



**Stillwater**  
AREA PUBLIC SCHOOLS



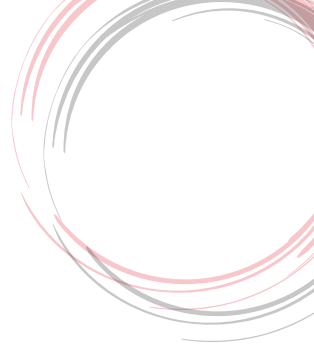
# Your Benefits

Effective July 1, 2024 - June 30, 2025



Getting started

# Making benefit selections



## Eligibility

### Covering your family

You may also cover your eligible dependents when you elect coverage for yourself.

#### Your Spouse

You may cover your legal spouse.

#### Your children

Dependent children are eligible until age 26 regardless of student or marital status.

### Ineligible

- Divorced or Legally separated spouse
- Common law spouse, even if recognized by your state
- Domestic partners, unless your employer states otherwise
- Foster children
- Sisters, brothers, parents or in-laws, etc.

## How to Enroll

Read your materials and make sure you understand all of the options available.

- Login to PlanSource to add or drop dependents, change plans, waive coverage
- In most cases, your username will be the first letter of your first name + up to six letters of your last name + last four digits of your SSN.
- Come prepared with dates of birth, social security numbers, and legal names of any dependents you live with to enroll in benefits.
- Remember to review your beneficiaries.
- Complete and submit your EOI form if your enrollment requires it.

[Enroll now!](#)

## Enrolling in coverage

Your benefit plans are in effect July 1, 2024 – June 30, 2025.

### Open Enrollment

Open Enrollment is your one chance each year to review your coverage options and make changes to your benefits.

Your choices are in effect from July - June of the following year unless you have a qualifying life event.

### If you have a qualifying life event

Qualifying life events allow you to change your coverage during the year outside of Open Enrollment. These include:

- marriage or divorce,
- birth or adoption,
- death of a covered dependent, and
- a change in eligibility through Medicare, Medicaid, or a spouse or parent's coverage.

You must request a change to your benefits within 30 days of your life event (60 days for changes involving Medicaid eligibility). Documentation may be required.



# Helpful terms & resources



## We've removed as much jargon as possible.

But you'll probably still encounter some terms as you enroll in and use your benefits, and we want you to be prepared!

### Balance billing

When you use an **out-of-network** medical or dental provider, they may bill you the difference between what they charge and the amount your insurance pays.

*Medical: balance billing is in addition to – and does not count towards – your out-of-pocket maximum.*

### Coinsurance

After you've met your deductible, you're sometimes responsible for a percentage of the cost of the medical care, dental care, or prescription medication you received. This percentage is coinsurance.

### Copay

A flat fee you pay each time you receive a copay-eligible medical, dental, or vision service or prescription medication.

### Deductible

The amount you're responsible for paying in care expenses before the medical or dental plan starts paying deductible-eligible expenses.

### In-network

In-network care is always your lowest-cost option. Networks are groups of medical, dental, and vision providers, pharmacies, and facilities that agree to discount the cost of their care or service.

### Out-of-pocket maximum

The most you'll pay for covered in-network medical care in a year. This includes your deductible, any coinsurance or copays, and prescription drugs.

The out-of-pocket maximum does not include your premium (the amount you pay for coverage), non-covered expenses, or out-of-network care that's been balance billed.

### Primary care physician

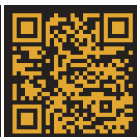
A primary care physician (**PCP**) is your main medical doctor – usually a general practitioner (GP), family doctor, internist, OB/GYN, or pediatrician (for children).

### Referral/pre-authorization

Some specialty medical providers and services require a referral from a primary doctor. These may include – but are not limited to – cardiology, psychiatry, orthopedic surgeons, rheumatology, surgery, and imaging (CT or MRI).



How to handle medical bills (4:46)



Getting started

# Contact information

Please contact your HR team with any questions!

Ashley Xiong  
xionga@stillwaterschools.org

## Annual Notices

We're required to tell you about certain rights and responsibilities you have as an employee of Stillwater Area Public Schools

[View Your Notices](#)

<b>Medical Rx</b>	<b><a href="#">BlueCross BlueShield</a></b> <a href="#">Client Portal</a>	Customer Service: 800-382-2000
<b>Dental</b>	<b><a href="#">Delta Dental</a></b> <a href="#">Client Portal</a>	Customer Service: 1-800-448-3815
<b>Vision</b>	<b><a href="#">VSP</a></b> <a href="#">Client Portal</a>	Customer Service: 1-800-877-7195
<b>Life &amp; AD&amp;D Long-Term Disability Employee Assistance Program</b>	<b><a href="#">Voya</a></b> <a href="#">Client Portal</a>	Customer Service: 800-955-7736
<b>VEBA Account Flexible Spending Account</b>	<b><a href="#">OneBridge</a></b> <a href="#">Client Portal</a>	Customer Service: 1-888-865-1628
<b>Legal</b>	<b><a href="#">ARAG</a></b> <a href="#">Client Portal</a>	Customer Service: 800-247-4184  Access Code: 10483isd
<b>Well@Work Onsite Clinic</b>	<b><a href="#">HealthPartners</a></b> <a href="#">Client Portal</a>	To Schedule an Appointment: 952-967-7661



# Medical insurance

Your Medical plan is provided through BlueCross BlueShield

Refer to the carrier benefits summary for the exact benefit levels associated with your plan.



Find an In-Network Provider Here:

[Aware Network](#)

BCBS Member Resource Guide:

[Member Resource Guide](#)

## In-Network Benefits

## \$2,000 / \$3,500 Deductible Plan

[See plan details](#)

**Plan Year Deductible  
(DED)**

\$2,000 per person  
\$3,500 family max

**Out of Pocket Maximum**

\$2,000 per person  
\$3,500 family max

### Office Visits

Primary Care, Specialist, Urgent Care

DED then 100%

### Procedures

Inpatient  
Outpatient  
Emergency Room

DED then 100%  
DED then 100%  
\$100 Copay

### Prescription drugs

Generic  
Brand  
Non-Formulary

Retail / Mail  
\$20 / \$40 Copay  
\$30 / \$60 Copay  
Not Covered

Please Refer to your plan documents for full out-of-network benefits



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# Well@Work Stillwater Schools



[See plan details](#)

## Well@Work Stillwater Area Public Schools: Health care where you work

You don't need to go out of your way to get to the doctor's office – quality health care is available close to where you work.

HealthPartners physician assistants and nurse practitioners are here and ready to help you and your family members feel great. Your Well@Work clinic can help with:

- Personalized preventive care
- Managing chronic conditions
- Lab tests and immunizations
- Minor illnesses and injuries

With Well@Work, taking charge of your health is easier and more convenient than ever.

## To Schedule an Appointment Online:

1. Visit <https://www.healthpartners.com/Stillwaterschedule> and sign in to your HealthPartners account
2. Select 'Primary care' as your visit type
3. Answer the questions about your visit – including if you want a phone or video visit



# Savings Plans



## Flexible Spending Account

[See plan details](#)

Pay for qualifying expenses with tax-free money using your Flexible Spending Account through OneBridge.

Health and dependent care expenses can add up. Paying with tax-free funds can help. Enroll in one or more flexible spending accounts (FSAs) depending on your needs.

## Health care expenses

[Eligible expenses](#)

### Health care FSA

Pay for eligible medical, prescription, dental, and vision expenses.

2024 maximum contribution \$3,200

Annual rollover amount \$640

### Dependent care FSA

Pay for eligible child or disabled adult care while you work or attend school.

2024 maximum contribution \$5,000

Married filing separately?

You can contribute up to \$2,500 per person.

Only the amount you've **actually contributed** is available for use at any one time.

**Estimate carefully!** Unused funds will be forfeited at the end of the year per IRS regulations.

## VEBA

A voluntary employee beneficiary account (VEBA) is a unique, tax-free health care savings plan funded entirely by your employer. It can pay for qualified medical expenses now or in the future, plus it can be used to pay health insurance premiums when you retire.

### Highlights

- A VEBA is offered exclusively to **enrollees of the VEBA compatible medical plan**.
- Your **employer sets up** this account for you and puts money into it. As soon as your employer funds the account, the money belongs to you.
- You are not able to contribute to an VEBA, this is done by your employer.
- Because the money isn't part of your wages, you **won't pay taxes** on it.
- You can use this money to help **pay your health care** costs at medical facilities.
- Once retired, you can use VEBA funds to **pay for health insurance premiums** like COBRA or Medicare.



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# Dental insurance

Your dental coverage is through Delta Dental.

You'll get in-network preventive care at 100% along with coverage for basic and major dental services.



Find an In-Network Provider Here:

[Network Directory](#)

## In-Network Services

## Delta Dental PPO & Premier

[See plan details](#)

<p><b>Annual Deductible (DED)</b> Basic Services, Endodontics, Oral Surgery, Major Restorative Services</p>	\$35 per person
<p>Prosthetic Repairs and Adjustments, Prosthetics</p>	\$50 per person

**Annual maximum benefit** \$1,500 Per Person

<p><b>Diagnostic &amp; Preventive Services</b> Cleanings, X-rays, Exams, Fluoride, Spacers</p>	100% Covered
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<p><b>Basic Services</b> Sealants, Emergency Treatment for Pain, Fillings, Endodontics, Periodontics, Oral Surgery</p>	Deductible then you pay 30%
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<p><b>Major Services</b> Crowns, Repair</p>	Deductible then you pay 30%
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<p><b>Prosthetics</b> Dentures, Bridges, Repairs, Standard Implant Coverage</p>	Deductible then you pay 40%
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<p><b>Orthodontic Services</b> Dependent Children only, ages 8 through 18</p>	50% up to \$1,500 Lifetime Maximum
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Please Refer to your plan documents for full out-of-network benefits



**Stay in-network to avoid balance billing** (the difference between what an out-of-network provider charges and the amount your insurance pays).



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# Voluntary Vision insurance

Your vision coverage is through VSP.

You'll get coverage for lenses, Frames, and contacts, with an allowance for contacts and frames.



Find an In-Network Provider:  
Select "Choice Network"

[Choice Network](#)

## In-network care

## Vision plan

[See plan details](#)

### Benefit Frequencies

Wellvision Exam	12 Months
Essential Medical Eye Care	As Needed
Lenses	12 Months
Frames	24 Months
Contact Lenses	12 Months

### Eye Exam

Wellvision Exam	\$10 Copay
Essential Medical Eye Care	\$20 per Exam

### Lenses & Frames

	\$30 Copay
Single vision Lenses	Included in Lenses & Frames Copay
Frames	20% off balance over \$130 Allowance

### Contacts

(Instead of Glasses)

\$0 copay, \$130 Allowance

**New for 2024! Vision insurance is now available to all eligible employees and dependents. To review the voluntary rates, please log-in to PlanSource.**

**Please Refer to your plan documents for full out-of-network benefits**



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# Life and AD&D & Disability insurance

## Financial peace of mind through Voya.

Life insurance pays a benefit if you pass away while you're covered. Accidental Death and Dismemberment (AD&D) insurance offers additional support if you pass away or are seriously injured due to an accident.



### Employer Paid Basic life & AD&D insurance

- The district offers basic life and AD&D coverage. Please refer to your employment contract for plan details.
- Make sure to designate a **beneficiary** for your life insurance coverage to ensure your family is cared for according to your wishes.

### Voluntary life and AD&D insurance

You may also purchase additional coverage for you, your spouse, and your eligible child(ren).

	Employee	Spouse	Child(ren)
<b>Election Increments</b>	\$1,000	\$5,000	\$5,000
<b>Coverage Amount Maximum</b>	\$300,000, Voluntary & Basic Life amount not to exceed 6x Annual Earnings	\$150,000 up to Employee Amount	\$10,000
<b>Guarantee Issue</b>	\$150,000	\$30,000	\$10,000

Voya is offering a one-time true open enrollment for the 2024-2025 plan year. Going forward you will have the chance to elect two increments up to guarantee issue at each open enrollment without needing to complete an EOI.

### Long Term Disability insurance

- The district offers long term disability coverage. Please refer to your employment contract for plan details.

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# Additional Benefits & Carrier Resources

## Legal Program

[See plan details](#)

Legal coverage is available through ARAG and can help you address common situations like:

- Wills & Estate Planning
- Tax Issues
- Real Estate & Home Ownership
- Driving Matters
- Debt-Related Matters
- Criminal Matters
- Consumer Protection

Your employer also offers a handful of non-traditional benefits through your insurance carriers to support you and your family as you juggle life's demands.

## Amplifon Hearing

**Offered Through Delta Dental**

[See plan details](#)

## TruHearing Discount

**Offered Through VSP**

[See plan details](#)

## Blue Care Advisor

**Offered Through BlueCross BlueShield**

[See plan details](#)

## Voya value adds Coming Soon!

**Offered Through Voya**

[See plan details](#)





# 2024 Benefits