

BENEFITS BULLETIN



Annual Benefits Open Enrollment Period

JUNE 2022

ANNUAL ENROLLMENT PERIOD

August 1 – August 12, 2022

The CFISD Annual Enrollment Period opens Monday, August 1st and ends Friday, August 12, 2022. This is the **one time** per year when you can enroll, change, or cancel your benefits **without a life event**. Do not miss this opportunity. All new enrollments and changes made during this Enrollment Period will be effective September 1, 2022, or the first of the month following insurance company approval (life insurance, cancer & specified disease), whichever is later. The First Financial Benefit Online Enrollment System will be available to all eligible employees via the Internet 24 hours a day, 7 days a week, during the enrollment period. While this enrollment is considered passive, meaning your coverage will roll forward to the new benefit year if you do nothing, we encourage you to log on to the system and confirm your benefit coverage and life insurance beneficiaries.

FIRST FINANCIAL BENEFIT ONLINE ENROLLMENT SYSTEM

This is our seventh year using the First Financial Benefit Online Enrollment System. This year we have made it simpler to log into the benefit system. We will now have a Single-Sign On via our district website MY.CFISD.NET. This will allow employees to make changes without having to remember yet another password or change it every summer during open enrollment.

To enroll, make changes or cancel your coverage:

Go to: <http://www.cfishd.net>

Click: Staff

Click: Staff Portal

Click: Employee Resources Folder

Click: Benefit Solver Icon

You can also log in by going to: <http://my.cfishd.net> and clicking the Employee Resources Folder and then the Benefit Solver Icon.

For Technical Assistance with Benefit Solver

Contact First Financial Benefits Online Enrollment System Customer Service at (855) 523-8422 Monday – Friday from 8:00 a.m. – 5:00 p.m.

WHAT'S NEW FOR 2022-23 BENEFIT PLAN YEAR?

- We are pleased to announce there will **not be any increase of premiums** to any of our medical plans this plan year!!!! TRS-ActiveCare went to a regional rating setup, and our region, Region 4, medical services are -1% lower than other parts of Texas. There was also COVID funds provided to TRS-ActiveCare to stabilize all the plans this year.
- TRS-Active Care HD, Primary, Primary+ and the Scott & White HMO Plan all will have a decrease in premium for this plan year. AC 2 rates will remain the same. HD decreased on average 8.8% across tiers; Primary decreased on average 9.2% across tiers, Primary+ decreased on average 13.8% across tiers, and Scott & White decreased on average 4%.
- We are now offering an Employee Assistance Program (EAP) to assist our district Employees. Our Life Insurance Carrier Voya works with ComPsych Corporation to administer this benefit. Offerings will include emotional well being, Family Source, LegalConnect, and FinancialConnect.

KEY CHANGES FOR 2022-2023

TRS-ActiveCare:

- Digital Mental Health powered by Learn to Live
- Reduced Cancer Screening Ages. Reduced from 40 to now 35 for breast cancer and from 50 to 45 for colorectal cancer.

Primary, Primary+, ActiveCare 2

- PrudentRx- New drug benefit where participants pay \$0 for eligible specialty drugs. You must enroll.
- The price of most insulins is now capped. There is a \$25 copay for a 31-day supply or a \$75 copay for a 61–90-day supply.
- Member Rewards has been expanded to include 119 new procedures.
- Teladoc increased from \$0 to \$12 for virtual health.

HD Plan:

- Now eligible for Member Rewards
- Individual/Family Maximum Out of Pocket \$7,050/\$14,100
- Teladoc increased from \$30 to \$42 for virtual health.

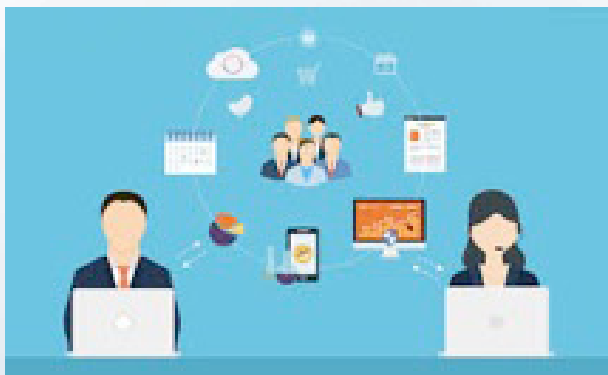
CY-FAIR ISD OFFERS MEDICAL INSURANCE TO ELIGIBLE SUBS, TEMPS, AND PART-TIME EMPLOYEES AND TO ALL FULL-TIME EMPLOYEES

All full-time employees, regardless of number of hours worked, and all substitute, temporary, seasonal, and part-time Cypress-Fairbanks ISD employees working 10 or more hours per week are eligible to enroll in the 2022-2023 TRS-ActiveCare Health Insurance plans during the up-coming open enrollment period. Substitutes and temporary employees can enroll by submitting an enrollment form to the insurance office by the end of the open enrollment period. Substitutes and temporary workers should contact the insurance department for the medical enrollment form. TRS retirees are prohibited from enrolling per TRS regulations.

REQUIRED: EMPLOYEES CHOOSING NOT TO ENROLL IN TRS-ACTIVE CARE MUST “WAIVE” (DECLINE) COVERAGE EVERY YEAR

In compliance with Affordable Care Act regulations, all CFISD employees eligible for medical insurance are required to enroll in one of the TRS-ActiveCare health plans or waive (decline) the coverage in the First Financial Online Enrollment System. The waiver must be submitted each year even if the coverage was waived previously.

GET ANSWERS TO YOUR QUESTIONS AND OBTAIN ENROLLMENT ASSISTANCE



The Insurance Department will post a video presentation of the benefits along with a Power Point slide. Your Benefit Station and the reference center on the benefit system also have a wealth of detailed information.

You may contact the Insurance Department, Benefit Agents, or Blue Cross Blue Shield for any questions you may have. All contact information is on page 10 of this bulletin.

USEFUL INFORMATION TO ENROLL ONLINE:

Your social security number, the dates of birth and social security numbers of all eligible dependents you plan to enroll for coverage, the primary care physicians' names and identification numbers, and the names and contact information for the beneficiaries you name for your life insurance benefits.

ENROLLMENT DEADLINE

All new enrollments, changes and cancellations must be made no later than **Friday, August 12, 2022**. There will be no exceptions to this hard deadline. The Evidence of Insurability form for Cancer and Specified Disease policy application **MUST BE MAILED OR FAXED** to the appropriate underwriting office no later than **Tuesday, August 31, 2022**. Please review your **September 15, 2022 paycheck to ensure all deductions are correct**.

VISIT THE INSURANCE DEPT WEBSITE

www.cfisd.net

Staff / HR / Insurance / Your Benefits Station

Go to - “Your Benefit Station” website for plan designs, premium rates, agent contact information, and links to insurance companies and their provider networks. Complete TRS-ActiveCare plan information is available on the 2022-2023 TRS-ActiveCare Enrollment Guide which can be found at:

<http://www.yourbenefitstation.com/html/cy-fair-ppo.htm>

MID-YEAR PLAN CHANGES

Employees enrolling or making changes in their elections during the annual open enrollment period should be aware that they cannot make changes during the benefit plan year, September 1, 2022 through August 31, 2023 unless they have a “Special Enrollment Event”. Some examples of special enrollment events are below.

Change in Marital Status: Marriage or divorce

Newly Eligible Dependents: Birth, adoption, foster care placement

Loss or Gain of Other Coverage: Change in your spouse's employment status that results in a loss or gain of coverage or loss or gain of Medicaid coverage.

Acquiring Other Coverage: Change in your spouse's employment status that results in your gaining coverage, or a spouse's Annual Enrollment Period.

A change in your dependent's eligibility status due to age: Coverage ends on a child's 26th birthday.

SPECIAL NOTE: Any changes outlined above must be made within thirty (30) days of the change of status event date and must be evidenced at the time of the change with documented proof of the change. If in doubt as to whether an event qualifies for a change in elections or what is accepted as documentation of the status change, please call the Insurance Department for assistance well in advance of the thirty-one (31) day deadline. New coverage will be effective retroactively to the first day of the month following the qualifying event date or cancellation date of the former coverage, whichever is later. Any termination of your coverage will be effective the last day of the month in which you submit the cancellation request. To terminate a former spouse or stepchildren's coverage, please make sure it is documented in the divorce decree.

TRS-ACTIVECARE PRIMARY AND PRIMARY+

TRS-ActiveCare Primary and Primary+ are statewide plans and both plans **REQUIRE** you to select a PCP. If you need to make changes to your PCP, you will need to contact BCBS. You also will need a referral from your PCP to see a specialist. This plan is beneficial for employees who prefer a plan with co-pays and who have dependents who live within the state of Texas. There is no out-of-network coverage on this plan.

MEDICAL ID CARDS

Everyone will be receiving new ID cards this plan year. If you are enrolled in the HD or AC2 Plans, you will receive two cards with the employee's name on it which will cover all family members. If you are enrolled in the Primary or Primary+ Plans, you will receive a card for each participant with their PCP on the card. You can use your old card until your new one arrives, since your member ID does not change.

DETERMINE IF YOUR MEDICAL PROVIDER ACCEPTS THE TRS-ACTIVECARE PLAN YOU ARE CONSIDERING

Before enrolling in a TRS-ActiveCare Health Plan, employees should determine whether their preferred providers accept the plan they are considering. The BlueCross BlueShield of Texas website at www.bcbstx.com/trsactivecare enables employees to "Find a Doctor or Facility" that accepts the various plans. Employees should also confirm their findings by contacting their providers directly.

MOBILE ACCESS

The Blue Cross Blue Shield app will allow you to view claims, explanation of benefits (EOBs), live chat, and view your card. To download the app, text BCBSTXAPP to 33633 or search for BCBSTX in the Apple App Store or Google Play.

The My Choice Mobile App will allow you to view and make benefit changes in lieu of signing into the First Financial Benefit Online Enrollment System. To gain initial access, log into the First Financial Benefit System and choose "Get Access Code" under the My Choice Mobile App section.

VIRTUAL HEALTH

Teladoc along with RediMD are available for virtual health needs. Teladoc can provide medical and mental health needs inclusive of cold, flu, allergies, bronchitis, respiratory infections, depressive and anxiety disorders, and alcohol and addition substance-related disorders. RediMD can provide medical needs for back strains, shoulder strains, ankle injuries, pulled muscles, asthma, infections, and allergies.

CAREMARK PRESCRIPTION DRUG PLAN: HOW TO SAVE MONEY ON YOUR PRESCRIPTIONS

- TRS-ActiveCare members with diabetes may qualify for a OneTouch blood glucose meter at no cost. Contact CVS Caremark Member Services Diabetic Meter Team at (800) 588-4456 for details.
- Even though the HD plan normally requires members pay their deductibles before the plan pays for any prescription drugs, participants are not required to pay anything for certain **preventive generic drugs when they fill a short term 31-day supply**. Many of the drugs on the High Deductible Health Plan Generics Only Preventive Drug List are common maintenance medications. The drug list can be found on the Caremark website at: <http://info.caremark.com/trsactivecare>. The Primary Plan also has certain drugs covered at no cost on the drug list.
- Primary+, and AC2 participants can also save money by filling their 90-day supply generic or preferred brand prescriptions through Caremark Mail Order Pharmacy or a Retail-Plus pharmacy. A list of Retail-Plus pharmacies can be found at: <http://info.caremark.com/trsactivecare>.

MEDICAL TIPS AND REMINDERS

- Please remember to get your annual well-visit checkup. Preventative care is covered at 100% and only 18% of participants in Texas are taking advantage of this benefit.
- Always try and stay in network for medical services; this can save you hundreds if not thousands of dollars in medical care. Stand alone Emergency Rooms (ERs) are typically out of network, so please be cautious.
- It is best to go an Urgent Care or Ready Clinic unless it is truly a life-threatening emergency that requires an ER visit.
- CAT Scans and MRIs are cheaper at imaging centers than hospitals. Always research the price of your medical needs.

403(b) and 457 TAX SHELTERED SAVINGS PLANS

All CFISD employees, including substitutes and temporary workers are eligible to enroll in a Tax Sheltered Saving Plan to supplement their retirement. Contact TCG Administrators at 1-800-943-9179 for 403(b) and 457 enrollment information or visit the retirement website at cfisd.net under Staff / HR / Retirement.

Employees can enroll in the 457 plan during open enrollment through the First Financial Benefits On-Line Enrollment System. There are six levels of portfolios for employees to choose from ranging from a Preservation Portfolio with the least amount of risk to the Aggressive Growth Portfolio which has the highest level of risk. The Signature Portfolio is the default investment for the 457 Plan with a moderate level of risk.

Financial consultants recommend employees start saving as early as possible. You may start with a contribution as low as \$10 per check and gradually increase or cancel as you choose.

CYPRESS- FAIRBANKS ISD Employee Monthly Premium Rates 2022-2023

TRS-ACTIVECARE PLANS *

MONTHLY PREMIUMS	TRS ActiveCare Primary	TRS ActiveCare HD	TRS ActiveCare Primary+	TRS ActiveCare 2**	SCOTT & WHITE HMO
EMPLOYEE CONTRIBUTION	FULL-TIME EMPLOYEE RATES (MINIMUM 35 HOURS PER WEEK)				
Employee Only	\$170	\$182	\$265	\$775	\$302.82
Employee & Child(ren)	\$420	\$442	\$498	\$1,197	\$623.32
Employee & Spouse	\$677	\$709	\$763	\$1,941	\$889.22
Employee & Family	\$852	\$890	\$1,036	\$2,347	\$1,079.20
EMPLOYEE CONTRIBUTION	PART-TIME EMPLOYEE RATES (15 - 34 HOURS PER WEEK)				
Employee Only	\$170	\$182	\$265	\$775	\$302.82
Employee & Child(ren)	\$483	\$505	\$561	\$1,260	\$623.32
Employee & Spouse	\$740	\$772	\$826	\$2,004	\$982.22
Employee & Family	\$955	\$993	\$1,139	\$2,450	\$1,149.20
EMPLOYEE CONTRIBUTION	SUBSTITUTE, TEMP, PART-TIME RATES (10+ HOURS PER WEEK)				
Employee Only	\$395	\$407	\$496	\$1,013	\$527.82
Employee & Child(ren)	\$709	\$731	\$798	\$1,507	\$848.32
Employee & Spouse	\$1,113	\$1,145	\$1,212	\$2,402	\$1,325.22
Employee & Family	\$1,332	\$1,370	\$1,523	\$2,841	\$1,525.20

DENTAL INSURANCE	Cigna PPO	Cigna DHMO	QCD of America Dental Discount	MSofA Dent-All Discount Plan (See Website for Plan Details)	
Employee Only	\$ 37.72	\$ 9.48	No Charge	Plan A	\$ 10.00
Employee & 1 Dependent	\$ 80.12	\$ 14.88	\$ 6.00	Plan B	\$ 5.00
Employee & 2 Dependent or more	\$ 113.28	\$ 23.50	\$ 9.00	Plan C	\$ 5.00

VISION INSURANCE	Guardian VSP Vision Plan A	Guardian VSP Vision Plan B	DISABILITY INSURANCE	Assurant Employee Benefits
Employee Only	\$ 10.36	\$13.80	PLAN A	\$5.56 - \$316.26
Employee & Child(ren)	\$ 17.80	\$23.70	(see website for plan details / rates)	
Employee & Spouse	\$ 17.44	\$23.22	PLAN B	\$4.98 - \$281.90
Employee & Family	\$ 28.18	\$37.50	(see website for plan details / rates)	

Identity Protection	iLock 360 Plus Plan	iLock 360 Premium Plan	CANCER AND SPECIFIED DISEASE INSURANCE	Humana Insurance Company
Employee Only	\$ 8.00	\$ 15.00	Monthly Rates (Depending on Coverage Selections - See website for Plan Details)	\$9.47 - \$118.39
Employee & Child(ren)	\$ 13.00	\$ 20.00		
Employee & Spouse	\$ 15.00	\$ 22.00		
Employee & Family	\$ 20.00	\$ 27.00		

OPTIONAL LIFE INSURANCE	Optional Employee	Optional Spouse	Optional Child
Voya Financial	\$.59 - \$875.50	\$.30 - \$218.88	\$0.42

* FOR POOLING AND SPLIT EMPLOYEE RATES SEE INSURANCE DEPT WEBSITE

** PLAN CLOSED. ONLY FOR CURRENT ENROLLEES.

2022-23 TRS-ActiveCare Plan Highlights Sept. 1, 2022 – Aug. 31, 2023



How to Calculate Your Monthly Premium

- Total Monthly Premium
- Your District and State Contributions

Your Premium

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

Wellness Benefits at No Extra Cost*

Being healthy is easy with:

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

*Available for all plans.
See the benefits guide for more details.

Things to Know

- TRS's Texas-sized purchasing power enables access to broad networks without county boundaries.
- Specialty drug insurance means you're covered, no matter what life throws at you.

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

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

Monthly Premiums	Total Premium	Your Premium	Total Premium	Your Premium
Employee Only	\$395	\$	\$496	\$
Employee and Spouse	\$1,113	\$	\$1,212	\$
Employee and Children	\$709	\$	\$798	\$
Employee and Family	\$1,332	\$	\$1,523	\$

Plan Features

Type of Coverage	In-Network Coverage Only	In-Network	Out-of-Network
Individual/Family Deductible	\$2,500/\$5,000	\$3,000/\$6,000	\$5,500/\$11,000
Concurrence	You pay 30% after deductible	You pay 30% after deductible	You pay 50% after deductible
Individual/Family Maximum Out of Pocket	\$8,150/\$16,300	\$5,900/\$11,800	\$20,250/\$40,500
Network	Statewide Network	Statewide Network	Nationwide Network
PCP Required	Yes	Yes	No

Doctor Visits

Primary Care	Specialist
You pay 30% after deductible	You pay 30% after deductible
\$30 copay	\$70 copay

Immediate Care

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

Prescription Drugs

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

TRS-ActiveCare 2
- Closed to new enrollees - Current enrollees can choose to stay in plan - Lower deductible - Copays for many services and drugs - Nationwide network with out-of-network coverage - No requirement for PCPs or referrals

Total Premium	Your Premium
\$1,013	\$
\$2,402	\$
\$1,507	\$
\$2,841	\$

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

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

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

\$200 brand deductible	\$200 brand deductible
\$20/\$45 copay	\$20/\$45 copay
You pay 25% after deductible (\$40 min/\$80 max)	You pay 25% after deductible (\$105 min/\$210 max)
You pay 50% after deductible (\$100 min/\$200 max)	You pay 50% after deductible (\$215 min/\$430 max)
You pay 30% after deductible (\$200 min/\$900 max)	No 90-day supply of specialty medications
\$25 copay for 31-day supply; \$75 for 61-90 day supply	

What's New and What's Changing



This table shows you the changes between 2021-22 statewide premium price and this year's 2022-23 regional price for your Education Service Center.

	2021-22 Total Premium	New 2022-23 Total Premium	Change in Dollar Amount	Key Plan Changes
TRS-ActiveCare Primary	Employee Only	\$417	\$395	- Member Rewards was expanded to include lab services at Labcorp and Quest Diagnostics - Copay for Teladoc® rose from \$0 to \$12 - Maximum out of pocket for insulin capped at \$25/31 - day supply; \$75/61 -90 day supply
	Employee and Spouse	\$1,176	\$1,113	
	Employee and Children	\$751	\$709	
	Employee and Family	\$1,405	\$1,332	
TRS-ActiveCare HD	Employee Only	\$429	\$407	- In-network maximum rose by \$50/individual; \$100/families - The Member Rewards program, including for lab services at Labcorp and Quest Diagnostics, is now available for HD participants - Rewards are paid through a limited-purpose Health Care Account (HCA) and can be used toward dental and vision expenses - Consult fee for Teladoc rose from \$30 to \$42
	Employee and Spouse	\$1,209	\$1,145	
	Employee and Children	\$772	\$731	
	Employee and Family	\$1,445	\$1,370	
TRS-ActiveCare Primary+	Employee Only	\$542	\$496	- Member Rewards was expanded to include lab services at Labcorp and Quest Diagnostics - Copay for Teladoc rose from \$0 to \$12 - Maximum out of pocket for insulin capped at \$25/31 - day supply; \$75/61 -90 day supply
	Employee and Spouse	\$1,334	\$1,212	
	Employee and Children	\$879	\$798	
	Employee and Family	\$1,675	\$1,523	
TRS-ActiveCare 2 (closed to new enrollees)	Employee Only	\$1,013	\$1,013	- Copay for Teladoc rose from \$0 to \$12 - Maximum out of pocket for insulin capped at \$25/31 - day supply; \$75/61 -90 day supply - This plan is still closed to new enrollees
	Employee and Spouse	\$2,402	\$2,402	
	Employee and Children	\$1,507	\$1,507	
	Employee and Family	\$2,841	\$2,841	

At a Glance			
	Primary	HD	Primary+
Premiums	Lowest	Lower	Higher
Deductible	Mid-range	High	Low
Copays	Yes	No	Yes
Network	Statewide network	Nationwide network	Statewide network
PCP Required?	Yes	No	Yes
HSA-eligible?	No	Yes	No

Effective: Sept. 1, 2022

2022 – 2023 BENEFIT PLAN OPTIONS

Benefit Plans	Features	Monthly Rates
TRS-ActiveCare Medical Insurance	Health Plan Administrator – Blue Cross Blue Shield (BCBS) Pharmacy Benefit Manager – CVS Caremark	Please see page 4 for rates. http://www.cfsd.net/dept2/insur/egmi.htm
Health Savings Account (HSA) HSA Bank	Participants must be enrolled in the qualifying high deductible TRS-ActiveCare HD medical plan and NOT enrolled in Medicare. Tax-Deferred Health Savings Account allowing you to make pre-tax contributions into a savings account set up with HSA Bank to pay for eligible medical expenses. HSA Bank monthly administrative fee: \$2.50 HSA funds may be used to pay for out of pocket eligible medical expenses incurred by anyone you claim as a dependent on your income tax return. Unspent funds remain yours to spend in the future for eligible expenses.	2022 Annual Pre-Tax Allowable Contributions: Emp Only \$3,650 Emp + Dep \$7,300 Individuals age 55 or over may make an additional \$1,000 per year catch-up contribution. http://www.cfsd.net/dept2/insur/egmi_savings.htm
Basic Life / AD&D (Accidental Death and Dismemberment) Insurance Voya Financial	Basic life benefit is \$30,000; AD&D benefit is \$30,000 Benefit reduces to \$19,500 at age 65 and to \$15,000 at age 70 Additional Benefits: Accelerated Death Benefit 75% coverage for life Expectancy less than 12 months Everest Funeral Planning Travel Assistance	District Paid Benefit for all part-time and full-time employees working a minimum of 15 hours per week. Have you named your beneficiary? Name or change your life beneficiary on the First Financial Benefits Online Enrollment System at any time.
Optional Life / AD&D Insurance (Group Policy # 69486-0) Voya Financial	Employee - Coverage amounts up to \$500,000; \$10,000 minimum. Spouse - Coverage up to 100% of employee's coverage; \$125,000 maximum; \$5,000 minimum. Child - Coverage of \$10,000 available for each dependent child. GUARANTEED ISSUE AMOUNTS - Employee - \$250,000 as a new hire; \$10,000 each year thereafter up to \$500,000 maximum - Spouse - \$50,000 as a spouse of a new hire; \$5,000 each year thereafter to a \$125,000 maximum - Child(ren) - \$10,000 **CFISD spouses cannot cover each other under spouse life. All coverage requests that exceed the Guaranteed Issue amounts require an Evidence of Insurability form (EOI), a health questionnaire, and will require approval from Voya Financial .	<u>Monthly Rates</u> Optional Employee: \$.59-875.50 Optional Spouse: \$.30-218.88 Optional Child: \$.42 http://yourbenefitstation.com/cfsd/voya-financial-life-insurance.html
iLock 360 Identity Protection	Comprehensive Identity Protection at your fingertips. - Complete CyberAlert protection - Credit bureau monitoring - Lost wallet protection \$1M insurance CyberAlert Internet Surveillance scans websites, chat rooms, and bulletin boards 24/7/365 to identify trading or selling of your personal information.	<u>Monthly Rates</u> Basic Employee Only: District Paid <u>Plus/Premium Plan Rates</u> Emp \$8.00/\$15.00 Emp+ Children \$13.00/\$20.00 Emp + Spouse \$15.00/\$22.00 Emp + Fam \$20.00/\$27.00

2022 – 2023 BENEFIT PLAN OPTIONS (continued)

PPO Dental Plan Cigna Dental	A dental insurance plan allowing employees to choose your own dental provider and specialists. Coinurance Percentages: Type I (Preventive Services) = 100%; No waiting period for services. Type II (Basic Restorative Services) = 80%; No waiting period for Services. Type III (Major Services) = 50%; No waiting period for services. Type IV (Orthodontia) = 50%; 12 month waiting period. Annual maximum benefit per member = \$2,000 Orthodontia lifetime maximum = \$1200 Vision Discount Services offered by Cigna Vision Network.	Emp Only \$ 37.72 Emp + 1 Dep \$ 80.12 Emp + 2 or more Dependents \$113.28
DHMO Dental Plan Cigna Dental	A Dental Health Maintenance Organization (DHMO) offering a Copayment schedule for services received from their network dental providers. Members MUST indicate their selected provider's network ID number in the online enrollment system at the time of their enrollment. No deductibles, waiting periods, or annual maximums. Vision Discount Services offered by Cigna Vision Network. Additional Benefits: Identity Theft Program, Healthy Rewards	Emp Only \$ 9.48 Emp + 1 Dep \$ 14.88 Emp + 2 or more Dependents \$ 23.50
Dental & Vision Discount Plan MSofA Dent-All	Receive discounts on dental services, orthodontics, cosmetic, oral surgery, prosthodontics and more. Members pay a monthly membership fee to receive services at discounted prices that are 20% to 80% off the usual and customary fees. Members must use plan providers. Vision Discount Services offered by U.S. Vision Plan. Neighborhood Pharmacy Discounts available to members. Plan A: Employee + Dependents (Dental, Vision & Prescription) Plan B: Employee + Dependents (Dental & Vision) Plan C: Employee + Dependents (Vision & Prescription Discounts)	Plan A \$10.00 Plan B \$ 5.00 Plan C \$ 5.00
Dental & Vision Discount Plan QCD of America	A managed cost plan in which subscribers pay for dental services received from a provider in the QCD Affiliated Dentist Network. The subscriber pays for services at a discounted rate based upon the QCD fee schedule. Vision Discount Services offered by Davis Vision through their Clear Vision Discount Program. Wellness program provides discount on prescriptions for family and pets.	Emp Only \$ 0.00 Emp + 1 Dep \$ 6.00 Emp + 2 or more Dependents \$ 9.00

2022 – 2023 BENEFIT PLAN OPTIONS (continued)

Benefit Plans	Features	Monthly Rates																
Disability Insurance Plan Sun Life (acquired by Assurant)	Provides a maximum benefit of 66 2/3% of your monthly earnings up to \$7,500 if you are disabled and unable to work. Treats pregnancy as any other illness. You do not have to use your leave days prior to filing a claim. Elimination Period options (in days) for injury/sickness: 0 days for injury/7days for sickness; 14 days/14 days, 30 days/30 days. Elimination periods are waived on first day of hospital confinement. Plan A pays for disabling injury or illness to the age of 65. Plan B pays for disabling illness up to 5 years; injury to age 65. (Benefit available over age 65 – reduced benefit schedule applies) GUARANTEED ISSUE – NO health questions to answer. A 3 month / 12 month Pre-Existing Condition Exclusion Limitation exists for the first 12 months after the effective date of coverage. Pre-existing condition means a condition for which you received medical treatment, consultation, care, or services including diagnostic measures, or took prescribed drugs in the 3 months prior to your effective date of coverage; and the disability begins in first 12 months of coverage. CURRENT ENROLLEES – NO health questions to change your benefit. Pre-existing will apply only to the increased benefits.	Plan A Rates: \$5.56 - \$316.26 Plan B Rates: \$4.98 - \$281.90 Employees should re-evaluate their monthly disability benefit at least every two years to keep their benefit in pace with their salary.																
Cancer & Specified Disease Insurance Humana	I’ve got a major medical plan; why do I need a cancer plan? The plan pays cash benefits directly to the covered member when services are received for the treatment of cancer or other diseases specifically named in the policy. Includes an Annual Wellness Benefit of up to \$100 for cancer screening. Employees having a family history of cancer or a personal life-style risk (smoking or other exposure) might want to consider the policy. A health questionnaire must be answered to pass eligibility via the online benefit platform.	Monthly Rates: \$9.47 - \$118.39 Depending on coverage selections																
Guardian VSP Vision Insurance	Provides vision coverage for regular eye exams, lenses and frames. Includes coverage for single vision, bifocal, trifocal, and lenticular, and medically necessary contact lenses. Provides a contact lens discount program. Plan A – Frame allowance every other year. Plan B – Frame allowance yearly.	Plan A Rates: <table><tr><td>Emp Only</td><td>\$ 10.36</td></tr><tr><td>Emp + Child(ren)</td><td>\$ 17.80</td></tr><tr><td>Emp + Spouse</td><td>\$ 17.44</td></tr><tr><td>Emp + Family</td><td>\$ 28.18</td></tr></table> Plan B Rates: <table><tr><td>Emp Only</td><td>\$ 13.80</td></tr><tr><td>Emp + Child(ren)</td><td>\$ 23.70</td></tr><tr><td>Emp + Spouse</td><td>\$ 23.22</td></tr><tr><td>Emp + Family</td><td>\$ 37.50</td></tr></table>	Emp Only	\$ 10.36	Emp + Child(ren)	\$ 17.80	Emp + Spouse	\$ 17.44	Emp + Family	\$ 28.18	Emp Only	\$ 13.80	Emp + Child(ren)	\$ 23.70	Emp + Spouse	\$ 23.22	Emp + Family	\$ 37.50
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Emp + Child(ren)	\$ 23.70																	
Emp + Spouse	\$ 23.22																	
Emp + Family	\$ 37.50																	
Employee Assistance Program (EAP) Voya / ComPsych	ComPsych Guidance Resources integrated program offers 24/7 personal, family, and life issues support and resources. • Marital and family conflict • Grief, depression, alcohol and drug abuse, stress and anxiety • Family Source: Child Care, Adoption, and Elder Care	District Paid Benefit.																

DO YOU NEED SOME HELP?

The district's Insurance Department staff is always available to assist you with your benefits questions and concerns. We are located in the Instructional Support Center (North), 10300 Jones Rd., Suite 335, phone, **(281) 897-3882**. Additional assistance with your plan selections may be received by contacting the following companies directly or by visiting the **Insurance Department website**. The website has links to each benefit plan administrator and their provider networks.

FOR ASSISTANCE

Benefit	Provider	Contact	Phone Number	Website or Email
CFISD Insurance Dept.	EE's Last Name A – K EE's Last Name L – Z	Laura Unger Robin Rubalcava	(281) 897-4138 (281) 897-4747	www.cfisd.net/ <i>Go to: Staff / HR / Insurance</i>
Medical	TRS-ActiveCare Plans BlueCross BlueShield	Customer Service	(866) 355-5999	www.bcbstx.com/trsactivecare
Prescription Drug	CVS Caremark			
Medical HMO (must reside in the service area)	Scott & White HMO	Customer Service	(800) 321-7947	https://trs.swhp.org
HSA (Health Savings Account)	Only available to those enrolling in: TRS-ActiveCare HD (all tiers of coverage)		(800) 357-6246	For HSA information: www.hsabank.com For enrollment procedures: http://www.cfisd.net/dept2/insur/egmi_savings.htm
Dental Insurance	Cigna PPO & DHMO	Audrey Ayers (Station & Ayers)	(281) 333-9792	audrey@yourbenefitstation.com
Discount Dental	MSofA Dent-All	Wes Ryan Customer Service	(281) 894-5080 (866)362-1517	wryaninsurance@hotmail.com
	QCD of America	Member Services	(800) 229-0304 ext. 170	www.qcdofamerica.com
Disability Insurance	Sun Life	Audrey Ayers Customer Service	(281) 333-9792 (800) 877-2701	audrey@yourbenefitstation.com
Cancer & Specified Disease Insurance	Humana	Lou Moore Customer Service	(281) 380-1488 (800) 845-7519	ritagmoore@yahoo.com
Basic Life & AD&D and Optional Life Insurance	Voya Financial	Jessica Demler (Assured Partners) Customer Service	(281) 810-4943 (877) 886-5050	Jessica.Demler@assuredpartners.com
Guardian Vision Insurance	Guardian Life Insurance	Reginald Lillie Customer Service	(281) 213-9663 (888) 600-1600	rlillieins@sbcglobal.net
Identity Protection	iLock 360	Customer Service	(855) 287-888	www.iLOCK360.com
Employee Assistance Program	Voya Financial / ComPsych	Customer Service	(877) 533-2363	www.guidanceresources.com
Tax-Deferred Investments	403(b) and 457 Plan	TCG Administrators	(800) 943-9179	www.region10rams.org