


employee benefits guide



Emmett School District

2025 – 2026

Benefits for 2025-2026



At Emmett School District we strive to provide high-quality, competitive benefits to our employees. This guide is an overview of the benefits available to you. Please read it carefully in order to make the best choices for you and your family in the 2025-2026 plan year. If you have questions about any of the benefits mentioned in this guide, please don't hesitate to reach out to your Human Resources department at 208-365-6301.

ELIGIBILITY

- Employees are eligible for benefits if they work 20 hours or more per week.
- Coverage for new employees begins on the 1st of the month following your date of hire.
- You may enroll your eligible dependents for medical, dental, vision and life insurance. Dependents include your legal spouse, domestic partner (verification required), or your legal dependent children up to age 26.

MAKING CHANGES TO COVERAGE

- Eligible employees may enroll or make changes to their benefits elections during the annual open enrollment period. As with most benefits, once you elect an option you are bound to that choice for the entire plan year unless you experience a "Qualifying Event". These may include, but are not limited to:
 - Changes in legal marital status
 - Birth, adoption or guardianship
 - Loss of other group coverage

BENEFIT CHANGES EFFECTIVE 09/01/2025:

- Independent School District of Emmett will continue using **Regence** for health coverage this year and has lowered employee premium costs.
- **Vision, Group Life, Supplemental Life Insurance, and Long-Term Disability** will be switching to **United Heritage Life Insurance**.
- There are **no changes** to the dental plans.
- Due to IRS guidelines, the **H.S.A. deductible will increase to \$3,300**, but employees enrolled in the H.S.A. plan will receive a **\$75 monthly contribution** to their Health Savings Account — **\$900 per year**.

OPEN ENROLLMENT 2025-2026

Open Enrollment will be held from June 5th, 2026, through July 31st, 2025. Any changes made will go into effect 09/01/2025.

Review information about the **Family Glitch** and how your family may qualify for a lower cost health plan through Your Health Idaho.

What do I need to do for Open Enrollment?

All employees are required to complete their enrollment elections or complete the waiving of their enrollment in the online system: Employee Navigator **even**, if you are not making any changes to Medical, Dental or Vision Plans. **As a reminder, FSA Elections must be completed every year.**

Use the following link to access your account at [Employee Navigator](#).

Create an account: create and save your new username and password. **Company Identifier: ESD221**

Should I schedule time with a Benefit Counselor?

Benefit Counselors are highly encouraged; and available to assist you one-on-one with your benefit plan decisions from **June 5th through July 31st, 2025.**

To self-select a time that best works for your schedule please make a virtual appointment at: <https://calendly.com/emmett-sd>.

Each employee's needs are unique. Meeting with a Benefits Counselor allows you to ask questions and discuss aspects of your benefits package that are most relevant to you.

There are very important benefit changes that we want each employee to be aware of, including changes to premiums & deductibles, HSA contributions (when applicable), and understanding your voluntary benefits.

Our goal is to help you have a better enrollment experience and leave with a better understanding of the benefits offered through Emmett School District.

Have Questions or Want More Information?

You can reach out to the HR department at 208-365-6301; **OR** contact Acrisure at (208) 765-2620 if you have any questions or need assistance.



UPDATED AFFORDABILITY RULES FOR EMPLOYER-SPONSORED COVERAGE.

DO YOU QUALIFY FOR AFFORDABLE COVERAGE THROUGH YOUR HEALTH IDAHO?

If you or member(s) of your family are covered by employer-sponsored health insurance and it meets the requirement to be considered unaffordable, you may now be eligible for a tax credit to help lower the cost of monthly premiums on insurance purchased through Your Health Idaho.

Effective January 1, 2023, a new IRS rule to fix what has been known as the “Family Glitch” was put in place to make health insurance more affordable and obtainable for family members covered under unaffordable employer-sponsored plans. Now the affordability of a family plan premium will be calculated separately from the employee-only plan premium.

- The cost of coverage is considered affordable if the annual premium does not exceed 9.12%* of the household’s annual income.
- If coverage is more than 9.12%, it is considered unaffordable and the employee and/or family member(s) may be eligible for a tax credit through Your Health Idaho. The tax credit acts as an instant discount to lower the cost of monthly health insurance premiums on plans purchased through Your Health Idaho.

If you or members of your family do not have affordable health insurance, get in touch with Your Health Idaho today to find out what it takes to get started:

- Call Your Health Idaho’s Customer Support Center at 855-944-3246
- Visit YourHealthIdaho.org/familyglitch
- Find a local Your Health Idaho-certified agent at YourHealthIdaho.org/find-help/ whose services are available at no cost to you

Scan the QR code to access our calculator on our website to determine if you may qualify for an Advanced Premium Tax Credit or Cost Share Reduction Benefit before you apply.



■ 1.855.944.3246

■ YourHealthIdaho.org

*The percentage is set annually by the IRS.

Insurance Premiums

The District Contributes **\$924.78** Per Employee Per Month; **\$11,097.36** Per Employee Per Year

Medical – Regence \$500 Deductible PPO Plan

	Full Premium	Employee Cost
Employee Only	\$811.20	\$25.00
Employee & Spouse	\$1,539.00	\$752.80
Employee & 1 Child	\$1,109.60	\$323.40
Employee & 2+ Children	\$1,284.00	\$497.80
Family	\$1,767.60	\$981.40

Medical – Regence \$3,300 Deductible HSA Plan

	Full Premium	Employee Cost
Employee Only	\$686.10	\$0.00
Employee & Spouse	\$1,273.00	\$561.80
Employee & 1 Child	\$918.30	\$207.10
Employee & 2+ Children	\$1,062.70	\$351.50
Family	\$1,462.40	\$751.20

The district will contribute \$75 per pay for every employee that enrolls on the H.S.A Plan

Delta Dental

	Full Premium	Employee Cost
Employee Only	\$36.35	\$0.00
Employee & Spouse	\$80.60	\$44.25
Employee & 1 Child	\$69.85	\$33.50
Employee & 2+ Children	\$103.90	\$67.55
Family	\$139.05	\$102.70

Willamette Dental

(Dental Blue Connect)

	Full Premium	Employee Cost
Employee Only	\$53.49	\$17.14
Employee & Spouse	\$115.76	\$79.41
Employee & 1 Child	\$102.82	\$66.47
Employee & 2+ Children	\$153.08	\$116.73
Family	\$205.01	\$168.66

Vision

	Full Premium	Employee Cost
Employee Only	\$7.83	\$0.00
Employee & Spouse	\$15.69	\$7.86
Employee & Child(ren)	\$16.78	\$8.95
Family	\$26.81	\$18.98

Healthcare Expense Accounts

The medical plan you choose to enroll on determines which healthcare expense accounts you are eligible for.

Option 1: Regence \$500 PPO



FLEXIBLE SPENDING ACCOUNT

You can contribute pre-tax funds to your FSA and use the money to pay for your out-of-pocket healthcare expenses including:

- Deductibles, Copays & Prescription Drugs
- Dental & Vision Expenses
- Prescribed Supplements and over-the-counter items (with prescription)

IRS FSA Contribution Limits for 2025	Annual Amount	Per Month Deduction
Annual Maximum	\$3,300.00	\$275.00

Participants have until November 30, 2026, to submit for expenses incurred during the plan year.

You can rollover up to \$660 at the end of the 2025-2026 Plan Year.



DEPENDENT CARE FSA

(Optional & Available Regardless of Medical Plan Participation)

Employees may contribute to the Dependent Care FSA to pay for eligible dependent care expenses using pre-tax contributions.

The IRS Maximum for 2025: \$5,000 per year

Eligible expenses for Dependent Care FSA:

- > Care for your child who is under age 13
- > Before and after-school care
- > Baby sitting and nanny expenses
- > Day care, nursery school, and preschool
- > Summer day camp
- > Care for a relative who is physically or mentally incapable of self-care and lives in your home

Option 2: Regence \$3,300 HSA



HEALTH SAVINGS ACCOUNT

Emmett School District will contribute \$75.00 per month to the employee's Health Savings Account (if you have one open). Funds can be used for eligible healthcare expenses or saved. Unused HSA funds roll over year after year. Employees may also elect to contribute to HSA with pre-tax payroll deductions. The maximum HSA contributions that an employee can elect for 2025 are based on your enrollment:

2025 HSA Employee Contribution Limits:	Annual Contribution Maximum
Single Coverage	\$4,300.00
Family Coverage	\$8,550.00
Age 55+	Additional \$1,000 Per Year

Eligibility Requirements

Once you're covered by a qualified HDHP, you can contribute to an HSA if you:

- > Are not covered by any non-HSA eligible health plan including a general purpose Health Flexible Spending Account (Health FSA) or a Health Reimbursement Arrangement (HRA). If your spouse has a General Purpose Health FSA that allows reimbursements for your expenses, you may not participate.
- > Are not enrolled in Medicare or Tricare. If you are over 65, as long as you have not enrolled in Medicare or Tricare, you can continue to make contributions and use your funds. Once you are enrolled in Medicare or Tricare, you can no longer make contributions, but you may still continue to use funds you have previously saved.
- > Are not being claimed as a dependent on someone else's tax return.
- > If you become no longer covered by a qualified HDHP, you may still use your HSA funds, however, you may not continue to contribute to your account.



2025 – 2026 Medical Plans

Plan Highlights:	Option 1: Regence \$500 PPO	Option 2: Regence \$3,300 HSA
Deductible (Calendar Year)		
Individual	\$500	\$3,300
Family	\$1,000	\$5,000
Coinsurance (In-Network) Cost-sharing after deductible is met	Plan pays 70% / You pay 30%	Plan pays 80% / You pay 20%
Out-of-Pocket Maximum (Once member reaches this, plan will pay 100% for remainder of calendar year)	(Includes Deductible + Coinsurance + Copays)	(Includes Deductible + Coinsurance)
Individual	\$5,000	\$5,500
Family	\$10,000	\$11,000
Physician Office Visit	No Deductible Primary Care: \$30 copay Specialist: \$45 copay	Primary Care: \$15 (after deductible) Specialist: \$40 (after deductible)
Preventive Care	Covered 100%	Covered 100%
Diagnostic Labs / Imaging	No deductible up to \$400, then applied to deductible + coinsurance	Applied to deductible + coinsurance
Hospitalization/Maternity	Applied to deductible + coinsurance	Applied to deductible + coinsurance
Emergency Room	30% after \$300 copay per visit (waive if admitted)	\$300 Copay after deductible + coinsurance
Pharmacy / RX		Deductible & OOP combined w/Medical
Preferred Generic:	\$10 (deductible waived)	\$10 (deductible waived)
Preferred Brand Name:	25%	\$30 (after ded)
Non-Preferred Brand Name:	50%	\$60 (after ded)
Specialty:	N/A	\$150 (after ded)
Monthly Employee Costs		
Employee Only	\$25.00	\$0.00
Employee & Spouse	\$752.80	\$561.80
Employee & 1 Child	\$323.40	\$207.10
Employee & 2+ Children	\$497.80	\$351.50
Family	\$981.40	\$751.20

Regence PPO vs. Regence HSA

Regence PPO

- ✓ Members pay flat copays for physician office visits and most prescriptions.
- ✓ Great choice for members who have ongoing medical costs and prefer copays and upfront coverage for services.

Regence HSA

- ✓ The Regence HSA is a high-deductible health plan. Members receive coverage for medical services once they reach their deductible.
- ✓ Members who participate on the HSA Medical Plan will also have a health savings account which can be used to pay for medical expenses that are applied to their plan's deductible.
- ✓ Great choice for members with minimal medical expenses each year who want to save money on health insurance premiums.

➤ Both plans include 100% coverage for Preventive Care Services with no copay and no deductible.

Delta Dental



PROVIDER NETWORK	PPO	PREMIER
Annual Deductible (Individual / Family)	None	None
	Plan Pays:	Plan Pays:
Preventive Care (Exam, cleanings, x-rays)	70-100%	70-100%
Basic Procedures (Fillings, extractions, root canal)	70-100%	70-100%
Major Procedures (Crowns, bridges, dentures)	50%	50%
Annual Maximum Benefit (Per Member)	\$1,000	\$1,000

Delta Dental Monthly Employee Cost	
Employee Only	\$0.00
Employee & Spouse	\$44.25
Employee & 1 Child	\$33.50
Employee & 2+Children	\$67.55
Family	\$102.70

Visit www.deltadentalid.com to view network providers, claims, and member discounts

Willamette Dental (Dental Blue Connect)



****Must go to the Willamette Dental Clinic for services****

BENEFITS	COPAY
General Office Visit	\$15 Copay
Annual Benefit Maximum	No Annual Maximum
Must go to the Willamette Dental Clinic for services	
Preventive (Cleanings, X-Rays, Exam)	Covered 100% after Copay
Fillings	\$15 Copay
Extraction / Surgical Extraction	\$15 Copay / \$75 Copay
Root Canal	\$50 Copay
Crowns & Bridges	\$150 Copay (each service)
Dentures	\$200 Copay
Orthodontia	\$1,500 Copay
Nitrous Oxide	\$20 Copay
Dental Implant	N/A

Willamette Dental Monthly Employee Cost	
Employee Only	\$17.14
Employee & Spouse	\$79.41
Employee & 1 Child	\$66.47
Employee & 2+Children	\$116.73
Family	\$168.66

Vision



United Heritage Insurance

In Partnership with VSP®

BENEFIT	DESCRIPTION	COPAY	FREQUENCY
Your Coverage with a VSP Provider			
WELLVISION EXAM	• Focuses on your eyes and overall wellness	\$10	Every 12 months
PRESCRIPTION GLASSES		\$25	See frame and lenses
FRAME*	<ul style="list-style-type: none"> • \$170 featured frame brands allowance • \$150 frame allowance • 20% savings on the amount over your allowance • \$80 Walmart*/Sam's Club*/Costco* frame allowance 	Included in Prescription Glasses	Every 12 months
LENSES	<ul style="list-style-type: none"> • Single vision, lined bifocal, and lined trifocal lenses • Impact-resistant lenses for dependent children 	Included in Prescription Glasses	Every 12 months
LENS ENHANCEMENTS	<ul style="list-style-type: none"> • Standard progressive lenses • Premium progressive lenses • Custom progressive lenses • Average savings of 30% on other lens enhancements 	\$0 \$95 - \$105 \$150 - \$175	Every 12 months
CONTACTS (INSTEAD OF GLASSES)	<ul style="list-style-type: none"> • \$150 allowance for contacts; copay does not apply • Contact lens exam (fitting and evaluation), billed amount not to exceed \$60 		Every 12 months
EXTRA SAVINGS	Glasses and Sunglasses <ul style="list-style-type: none"> • Extra \$20 to spend on featured frame brands. Go to vsp.com/offers for details. • 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam. 		
	Routine Retinal Screening <ul style="list-style-type: none"> • No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam 		
	Laser Vision Correction <ul style="list-style-type: none"> • Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities 		

YOUR COVERAGE GOES FURTHER IN-NETWORK

With so many in-network choices, VSP makes it easy to get the most out of your benefits. You'll have access to preferred private practice, retail, and online in-network choices. Log in to vsp.com to find an in-network provider. Your plan provides the following out-of-network reimbursements:

Exam	up to \$45	Lined Bifocal Lenses	up to \$50	Progressive Lenses	up to \$50
Frame	up to \$70	Lined Trifocal Lenses	up to \$65	Contacts	up to \$105
Single Vision Lenses	up to \$30				

You do not need a card to access your VSP benefits. Simply give your Eye Clinic your Name and DOB. Dependents covered on vision will be accessed under the Employee's Information.

FIND VSP PROVIDERS AT: WWW.VSP.COM

Monthly Employee Cost	
Employee Only	\$0.00
Employee & Spouse	\$7.86
Employee & 1 Child	\$8.95
Family	\$18.98

AllyHealth Telemedicine



Visit a doctor over the phone, video, or app.

Your health plan includes a telehealth and mental health benefits powered by AllyHealth, a national leader in telehealth. You can talk to any of AllyHealth's board certified doctors any time by phone, video or through the app – 24 hours a day, 7 days a week, 365 days a year.

Go to www.allyhealth.net and register today.

Create your online account in advance so it is ready to access quickly when you need it.

Group Life Insurance

Basic Life Insurance



Employer Paid Life Insurance

	Employee
Death Benefit:	\$50,000
AD&D Benefit:	Equal to Life Benefit

Reduction in Coverage Due to Age – Benefits reduce to the following percentage and terminate at retirement. If you are still working the required number of hours to be eligible for this insurance at age 65, your benefits will reduce to 65% at age 70, to 50% at age 75.

Accidental Death & Dismemberment: (AD&D)

Payable when an insured employee suffers a loss as a result of an accidental bodily injury or death sustained in an accident.

Supplemental Life and AD&D Insurance (Optional)

Employees may elect to purchase additional life insurance for themselves and their dependents. Employees may elect up to the **Guaranteed Issue** amounts without an evidence of insurability when they are initially eligible for coverage. Any amounts over the Guaranteed Issue, or any increases in coverage will require a questionnaire to be completed and approved by United Heritage Life Insurance prior to the coverage going into effect.

Rate Chart

Supplemental Life w/ AD&D Insurance		
Employee:	Spouse:	Child(ren):
Elect up to: \$300,000 In \$10,000 increments, not to exceed 5x your basic annual earnings.	Elect up to: \$300,000 Not to exceed 100% of the Employee's Supplemental Life election	Elect up to: \$10,000 in \$2,000 increments (6 mo - age 26)
Guarantee Issue: \$125,000	Guarantee Issue: \$40,000	Guarantee Issue: \$2,000

Employee Age	Rate per \$1000
0 – 29	\$0.088
30 – 34	\$0.098
35 – 39	\$0.118
40 – 44	\$0.198
45 – 49	\$0.348
50 – 54	\$0.568
55 – 59	\$0.978
60 – 64	\$1.128
65 – 69	\$1.968
70 – 74	\$3.438
75 & Over	\$5.238
Child(ren) Per Unit Per \$2,000	\$0.161
Employee/Spouse/Child Vol AD&D Rate per \$1000	\$0.018

Use this chart to estimate your monthly cost for additional life insurance:

$$\frac{\text{Elected Life Amount}}{\text{x Rate from chart}} \times \frac{\div 1000}{\text{Divided by 1,000}} = \text{Monthly Cost}$$

Reduction in Coverage Due to Age: Benefits reduce to the following percentages and terminate at retirement. Benefits reduce to 65% at age 70 and to 50% at age 75. The percentage reduction is based on original coverage prior to any reductions at each policy anniversary.

*Supplemental Spouse rates and premiums are based on the Employee's age, not the Spouse's age.

Group Disability Insurance

Long Term Disability (Optional)



Long Term Disability insurance, offered through United Heritage is coverage that provides you help in times of need. You get a monthly check if you can't do your regular job because of illness or injury, whether it's work-related or not.* This benefit is only available to employees in the benefit class described below:

Employer-Paid LTD Benefits	
Benefit Class:	Active employees working 20+ hours per week
Benefit Percentage:	66 & 2/3% of monthly earnings
Maximum Monthly Benefit:	\$5,000 per month
Elimination Period:	180 days
Maximum Benefit Duration:	If you become disabled prior to age 60, the maximum benefit period will be to age 65. If you become disabled at age 60 or above, the maximum benefit period will be based on you age at the time of disability.**

* Pre-existing conditions may be excluded.

** Please refer to the certificate of coverage for details.

Short Term Disability (Optional)



Short Term Disability insurance is coverage that provides you with income protection should you become disabled from a covered injury, illness, or pregnancy and you are unable to work for a short period of time. This is a voluntary benefit, meaning employees must enroll on the coverage when initially eligible for benefits and the monthly premium is deducted from your paycheck. These benefits are offered through Colonial Life. **The benefit amount is dependent on the insured's benefit class as outlined below:**

Options	Benefit %	Up to a Maximum of:	Payable for up to:	Elimination Period
5 Options available depending on the elimination period	60% of weekly gross earnings	Up to \$4,000 per month	Payable for up to 26 weeks	0/7, 7/7, 0/14, 14/14, 30/30

Electing Coverage During Open Enrollment:

If you did not elect this coverage when you were initially hired, and want to sign up during open enrollment, you must complete the required Evidence of Insurability Form along with your application. Colonial Life will review your form and determine if you qualify to enroll on the plan.

Pre-Existing Condition(s):

Benefits are not payable for pre-existing condition(s) unless you have been continuously enrolled on this policy for 12 consecutive months. A pre-existing condition is an injury, illness or pregnancy that you have received medical care or treatment for within a 90-day period before you signed up for this plan.

Other Voluntary Benefits



Emmett School District offers additional voluntary benefits through **Colonial Life**. Voluntary benefits can help protect your income and provide financial security for you and your family. For assistance these benefits please contact Acrisure at (208) 765-2620.

Colonial Voluntary Products

The Plans presented below can be purchased by employees on a voluntary basis.

Accident Insurance	Accident insurance supplements your medical coverage by providing cash benefits in cases of accidental injuries. You can use this money to help pay for your deductible/coinsurance, living expenses, etc.
Hospital Indemnity	A hospital indemnity plan provides supplemental payments that you can use to cover expenses that your medical plan doesn't cover for hospital stays, surgery and certain inpatient treatment.
Critical Illness	Critical Illness coverage protects against the financial impact of certain illnesses, such as a heart attack or stroke. Lump-sum benefit payments can cover your out-of-pocket expenses when diagnosed with a serious medical condition.
Term Life Insurance	You want what's best for your family, and that includes making sure they're prepared for the future. With term life insurance from Colonial Life & Accident Insurance Company, you can provide financial security to help them cover their ongoing living expenses.

What is the EAP?

The Employee Assistance Program (EAP) offers free, confidential counseling & Life-Balance Resources to Emmett School District Employees and eligible family members by seasoned, licensed professionals.

What does the EAP provide?

- Up to **6** confidential face-to-face counseling sessions for all employees, dependents and members of your household per issue. Counseling is available for almost any issue, such as:
 - marital and relationship conflict
 - stress related difficulties
 - emotional and psychological problems
 - career concerns
 - substance abuse issues and bereavement

Schedule an Appointment:

In-person Counseling – 833-210-1489

Online Consultations –

www.LifeSolutionsForYou.com

Access Code: ESD

LifeSolutions®

Important Benefit Information

- These visits are at \$0 cost to you
- Appointments are confidential

Benefit Contact Information			
Benefit Plan	Carrier Name	Website	Phone Number
Benefit Advocates	Acrisure	acrisure.com/northwest	208.765.2620
Medical	Regence	regence.com	888.494.2583
Dental	Willamette Dental	willamettedental.com	855.433.6825
Dental	Delta Dental of Idaho	deltadentalid.com	800.356.7586
Vision	VSP Vision Plan	vsp.com	800.877.7195
Life /LTD	United Heritage Life	unitedheritage.com	800.830.1140
FSA/HSA	Ameriflex	myameriflex.com	888.868.3539
Telemedicine	AllyHealth	allyhealth.net	888.565.3303
EAP	WorkPartners	lifesolutionsforyou.com	833.210.1489
Additional Voluntary Plans	Colonial Life	coloniallife.com	800.325.4368



Access Plan Information and Benefit Notices Online

Emmett School District is required to provide employees with access to important notices such as the Summary of Benefits and Coverage (SBC), Plan Documents, and Special Plan Notices. All of these documents are available in the company's employee benefit library. A free printed copy of all your plan documents and notices may be obtained by calling Acrisure at 208.765.2620.

› Go to <http://books.murraygr.com/bookcase/ykrnk>

or

› Scan the QR Code on your smartphone





ALLYHEALTH

Essentials Plan

With AllyHealth you can visit with a doctor 24/7 from your home, office, or on the go, with no co-pays or consultation fees* to you and your family! And now with our Essentials Plan, you can connect with Mental Health providers, too! Plus, all of our plans include access to our industry-leading Rx and Medical Bill savings programs—helping you save time, money, and frustration.



FAST AND CONVENIENT ACCESS TO QUALITY VIRTUAL CARE

FEATURES AND BENEFITS OF ALLYHEALTH

- No co-pays, deductibles, or per-call charges*
- Prescriptions called in to your local pharmacy
- Avoid germ-filled waiting rooms
- Medical visits available 24/7/365, on-demand. Anytime. Anywhere.
- Mental health visits available in a week or less
- Plan covers the entire family
- Flexible and easy to use (available via web, mobile app, or simply by phone)
- Rx savings program offers up to 85% discounts at retail pharmacies
- Medical bill negotiation service can help you save on all your medical bills

ALLYHEALTH ONLINE TELEHEALTH SERVICES INCLUDE



Telemedicine

Our network of doctors and pediatricians can diagnose, treat and prescribe for you and your family, 24/7 on your schedule. Anytime. Anywhere. With no consult fees!



Mental Health

Connect with a licensed therapist, psychologist, or other behavioral health specialist from home, the office, or on the go via secure video. 100% private and confidential, with free visits included in your plan*!



Medical Bill Saver

Medical Bill Saver is your expert source to review and negotiate out-of-pocket health care costs.



Prescription savings

The Prescription Discount Card saves you money on prescription medications. Simply present your card at a participating pharmacy to instantly receive substantial discounts on prescription medications.

COMMON CONDITIONS WE TREAT

Telemedicine

- Acne
- Allergies
- Asthma
- Bronchitis
- Cellulitis
- Cold & Flu
- Sunburn
- Sore Throat
- Fever
- Gout
- Headache
- Infections
- Insect Bites
- Rashes
- Diarrhea
- Ear Infection
- Sinus Infection
- Constipation
- Skin Inflammations
- Urinary Tract Infection
- Joint Aches & Pains
- And more...

Mental Health

- Addictions
- Bipolar Disorders
- Child and Adolescent Issues
- Depression
- Eating Disorders
- Grief and Loss
- Life Changes
- Men's Issues
- Panic Disorders
- Parenting Issues
- Postpartum Depression
- Relationship and Marriage Issues
- Stress
- Trauma and PTSD
- Women's Issues
- And more

24/7/365 On-Demand Care. Anytime. Anywhere

www.AllyHealth.net

*THIS PLAN IS NOT INSURANCE and is not intended to replace insurance or a primary care physician relationship. Consultations with our doctors are \$0 (subject to usage limitations). Mental health visits include 3 clinical hours of talk therapy per family per year at no charge for voluntary plans, or up to 10 clinical hours of talk therapy per family per year at no charge for employer-paid plans. Additional visits may be available on a fee for service basis. If you have any questions about your plan or visit costs, please contact customer support at support@allyhealth.net.

LifeSolutions®

Employee Assistance Program



LifeSolutions' employee assistance program (EAP) can help you balance work and personal needs to become healthier, happier, and more productive. Our private and confidential resources and support are inclusive of all populations, including older adults, new parents, diverse individuals, LGBTQIA+, veterans, disabled persons, and others.

Our trained professionals can help with:

- Stress, anxiety, or depression.
- Parenting resources.
- Caregiving support.
- Financial and legal worries.
- Overuse of alcohol.
- Grief and loss.
- Work-related challenges.
- Making healthy lifestyle changes.

Our consultation and problem-solving services include:

- Short-term coaching and counseling in person, by telephone, or via video.
- Parenting resources and options for children.
- Support for individuals caring for older loved ones.
- Community referrals and information to address everyday concerns.
- 24/7 phone support for immediate help.
- RxWell, an app that can help you improve your mental and physical health.

We offer various support services for workgroups, including:

- Disruptive event management (workplace crisis support).
- Personal and professional development trainings.

You have access to free, 30-minute consultations with a licensed attorney and/or a certified financial adviser. During these consultations, you can address:

- Legal concerns, such as landlord/tenant issues, real estate transactions, bankruptcy, child custody and other family matters, estate planning, immigration issues, and criminal matters.
- Debt management, credit concerns, student loans, mortgages, retirement planning, and financial hardships.

Our interactive website includes thousands of tools to help you and your family address most major life issues. Available resources include:

- Skill Builder courses and articles.
- Wellness, fitness, nutrition, and emotional well-being materials.
- Expert-led webinars on personal development, health topics, and caregiving.
- Financial education tools and legal forms, educational information, and discount offers.

(EAP) services are available to you and members of your household at no cost.

1-833-210-1489

To access the Work-Life section of our website, go to www.lifesolutionsforyou.com, click Login, and enter your company code: **ESD.**

Click on the Work-Life Resource Portal under Featured resources.

workpartners



One Membership. Thousands of Ways to Stay Active and Save Money.

-  12,200+ Gyms
-  9,300+ On-Demand Videos
-  1:1 Well-Being Coaching
-  Enroll Your Spouse¹

No annual fees or long-term contracts. Switch gyms anytime.



Plus: 5,700+ Premium Gym Options at exercise studios, outdoor experiences, and others with 20% – 70% discounts at most locations³

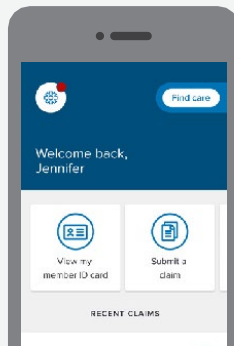


Get Started: [Regence.com/Advantages](https://www.Regence.com/Advantages)

Get on-the-go access with the Regence app

The Regence mobile app gives you simple and secure access to all your health information from a single, easy-to-navigate location. It's iPhone and Android ready, and waiting for you to download.

Just sign in with your existing Regence account or create a new one from the app to start accessing the tools, resources and support you need to make smart, budget-friendly decisions about your health.

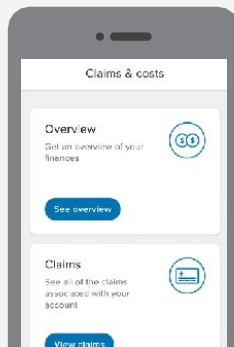


Your personalized experience

Get one-tap access to key tools on the go, such as accessing your member ID card and chatting with Customer Service.

See your recent claims and medications at a glance.

Review relevant insights to help you stay on top of your health.

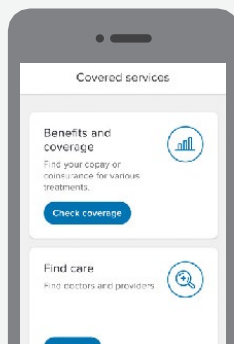


Health care finances

Get a quick look at your deductibles and out-of-pocket max for you and your family.

Estimate costs and compare treatments and medications to save money.

See all EOB statements associated with your account.



Covered services

Review your benefits and coverage, including copay, deductible and coinsurance amounts.

Find doctors and providers.

Access support programs available to you.



Regence BlueShield of Idaho
is an Independent Licensee of the Blue Cross
and Blue Shield Association

1211 West Myrtle Street | Suite 200 | Boise, ID 83702

REG-78498-21/10-ID-FLYERRep78498-20
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Regence Advantages

Save money and feel great!

As a Regence member, you can enjoy savings on the following health-related products and services. This discount program is offered to all Regence members at no additional cost (although some discounted programs offered by vendors may carry separate fees). **Regence Advantages is not insurance but is offered in addition to your medical and/or dental plan(s) to help you stay healthy and live better.**

The Active&Fit Direct™ Program: Stay active at the gym or at home with flexible fitness options starting at just \$25 a month (plus a \$25 enrollment fee and applicable taxes). Choose from 11,000+ standard fitness centers or 5,000 premium exercise studios and fitness centers nationwide. Plus, 4,000+ digital workout videos (try 200 videos for free).

CHP CAMaffinity Program: You're eligible for the CHP CAMaffinity Program, which provides a 20% discount on complementary and alternative medicine (CAM) services offered through The CHP Group's network of chiropractors, acupuncturists, naturopathic physicians and massage therapists.

EyeMed Vision Care®: Save 35% on a complete pair of glasses (frames and lenses). Save 20% on eyewear items and 15% on conventional contact lenses. Discounts are available at leading retailers and many private practice locations.

QualSight®: QualSight makes LASIK easy for members. You can save 40–50% on the national average price of Traditional LASIK or receive savings on procedures such as Custom Bladeless (all laser) LASIK. Find out if you are a potential candidate for this life-changing procedure today.

Zenni Optical: Get high-quality, affordable and stylish prescription eyeglasses direct from the factory. You receive 5% off Zenni's already low prices, with complete prescription eyewear starting at \$6.95. Zenni's online store offers over 3,000 frame styles. Turn any pair of Zenni eyeglasses into sunglasses with a wide selection of tinted lenses.

TruHearing®*: Save up to 60% on hearing aids with TruHearing. Choose from a wide selection of the most advanced hearing aids, including small, virtually invisible models and models you can control from your smartphone. Your purchase also includes three follow-up visits with a provider, 45-day trial, three-year warranty, and 48 free batteries per aid.

Beltone Hearing Care™*: Members receive set retail prices as low as \$995 for Beltone hearing aids, plus free hearing screening, three-year manufacturer's warranty, loss and damage coverage, and a three-year supply of batteries.

Amplifon Hearing Health Care*: Save 40% on diagnostic services, including hearing exams, and get savings on hearing aids. You'll enjoy a 60-day no-risk trial; one-year follow-up care; a three-year warranty, including coverage for loss and damage; and two years of free batteries (160 per hearing aid) with a lowest-price guarantee.

Walgreens Smart savings: Save 15% on thousands of eligible Walgreens brand over-the-counter health and wellness products when you shop in store. It's easy to save on vitamins and supplements, allergy, cold and pain relief, eye and dental care, baby essentials and more.**

Fitbit® Savings: Save up to 20% on Fitbit smartwatches and trackers, and get your first year of Fitbit Premium*** for free with an eligible device. Track activity, sleep, heart rate and more for advanced insights about your day and night. Plus, with Fitbit Premium you'll have access to hundreds of video and audio workouts, meditation tracks and more, right in the Fitbit app. So whether you're at home or on the go, stay motivated with Fitbit.

*Discounts through Amplifon Hearing Health Care (also includes extended family), TruHearing and Beltone are available to members and their parents and grandparents.

**Restrictions apply. See official terms and conditions at regence.com/advantages

***Valid payment method required. See full terms and conditions at regence.com/advantages. Premium content and features subject to change.



Regence is independent from the companies that provide these products and services. Regence does not endorse or guarantee the products and services offered or their effectiveness. Regence reserves the right to change the program at any time without prior notice.

CHP Active and Healthy: This discount program gets you up, moving and saving money! With discounts on thousands of vendors (e.g., health clubs, ski resorts, sporting events, museums) for a small annual fee, it's your source for deals on healthy and fun activities.

Lively: Save up to \$45 on innovative, easy-to-use mobile products designed to help you or your loved ones lead more active and independent lives. Products include the big-button Lively Flip, the large-screen Lively Smart, and Lively Mobile Plus.

OPTAVIA Independent Certified Health Coach, Tonja Noretto: Save \$95 on your first month's order and earn an additional \$25 toward your second! This safe weight management and health program uses scientifically designed OPTAVIA Fuelings and a personal health coach for one-on-one guidance. Lose weight and manage disease through nutritional intervention, free access to health care professionals, educational materials and the "Habits of Health" system. This is a lifestyle change, not a diet. There are no hidden costs or start-up fees.

Jenny Craig®: Your coach provides personal one-on-one coaching with flexible by-phone and in-person options. The new Max Up program makes it so easy—you get the support you need, your food is taken care of, and the new revolutionary Recharge bar is included, so you can max up your results! Jenny Craig Works! Save \$200 on Jenny Craig with 8+ weeks of the Max Up plan (purchase required).†

National Allergy: Save 20% or more on products for non-drug allergy relief, including pillow and mattress encasings, air filtration, asthma management tools, green cleaning products and personal care products. Enjoy discount prices, outstanding service and a 60-day unconditional return policy with no restocking fees.

Banfield Pet Hospital®: You receive a waived enrollment fee for Banfield Pet Hospital's Optimum Wellness Plans® (a savings of \$38.95 – \$45.95 depending on location), packages of preventive care that include annual blood work, vaccinations, de-worming, unlimited office visits, plus more. Banfield is the largest veterinary hospital in the world with more than 950 locations nationwide.

Everest Funeral Planning and Concierge Service: Save \$50 on the enrollment fee for Everest's funeral planning services. Advisors are there 24 hours a day to help you make informed decisions about funeral-related issues.

Mom's Meals NourishCare: Mom's Meals is a leading provider of nutrition solutions delivered to any home nationwide. The delicious fresh-made meals are dietitian-designed and chef-prepared, and they include menus for health conditions. Choose from 60+ fully prepared nutritious meal choices.

WINFertility: For nearly 20 years, WINFertility has been a trusted resource, linking those dealing with infertility with a network of accessible, affordable and proven fertility specialists. WINFertility offers you lower-than-market-rate treatment bundles consisting of the medical services and medications required to help you have a baby.

†Savings redeemed as 8 weeks of \$25 US food credits with full planned menu purchase (avg. \$182 US/\$184 CAD) each week. Active program enrollment and eligibility status required. Valid only for new members. Valid at participating centers and Jenny Craig Anywhere. Not available at jennycraig.com. No cash value. Expires 12/31/22.

Want to learn more?

Access member discounts at regence.com/advantages



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Regence BlueShield of Idaho
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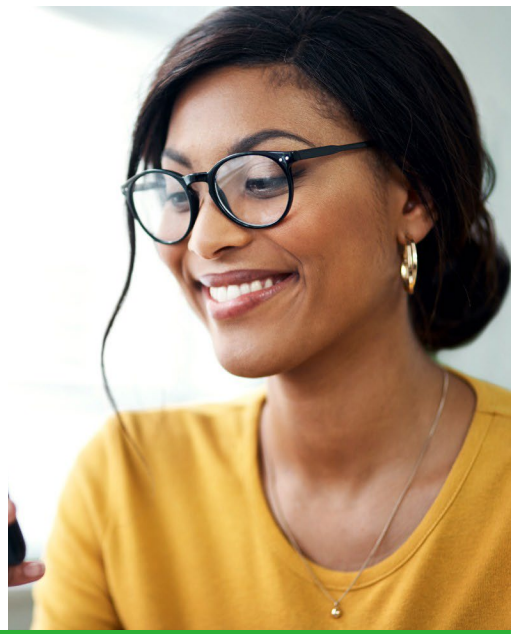
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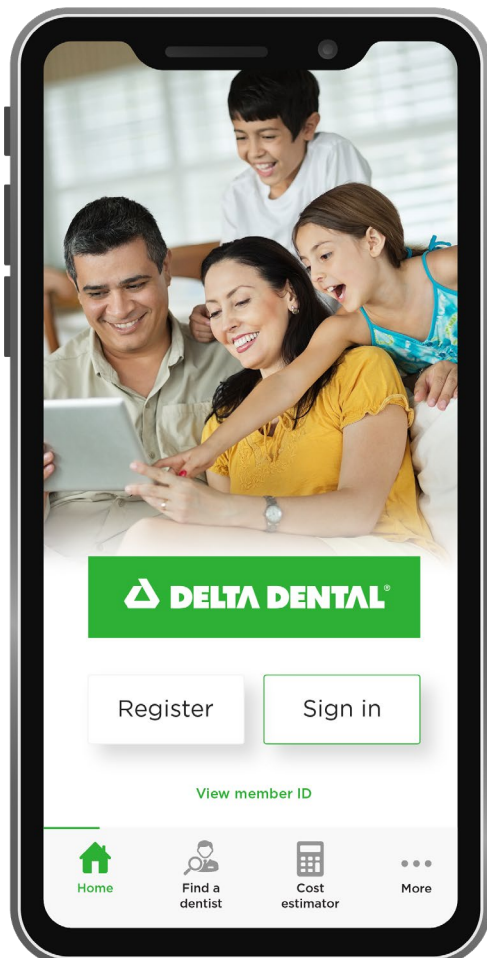


Delta Dental Mobile App

Manage your oral health anytime, anywhere



Your oral health is important to Delta Dental — and to your overall health! We've designed our mobile app to make it easy for you to make the most of your dental benefits. Maximize your health, wherever you are! Search for a dentist near you, view ID cards and more, right on your mobile device.



Getting started

The Delta Dental Mobile App is optimized for iOS (Apple) and Android devices. To download our app on your device, visit the App Store (Apple) or Google Play (Android) and search for Delta Dental Mobile App. Or, scan the QR code below. You will need an internet connection in order to download and use most features of our free app.

Logging in to view benefits

Delta Dental members can sign in using the username and password they use to sign in to our website. If you haven't registered for an account yet, you can do that within the app. If you've forgotten your username or password, you can also retrieve these via the Delta Dental Mobile App.



SCAN TO DOWNLOAD
DELTA DENTAL MOBILE APP



Here's [HOW] you can maximize your oral health at no additional cost.

A healthy mouth is a vital part of your overall health, and Delta Dental of Idaho cares about yours. That's why we're introducing Health *through* Oral Wellness® (or, HOW® for short). HOW is a unique, patient-centered program that adds additional benefits to your dental plan, based on your individual oral health needs. By having your dentist perform a simple risk assessment, you may have access to additional preventive and health-sustaining benefits.

HOW TO GET STARTED:



First, check with your employer to make sure your company is participating in the HOW program.



Second, simply request a free Health *through* Oral Wellness (HOW) risk assessment at the beginning of your dental visit.



Third, if you qualify based on your results, Delta Dental of Idaho will release, or 'unlock' specific additional benefits without an increase in premium.

BELOW ARE JUST SOME OF THE BENEFITS THAT MAY BE COVERED BASED ON RISK SCORES

- ✓ Additional cleanings
- ✓ Fluoride (*child and adult*)
- ✓ Oral hygiene instruction, nutritional counseling, or tobacco cessation counseling

- ✓ Additional sealants (*child and adult*)
- ✓ Periodontal maintenance (*gum disease treatment*)
- ✓ Drugs or medicaments dispensed in the office for home use

If you have questions or would like to contact us for more information about the Health *through* Oral Wellness program, please contact us by phone at (208) 489-3580 or toll-free at (800) 356-7586 or by email at customerservice@deltadentalid.com.

All enhanced benefits are subject to the patient meeting their plan's annual maximum and other limitations. A risk assessment must be performed at every routine re-care visit to occur at least once in the plan year. Enhanced benefits and standard policy requirements, including coinsurance percentages, copayments and plan maximums, may be subject to changes.

Instructions for your dentist:

At Delta Dental of Idaho, we understand that some patients need more dental care than others. That's why we offer our Health *through* Oral Wellness® (HOW®) program. Many Delta Dental of Idaho patients who are at risk for certain conditions may be eligible for additional preventive benefits at no additional cost to them.* To assess their risk level, they need your help! They need you to complete an oral health risk assessment using a clinical risk evaluation tool powered by PreViser®. This tool is provided to you by Delta Dental of Idaho at no charge. The risk assessment is quick and easy and may provide your patients with additional preventive benefits such as extra cleanings, extra periodontal maintenance, fluoride, sealants and more. You can perform this risk assessment on your patients immediately.

HOW TO GET STARTED:









First, simply create your PreViser account at go.deltadentalid.com/PreViser and follow the registration steps.



Second, begin your PreViser oral health risk assessment for your patient. If your patient is high-risk for a certain condition, Delta Dental of Idaho will “unlock” additional preventive benefits immediately.

BELOW ARE JUST SOME OF THE BENEFITS THAT MAY BE COVERED BASED ON RISK SCORES

- | | |
|---|---|
|  Additional cleanings |  Additional sealants (<i>child and adult</i>) |
|  Fluoride (<i>child and adult</i>) |  Periodontal maintenance
(<i>gum disease treatment</i>) |
|  Oral hygiene instruction, nutritional counseling, or tobacco cessation counseling |  Drugs or medicaments dispensed in the office for home use |

If you have questions or would like to contact us for more information about the new Health *through* Oral Wellness program, please contact us by phone at (208) 489-3580 or toll-free at (800) 356-7586 or by email at customerservice@deltadentalid.com.

*Additional preventive benefits are subject to the provisions of your patient's Delta Dental of Idaho policy. All enhanced benefits are subject to the patient meeting their plan's annual maximum and other limitations. A risk assessment must be performed at every routine re-care visit to occur at least once in the plan year. Enhanced benefits and standard policy requirements, including coinsurance percentages, copayments and plan maximums, may be subject to changes.

DENTAL BLUE CONNECT

AFFORDABLE & SIMPLIFIED DENTAL CARE PLAN



PERSONAL & PROACTIVE CARE

Willamette Dental Group's practice philosophy focuses on proactive dental care. This means we focus on preventing disease rather than treating it surgically. This is achieved by practicing evidence-based dentistry.



NO ANNUAL MAXIMUM*, DEDUCTIBLE OR WAITING PERIODS

We blend preventive dental care with broad insurance coverage, making it affordable, with no annual maximums*, no deductibles and predictable copays for all covered services. Patients can plan for their care and treatments rather than being surprised by a bill based on unknown fees.



ORTHODONTIC BENEFITS FOR ALL AGES

Orthodontic coverage is included for both adults & children. With no waiting periods and a predictable, low copay, members have access to affordable orthodontic care.



CONVENIENT CARE

Willamette Dental Group providers are found at dental offices throughout Idaho, Oregon, and Washington. Most offices are open Monday - Friday from 7am - 5:30pm and select Saturdays.



EXCEPTIONAL PATIENT EXPERIENCE

Willamette Dental Group is dedicated to creating the best patient experience possible, as shown through an average score of 92 percent on a patient satisfaction survey.

9/10

Patients would recommend
Willamette Dental to
their friends & family.

nrc
HEALTH



Life events can change employee needs year-to-year, one plan may not meet the needs of each employee and their family. With the added Dental Blue Connect dental plan, employees can choose the plan that best fits their current life stage and budget.

Visit www.willamettedental.com to learn about your Willamette Dental providers, read reviews, and read how our care is different.



Treat your hearing loss, easily and affordably



What causes hearing loss?

Hearing loss can be temporary and caused by simple things like ear wax or a cold. It can also be permanent, caused by damage to the tiny hair-like cells in the inner ear as a result of exposure to noise, aging, other health conditions, or certain medications.



When should I get my hearing checked?

Hearing loss can come on so gradually that you may not even notice it's happening. In general, you should have your hearing screened every three to five years, and tested annually if you are over the age of 50 or experiencing any of the following:

- **Consistent exposure** to loud noises.
- **Difficulty understanding** in noisy environments or in groups.
- **Hearing mumbling** or feeling as though people are not speaking clearly.
- **Ringing** in your ears.



How can I check my hearing?

Getting your hearing checked is now easier than ever with in-person and at-home options:

- **Virtual screening** allows you to confirm if hearing loss is detected from the comfort of home
- **Professional hearing evaluations** take place in a hearing care clinic setting. A hearing care professional will work with you to complete an in-depth evaluation of your hearing and propose solutions if hearing loss is indicated.


Learn more at www.amplifonusa.com/ddid

 **DELTA DENTAL**

 **amplifon** Hearing Health Care.

See reverse for your benefit information >

If you think you may have hearing loss, rest easy. Delta Dental of Idaho has teamed up with Amplifon to offer you quality hearing health care.

	Level 1	Level 2	Level 3	Level 4	Level 5
	Hearing aid options from the top brands with an average savings of 66% off retail pricing.				
Amplifon Price (per ear)	\$995/ear	\$1,495/ear	\$1,795/ear	\$2,195/ear	\$2,645/ear
	New virtual services Virtual screening – determine need from the comfort of home Personalized coaching – enhance adjustment and use of hearing aids On-demand virtual visits – convenient care for non-clinical support				
	Risk-free trial Find your right fit by trying your hearing aids for 60 days				
	Complimentary aftercare 1 year follow-up care - ensures smooth transition to your new hearing aids 2 year battery support - battery supply or charging station to keep you powered 3 year warranty - coverage for loss, repairs, or damage				

To learn more, call 866-921-3974 TTY: 711 | Hours: Mon-Fri 7am - 8pm CT
or visit: www.amplifonusa.com/ddid

You and your provider will determine the best device to meet your hearing loss, lifestyle, and technology needs.

Risk-free trial - 100% money-back guarantee if not completely satisfied, no return or restocking fees

Follow-up care - for one year following purchase. **Batteries** - two-year supply of batteries (80 cells/ear/year) or one standard charger at no additional cost. **Warranty** - exclusions and limitations may apply. Contact Amplifon 866-921-3974 for details.

Virtual screening does not take the place of a diagnostic exam by a licensed professional. Not all virtual services are available on all products.

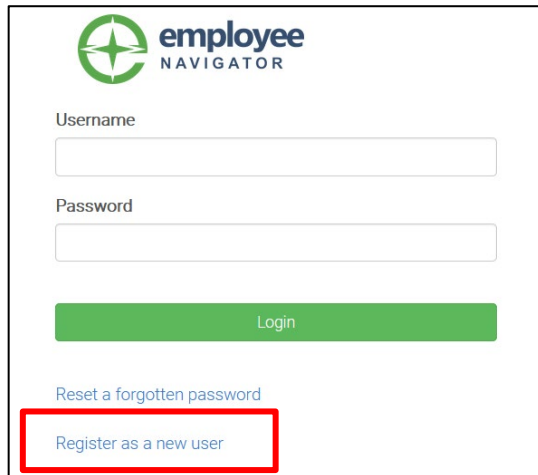
Amplifon Hearing Health Care is solely responsible for the administration of hearing health care services, and its own financial and contractual obligations. Delta Dental of Idaho and Amplifon are independent, unaffiliated companies. The Amplifon Hearing Health Care discount program is not approved for use with any third-party payor program, including government and private third-party payor programs. Hearing services are administered by Amplifon Hearing Health Care, Corp.



Employee User Guide

Registering as a New User
Enrolling for Benefits
Life Events

USER REGISTRATION: Employee Navigator



The login form for Employee Navigator. It features the logo at the top left, followed by input fields for 'Username' and 'Password'. Below these is a green 'Login' button. At the bottom, there are two links: 'Reset a forgotten password' and 'Register as a new user', with the latter highlighted by a red rectangular box.

Step 1:

Go to www.employeenavigator.com
find the **login** button on the upper right of the screen.

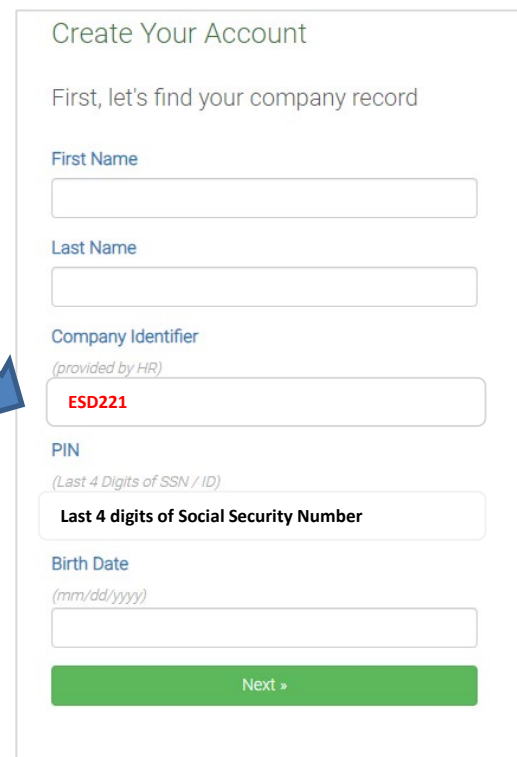
Click on **REGISTER AS NEW USER**
if this is your first time logging into the portal.

Step 2: CREATE YOUR ACCOUNT

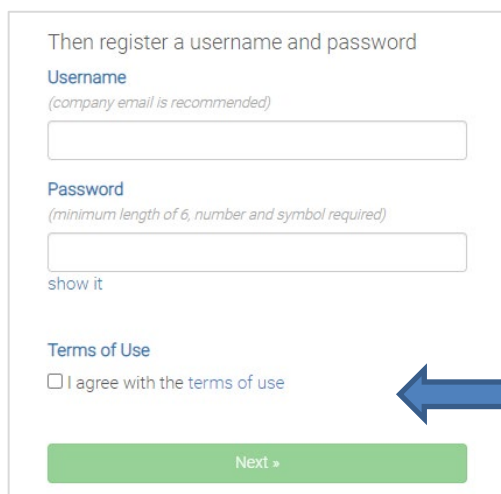
Enter in the requested fields:

- First Name
- Last Name
- Company Identifier is: **ESD221** (all caps)
- Last 4 digits of your social security number
- Your birthdate (mm/dd/yyyy)
- Click **Next >>**

*if you receive a message that states you are already registered, go back to the login page and click "reset a forgotten password"



The 'Create Your Account' form. It starts with the heading 'Create Your Account' and the instruction 'First, let's find your company record'. It contains input fields for 'First Name', 'Last Name', 'Company Identifier' (with a note '(provided by HR)' and the value 'ESD221'), 'PIN' (with a note '(Last 4 Digits of SSN / ID)'), 'Last 4 digits of Social Security Number', and 'Birth Date' (with a note '(mm/dd/yyyy)'). A green 'Next >>' button is at the bottom.



The 'Then register a username and password' form. It has input fields for 'Username' (with a note '(company email is recommended)') and 'Password' (with a note '(minimum length of 6, number and symbol required)'). Below the password field is a 'show it' link. There is a 'Terms of Use' section with a checkbox 'I agree with the terms of use'. A green 'Next >>' button is at the bottom.



Step 3: Create Username and Password

Recommended Username:

- Your company email (test@.isd221.net)

Password Requirements:

- Must be at least 6 characters
- Must contain at least (1) Number: (0-9)
- Must contain at least (1) Symbol: (!,@,#,\$,%)

Be sure to make note of your password for accessing your benefits later.

- Click the box to Agree with Terms of Use and Click **Next >>** to continue

HOW TO REQUEST A CHANGE TO YOUR BENEFITS:

1

Login to your Employee Navigator portal with your Username and Password



Link to login page:

<https://www.employeenavigator.com/benefits/Account/Login>

Are you a Registered User of Employee Navigator?

If you have not yet registered as a user under Employee Navigator, click on the **“Register as new user”** link on the login page.

Enter your personal information and the **Company Identifier: XYZ** (all caps)



Username

Password

Login

[Reset a forgotten password](#)

[Register as a new user](#)

2

Once you have successfully logged-into your portal, your **HOMEPAGE** should appear. Click on the **Life Events** box from your dashboard



Good After

Grab a cup of coffee a

It's good to see you.

To request a change to your benefits enrollment, click on the **LIFE EVENTS** Box

Shortcuts



View Profile



Document Library



Enrollment Summary



Life Events

PROCEED TO NEXT PAGE>>

LIFE EVENTS:



An event that changes your life- like getting married, having a baby, or losing health coverage – may qualify you to enroll in your employer’s health insurance outside the annual open enrollment period. If you experience a qualified life event, you can change or cancel your current elections(s). The request to change must be submitted within 30 days of the life event in most cases. The change you make to your coverage must be consistent with the specific life event. If you have questions about a life event, please contact your HR team.

Life Events that qualify for changes are listed in Employee Navigator:

Who is the change for? The life events chart is split into 2 categories. Events on the left affect just the Employee’s coverage, and events on the right affect dependent coverage.

Making changes to EMPLOYEE coverage

Add Coverage

Your Coverage (employee)

- Employee Loss of Coverage
- Divorce or Legal Separation
- Death of Spouse
- Spouse Loses Coverage at Their Employer
- Spouse Open Enrollment

Drop Coverage

Your Coverage (employee)

- Employee Eligible for Medicare
- Employee Married and Changes to Spouse's Plan
- Military Leave (COBRA)
- No Longer Eligible for Benefits (COBRA)
- Spouse Gains Coverage at Their Employer
- Spouse Open Enrollment

Adjust Coverage

Your Coverage (employee)

- HSA Adjusts
- Adjust Daycare
- Adjust FSA

Making changes to DEPENDENT’S coverage

Dependent Coverage - family

- Marriage
- Newborn Child
- Adopt a Child
- Dependent Loss of Coverage
- Temporary Legal Guardianship Begins

Dependent Coverage - family

- Divorce or Legal Separation
- Death of a Dependent
- Court Ordered Dependent Coverage
- Dependent Eligible for Other Coverage
- Dependent Eligible for Medicare
- Drop Coverage When Dependent Over Eligible Age (COBRA)

HR Tasks for Life Events: Documentation

Most Life Events will require certain documentation to be provided after you submit the request. Shortly after you submit the Life Event Change, you may be contacted by HR to provide additional documentation.

To ADD Coverage for yourself, or a covered dependent, follow the steps below:

From the LIFE EVENTS PAGE, **locate and select** the event triggering the change to your coverage. For example, if you want **to ADD A NEWBORN CHILD**: Find Add Coverage > Select Newborn Child

Who is it for? Be sure to select the event under the right category:

The screenshot shows the 'Add Coverage' form. A large blue arrow labeled 'Add Coverage' points to the form title. Two callout boxes point to the form sections: 'Adding coverage for Yourself' points to the 'Your Coverage (employee)' section, and 'Adding coverage for a dependent' points to the 'Dependent Coverage - family' section.

Your Coverage (employee)	Dependent Coverage - family
Employee Loss of Coverage	Marriage
Divorce or Legal Separation	Newborn Child
Death of Spouse	Adopt a Child
Spouse Loses Coverage at Their Employer	Dependent Loss of Coverage
Spouse Open Enrollment	Temporary Legal Guardianship Begins

Enter the date the coverage should start.

Example: If the date of marriage was 7/15, enter the date of this event as 8/1.

Enter the date of this event

03/01/2021

Adding coverage date should always be on the first day of the month (unless adding newborn)

Select Dependent: (if applicable)

If the dependent is not listed on the dropdown, click **add a new one+**

Select the dependent you wish to add

Firstname Lastname

or **add a new one+**

• When adding a newborn child, enter the child's date of birth in the event date.

Select the benefits you wish to change and click Save.

Benefits

☐

Medical will change from \$74.95 to \$146.05

☐

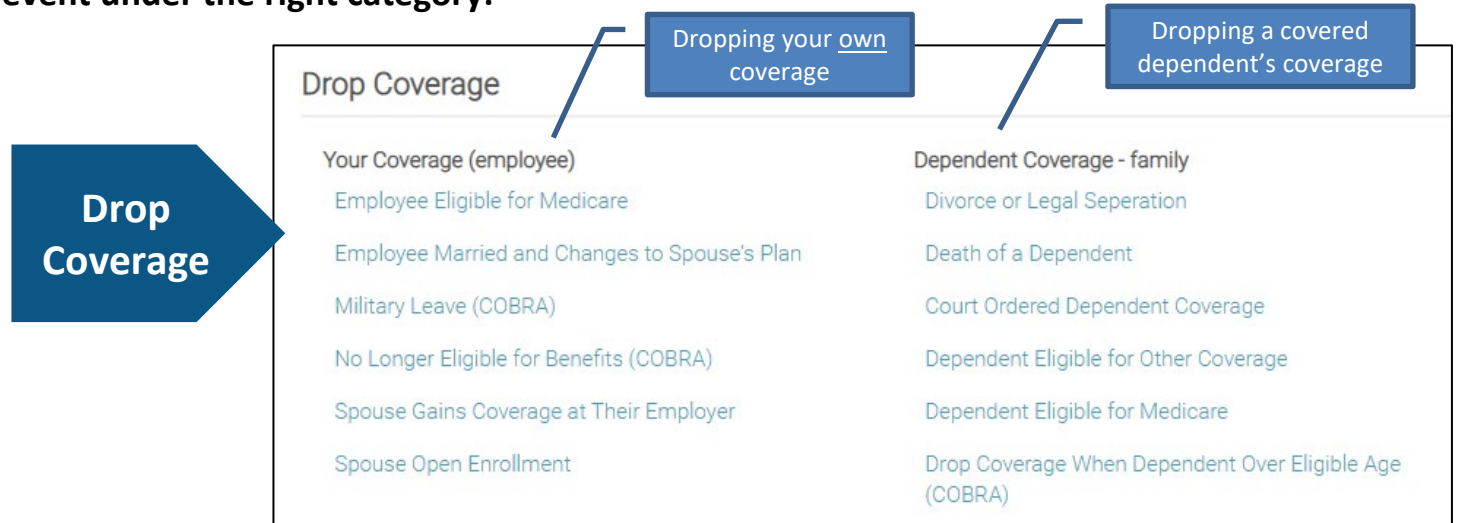
Vision will change from \$0 to \$0

• **NOTE:** Dependents can only be added to existing coverage. In the event that the life event is triggering the need to add new coverage, this will have to be processed as an EMPLOYEE life event to first add the coverage to the employee record. If more than one dependent needs to be added because of the event, once the first event is recorded there will be an option to "Add Another" and the steps are repeated to select the dependent and coverage to be added.

To DROP Coverage for yourself, or a covered dependent, follow the steps below:

From the LIFE EVENTS PAGE, **locate and select** the event triggering the change to your coverage.
For example, if you need to remove your Spouse because they gained coverage at their employer, select Dependent Eligible for Other Coverage

Who is it for? Be sure to select the event under the right category:



Drop Coverage	Dropping your <u>own</u> coverage	Dropping a covered dependent's coverage
Your Coverage (employee)		Dependent Coverage - family
Employee Eligible for Medicare		Divorce or Legal Separation
Employee Married and Changes to Spouse's Plan		Death of a Dependent
Military Leave (COBRA)		Court Ordered Dependent Coverage
No Longer Eligible for Benefits (COBRA)		Dependent Eligible for Other Coverage
Spouse Gains Coverage at Their Employer		Dependent Eligible for Medicare
Spouse Open Enrollment		Drop Coverage When Dependent Over Eligible Age (COBRA)

Enter the date the coverage should END.

If your dependent's new coverage will begin 2/1 then you will want to enter 01/31 as the event date.

Enter the date of this event

01/31/2021

Select Dependent: (if applicable)

Select the dependent that should be removed from coverage and click **Save**.
If you need to remove more than one dependent, you can repeat this process for each dependent.

Select the dependent you wish to drop

-- Select --

Dropping coverage date should always be on the last day of the month

Select the benefits you wish to change and click Save.

Benefits

☐

Medical currently costs \$146.05. After this change it will be \$74.95.

• **NOTE:** Dependent children who are turning 26 will automatically be dropped from your medical, dental and vision coverage on the last day of the month following their 26th birthday.

Complete HR Task: Upload Documents for Life Event

Upload Document

Once you have located the required document(s) requested by your HR Administrator, you must **UPLOAD** them to your Employee Navigator Portal in order for your HR Team to approve your benefit changes.

Step 1:

You may **SCAN** and **SAVE** the Documents to your Computer – or –
Take a Screenshot or Photo of your Document and save to your smartphone.

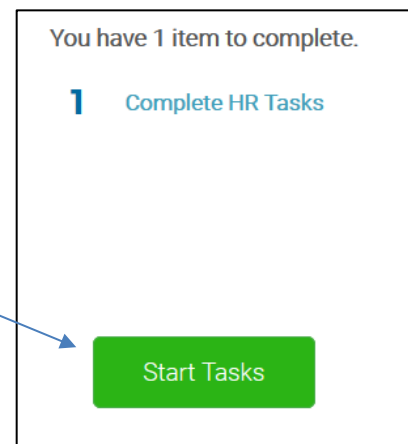
STEP 2:

- Go To www.employeenavigator.com
- Click LOGIN
- Enter your Username and Password

STEP 3:

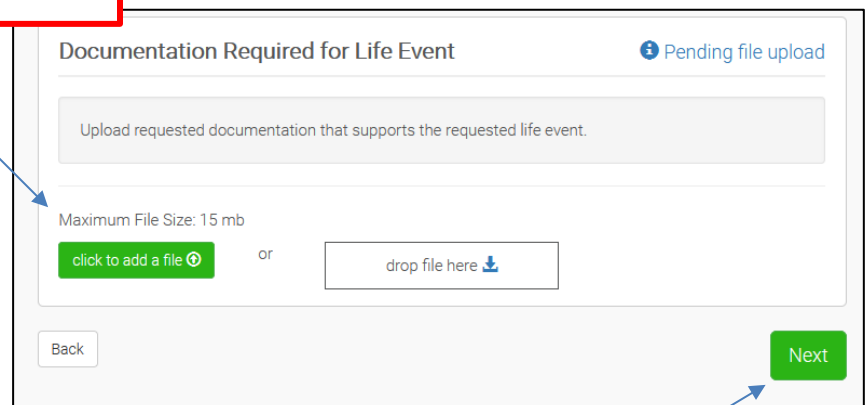
From your Homepage, you will see a message that says “You Have 1 HR item to complete”

Click on the green **START TASKS** button



STEP 4:

Select the Green click to add a file button
Locate the document from your computer or phone and upload.



Click **Next** to Save and Exit. You will be contacted regarding the approval of your document.

Change Your Contributions to Your Health Savings Account

Employees may adjust the amount they contribute to their Health Savings Account (HSA) at any time throughout the year. Keep in mind that you must stay within the IRS maximum limits and must factor in the amount contributed by your employer.

From the LIFE EVENTS PAGE, locate **“Adjust coverage”** category > Select **“HSA Adjusts”**

**Adjust
Coverage**

Adjust coverage

HSA Adjusts

Adjust Limited Purpose FSA

Adjust Daycare

Enter the date you wish to change your contribution. Date must be in the future and must be on the 1st of the month.

Enter the desired effective date



Enter the amount per pay you want to contribute:

How much do you want to defer per pay?

\$

New estimated projection:

Booklet Developed in Partnership With

