

EMPLOYEE BENEFITS OVERVIEW GUIDE

PLAN YEAR:
March 1, 2020 – February 28, 2021

Dayton ISD



What's Inside?

EMPLOYEE REFERENCE CENTER
HOW TO ENROLL
\$125 PLAN INFORMATION
FLEXIBLE SPENDING ACCOUNTS
AVAILABLE RESOURCES
BENEFITS AT A GLANCE
CONTACT INFORMATION

Reference Center

WWW.BENEFITSOLVER.COM
Company Key: dayton (case sensitive)

Dayton ISD Benefits
Jessica Yates
936-258-2667 ext. 1102
Jessica.Yates@daytonisd.net

OPEN ENROLLMENT IS JANUARY
27TH THROUGH FEBRUARY 7TH 2020





Important items to know this Year!!!



- Flexible Spending Account elections and the new HSA elections have to be re-elected each year and are deducted from payroll and are effective March 1, 2020.
- Changes made to Supplemental Insurance Benefits are deducted from payroll in March and coverage is effective April 1, 2020.
- The AFA Cancer plan is Guaranteed Issue every year!!! Please see an enroller for details on the 12 month pre-existing condition clause for those that do not currently have the cancer plan.
- Texas Life is offered with conditional guarantee issue for employees, spouses, and children with only 3 questions that need to be answered. This is portable life insurance, that has a long term care rider for the employees.
- NEW! Accident Insurance with MetLife - Pays directly to you for any off work accidents you or your family may have!
- NEW! MASA Emergency Ambulance Service - Prepare for the unexpected with a plan that gives you access to vital emergency medical transportation for a minimal monthly fee!

Open Enrollment Meetings and Enrollment locations

Location	Meeting Date	Enrollment Location and Days
Administration	Jan. 31 at 10 a.m.	Board Room - Feb. 4 ~ 8 a.m. to 4:30 p.m.
Richter Elementary	Jan. 30 at 4:15 p.m.	Room #54 - Feb. 3 & 4 ~ 7:30 a.m. to 4 p.m.
Nottingham	Jan. 27 at 3:30 p.m.	Library - Jan. 28 & 29 ~ 7 a.m. to 3:30 p.m.
Transportation	Jan. 28 at 9 a.m. at SSC	Support Service Center - Jan. 30 & 31 ~ 7 a.m. - 3:30 p.m.
SFA Elementary	Jan. 29 at 4:15 p.m.	Computer Lab - Jan. 30 & 31 ~ 7:30 a.m. - 4:30 p.m.
Colbert Elementary	Jan. 31 at 7:15 a.m.	PLC Room - Feb. 3 ~ 7:30 a.m. - 4 p.m.
Kimmie Brown Elementary	Jan. 27 at 4:15 p.m.	Computer Lab - Jan. 28 & 29 ~ 7:30 a.m. - 4:30 p.m.
Jr. High School	Jan. 29 at 2:50 p.m.	Computer Lab - Feb. 4 & 5 ~ 6:30 a.m. - 3 p.m.
High School	Jan. 28 at 2:45 p.m.	Computer Lab # 134 - Feb. 5, 6, & 7 ~ 7 a.m. - 3:30 p.m.
Make up days at Admin.	None	Conference Room - Feb. 6 & 7 ~ 8 a.m. - 4:30 p.m.
Food Service	Jan. 28 at 9 a.m. at SSC	Enroll while Enrollers are at their Campuses
Maintenance	Attend one of the other meetings	Enroll at any of the campuses on the dates above
Bilingual Meetings	Jan. 27 at 9 a.m. & 2 p.m. in the Cafeteria at SSC	Enroll at any of the campuses on the dates above

This guide contains a summary of the benefits offered by your employer. If there is a conflict between the terms of this outline of benefits and the actual contracts, the terms of the contracts will prevail. For a more detailed explanation of benefits you may contact your Account Manager or First Financial Administrators at 1-800-523-8422 or visit <https://www.benefitsolver.com>

Employee Reference Center

Your guide to your benefits!

We've created a custom site just for you! Find detailed information about current and upcoming benefits, voluntary product offerings and employer programs, Section 125 & Flex Information, important contact numbers and links, and downloadable forms and brochures.

www.benefitsolver.com
Company Key: dayton (case sensitive)



How to Enroll

Open Enrollment is
January 27th through February 7th 2020

Your First Financial Account Manager will be on site to assist you in enrolling in your benefits. Be sure to set aside some time during one of the enrollment days to sit with an Account Manager to ensure you get the benefits you want. They can answer any questions you may have about any of the products or the enrollment process. You also have the option to enroll on-line 24/7 through BenefitSolver during your enrollment period.

To prepare for your enrollment and view your elected benefits, visit the Reference Center at www.benefitsolver.com.

ON SITE ENROLLMENT

What to have ready for your enrollment:

- Social Security Numbers for all dependents
- Any Status/Life Event or address changes
- Questions about available benefits

ONLINE ENROLLMENT

To enroll online, log in to BenefitSolver at www.benefitsolver.com and log in with your User Name and password for this benefit website. If you have forgotten your User Name or password, click the "Forgot user name or password" link. The company key is: dayton (case sensitive). If this is your first time logging into the site, click Register to get started. This site will request your social security number, date of birth (mm/dd/yyyy) and company key (dayton), which is case sensitive. The site will ask you to create your User Name (8 characters or longer) and Password (8 characters or longer) and have a combination of letters and numbers. Please see the BenefitSolver navigation Instructions at the end of this book.

USEFUL INFORMATION TO KNOW

- Write your User Name and Password number down
- Contact First Financial with any technical questions
- No changes will be permitted until annual enrollment, unless you have an IRS S125 qualified event



This symbol means the benefit is Guaranteed issue so keep a look out for this!

Enrollment Begins:
January 27, 2020 -
February 7, 2020



Section 125 Plan Information and Rules

A Section 125 Plan provides a tax-saving way to pay for eligible medical or dependent care expenses. The funds are automatically deducted from your paycheck on a pre-tax basis.

Here's How It Works

A Section 125 Plan reduces your taxes and increases your spendable income by allowing you to deduct the cost of eligible benefits from your earnings before tax. Plus, the plan is available to you at no cost, and you're already eligible. All you have to do is enroll. NOTE: No changes will be allowed during the year, unless it is an IRS qualified event change within our 125 Cafeteria Plan.

Is It Right for Me?

The savings you may experience with a Section 125 Plan are outlined below. By utilizing the Section 125 Plan, you would have \$70 more every month to apply toward insurance benefits or other needs. That's a savings of \$840 a year!

When can I make changes to my benefits?

No changes are permitted until the annual enrollment period, unless you have an IRS S125 qualified event. You have 31 days from (and including) the date of the event to request a change. Qualified events include (but are not limited to) marriage, divorce, and the gain or loss of a dependent.



NEED TO MAKE CHANGES?

You're able to change your election each year during your annual benefits enrollment, but the only time Internal Revenue Code regulations allow you to make a change during the plan year itself is if you experience a qualified event. Some examples include:

- Change in legal married status
- Change in number of dependents
- Termination or commencement of employment
- Dependent satisfies or ceases to satisfy dependent eligibility requirements
- Change in residence or worksite that affects eligibility for coverage

IRS Flexible Spending Accounts

FSA Plan Year: March 1, 2020 to February 28, 2021

FSA Max: The maximum you can set aside each year is \$2,750

IRS Medical Flexible Spending Account (FSA)

IRS Medical Flexible Spending Accounts (FSA) allow you to set aside pre-tax payroll deductions each paycheck to pay for out of pocket medical, dental and vision expenses for you and your family.

During open enrollment you will estimate the amount you think you will need during the year. The amount you chose will be divided into 24 payments and then deducted from each paycheck. Your full annual election will be available to you at the beginning of the plan year.

Please note: You MUST re-enroll every year, even if the amount is the same as last year.

NOTE: YOU MUST BE ENROLLED IN THE HIGH DEDUCTIBLE MEDICAL PLAN TO HAVE AN HSA/LIMITED FLEX



IRS Limited Purpose Flexible Spending Account (LPFSA)

If you choose to have a Health Savings Account, you are also able to enroll into a Limited Purpose Flexible Spending Account (LPFSA). The IRS Limited Purpose Flexible Spending Account (LPFSA), is an account where you can set aside part of your pay on a pre-tax basis to pay for eligible dental and vision expenses.

Frequently Asked Questions:

Do you have to turn in receipts?

Yes, this is still an IRS Flexible Spending Account, so you will be responsible for turning in receipts for the services you receive at your dentist and eye doctor.

Will you have two separate cards?

Both the HSA and LPFSA will be loaded on your MasterCard Benefits card. The card scanning system at your doctor/dentist office will automatically deduct the amount from the corresponding account.

Can you use your LPFSA on Medical expenses?

No, the HSA monies will be used for your medical expenses while the LPFSA money can only be used on dental and vision.

How much money can you put on your LPFSA?

The max you can set aside each year is \$2,750.

What happens when you run out of money in the LPFSA Account?

Once funds have been exhausted in your LPFSA, all future purchases with your card for dental and vision will automatically be deducted from your HSA.

IRS Dependent Care FSA (DCFSA)

With an IRS Dependent Care Flexible Spending Account (DCFSA), you can set aside part of your pay on a pre-tax basis to pay for eligible dependent care expenses such as:

- | | |
|----------------------------|---------------|
| • Day Care Centers | • Babysitters |
| • Before/After School Care | • Nanny |
| • Mothers-Day-Out Program | • Au Pair |
| • Nursery Schools | • Day Camps |

You may allocate up to \$5,000 per tax year for reimbursement of dependent day care services.

(\$2,500 if you are married and file a separate tax return).

This account allows you to pay for day care expenses for your qualifying dependent/child with pre-tax dollars while you (and your spouse) are working, seeking employment, and/or attending school as a full time student (for at least five months of the year).

Eligible dependents must be claimed as an exemption on your tax return. For full plan details, view the FSA Booklet available on the Reference Center.

IRS HEALTH SAVINGS ACCOUNTS

NOTE: YOU MUST BE ENROLLED IN THE HIGH DEDUCTIBLE MEDICAL PLAN TO HAVE AN HSA

What is a Health Savings Account (HSA)?

HSAs were created to help control healthcare costs. They provide a savings vehicle that allows you to set aside money to pay for higher deductibles associated with lower monthly premium High Deductible Health Plans (HDHP). The money you save in monthly insurance premiums may be for eligible medical expenses you incur in the future. Your HSA balance rolls over from year-to-year earning interest along the way. The account is portable. Upon retirement or separation of service, you take the HSA with you because it's your money and your account.

Key Advantages of an HSA

- »No end-of-year forfeiture of fund
- »Portable account
- »Provides an excellent savings vehicle for healthcare expenses
- »No monthly account fees
- »Free statements when you opt in for electronic
- »The money you put in to the account is deducted from your paycheck before tax
- »The interest and earnings you make on the account grow tax free
- »Distributions for eligible medical expenses are tax free

HSA Plan Year is: March 1, 2020 to February 28, 2021

HSA MAX: The maximum you can set aside each year is \$3,550 for self and \$7,100 for Family

FACTS:

- »You must be enrolled in the High Deductible Medical Plan to have an HSA
- »Money is not available up front
- »You cannot have both Flex and HSA for Medical use.

Account Set up

Once you have signed up for your Health Savings Account (HSA) you will receive a Welcome Kit in the mail. An HSA is a bank account that is administered by UMB Healthcare Services, so there are some requirements to get it set up. Be sure to read everything carefully and do all the required steps or your account will not open.

Customer Identification Program (CIP)

One of these steps is called the Customer Identification Program (CIP). UMB will request copies of your personal identification to ensure that you are who you say you are. Some requested options include a Social Security Card, A State Issued Drivers License, a State issued Identification Card, or a Birth Certificate. If you do not send in the correct paperwork or documentation, your account will not be opened.

Frequently Asked Questions:

Do you have to turn in receipts?

Yes, this is still an IRS Health Spending Account, so you will be responsible for turning in receipts for the services you receive if they are requested of you.

Will I get a brand new card?

If you had a Flex MasterCard Benefits card last year, your HSA money will be loaded onto that same card. If you need to order a new card visit www.ffga.com or call 866-853-3539.

What kind of expenses can I use my HSA for?

The Health Savings Account money can be used for qualifying Medical, Dental and Vision expenses.

How much money can you contribute to your HSA?

The max you can set aside each year is \$3,550 for Self only and \$7,100 for Family.

What happens to the money at the end of the plan year?

All HSA funds roll over from year to year.

How much does it cost for paper statements?

Paper statements are \$2.50 a month. If you would like to opt out of receiving paper statements, please visit www.ffga.com.

For more information please look in the Reference Center on www.benefitsolver.com

RESOURCES FOR FSA MANAGEMENT

FLEXIBLE BENEFITS CARD

The Flex Benefits Card is available to all employees that participate in an IRS Medical FSA and or an IRS Dependent Care FSA. The Benefits Flex Card gives you immediate access to your money at the point of purchase. Cards are available for participating employees, their spouse and eligible dependents that are at least 18 years old.

The IRS requires validation of most transactions. You must submit receipts for validation of expenses when requested. If you fail to substantiate by providing a receipt to First Financial within 60 days of the purchase or date of service your card will be suspended until the necessary receipt or explanation of benefits from your insurance provider is received.

FF FLEX MOBILE APP

With the FF Flex Mobile App you can submit claims, view account balance & history, see claim status, view alerts, upload receipts and documentation and more! The FF Flex Mobile App is available for Apple® or Android™ devices on the App StoreSM or the Google Play StoreTM.

You must have your Flex Benefits Card number to register your account on the FF Flex Mobile App.

FSA STORE

First Financial has partnered with the FSA Store to bring you an easy to use online store to better understand and manage your FSA. Visit <http://www.ffga.com/fsaextras> for more details & special deals!

- Shop at FSA Store for eligible items from bandages to wheel chairs and thousands of other products
- Browse or search for eligible products and services using the FSA Eligibility List
- Visit the FSA Learning Center to help find answers to questions you may have about your FSA





BENEFITS AT A GLANCE

Visit www.benefitsolver.com for rates and benefit information.

Medical plans - TRS ActiveCare

This is not the Open Enrollment period for the medical insurance. You can get more information on TRS Activecare and covered providers at <http://www.trsactivecareatna.com>/or by calling 800.222.9205. Employees with questions concerning their medical insurance should contact the Benefits Office at 936.258.2667. The ONLY reason you see the medical on the open enrollment is to let you know if you are eligible for the HSA plan.

Dental – Metlife/Safeguard

Visiting the dentist can help you and your family keep a great smile as well as maintaining good health. Oral care can be a significant financial expense. These plans are designed to help you keep your teeth in the best shape possible and help cover the costs. MetLife provides Dayton employees with 2 dental plans to choose from, a Safeguard DHMO Plan and a PPO/Indemnity Plan.

DHMO Plan

- No claims form
- No deductibles
- No exclusion for pre-existing conditions
- No annual maximum
- Must choose from the Directory of Dentists
- Orthodontia coverage for up to 24-months for child dependents under the age of 25

MetLife/SafeGuard DHMO Plan Semi-Monthly Rates	
Coverage Tier	Premium
Employee Only	\$10.29
Employee + Spouse	\$17.40
Employee + Child(ren)	\$19.56
Employee + Family	\$24.91

PPO Plan

- Have the freedom to choose any licensed dentist in- or out-of-network
- Save money by visiting a Preferred Provider list of "in-network" dentists
- Exams, x-rays and cleanings are covered at 100% in-network
- Annual deductible of \$50 per individual; \$150 per family; annual maximum benefit of \$1,500 per person
- Basic restorative care (e.g., fillings, root canals & gum treatments) is paid at 80% up to annual maximum
- Major services are covered at 50% up to annual maximum
- Twelve month waiting period for major services
- Orthodontia for Adults and children up to age 25 with a Lifetime maximum of \$1,500 per person

MetLife PPO/Indemnity Plan Semi-Monthly Rates	
Coverage Tier	Premium
Employee Only	\$22.16
Employee + Spouse	\$42.01
Employee + Child(ren)	\$48.61
Employee + Family	\$71.55

Vision – Davis Vision

Vision insurance is a way to help cover expenses incurred for eye care services from eye care professionals such as optometrists and ophthalmologists. Regular eye exams can offer more than just measuring your eye sight! They can identify serious eye diseases early, allowing time for treatment. Most people don't realize that eye exams can also reveal the early signs of serious illnesses like diabetes, heart disease and high blood pressure. Dependents up to age 26 years. Highlights include:

- \$10 co-pay for eye exam
- \$10 co-pay for eyeglasses or contacts
- \$130 toward eyeglasses plus 20% off overage OR \$130 toward contacts plus 15% off overage from any provider
- \$180 toward any frame from a Visionworks Store plus 20% off the balance
- You must use an in-network Davis Vision provider

Davis Vision Plan Semi-Monthly Rates	
Coverage Tier	Premium
Employee Only	\$4.74
Employee + Spouse	\$8.53
Employee + Child(ren)	\$9.00
Employee + Family	\$14.22

Gap – American Fidelity

How will you prepare for out-of-pocket expenses from hospital and doctor bills? Most insurance will only cover a portion of your overall medical expenses. The medical gap plan is designed to help cover your out-of-pocket expenses due to an inpatient hospital stay, doctor's visit, outpatient procedure, or ER visit. Gap assists with deductibles and expenses not covered by your major medical's plan. Benefits are paid directly to you so you can use the funds to pay for your needs at your discretion. Coverage is available for spouses and eligible children. Additional information available in the Reference Center at www.benefitsolver.com, or with your First Financial Benefit counselors to enroll coverage that fits your need.

- Covers inpatient hospital stay, inpatient surgery, physician expenses from inpatient stay and lab expenses from an inpatient stay
- Covers treatment in a hospital emergency room, outpatient surgery, treatment in a hospital, free-standing outpatient surgery center and outpatient diagnostic testing
- This benefit provides a reimbursement amount for physician visits for up to five visits.

American Fidelity Gap Plan Semi-Monthly Rates			
Coverage Level	Age Range & Premium		
\$1,500 Coverage	Under Age 55	Age 55-59	Age 60 +
Employee Only	\$13.30	\$18.90	\$30.10
Employee + Spouse	\$22.55	\$32.65	\$52.80
Employee + Child(ren)	\$20.30	\$25.90	\$37.10
Employee + Family	\$29.55	\$39.65	\$59.80
\$2,500 Coverage	Under Age 55	Age 55-59	Age 60 +
Employee Only	\$17.85	\$25.75	\$41.50
Employee + Spouse	\$30.75	\$44.95	\$73.30
Employee + Child(ren)	\$27.60	\$35.50	\$51.25
Employee + Family	\$40.50	\$54.70	\$83.05
\$3,500 Coverage	Under Age 55	Age 55-59	Age 60 +
Employee Only	\$27.20	\$39.75	\$64.85
Employee + Spouse	\$47.60	\$70.15	\$115.35
Employee + Child(ren)	\$42.55	\$55.10	\$80.20
Employee + Family	\$62.95	\$85.50	\$130.70

Disability – Educator Disability by UNUM

Disability insurance pays a cash benefit and is designed to help protect you if you can't work due to a covered injury or sickness. It pays a monthly benefit amount based on a percentage of your gross income, so you may continue to pay for everyday living expenses.

HOW THE PLAN WORKS

Disability insurance pays a cash benefit and is designed to help protect you if you can't work due to any covered accident, injury or illness, as well as childbirth. Disability benefits will be payable up to the benefit period stated in your policy.

FEATURES

- Based on your individual need, you can select from multiple elimination periods (waiting periods) - 7 days, 14 days, 30 days, 60 days, 90 days and 180 days. The plan starts to pay after the elimination period until the doctor says you can come back to work or to the age of 65
- Your monthly benefit will pay you in \$100 increments; up to 66⅔% of your salary or maximum of \$8,000/month. You choose the amount of coverage you need for your bills.
- If you select an elimination period of 30 days or less, your waiting period is waived upon in-patient hospital admittance of 24 hours or more
- Pre-existing conditions will not be covered until after 12 months of continuous coverage

Cancer Insurance - American Fidelity (AFA)



This year the new AFA cancer plan is guaranteed issue (GI)! Everyone will be able to obtain cancer coverage, no matter your past history. If you have the Allstate cancer plan, you will be moved and grandfathered on the new plan for the time on the Allstate plan to shorten or eliminate the Pre-existing condition limitation. Any new coverage elected for employee and/or dependents will only have a 12 month pre-existing condition rider, but be allowed on the plan.

Benefit payments are made directly to you, allowing you to pay for expenses like co-payments, hospital stays, living expenses, medical co-payments and house/car payments.

Highlights include:

- Pays you based upon a schedule of 25 benefits; some of the key benefits include:
- Pays up to \$10,000 on the Low Plan and \$15,000 on the High Plan annually for chemotherapy, radiation, and immunology
- Pays \$200 a day on the Low Plan and \$300 a day on the High Plan for blood, plasma, and platelets
- New and experimental treatment will be covered under the Schedule of Benefits also
- Upon initial cancer diagnosis the High Plan pays you \$5,000 and \$2,500 for the Low Plan
- Both Plans include an Intensive Care Unit (ICU) rider that will pay \$600 daily, up to 90 days, if you are confined to the ICU for any reason
- Both plans help pay for Ambulance services and up to \$2,000 if it's by Air Ambulance
- Existing employees and their eligible dependents, applying for this coverage for the first time or those changing current coverage are Guaranteed Issue every year at enrollment!

American Fidelity Cancer Plan – Semi-Monthly Rates		
Plan Options	Employee	Family
AFA Low Cancer Plan	\$7.90	\$13.43
AFA High Cancer Plan (with Heart/Stroke benefits)	\$15.81	\$26.90

This guide contains a summary of the benefits offered by your employer. If there is a conflict between the terms of this outline of benefits and the actual contracts, the terms of the contracts will prevail. For a more detailed explanation of benefits you may contact your Account Manager or First Financial Administrators at 1-800-523-8422 or visit <https://www.benefitsolver.com>

Critical Illness Insurance - MetLife



Coverage is Guaranteed Issue (GI) this year. If you experience an event such as a heart attack or stroke, Critical Illness Insurance may help. It pays a lump sum amount to help with expenses that may not be covered by major medical insurance – house payments, everyday expenses, lost income, and more.

Highlights include:

- Low and High plans available to meet your needs
- Plan pays lump-sum benefit amount of \$15,000 (Low Plan) or \$30,000 (High Plan)
- Wellness benefit pays you \$50 (Low Plan) or \$100 (High Plan) for annual health screening test
- Plan will pay up to 300% of the benefit for each person on the plan
- Pre-existing conditions will not be covered for six months, except for heart attack or stroke
- Recurrence Benefit can apply
- Rates and more detailed plan information for both plans are listed in the Reference Center

Covered Illnesses
• Heart Attack
• Stroke
• Major Organ Transplant
• Alzheimer's Disease
• Cancer
• Kidney Failure
• Skin Cancer – Partial Benefit
• Coronary Artery By-Pass
• 22 Other Listed Conditions – Partial Benefit

Permanent, Portable Life Insurance - Texas Life

Ensuring your family is financially covered in the event of a loss is an important way of showing them you care about their needs. Life Insurance can help. Portable, Individual Life Insurance policies may help your family in the event of your death. The application process is simple. You only have to answer three health questions, and there are no medical exams required. You may also apply for this coverage for yourself, your spouse and minor children and grandchildren.

HIGHLIGHTS
• Portable – you can take it with you when you leave the district
• Coverage to age 121
• No scheduled rate increase
• Employees age 49 and under : eligible to receive up to \$300,000 coverage; Express Issue
• Employees age 50-65: eligible to receive up to \$100,000 coverage; Express Issue
• Spousal express issue coverage up to \$50,000; varies based on spouse age
• Coverage for child(ren) & grandchild(ren) up to \$50,000
• Chronic Illness Rider- pays up to 92% policy value to help cover cost of long term care if you cannot perform 2 of the 5 ADL (Assisted Daily Living) functions

Rates can be found in the Reference Center at www.benefitsolver.com

This guide contains a summary of the benefits offered by your employer. If there is a conflict between the terms of this outline of benefits and the actual contracts, the terms of the contracts will prevail. For a more detailed explanation of benefits you may contact your Account Manager or First Financial Administrators at 1-800-523-8422 or visit <https://www.benefitsolver.com>

Group Term Life – SunLife

Dayton ISD provides Group Basic Life and Accidental Death and Dismemberment Insurance paid by the District in the amount of \$10,000. Group life insurance allows you to purchase affordable life insurance on yourself in increments of \$10,000, spouse in increments of \$5,000, and dependent children in increments of \$2,500.

This is term insurance, available as long as you are employed by district. Coverage is available for spouse and child(ren) ONLY if you have Sun Life coverage for yourself, and is limited to 100% of the employee's coverage election.

Employees enrolling in the coverage after the first 31 days of their employment will be subject to insurability and must complete a health questionnaire prior to coverage being issued.

Existing Employee Highlights	New Hire (within 31 days) - Guaranteed Issue
<ul style="list-style-type: none">Employee Minimum Coverage is \$10,000, up to 5x annual salary to a maximum coverage of \$500,000Spouse coverage in increments of \$5,000 up to \$500,000 of coverageChild(ren) coverage in increments of \$2,500 up to \$10,000 of coverage	<ul style="list-style-type: none">Employee Minimum Coverage is \$10,000, up to 5x annual salary to a maximum coverage of \$120,000Spouse coverage in increments of \$5,000 up to \$50,000 of coverageChild(ren) coverage in increments of \$2,500 up to \$10,000 of coverage

Please see a Benefits Advisor or review the plan summary in the Reference Center at www.benefitsolver.com for additional information.

Legal – LegalEase

Pre-paid legal provides access to a variety of legal services for you and your family at an affordable monthly cost. These services include, but are not limited to, advice on unlimited issues, attorney letters or calls made on your behalf, and contract and document review. Simply call an 800 number to access legal counsel and advice from qualified lawyers. This product provides peace of mind in today's litigious environment.

Highlights include:

- Plan covers many legal services including, but not limited to, Family Law, Estate Law, Civil Lawsuits, Vehicle Law, Real Estate Law, Law for Money Matters and Law for Elder Care issues
- The plan can provide security for you and your family, with benefits of the preparation of Living Trusts, Living Wills, Powers of Attorney and Will and Codicils
- Plan includes preparation and review of Affidavits, Deeds, Demand Letters, Document Reviews, Elder Law Matters, Mortgages and Promissory Notes
- Other benefits of the plan are Adoption and Legitimization, Guardianship, Name Change, Prenuptial Agreement, protection from Domestic Violence, Juvenile Court of Defense, Debt Collection defense and Tax Audit Representation
- Identity Theft Recovery is included with attorney consultations
- Letter preparation, a checklist and an online library of all necessary recovery forms and documents to resolve and restore your name are also available

LegalGUARD Legal Plan – Semi-Monthly Rates	
Employee + Family	\$7.45

This guide contains a summary of the benefits offered by your employer. If there is a conflict between the terms of this outline of benefits and the actual contracts, the terms of the contracts will prevail. For a more detailed explanation of benefits you may contact your Account Manager or First Financial Administrators at 1-800-523-8422 or visit <https://www.benefitsolver.com>

ID Theft Protection – iLock360

Protect yourself and your family from the fastest growing crime in the US: Identity Theft. A low monthly cost provides protection by scouring the dark web for any compromised accounts and restores your identity with 24/7/365 support. This protection saves you money and time by relying on a service to handle all the details involved when your identity is stolen. If you would like coverage through iLock360, you will need to choose either the Plus or Premium plan.

Highlights include:

- All employees eligible for Identity Theft Protection coverage
- Monitors your identity 24/7/365
- Personal email address required to sign up for this program
- Plan can protect individual or family
- Dependents are covered up to 18 years of age

iLock360 – Semi-monthly		
Coverage	Plus	Premium
Employee Only	\$4.00	\$7.50
Employee + Spouse	\$7.50	\$11.00
Employee + Children	\$6.50	\$10.00
Employee + Family	\$10.00	\$13.50

Once you are sent an initial email notification of your coverage, you will need to register your account online.

Service	Plus	Premium
CyberAlert monitors:		
• One Social Security Number	✓	✓
• Two Phone Numbers	✓	✓
• Five Credit/Debit Cards	✓	✓
• Two Email Addresses	✓	✓
• Two Medical ID Numbers	✓	✓
• Five Bank Accounts	✓	✓
Social Security Number Trace	✓	✓
Change of Address	✓	✓
Sex Offender Alerts	✓	✓
Payday Loan	✓	✓
Court/criminal Records	✓	✓
Full Service Restoration and lost wallet	✓	✓
\$1M Insurance	✓	✓
Daily monitoring of 1 credit bureau	✓	
Daily monitoring of 3 credit bureaus		✓
Score Tracker		✓
✓ adults ✓ children		

Direct Pay

Pet Insurance - Nationwide

Our pets are a big part of your family, and you want to protect them just as much as your other family members. In addition to all the benefits Dayton ISD offers, you can get a special discount Pet Protection Plan through Nationwide. It is not payroll deductible, but you are able to sign up easily on-line by visiting a specific website available to Dayton ISD employees: Petinsurance.com/daytonisd • 877-738-7874

Benefits include:

- No age limits or age-based premium increases
- Use any vet and get up to 90% reimbursement on the bill
- Use for spay/neuter, Rx, preventive dental cleaning and more

New Products for 2020-2021

Accident Insurance - MetLife

This plan is designed to help you cope with the costs associated with unexpected accidents. Despite having health insurance, out-of-pocket costs may add up quickly when you factor in expenses like co-payments and deductibles.

Highlights of the plan include:

- Guaranteed Issue for All Employees
- High and Low plan to fit your budget and needs
- High plan benefits pay up to an additional 50% more
- Coverage includes- but is not limited to - fractured bones, third degree burns, concussions, broken teeth, emergency room treatment, ambulance, and hospital confinement
- Coverage available for employee, spouse and children for accidents off the job

Accident Insurance Semi-Monthly Rates		
Coverage Tier	Low Plan	High Plan
Employee Only	\$3.25	\$4.78
Employee + Spouse	\$6.39	\$9.35
Employee + Child(ren)	\$7.19	\$10.47
Employee + Family	\$8.91	\$12.99

Emergency Ambulance Service - MASA

In the event of an emergency, an ambulance ride to the hospital can be extremely expensive. Most people assume that their health insurance will cover most, if not all of the costs for ground or air emergency transports. Usually, the opposite is true, leaving you with financially crippling bills. Coverage with MASA Emergency Ambulance Service can help you prepare for the unexpected with a plan that gives you access to vital emergency medical transportation for a minimal monthly fee.

Benefits include:

- One low fee for peace of mind for emergent transport costs
- No deductibles
- Easy claim process
- No health questions
- Coverage is available for spouses and dependents up to age 26
- Basic Coverage Area includes U.S., Canada, Mexico, and Caribbean (excluding Cuba)

Facts about Ambulance Transports:
• Emergency Ground Ambulance transports can surpass \$2,000 and can reach as high as \$5,000
• Emergency Air Ambulance transports frequently cost more than \$40,000, reaching as high as \$70,000.

MASA Medical Transport – Semi-Monthly Premium	
Emergent Plus - Ground & Air	\$7.00
Platinum - Ground, air, specialized care for non emergent transportation, organ transport, mortal remains transport and more	\$19.50

This guide contains a summary of the benefits offered by your employer. If there is a conflict between the terms of this outline of benefits and the actual contracts, the terms of the contracts will prevail. For a more detailed explanation of benefits you may contact your Account Manager or First Financial Administrators at 1-800-523-8422 or visit <https://www.benefitsolver.com>

RETIREMENT OPTIONS

TCG Group Holdings offers a variety of options to help supplement your future income and help achieve your financial goals

Which One Is Right for Me?

403(b)

A 403(b) is a retirement savings plan generally offered by public schools and other tax-exempt organizations that allows employees to make contributions on a pretax basis. Most plans allow you to start, stop, increase or decrease contributions at any time. The employer determines the investment providers and employees must open an account with one of those providers to contribute. TCG Group Holdings is the plan administrator; you can elect salary deductions at www.tcgservices.com. You will need to login, select your employer, and register using plan password as dayto403. Follow through the steps to choose company and salary deduction. You must then contact the company to set up an account. In 2020, you can contribute 100% of your includible compensation up to \$19,500, whichever is less. If you are age 50 or older, you can contribute up to an additional \$6,500 for a total of \$26,000.

457(b)

The 457 plan is a district-sponsored voluntary retirement savings plan that allows an employee to save money for retirement on a tax-deferred basis. Your district has chosen to offer the JEM Resource Partners (JEM) 457 Plan which has low-cost investment options. The JEM 457 Plan has investment options that do not contain any surrender charges or penalties upon distribution. The plan contains most of the same features of the 403(b) plan, but is different in one unique way. Distributions from the 457 Deferred Compensation Plan are not subject to the 10% excise tax for early withdrawal. In 2020, you can contribute 100% of your includible compensation up to \$19,500, whichever is less. If you are age 50 or older, you can contribute up to an additional \$6,500 for a total of \$26,000. See a Benefits Advisor for more information, or call TCG Benefits, LLC at 800.943.9179, or log onto the website below to enroll in the JEM 457 Plan.

Enroll on the benefit website at open enrollment or at www.tcgservices.com all year, login and select your employer, register using plan password as dayton, and follow through the steps and information to enroll in your investment and salary reduction.



Mobile Phone Applications

Helpful resources in the palm of your hand!

There are plenty of free phone applications that can help you with your health insurance benefits. You can download them on your apple or android device and use them when you need them!



Aetna Mobile App

With Aetna Mobile, your health care is always at your fingertips. You can look up the status of a claim, search for a doctor or urgent care facility, view your personal health record, view your id card information, find contact information, speak with a certified doctor via Teladoc, and more.



AFmobile App

Need help with your Cancer or Gap plan? Access your American Fidelity insurance benefits at any time with the AFmobile app. You can file and track claims, as well as view your policy so you can see what is covered.



CVS/pharmacy

Put the convenience of CVS in your pocket with the free CVS mobile app. Manage and refill prescriptions, chat with a health care provider 24/7, save with ExtraCare deals, find a clinic, print photos and more.



Davis Vision

Vision benefit info that's as mobile as you are. Find a network provider, directions, schedule an appointment, track your glasses, frame try-on-tool, reference library blog, and access to your id cards.



FF Flex Mobile

All of your Flexible Spending Account information at the tip of your fingers. With the FF Flex Mobile App you can submit claims, view account balance & history, see claim status, view alerts, upload receipts and documentation and more!



MetLife

Securely access your account to find a dentist in your area, view your id card, change your dental office, view your plan and claim summary. Additional products and features will be added with future updates.



MyChoice Mobile App

With the MyChoice Mobile App, we provide all the tools necessary for employees to access their benefit choices when and where they need it most. Features include: Current Benefits, Upload Dependents, Future Elections, Beneficiaries, Messages, ID cards, Contact Information and more.



TRS Health App

TRS-ActiveCare Health care benefits right at your fingertips. The TRS Health App helps you easily navigate everything you need in one place. Easily contact an Aetna Concierge, find a local pharmacy, or even talk to a Doctor with the Teledoc services provided through TRS.



UNUM Customer App

Easily manage your claim or leave 24/7 on all of your mobile devices. Upload documents straight from your device, report a new claim or leave, and check the status of your existing claim or leave.



Frequently Asked Questions

What is Guaranteed Issue (GI)?

Also referred to as Guaranteed Acceptance, or GA, means that you can't be turned down for health reasons. Guaranteed Issue is typically offered during initial enrollment for benefits.

What is a "pre-existing condition"?

A pre-existing condition is a disease or physical condition for which symptoms existed or medical advice or treatment was recommended or received prior to the effective date of coverage.

What is a deductible?

A deductible is what you must pay for your health care before your insurance pays its part. Most plans have deductibles, which start over when your "PLAN YEAR" starts over. For example, if your plan has a \$1,000 deductible and you have surgery that costs \$5,000, you'll pay \$1,000 before your insurer helps you cover your bills.

What is a co-pay?

A copay is a small, fixed amount—often \$15 or \$20—that you pay for covered services like a prescription or a doctor's visit. Some health plans also apply coinsurance to certain services. With it, you pay a percentage of the total cost of care. For example, if you have a 20% coinsurance, and your doctor's appointment costs \$300, you'd pay \$60. That's if you've met your deductible.

What does out-of-pocket maximum mean?

Your out-of-pocket maximum is the most you have to pay each year toward your medical services or prescription drugs before your insurance pays for all your care. This amount does not include what you pay in premiums. The Affordable Care Act limits the out-of-pocket maximums. In 2020, for one adult, it can be no more than \$8,200, and for a family, it can be no more than \$16,400.

What does EOB mean?

After you've visited your doctor or had a procedure in a hospital, you'll receive an explanation of benefits (EOB) form explaining how much of the charges your insurance will pay. The EOB isn't a bill itself, but it can tell you what your doctor may charge you. Look for the words "due from patient" to see how much you may owe after your insurance pays.

Before you get certain tests or procedures, do you need permission from your health insurance plan?

If your doctor says you need a test or procedure, your health plan may have to give permission if it's to be covered by insurance. Giving that permission is called preauthorization. Your plan's overview of benefits lists what care needs to be preauthorized. If you don't get it when it's required, your health plan won't pay its part of the costs.

IMPORTANT CONTACTS!

<i>Benefit</i>	<i>Vendor</i>	<i>Phone</i>	<i>Website</i>
Medical	TRS ActiveCare	800-222-9205	www.trsactivecareetna.com
Dental	MetLife/Safeguard	800-942-0854	www.metlife.com/dental
Vision	Davis Vision	888-790-9910	www.davisvision.com
Gap	American Fidelity	800-662-1113	www.americanfidelity.com
Disability	UNUM	800-858-6843	www.unum.com
Cancer	American Fidelity	800-662-1113	www.americanfidelity.com
Critical Illness	MetLife	800-438-6388	www.metlife.com/criticalillness
Permanent Life	Texas Life	800-283-9233	www.texaslife.com
Group Life	SunLife	800-247-6875	www.sunlife.com/us
Legal	LegalEase	800-562-2929	www.legaleaseplan.com
Identity Theft	iLock360	855-287-8888	www.ilock360.com
Accident	MetLife	800-438-6388	www.metlife.com
Emergency Ambulance Service	MASA	800-423-3226	www.masamts.com
Flexible Spending Account	FFGA	866-853-3539	www.ffga.com
Health Savings Account	FFGA/ UMB Bank	866-853-3539	www.ffga.com
Retirement Savings	TCG Group Holdings	800-943-9179	www.tcgservices.com

Dayton ISD Benefits office - Jessica Yates

936-258-2667 ext. 1102 | Jessica.Yates@daytonisd.net

Robert Dawson, FFGA Account Manager

EMAIL: Robert.Dawson@FFGA.COM

-
- Welcome
- User Name
- Case sensitive
- Password
- Case sensitive
- Login >
- Forgot your user name or password?
- First time here?
- Register to create your user name and password.
- Register
- You will be prompted for SSN, company key, and DOB (MM/DD/YYYY). Follow Prompts.

- Your company key is dayton (case sensitive)

- | |
|-------------------------------|
| Reference Center |
| ▶ Welcome |
| ▶ Healthcare |
| ▶ Dental |
| ▶ Vision |
| ▶ Disability |
| ▶ Basic Life and ADD |
| ▶ Supplemental Life and ADD |
| ▶ Legal and Identity Theft |
| ▶ FSA and DCA |
| ▶ Wellness Program |
| ▶ AFLAC Supplemental Benefits |

- [illegible]

-
- The diagram illustrates the state transitions of the 'I Want Coverage' button. It begins as a green button with a checkmark icon and the text 'I Want Coverage'. A red arrow points to a second state where the button is red with an 'X' icon and the text 'Waive Coverage'. A final red arrow points to a third state where the button is blue with the text 'Next'.

- | Employer Cost | Employee Cost | |
|---------------|---------------|----------------------|
| \$913.00 | \$130.00 | Exit |
| \$53.25 | \$10.75 | Exit |
| | | Exit |

- ## Confirmation
- When you click on I Agree, you are submitting your benefit choices for approval.
- Please note that if you have elected to participate in the Health Savings Account you will receive a HSA debit card shortly after the beginning of the plan year. You must fill out and return the enclosed form in order to order the card.**
- Submitting your benefit elections:** I authorize my employer to deduct the required cost from my paycheck for the amount I have selected. Further, by enrolling a dependent in a plan, I represent that such dependent is a eligible dependent under the terms and conditions described under each of those plans. I understand that any changes made during this open enrollment period will become effective January 1st and will be deducted from my paycheck in January. For any change regarding an insurance company's underwriting approval, that coverage will become effective on the first of the month following approval. I declare that the information provided by me during this enrollment is true and complete to the best of my knowledge.
- If you click on I Disagree, your elections will not be submitted and you risk losing coverage in 2017 for any benefit options that require you to enroll and pay for coverage.
- Thank You!
- *Total plan cost represents the total approved cost of benefits included in the selection. Other benefits not displayed are not included in this calculation.
- The information submitted may be subject to further review and approval. The deduction amounts are based on assumptions recorded in the benefitrollout system at the time of elections. To verify actual elections and approval amounts, please contact administrator.
- ☒ I Disagree

☒ I Agree
- Total Employee Cost: **\$565.41** Biweekly