

JANUARY 1 - DECEMBER 31 | 2024

# BENEFIT GUIDE+++



**MT. VERNON**  
COMMUNITY SCHOOL CORPORATION

# WELCOME!

Mt. Vernon Community School Corporation (MVCSC) would not be the success it is today without the dedication of our hard-working employees. We are proud to offer a comprehensive benefits package to support your physical, mental, and financial wellness.

This guide highlights the options available to you as a benefits-eligible employee.

Please take time to review this guide so you can make informed decisions and get the most from your benefits.




Check out the benefits available to you!




## TIPS FOR USING THIS GUIDE

- ✓ View this guide on your computer, tablet, or smartphone. It's designed to let you easily navigate through your benefits!
- ✓ Use the icons at the top of the page to jump to the **Table of Contents**, **Benefit Contacts** and **Glossary**.



- ✓ When you see the **CURSOR ICON**  click or tap for more information.
- ✓ Open the **SEARCH BAR** to type in a key word you want to find:
  - **On your computer:** Type **Ctrl + F**.
  - **On your smartphone:** In the bottom menu, tap the three dots for more options, tap "**Find in page.**" Then, tap on the top search bar to type in your search term.

## TIPS FOR SAVING THIS GUIDE


- ✓ **On your computer:** Save the link as a bookmark on your internet browser.
- ✓ **Add on your smartphone home screen:**
  - On Android, tap the options menu. 
  - On iPhone, tap the share icon. 
  - Select **Add to Home Screen** (you might need to scroll to find it).
  - Give the guide a name you'll remember, then click **Add**.
  - The icon will appear as a Red "A" on your home screen. 



Click on this icon to jump back to this page!



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# COVERING YOU AND YOUR FAMILY

## EMPLOYEES

MVCS is proud to offer a comprehensive benefits package to eligible, full-time employees who work at least 30 hours per week.

## DEPENDENTS

Many of the plans allow you to cover your eligible dependents, which include:

- Legally married spouse
- Dependent children including:
  - Children up to age 26 regardless of student or marital status
  - Disabled children of any age who are (or become) physically or mentally incapable of self-support





# BENEFITS

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# ENROLLMENT

## WHAT CAN I DO ONLINE?

Our online benefits website is available year round for you and your family, and it is great for making changes to your benefits, such as:

- *Submitting a qualifying event such as a Birth of a Child, Marriage or Loss of Other Coverage*
- *Updating your personal information, including a new address.*



FIND INSTRUCTIONS ON THE FOLLOWING PAGE.



# HOW TO \_\_\_\_\_ ENROLL

You will use the Steele Benefits enrollment platform to make New Hire and/or Open Enrollment elections, view your current elections, make life event changes, update family and/or beneficiary information, access benefit materials, and more.

## Looking for one-on-one enrollment help?

Call Steele Benefits at **574-821-6025**.

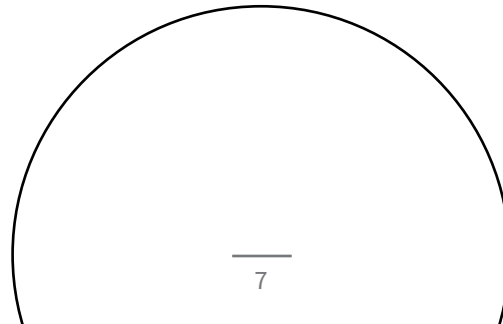


1. Open a web browser and navigate to [aflacatwork.com/enroll](https://aflacatwork.com/enroll).
2. Enter the following information:  
*User name: Full SSN with no spaces or dashes*  
*Pin Number: The Last 4 digits of your SSN + Last 2 of your birth year*
3. Click the Log In Button
4. Click Next to start your enrollment
5. Enter your dependents by selecting the plus(+) sign
6. Follow the prompts to enroll in each benefit and click the Next button to navigate through the screens
7. Once you are enrolled, you will see your confirmation page where you will enter your PIN Number to confirm your elections.
8. Congratulations! You have successfully enrolled!  
You will receive an email copy of your confirmation page

## Required Dependent Information

In order to enroll your dependents in benefits, be sure to have the following information available: Full Name, Date of Birth, Social Security Number and Address (if different than yours).

# HEALTH **BENEFITS**





# MEDICAL PLAN

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# OVERVIEW

MVCSC offers you the choice of three medical plans: A PPO plan and two HDHP/HSA plans. See the following pages for a highlight of each plan option.

## PPO PLAN

The PPO Plan is a traditional medical plan.

- You pay a flat dollar amount (copay) when you need to see a doctor or get a prescription.
- For most other services, you will pay a calendar-year deductible.
- When you meet the calendar year deductible, you and the plan share in expenses through coinsurance.
- When you reach your out-of-pocket maximum, the plan will pay the rest of your covered medical expenses at 100% for the remainder of the year.

## HDHP/HSA PLANS (\$2,500 AND \$5,000)

The HSA plans combine high-deductible health plan (HDHP) medical coverage with a tax-advantaged Health Savings Account (HSA).

- The HDHP protects you from significant health expenses, and the HSA allows you to pay for medical expenses with tax-free dollars.
- You must pay the full cost for your care (including doctor visits and prescriptions) until you meet your deductible.
- MVCSC contributes money to your HSA to help offset your out-of-pocket costs.
- When you reach your deductible and out-of-pocket maximum, the plan pays 100% for covered medical expenses for the remainder of the year.

*Learn more about HSAs on page 13.*





# MEDICAL INSURANCE

## PPO PLAN

### IN-NETWORK

### OUT -OF-NETWORK

### WHAT IS THE MOST I WILL PAY?

Deductible <b>Individual   Family</b>	\$2,500   \$5,000	\$5,000   \$10,000
Out-of-Pocket Maximum <b>Individual   Family</b>	\$5,000   \$10,000	\$10,000   \$20,000
Coinsurance <b>Plan Pays   You Pay</b>	90%   10%	50%   50%

### HOW DOES IT WORK AT THE DOCTOR'S OFFICE?

Preventive Care ✨	Plan pays 100%	Plan pays 50% after deductible
Primary Care Physician	You pay \$45 copay	Plan pays 50% after deductible
Specialist	You pay \$60 copay	Plan pays 50% after deductible
Hospitalization	Plan pays 90% after deductible	Plan pays 50% after deductible

### WHAT IF I NEED EMERGENCY CARE?

Urgent Care	Plan pays 90% after deductible	Plan pays 50% after deductible
Emergency Room	You pay \$200 copay	You pay \$200 copay

### HOW MUCH WILL I PAY FOR PRESCRIPTIONS? (TIER 1 | TIER 2 | TIER 3 | TIER 4)

Retail Prescriptions	You pay \$35   \$65   \$100   \$200	Not covered
Mail-Order Prescriptions	You pay \$70   \$130   \$200   \$400	Not covered

Find your cost for coverage on page 12.



# MEDICAL INSURANCE (CONTINUED)

	HSA PLAN (\$2,500)	
	IN-NETWORK	OUT -OF-NETWORK
<b>WHAT IS THE MOST I WILL PAY?</b>		
Deductible <b>Individual   Family</b>	\$2,500   \$5,000	\$5,000   \$10,000
Out-of-Pocket Maximum <b>Individual   Family</b>	\$5,000   \$10,000	\$10,000   \$20,000
Coinsurance <b>Plan Pays   You Pay</b>	90%   10%	50%   50%
<b>HOW DOES IT WORK AT THE DOCTOR'S OFFICE?</b>		
Preventive Care 🌟	Covered 100%	Plan pays 50% after deductible
Primary Care Physician	Plan pays 90% after deductible	Plan pays 50% after deductible
Specialist	Plan pays 90% after deductible	Plan pays 50% after deductible
Hospitalization	Plan pays 90% after deductible	Plan pays 50% after deductible
<b>WHAT IF I NEED EMERGENCY CARE?</b>		
Urgent Care	Plan pays 90% after deductible	Plan pays 50% after deductible
Emergency Room	Plan pays 90% after deductible	Plan pays 90% after deductible
<b>HOW MUCH WILL I PAY FOR PRESCRIPTIONS? (TIER 1   TIER 2   TIER 3   TIER 4)</b>		
Retail Prescriptions	You pay deductible, then the following copays: \$35   \$65   \$100   \$200	Not covered
Mail-Order Prescriptions	You pay deductible, then the following copays: \$70   \$130   \$200   \$400	Not covered

Find your cost for coverage on page 12.



# MEDICAL INSURANCE (CONTINUED)

	HSA PLAN (\$5,000)	
	IN-NETWORK	OUT-OF-NETWORK
<b>WHAT IS THE MOST I WILL PAY?</b>		
Deductible <b>Individual   Family</b>	\$5,000   \$10,000	\$11,000   \$21,000
Out-of-Pocket Maximum <b>Individual   Family</b>	\$5,000   \$10,000	\$12,000   \$23,000
Coinsurance <b>Plan Pays   You Pay</b>	100%   0%	50%   50%
<b>HOW DOES IT WORK AT THE DOCTOR'S OFFICE?</b>		
Preventive Care 🏠	Plan pays 100%	Plan pays 50% after deductible
Primary Care Physician	Plan pays 100% after deductible	Plan pays 50% after deductible
Specialist	Plan pays 100% after deductible	Plan pays 50% after deductible
Hospitalization	Plan pays 100% after deductible	Plan pays 50% after deductible
<b>WHAT IF I NEED EMERGENCY CARE?</b>		
Urgent Care	Plan pays 100% after deductible	Plan pays 50% after deductible
Emergency Room	Plan pays 100% after deductible	Plan pays 100% after deductible
<b>HOW MUCH WILL I PAY FOR PRESCRIPTIONS? (TIER 1   TIER 2   TIER 3   TIER 4)</b>		
Retail Prescriptions	Plan pays 100% after deductible	Not covered
Mail-Order Prescriptions	Plan pays 100% after deductible	Not covered

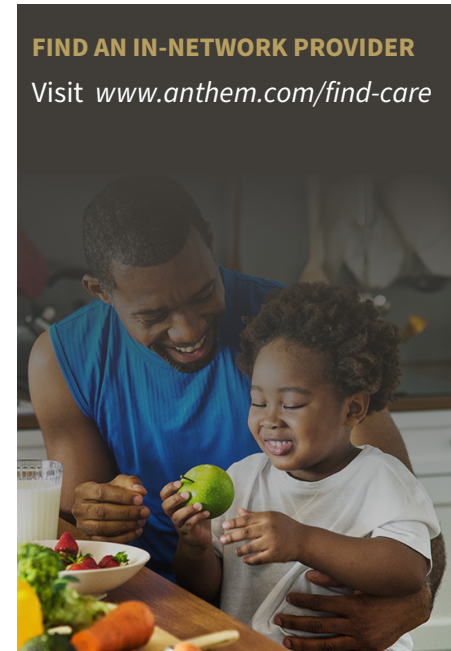
Find your cost for coverage on page 12.

# MEDICAL PLAN RATES

*Your cost per pay period for medical coverage*

<b>PPO PLAN</b>	<b>26 PAY PERIODS</b>	<b>20 PAY PERIODS</b>	<b>MVCSC HSA Contribution*</b>
Employee	\$84.02	\$109.23	Not eligible for an HSA
Employee + Spouse	\$227.00	\$295.10	
Employee + Child(ren)	\$192.95	\$250.84	
Family	\$363.19	\$472.15	
<b>HSA PLAN (\$2,500)</b>	<b>26 PAY PERIODS</b>	<b>20 PAY PERIODS</b>	<b>MVCSC HSA Contribution*</b>
Employee	\$58.02	\$75.43	Up to \$500
Employee + Spouse	\$171.65	\$223.15	Up to \$750
Employee + Child(ren)	\$146.93	\$191.01	Up to \$750
Family	\$272.80	\$354.64	Up to \$1,000
<b>HSA PLAN (\$5,000)</b>	<b>26 PAY PERIODS</b>	<b>20 PAY PERIODS</b>	<b>MVCSC HSA Contribution*</b>
Employee	\$37.30	\$48.49	Up to \$1,000
Employee + Spouse	\$83.22	\$108.19	Up to \$1,500
Employee + Child(ren)	\$71.67	\$93.17	Up to \$1,500
Family	\$131.52	\$170.98	Up to \$2,000

\*When you contribute to your Health Savings Account (HSA), MVCSC will match your contribution up to the amounts listed above. See the following page for more details.





# HEALTH SAVINGS ACCOUNT

By enrolling in the HDHP medical plan, you get access to a Health Savings Account (HSA), which can be used to pay for qualified healthcare expenses.

## ELIGIBILITY

Anyone who fits **all** of the following conditions may contribute to an HSA:

- ✓ **IS** enrolled in either HDHP medical plan.
- x **IS NOT** enrolled in Medicare, Tri-Care, Medicaid, or any other medical plan that has copays.<sup>1</sup>
- x **IS NOT** eligible to be claimed as a dependent on someone else’s tax return.

## HSA CONTRIBUTIONS

You can contribute up to the IRS annual maximum, which is based on your age and enrollment in the HSA medical plan. (This limit includes MVCSC’s contribution.)

2024 IRS CONTRIBUTION LIMIT	UNDER AGE 55	AGE 55+
Individual	\$4,150	\$5,150
Family (one or more dependents)	\$8,300	\$9,300

### MVCSC contributes money to help you build savings!

MCCSC will match your contributions up to the following limits:

2024 EMPLOYER CONTRIBUTIONS	HSA (\$2,500)	HSA (\$5,000)
Individual	\$500	\$1,000
Individual + Spouse & Individual + Child(ren)	\$750	\$1,500
Family (one or more dependents)	\$1,000	\$2,000

<sup>1</sup> **Medicare & your HSA:** Because enrollment in Part A is backdated by six months, you should stop your HSA contributions six months prior to Part A enrollment to avoid penalties. Consult with your tax advisor for guidance.

## 3 REASONS TO LOVE YOUR HSA

### 1. GET FREE MONEY!

The money MVCSC contributes is yours to keep.

### 2. TRIPLE TAX SAVINGS<sup>2</sup>

- Tax deductions when you contribute to your account
- Tax-free withdrawals to pay for qualified medical expenses
- Tax-free earnings

### 3. IT’S FLEXIBLE

You can use the money in your HSA for eligible health expenses, or you can save it and let it grow. Your HSA savings roll over year after year, and you can even use your HSA as retirement income at age 65 without penalty (normal income tax still applies).

<sup>2</sup> Please note that state taxes still apply in some states, including California and New Jersey. Consult with your tax advisor for questions.



# SAVE MONEY ON PRESCRIPTIONS

TrueScripts provides you with personalized support to help you manage and reduce your prescription drug costs.

You can contact TrueScripts whenever you have questions or need help navigating your pharmacy benefits. If you find that you're paying a lot for your medications, they can often find ways for you to save!

## NEW FOR 2024!

### PRICEPROTECTOR+, POWERED BY GOODRX

You might have heard of—or even used—the GoodRx discount program in the past. GoodRx offers coupons to help you save on your prescriptions, but in the past it wasn't compatible with your medical insurance. Now TrueScripts makes it easier for you to get the greatest savings possible while getting credit toward your deductible and out-of-pocket maximum.

With PriceProtector+, TrueScripts will automatically apply GoodRx discount card pricing if it is lower than the cost through your medical plan. No shopping around, no forms to send in, no headaches!

Learn more about PriceProtector+. 

## ACCESS PHARMACY RESOURCES ON YOUR TRUESCRIPTS MEMBER PORTAL

Register online at [memberportal.truescripts.com](https://memberportal.truescripts.com) to manage your pharmacy benefits.

TrueScripts member portal features:

- Recent claim history
- Network pharmacy locator
- Drug price lookup—check real-time pricing on medication!
- Live chat available Mon-Fri, 8 a.m. to 6 p.m. ET

## QUESTIONS?

Call 844-257-1955



# VIRTUAL VISITS

*(included with the Anthem medical plans)*

## AN AFFORDABLE OPTION FOR QUALITY MEDICAL CARE

Visit with a doctor any day, any time, from your smartphone, computer or tablet. Telehealth is an easy and convenient option when you need care for yourself or your child in the middle of the night or while traveling.



## USE TELEHEALTH FOR:

- + Cold & Flu symptoms
- + Allergies
- + Pink eye
- + Respiratory Infection
- + Sinus + skin problems
- + And more!

## REGISTER TODAY!

1. Visit [livehealthonline.com](https://livehealthonline.com) or download the app.



2. You will be prompted to register with basic information.
3. When you are ready to see a doctor, click “See a Medical Doctor Now” in the app.



# THE IMPORTANCE OF PREVENTIVE CARE

## GET THE MOST OUT OF YOUR MEDICAL PLAN

Your medical plan covers in-network preventive care services at no cost to you! Preventive care can help keep you healthy and identify minor issues early, when they're easier—and less costly—to treat.

### ✓ WHAT IS PREVENTIVE CARE?

Preventive care includes a range of services to help keep you healthy. While regular (diagnostic) medical care focuses on treating illness, preventive care aims to keep you from getting sick in the first place.

### ✗ WHAT IS NOT PREVENTIVE CARE?

If you see a doctor because you have symptoms or have been diagnosed with an illness, the services you receive are not preventive.

Your medical plan still provides coverage for these services, but they are not covered at 100%.

Note: Your medical plan may charge a fee if you receive services from an out-of-network provider or if the preventive service is not the primary purpose of your office visit.

### SEE WHAT TESTS AND SCREENINGS ARE RECOMMENDED FOR YOUR AGE!

- Use the interactive guide at [anthem.com/preventive-care](https://www.anthem.com/preventive-care) .
- Download a *print-friendly list of covered screenings* .
- Call Anthem to confirm which preventive services are covered for you.





# DISCOUNTS

## for Anthem

# MEMBERS

Check out these discounts you get just for being enrolled in one of our Anthem medical plans!



### GET A SECOND OPINION

If you have a complex medical condition, you may want to learn as much as possible about your diagnosis and treatment options. Through an exclusive offering for Anthem members, you can now receive a *virtual Complimentary Clinical Review* from top-ranked specialists at Cleveland Clinic. This second opinion is available to you at no extra cost.

[Click here to learn more](#)

### TAKE CONTROL OF YOUR HEALTH

ConditionCare, a no-cost health and wellness program, provides:

- 24/7, toll-free phone access to nurses who can answer health questions.
- Support from nurse care managers, dietitians and other health care professionals to help you reach your health goals.
- Educational guides, electronic newsletters and tools to help you learn more about your condition(s).

### LEARN TO LIVE

Your emotional health is an important part of your overall health. With Emotional Well-being Resources, administered by Learn to Live, you can receive support to help you and your household live your happiest, healthiest lives.

Built on the proven principles of Cognitive Behavioral Therapy (CBT), our digital tools are available anywhere, anytime. They can help you identify thoughts and behavior patterns that affect your emotional well-being – and work through them. You'll learn effective ways to manage stress, depression, anxiety, substance use, and sleep issues.

### PEACE OF MIND

What if you had a nurse in your back pocket – someone knowledgeable you could talk to any time of the day or night, 365 days a year?

Anthem offers 24/7 NurseLine, a resource you call when life throws you a curve ball.

While 24/7 NurseLine may be your first line of defense for the unexpected, it's also part of Anthem's whole-health approach. The registered nurses can help you with your baby's fever, give you allergy relief tips and advise where to go for care.

Have health questions? Call the number on the back of your ID card.



# PREPARING FOR PARENTHOOD

## *Future Moms can help — any day, any time.*

Do you ever wish you had a go-to source for all of your questions about pregnancy? Now, you do. Future Moms is a program that can answer your questions, help you make good choices and follow your health care provider's plan of care.

Sign up as soon as you know you're pregnant! You'll get:

- ✓ **A toll-free number** so you can talk to a nurse coach 24/7 about your pregnancy. A nurse may also call you from time to time to see how you're doing.
- ✓ **The Mayo Clinic Guide to a Healthy Pregnancy** book that shows changes you can expect for you and your baby during the next nine months.
- ✓ **A screening** to check your health risk for depression or early delivery.
- ✓ **Other useful tools** to help you, your doctor and your Future Moms nurse keep track of your pregnancy and help you make healthier choices.
- ✓ **Free phone calls** with pharmacists, nutritionists and other specialists, if needed.
- ✓ **A booklet with tips** to help keep you and your new baby safe and well.
- ✓ **Other helpful information** on labor and delivery, including options and how to prepare.

**IT'S EASY TO JOIN, AND THERE'S  
NO EXTRA COST TO YOU!**

Call | 800-828-5891

### ***Are you an expecting dad?***

Ask your baby's mom to sign up for Future Moms! If she's covered by your health plan, she can join Future Moms as soon as she knows she's pregnant.





# QUICK ACCESS TO YOUR HEALTHCARE

## FROM YOUR COMPUTER

1. Go to [anthem.com/register](https://www.anthem.com/register)
2. Provide the information requested
3. Create a username and password
4. Set your email preferences
5. Follow the prompts to complete your registration

## FROM YOUR MOBILE DEVICE

1. Go to [sydneyhealth.com](https://www.sydneyhealth.com) and download the free Sydney mobile app.
2. Select *Register*
3. Confirm your identity
4. Create a username and password
5. Confirm your email preferences
6. Follow the prompts to complete your registration

### NEED HELP SIGNING UP?

Call 866-755-2680





# TIPS TO SAVE MONEY



## SAVE THE EMERGENCY ROOM FOR TRUE EMERGENCIES

Only visit the emergency room if you have a life- or limb-threatening emergency. If you need care when your doctor's office is closed, check your area for an urgent care location or use virtual care instead.



## USE IN-NETWORK PROVIDERS

Your medical, dental and vision costs increase greatly when you visit a provider who is not in your plan's network. Always confirm your provider is in your network, especially when being referred to another provider or facility for services.



## GET YOUR ANNUAL CHECKUP

You and your dependents should visit the doctor annually for health screenings and tests. Your plan covers preventive services at 100%.



## CHOOSE GENERIC PRESCRIPTIONS

Ask your doctor or pharmacist to give you generic prescriptions instead of brand-name. Generic drugs are cheaper and are just as effective.



## SHOP AROUND TO FIND THE BEST PRESCRIPTION PRICES

It can pay to be a savvy shopper. Look up your prescription on your *TrueScripts member portal* to find the lowest cost pharmacy.

**Good news!** TrueScripts now automatically applies GoodRx discounted pricing to your generic prescriptions. The amounts you pay will be automatically credited to your deductible and out-of-pocket maximum where appropriate. *See page 14 to learn more.*



## TAKE ADVANTAGE OF THE MAIL-ORDER PHARMACY PROGRAM

Save time and money by using the mail-order prescription drug program for your maintenance prescriptions. Check with your insurance company for more details.



# HEALTH AND WELLNESS CENTER

Your MVCSC Employee Health Clinic is your first stop for a wide range of health services.

MVCSC employees and covered dependents participating in our medical plan can use the center for:

- ✓ Primary health care services, including sick visits
- ✓ Care for chronic illness
- ✓ Free medicines prescribed by the clinic providers and available at the clinic
- ✓ Free lab tests when done at the clinic
- ✓ Orders for bloodwork needed by other providers, performed at no charge
- ✓ Health education

**LEARN MORE!**

**LOCATIONS & HOURS**

**Mt. Vernon Employee Clinic - Fortville**  
 1776 W. State Rd. 234, #200, Fortville, IN 46040

- Monday, Tuesday & Thursday: 7:00 a.m. to 4:30 p.m.
- Wednesday: CLOSED
- Friday: 8:00 a.m. to 11:30 a.m.

**Hancock Family Medicine - McCordsville**  
 8535 N. Clearview Drive, #200, McCordsville, IN 46055

- Wednesday: 1:00 p.m. to 4:00 p.m.

**Hancock Well-Being At Work Clinic - Greenfield**  
 1515 North State Street, Greenfield, IN 46140

- Monday, Wednesday & Friday: 2:00 p.m. to 5:00 p.m.
- Tuesday & Thursday: 7:30 a.m. to 9:30 a.m.

**Hancock Family Medicine - New Palestine**  
 4055 Roy Wilson Way, Suite 110, New Palestine, IN 46163

- Mon and Wed: 2:00 p.m. to 5:00 p.m.
- Tuesday, Thursday & Friday: 7:00 a.m. to 9:00 a.m.



# DENTAL BENEFITS

	PPO PLAN	PREMIER PLAN	NON-PARTICIPATING PLAN
<b>Annual Deductible</b>	\$25 per person to a maximum of \$75 per family per benefit year. Does not apply to diagnostic & preventive services, emergency palliative treatment, brush biopsy, & orthodontic services		
<b>Annual Plan Max</b>	\$1,000 per person per benefit year on all services except orthodontics		
<b>Diagnostic &amp; Preventive</b>	100%	100%	100%
<b>Basic Services</b> Radiographs: X-rays, Minor Restorative Services - fillings and crown repair, Endodontic Services: root canals, Periodontal Services: to treat gum disease, Oral Surgery Services: extractions & dental surgery, Major Restorative Services - crowns, Other basic services: misc. services, Relines and repairs to bridges, implants and dentures	50%	50%	50%
<b>Major Services</b> Prosthodontic Services: bridges, implants and dentures	50%	50%	50%
<b>Orthodontic Services</b> <i>Adult and Child</i> Orthodontic Services - Braces Orthodontic Max	50%	50%	50%
	\$500	\$500	\$500

This is a summary; please see Plan Summary for full details. Employee annual dental premium rate for Single or Family coverage is \$1.00.

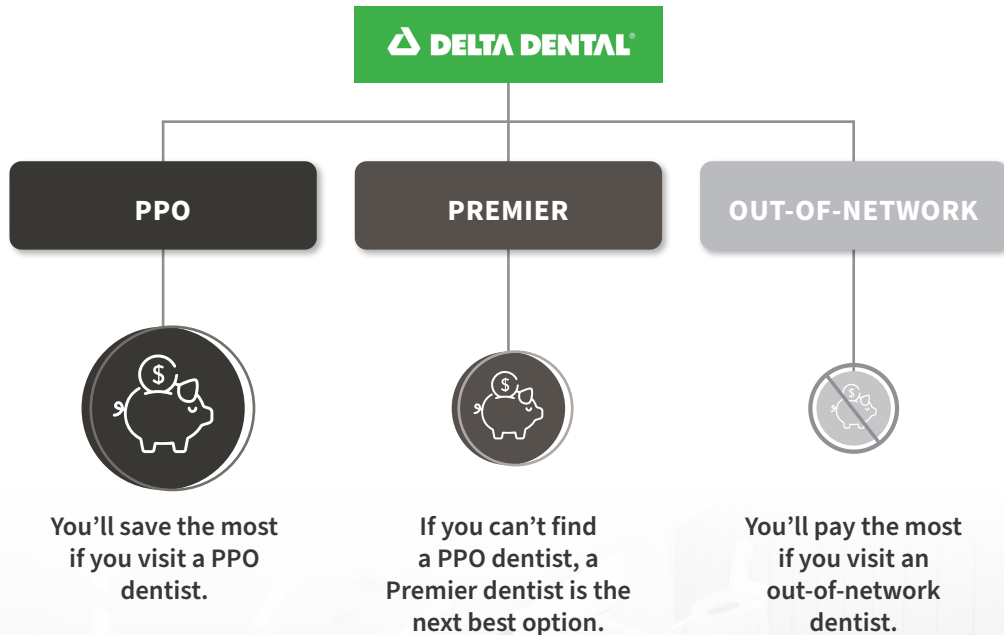


## GET TO KNOW YOUR DENTAL NETWORKS

Your dental plan offers three levels of dental providers:

- Delta Dental PPO
- Delta Dental Premier
- Out-of-network

For the greatest benefits and discounts, choose a dentist in the PPO network.



*The PPO network is Delta Dental's lowest-cost network. It includes dentists who have agreed to the largest reduction in their fees.*

*The Premier network is Delta Dental's largest network. It offers discounted fees, but you'd pay less at a PPO dentist.*

*Out-of-Network dentists have not contracted with Delta Dental for a negotiated rate, so you don't get any discounts.*

*Plus, if you use an out-of-network dentist, and they charge more than what Delta Dental allows, the dentist can send you the bill for the additional amount (this is called "**balance billing**").*



# VISION BENEFITS

	VSP CHOICE NETWORK		
	DESCRIPTION	IN-NETWORK	OUT-OF-NETWORK
<b>BENEFITS</b>			
WellVision Exam <i>Every calendar year</i>	Focuses on your eyes and overall wellness	\$10 copay	\$42 allowance
Materials Copay	A single payment that applies to the purchase of lenses and frames	\$10	\$10
Frames <i>Every 24 months</i>	Wide selection of frames plus In-Network savings on the amount over your allowance	\$140 allowance and 20% discount on remaining	\$45 allowance
Lenses <i>Every calendar year</i>	Single vision, lined bifocal, and lined trifocal lenses Polycarbonate lenses for dependent children	\$0 copay	Single: \$40 allowance Bifocal: \$60 allowance Trifocal: \$80 allowance
Contacts Instead of Glasses <i>Every calendar year</i>	Elective Conventional coverage: Elective Disposable coverage: Non-Elective:	\$120 allowance \$120 allowance Covered in full	\$105 allowance \$105 allowance \$210 allowance
Scratch Resistant Coating	-	\$0 copay	N/A
Primary Eye Care Program <i>Every calendar year</i>	VSP puts members first and guarantees your satisfaction. As the only national not-for-profit vision care company, they reinvest in the things you value most—like protecting your eyes with medical and urgent eye care services available through the VSP Primary EyeCare Plan.	\$20	N/A





# VISION DISCOUNTS

## EXTRA SAVINGS

### GLASSES AND SUNGLASSES

Extra \$50 to spend on featured frame brands. Go to [vsp.com/specialoffers](http://vsp.com/specialoffers) for details. 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam.

### RETINAL SCREENING

No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam.

### LASER VISION CORRECTION

Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities.

### LIGHTCARE ENHANCEMENT

The LightCare Enhancement allows those who do not require a prescription to use your frame and lens benefit towards non-prescription sunglasses or non-prescription blue-light filtering glasses, Pre-made and ready-to-wear glasses from the doctor's office, or [eyeconic.com](http://eyeconic.com).



## ENROLL IN VSP

Register at [www.vsp.com](http://www.vsp.com). Once your plan is effective, review your benefit information. At your appointment, tell them you have VSP. There's no ID card necessary. If you would like a card as a reference, you can print one on [vsp.com](http://vsp.com).

# FINANCIAL **BENEFITS**





# LIFE INSURANCE

## EMPLOYER-PAID LIFE AND AD&D

In order to assist in providing financial security for an employee's family in the event of death or dismemberment, Mt. Vernon provides Basic Term Life and Accidental Death & Dismemberment coverage at no cost to eligible employees through New York Life.

### COVERAGE AMOUNT

Based on your employment classification. You will find your death benefit on the Steele Benefits system. Human Resources can provide this information as well.

### AGE REDUCTION

Benefits reduce 67% at age 70 and another 50% at age 75



You must designate a beneficiary for Basic Life and AD&D and Voluntary Life and AD&D. You have the right to change the beneficiary at any time by written or electronic notice.



# LIFE INSURANCE (CONTINUED)



## SUPPLEMENTAL LIFE AND AD&D (EMPLOYEE-PAID)

Supplemental life and AD&D insurance provides an extra layer of financial security for your family.

You can give your loved ones greater peace of mind in the face of unforeseen circumstances by purchasing voluntary coverage at competitive group rates.

### LIFE AND AD&D COVERAGE OPTIONS

<b>EMPLOYEE BENEFIT</b>	\$10,000 increments up to a maximum of \$500,000 <b>Guarantee Issue:</b> \$200,000
<b>SPOUSE BENEFIT</b>	\$5,000 increments up to a maximum of \$250,000 (not to exceed 50% of employee's election) <b>Guarantee Issue:</b> \$25,000
<b>CHILD BENEFIT</b>	Birth to 6 months: \$500 6 months to 26 years: \$10,000 <b>Guarantee Issue:</b> \$10,000

Note: Your cost for voluntary life and AD&D varies by age and coverage amount. You can see your cost when you enroll online.

### THINGS TO KNOW!

A “**guarantee issue**” amount is the dollar amount of coverage you can be approved for without completing a health questionnaire—also commonly referred to as Evidence of Insurability (EOI). Guarantee issue amounts typically only apply during your initial enrollment period when hired.



### NEW EMPLOYEES: DON'T MISS OUT ON YOUR GUARANTEE ISSUE OPPORTUNITY!

If you wish to enroll in supplemental life coverage after your initial enrollment period, you will be required to complete the EOI health questionnaire.



# DISABILITY BENEFITS

Disability benefits replace a portion of your income if you're unable to work due to a non-work-related injury or sickness.

Long-Term Disability through New York Life provides income protection against a long-term injury or sickness. This benefit is fully paid by MVCSC, at no cost to you!

## LONG-TERM DISABILITY BENEFIT (NO COST TO YOU!)

<b>Benefit amount</b>	66.7% Monthly Earnings
<b>When are benefits payable?</b>	After 90 days of disability due to an accident or illness
<b>Maximum Benefit</b>	Based on employment class
<b>Maximum benefit duration</b>	Until you recover or up to your Social Security Normal Retirement Age (SSNRA)

**Pre-existing condition exclusions:** These policies will not cover conditions that were existing prior to your coverage date. Please review your plan summary for full details.

## THE IMPORTANCE OF DISABILITY INSURANCE

Chances of missing work due to illness, injury, or pregnancy are greater than most realize.



**people will experience a disabling condition in their working years.\***

**If you couldn't work and earn an income, how would you pay your bills?** Disability insurance can help!

*\*Source: Council for Disability Awareness Working years defined as age 20 and retirement age.*



# FREE FINANCIAL COACHING

Your Money Line provides expert guidance and tools to help you on your unique financial journey.

Their accredited guides help you focus your efforts on financial stability and retirement ability. They'll help you create a path toward the financial life you want.



CHECK OUT THE ONLINE DASHBOARD  
FOR TOOLS, COURSES AND MORE!



## TOOLS

- Net Worth Calculator
- Power Percentage
- Ideal Budget
- Debt Reduction Tool
- Debt Momentum Chart
- PSLF Tool
- College Aid Coach
- Mock Retirement

## COURSES

- Stability Academy
- Live Events
- Budgeting
- Guide to Buying a House
- Having a Baby
- How to Pay Off Student Loans
- How to Pay for College
- Your Money Life Credit
- Investing in your 20's, 30's, 40's, 50's
- HSAs

## EXPERT GUIDANCE

- On-Demand Help
- Help with Bills
- Accountability Coaching
- Availability 12 hours/day, 5 days/week
- Accessible via chat, email, or phone

**YOUR MONEY LINE IS  
FREE TO YOU!**

**Start your journey to financial  
stability today by registering for  
your free account.**

[yourmoneyline.com/mvvcsc](https://yourmoneyline.com/mvvcsc)

*Have questions?*

**Call | 833-890-4077**

**Email | [answers@yourmoneyline.com](mailto:answers@yourmoneyline.com)**



# SUPPLEMENTAL CRITICAL CARE INSURANCE

Critical illness benefits offer money to help you focus on recovery in the event of serious illness. Aflac’s critical illness pays you a lump sum cash benefit for you to use however you wish (deductible, car payments, utilities, food, childcare, rent or mortgage, etc.)

### HEART CATEGORY

- Heart Attack (100%)
- Heart Transplant (100%)
- Stroke (100%)
- Arteriosclerosis (10%)
- Aneurysm (10%)

### CANCER CATEGORY

- Invasive cancer (100%)
- Cancer in Situ (25%)
- Benign brain tumor (25%)
- Bone marrow transplant (100%)

### ORGAN CATEGORY

- End stage renal failure (100%)
- Major organ transplant (excluding heart) (100%)
- Acute respiratory distress syndrome (25%)

Benefit features include **coverage for the employee, their spouse and their children** and the ability to customize the benefit volume. Employees and spouses are covered for \$20,000 and their children for \$5,000-\$10,000.

The benefit also features a **\$50 annual wellness benefit** for insured employees and their spouses. The benefit may payout multiple times for occurrences in separate categories. Reference the benefit summary for specific details.

**Pre-existing limitations do apply** for new applicants. Contact a Steele Benefits representative at 463-999-2957 to discuss how pre-existing condition limitations could apply in your situation.



# SUPPLEMENTAL

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# ACCIDENT INSURANCE

Accident insurance helps pay for unexpected expenses due to accidents that occur every day—from the soccer field to the ski slopes and the highway in between. This insurance provides benefits due to covered accidents for initial care, injuries and follow-up care.

## PLAN FEATURES

- Cash benefits are paid directly to the employee
- Great supplement for those with a high medical insurance deductible and active families
- Benefits can be used to offset a medical insurance deductible or used for non-medical related expenses
- No limitations for pre-existing conditions
- You do not need to participate in the school's medical to purchase this plan

## HIGHLIGHTS

- Hospital admission due to a covered accident: \$1,000
- Hospital confinement due to a covered accident (per day; limited to 365 days): \$200
- Hospital intensive care due to a covered accident (per day; limited to 30 days): \$400
- Medical fees for each covered accident (for X-rays and doctor services): \$125
- Accidental death: \$50,000
- Accidental common-carrier death (plane, train, boat or ship): \$100,000
- Single dismemberment: \$12,500
- Major injuries (fractures and dislocations): See benefit schedule



# WHOLE LIFE INSURANCE

Whole life insurance offers protection beyond your working years. It combines guaranteed premiums, death benefits, and cash accumulation. With whole life insurance you choose the amount of insurance or the amount of premium that best suits your need and budget.

## CATASTROPHIC LOSS RIDER OPTION

The catastrophic loss rider provides you and/or your spouse additional financial protection should you lose your ability to care for yourselves.

- Provides a monthly benefit if you experience a loss of two or more daily living activities (contingence, bathing, transferring, dressing, toileting, and eating)
- Does not reduce the face amount of the life insurance policy
- No requirement for hospital confinement, skilled nursing, or home health care
- No additional medical questions. Follows the same underwriting as the whole life coverage

## DID YOU KNOW?

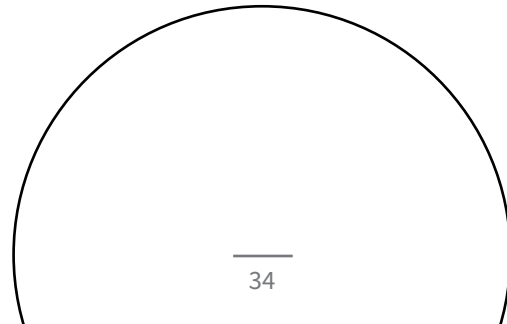
- ***If you have a family***, whole life insurance enables you to build a cash reserve for yourself, your spouse, your children and grandchildren for less than one hour's pay per week.
- ***If you're single with no dependents***, the flexibility of the whole life plan allows you to expand your coverage to meet future responsibilities.
- ***If you are nearing retirement***, your whole life plan can be continued after you retire at the same premium.

**Speak with a Boston Mutual representative to talk about what is best for you.**

**800-669-2668** | [bostonmutual.com](http://bostonmutual.com)



# ADDITIONAL **BENEFITS**





# EMPLOYEE ASSISTANCE PROGRAM

## MENTAL HEALTH COUNSELING, SUPPORT & REFERRALS FOR A WELL-BALANCED LIFE

Problems are just a part of everyday life. You and your household members have access to IU Health Employee Assistance Program (EAP) to help with the everyday challenges of life that may affect your health, family life and desire to excel at work.

IU Health's EAP provides resources to assist with personal and job-related issues. You and your eligible family members can access eight face-to-face, confidential sessions with a counselor, financial planner, or attorney each calendar year.

### FOR 24/7 ASSISTANCE:

Call 317-962-8001 or 800-745-4838  
ext. 2 from 8 a.m. – 4:30 p.m. (M-F)



### AN EAP CAN ADDRESS THE FOLLOWING ISSUES:



**SUBSTANCE ABUSE & ADDICTION**



**LEGAL ASSISTANCE**



**FAMILY & RELATIONSHIPS**



**FINANCIAL WELLNESS**



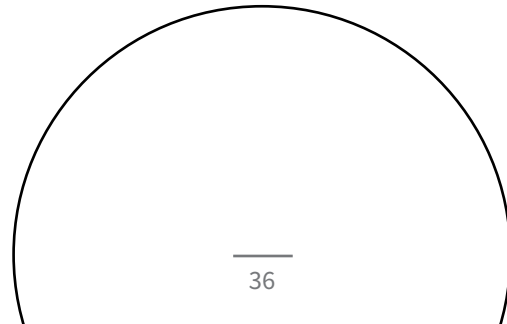
**EMOTIONAL WELL-BEING**



**WORK & CAREER**



# BENEFIT **RESOURCES**





# BENEFIT CONTACTS



BENEFIT	PROVIDER	PHONE	WEBSITE / EMAIL
Medical Benefits	Anthem	800-295-4119	<i>anthem.com</i>
Pharmacy Benefits	TrueScripts	844-257-1955	<i>truescripts.com</i>
Virtual Visits	LiveHealth Online	888-548-3432	<i>livehealthonline.com</i>
MVCSC Wellness Clinic	Hancock Health	317-462-5544	<i>hancockhealth.org</i>
Dental Benefits	Delta Dental of Indiana	800-524-0149	<i>DeltaDentalIN.com</i>
Vision Benefits	VSP	800-877-7195	<i>vsp.com</i>
Health Saving Account Banking Options	Financial Center	Jessie Lewis (Fin. Center): 317-296-1453	<i>jlewis@fcfcu.com</i>
	GBC Bank	Sara Duncan (GBC): 317-462-1431	<i>sduncan@gbcbank.com</i>
	Indiana Members Credit Union	Abigail Cassady (IMCU): 317-554-2981	<i>ACassady@imcu.com</i>
Term Life and AD&D Insurance	New York Life	800-225-5695	<i>newyorklife.com</i>
Disability Insurance	New York Life	800-225-5695	<i>newyorklife.com</i>
Voluntary Critical Illness Insurance Voluntary Accident Insurance	Aflac	800-433-3036	<i>aflacgroupinsurance.com</i>
Voluntary Whole Life Insurance	Boston Mutual	800-669-2668	<i>bostonmutual.com</i>
Employee Assistance Program	IU Health	317-962-8001 or 800-745-4838, ext. 2	

**For additional support, contact MVCSC Human Resources.**

Denise Cooley-Goolsby: *denise.cooley@mvcsc.k12.in.us*, 317-486-3100 ext. 5111

Courtney Bell: *courtney.bell@mvcsc.k12.in.us*, 317-485-3100 ext. 5141

*For help with online benefits enrollment, please contact Denise or Courtney.*



# WHAT DOES THAT WORD EVEN MEAN?

## **BALANCE BILLING**

When you are billed for the difference between the provider's actual charge and the amount reimbursed under the medical, dental or vision plan. This occurs when you go outside of the preferred provider network. Balance billing does not apply toward your out-of-pocket maximum.

## **COINSURANCE**

The percentage of the cost you pay for covered services after you meet your deductible.

## **COPAYMENTS (ALSO CALLED COPAYS)**

A flat fee you pay for a covered healthcare service. You will typically pay your copay at the time of service, and then the plan will pay any remaining amount.

## **DEDUCTIBLE**

The amount you are required to pay each year before certain benefits are paid for by the plan. Once you meet the deductible amount, expenses are covered by the plan based on the coinsurance percentage. The deductible resets on January 1 each year.

## **EXPLANATION OF BENEFITS (EOB)**

A packet, usually mailed to you, that explains how your claim was processed by the insurance company. The EOB details what portion of the claim was paid by the insurance company and what portion is your responsibility.

## **NETWORK**

The doctors, hospitals, and other healthcare providers your insurance company has contracted with to provide services at discounted rates. You will pay less when you use in-network providers. Some plans will not cover the care you get outside of the network.

## **OUT-OF-POCKET MAXIMUM (OOPM)**

The most you pay in a calendar year for covered services. If you reach the OOPM, the plan pays 100% of covered expenses for the rest of the plan year.

## **PLAN YEAR**

The plan year refers to Jan. 1, 2024, through Dec. 31, 2024.

## **USUAL, CUSTOMARY, AND REASONABLE (UCR) CHARGES**

Healthcare charges determined by your health insurance provider and based on the range of fees charged by doctors with comparable training and experience for the same or similar service in your area. When you receive in-network care, UCR charges do not apply. You are responsible for amounts over UCR for out-of-network care.



**MT. VERNON**  
COMMUNITY SCHOOL CORPORATION

*The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this Guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the Guide and the actual plan documents, the actual plan documents will prevail. All information is confidential pursuant to the Health Insurance Portability and Accountability Act of 1996.*

*Back to beginning.*