Lake Zurich School District 95
Benefit Summary

LAKE ZURICH COMMUNITY UNIT
School District 95

2026–2027

Table of Contents

Eligibility pg.3

- Eligibility Requirements
- New Hire Waiting Period
- Qualifying Life Events

Insurance Benefits pg.5

- Medical Insurance
- Dental Insurance
- Vision Insurance
- Life / AD&D Insurance
- Disability Insurance
- Voluntary Benefits
- Monthly Insurance Rates

Wellness Benefits pg.16

- Employee Assistance Program

Other Benefits pg.18

- Group Decreasing Term Life Insurance
- Global Travel Assistance Service

Monthly Rate Information pg.24

Carrier Contact Information pg.26

Eligibility

Eligibility

HR Contact: Carmen Garcia Reyes
Email: carmen.garciareyes@lz95.org
Phone: 847-540-4956

Eligibility Requirements

If you are a full-time employee (working 30 or more hours per week), you are eligible to enroll in the benefits described in this summary. Qualified dependents eligible for select benefit coverage include:

- Your legally married husband/wife
- Your child(ren) up to age 26
- Your incapacitated child(ren) whom are unmarried, incapable of self-support due to a mental or physical disability, and is a federal tax dependent.

New Hire Waiting Period

All benefit eligible employees electing coverage will be effective on the date of hire.

Qualifying Life Events

Outside of open enrollment you would need to have a qualifying event to add, drop, or make changes to your benefits. Employees are responsible for notifying Human Resources within 30 days of the qualifying life event to make a change to benefit elections. Qualifying event changes are effective on the date in which the event occurred.

Some examples of qualifying events are:

- Losing existing health coverage
- Losing eligibility for Medicare, Medicaid, or Children's Health Insurance Program (CHIP)
- Turning 26 and losing coverage through parent's plan
- Getting married or divorced
- Having a baby or adopting a child
- Death in the family

Insurance Benefits

Medical Insurance

Carrier: BCBS of IL
Website: www.bcbsil.com
Phone: HMO 800-892-2803
PPO/HSA 800-828-3116

HMO and HMOI

Both plans are in-network only plans. This means that only in-network services are covered. Both plans have a $100 individual deductible and a $300 family (3 individuals covered) deductible. Both plans are copay based and include a prescription plan. The prescription offers retail and mail order options. The prescription plan does have an out of pocket maximum of $5,100 individual and $10,200 family (3 individuals covered).

BCO PPO Plan

Covers both in-network and out-of-network services. The plan is copay and coinsurance based. Certain services will have a copay and others would be coinsurance percentage after the deductible is met. The plan has a $600 individual deductible and a $1,000 family (3 individuals covered) deductible for in-network. For out-of-network the individual deductible is $1,200 and a $3,600 family (3 individuals covered). The plan does also include a prescription plan. The prescription plan does have an out of pocket maximum of $5,100 individual and $8,700 family (3 individuals covered).

HDHP Plan

Covers both in-network and out-of-network services after the deductible is met. The plan has a $6,000 individual deductible and a $12,000 family (3 individuals covered) deductible for in-network. For out-of-network the individual deductible is $12,000 and a $24,000 family (3 individuals covered) deductible. This plan also offers a prescription plan.

Medical Plan

	HDHP		BA HMO B03477	HMOI H01534
	PPO	Out-of-Network	HMO ADV (In-Network Only)	HMO (In-Network Only)
Deductible				
Individual	$6,000	$12,000	$100	$100
Family	$12,000	$24,000	$300	$300
Coinsurance				
	0%	0%	0%	0%
Out-of-Pocket Max				
Individual	$6,000	$12,000	$1,500	$1,500
Family	$12,000	$24,000	$3,000	$3,000
Physician Services				
Preventive Care	No Charge	0% after ded.	No Charge	No Charge
Physician Visit Specialist	0% after ded.		$40 copay	$30 Coapy
Specialist Visit	0% after ded.		*$40 copay	*$30 copay
Diagnostic Test	0% after ded.		*No Charge	*No Charge
Imaging	0% after ded.		*No Charge	*No Charge
Inpatient Hospital	0% after ded.		*$500 copay per day (First 3 days per calendar year)	*$250 copay per day (First 3 days per calendar year)
Outpatient Hospital	0% after ded.		*No Charge	*No Charge
Emergency Room	0% after ded.		$150 Copay (waived if admitted)	$150 Copay (waived if admitted)
Urgent Care	0% after ded.		**$40 copay	**$30 copay
Pharmacy Generic/Preferred Brand/Non-Preferred Brand/Specialty				
Out of Pocket Maximum	**N/A**		**$5,100 Indicidual $10,200 Family (3 Individuals)**	**$5,100 Indicidual $8,700 Family (3 Individuals)**
Retail (30 Days)	0% after ded.		$10/$40/$60/$90	$20/$40/$70/$90
Mail Order (90 Days)	0% after ded.		$20/$80/$120	$40/$80/$140

***Referral Required**
****Must be affiliated with member's chosen medical group or referral required**

Medical Plan

	BCO PPO 311233		
	BCO	PPO	**Out-of-Network**
Deductible			
Individual	$600		$1,200
Family	$1,800		$3,600
Coinsurance			
	100%	100%	100%
Out-of-Pocket Max			
Individual	$1,600		$3,200
Family	$4,800		$9,600
Physician Services			
Preventive Care	No Charge		40% coinsurance
Physician Visit Specialist	$30 copay		40% coinsurance
Specialist Visit	$30 copay		40% coinsurance
Diagnostic Test	0%		40% coinsurance
Imaging	0%		40% coinsurance
Inpatient Hospital*	20% coinsurance	25% coinsurance	40% coinsurance
Outpatient Hospital*	20% coinsurance	25% coinsurance	40% coinsurance
Emergency Room	$150 Copay (waived if admitted)		40% coinsurance
Urgent Care	20% coinsurance	25% coinsurance	40% coinsurance
Pharmacy Generic/Preferred Brand/Non-Preferred Brand/Specialty			
Retail (30 Days)	0%	0%	0%
Mail Order (90 Days)	0%	0%	0%

Tips to Save Money

Preventive/Wellness Exams Covered at 100%.

Preventive care is equal to one physical exam per year per enrolled member. Females get an annual well-woman exam covered at 100% in addition to their annual exam No deductible expenses apply—the exam is completely no cost to you provided it's coded as preventive.

Prescription Drugs

Ask your doctor if there's a generic version of the medication they're prescribing or you're already taking Take advantage of the Generic Prescription Savings Programs at major retailers Ask about free samples from your doctor and/or manufacturer rebates.

High Cost Scans, X-Rays & Tests

MRI, PET scans, CT scans, etc. are nearly 2/3 less costly at free-standing, in-network imaging centers than at hospitals Finding an in-network, free-standing imaging center can save you a substantial amount of money.

Accessing Medical Care

The emergency room is a costly experience for issues that aren't true emergencies. There are alternatives that can offer you quick care at a much more affordable cost. The key is finding these alternatives today when you're happy and healthy.

Doctor's office: for symptoms that aren't extreme, call and let them know your symptoms require immediate attention

Convenient Care Clinics: use when you don't have a primary doctor or can't get an appointment. Good for fever, sore throat, strep throat, coughs, congestion, sports physicals, UTIs, etc.

Urgent Care (UC): less costly than the ER; can treat sprains, strains, minor breaks, mild asthma, minor infections, rashes, small cuts, burns, etc.

Dental Insurance

Carrier: Guardian
Website: www.guardianlife.com
Phone: 888-600-1600

Dental Preferred Provider Organization (DPPO)

This dental plan allows the flexibility to select any dentist in-network or out-of-network, but if you stay with in DentalGuard Preferred network, you'll pay less.

Dental coverage focuses on preventive and diagnostic procedures in an effort to avoid more expensive services associated with dental disease and surgery. The type of service or procedure received determines the amount the carrier will cover for each visit. Each type of service fits into a class of services according to complexity and cost.

Dental Health Maintenance Organization (DHMO)

The DHMO plan utilizes the First Commonwealth network and restricts services to in-network providers only. These dental plans require you to choose one in-network dentist or dental facility to coordinate all of your oral health needs.
If you need to see a specialist, your primary care dentist will refer you.

This plan doesn't have any deductibles or maximums. Instead, when you receive a dental service, you pay a fixed dollar amount for the treatment based on a pre-determined fee schedule between the carrier and your dentist.

	Dental High PPO		Dental Low PPO		DHMO
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network
Network	**DentalGuard Preferred**		**DentalGuard Preferred**		**First Commonwealth**
Individual Deductible	$25	$25	$50	$50	No Deductible
Family Deductible	$75	$75	$150	$150	No Deductible
Preventive Coinsurance	No Charge	No Charge	No Charge	20%	$0
Basic Coinsurance	20%	20%	20%	20%	See Fee Schdule
Major Coinsurance	50%	50%	50%	50%	See Fee Schdule
Annual Maxiumum	$2,000 per person		$1,000 per person		See Fee Schdule
Orthodontia Coinsurance (Child Only)	50%	50%	50%	50%	See Fee Schdule
Orthodontia Lifetime Maximum (Child Only)	$2,000		$1,000		N/A

Vision Insurance

Carrier: Guardian
Website: www.guardianlife.com
Phone: 888-600-1600

Vision insurance helps offset the cost of routine eye exams and helps pay for vision correction eyewear like eyeglasses and contacts by an eye-care provider.

You're eligible for an eye exam and lenses or contact lenses every 12 months and frames every 24 months. Out-of-network providers will only offer you an allowance towards your vision services.

	Frequency	In-Network	Out-of-Network
Network Name	**VSP Choice**		
Eye Exam	12 months	$10	amount over $39
Lenses	12 months	$25	amount over $23-$64
Frames	24 months	80% of amount over $130*	amount over $46
Elective Contacts	12 months	amount over $130	amount over $100
Necessary Contacts	12 months	covered in full after $25 copay	amount over $210

Extra $20 on select brands
Costco, Walmart, & Sam's Club: Amount over $80

Basic Life and AD&D Insurance

Carrier: Guardian
Website: www.guardianlife.com
Phone: 888-600-1600

Life insurance provides a financial benefit to your designated beneficiaries if you pass away, helping to cover expenses like funeral costs and living expenses. Accidental Death & Dismemberment (AD&D) insurance pays benefits if you die or lose a limb or sight due to an accident.

Benefits may reduce as you age. See your plan documents for more detail.
This benefit is 100% company paid.

Class 1 Administrators	
Benefit Amount **Maximum Amount**	250% of annual earnings to $250,000 $250,00
Class 2 FT Cert. Teachers/Exempt Staff w/less than 6 Yrs.	
Benefit Amount **Maximum Amount**	Flat $35,000 $35,000
Class 3 FT Cert. Teachers/Exempt Staff w/6-15 Yrs.	
Benefit Amount **Maximum Amount**	Flat $50,000 $50,000
Class 4 PT Cert. Teachers/Exempt Staff w/less than 6 Yrs.	
Benefit Amount **Maximum Amount**	Flat $35,000 $35,000
Class 5 PT Cert. Teachers/Exempt Staff w/6 or more Yrs.	
Benefit Amount **Maximum Amount**	Flat $50,000 $50,000
Class 6 Non-Certified EEs 12 MO w/less than 7 Yrs.	
Benefit Amount **Maximum Amount**	Flat $35,000 $35,000

Class 7 Non-Certified EEs 12 MO w/7+ Yrs.	
Benefit Amount **Maximum Amount**	Flat $50,000 $50,000
Class 8 Non-Certified EEs 10-11 MO/Bus Driver less than 7 Yrs.	
Benefit Amount **Maximum Amount**	Flat $25,000 $25,000
Class 9 Non-Certified EEs 10-11 MO/Bus Driver w/7+ Yrs.	
Benefit Amount **Maximum Amount**	Flat $40,000 $40,000
Class 10 FT Cert. Teachers/Exempt Staff w/16-25 Yrs.	
Benefit Amount **Maximum Amount**	Flat $75,000 $75,000
Class 11 FT Cert. Teachers/Exempt Staff w/26+ Yrs.	
Benefit Amount **Maximum Amount**	Flat $100,000 $100,000

All Classes have the benefit reduction below
· 50% at age 70
· 70% at age 75
· 80% at age 80

Voluntary Life and AD&D Insurance

Carrier: Guardian
Website: www.guardianlife.com
Phone: 888-600-1600

Voluntary term life/AD&D allows you to purchase additional life and AD&D coverage for yourself and your dependents. Your age and the amount of insurance you elect determines the premium you'll pay. Costs will increase as you age, and benefits may be reduced. See your plan documents for more detail and to determine if Evidence of Insurability applies.

	Employee	Spouse	Children
Coverage Increments	Choice of $10,000 increments	Choice of $5,000 increments	Choice of $1,000, $5,000, or $10,000
Maximum Benefit Amount	$500,000	$250,000	$10,000
Guaranteed Issue Amount (Newly Eligible)	Under age 65 $180,000 Age 65-69 $50,000 Age 70+ $10,000	Under age 65 $50,000 Age 65-69 $10,000 Terminates at age 70	N/A

Please see your Guardian enrollment kit for premium chart.
Employee must elect coverage in order for spouse and child(ren) to enroll.
Spouse and Child coverage must not exceed 50% employee benefit.

Disability Insurance

Carrier: Guardian
Website: www.guardianlife.com
Phone: 888-600-1600

Long-Term Disability
Long-term disability insurance is a type of income protection that is designed to cover serious injuries and illnesses that keep you out of work for an extended amount of time. This benefit is 100% company paid.

	Long-Term Disability
Waiting Period	91st day of Disability due to Accidenta injury or Illness
Benefit Amount	60% of Salary up to Maxmium
Maximum Benefits	$6,000 per month
Length of Payment Period	Social Security Normal Retirement Age (SSNRA)
Pre-Existing Condition Exclusion	3 months look back; 12 months after exclusion

Voluntary Benefits

Sometimes unexpected occurrences happen and medical insurance isn’t enough to cover the unforeseen out-of-pocket expense associated with the incident(s). Voluntary benefits can help.

Carrier: Aflac
Repsentative: Deborah Guilbeault
Email: deborah.guilbeault@us.aflac.com
Phone: 847-867-6838

Accident Coverage

Since accidents can happen at any time, it’s important to prepare for the unexpected.This policy can help pay for out-of-pocket expenses associated with an accident by paying you a benefit for each of the covered injuries you suffer and the treatment you received.This policy does not coordinate with any other coverage, so you can still receive benefits on top of what your medical plan provides.

Critical Illness (Specified Health Event)

An Aflac specified health event policy is designed to help with the costs of treatment if you experience a covered health event.

Short-Term Disability

What if you couldn't work due to injury or illness? Aflac Short-Term Disability insurance helps replace some of your income and keeps working when you can’t.

Cancer & Specified Disease

Aflac cancer/specified-disease policy provides robust benefits so you can seek the treatment you need while easing the financial concerns that often accompany it–before, during and after diagnosis.

This is a brief product overview only. Coverage may not be available in all states, including but not limited to ID, NJ, NM, NY or VA.
Benefits/ premium rates may vary based on plan selected. Optional riders may be available at an additional cost. Policies/riders have limitations and exclusions that may affect benefits payable. Refer to the specified policy/rider form(s) for complete details, benefits, limitations and exclusions. For availability and costs, please contact your local Aflac agent

Wellness Benefits

Employee Assistance Program

Carrier: WorkLife through Guardian
Website: www.worklife.uprisehealth.com
Access Code: worklife

WorkLifeMatters provides guidance for personal issues that you might be facing and information about other concerns that affect your life, whether it’s a life event or on a day-to-day basis.

- Unlimited free telephonic consultation with an EAP counselor available 24/7 at 800-386-7055
- Referrals to local counselors—up to 3 sessions free of charge
- State-of-the-art website featuring over 3,400 helpful articles on topics like wellness, training courses, and a legal and financial center.

Here are some challenges our EAP can help with:

- Anxiety and depression
- Divorce and Separation
- Drugs and Alcohol
- Parenting and childcare
- Elder care
- Adoption Assistance
- Carrer development
- Credit and Collections
- Legal assistance

Other Benefits

Group Decreasing Term Life Insurance

Prudential

More coverage when you need it most

The plan is designed to pay a maximum benefit in your younger years, when your financial obligations may be more significant. The benefit gradually decreases as you get older, when your financial obligations may be less. And the flat rate helps ensure it's affordable coverage the whole time, with no surprise rate hikes.

NCPERS' Public Employee Financial Protection Plan includes:

For You: Group Decreasing Term Life: With Group Decreasing Term Life Insurance, your family can have insurance
protection against the unexpected. The money can go toward paying for funeral expenses, mortgage, rent, credit card bills, college tuition, and other expenses.

For You: Accidental Death & Dismemberment (AD&D): Your beneficiary can receive an additional benefit for loss of your life resulting from an accident. You may also be eligible for a benefit if you are in an accident which results in specific injuries. Injuries covered may include loss of sight, coma, or dismemberment of hands or feet.

For Your Family: Spouse and Dependent Group Decreasing Term Life: At no added cost, this plan provides Dependent Group Decreasing Term Life Insurance for your spouse or domestic partner and a flat benefit for all of your dependent children. The benefit amount will be paid to you in a lump sum on an eligible dependent's death, and the benefit amount will be determined by you age at that time.

A group rate that's competitive NCPERS Guarantees that every active member, regardless of age, pays $16 a month, and it will never increase.

Members				Dependent Group Decreasing Term Life	
Member's Age at Time of Claim	Group Decreasing Term Life	Group AD&D	Total Benefit for Accidental Death	Spouse/ Domestic Partner	Child(ren)*
Less than 25	$225,000	$100,000	$325,000	$20,000	$4,000
25 to 29	$170,000	$100,000	$270,000	$20,000	$4,000
30 to 39	$100,000	$100,000	$200,000	$20,000	$4,000
40 to 44	$65,000	$100,000	$165,000	$18,000	$4,000
45 to 49	$40,000	$100,000	$140,000	$15,000	$4,000
50 to 54	$30,000	$100,000	$130,000	$10,000	$4,000
55 to 59	$18,000	$100,000	$118,000	$7,000	$4,000
60 to 64	$12,000	$100,000	$112,000	$5,000	$4,000
65 and over	$7,500	$7,500	$15,000	$4,000	$4,000

Unmarried children up to age 26 are covered, including adopted children, stepchildren, and foster children who depend on you for support. Dependents in the military service are not eligible.
Please note: insurance coverage for a child will not end at age 26 if the child is then mentally or physically incapable of earning a living and meets the definition of Qualified Dependent.

Group Decreasing Term Life Insurance *continued*

Special Features

New! Student Loan Protection Benefit

The Student Loan Protection benefit is included in the Group Decreasing Term Life Insurance at no extra cost. For members age 45 and under, Prudential will reimburse the amount of student loans you owe up to a maximum of $50,000, should you become totally disabled under the terms of the policy* and have an outstanding student loan balance.

*Total Disability: you are "Totally Disabled" when: 1) You are not working at any job for wage or profit; and 2) Due to sickness, injury or both, you are not able to perform for wage or profit, the material and substantial duties of any job for which you are reasonably fitted by your education, training or experience.

Waiver of Premium

If you are less than 60 years old and become totally disabled for at least nine months, your insurance may be continued without further premiums, as long as you furnish annual proof of your continued total disability satisfactory to Prudential.

*Option to Accelerate Payment of Death Benefits**

If you are terminally ill with a life expectancy of 6 months or less, you may receive up to 50% of your insurance benefits—up to a maximum of $112,500 in advance. The death benefit, payable to your beneficiary, will be reduced by that amount.

**Option to Accelerate Payment of Death Benefits is a feature that is made available to group life insurance participants. It is not a health, nursing home, or long-term care insurance benefit and is not designed to eliminate the need for those types of insurance coverage. There is no administrative fee to accelerate benefits. Receipt of accelerated death benefits may affect eligibility for public assistance and may be taxable. The federal income tax treatment of payments made under this rider depends upon whether the insured is the recipient of the benefits and is considered terminally ill. You may wish to seek professional tax advice before exercising this option.*

Conversion of Coverage

If you cease to be a member, you can convert your insurance to a Prudential individual life policy within 31 days following termination of insurance. Dependent Spouse or Domestic Partner Group Decreasing Term Life coverage can also be
converted if you cease to be a member or die.

Retirement Coverage

Coverage can be continued into retirement if you are insured as an active member and continue to receive a benefit upon retiring. Simply authorize the retirement system to deduct your contributions from your retirement check, Your premium will remain the same regardless of your age.

Prudential

Questions? Contact:
Phone: 800-525-8056
Email: NCPERS@memberbenefits.com

Global Travel Assistance Service

New additional benefit effective 8/1/2026

Your policy with Guardian Life includes a unique global travel assistance program provided by Assist America®. This program immediately connects you to qualified healthcare providers, hospitals, pharmacies and other services if you experience an emergency while traveling 100 miles away or more from home, or in another country, for up to 90 days.

Medical Assistance

Medical Consultation, Evaluation, & Referrals

Assist America's 24/7 Operations Center is staffed by multilingual assistance personnel to immediately support with recommendations for any emergency.

Medical Monitoring

Assist America's support team will closely monitor the course of treatment, and maintain regular communication with patients, their families, and the associated medical staff.

Emergency Medical Evacuation

If appropriate care is not available, Assist America will safely evacuate the member to the nearest qualified medical facility.

Foreign Hospital Admission Assistance

Assist America fosters prompt hospital admission by validating the member's health insurance as needed to the hospital. The member must repay funds within 45 days.

Medical Repatriation

When confirmed to be medically necessary, Assist America provides commercial transportation to home or to a rehabilitation facility proximate to the members residence, with a medical or non-medical escort as required.

Prescription Assistance

When a prescription is lost or left behind, Assist America will reach out to the prescribing physician and work with a local pharmacy to replace the member's medicine. The prescription cost is the member's responsibility.

Replacement of Prescribed Eyeglasses

If a member loses or breaks their prescription glasses, Assist America will assist the member in obtaining a replacement.

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Global Travel Assistance Service *continued*

New additional benefit effective 8/1/2026

<u>Travel Assistance</u>

Care of Minor Children
If an injured member has minor children left unattended, Assist America will pay for them to return home to a family member, or will arrange for childcare at home.

Compassionate Visit
If the member is traveling alone and is expected to be hospitalized for more than seven days, Assist America will arrange and pay for a selected family member or a friend to join the patient.

Return of Traveling Companion
If travel arrangements for a member's travelling companion are disrupted due to a delay directly caused by a member's hospitalization, Assist America will make travel arrangements for the companion to return to their primary place of residence. The traveling companion is responsible for the associated costs.

Return of Vehicle
Assist America will arrange and pay for the member's fully-operable and non-commercial vehicle to be returned home when necessary due to the member's medical emergency.

Return of Mortal Remains
In the event of a member passing away, Assist America will arrange and pay for the required documents, preparation, and transport of the remains to a funeral home near the member's place of residence.

Other emergency assistance services include: Lost Luggage and Document Assistance, Legal & Interpreter Referrals, Hotel Referrals, Pre-Trip Information, Emergency Travel Arrangements, Pet Care & Return, Emergency Message Transmission, & Emergency Cash & Bail Bond Coordination

assist america
Innovative Assistance Solutions
Guardian

Global Travel Assistance Service *continued*

New additional benefit effective 8/1/2026

ID Theft Protection Services

Assist America offers prevention and resolution tools to safeguard your data and restore its integrity if it is used fraudulently. These services include:

24/7 Access to Identity Protection Experts
You have 24/7 direct emergency access to ID Theft Protection experts who can provide guidance in dealing with identity fraud issues.

Credit Card and Document Registration
Register your details using our secure website to store information from credit cards, banks and other important document in a single, centralized and secured location.

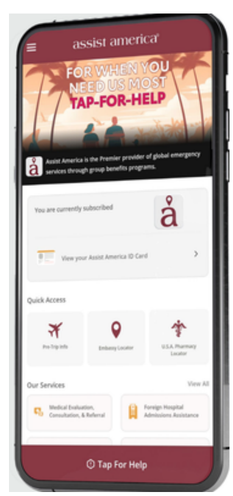
Loss & Stolen Card Assistance
Assist America arranges for notification to credit and debit card issuers that a card has been lost or stolen, for all such issuers who accept third party notifications. This Service requires advance registration of up to ten (10) debit or credit cards by the member.

24/7 Identity Fraud Support
If you are a victim of identity fraud, a dedicated ID Theft Protection expert will guide you in mitigating the consequences of the fraud. Your caseworker will also notify credit and debit card issuers if your credit or debit card(s) is lost or stolen.

1-877-409-9597 (Within the U.S.)
+1-816-396-9192 (Outside the U.S.)

Access Code: 18327

Download the Travel App
Through Assist America Travel App, members have a multitude of travel assistance services available at their fingertips in the event of a travel emergency. Enter your reference number, activate the coverage indicator, and you're ready to go!



Download on the App Store
GET IT ON Google Play

How to Activate Services
To activate the services, contact Assist America at
- Use the Tap for Help Button on the Travel App
- 1-800-872-1414 (Within the U.S.)
- +1-609-986-1234 (Outside the U.S.)
- Email medservices@assistamerica.com

Your Assist America Reference Number is:
01-AA-GLI-10231

Monthly Insurance Premium Rates

Medical, Dental, and Vision Monthly Insurance Premiums Rates
Effective August 1, 2026, through July 31, 2027
Medical coverage provided by Blue Cross Blue Shield of Illinois. If elected, coverage begins on hire date.

Blue Choice Options PPO Group #320662	**Monthly Premium**
Single Coverage	$1,256.14
Dependent Coverage	$1,934.30
Total	$3,190.44
HMO Illinois Group #H01534	**Monthly Premium**
Single Coverage	$1,023.48
Dependent Coverage	$1,574.18
Total	$2,597.66
High-Deductible Health Plan Group #PL0249	**Monthly Premium**
Single Coverage	$856.70
Employee + Spouse	$1,756.24
Employee + Child(ren)	$1,456.39
Family Coverage	$2,331.02
HMO Blue Advantage Group #B03477	**Monthly Premium**
Single Coverage	$839.96
Dependent Coverage	$1,291.66
Total	$2,131.62

Monthly Insurance Premium Rates

Medical, Dental, and Vision Monthly Insurance Premiums Rates
Effective August 1, 2026, through July 31, 2027
Dental + vision coverage provided by Guardian. If elected, coverage begins on the first of the month following hire date.

Dental Coverage	**Monthly Premium**
HMO Single	$16.12
HMO Family	$37.76
PPO Low Single	$40.09
PPO Low Family	$122.84
PPO High Single	$50.09
PPO HighFamily	$155.41
Vision Coverage	**Monthly Premium**
Single	$9.08
Family	$19.72

Employee Type	**Monthly District Contribution Towards Medical Premiums**
Administrators	Insurance premiums paid in full by District
Full-time Certified/Technical Staff	Single coverage paid in full by District Dependent coverage – $403.84 monthly District contribution
Part-time Certified/Technical Staff	Prorated based on FTE (full-time equivalency)
12-month ESP Staff	Single coverage paid in full by District Dependent coverage – $300.00 monthly District
10, 11-month ESP Staff, Bus Drivers	Single coverage – $800 monthly District contribution Dependent coverage – Employee pays 100% premium

Carrier Information

Medical HMO/HMOI	
Carrier	BCBS of IL
Website	www.bcbsil.com
Phone Number	800-892-2803
Policy Number	15340

Medical PPO/HDHP	
Carrier	BCBS of IL
Website	www.bcbsil.com
Phone Number	800-828-3116
Policy Number	15340

Dental PPO	
Carrier	Guardian
Website	www.guardianlife.com
Phone Number	888-600-1600
Policy Number	559884

Vision	
Carrier	Guardian
Website	www.guardianlife.com
Phone Number	888-600-1600
Policy Number	559884

Basic/Voluntary Life and AD&D Insurance	
Carrier	Guardian
Website	www.guardianlife.com
Phone Number	888-600-1600
Policy Number	559884

Long-Term Disability	
Carrier	Guardian
Website	www.guardianlife.com
Phone Number	888-600-1600
Policy Number	559884

Group Decreasing Term Life	
Name	Prudential
Email	NCPRS@memberbenefits.com
Phone Number	800-525-8056

Aflac	
Name	Deborah Guilbeault
Email	deborah_guibeault@us.aflac.com
Phone Number	847-867-6838

Human Resources Contact Information	
Name	Carmen Garcia Reyes
Email	carmen.garciareyes@lz95.org
Phone Number	847-540-4956

MarshMcLennan Agency

NOTE: This Benefits Summary is merely intended to provide a brief overview of your employer's employee benefit programs. Employees should review the employee handbook and actual plan documents for the precise terms of such programs. In the event of any inconsistency between this Benefits Summary and such governing documents, the governing documents will control. Your employer reserves the sole and absolute discretion and right to interpret, apply, amend, discontinue or terminate, without prior notice, any and all of the benefit programs referenced herein. Voluntary plans are individual policies and are not considered sponsored or endorsed plans by your employer. See a benefit counselor for your customized quote for any additional benefit programs.

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