carrier this year with new medical plan options!!
- NEW medical plan administrator: Gravie and NEW medical nationwide network: Aetna
- Deductibles and out-of-pocket maximums run on a calendar year.

### \*NEW\* For your Medical and Prescription Drug Plan Options

- The District will offer two medical plans open for enrollment to all eligible employees; the \$2,000 out-of-pocket maximum plan, and the \$3,500 High Deductible Health Plan (HDHP) that is HSA eligible.
- Out of Pocket Maximum (OPM) \$2000 (\$4000 for family): This plan replaces the current \$1000 deductible PPO plan. Under the new OPM \$2000 plan, the following services are covered 100% and no cost to you on this new medical plan: Preventive exams, Physician and Specialist office visits, Urgent care, Labs, X-Rays and Generic Rx. The only copayments associated with this plan is a \$250 emergency room copayment and a \$75 copayment for brand name prescriptions. All other services are subject to meeting the out-of-pocket maximum first, then covered at 100%. Please refer to the plan summary and summary of benefits and coverage in this booklet for more information.
- HDHP \$3500 (\$7000 for family): This plan replaces the current HDHP \$3000 plan. The new plan is very similar to what employees are already used to with the current High Deductible Health Plan with a Health Savings Account that is in place. All services are subject to meeting the deductible which is the same as the plan's out-of-pocket maximum. Once the deductible has been met, all services are covered at 100%. Please refer to the plan summary and summary of benefits and coverage in this booklet for more information.
- Out of Pocket Maximum (OPM) \$1000 (\$2000 for family): Not open for new enrollment, but an option for those currently on the \$500 deductible PPO plan. The new OPM \$1000 plan will mirror the coverage of the OPM \$2000 plan with the exception of the lower out of pocket maximum. This plan will still require an employee contribution for single and family coverage.

### Health Savings Account (HSA) – iSolved

- NEW health savings account administrator: iSolved
  - More information about iSolved is included in the benefit summary provided
- HSA limits will increase to \$3,600 for a single plan and to \$7,200 for a family plan.
- The District **will increase their contribution to \$1,100** into each employee's HSA effective 9/1/2021 for the 2021 plan year.

### Dental – Delta Dental – No Changes

### Voluntary Vision – VSP – No Changes

### Basic Life / AD&D & Long Term Disability (LTD) – Madison National – No changes

### Voluntary Life Insurance (VTL) – Madison National – No changes

- **Please note**, if your age this year puts you into a new age bracket, you may see an increase in VTL premium.
- Always remember to review your beneficiary designation each year and update as necessary.

### Flexible Spending Plan - TASC

- The 2021 maximum amount employees may elect for a medical care FSA will remain the same at \$2,750.
- Due to the new ARPA legislation, the dependent care FSA maximum amount will increase for the 2021 plan year only. The new maximum dependent care FSA amount you may contribute will be \$10,500 per household.
- Remember any unused *medical* FSA dollars up to \$550 will roll into the new plan year (not available for dependent care FSA). Unused medical care FSA dollars over \$550 and unused dependent care FSA dollars will be forfeited.

### Voluntary Benefit Options – Allstate/Trustmark – No changes

### Employee Assistance Program (EAP) – Employee & Family Resources (EFR)

- We want to remind our employees they have access to Lewis Central CSD's EAP as a resource for their personal needs and their family's needs.
- Comprehensive EAP including 3 sessions with masters-level clinicians and/or licensed counselors.
- 24-Hour National Call Center, Guidance and Resources for everything from Life Coaching, Identity Theft Resolution Services, Financial Consultations and Childcare referrals for you and your family!
- Completely Free and Confidential.

## WHO IS ELIGIBLE?

### Medical and Flexible Spending Accounts

- All Full-Time Classified Staff
- All Certified Staff working 20+ hours/week
- Grandfathered Staff working 30+ hours/week

### Dental

- All Full-Time Classified Staff
- All Certified Staff working 20+ hours/week
- Grandfathered Staff working 30+ hours/week

### Voluntary Vision

- All employees working 20+ hours/week

### Basic Life and AD&D/Voluntary Life

- All Full-Time Classified Staff
- All Certified Staff working 20+ hours/week
- Grandfathered Staff working 30+ hours/week

### Long Term Disability

- All Full-Time Classified Staff
- All Certified Staff working 20+ hours/week

(Please see carrier plan documents for rules around when dependents would lose eligibility – it is your responsibility to notify your employer when a dependent is no longer eligible).

## HOW TO ENROLL

**IMPORTANT - All employees will need make elections this year, even if you are waiving coverage.**

**You may log into the Allstate/Benselect website, contact a benefit enrollment counselor to assist you in making elections, or NEW THIS YEAR, you may schedule an appointment for one of our benefit enrollment counselors to contact you at a time that is convenient to you.**

**The first step is to review your current benefit elections. Verify your personal information and make any changes if necessary. Make your benefit elections.**

1. Login to <https://allstate.benselect.com>
2. Login using your Social Security Number or EID
3. Your PIN is the last 4 digits of your Social Security number followed by the last 2 digits of your birth year (no spaces)

**If you need assistance, you can call a benefit enrollment counselor at 844-708-5600.**

**Once you have made your elections, you will not be able to change them until the next open enrollment period unless you have a qualified change in status.**

## EFFECTIVE DATES

**Open enrollment will run from May 19, 2021 through June 2, 2021.** The benefits you elect during open enrollment will be effective from July 1, 2021 through June 30, 2022.

## HOW TO MAKE CHANGES

Unless you have a qualified change in status, you cannot make changes to the benefits you elect until the next open enrollment period. Qualified changes in status include: marriage, divorce, legal separation, birth or adoption of a child, change in child's dependent status, death of spouse, child or other qualified dependent, change in residence due to an employment transfer for you or your spouse, commencement or termination of adoption proceedings, or change in spouse's benefits or employment status, reduction in hours, or marketplace open enrollment. See HIPAA Special Enrollment Rights later in this packet for notification requirements.