

Changes for 2022-2023

- **New** online benefits enrollment system: FFEEnroll.
- **We encourage everyone** to go online to verify your previous benefit elections and beneficiary information.
- If you want to add, change, or cancel a benefit election, you must log into FFEEnroll.
- If you want to add or delete a dependent from a benefit coverage, you must log into FFEEnroll.
- **If you do not want to enroll in the MISD health insurance, you must go online and waive the health coverage each annual enrollment.**
- Once your enrollment is complete, you will receive a confirmation email. Please confirm your benefit elections to make sure they are accurate.

Medical:

- **District Contribution** – MISD Board of Trustees approved to increase the district’s contribution to the health plan from \$266/month to \$300/month.
- BCBS TRS ActiveCare Health Plans decreased by 10% due to regionalized rates.
- Baylor Scott and White HMO Plan – rates increased slightly, but with the higher district contribution, premium deduction will be less on your paycheck.
- **Plan HD** – In-Network maximum rose by \$50/individual; \$100/families.
- Telehealth – Primary and Primary + copay for Teladoc rose from \$0 to \$12. For HD Teladoc, the consult fee rose from \$30 to \$42.
- Insulin Cap – We’re capping the price of most insulins for participants in TRS-ActiveCare Primary, Primary +, and ActiveCare 2. The price is a \$25 copay for a 31-day supply or \$75 copay for a 61–90-day supply.
- Cancer screening changes – Breast cancer screening age changed from 40 to 35. Colorectal cancer screening age changed from 50 to 45.
- Prudent Rx – Prudent Rx is a new drug benefit where participants pay \$0 for specialty drugs. The program is exclusively for participants in TRS-ActiveCare Primary, Primary +, and ActiveCare 2. They must actively choose to enroll in Prudent Rx to pay the \$0 cost-share. It’s not a default benefit on those plans.
- HSA – You can now use your HSA card at the MEHC.

Medical Plans available for 2022-2023:

TRS-ActiveCare Primary	Statewide network / No out-of-network coverage	PCP referrals required	MEHC in network (only if PCP is MEHC provider)
TRS-ActiveCare HD	Nationwide network with out-of-network coverage	No PCP referral required	MEHC in network
TRS-ActiveCare Primary +	Statewide network / No out-of-network coverage	PCP referrals required	MEHC in network (only if PCP is MEHC provider)
TRS-ActiveCare 2 (still closed to new enrollees)	Nationwide network with out-of-network coverage	No PCP referral required	MEHC in network
Baylor Scott & White HMO	In-network coverage only (regional network)	No PCP referral required	MEHC NOT in network

- Rate changes for health plans (see 2022-2023 rates below).

Vison

- There is a 3% rate increase effective 9/1/22.
- Your VSP ID number is your employee ID number with 4-5 zeros in front (ex: employee id # 12345, add 4 zeros in front to make it 9 numbers like a social; 000-01-2345).

Bundler (Provider: The Standard)

- Effective 9/1/22, The Bundler product will be “unbundled.” Employees may enroll in stand-alone Critical Illness plan or Accident plan. There is a new benefit level offered this year for critical illness coverage: \$10,000. Critical Illness also has a guaranteed issue enrollment opportunity this year, which means that your application will automatically be approved (no health questions to answer or underwriting approval necessary).

Flexible Spending (Healthcare & Dependent Care FSA Provider: TaxSaver)

- **If you want to participate in the flexible spending program, you must re-enroll.**
- Plan year 9/1/22 - 8/31/23: Only eligible expenses and services incurred during this time can be claimed.
- Be conservative in funding this account. **Use it or lose it.**
- Documentation may be required for each debit card expenditure.
- This is a *full-coverage flex account*; so, if your spouse has a health-savings account/HSA account (either through his/her employer or on his/her own), you are not eligible to enroll in this plan/benefit.
- When enrolling in this benefit in *FFEnroll*, make sure you elect the HealthCare FSA account with TaxSaver (not the Health Savings Account/HSA with HSA Bank).

FSA Annual IRS Contribution Limits		
	2021	2022
Health/Unreimbursed Medical FSA Max Election	\$2,750	\$2,850
Dependent Care FSA Max Election (Per Household)	\$5,000	\$5,000

Health Savings Account (Provider: HSA Bank)

- Plan year 9/1/22 - 8/31/23.
- When enrolling in this benefit in *FFEnroll*, make sure you elect the Health Savings Account with HSA Bank (not the HealthCare FSA account with TaxSaver).
- **You can use your HSA card at the MEHC for a \$25 cash price office visit (or \$30 for cosmetic service office visit)!**
- MISD contributes \$7 toward a regular prescription (30 days or less) and \$15 toward maintenance drugs (90-day fills) if cost exceeds stated amount. This applies to TRS Active-Care Plans HD, 2, Primary, and Primary+ Plans and all prescriptions (brand or generic). **HSA plan participants are not eligible for the \$7 or \$15 Rx contribution.**

HSA Annual IRS Contribution Limits		
	2021	2022
Individual	\$3,600	\$3,650
Family	\$7,200	\$7,300

TRS ACTIVE CARE - BCBSTX
2022-2023 HEALTH PLAN PREMIUMS - MONTHLY RATES

Coverage Tier	TRS Premium per month	MISD Contribution per month	Employee Cost	Employee Cost
			per month	per month
			OLD RATES	NEW RATES
TRS-ActiveCare Primary				
<u>EE only</u>	\$ 410.00	\$ 300.00	\$ 417.00	\$ 110.00
<u>E + Sp</u>	\$ 1,157.00	\$ 300.00	\$ 1,176.00	\$ 857.00
<u>E + Ch</u>	\$ 738.00	\$ 300.00	\$ 751.00	\$ 438.00
<u>E + Fam</u>	\$ 1,384.00	\$ 300.00	\$ 1,405.00	\$ 1,084.00
<u>E + Fam Pooled Prem</u>	\$ 1,384.00	\$ 600.00	\$ 1,405.00	\$ 784.00
<u>E + Fam Split Prem</u>	\$ 692.00	\$ 300.00	\$ 702.50	\$ 392.00
TRS-ActiveCare HD				
<u>EE only</u>	\$ 422.00	\$ 300.00	\$ 429.00	\$ 122.00
<u>E + Sp</u>	\$ 1,187.00	\$ 300.00	\$ 1,209.00	\$ 887.00
<u>E + Ch</u>	\$ 757.00	\$ 300.00	\$ 772.00	\$ 457.00
<u>E + Fam</u>	\$ 1,419.00	\$ 300.00	\$ 1,445.00	\$ 1,119.00
<u>E + Fam Pooled Prem</u>	\$ 1,419.00	\$ 600.00	\$ 1,445.00	\$ 819.00
<u>E + Fam Split Prem</u>	\$ 709.50	\$ 300.00	\$ 722.50	\$ 409.50
TRS-ActiveCare Primary +				
<u>EE only</u>	\$ 515.00	\$ 300.00	\$ 542.00	\$ 215.00
<u>E + Sp</u>	\$ 1,259.00	\$ 300.00	\$ 1,334.00	\$ 959.00
<u>E + Ch</u>	\$ 829.00	\$ 300.00	\$ 879.00	\$ 529.00
<u>E + Fam</u>	\$ 1,584.00	\$ 300.00	\$ 1,675.00	\$ 1,284.00
<u>E + Fam Pooled Prem</u>	\$ 1,584.00	\$ 600.00	\$ 1,675.00	\$ 984.00
<u>E + Fam Split Prem</u>	\$ 792.00	\$ 300.00	\$ 837.50	\$ 492.00
TRS-ActiveCare 2 (closed to new enrollees)				
<u>EE only</u>	\$ 1,013.00	\$ 300.00	\$ 1,013.00	\$ 713.00
<u>E + Sp</u>	\$ 2,402.00	\$ 300.00	\$ 2,402.00	\$ 2,102.00
<u>E + Ch</u>	\$ 1,507.00	\$ 300.00	\$ 1,507.00	\$ 1,207.00
<u>E + Fam</u>	\$ 2,841.00	\$ 300.00	\$ 2,841.00	\$ 2,541.00
<u>E + Fam Pooled Prem</u>	\$ 2,841.00	\$ 600.00	\$ 2,841.00	\$ 2,241.00
<u>E + Fam Split Prem</u>	\$ 1,420.50	\$ 300.00	\$ 1,420.50	\$ 1,120.50

BAYLOR SCOTT & WHITE HEALTH PLAN - HMO
2022-2023 HEALTH PLAN PREMIUMS - MONTHLY RATES

Coverage Tier	TRS Premium per month	MISD Contribution per month	Employee Cost	Employee Cost
			per month	per month
			OLD RATES	NEW RATES
<u>EE only</u>	\$ 543.35	\$ 300.00	\$ 542.48	\$ 243.35
<u>E + Sp</u>	\$ 1,364.92	\$ 300.00	\$ 1,362.70	\$ 1,064.92
<u>E + Ch</u>	\$ 873.57	\$ 300.00	\$ 872.16	\$ 573.57
<u>E + Fam</u>	\$ 1,570.98	\$ 300.00	\$ 1,568.42	\$ 1,270.98
<u>E + Fam Pooled Prem</u>	\$ 1,570.98	\$ 600.00	\$ 1,568.42	\$ 970.98
<u>E + Fam Split Prem</u>	\$ 785.49	\$ 300.00	\$ 784.21	\$ 485.49

**TRS ACTIVE CARE – BCBSTX
2022-2023 HEALTH PLAN PREMIUMS – SEMI-MONTHLY RATES**

Coverage Tier	TRS Premium per check	MISD Contribution per check	Employee Cost	Employee Cost
			per check	per check
			OLD RATES	NEW RATES
TRS-ActiveCare Primary				
<u>EE only</u>	\$ 205.00	\$ 150.00	\$ 208.50	\$ 55.00
<u>E + Sp</u>	\$ 578.50	\$ 150.00	\$ 588.00	\$ 428.50
<u>E + Ch</u>	\$ 369.00	\$ 150.00	\$ 375.50	\$ 219.00
<u>E + Fam</u>	\$ 692.00	\$ 150.00	\$ 702.50	\$ 542.00
<u>E + Fam Pooled Prem</u>	\$ 692.00	\$ 300.00	\$ 702.50	\$ 392.00
<u>E + Fam Split Prem</u>	\$ 346.00	\$ 150.00	\$ 351.25	\$ 196.00
TRS-ActiveCare HD				
<u>EE only</u>	\$ 211.00	\$ 150.00	\$ 214.50	\$ 61.00
<u>E + Sp</u>	\$ 593.50	\$ 150.00	\$ 604.50	\$ 443.50
<u>E + Ch</u>	\$ 378.50	\$ 150.00	\$ 386.00	\$ 228.50
<u>E + Fam</u>	\$ 709.50	\$ 150.00	\$ 722.50	\$ 559.50
<u>E + Fam Pooled Prem</u>	\$ 709.50	\$ 300.00	\$ 722.50	\$ 409.50
<u>E + Fam Split Prem</u>	\$ 354.75	\$ 150.00	\$ 361.25	\$ 204.75
TRS-ActiveCare Primary +				
<u>EE only</u>	\$ 257.50	\$ 150.00	\$ 271.00	\$ 107.50
<u>E + Sp</u>	\$ 629.50	\$ 150.00	\$ 667.00	\$ 479.50
<u>E + Ch</u>	\$ 414.50	\$ 150.00	\$ 439.50	\$ 264.50
<u>E + Fam</u>	\$ 792.00	\$ 150.00	\$ 837.50	\$ 642.00
<u>E + Fam Pooled Prem</u>	\$ 792.00	\$ 300.00	\$ 837.50	\$ 492.00
<u>E + Fam Split Prem</u>	\$ 396.00	\$ 150.00	\$ 418.75	\$ 246.00
TRS-ActiveCare 2 (closed to new enrollees)				
<u>EE only</u>	\$ 506.50	\$ 150.00	\$ 506.50	\$ 356.50
<u>E + Sp</u>	\$ 1,201.00	\$ 150.00	\$ 1,201.00	\$ 1,051.00
<u>E + Ch</u>	\$ 753.50	\$ 150.00	\$ 753.50	\$ 603.50
<u>E + Fam</u>	\$ 1,420.50	\$ 150.00	\$ 1,420.50	\$ 1,270.50
<u>E + Fam Pooled Prem</u>	\$ 1,420.50	\$ 300.00	\$ 1,420.50	\$ 1,120.50
<u>E + Fam Split Prem</u>	\$ 710.25	\$ 150.00	\$ 710.25	\$ 560.25

**BAYLOR SCOTT & WHITE HEALTH PLAN - HMO
2022-2023 HEALTH PLAN PREMIUMS – SEMI-MONTHLY RATES**

Coverage Tier	TRS Premium per check	MISD Contribution per check	Employee Cost	Employee Cost
			per check	per check
			OLD RATES	NEW RATES
<u>EE only</u>	\$ 271.68	\$ 150.00	\$ 271.24	\$ 121.68
<u>E + Sp</u>	\$ 682.46	\$ 150.00	\$ 681.35	\$ 532.46
<u>E + Ch</u>	\$ 436.79	\$ 150.00	\$ 436.08	\$ 286.79
<u>E + Fam</u>	\$ 785.49	\$ 150.00	\$ 784.21	\$ 635.49
<u>E + Fam Pooled Prem</u>	\$ 785.49	\$ 300.00	\$ 784.21	\$ 485.49
<u>E + Fam Split Prem</u>	\$ 392.75	\$ 150.00	\$ 392.11	\$ 242.75