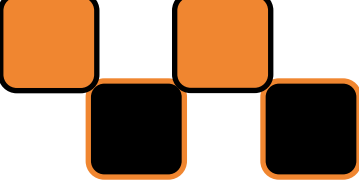


2017 Benefits Guide



Improving Our Wellness Together



Overview



BENEFITS GUIDE CONTENT

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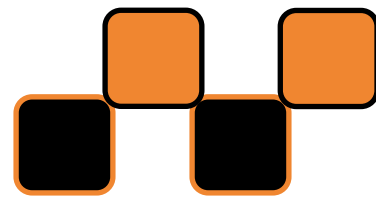
Important Change for Dependent Coverage

In 2015 the Ohio House of Representatives passed H.B. 201, reducing the dependent eligibility age requirement to 26 for employer provided medical plans in Ohio. Former Ohio law required that such coverage be extended until an unmarried dependent who met certain conditions reached the age of 28. With the passage of H.B. 201, effective January 1, 2016, Delaware City Schools will only cover dependents up to the age of 26 for medical, vision or any other supplemental offerings. ***Please make adjustments as needed during your enrollment process.***

When can I Enroll?

Open enrollment allows for employees of the District to enroll or make changes in any of the plans without a qualifying event.

In order to make changes outside of the annual open enrollment period, there would need to be a qualifying event such as the birth of a child, change in marital status, death, or loss of coverage due to no fault of your own. An enrollment application must be submitted to the insurance carrier via the Treasurer's office within thirty-one (31) days of the qualifying event in order for coverage to be effective.



WELCOME TO OPEN ENROLLMENT FOR YOUR 2017 BENEFITS!

We are honored to present your 2017 Benefit Options! The elections you make during open enrollment will become effective **January 1, 2017 - December 31, 2017.**

Delaware City Schools offers you and your eligible family members a comprehensive and valuable benefits program. We encourage you to take the time to educate yourself about your options and choose the best coverage for you and your family.

Open Enrollment Procedures

We have again partnered with Explain My Benefits, our benefit technology/communication vendor to assist in our Open Enrollment. This year we will transition to more of a self-service online enrollment using the EMB Enroll online system. These elections will be for the **2017 Plan Year effective 1/1/2017!**

For more information about your Benefits Enrollment please visit:

www.explainmybenefits.biz/delaware

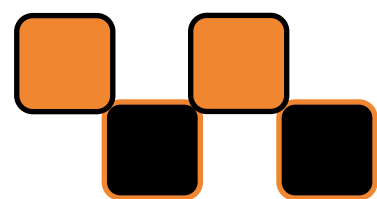
Open Enrollment Dates:

- **October 21 - October 28** - Our online enrollment system will be available for self-enrollment using any computer with access to the internet.
- **October 24 - October 28** - Explain My Benefits Counselors will be on-site to help you enroll. See benefit resource website for enrollment kiosk schedule
Employees may visit any location to enroll.



How to Self-Enroll in Benefits via EMB Enroll:

1. Access the On-Line Enrollment at: www.explainmybenefits.biz/delaware
2. Click the Orange "Click Here to Enroll in Your 2017 Open Enrollment" Button
3. Please follow the instructions on the page and proceed to your enrollment
4. Complete your enrollment
5. **IMPORTANT:** PRINT & RECORD YOUR CONFIRMATION NUMBER _____



Delaware City Schools will offer two health care plans starting January 1, 2017

A Traditional PPO plan and a High Deductible Health Plan/Health Savings Account (HDHP/HSA) plan. The Traditional PPO plan is similar to your prior benefits. In addition, we are introducing the new HDHP/HSA option in order to offer employees more choice, allowing you to select a plan that is best for you and your family. In order to make an educated decision, you need to weigh the facts and your personal circumstances. Compare the premium costs between the PPO and the HDHP. Consider your circumstances. What is your health like? How often do you and your family visit the doctor? Can you plan to pay for the deductible under the HDHP?

One last thing. Consider the benefits of a Health Savings Account. By contributing to these accounts, you lower your taxable income, reducing the amount you pay in taxes each year. The money in these accounts can be used to pay for eligible medical expenses. A Health Savings Account (HSA) rolls over from year to year, letting the funds accumulate all the way into retirement and your account stays with you even if you change jobs. *If you elect the HSA plan, the Board will contribute \$1,000 for Single and \$2,000 for Family toward your deductible.*

So, which plan is right for you?

HSA



What is a HSA?

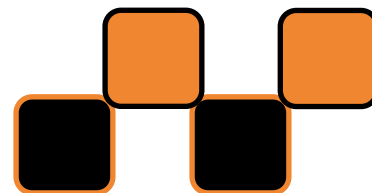
A health savings account (HSA) is a tax-advantaged medical savings account available to taxpayers in the United States who are enrolled in a high-deductible health plan (HDHP). The funds contributed to the HSA account are not subject to federal income tax at the time of deposit. Unlike a flexible spending account (FSA), HSA funds roll over and accumulate year to year if they are not spent. HSAs are owned by the individual.

Can I contribute more to my HSA beyond the Board contribution?

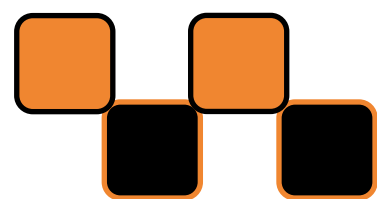
Yes. Employees enrolled in the HSA Plan for tax year 2017 may contribute up to \$3,400 for a single individual or \$6,750 for married participants pre-tax, this amount includes the amount contributed by the Board.

Since a Health Savings Account (HSA) is subject to IRS regulations, contributions are capped by your income tax filing status. Employees who are age 55+, may contribute an additional \$1,000 to their savings account, as part of a "Catch Up" provision under the IRS rule.

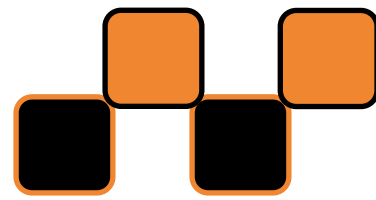
	Board Contribution	Employee Contribution	HSA Balance	+55 Catch Up	Potential HSA Balance
Single	\$1,000	\$2,400	\$3,400	\$1,000	\$4,400
Family	\$2,000	\$4,750	\$6,750	\$1,000	\$7,750



	United Healthcare Traditional PPO	
	In Network	Out of Network
Deductible		
<i>Individual / Family*</i>	\$400 / \$800	\$800 / \$1,600
<i>Coinsurance</i>	20%	30%
Out of Pocket Maximum		
<i>Individual / Family</i>	\$1,500 / \$3,000	\$3,000 / \$6,000
Doctor's Office		
Office Visit	\$25 copay	30% after deductible
Preventive Care Services	No Charge	30% after deductible
Hospital Services		
Emergency Room	\$100 copay	\$100 copay
Urgent Care Center Services	\$50 copay	30% after deductible
Inpatient	20% after deductible	30% after deductible
Outpatient Surgery	20% after deductible	30% after deductible
Ambulance Service	20% after deductible	20% after deductible
Other Services		
Maternity Services	20% after deductible	30% after deductible
Diagnostic Lab/X-ray	20% after deductible	30% after deductible
Diagnostic (MRI, CT Scans, Nuclear Medicine)	20% after deductible	30% after deductible
Prescriptions		
Prescription Deductible	\$100 (Individual) / \$300 (Family)	\$100 (Individual) / \$300 (Family)
Retail (31 day supply)	After Deductible - \$15 / \$25 / \$35	After Deductible - \$15 / \$25 / \$35
Direct Mail (90 day supply)	After Deductible - \$25 / \$50 / \$75	N/A



	United Healthcare HDHP	
	In Network	Out of Network
Deductible		
<i>Individual / Family*</i>	\$1,500 / \$3,000	\$3,000 / \$6,000
<i>Coinsurance</i>	10%	30%
Out of Pocket Maximum		
<i>Individual / Family</i>	\$3,000 / \$6,000	\$6,000 / \$12,000
Doctor's Office		
Office Visit	\$25 copay after deductible	30% after deductible
Preventive Care Services	No Charge	30% after deductible
Hospital Services		
Emergency Room	\$100 copay after deductible	\$100 copay after deductible
Urgent Care Center Services	\$50 copay after deductible	30% after deductible
Inpatient	10% after deductible	30% after deductible
Outpatient Surgery	10% after deductible	30% after deductible
Ambulance Service	10% after deductible	10% after deductible
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Diagnostic Lab/X-ray	10% after deductible	30% after deductible
Diagnostic (MRI, CT Scans, Nuclear Medicine)	10% after deductible	30% after deductible
Prescriptions		
Retail (31 day supply)	After Deductible - \$15 / \$25 / \$35	After Deductible - \$15 / \$25 / \$35
Direct Mail (90 day supply)	After Deductible - \$25 / \$50 / \$75	N/A



Good oral care enhances overall physical health, appearance and mental well-being. Problems with the teeth and gums are common and easily treated health problems. Keep your teeth healthy and your smile bright with the Delaware City Schools dental benefit plan.

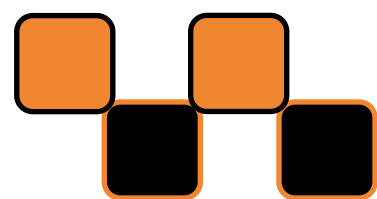
Plan	Delta Dental PPO		
	PPO Dentist	Premier Dentist	Non-Participating Dentist**
Calendar Year Deductible Individual / Family*	\$25 per person		
Annual Maximum	\$1,000		
Preventative Services Exams, Cleanings, X-Rays, etc.	Plan pays 100% Deductible is waived.		
	Deductible Applies		
Basic Services Fillings, Oral Surgery, Root Canals, etc.	80% Covered	80% Covered	80% Covered
Major Services Crowns, Bridges, Implants, Dentures, etc.	80% Covered	80% Covered	80% Covered
Orthodontics			
Lifetime Annual Maximum	\$1,000		
Eligible Dependents to age 19 Deductible does not apply to Orthodontic services.	60% Covered		

Go to www.deltadentaloh.com to locate a network PPO provider. Please note that your out-of-pocket costs may be more if you choose to go to an out-of-network provider.

**Dependents ages up to age 19 or 23 if unmarried and a full-time student.*

** When you receive services from a Non-participating Dentist, the percentages in this column indicate the portion of Delta Dental's Non-participating Dentist Fee that will be paid for those services. The Non-participating Dentist Fee may be less than what your dentist charges and you are responsible for the difference.





Basic Term Life and Accidental Death & Dismemberment

The amount of life insurance that is right for you depends on a variety of factors, including your age, family status, personal savings, financial commitments, etc. Delaware City Schools offers a variety of programs to meet your life insurance needs.

Delaware City Schools provides a basic life and accidental death and dismemberment (AD&D) insurance coverage to all benefit eligible employees at no cost to the employee based on your contract through **MetLife Insurance**.

Voluntary Supplemental Term Life

You also have the opportunity to purchase supplemental coverage for yourself, your spouse and dependent children. Please note that dependent children include unmarried adopted, natural or stepchildren age 14 days to age 26.

You may elect Voluntary Life Insurance in increments of **\$10,000** to a maximum of **\$500,000**, not to exceed 5x covered annual salary. You may elect Voluntary Life Insurance on your spouse in increments of **\$5,000** to a maximum of **\$100,000**, not to exceed 50% of your Optional Life Benefit.

Guaranteed Issue Amount

\$100,000 employee (not to exceed 3x annual salary) / \$25,000 spouse / \$10,000 children

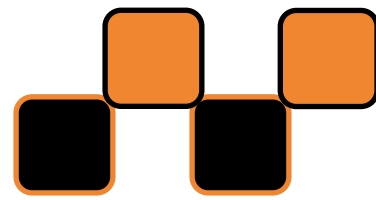
COSTS FOR VOLUNTARY SUPPLEMENTAL LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT

Age Band	Employee Life Monthly Rate per \$1,000	Spouse Life Monthly Rate per \$1,000	Age Band	Employee Life Monthly Rate per \$1,000	Spouse Life Monthly Rate per \$1,000	Child Life Monthly Rate per \$1,000
<30	\$0.054	\$0.075	50 - 54	\$0.215	\$0.411	\$0.195
30 - 34	\$0.059	\$0.077	55 - 59	\$0.322	\$0.718	
35 - 39	\$0.070	\$0.093	60 - 64	\$0.455	\$1.616	
40 - 44	\$0.096	\$0.135	65 - 69	\$0.767	\$2.832	
45 - 49	\$0.142	\$0.226	70+	\$1.435	\$4.963	

Example: A 36 year old female, Sally, wants to purchase \$50,000 of term life insurance.

$$\begin{array}{rcccl} \underline{.070} & \times & \underline{50} & = & \underline{\$3.50} \\ \text{Monthly rate per \$1,000} & & \text{\# of units/\$1,000} & & \text{monthly} \end{array}$$

Your specific rate will be calculated for you in the electronic enrollment system.



Regular eye examinations cannot only determine your need for corrective eyewear, but also may detect general health problems in their earliest stages. Protection for your eyes should be a major concern to everyone.

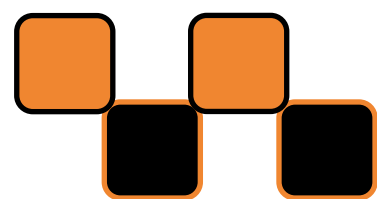
Description	In-Network	Out-of-Network
Comprehensive Eye Exam <i>Once every 12 months</i>	\$20 co-pay	\$30 reimbursement
Eyeglass Lenses	<i>Once Every 12 Months</i>	<i>Once Every 12 Months</i>
Single Vision, Lined Bifocal and Trifocal	\$0 co-pay	\$25 - \$60 reimbursement
Lenticular	\$0 co-pay	\$60 reimbursement
Standard Progressive	\$65 co-pay	\$40 reimbursement
Premium Progressive	\$85 - \$110 co-pay	\$40 reimbursement
Eyeglass Frames	<i>Once Every 12 Months</i>	<i>Once Every 12 Months</i>
	\$200 allowance 20% off amount over allowance	\$100 reimbursement
Contact Lenses (in lieu of glasses)	<i>Once Every 12 Months</i>	<i>Once Every 12 Months</i>
Conventional (Elective)	\$200 allowance; 15% off over \$200	\$160 reimbursement
Disposable	\$200 allowance; plus balance over \$200	N/A
Contact Lens Exam	Up to \$55	
Additional Pairs	40% off complete pair of eyeglasses and 15% off contact lenses once the funded benefit has been used	N/A
Laser Vision Correction (LASIK)	15% off Retail or 5% off Promotional	N/A

Go to www.eyemedvisioncare.com to locate a network provider. Please note that your out-of-pocket costs will be more if you choose to go to an out-of-network provider.

Semi-Monthly Payroll Deductions	Employee Only	Employee & Spouse	Employee & Children	Family
	\$5.00	\$9.51	\$10.01	\$14.71



Coverage terminates for dependents at the end of the month in which they turn 26.



Voluntary Benefits

What are Voluntary Benefits?

Voluntary Benefits are offered to strengthen your overall benefits package. You customize the benefit based on need and affordability.

- Ownership – Policies are fully portable and belong to you if you leave your employer, same price and same plan
- Benefits are payroll deducted
- **Cash benefits are paid directly to you, not to a hospital or to a doctor**
- **Benefits are paid regardless of any other coverage you may have**
- Level premiums—Rates do not increase with age
- Guaranteed Renewable
- Designed to provide additional cash flow to assist with out of pocket medical costs and other bills

The Voluntary Benefits offered are **Accident Insurance and Universal Life with Long Term Care Insurance** from Trustmark.

Trustmark Accident Plan

A plan that helps pay for the unexpected expenses that result from an accident

- **On and off the job coverage** = 24 hours per day, 7 days a week
- Family coverage available
- Sports related injuries covered as well

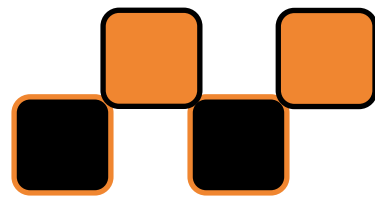
Just a few examples of benefit included in the plan:

- Emergency Room Visits - \$200
- Hospitalization - \$2,000 admission benefit, \$400 per day benefit
- Fractures - up to \$10,000
- Dislocations - up to \$8,000
- Health Screening Benefit - \$100 per insured per year
- See brochure for a complete list of benefits



Semi-Monthly Payroll Deductions	Employee	Employee & Spouse	Employee & Children*	Family*
	\$9.53	\$14.54	\$17.68	\$22.69

**Dependents up to age 26 can be covered regardless of student status.*



Trustmark Universal Life with Long Term Care

Universal Life with Long Term Care includes both a death benefit and a living benefit.

- Trustmark Universal Life with Long Term Care is a permanent life insurance that is designed to match your needs throughout your lifetime. It pays a higher death benefit during your working years when expenses are high and you need maximum protection.
- The Universal Life with Long Term Care is priced to remain the same cost to you until age 100.
- The death benefit reduces at age 70 when the need for life insurance typically decreases.
- The Living Benefit, Long Term Care never reduces and is 4% of the original death benefit per month for up to 25 months.
- **If you use the Long Term Care benefit, your death benefit amount does not reduce due to the Benefit Restoration feature included.**
- Coverage available for spouse and children as well.

Special Underwriting for Initial Offereing

Guaranteed Issue (Employee Only)

The lesser of the face amount purchased by \$16 per week or \$200,000



If you waived this benefit previously, you must answer a few health questions and be approved for coverage.

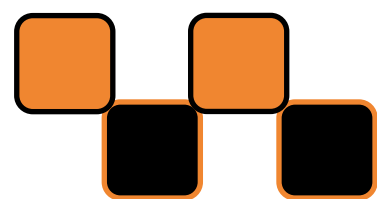
Life with Long Term Care example: \$100,000 Death Benefit

Long Term Care Benefit (LTC): Pays a monthly benefit equal to 4% of your death benefit for up to 25 months.	Before Age 70 \$100,000	After Age 70 \$100,000
Benefit Restoration: Restores the death benefit that is reduced to pay for LTC.	\$100,000	\$33,333
Total Maximum Benefit: Long Term Care Benefits may double the value of your insurance	\$200,000	\$133,333

Rates

This benefit is customized by each employee so rates vary, but can start as little as a few dollars a week. **Your specific rate will be calculated for you in the electronic enrollment system.**





Identity Theft Protection



Identity theft in the United States is a major problem that continues to be on the rise. Professional protection and assistance have become important tools in fighting the identity theft epidemic.

Thieves today can get a hold of your personal information from trash cans, dumpsters, stolen mail, and even shoulder surfing. Once thieves have your information, it's a simple matter to open new fraudulent accounts and make purchases in your name.

When you enroll in LifeLock, you can be confident knowing that they are available 24 hours a day, 7 days a week, and committed 100% to helping protect your information as if it were their own.

The standard benefits have been enhanced at no additional cost. See below for additional benefits added.

LifeLock offers Proactive Protection:

- LifeLock Identity Alert System
- Lost Wallet Protection
- Address Change Verification
- Black Market Website Surveillance
- Live Member Service Support
- LifeLock Privacy Monitor
- Reduced Pre-Approved Credit Card Offers
- Identity Restoration Support
- **Offered through payroll deduction at a 15% discount off retail rates**



Enhanced Benefits

- Stolen Funds Replacement - up to \$100,000 (was up to \$25,000)
- Fictitious Identity Monitoring
- Court Records Scanning
- Data Breach Notifications
- Investment Account Activity Alerts

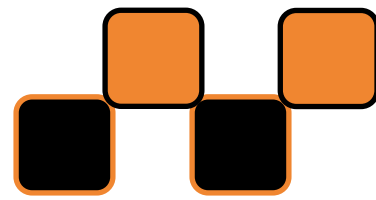
\$1 Million Total Service Guarantee

LifeLock's proactive approach works to help stop identity theft before it happens. As a LifeLock member, if you become a victim of identity theft because of a failure in their service, they will help fix it at their expense, up to \$1,000,000.

Semi-Monthly Payroll Deductions	Employee Only	Employee & Spouse	Employee & Children*	Family*
	\$4.25	\$8.50	\$7.44	\$11.69

**Employee & Children and Family Tiers: You may enroll up to 8 children with 4 of those children between the ages of 18 and 26.*

Important Contacts



Vendor	Phone	Website
Medical United Healthcare	866-633-2446	www.myuhc.com
Dental Delta Dental	800-524-0149	www.deltadentaloh.com
Vision EyeMed	866-800-5457	www.eyemedvisioncare.com
Basic & Term Life Insurance MetLife	800-438-6388	www.metlife.com
Voluntary Benefits Trustmark	800-918-8877	www.trustmarksolutions.com
Identity Theft Protection LifeLock	800-543-3562	www.lifelock.com
District Insurance Brokers Arthur J. Gallagher & Company	614-761-2901 800-435-1552	www.ajg.com
Trustmark Claims Help Explain My Benefits	888-734-6937, Option 2	service@explainmybenefits.biz





Benefit Guide Description

Please Note: This guide provides information regarding the Delaware City Schools benefit program. More detailed information is available from the plan documents and administrative contacts. The plans and policies stated in this information are not a contract or a promise of benefits of any kind, and therefore, should not be interpreted as such.
