

## Gilbert Public Schools

# 2026-2027 EMPLOYEE BENEFIT GUIDE

### A Message from HR at Gilbert Public Schools

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

You can also view our benefit plans by accessing our website: [www.gilbertschools.net/jobs/benefits](http://www.gilbertschools.net/jobs/benefits)

Sincerely,

*Adriane Dutchover*

Adriane Dutchover  
Benefits & Compliance Manager



# Table of Contents

A Message from HR at Gilbert Public Schools .....	1
Eligibility.....	2
Medical Insurance.....	3
Health Savings Account (HSA).....	4
Flexible Spending Accounts (FSA) .....	4
Dental Insurance.....	5
Vision Insurance.....	5
Your 2026 Premium Costs.....	5
Short-Term Disability (STD).....	6
Voluntary Critical Illness .....	6
Employer Paid Life and AD&D .....	6
Voluntary Life and AD&D.....	6
Employee Assistance Program (EAP) .....	7
Contact Information .....	8

## Eligibility

### Eligible Employees:

You may enroll in the Gilbert Public Schools Employee Benefits Program if you are a full-time employee working at least 30 hours per week.



### Eligible Dependents:

If you are eligible for our benefits, then your dependents are too. In general, eligible dependents include your spouse, domestic partner, and children up to age 26 (for medical, life and AD&D, and voluntary critical illness coverage) and up to age 24 (for dental and vision coverage). If your child is mentally or physically disabled, coverage may continue beyond age 26 (or age 24) once proof of the ongoing disability is provided. Children may include natural, adopted, stepchildren and children obtained through court-appointed legal guardianship, as well as children of same sex state-registered domestic partners. Contact GPS Benefits to ensure all required paperwork is provided for eligible dependents.

### When Coverage Begins:

The effective date for your benefits is **July 1, 2026**. All elections are in effect for the entire plan year and can only be changed during Open Enrollment unless you experience a qualified life event.

### Qualified Life Events (QLE):

A QLE is a change in your personal life that may impact your or your dependent's eligibility for benefits. Examples of qualified life events include:

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

If such an event occurs, you must request to update your benefits within 30 days of the event date. Documentation is required to verify your change of status. Failure to request a change of status within 30 days of the event may result in you having to wait until the next open enrollment period to make your change. Please contact GPS Benefits to make these changes.

# Medical Insurance

Gilbert Public Schools offers medical coverage through AmeriBen using the BlueCross BlueShield of Arizona (BCBSAZ) network. The information below is a brief outline of the plans available to you and your eligible dependents. Please note that there are **no out-of-network benefits** unless traveling or covering a dependent who resides outside of Arizona. You can use any doctor or hospital in the PPO Blue Cross Blue Shield of Arizona network. Please visit <http://www.azblue.com/jaanetwork> to find a provider. For more information, please refer to the summary plan description for complete plan details.

	Trust Plus \$1,000 / \$3,000 Plan	Trust Savings \$1,800 / \$3,600 Plan	Trust Savings \$2,500 / \$5,000 Plan
	In-Network Benefits Only	In-Network Benefits Only	In-Network Benefits Only
<b>Annual Deductible</b>			
Individual / Family	\$1,000 / \$3,000	\$1,800 / \$3,600	\$2,500 / \$5,000
Coinsurance (Member Pays)	25%	25%	25%
<b>Maximum Out-of-Pocket*</b>			
Individual / Family	\$6,850 / \$13,700	\$5,200 / \$10,400	\$6,350 / \$12,700
<b>Physician Office Visit</b>			
Primary & Specialty Care	25% after deductible	25% after deductible	25% after deductible
<b>Preventive Care</b>			
Adult Exams (Including Colonoscopy) & Well-Child Care	100%	100%	100%
<b>Diagnostic Services</b>			
X-ray, Lab Tests & Complex Radiology	25% after deductible	25% after deductible	25% after deductible
Urgent Care Facility	25% after deductible	25% after deductible	25% after deductible
Emergency Room Facility Charges	\$200 copay then 25% after deductible	\$150 copay then 25% after deductible	\$150 copay then 25% after deductible
Inpatient Facility Charges	\$500 copay then 25% after deductible	\$300 copay then 25% after deductible	\$300 copay then 25% after deductible
Outpatient Facility & Surgical Charges	\$250 copay then 25% after deductible	\$150 copay then 25% after deductible	\$150 copay then 25% after deductible
<b>Mental Health</b>			
Inpatient	\$500 copay then 25% after deductible	25% after deductible	25% after deductible
Outpatient	25% after deductible	25% after deductible	25% after deductible
<b>Substance Abuse</b>			
Inpatient	\$500 copay then 25% after deductible	25% after deductible	25% after deductible
Outpatient	25% after deductible	25% after deductible	25% after deductible
<b>Other Services</b>			
Chiropractic	25% after deductible	25% after deductible	25% after deductible
<b>Retail Pharmacy (30 Day Supply)</b>			
Rx Deductible	\$100 Individual / \$250 Family	Combined with medical	Combined with medical
Generic, Formulary Brand, Non-Formulary Brand	20% (min. \$10), 30%, 40%	25% after deductible	25% after deductible
<b>Mail Order Pharmacy (90 Day Supply)</b>			
Generic / Formulary Brand / Non-Formulary Brand	\$20 / \$40 / \$60 copay	25% after deductible	25% after deductible
Specialty Drugs	15%, up to \$250	25% after deductible	25% after deductible

\*Maximum Out-of-Pocket includes deductible, coinsurance, and copays (if applicable).

**Trust Savings Plans deductibles: Those enrolled as individual are required to meet the \$1,800 or \$2,500 deductible. For those enrolled with 1 or more dependents; you are required to meet the family deductible of \$3,600 or \$5,000 before coinsurance is applicable.**

# Health Savings Account (HSA)

## What is a Health Savings Account (HSA)?

An HSA is a tax-sheltered bank account that you own to pay for eligible health care expenses for you and/or your eligible dependents for current or future healthcare expenses. The Health Savings Account (HSA) is yours to keep, even if you change jobs or medical plans. There is no “use it or lose it” rule; your balance carries over year to year. Plus, you get extra tax advantages with an HSA:

- Money you deposit into an HSA is exempt from federal income taxes.
- Interest in your account grows tax free.
- You do not pay income taxes on withdrawals used to pay for eligible health expenses. (If you withdraw funds for non-eligible expenses, taxes and penalties apply).
- You also have a choice of investment options which earn competitive interest rates, so your unused funds grow over time.

## Are you eligible to open a Health Savings Account (HSA)?

Although everyone can enroll in the Qualified High Deductible Health Plan, not everyone is eligible to open and contribute to an HSA. If you do not meet the requirements below, you cannot open an HSA.

- You must be enrolled in a Qualified High Deductible Health Plan (QHDHP).
- You must not be covered by another non-QHDHP health plan, such as a spouse’s PPO plan.
- You are not enrolled in Medicare.
- You are not in the TRICARE or TRICARE for Life military benefits program.
- You have not received Veterans Administration (VA) benefits or Indian health services (ISH) within the past three months.
- You are not claimed as a dependent on another person’s tax return.
- You are not covered by a traditional health care flexible spending account (FSA). This includes your spouse’s FSA. (Enrollment in a limited purpose health care FSA is allowed).

## 2026 HSA Contributions

You can contribute to your Health Savings Account on a pre-tax basis through payroll deductions, up to the IRS statutory maximums (based on a **calendar** year).

### 2026 HSA Calendar Year Max Contributions:

- **\$4,400 Individual**
- **\$8,750 Family**
- If you are age 55 and older, you may contribute an extra \$1,000 catch up contribution.

**NOTE: GPS contributes \$375 for \$1,800 HDHP and \$725 for \$2,500 HDHP annually into your HSA.**

You are responsible for making sure your annual contribution does not exceed the above maximums. Contributions from GPS are included in that total. For example, someone in the \$1,800 HDHP as an individual, after the GPS contribution, could contribute up to \$4,025 to not exceed IRS maximum.

## Flexible Spending Accounts (FSA)

A **Flexible Spending Account (FSA)** allows you to set aside pre-tax dollars to cover qualified expenses you would normally pay out of your pocket with post-tax dollars. You pay no federal or state income taxes on the money you place in an FSA. The **Limited Purpose FSA** allows you to pay certain dental and/or vision care expenses **ONLY** with pre-tax money (if you have an HSA). The **Dependent Care FSA** allows you to pay certain dependent day care expenses.

### 2026 FSA Max Contributions:

- **\$3,400 Healthcare FSA**
- **\$3,400 Limited Purpose FSA**
- **\$7,500 Dependent Care FSA**

### How an FSA works:

Choose a specific amount of money to contribute each pay period, pre-tax, to one or both accounts during the year. This amount is pre-funded in full to your healthcare (or limited purpose) FSA at the beginning of the plan year. As you incur eligible expenses, you may use your FSA debit card to pay at the point of service. Please plan your FSA contributions carefully, as any funds not used by the end of the year will be forfeited. **Re-enrollment is required each year.**

### Important rules to keep in mind:

- The IRS has a strict “use it or lose it” rule. If you do not use the full amount in your FSA, you will lose any remaining funds over the rollover allowance. You may roll over up to \$500 of unused funds to the following year. **You must enroll for the next plan year in order to use roll over funds.**
- Once you enroll in the FSA, you cannot change your contribution amount during the year unless you experience a qualifying life event.
- You cannot transfer funds from one FSA to another.

## Dental Insurance

Gilbert Public Schools offers Dental Insurance through Delta Dental of Arizona. For those members with any physical, developmental, mental, sensory, behavioral, cognitive, or emotional impairment, additional benefits may be available, including, but not limited to, additional visits, consultations, exams, cleanings, and treatment delivery modifications, which may include limited anesthesia.

	Dental	
	In-Network Benefits	Out-of-Network Benefits
<b>Annual (Plan Year) Deductible</b>		
Individual	\$50	\$50
Family	\$150	\$150
Waived for Preventive Care?	Yes	Yes
<b>Annual (Plan Year) Maximum</b>		
Per Covered Person	\$1,250	\$1,250
<b>Covered Services</b>		
Preventive	100%	80%
Basic	80%	60%
Major	60%	40%
<b>Orthodontia</b>		
Benefit Percentage	60%	40%
Adults & Child(ren) Aged 8+	Covered	Covered
Lifetime Maximum Per Covered Person	\$1,750	\$1,750
Benefit Waiting Periods	N/A	N/A

## Vision Insurance

Gilbert Public Schools provides Vision Insurance through Vision Service Plan (VSP). GPS covers the full cost of vision for those enrolled in medical. **You must be enrolled in one of the medical plans to be enrolled in the vision plan.**

	Vision
<b>Copay</b>	
Routine Exams	\$0 copay, every plan year
<b>Vision Materials</b>	
Materials Copay	\$0 copay
Standard Lenses	\$0 copay, every plan year
Contacts (Covered in lieu of frames)	Elective contacts: \$150 allowance; every plan year <i>Medically necessary contacts may be covered at a higher benefit level.</i>
Frames	\$180 allowance + 20% savings on amount over allowance; every other plan year

### How Your Vision Plan Works

VSP does not provide vision cards to employees. When you need to see an eye care professional, simply visit <https://www.vspdirect.com/find-a-doctor> or contact VSP Customer Service at (800) 785-0699 to receive a listing of providers in your area.

## Your 2026 Premium Costs

Medical Plans	Employee Contributions		
	Annual	Monthly	21 Pay Periods
<b>Trust Plus \$1,000 / \$3,000 Plan</b>			
Employee	\$1,843.02	\$153.58	\$87.76
Employee & Spouse	\$9,298.63	\$774.89	\$442.79
Employee & Child(ren)	\$7,168.41	\$597.37	\$341.35
Employee & Family	\$14,624.15	\$1,218.68	\$696.39
<b>Trust Savings \$1,800 / \$3,600 Plan*</b>			
Employee	\$231.80	\$19.32	\$11.04
Employee & Spouse	\$7,011.69	\$584.31	\$333.89
Employee & Child(ren)	\$5,203.78	\$433.65	\$247.80
Employee & Family	\$11,531.65	\$960.97	\$549.13
<b>Trust Savings \$2,500 / \$5,000 Plan**</b>			
Employee	\$0.00	\$0.00	\$0.00
Employee & Spouse	\$6,172.54	\$514.38	\$293.93
Employee & Child(ren)	\$4,410.05	\$367.50	\$210.00
Employee & Family	\$10,569.66	\$880.80	\$503.32

Dental Plan	Employee Contributions		
	Annual	Monthly	21 Pay Periods
<b>Trust Plus Plan</b>			
Employee	\$428.73	\$35.73	\$20.42
Employee & Spouse	\$1,232.60	\$102.72	\$58.70
Employee & Child(ren)	\$978.03	\$81.50	\$46.57
Employee & Family	\$1,433.60	\$119.47	\$68.27

\* Includes District HSA contribution of \$375 annually

\*\* Includes District HSA contribution of \$725 annually

*Note: It is the employee's responsibility to ensure they do not exceed the annual maximums for HSA contributions. The 2026 employee-only coverage has a contribution limit of \$4,400, whereas the employee-plus-family coverage has a contribution limit of \$8,750 per year.*

## Short-Term Disability (STD)

Basic short-term disability is provided at no cost to all full-time benefit eligible employees. Additional voluntary short-term disability is available to purchase through Lincoln Financial Group and may help to provide income replacement, if disabled for a short period of time.

	Employer Paid STD	Voluntary STD
<b>When Benefits Begin</b>		
Injury	On the 91 <sup>st</sup> day	On the 15 <sup>th</sup> day
Sickness	On the 91 <sup>st</sup> day	On the 15 <sup>th</sup> day
<b>Benefit Amount</b>		
Percentage of Weekly Salary	66.67%	Increments of \$50, \$100 minimum, up to 66.67%
Weekly Benefit Maximum Amount	\$750	\$1,000
<b>Benefit Ends</b>		
Benefit Duration	13 Weeks	11 Weeks

## Employer Paid Life and AD&D

Gilbert Public Schools provides Basic Life and AD&D benefits to eligible employees, at no cost. 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.

The above benefits will begin to decrease at age 70. Please refer to the plan documents.

## Voluntary Life and AD&D

In addition to the employer paid Basic Life and AD&D coverage, you have the option to purchase additional voluntary life. Those who have previously waived coverage and wish to enroll during open enrollment will need to complete Evidence of Insurability for all amounts. Coverage will not be effective until approved by Unum.

### Important Reminder!

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

## Voluntary Critical Illness

Unum Critical Illness provides a lump-sum cash benefit to help you cover the out-of-pocket expenses associated with a critical illness.

	Voluntary Critical Illness
Benefit Options	\$10,000, \$20,000 or \$30,000
Examples of Covered Conditions	Heart Attack, Stroke, Kidney Failure, Paralysis, Blindness, Major Organ Transplant, Cancer
Pre-Existing Conditions	A pre-existing condition is a condition for which you have consulted a medical provider or received medical treatment or services during the 6-month period prior to your effective date of coverage.
Be Well Benefit	Each family member covered is eligible for a benefit each year for qualified screening test: \$10,000 Benefit Option: \$50.00 \$20,000 Benefit Option: \$75.00 \$30,000 Benefit Option: \$100.00

	Employer Paid Life and AD&D
You	1x annual salary up to \$50,000
Spouse	\$2,500 (If enrolled in Medical)
Child	\$2,500 (If enrolled in Medical)

	Voluntary Life and AD&D
<b>You</b>	
Benefit Maximum	Increments of \$10,000 to \$500,000, not to exceed 5x your annual earnings
Guaranteed Issue	\$100,000
<b>Your Spouse</b>	
Benefit Maximum	Increments of \$5,000 to \$150,000, not to exceed 50% of employee's benefit
Guaranteed Issue	\$25,000
<b>Your Child(ren)</b>	
Benefit Maximum	Increments of \$2,000 to \$10,000
Guaranteed Issue	\$10,000

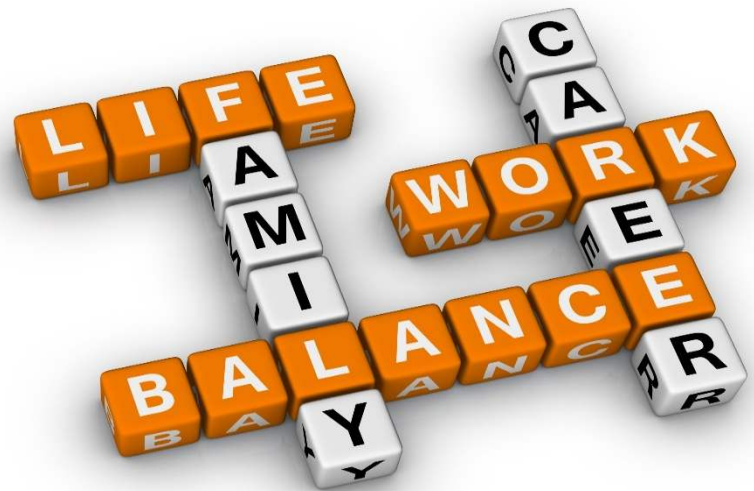
## Employee Assistance Program (EAP)

All of us experience times when a personal problem or crisis affects the way we function at work or at home. Your Employee Assistance Program (EAP) is a problem-solving resource available to you and your household members.

**It's free...** Your employer covers the cost of 10 counseling sessions per year, additional problem-solving sessions, and referral services.

**It's confidential...** EAP has been set up with Jorgensen, an outside counseling resource to assure confidentiality. No one at work will know you have chosen to seek help unless you choose to tell them. Nothing concerning your use of EAP will appear in your personnel file.

Counseling sessions are available face-to-face, via televideo or chat therapy.



Jorgensen is only a phone call away at:  
**(888) 520-5400**

or at [www.jorgensenbrooks.com](http://www.jorgensenbrooks.com)

Company Login: GPS / EAP Website Password: GPS / EAP Mobile Password: JBG

## Legal Insurance from ARAG

### What is Legal Insurance?

Legal coverage is not just for serious issues, it is for your everyday needs, too. Legal insurance helps you address common situations like creating wills, transferring property or dealing with a traffic ticket.

### What Does legal Insurance Cover?

Shown below – and many more – to help you address life's legal situations.

### Some Legal Needs It Can Cover:

- Buying or selling a car
- Adoption
- Divorce
- Debt collection
- Buying and selling a home
- Contracts/lease agreements
- Traffic tickets
- Will/Trust



### WANT MORE INFORMATION?



For specific details about your plan, and to view a complete list of coverages, visit [ARAGlegal.com/myinfo](http://ARAGlegal.com/myinfo) and enter Access Code: **18903gps**



To talk with someone, call ARAG at **800-247-4184**

# Contact Information

## Have Questions? Need Help?

Gilbert Public Schools 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 Benefit Specialists are experienced professionals, and their primary responsibility is to assist you.

The Specialists in the Benefit Resource Center are available Monday through Friday, 8:00 a.m. to 5:00 p.m., toll free at (866) 468-7272 or via e-mail at [BRCWest@usi.com](mailto:BRCWest@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.

Additional information regarding benefit plans can be found on [www.gilbertschools.net/jobs/benefits](http://www.gilbertschools.net/jobs/benefits). Please contact GPS Benefits to complete any changes to your benefits that are not related to your initial or annual enrollment.

## Carrier Member Service Information

	CARRIER	PHONE NUMBER	WEBSITE	
Medical Plan Claims Administration	AmeriBen Policy #: 0721029	(877) 379-5804	<a href="http://www.myameriben.com">www.myameriben.com</a>	
In-Network Providers	BlueCross BlueShield of AZ		<a href="http://www.azblue.com/jaanetwork">http://www.azblue.com/jaanetwork</a>	
	Mayo Clinic and Hospital		<a href="https://www.azblue.com/find-a-doctor/chs-mayo">https://www.azblue.com/find-a-doctor/chs-mayo</a>	
Prescription Drug Coverage	CVS Caremark	(855) 297-2149	<a href="http://www.caremark.com">www.caremark.com</a>	
AZBlue Telehealth	BlueCross BlueShield of AZ	(844) 606-1612	<a href="http://azbluetelehealth.com">http://azbluetelehealth.com</a>	
Dental Plan	Delta Dental of Arizona Policy#: 32716	(800) 352-6132	<a href="http://www.deltadentalaz.com">www.deltadentalaz.com</a>	
Vision Plan	Vision Service Plan (VSP) Policy #: 12316909	(800) 785-0699	<a href="http://www.vsp.com">www.vsp.com</a>	
Health Savings Account (HSA)	HealthEquity	(866) 382-3510	<a href="http://www.healthequity.com">www.healthequity.com</a>	
Flexible Spending Accounts (FSA)	Flexible Benefit Administrators Employer ID: FBAGPS	(800) 437-3539	<a href="http://www.flex-admin.com">www.flex-admin.com</a>	
Short-Term Disability (STD)	Lincoln Financial Group Policy #: 10217719	(877) 275-5462	<a href="http://www.lincolfinancial.com">www.lincolfinancial.com</a>	
Voluntary Critical Illness	Unum; Policy #: 880061	(800) 635-5597	<a href="http://www.unum.com">www.unum.com</a>	
District Paid Life and AD&D	Unum; Policy #: 934893	(866) 679-3054	<a href="http://www.unum.com">www.unum.com</a>	
Voluntary Life and AD&D	Unum; Policy #: 934894	(866) 679-3054	<a href="http://www.unum.com">www.unum.com</a>	
Employee Assistance Program (EAP)	Jorgensen Brooks Group Company login: GPS EAP website password: GPS EAP mobile password: JBG	(888) 520-5400	<a href="http://www.jorgensenbrooks.com">www.jorgensenbrooks.com</a>	
Voluntary Legal	ARAG Access code: 18903gps	(800) 247-4184	<a href="http://www.ARAGlegal.com/myinfo">www.ARAGlegal.com/myinfo</a>	
GPS Benefits Department	Main line: (480) 497-3384	Raquel Diez: (480) 545-2178	Katie Krause: (480) 497-3493	Adriane Dutchover: (480) 497-3323

This brochure summarizes the benefit plans that are available to Gilbert Public Schools 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 GPS Benefits Department. Information provided in this brochure is not a guarantee of benefits.