



**Fairport Harbor Exempted Village
School District**

Learning Today Leading Tomorrow

Benefit Enrollment Guide

2024



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A Message from HR at Fairport Harbor Schools

At Fairport Harbor Schools, we recognize our ultimate success depends on our talented and dedicated workforce. We understand the contribution each employee makes to our accomplishments and so our goal is to provide a comprehensive program of competitive benefits to attract and retain the best employees available. Through our benefits programs we strive to support the needs of our employees and their dependents by providing a benefit package that is easy to understand, easy to access and affordable for all our employees. This brochure will help you choose the type of plan and level of coverage that is right for you.

You can also view overviews of our benefit plans by accessing our website, www.BenefitSolver.com.

Eligibility

Eligible Employees:

You may enroll in the Fairport Harbor Schools Employee Benefits Program based on the eligibility rules as defined in your collective bargaining agreements or if you are a full-time employee working at least 30 hours per week. Eligible dependents may participate in the benefits program.

Eligible Dependents:

If you are eligible for our benefits, then your dependents are too. In general, eligible dependents include your spouse and children up to age 26. If your child is mentally or physically disabled, coverage may continue beyond age 26 once proof of the ongoing disability is provided. Children may include natural, adopted, stepchildren and children obtained through court- appointed legal guardianship.

When Coverage Begins:

Newly hired employees and dependents will be effective in the Fairport Harbor Schools benefits programs on your first day of employment. All elections are in effect for the entire plan year and can only be changed during Open Enrollment unless you experience a family status event. Open Enrollment elections are effective January 1st.

Open Enrollment:

With a few exceptions, Open Enrollment is the only time of year when you can make changes to your benefits plan. All elections and changes take effect on January 1st. During Open Enrollment, you can:

- Add, change, or delete coverage
- Add, or drop dependents from coverage
- Enroll, or re-enroll in dependent or health care flexible spending accounts. To continue your FSA benefits, you must re-enroll each plan year.

If you do not make your 2024 benefit elections, you will automatically be defaulted to your prior year's elections.

Click to watch & learn more!



Family Status Change:

A change in family status is a change in your personal life that may impact your eligibility or dependent's eligibility for benefits. Examples of some family status changes include:

- Change of legal marital status (i.e., marriage, divorce, death of spouse, legal separation)
- Change in number of dependents (i.e., birth, adoption, death of dependent, ineligibility due to age)
- Change in employment or job status (spouse loses job, etc.)

If such a change occurs, you must make the changes to your benefits within 30 days of the event date. Documentation may be required to verify your change of status. Failure to request a change of status within 30 days of the event may result in your having to wait until the next open enrollment period to make your change. Please visit www.benefitsolver.com.



At the Doctor's Office

It's recommended that you choose an in-network primary care physician (PCP) for your medical coverage, even though it is not required. A PCP can be your Family Practitioner, Internist, General Medicine, Pediatrician, or an OB/GYN (Obstetrician and Gynecologist). Each member of your family may have a different PCP.

If you are newly enrolled in medical benefits, make an appointment with your PCP- even if you're NOT sick once the plan year has begun. This relationship will set the foundation for staying healthy—today and well into the future.

Network Provide/Facility Search

Make sure that your provider or facility is in-network. To locate a network provider, follow the steps below:

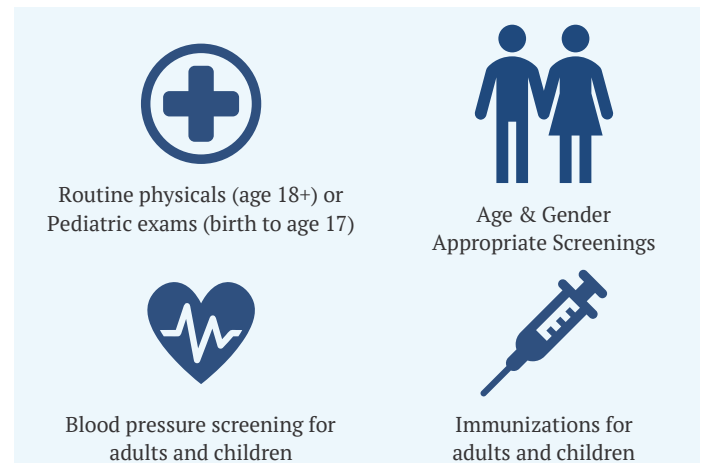
- Visit www.medmutual.com, select Find a Doctor.
- Choose provider type, enter zip code, and search the SuperMed Plus PPO Network

Preventive Care

You and your family have access to a wide range of preventive services under the Affordable Care Act. These services are 100% covered by your medical plan when using in-network providers. For more details about the covered services please visit

www.healthcare.gov/coverage/preventive-care-benefits.

Common preventive services include:



Member Service Portal

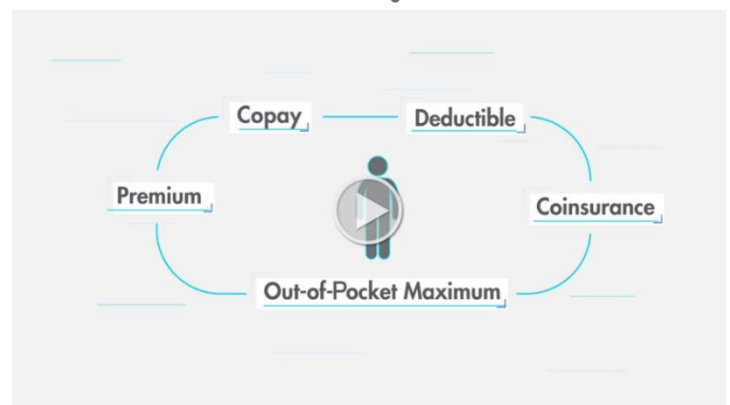
Your medical carrier's member portal is your access to secure, personalized services with interactive health tools built around you, your benefits, and your health. Access the Medical Mutual portal at www.medmutual.com.

Once you are registered your personal health information will be available to you 24/7, including:

- Finding care
- Managing prescriptions
- Managing claims
- Staying healthy
- Getting coverage and cost details






Need your health data on the run? Download your free carrier app from the App Store or Google Play. Use your mobile device to search for doctors, hospitals and more! Just search for Medical Mutual.

Click to learn about Key Insurance Terms!



What Are My Options For Care?

You have many options for how and where you can receive care through your Medical Mutual medical plan. But which one is best for your situation? Use the chart below to help you decide and see the benefit grid on the next page for service costs.

Care Center	What is it?	What can they treat?
NurseLine 	<ul style="list-style-type: none"> Staffed by registered nurses Resource for guidance during natural catastrophes or health outbreaks Available 24/7/365 days a year at NO COST 	<ul style="list-style-type: none"> Answer general questions like “how long should I ice my sprained ankle?” Give advice/referrals of where to go for treatment e.g. ER or primary care doctor
Telemedicine / Virtual Visits 	<ul style="list-style-type: none"> Convenient, low-cost option for treating common, non-urgent health concerns A doctor will diagnose the issue over the phone and write a prescription, if necessary. Available 24/7/365 days a year, by web, phone or mobile app 	<ul style="list-style-type: none"> Minor illnesses Minor infections Cold and flu symptoms Bronchitis Allergies Mental health Headaches/migraines And more...
Doctor's Office 	<ul style="list-style-type: none"> Routine care or treatment for a current health issue Your primary doctor knows you and your health history To manage your medications To refer you to a specialist Normally available Monday-Friday. Check with your provider for actual office hours. 	<ul style="list-style-type: none"> Routine checkups and preventive services Immunizations Minor injuries, such as sprains Illnesses Manage your general health and chronic conditions
Urgent Care Clinic 	<ul style="list-style-type: none"> Treatment of non-life-threatening injuries or illnesses Staffed by qualified physicians Generally open night and weekends; some open 24/7 	<ul style="list-style-type: none"> Cold and flu symptoms Minor accidents or falls Minor sprains or fractures Minor cuts and burns Vomiting, diarrhea
Emergency Room 	<ul style="list-style-type: none"> Immediate treatment for serious, life-threatening conditions. Ready to treat any critical situation Can be hospital-based or freestanding Available 24/7/365 days a year 	<ul style="list-style-type: none"> Chest pain Difficulty breathing Severe abdominal pain Broken bones Head injuries Uncontrolled bleeding Seizures Coughing or vomiting blood

Medical Insurance



Medical Benefits

Fairport Harbor Schools will continue to offer medical coverage through Medical Mutual of Ohio. The charts below are a brief outline of what is offered. Please refer to the summary plan description for complete plan details.

	CDHP		Standard Plan 1 with Fairport HRA		MedFlex
	In-Network	Out-of-Network	In-Network	Out-of-Network	Network
Annual Deductible					
Individual	\$3,200	\$6,000	Plan: \$500 You Pay: \$250	\$1,000	\$500
Family	\$6,000	\$12,000	Plan: \$1,000 You Pay: \$500	\$2,000	\$1,000
Annual Coinsurance Limit (After meeting your deductible, you will pay a portion of the cost)					
Coinsurance	10%	50%	20%	40%	20%
Individual	\$800	\$2,000	Plan: \$2,000 You Pay: \$1,000	\$4,000	\$2,000
Family	\$2,000	\$4,000	Plan: \$4,000 You Pay: \$2,000	\$8,000	\$4,000
TOTAL: Annual Deductible+Coinsurance Limit (if you meet this amount, your coinsurance turns to 0%)					
Individual	\$4,000	\$8,000	Plan: \$2,500 You Pay: \$1,250	\$5,000	\$2,500
Family	\$8,000	\$16,000	Plan: \$5,000 You Pay: \$2,500	\$10,000	\$5,000
Physician Office Visit					
Primary Care	10% after deductible	50% after deductible	20% after deductible	40% after deductible	20% after deductible
Specialty Care	10% after deductible	50% after deductible	20% after deductible	40% after deductible	20% after deductible
Preventive Care					
Adult Periodic Exams	100%	50% after deductible	100%	50% after deductible	100%
Well-Child Care	100%	50% after deductible	100%	50% after deductible	100%
Diagnostic Services					
X-ray and Lab Tests	10% after deductible	50% after deductible	100%	40% after deductible	20% after deductible
Urgent Care Facility	10% after deductible	50% after deductible	20% after deductible	40% after deductible	20% after deductible
Emergency Room Facility Charges*	10% after deductible	10% after deductible	\$75 copay per visit	\$75 copay per visit	\$200 copay per visit
Inpatient Facility Charges	10% after deductible	50% after deductible	20% after deductible	40% after deductible	20% after deductible

	CDHP		Standard Plan 1 with Fairport HRA		MedFlex
	In-Network	Out-of-Network	In-Network	Out-of-Network	Network
Maximum Out-of-Pocket – Federal Mandate: Deductible+Coinsurance+Copays					
Individual	\$4,000	N/A	\$6,600	N/A	\$6,600
Family	\$8,000	N/A	\$13,200	N/A	\$13,200
Health Savings Account Feature – Only available if you are enrolled in CDHP					
IRS Maximum Contribution	Single: \$4,150 Family: \$8,300 (Extra \$1,000 catch up contribution for age 55+)		N/A	N/A	N/A
LCSC Contribution to Employee HSA on initial enrollment only	Single: \$250 Family: \$500		N/A	N/A	N/A
District Contribution to Employee HSA on initial enrollment only	Single: \$1,500 Family: \$3,000		N/A	N/A	N/A
	CDHP		Standard Plan 1 with Fairport HRA		MedFlex
	In-Network	Out-of-Network	In-Network	Out-of-Network	Network
Outpatient Facility and Surgical Charges	10% after deductible	50% after deductible	20% after deductible	40% after deductible	20% after deductible
Mental Health					
Inpatient	10% after deductible	50% after deductible	20% after deductible	40% after deductible	20% after deductible
Outpatient	10% after deductible	50% after deductible	20% after deductible	40% after deductible	20% after deductible

What is an HRA (Health Reimbursement Arrangement)?

An HRA is a method by which the District purchases a plan design from the carrier for the lower premiums. In turn, the District agrees to pay a portion of the member's out of pocket costs under the plan **when it is used**. For Standard Plan 1, the District is picking up a portion of the Deductible. Claims will be processed according to the plan design; however, Medical Mutual will take another step and break down the portion of that deductible to be paid by the District vs the member responsibility. An invoice is sent to the District for those claims that applied and the provider is paid accordingly. As a member, you are only responsible for the amount noted as **"You Pay"** on the comparison chart.

Waive Medical Benefits: Insurance Rebate Option

Eligible employees have the option to participate in health insurance benefits offered by the District. If an employee elects not to receive **health insurance benefits**, they shall be eligible to receive a **waiver** that will be paid annually. Employees choosing to receive a **waiver** will be responsible to notify the Treasurer's Office annually as part of the District's open enrollment process.

Prescription (Rx) Insurance

Click to watch & learn more!

Fairport Harbor Schools offers prescription coverage administered through Medical Mutual of Ohio via Express Scripts (ESI).

For information on your prescription coverage and to find a network pharmacy, please visit www.express-scripts.com or call (800) 417-1961.



Your cost is determined by the tier assigned to the prescription. The below chart is an outline of the cost by tier level. Some drugs will be subject to a coverage management review process that may require your doctor to submit information requesting approval.

If you have a Maintenance Drug, one you take every day, week, or month; take advantage of the 90-day supply program with your medical plan. Please see www.express-scripts.com for more information.

	CDHP	Standard Plan 1 with Fairport HRA	MedFlex
30-Day Supply at Retail Pharmacy			
Generic (Tier 1)	10% after deductible	\$10 copay	\$10 copay
Preferred (Tier 2)	10% after deductible	\$30 copay	\$30 copay
Non-Preferred (Tier 3)	10% after deductible	\$50 copay	\$50 copay
Federal ACA Preventive Drugs	0%	\$0 copay	\$0 copay
90-Day Supply at Retail Pharmacy or Home Delivery Program			
Generic (Tier 1)	10% after deductible	\$20 copay	\$20 copay
Preferred (Tier 2)	10% after deductible	\$60 copay	\$60 copay
Non-Preferred (Tier 3)	10% after deductible	\$100 copay	\$50 copay
Federal ACA Preventive Drugs	0%	\$0 copay	\$0 copay

For additional tips to save on your prescription costs, please review the videos below:





Dental Insurance

Dental Benefits

Regular dental checkups can help find early warning signs of certain health problems, which means you can get the care you need to get healthy. Fairport Harbor Schools offers a dental program through Delta Dental. To find a dentist by name or location, go to www.deltadentalOH.com or call the number listed on the back of your ID card. Please refer to the summary plan description for complete plan details.

Note: You must contact the Treasurer’s office for enrollment in Dental.

	Delta Dental
	Schedule of Benefits
Annual Deductible	
Individual	\$25
Family	\$75
Waived for Preventive Care?	Yes
Annual Maximum	
Per Person / Family	\$1,500
Preventive	Plan Pays: 100%
Basic	Plan Pays: 80%
Major	Plan Pays: 25%
Orthodontia	
Benefit Percentage	Plan Pays: 100%
Adults (and Covered Full-Time Students, if Eligible)	No
Dependent Child(ren)	Limited to age 19
Lifetime Maximum	\$1,000 per eligible member

Vision Plan

Administered by VSP Vision Care

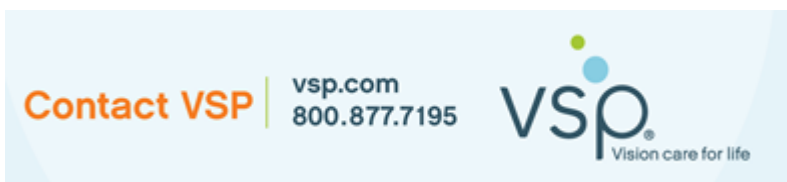
Sight, it's a beautiful thing and not to be taken for granted. Whether you want to be incognito and wear contact lenses or stand out in the crowd with the latest stylish frames, this vision plan has you covered. Fairport Harbor Schools offers a vision plan for both you and your family through VSP. While you have the option of using any provider for your vision care costs will be lower using an in-network provider.



Benefits	VSP Vision Care	
	In-Network Benefits (VSP Choice Network)	Out-of-Network Benefits
Copay		
Routine Exams	\$10 copay	Reimbursed up to \$45
Lenses		
Single Vision Lenses	\$15 copay	Reimbursed up to \$30
Bifocal Lenses	\$15 copay	Reimbursed up to \$50
Trifocal Lenses	\$15 copay	Reimbursed up to \$65
Frames		
Retail Equivalent	\$150 allowance, 20% discount after	Reimbursed up to \$70
Contact Lenses**		
Necessary / Prescribed	\$15 copay	Reimbursed up to \$210
Elective Conventional	\$150 allowance	Reimbursed up to \$105
Frequency		
Routine Exams		Calendar Year
Lenses or Contacts		Calendar Year
Frames		Calendar Year

Getting Started is a breeze.

- Find the right VSP doctor for you. You'll find plenty to choose from at vsp.com or by calling 800-877-7195
- Already have a VSP doctor? Make an appointment today and tell them you are a VSP member.
- Check out your coverage and savings. Visit vsp.com to see your benefits anytime and check out how much you saved with VSP after your appointment.
- No ID card necessary or claim forms to complete.



Life Insurance

Most employees receive Basic Life insurance. In addition to the employer paid Basic Life and AD&D coverage, you have the option to purchase additional voluntary life insurance to cover any gaps in your existing coverage that may be a result of age reduction schedules, cost of living, existing financial obligations, etc. Your election, however, could be subject to medical questions and evidence of insurability.

Voluntary Life Insurance

You may purchase additional Life insurance with One America if you want additional coverage. Your premium will depend on your age and the amount of coverage you elect.

Voluntary Life & AD&D		
Coverage Level	Coverage Amount	Guarantee Issue
Employee Only	\$10,000 up to \$300,000 Maximum (Increments of \$1,000)	\$200,000
Spouse	\$5,000, \$10,000, \$15,000 or \$20,000 options	\$20,000
Child(ren) to age 26	\$2,500, \$5,000, \$7,500 or \$10,000 options	\$10,000

Important Reminder!

Be sure to assign a beneficiary or living trust to ensure your assets are distributed according to your wishes.



Employee Assistance Program (EAP)

Impact Solutions

Available to ALL Employees

Employee Assistance Program Benefits

At the Fairport Harbor Schools, we have a genuine, compelling, and relentless desire to improve lives, which is why we are pleased to offer every employee and all residents of the employees home the benefit of an Employee Assistance Program (EAP) through Impact Solutions. ***You do NOT need Fairport Harbor Schools health insurance to access the program.***



The EAP program includes and is:

- ✓ 100% Confidential
- ✓ Up to 6 complimentary counseling sessions per person, per occurrence with face-to-face, telephonic, video, or chat options
- ✓ Services cover ALL residents of the home
- ✓ Provided at no cost to you

Impact Solutions is here to help you through many difficult situations, resources include but are not limited to:

- ✓ Mental Health Counseling
- ✓ Work/Life Referral Services
- ✓ Legal/ Financial / Identity Theft Consultation
- ✓ Medical Advocacy
- ✓ Life/ Wellness Coaching
- ✓ Personal Assistant
- ✓ Live Immediate Assistance

Have Questions?

Contact Impact Solutions



Call: 800-227-6007



Online: www.myimpactsolution.com
Company Code: LCSCeap

How to Enroll

ENROLLING IS EASY

LOG IN

Visit www.BenefitSolver.com from any computer or smart device and **Login** with your **User Name** and **Password**.

New users must **Register** and answer security questions. Our case-sensitive company key is **lakecounty**.

GET STARTED

Click **Start Here** and follow the instructions to make your benefit choices by the deadline on the calendar. If you miss the deadline you will have to wait until the next annual enrollment period to enroll or make changes.

FIND INFORMATION

View plan details, carrier specifics and resources in the **Reference Center**.

MAKE YOUR ELECTIONS

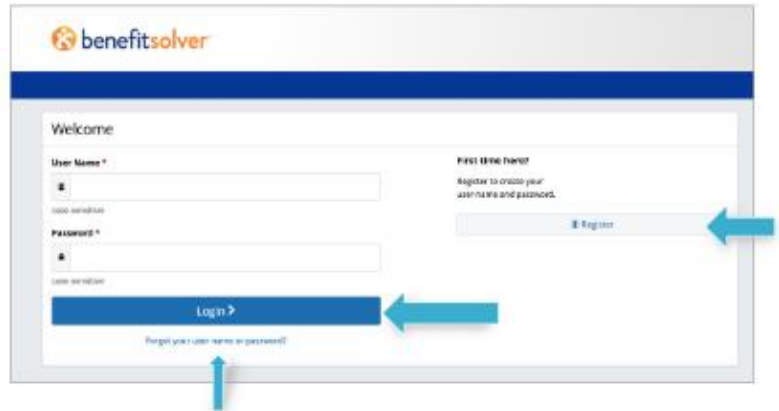
Using **Previous** and **Next** to navigate, review your options as you move through the enrollment process.

Select plan(s) and who you would like to cover.

Track your choices and costs along the left side.

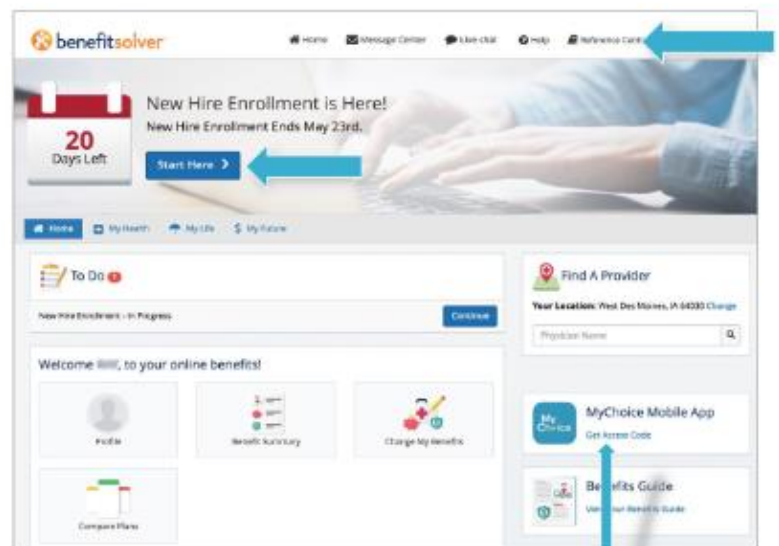


www.BenefitSolver.com
Company Key: **lakecounty**
Member Services: **XXX-XXX-XXXX**



Need to reset your user name or password?

1. Click **Forgot your user name or password?**
2. Enter your Social Security number, birth date and our company key, **lakecounty**.
3. Answer your security phrase.
4. Enter and confirm your new password, then click **Continue** and **Login** with your new credentials.



Download the MyChoiceSM Mobile App

1. Visit your device's app store and download the **MyChoice by Businessolver[®] Mobile App**.
2. Visit www.BenefitSolver.com to **Get Access Code**.
3. Activate the app with your access code. (If you don't use the code within 20 minutes, you'll need to generate a new one.)
4. Follow the instructions within the Mobile App to have easy access to your benefits on the go.



REVIEW AND CONFIRM

Make sure your personal information, elections, dependents and beneficiaries are accurate and **Approve** your enrollment.

To finalize your enrollment, click **I Agree**.

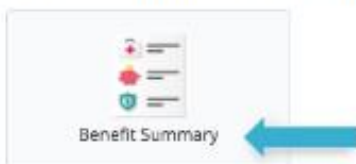
FINALIZE

When your enrollment is complete, you will receive a confirmation number and you can **Print Benefit Summary**.

Your **To Do** list will notify you if you have any additional actions needed to complete your enrollment.

REVIEW YOUR BENEFITS

You have year-round access to a benefits summary that shows your personal selections. Click **Benefit Summary** on the homepage to review your current benefits at any time.

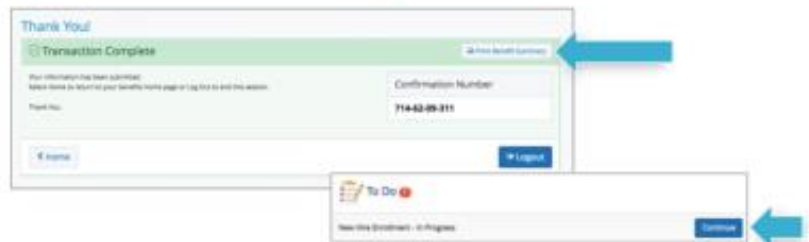
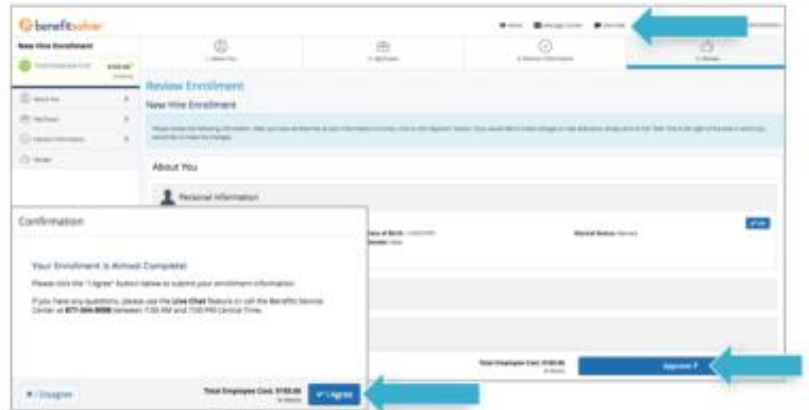
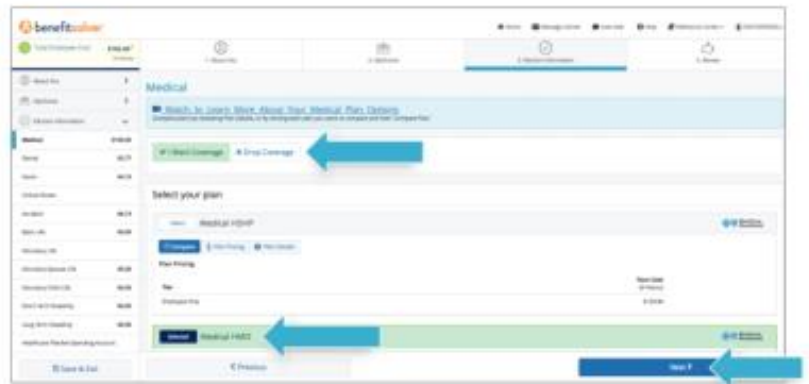


Select the reason for change that applies and enter the date of the event.



www.BenefitSolver.com

Company Key: lakecounty



Change your benefits

Once approved, your benefit elections will remain in effect until the end of the plan year, unless you have a qualifying life event such as marriage, divorce or having a baby. Find detailed information in the **Reference Center**.

1. Click on **Change My Benefits**.
2. Select **Life Event** and the event type.
3. Review your options and follow the election steps outlined above to complete your changes.

****IMPORTANT:** You must make changes within **30 days** of the event, and provide required documentation.

Change your beneficiary(ies)

1. Click on **Change My Benefits**
2. Select **Basic Info** and **Change of Beneficiary**.
3. Follow the prompts to complete your change.

Beneficiary changes can be made at any time of the year.

Maximize Your Benefits

Education is important to us, and it is important to help educate on your healthcare plan and ways to understand and maximize it! Please take a few minutes to review the helpful videos below.

How to Stretch Your Healthcare Dollars



How to Read an EOB



Benefit Resources

Carrier Contacts

Additional information regarding benefit plans can be found on www.BenefitSolver.com.

	CARRIER	PHONE NUMBER	WEBSITE
Medical PPO	Medical Mutual	(800) 315-3137	www.medmutual.com
Dental	Delta Dental	(800) 524-0149	www.deltadental.com
Vision	VSP	(800) 877-7195	www.vsp.com
Pharmacy / Rx	Express Scripts	(800) 417-1961	www.express-scripts.com
Employee Assistance Program	Impact Solutions	(800) 227-6007	www.myimpactsolutions.com
Life Insurance	AUL – One America	(800) 553-5318	www.oneamerica.com
On-Line Enrollment Portal	BenefitSolver	(833) 989-1966	www.benefitsolver.com

This brochure summarizes the benefit plans that are available to Lake County Schools Council Health Care Program eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. The information provided in this brochure is not a guarantee of benefits.