

Delaware City Schools
2025



BENEFITS

GUIDE

Welcome to your 2025 Benefits Enrollment

We are honored to present your 2025 Benefit Options! The elections you make during your enrollment will be effective through December 31, 2025.

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.

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. With the passage of H.B. 201, 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.*

Table of Contents

Enrollment Process	3
Mobile App	4
Log In Instructions	5
Health Savings Account (HSA)	6
Medical	7
Dental	8
Vision	9
Voluntary Benefits	10
Universal Life	11
Term Life and AD&D	12
Identity Protection	13
Important Contacts	14

What is Open Enrollment?

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



When Can I Make Changes to My Benefits?

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.

Enrollment Process

OPEN ENROLLMENT

OCT 7 - OCT 18



This is an Active Enrollment.

Everyone must complete an enrollment, even if there are no changes.

Options to Enroll for Benefits Effective January 1, 2025

Self - Service Enrollment Online

- Complete your enrollment online using any computer with internet access. Benefits information and login credentials can be found on our benefits resource website.

<https://www.embbenefits.com/delaware/>

Mobile App

You are able to complete your enrollment from the app.

- Review the Benefits guide, important documents, videos, and plan details

Stay up to date with information from your benefits team during open enrollment and throughout the year



After downloading the app, enter the company code:

delaware
case sensitive

Benefits Counselor Phone Enrollment

Have questions regarding the enrollment system or benefits covered?
Contact the EMB Enrollment Call Center!

- Benefits Counselors will answer your questions and enroll you in your benefits for the new plan year, effective January 1, 2025.

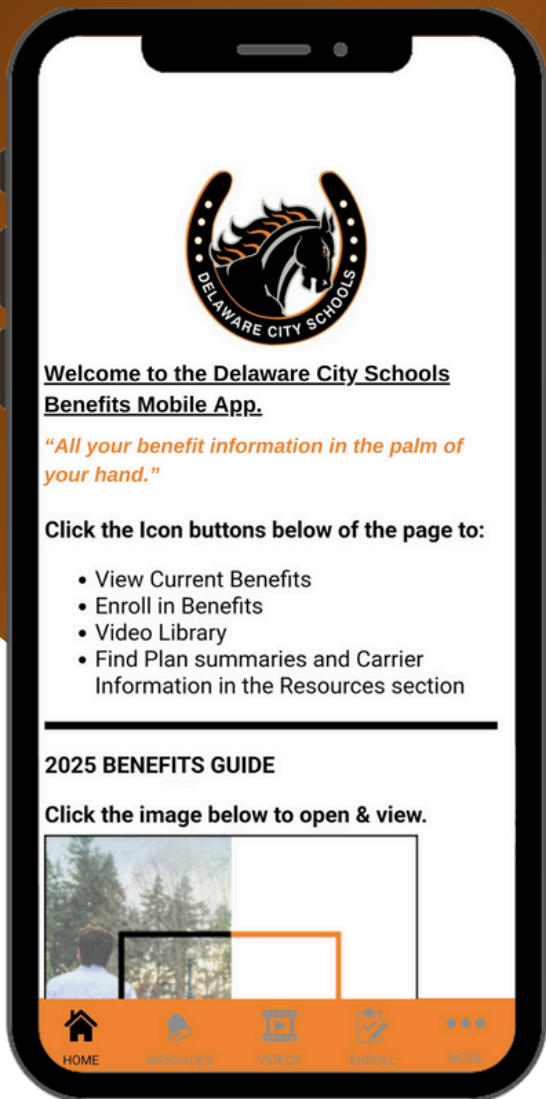
Dates: Oct. 10 - Oct. 16

Hours: 9:00 am - 5:00 pm EST (M-F)

Ph: 740-202-9017

BENEFITS MOBILE APP

Delaware City Schools
provides you a Mobile
App that allows you to
manage your benefits.



SCAN THE QR CODE TO
DOWNLOAD THE MOBILE APP



**Please Be Sure To Enable Push
Notifications**

Once downloaded,
open the app and follow
these instructions:

- Enter your Name
- Enter your Primary Email Address
- Enter your company code: **delaware** (case sensitive)



STAYING INFORMED

Your company will communicate important benefit and general company information throughout the year via the benefits mobile app.



STAYING CONNECTED

You may complete your enrollment, process a qualifying life event, review your current benefits and much more.



STAYING ENGAGED

You will be able to review employee benefit guides, plan summaries, carrier contact information and educational benefit videos.



Login Instructions

ACCESSING EMB ENROLL

Access www.embbenefits.com/delaware and select “Log Into Your Benefit System To Enroll or View Benefits”

Account Access Steps

1. Enter Username

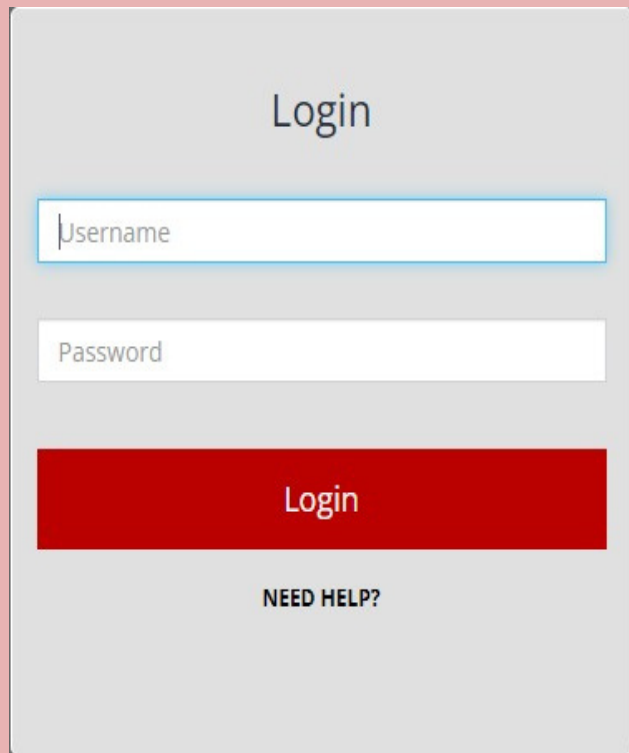
**1st Initial of your First Name AND
Up to the 1st Six Characters of your Last
Name AND Last 4 of SSN**
**Example: Tim Johnson SSN 1234 =
tjohnso1234**

2. Enter Password: **Delaware2025**

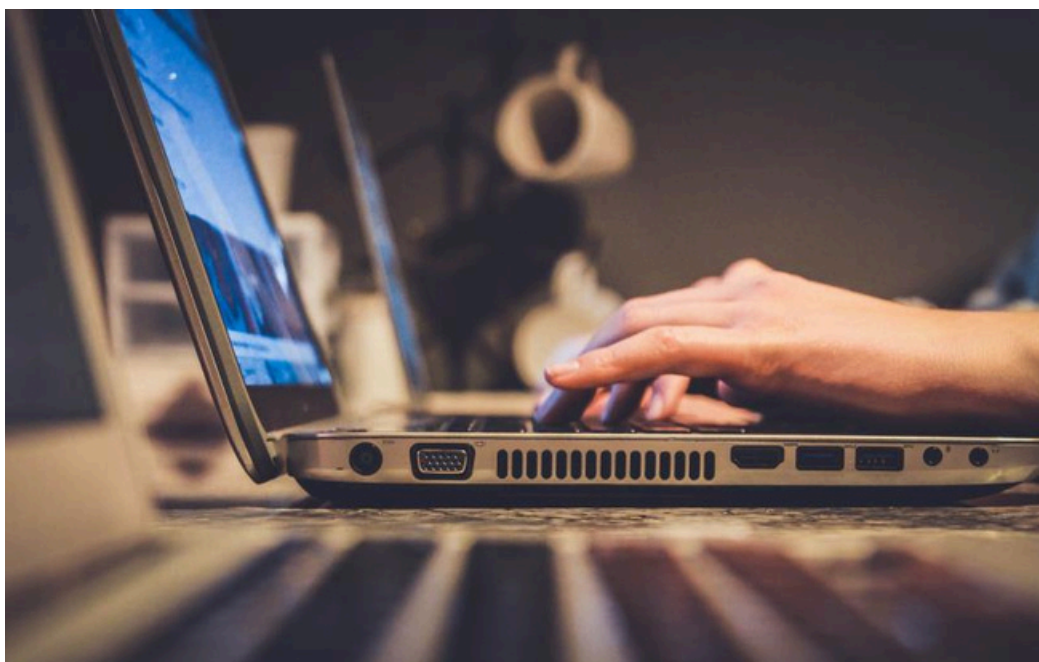
If you already created an account and are unable to log in, click “**Need Help?**” Follow the prompts to have a password sent or to retrieve your user name. Passwords are sent to your email on file with us.

Once You Have Access

Select “**Get Started**” from the middle section of the screen.



For detailed visual login and online enrollment instructions, click [here](#).



Health Savings Account (HSA)

Consider the benefits of a Health Savings Account. By contributing to a Health Savings Account, you lower your taxable income, reducing the amount you pay in taxes each year. The money in this account can be used to pay for eligible health care expenses. A Health Savings Account (HSA) balance 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. *We strongly encourage you to set aside some money each pay period to put into your Health Savings Account. The Board will contribute \$1,100 for Single and \$2,200 for Family toward your deductible.*



Basic Understanding of HDHP Plans



Basic Understanding of HSA Plans

HSA

What is a Health Savings Account?

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 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 2025 may contribute up to \$4,300 for a single individual or \$8,550 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 based on your single or family enrollment. Employees who are age 55 and older, may contribute an additional \$1,000 to their savings account, as part of a "Catch Up" provision under the IRS rule.

	Board Annual Contribution	Annual Employee Contribution Maximum	Combined Annual HSA Maximum Contribution	+55 catch Up	Potential HSA Contribution
Single	\$1,100	\$3,200	\$4,300	\$1,000	\$5,300
Family	\$2,200	\$6,350	\$8,550	\$1,000	\$9,550

If you answer YES to any of the following questions, you are NOT eligible to open or fund a Health Savings Account:

1. In 2025, will you be covered by another non-qualified medical plan such as a PPO, Medicare or Tricare? In 2025,
2. will you or a spouse participate in a *General Purpose* Flexible Spending Account? In 2025, will you be enrolled in
3. either Medicare Part A, Part B, Part C or Part D? In 2025, if you are under age 26, will you be claimed as a
4. dependent on your parents tax return, or covered under your parents health insurance plan?

If you do not qualify to open or fund an HSA based on the questions above, the Board will contribute \$1,100 for Single and \$2,200 for Family into an HRA account for you to use. (This account will be a use it or lose it during 2025)

Please Note: If you or your spouse is a retiree of OPERS, you will not be eligible for an HSA. Please contact Jill Corwin at corwinji@delawarecityschools.net or 740-833-1123.

Medical

United Healthcare HDHP

	In Network	Out of Network
Deductible		
Individual/Family	\$1,650/\$3,300	\$3,300/\$6,600
Coinsurance	10%	30%
Out of Pocket Maximum		
Individual/Family	\$3,300/\$6,600	\$6,600/\$13,200
Doctor's Office		
Office Visit	\$25 copay after deductible	30% after deductible
Preventive Care Services	No Charge	30%
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
Other Services		
Maternity Services	10% after deductible	30% after deductible
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

Dental

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

Your dental plan allows you to visit any licensed dentist you like but, choose a **Delta Dental of Ohio PPO** dentist and your out of pocket costs will be less. Locate a participating provider at www.deltadentaloh.com.



Delta Dental PPO

	PPO Dentist	Premier Dentist	Non-Participating Dentist
Calendar Year Deductible			
Individual/Family	\$25 per person		
Annual Maximum	\$2,000		
Preventive Services Exams, Cleanings, X-Rays, etc.	Plan pays 100%, deductible is waived		
Basic Services Fillings, Oral Surgery, Root Canals, etc.	80% Covered, after deductible	80% Covered, after deductible	80% Covered, after deductible
Major Services Crowns, Bridges, Implants, Dentures, etc.	80% Covered, after deductible	80% Covered, after deductible	80% Covered, after deductible
Orthodontics			
Lifetime Annual Maximum	\$2,000 per person		
Deductible does not apply to Orthodontic Services	60% Covered		

** 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.

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

Vision



Regular eye examinations cannot only determine your need for corrective eyewear, but also may detect general health problems in their earliest stages. Include an annual vision exam as part of your annual preventive care.

When you use a provider who participates in the **EyeMed Vision Care** network, you will experience a greater benefit and a lower cost for care. Locate a participating provider at www.eyemedvisioncare.com under the Insight Plan H Network.

	In Network	Out of Network
Comprehensive Eye Exam	<i>Once Every 12 Months</i>	<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	<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	N/A
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

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



Trustmark Accident Plan



What is Accident Insurance?

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 Only	Employee & Spouse	Employee & Children	Family
	\$9.54	\$14.54	\$17.68	\$22.68

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

Trustmark Universal Life with Long Term Care



What is Universal Life with Long Term Care Insurance?

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 is available for spouse (\$25,000) and children (child term rider).
- **Employee must enroll in coverage in order to cover spouse and/or children.**
- New elections available through age 64. If you are currently enrolled in this benefit, you will be able to keep it regardless of age.

Special Underwriting for Initial Offering
Guaranteed Issue - \$100,000 (Employee Only)



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.**

Term Life and AD&D

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 through **MetLife** to all benefit eligible employees at no cost to the employee based on your contract.

Voluntary Supplemental 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.

How much can I get?

Employee:

You may purchase in \$10,000 increments up to a maximum of \$500,000, not to exceed 5x annual salary.

Spouse:

You may purchase in \$5,000 increments up to a maximum of \$100,000, not to exceed 50% of your Voluntary Life Benefit, for your spouse.

Child(ren):

You may purchase in \$1,000 increments up to a maximum of \$10,000 for your child(ren).

Guarantee Issue (At Initial Offering Only)

Employee - \$100,000 or 3x your salary, whichever is less

Spouse - \$25,000 or 3x your salary, whichever is less

Child(ren) - \$10,000 or 3x your salary, whichever is less

NOTE: You must carry employee voluntary coverage to be eligible for spousal or dependent voluntary coverage.

Monthly Employee Rates for Voluntary Term Life

Age Band	Rate per \$1,000	Age Band	Rate per \$1,000
<30	\$0.054	50 - 54	\$0.215
30 - 34	\$0.059	55 - 59	\$0.322
35 - 39	\$0.070	60 - 64	\$0.455
40 - 44	\$0.096	65 - 69	\$0.767
45 - 49	\$0.142	70+	\$1.435

Monthly Spouse Rates for Voluntary Term Life

Age Band	Rate per \$1,000	Age Band	Rate per \$1,000
<30	\$0.075	50 - 54	\$0.411
30 - 34	\$0.077	55 - 59	\$0.718
35 - 39	\$0.093	60 - 64	\$1.616
40 - 44	\$0.135	65 - 69	\$2.832
45 - 49	\$0.226	70+	\$4.963

Monthly Child Rates per \$1,000

All Ages	\$0.195
----------	---------

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

.070	x	50	=	\$3.50
Rate per \$1,000		# of units/\$1,000		Monthly Premium

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

Identity Protection - Allstate

What is Allstate 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 Identity Protection, 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.

Allstate Identity Protection Pro+ Cyber Offers:

- Identity, financial account protection
 - Credit Monitoring
 - 24/7 support
 - Robocall Blocker
 - Stolen Funds Replacement - up to \$1,000,000
 - Dark Web Monitoring
 - Elder Fraud Center
- Lost Wallet Protection
 - Black Market Website Surveillance
 - Privacy Monitor
 - Identity Restoration Support
 - Fictitious Identity Monitoring
 - Data Breach Notifications

Per pay Payroll Deductions	Employee Only	Family*
	\$9.50	\$18.50

“Family” coverage applies to spouse, children (all ages), any dependent living in household or is supported financially by the employee, deceased family members, senior family members aged 65+



Important Contacts



Medical

United Healthcare
866.633.2446
www.myuhc.com



Basic & Term Life Insurance

MetLife
800.438.6388
www.metlife.com



Dental

Delta Dental
800.524.0149
www.deltadentaloh.com



Voluntary Worksite Benefits

Trustmark
800.918.8877
www.trustmarksolutions.com



Vision

EyeMed
866.800.5457
www.eyemedvisioncare.com



Identity Theft Protection

Allstate
800.789.2720
www.myaip.com



Delaware City Schools

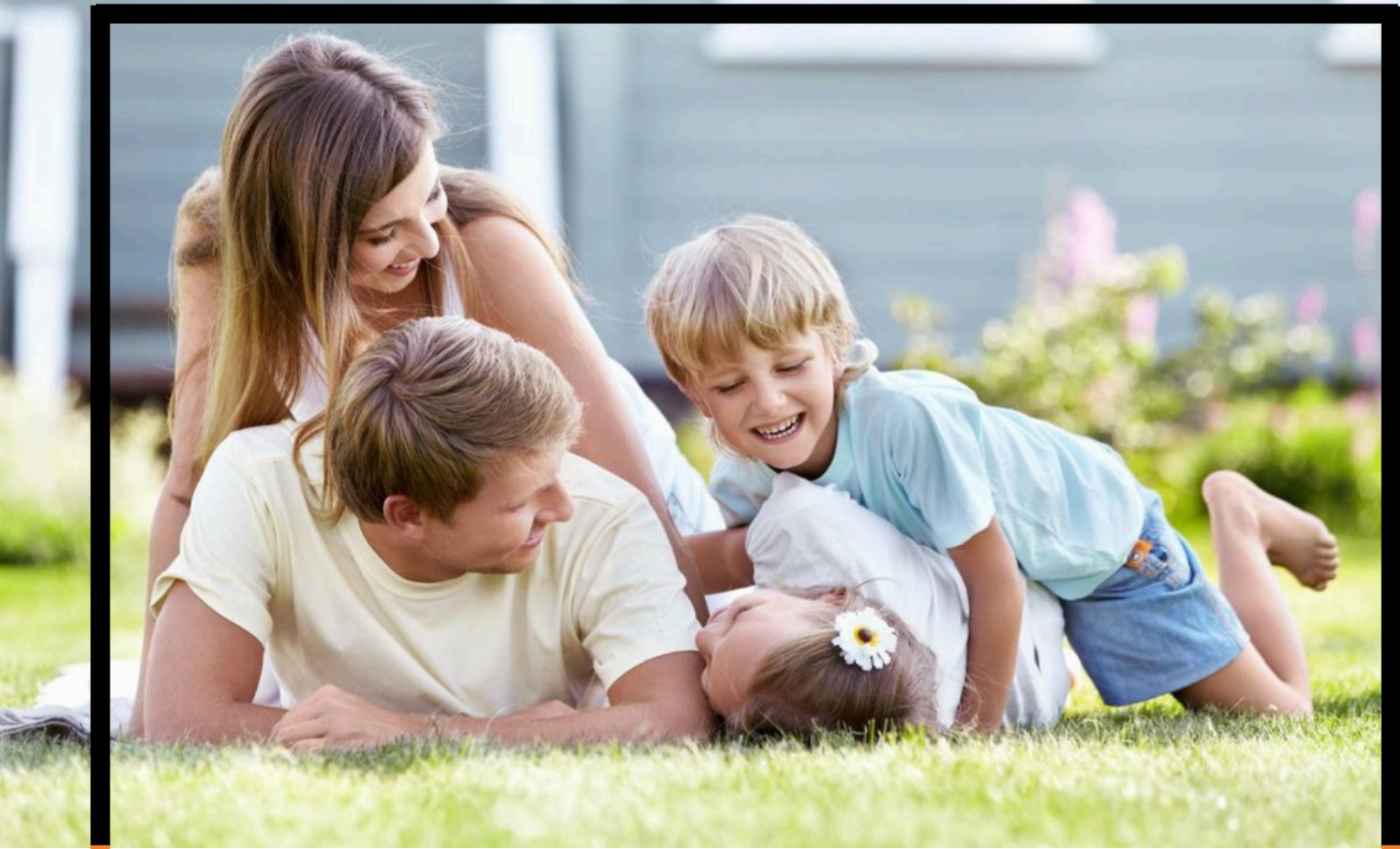
Jill Corwin, Treasurer/CFO
740.833.1123

Laura Hallett, Payroll & Benefits
740.833.1115

Sarah Green, Accountant
740.833.1112

District Insurance Brokers

Arthur J. Gallagher & Company
614.761.2901
800.435.1552
www.ajg.com



Benefit Guide Description

This summary of benefits is not intended to be a complete description of Delaware City Schools' insurance benefit plans. Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document, rather than by this or any other summary of the insurance benefits provided by the plan.

In the event of any conflict between a summary of the plan and the official document, the official document will prevail. Although Delaware City Schools maintains its benefit plans on an ongoing basis, Delaware City Schools reserves the right to terminate or amend each plan in its entirety or in any part at any time.

For questions regarding the information provided in this overview, please contact your human resources representative.