

Magnet School System

2024 -2025 Benefit Guide





Welcome!

At Goodwin University Magnet School, 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.

As a reminder, we will continue to offer a variety of voluntary products that are employee paid through Aflac and Mass Mutual. You will continue to have the option of choosing a second voluntary dental plan with additional options and a comprehensive voluntary vison insurance.

June 3rd will kick off open enrollment. This open enrollment is for all 12 month employees. Your plan will be effective on July 1, 2024.

All 10 month employees will remain under LEARN until September 1st. You will have a separate open enrollment in August (TBD) with an effective date of September 1st.

All your current benefits will remain as is. If you choose not to meet with a counselor or make any changes, then your plan will carry over from last year.

<u>EACH EMPLOYEE</u> should schedule a meeting with a benefits counselor to talk about the various benefit options available to them. Sincerely, Dan Moleti Goodwin University Magnet School, Director of Human Resources & Talent

Open Enrollment





Let us do the work with you...

Benefit Counselors available for >> Phone Meeting <</p>

Enrollment is more convenient than ever

One conversation, by phone meeting, provides a comprehensive look at your benefits, from health to life insurance, from disability to supplemental insurance coverage.

We'll even help make sure you're not paying for coverage you don't need.



Contact the Call Center from 9 AM to 9 PM at (866) 707-9244 June 3rd - 14th, 2024

Do open enrollment the convenient way.

Complete open enrollment with a Benefit Counselor over the phone meeting.

Complete your Enrollment:

Schedule a consult with your Benefit Counselor:

- 1. Denise Poirier: Click on the link https://calendly.com/denise_poirier/learn-new-hires
- Jeannette Cole: Click on the link https://calendly.com/jeannette_cole/learn-open-enrollment
- 2. Or scan the QR code to get started!







Eligibility

Eligible Employees:

You may enroll in some portions of Goodwin University Magnet School Employee Benefits Program if you are a regularly scheduled employee working at least 24 hours a week. Your Benefit Counselors will be able to clarify your eligibility.

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:

The effective date for your benefits is July 1, 2024 through June 30, 2025.

All your benefit choices will be in effect for the entire plan year and can only be changed during Open Enrollment unless you experience a family status event.

Family Status Change:

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

Change of legal marital status (marriage, divorce, death of spouse, legal separation) Change in number of dependents (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 contact Goodwin University Magnet School Human Resources to make these changes.

Changes in Benefit Elections

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 the first day of the plan year. 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.

Note: Some states (currently, California, Massachusetts, New Jersey, Rhode Island, Washington D.C., and Vermont) may impose a tax on residents who do not have health insurance coverage, subject to limited exceptions.

Contact Information

Have Questions? Need Help?

Goodwin University Magnet School system is excited to offer access to the USI Benefit Resource Center (BRC), which is designed to provide you with a responsive, consistent, hands-on approach to benefit inquiries. Benefit Specialists are available to research and solve elevated claims, unresolved eligibility problems, and any other benefit issues with which you might need assistance. The Benefits Specialists are experienced professionals, and their primary responsibility is to assist you.



The Specialists in the Benefit Resource Center are available

Monday through Friday 8:00am to 5:00pm Eastern & Central Standard Time at 855-874-6699 or via e-mail at BRCEast@usi.com. If you need assistance outside of regular business hours, please leave a message and one of the Benefit Specialists will promptly return your call or e-mail message by the end of the following business day.

Customer Service

Please contact Human Resources to complete any changes to your benefits that are not related to your initial or annual enrollment.

	CARRIER	PHONE NUMBER	WEBSITE
Medical PPO	Anthem Blue Cross and Blue Shield	1-833-952-2074	www.anthem.com
Dental PPO	Anthem Blue Cross and Blue Shield	1-800-440-3619	www.anthem.com
Vision	Anthem Blue Cross and Blue Shield	1-866-723-0515	www.anthem.com
Life and AD&D	Hartford Life and Accident Insurance Co	1-888-563-1124	www.thehartford.com
Voluntary Products	AFLAC	1-800-433-3036	www.aflacgroupinsurance.com

Medical Insurance

Goodwin University Magnet Schools will continue to offer medical coverage through Anthem Blue Cross and Blue Shield. The chart on this page is a brief outline of the plan. Please refer to the summary plan description for complete plan details.

	nthem Blue Cross and B HSA Plan 58 Goodwin University M	
Benefits Coverage	In-Network Benefits	Out-of-Network Benefits
	Annual Deductible	es
Individual	\$2,000	\$2,000
Family	\$4,000	\$4,000
Coinsurance	100%	80%
	Out of Pocket Maxim	nums
Individual	\$2,500	\$2,500
Family	\$5,000	\$5,000
	Office Visits	
Primary Care	100% after deductible	80% after deductible
Specialty Care	100% after deductible	80% after deductible
	Preventive Care	9
Adult Periodic Exams	100%	80% after deductible
Well-Childcare	100%	80% after deductible
	Diagnostic Servic	es
X-ray and Lab Tests	100% after deductible	80% after deductible
Complex Radiology	100% after deductible	80% after deductible
Urgent Care Facility	100% after deductible	80% after deductible
Emergency Room Facility Charges*	100% after deductible waived if admitted	100% after deductible waived if admitted
Inpatient Facility Charges	100% after deductible	80% after deductible
Outpatient Facility and Surgical Charges	100% after deductible	80% after deductible
	Mental Health	
Inpatient	100% after deductible	80% after deductible
Outpatient	100% after deductible	80% after deductible
Inpatient	100% after deductible	80% after deductible
Outpatient	100% after deductible	80% after deductible
	Other Services	
Chiropractic	100% after deductible	80% after deductible

Anthem Blue Cross and Blue Shield HSA Plan 800858 Goodwin University Magnet Schools			
Benefits Coverage In-Network Benefits Out-of-Network Benefits		Out-of-Network Benefits	
Prescription Copays after the Deductible			
Generic (Tier 1)	\$5 сорау	20% after deductible	
Preferred (Tier 2)	\$25 copay	20% after deductible	
Non-Preferred (Tier 3)	\$40 copay	20% after deductible	
Preferred Specialty (Tier 4)	\$25 copay	20% after deductible	
Mail Order Copays			
Generic (Tier 1)	\$10 copay	20% after deductible	
Preferred (Tier 2)	\$50 copay	20% after deductible	
Non-Preferred (Tier 3)	\$80 copay	20% after deductible	
Preferred Specialty (Tier 4)	Not covered	Not covered	

Health Savings Account

Goodwin University Magnet Schools will be contributing \$750 into your HSA account as an individual and \$1,500 for a family of two or more. If this is your first year in the HSA, you will receive the contribution as a lump sum in July. After your first year in the HSA, the contribution will be made by Goodwin University Magnet Schools in two installments-One in July and the second in January.

You can choose any bank of your choice to open the HSA account. If you would like to have additional funds taken out of your paycheck to go into your HSA account on a pre-tax basis, you must fill out a form with HR and provide your banking information.

You can only contribute up to the federally mandated maximum per year into your HSA, which includes Employer plus Employee contributions: \$4,150 for Individual and \$8,300 for a Family.

Individuals 55 and older can make an additional \$1,000 "catch-up" contribution on top of the above amounts until they enroll in Medicare.

Contributions are made on a pre-tax basis through payroll deductions.

If you are enrolled in Medicare, you cannot contribute to an HSA account. Please let HR know if you are on Medicare or planning to be on Medicare.

If you leave your employer, the funds in your account are yours to keep. If you have money left in your account at the end of the year it rolls over into the next year.

Money can be used for Qualified Medical expenses above what your insurance covers according to IRS regulated QME in Publication 502

Anthem 🚭 🕅



GOOD HEALTH IS WORTH IT

Your guide to earning rewards with Wellbeing Solutions

Your whole health matters. That's why you have Wellbeing Solutions, a suite of programs to help you with your everyday health and well-being. You receive extra guidance and support in managing your health, plus you can earn monetary rewards.

Earn up to \$700 in rewards

Anthem Health Rewards¹ offers you and your covered spouse or partner up to \$700 in rewards for taking part in employersponsored health and wellness programs. You will receive your rewards through a reloadable debit rewards card or an account deposit.² You can see the status of your progress on anthem.com or download the free Sydney Health mobile app.

Includes

Anthem Health Guide

It's important to have the right resources to help you manage your health. Your benefits include a powerful program called Anthem Health Guide at no extra cost. Health guides are trained above and beyond typical customer service representatives. They use smart engagement technology to provide the optimal member experience by phone, email, web or chat.

Health guides can connect you with programs and extra support, compare costs with you and help locate doctors in your plan. They can also provide guided decision support and work with you to make sure you get the care you need when you need it.

Well-being Coach³

Well-being Coach offers multiple options to help you meet your well-being goals. Our digital coaching app offers personalized 24/7 support on the go, whenever you need it. Well-being Coach combines smart technology and proven behavioral therapy techniques to help you maintain a healthy weight or quit tobacco. You can also receive additional help on well-being topics like nutrition, activity, mindfulness and sleep. Well-being Coach is powered by Lark and accessible from the Sydney Health app.

If you prefer a helping hand or require additional support meeting your health goals, Well-being Coach gives you access to a certified Health Coach by phone. You and your coach will identify habits you want to change and develop custom action plans to achieve your health goals. No matter how you connect, you can earn rewards with Well-being Coach.

Earn up to \$300 for either Well-being Coach or ConditionCare⁴

ConditionCare reward

If you have a chronic condition like asthma or diabetes, you can receive one-on-one help from a health care professional through ConditionCare. You'll learn better ways to manage your health and reach your health goals.

Earn up to \$300 for participating in a nurse-centric program focused on helping members with high-risk conditions:

- \$100 for participating in program
- \$200 for completing program

To find out more about the program or to sign up, call the Member Services number on your ID card.



Well-being Coach Telephonic reward

Whether it's time to quit smoking, push past a weight-loss plateau, you can receive the lifestyle coaching you need from a live health coach.

Earn up to \$300 for receiving one-on-one support through live coaching for high-risk conditions of tobacco cessation or weight management:

- \$100 for participating in program
- \$200 for completing program

or

Each well-being coach is specially trained to help you meet your health goals. You can find Well-being Coach on anthem.com or the Sydney Health app. You can also call 1-833-985-8464 to speak directly with a Health Coach.

Future Moms reward - up to \$200

Moms-to-be can receive support and earn rewards. Registered nurses help them make healthy choices and follow the doctor's plan of care for a safe delivery and healthy baby.

- Receive \$100 for completing an initial maternity assessment
- \$50 for completing interim assessment
- \$50 for completing post-birth assessment

To find out more about the program or to sign up, call the Member Services number on your ID card.

Flu shot and wellness visit reward - up to \$50

For extra motivation to stay healthy, you can earn \$50 in rewards for receiving a claims-based annual preventive wellness exam and flu shot.

Visit your primary care doctor's office for your wellness exam. You can also receive a flu shot at your doctor's office, or at a pharmacy or retail clinic. Your wellness exam or flu shot do not need to be completed in any particular order or together. Be sure to submit the claims to Anthem or ask your doctor or other provider to submit them to Anthem for you.⁵

My Health Rewards Activities - up to \$150

Keep up healthy habits by tracking your activity through anthem.com, Sydney Health or the Well-bei also track rewards activities through a variety of devices, such as Apple Health Kit, Google Health, a section of Sydney Health for a full list of supported devices.



Sydney Health Activities

- Login to website or mobile app 10 points / yearly
- Connect a tracking device 15 points / yearly
- Complete the WebMD Health Risk Assessment 75 points / yea
- Read five articles or watch five videos 25 points / yearly (5 po
- Article/video topics include: exercise, healthy eating, sleep, far what's new, trending, and more
- Set an action plan 10 points / once per quarter
- Action plans include: Eat Healthy, Achieve a Healthy Weight, Ge Reduce Stress and Sleep Better
- Complete an action plan 100 points / once per quarter
- Track steps
 - Average 2,000 steps a day 2 points / monthly



Dental Insurance

Goodwin University Magnet Schools will be offering a dental option through Anthem Blue Cross and Blue Shield. This plan includes the Full Dental plan with Riders A, B &D.

The chart below is a brief outline of the plan. Please refer to the summary plan description for complete plan details.

	Anthem Blue Cross and Blue Shield Dental 800858		
Benefits Coverage	In-Network Benefits Out-of-Network Bene		
Annual Deductible			
Individual	N/A	N/A	
Family	N/A	N/A	
Waived for Preventive Care	N/A	N/A	
Annual Maximum			
Per Person / Family	No Maximum	No Maximum	
Full- cleanings, x-rays, simple extractions, endodontics, routine fillings, fluoride treatments and fillings	Paid at 100% No Maximum	Paid at 100% up to the allowed amount No Maximum	
RIDER A-Inlays, Onlays, Crowns, Oral Surgery Space Maintainers and Apiectomy	Paid at 50% No Maximum	Paid at 50% up to the allowed amount No Maximum	
RIDER B-Bridges, Partials and Dentures	Paid at 50% No maximum	Paid at 50% No Maximum	
Orthodontia-RIDER D			
Benefit Percentage	60%	60%	
Adult (and Covered Full- Time Students, if Eligible)	No Coverage	No Coverage	
Dependent Child(ren)	Up to the age of 19	Up to the age of 19	
Lifetime Maximum	\$600	60%	
Benefit Waiting Periods	No waiting period	No waiting period	

Effective 7/1/2024



Effective 7/1/2024

Welcome to your Blue View Vision plan!

You have many choices when it comes to using your benefits. As a Blue View Vision plan member, you have access to one of the nation's largest vision networks. You may choose from many private practice doctors, local optical stores, and national retail stores including LensCrafters®, Target Optical®, and most Pearle Vision® locations. You may also use your in -network benefits to order eyewear online at Glasses.com and ContactsDirect.com. To locate a participating network eye care doctor or location, log in at anthem.com, or from the home page menu under Care, select Find a Doctor. You may also call member services for assistance at 1-866-723-0515.

Out-of-Network – If you choose to, you may instead receive covered benefits outside of the Blue View Vision network. Just pay in full at the time of service, obtain an itemized receipt, and file a claim for reimbursement up to your maximum out-of-network allowance.

YOUR BLUE VIEW VISION PLAN BENEFITS	IN-NETWORK	OUT-OF-NETWORK	FREQUENCY
Routine Eye Exam			
A comprehensive eye examination	\$20 copay	Up to \$48 allowance	Once every calendar year
Eyeglass Frames	a		
One pair of eyeglass frames	\$130 allowance, then 20% off any remaining balance	Up to \$64 allowance	Once every two calendar years
Eyeglass Lenses (instead of contact lenses)			
One pair of standard plastic prescription lenses: • Single vision lenses • Bifocal lenses • Trifocal lenses	\$20 copay \$20 copay \$20 copay	Up to \$36 allowance Up to \$54 allowance Up to \$69 allowance	Once every two calendar years
Eyeglass Lens Enhancements When obtaining covered eyewear from a Blue View Vision provid	der, you may choose to add an	y of the following lens enhanc	ements at no extra cost.
 Transitions Lenses (for a child under age 19) Standard polycarbonate (for a child under age 19) Factory scratch coating 	\$0 copay \$0 copay \$0 copay	No allowance when obtained out-of-network	Same as covered eyeglass lenses
Contact Lenses (instead of eyeglass lenses) Contact lens allowance will only be applied toward the first purch be used for subsequent purchases in the same benefit period, m			
 Elective conventional (non-disposable) OR Elective disposable 	\$130 allowance, then 15% off any remaining balance \$130 allowance	Up to \$105 allowance Up to \$105 allowance	Once every two calendar years
OR	(no additional discount)		two calendar years
 Non-elective (medically necessary) 	Covered in full	Up to \$210 allowance	

This is a primary vision care benefit intended to cover only routine eye examinations and corrective eyewear. Blue View Vision is for routine eye care only. If you need medical treatment for your eyes, visit a participating eye care doctor from your medical network. Benefits are payable only for expenses incurred while the group and insured person's coverage is in force. This information is intended to be a brief outline of coverage. All terms and conditions of coverage, including benefits and exclusions, are contained in the member's policy, which shall control in the event of a conflict with this overview. This benefit overview is only one piece of your entire errolment package.

EXCLUSIONS & LIMITATIONS (not a comprehensive list - please refer to the member Certificate of Coverage for a complete list)

Combined Offers. Not to be combined with any offer, coupon, or in-store advertisement. Excess Amounts. Amounts in excess of covered vision expense. Sunglasses. Plano sunglasses and accompanying frames. Safety Glasses, Safety glasses and accompanying frames. Not Specifically Listed. Services not specifically listed in this plan as covered services. Lost or Broken Lenses or Frames. Any lost or broken lenses or frames are not eligible for replacement unless the insured person has reached his or her normal service interval as indicated in the plan design. Non-Prescription Lenses. Any non-prescription lenses, eyeglasses or contacts. Plano lenses or lenses that have no refractive power. Orthoptics. Orthoptics or vision training and any associated supplemental testing.



Life and AD&D

Goodwin University Magnet Schools provides Basic Life and AD&D benefits through The Hartford to eligible employees. The life insurance benefit will be paid to your designated beneficiary in the event of death while covered under the plan. The AD&D benefit will be paid in the event of a loss of life or limb by accident while covered under the plan.

Important Reminder!

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

If you are interested in the Life and AD&D policy, please consult with your Benefit Counselors for details on the cost and benefit amount.



Supplemental/Voluntary Benefits Supplemental Benefits are Paid by Employee



Available for employees working 20+ hours per week

AFLAC provides a variety of coverage options protecting over 50 million people worldwide against the financial uncertainty that comes with accidents and illnesses. <u>Cash paid directly to you over and above other insurance with no coordination of benefits for.</u> These benefits also provide:

- NEW Group Plans with lower costs, increased benefits, and Guaranteed Issue!
- Cash that can be used for left over medical bills, everyday living expense and replacement of household income
- Group Rated
- Fixed Rates for the life of the coverage
- Individually Owned and Portable at the same rates

Accident Coverage

While Aflac cannot prevent accidents from happening, Aflac can help prepare you for those unexpected expenses associated with an accident. Our promise is that when the unexpected happens, Aflac is there. And in today's world, it is comforting to know Aflac will be there to help provide peace of mind that is backed by a brand that people know and trust. Benefits listed below are what is paid to the Policyholder for a covered accident.

- Guaranteed Issue
- Initial Treatment
- X Ray Follow-Up Treatment
- Initial Hospitalization
- Daily Hospital Confinement
- Specific Sum Injury Benefit
- Major Diagnostic Exam
- Epidural Pain Management
- Physical Therapy
- Daily Rehabilitation Unit
- Appliance Benefit

- Ambulance (actual charges incurred)
- Blood and Plasma
- Transportation
- Daily Family Lodging
- Accidental Dismemberment
- Accidental Life Insurance
- Pays regardless of other insurance
- 24 Hour Coverage

Supplemental/Voluntary Benefits Continued

Hospital Protection

- Hospital Confinement Benefit
- Emergency Room Benefits
- Physician Visit Benefits including Doctor Visits, Chiropractic, Telemedicine and Emergency Room Observation
- Prescription Benefits
- Inpatient and Outpatient Surgical Benefits
- Diagnostic Benefits
- Mammogram Benefit
- Will help with hospital deductible
- Coverage for maternity

Short-Term Disability

Goodwin University Magnet Schools offers voluntary short-term disability through Aflac. A common misconception is that disability insurance is only for those who are severely injured or have an extended illness. This is not always the case. Like accidents, disabilities can happen when least expected. If an employee is unable to work for days or months due to a disability, how will they afford financial obligations such as house or rent payments, groceries, and utility bills.

- Guaranteed Issue
- Your Aflac plan can stay with you even when you change or leave your job.
- Monthly Benefits: \$300-\$3,000 (subject to income requirements).
- Benefit Period: Available for 3 months.
- Elimination Periods Available (Injury/Sickness): 0/7 and 0/14 days.

Supplemental/Voluntary Benefits

Supplemental Benefits are Paid by Employee

... MassMutual

Voluntary Permanent Whole Life Insurance

- Optional coverage up to \$100,000 on a Guaranteed Issue basis (1st time offer)
 - Guaranteed Issue is maintained for those enrolling in first year of eligibility with a minimum of \$10k election.
- Permanent coverage means you have a fixed premium for the life of the coverage that also builds a cash value.
- As a mutual company, Mass Mutual has paid an annual dividend for 186 straight years.
- Best in class dividend helps you to build a meaning cash value that compounds annually.
- Cash Value **grows tax deferred** and gives you options for how to best use your cash value in the future when you need it.
- Dividend options including Paid Up Additions, Reduced Paid Up Premiums, Cash payout and Dividend Accumulations.
- Optional Coverage for Spouse and/or Children.



SAVE ON **EVERYTHING** YOUR PET NEEDS



Goodwin University Magnet Schools is offering Total Pet Plan to employees.

Your pets are part of your family, and you'll do anything to keep them happy and healthy. But with the cost of pet care on the rise, it isn't always easy.

That's why we're offering **Total Pet Plan**, which makes pet care more affordable. Enroll in Total Pet and get the same high-quality products and services your pets are used to, just at a lower price!

\$11.75/month for one pet or \$18.50/month for a family plan

For more details and how to enroll, visit petbenefits.com/land/learn .

TOTAL PET PLAN INCLUDES:

PETplus

DISCOUNTS ON PRODUCTS & RX

- Up to 40% off on products like prescriptions, preventatives, food, toys and more
- Shipping is always free and same-day pickup is available for most human-grade prescriptions

View available products and pricing at petplusbenefit.com.

Assure

DISCOUNTS ON VETERINARY CARE

- Instant 25% savings on all of your pet's inhouse medical services at participating vets
- No exclusions due to age, health, pre-existing conditions or type of pet

Visit petbenefits.com/search to locate a participating vet.

ᄎ AskVet

24/7 PET TELEHEALTH

- Access real-time vet support, even when your vet's office is closed
- Unlimited support on your pet's health, wellness, behavior and more

PetTas

LOST PET RECOVERY SERVICE

- Durable tag can be scanned from any smart phone to access your contact information, helping lost pets return home quicker than a microchip
- Easily update your information online with no need to request a new tag.



Employee Assistance Program Service Summary Goodwin University Magnet Schools





Available 24/7, 365 days a year Everything you share is confidential*

Life can be full of challenges. Your Anthem Employee Assistance Program (EAP) is here to help you and your household members. EAP offers a wide range of no-cost support services and resources, including;



Counseling

- Up to 3 visits per issue
- In-person or online visits
- · Call EAP or use the online Member Center to initiate services



- 30-minute phone or in-person meeting
- Discounted fees to retain a lawyer
- Free legal resources, forms, and seminars online



- Phone meeting with financial professionals
- Regular business hours; no appointment required.
- Free financial resources and budgeting tools online



D recovery

- Help reporting to consumer credit agencies
- Assistance with paperwork and creditor negotiations

myStrength

- E-learning modules and mood trackers
- Library of videos, articles, and inspirational quotes
- Support developing personal action plans

When something unexpected happens, EAP can help you figure out your next steps. Contact us today.

* In accordance with telenal and state law, and professional which mandants.

This iduitatent is for general informational pargovers. Discis with your engloyer for specific information on the services available to you.

Language Access Services - (777-700) 752)

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DIRECTAL MANAGEMENT OF THE REAL LTATES.

Dependent care and daily living resources

- Online information about child care, adoption, elder care, and assisted living
- Phone consultation with a work-life specialist
- · Help with pet sitting, moving, and other common needs

Other anthemEAP.com resources

- Well-being articles, podcasts, and monthly webinars
- Self-assessment tools for emotional health issues



Crisis consultation

- Toll-free emergency number; 24/7 support
- Online critical event support during crises

You can call us at 800-865-1044, or go to anthemEAP.com

We are ready to support you







This brochure summarizes the benefit plans that are available to Goodwin University Magnet School 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. These documents are available upon request through the Human Resources Department. The information provided in this brochure is not a guarantee of benefits.



PART A: General Information

Even if you are offered health coverage through your employment, you may have other coverage options through the Health Insurance Marketplace ("Marketplace"). To assist you as you evaluate options for you and your family, this notice provides some basic information about the Health Insurance Marketplace and health coverage offered through your employment.

What is the Health Insurance Marketplace?

The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers "one-stop shopping" to find and compare private health insurance options in your geographic area.

Can I Save Money on my Health Insurance Premiums in the Marketplace?

You may qualify to save money and lower your monthly premium and other out-of-pocket costs, but only if your employer does not offer coverage, or offers coverage that is not considered affordable for you and does not meet certain minimum value standards (discussed below). The savings that you are eligible for depends on your household income. You may also be eligible for a tax credit that lowers your costs.

Does Employment-Based Health Coverage Affect Eligibility for Premium Savings through the Marketplace?

Yes. If you have an offer of health coverage from your employer that is considered affordable for you and meets certain minimum value standards, you will not be eligible for a tax credit, or advance payment of the tax credit, for your Marketplace coverage and may wish to enroll in your employment-based health plan. However, you may be eligible for a tax credit, and advance payments of the credit that lowers your monthly premium, or a reduction in certain cost-sharing, if your employer does not offer coverage to you at all or does not offer coverage that is considered affordable for you or meet minimum value standards. If your share of the premium cost of all plans offered to you through your employment is more than 9.12%¹ of your annual household income, or if the coverage through your employment does not meet the "minimum value" standard set by the Affordable Care Act, you may be eligible for a tax credit, and advance payment of the credit, if you do not enroll in the employment-based health coverage. For family members of the employee, coverage is considered affordable if the employee's cost of premiums for the lowest-cost plan that would cover all family members does not exceed 9.12% of the employee's household income.¹²

Note: If you purchase a health plan through the Marketplace instead of accepting health coverage offered through your employment, then you may lose access to whatever the employer contributes to the employment-based coverage. Also, this employer contribution -as well as your employee contribution to employment-based coverage- is excluded from income for federal and state income tax purposes. Your payments for coverage through the Marketplace are made on an after-tax basis. In addition, note that if the health coverage offered through your employment does not meet the affordability or minimum value standards, but you accept that coverage anyway, you will not be eligible for a tax credit. You should consider all of these factors in determining whether to purchase a health plan through the Marketplace.

¹ Indexed annually; see https://www.irs.gov/pub/irs-drop/rp-22-34.pdf for 2023.

² An employer-sponsored or other employment-based health plan meets the "minimum value standard" if the plan's share of the total allowed benefit costs covered by the plan is no less than 60 percent of such costs. For purposes of eligibility for the premium tax credit, to meet the "minimum value standard," the health plan must also provide substantial coverage of both inpatient hospital services and physician services.

When Can I Enroll in Health Insurance Coverage through the Marketplace?

You can enroll in a Marketplace health insurance plan during the annual Marketplace Open Enrollment Period. Open Enrollment varies by state but generally starts November 1 and continues through at least December 15.

Outside the annual Open Enrollment Period, you can sign up for health insurance if you qualify for a Special Enrollment Period. In general, you qualify for a Special Enrollment Period if you have had certain qualifying life events, such as getting married, having a baby, adopting a child, or losing eligibility for other health coverage. Depending on your Special Enrollment Period type, you may have 60 days before or 60 days following the qualifying life event to enroll in a Marketplace plan.

There is also a Marketplace Special Enrollment Period for individuals and their families who lose eligibility for Medicaid or Children's Health Insurance Program (CHIP) coverage on or after March 31, 2023, through July 31, 2024. Since the onset of the nationwide COVID-19 public health emergency, state Medicaid and CHIP agencies generally have not terminated the enrollment of any Medicaid or CHIP beneficiary who was enrolled on or after March 18, 2020, through March 31, 2023. As state Medicaid and CHIP agencies resume regular eligibility and enrollment practices, many individuals may no longer be eligible for Medicaid or CHIP coverage starting as early as March 31, 2023. The U.S. Department of Health and Human Services **is offering a temporary Marketplace Special Enrollment period to allow these individuals to enroll in Marketplace coverage**.

Marketplace-eligible individuals who live in states served by HealthCare.gov and either- submit a new application or update an existing application on HealthCare.gov between March 31, 2023 and July 31, 2024, and attest to a termination date of Medicaid or CHIP coverage within the same time period, are eligible for a 60-day Special Enrollment Period. **That means that if you lose Medicaid or CHIP coverage between March 31, 2023, and July 31, 2024, you may be able to enroll in Marketplace coverage within 60 days of when you lost Medicaid or CHIP coverage.** In addition, if you or your family members are enrolled in Medicaid or CHIP coverage, it is important to make sure that your contact information is up to date to make sure you get any information about changes to your eligibility. To learn more, visit HealthCare.gov or call the Marketplace Call Center at 1-800-318-2596. TTY users can call 1-855-889-4325.

What about Alternatives to Marketplace Health Insurance Coverage?

If you or your family are eligible for coverage in an employment-based health plan (such as an employer-sponsored health plan), you or your family may also be eligible for a Special Enrollment Period to enroll in that health plan in certain circumstances, including if you or your dependents were enrolled in Medicaid or CHIP coverage and lost that coverage. Generally, you have 60 days after the loss of Medicaid or CHIP coverage to enroll in an employment-based health plan, but if you and your family lost eligibility for Medicaid or CHIP coverage between March 31, 2023 and July 10, 2023, you can request this special enrollment in the employment-based health plan through September 8, 2023. Confirm the deadline with your employer or your employment-based health plan.

Alternatively, you can enroll in Medicaid or CHIP coverage at any time by filling out an application through the Marketplace or applying directly through your state Medicaid agency. Visit https://www.healthcare.gov/medicaid-chip/getting-medicaid-chip/ for more details.

How Can I Get More Information?

For more information about your coverage offered through your employment, please check your health plan's summary plan description or contact

The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit **HealthCare.gov** for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

PART B: Information About Health Coverage Offered by Your Employer

This section contains information about any health coverage offered by your employer. If you decide to complete an application for coverage in the Marketplace, you will be asked to provide this information. This information is numbered to correspond to the Marketplace application.

3. Employer Name			4. Employer Identification Number (EIN)	
5. Employer address			6. Employer phone number	
7. City		8.	State	9. ZIP code
10. Who can we contact about employee health coverage a	t this job?			
11. Phone number (if different from above)	12. Email address			

Here is some basic information about health coverage offered by this employer:

discount.

	As your	employer, we offer a health plan to: All employees. Eligible employees are:
	_	
		Some employees. Eligible employees are:
	 With res 	pect to dependents:
		We do offer coverage. Eligible dependents are:
		We do not offer coverage.
		coverage meets the minimum value standard, and the cost of this coverage to you is intended
to	be attordable	, based on employee wages.
	discount factors, t	bur employer intends your coverage to be affordable, you may still be eligible for a premium through the Marketplace. The Marketplace will use your household income, along with other o determine whether you may be eligible for a premium discount. If, for example, your wages week to week (perhaps you are an hourly employee or you work on a commission basis), if you

If you decide to shop for coverage in the Marketplace, **HealthCare.gov** will guide you through the process. Here is the employer information you'll enter when you visit **HealthCare.gov** to find out if you can get a tax credit to lower your monthly premiums.

are newly employed mid-year, or if you have other income losses, you may still qualify for a premium

The information below corresponds to the Marketplace Employer Coverage Tool. Completing this section is optional for employers but will help ensure employees understand their coverage choices.

13. Is the employee currently eligible for coverage offered by this employer, or will the employee be eligible in the next 3 months?		
 Yes (Continue) 13a. If the employee is not eligible today, including as a result of a waiting or probationary period, when is the employee eligible for coverage? (mm/dd/yyyy) (Continue) No (STOP and return this form to employee) 		
14. Does the employer offer a health plan that meets the minimum value standard*?		
Yes (Go to question 15) No (STOP and return form to employee)		
 15. For the lowest-cost plan that meets the minimum value standard* offered only to the employee (don't include family plans): If the employer has wellness programs, provide the premium that the employee would pay if he/ she received the maximum discount for any tobacco cessation programs, and didn't receive any other discounts based on wellness programs. a. How much would the employee have to pay in premiums for this plan? \$ b. How often? Weekly Every 2 weeks Twice a month Monthly Quarterly Yearly 		
If the plan year will end soon and you know that the health plans offered will change, go to question 16. If you don't know, STOP and return the form to employee.		

16. What change will the employer make for the new plan year?
Employers will not offer health coverage.
Employers will start offering health coverage to employees or change the premium for the lowest-
cost plan available only to the employee that meets the minimum value standard. * (Premium
should reflect the discount for wellness programs. See question 15.)
a. How much would the employee have to pay in premiums for this plan? \$
b. How often? Weekly Every 2 weeks Twice a month Monthly Quarterly Yearly