

# 2023

Employee Benefits  
Guide

Presented by:



Prepared For:

Goshen Community Schools

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# Open Enrollment & Benefit Highlights

2023 PLAN YEAR DETAILS



## Eligibility

All full-time employees working 30 hours per week are eligible for the benefits program.

- You may insure yourself and eligible family members under the program.
- Your children are eligible for medical, dental, and vision to age 26 (and Voluntary Life Insurance where the maximum dependent age is 25)
- Your children of any age are also eligible if you support them, and they are incapable of self-support due to disability.



## Proof of Dependent Eligibility

As required by our insurance contracts, you may be required to provide proof of eligibility for your dependents. If your dependent becomes ineligible for coverage during the year, you must contact your plan administrator within 30 days.



## Making Benefit Changes After Open Enrollment

You may make a change to your benefits if you have a qualified status change such as:

- Marriage
- Divorce
- Legal Separation
- Birth or adoption of a child
- Change in a child's dependent status
- Death of a Spouse, child, or other qualified dependent
- Commencement or termination of adoption
- Change in your spouse's benefits or employment



# Online Enrollment

Enroll In Your Benefits Online!



01

## LOGIN

Login to PlanSource at [benefits.plansource.com](https://benefits.plansource.com)

Username: First Initial, Last 6 letters of your last name. Your initials are Capitalized. Last 4 numbers of your Social Security Number

Example: John Employee, SSN 123-45-6789 = **JEmploy6789**

Password: Your Date of Birth formatted as **YYYYMMDD**.  
example: June 1, 1980 = 19800601

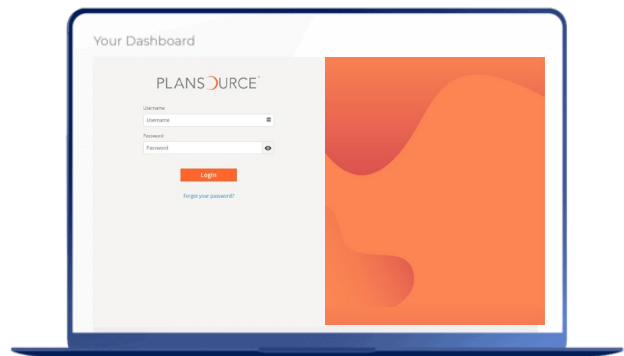
**\*Please note the correct order – year is first.**

For first time users or when adding a new dependent, be sure to have the following information:

**Birthdate and social security numbers** for yourself and each dependent including spouse

Marriage date (if applicable)

PLANSOURCE®



02

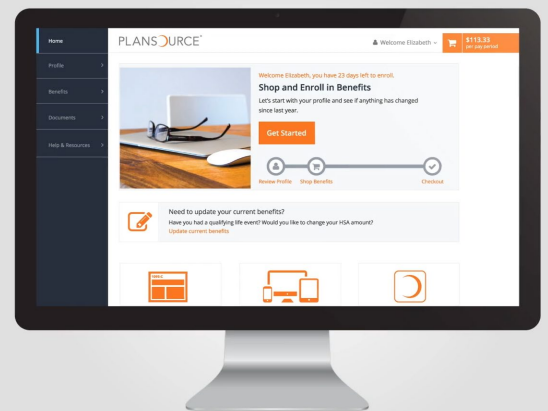
## ENROLL

Complete the enrollment steps to shop for benefits. After completing each screen, click UPDATE CART.

03

## CHECKOUT

Review all your personal, dependent, and enrollment information closely, and make changes if necessary. You can print or email the enrollment for if you choose.



# Terms You Should Know

**Benefit Eligible.** All full-time employees working an average of at least 30 hours per week are eligible for benefits. For new hires, your benefits begin on your date of hire. For Medical, Dental and Vision your qualified dependents include your legal spouse and children to age 26. For Voluntary Dependent Life, your covered dependents include your spouse and children to age 25 provided they are full-time students.

**Limited Spousal Eligibility.** If your spouse is employed and your spouse's employer provides a medical plan for which the employer pays at least 50% of "Employee Only" coverage, your spouse must enroll in that plan in order to be eligible to enroll.

**Deductible.** The amount you pay for covered health care expenses before your insurance starts to pay. For example, with a \$3,000 plan year deductible, you pay the first \$3,000 covered services.

**Coinsurance.** The percentage of costs of a covered health care service you pay (for example 20%), after you have paid your plan year deductible.

**Out-of-Pocket Maximum.** The most you have to pay for covered services in a plan year. After you spend this amount on deductibles, copayments, and coinsurance, your health plan pays 100% of the costs of covered benefits.

**Network Benefits (In-Network).** In network providers agree to accept the Anthem Blue Cross/Blue Shield approved amount for their services. You will see these savings listed as the "discounted amount" on your Explanation of Benefits statements.

**Non-Network Benefits (Out-of-Network).** Doctors or hospitals who are not in the network do not accept the Anthem Blue Cross/Blue Shield approved amount. You will be responsible for paying the difference between the provider's full charge and your plan's approved amount. This is called balance billing.

**Preventive Care.** Preventive care is the care you receive to prevent illnesses or diseases. Providing these services at no cost is based on the idea that getting preventive care, such as screenings and immunizations, can help you and your family stay healthy. Services will be paid at 100% when you use a participating provider.

**Embedded deductible plans.** Under family coverage, an embedded deductible plan means that each family member

has an individual deductible in addition to the total family deductible. Each individual's deductible is much lower than the total family deductible. When an individual meets their respective out-of-pocket total, the insurer begins to pay for that person's covered medical services, regardless of whether the family deductible has been fulfilled.

- The benefit of embedded deductibles: in some cases, this double-layered deductible can actually enhance individuals' coverage, according to the Center for Health Insurance Reform at Georgetown University. If an individual family member incurs a significant amount of medical expenses, the individual will fulfill their deductible sooner because it is lower than the family deductible. This can save families thousands of dollars because the individual's insurance policy will begin to cover benefits even if the family deductible isn't met.

**Non-embedded deductibles.** Under a non-embedded deductible plan, also known as an aggregate deductible plan, the total family deductible must be paid out-of-pocket before the insurer starts paying for healthcare services for any individual member.

- Non-embedded deductibles are not economical for some families. For some families, such as married couples without children, non-embedded deductible plans can cause families to spend thousands of dollars in extra out-of-pocket expenses that otherwise would have been covered had they purchased individual plans with lower deductibles or embedded family plans.

**When Life Changes.** Employees may add/remove/make benefit changes during the Open Enrollment period which is held annually. However, we understand that life happens. Employees have 31 days from the date of the qualified life event to make changes/updates. Examples of a life events include: birth or adoption of a child; marriage or divorce; death; loss of coverage; and employment status change.

You will need to provide documentation that reflects need for change(s) and must be submitted to HR to be approved.

**Plan Compliance Notifications.** Federal required Notices including but not limited to the HIPAA Privacy and Security, Certificate of Creditable Coverage for Medicare and Market "Exchange" Notices. Health Care Reform Notices are available online on the Human Resources internet site or via paper, free of charge, upon request. Please contact Human Resources with questions.



# 2023 Medical Benefit Overview

Medical & Prescription Drugs Insured by **Anthem**   **NAVITUS**  
PHARMACY BENEFITS REINVENTED™

## Physician Office Visit

## Specialist Office Visit

## Deductible

Single

Family

## Out-of-Pocket Maximum

Single

Family

## Preventive Care

## Emergency Room Services

## Urgent Care Centers

## Retail Prescription Drugs

Generic

Formulary Brand

Non-Formulary Brand

Specialty

## Mail Order Prescription Drugs

Generic

Formulary Brand

Non-Formulary Brand

Specialty

## Lifetime Maximum

### HDHP/ HSA Plan C\*

#### Network Benefits

10% after deductible

10% after deductible

#### Out of Network Benefits

30% after deductible

30% after deductible

#### Embedded

\$3,000

\$3,000

\$3,000 Individual, \$6,000 Family

\$6,000

#### Non - Embedded

\$5,950

\$5,950

\$11,900

\$11,900

10% coinsurance, deductible waived

30% after deductible

10% coinsurance after \$150 copay

10% coinsurance after \$150 copay

10% after deductible

30% after deductible

#### RX PLAN- Retail - After Deductible

\$10 copay

Not Covered

Greater of \$40 or 40%

Not Covered

Greater of \$60 or 60%

Not Covered

10% preferred provider deductible

#### RX Plan – Mail Order- After Deductible

\$10 copay

Not Covered

Greater of \$40 or 40%

Not Covered

Greater of \$60 or 60%

Not Covered

10% preferred provider deductible

\$2,000,000



# 2023 Medical Benefit Overview

Medical & Prescription Drugs Insured by **Anthem** & **NAVITUS**  
PHARMACY BENEFITS REINVENTED™

- Physician Office Visit**
- Specialist Office Visit**
- Deductible**
  - Single
  - Family
- Coinsurance**
- Out-of-Pocket Maximum**
  - Single
  - Family
- Preventive Care**
- Emergency Room Services**
- Urgent Care Centers**
- Retail Prescription Drugs**
  - Generic
  - Formulary Brand
  - Non-Formulary Brand
  - Specialty
- Mail Order Prescription Drugs**
  - Generic
  - Formulary Brand
  - Non-Formulary Brand
  - Specialty
- Lifetime Maximum**

PPO Plan A**	
Network Benefits	Out of Network Benefits
\$40	30% after deductible
\$45	30% after deductible
<b>Embedded</b>	
\$600	\$600
\$1,200	\$1,200
10%	30%
<b>Embedded</b>	
\$3,000	\$5,000
\$6,000	\$9,000
10% deductible waived	30% deductible waived
10% after \$100 copay, deductible waived	
\$40 copay, deductible waived	30% after deductible
Greater of \$10 or 15%	Copay + difference in cost
Greater of \$40 or 40%	Copay + difference in cost
Greater of \$60 or 60%	Copay + difference in cost
10% of prescription cost after deductible	10% of prescription cost after deductible
Greater of \$10 or 15%	Not Covered
Greater of \$40 or 40%	Not Covered
Greater of \$60 or 60%	Not Covered
10% of prescription cost	Not Covered
\$2,000,000	

PPO Plan B**	
Network Benefits	Out of Network Benefits
\$40	40% after deductible
\$45	40% after deductible
<b>Embedded</b>	
\$2,000	\$2,000
\$4,000	\$4,000
20%	40%
<b>Embedded</b>	
\$6,000	\$10,000
\$12,000	\$20,000
10% deductible waived	30% deductible waived
20% after \$200 copay, deductible waived	
\$40 copay, deductible waived	30% after deductible
\$10 copay	Copay + difference in cost
Greater of \$40 or 40%	Copay + difference in cost
Greater of \$60 or 60%	Copay + difference in cost
20% of prescription cost after deductible	20% of prescription cost after deductible
10% of cost	Not Covered
Greater of \$40 or 40%	Not Covered
Greater of \$60 or 60%	Not Covered
20% of prescription cost	Not Covered
\$2,000,000	

\*\*PPO Plan Options A and B are frozen and available to employees currently enrolled in them





Anthem's iPhone & Android App

# Sydney

## All Your Health Plan Information in One Place

**Find Care & Check Costs** – It's easy to search for doctors, dentists, hospitals, labs and other providers in your plan. You can search by name, location and type of care. You can even filter by gender or languages spoken, then check costs before you go.

**Digital ID Cards** - You can always have your most current ID card handy. And you can use it just like a paper one when you visit the doctor, dentist, pay for care and more.

**Interactive Chat** - Simply type your questions in the app and get answers quickly. Sydney can suggest resources to help you understand your benefits, improve your health, and save money.

**Benefit Plan Overview** - Sydney shows you essential information at a glance, whether that's an overview of your plan, health reminders, or suggestions for wellness programs. You also can find your deductible, copay and share of costs.

**View Claims** - With one click, you can check claims. That means you can spend more time focused on your health and less on managing your health benefits.

**Check Health Records** - myFHR gives you easy access to your health data, including health history and electronic medical records, all in one place. Availability is based on your plan.







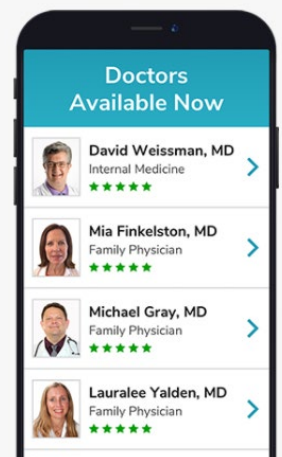
## Anthem's Telehealth App LiveHealth

### No Waiting Room, No Need to Leave Home

**See a board-certified doctor 24/7** – You don't need an appointment to see a doctor. They're always available to assess your condition and send a prescription to the pharmacy you choose, if needed. It's a great option when you have pink eye, a cold, the flu, a fever, allergies, a sinus infection or another common health issue.

**Visit a licensed therapist in four days or less** - Have a video visit with a therapist to get help with anxiety, depression, grief, panic attacks and more. Schedule your appointment online or call 1-888-548-3432 from 8 a.m. to 8 p.m., seven days a week.

**Consult a board-certified psychiatrist within two weeks** - If you're over 18 years old, you can get medication support to help you manage a mental health condition. To schedule your appointment, call 1-888-548-3432 from 8 a.m. to 8 p.m., seven days a week.



Your Anthem plan includes video visits using LiveHealth Online, you just pay your share of the costs — usually \$59 or less for medical doctor visits, and a 45-minute therapy or psychiatry session usually costs the same as an office mental health visit. **Visit [livehealthonline.com](https://livehealthonline.com) or download the app and register on your phone or tablet.**

## Finding a Primary Care Physician (PCP)

With your Anthem plan, you get access to a large network of doctors across the country — so you have more choices when selecting your PCP. Finding an in-network PCP is easier with our online tools. You can search for a doctor by name or look for one near you. Avoid getting care from doctors outside your plan because it will likely cost you more, or your plan may not cover it at all.

1. Go to [anthem.com/find-doctor](https://anthem.com/find-doctor)
2. Choose your search:
  - Search as a Member: Use your member ID card number or log in with a username and password.
  - Search as a Guest: Select a plan or network,\* or search by all plans and networks, to get started.
3. Select a type of doctor and location or search within a certain distance of your location.



# Health Savings Account

## For a Qualified High Deductible Health Plan



A Health Savings Account (HSA) is a consumer-oriented, tax-advantaged savings account that is always combined with a High Deductible Health Plan (HDHP). It is an interest-accruing account, similar to an Individual Retirement Account (IRA), which provides financial control over how you spend your health care dollars and can be used to pay for your out-of-pocket medical expenses. HSA earnings grow tax-deferred and qualified withdrawals are tax-free without “use it or lose it” provisions found with a Flexible Spending Account (FSA). Money not used in your Health Savings Account can be rolled over to the following year. HSA funds can be used for all qualified medical expenses, including medical services, as well as eyeglasses, dental procedures, prescription drug coverage and over-the-counter medications provided you submit a prescription from your provider. See *IRS Publication 969* for more information and a listing of *Qualified Eligible Expenses* at [www.irs.gov](http://www.irs.gov).

### To qualify for an HSA, you must meet the following requirements, as defined by the IRS:

- You must be covered under a High Deductible Health Plan
- You have no other health coverage except what is permitted by the IRS
- You are not enrolled in Medicare
- You cannot be claimed as a dependent on someone else’s tax return.

### How Should You Manage Your HSA?

- Contributions can be made with pre-tax money through payroll deductions, or contributions can be made post-tax and then deducted from your income when you file your income tax return.
- Funds should be limited to qualified medical expenses;
- Keep receipts documenting medical expenses;

### When to Stop Contributing to Your HSA?

- When you are no longer enrolled in a qualified health plan;
- When you become eligible for Medicare and you plan to enroll, you must stop your HSA.



### Employer Annual HSA Base Contributions

If you enroll the HDHP plan for January 1, 2023, your employer will make a base contribution to your HSA based on the tier of coverage you are enrolled in. You will need to set up a Health Savings Account with Interra. Please contact HR for the form.

Employer Annual HSA Base Contributions	
Employee Only	\$1,000
Employee+1 or more Dependents	\$2,500

	2023 IRS Max Contributions	IRS Post Age 55 “Catch-up”
Employee	\$3,850	\$1,000
Family	\$7,750	\$1,000

### If You Will Be Turning 65

Active employees turning 65 have the option to accept or decline enrollment in Medicare, including Medicare Part A.

- Employees who accept enrollment in any part of Medicare are no longer eligible to make or receive contributions to an HSA.
- If you elect Medicare at age 65, your maximum HSA contribution for the year you elect will be prorated by the number of months you were not enrolled in Medicare.
- Employees who decline enrollment may continue to make and receive contributions to an HSA.
- Qualified distributions remain tax free regardless of your eligibility to contribute.
- Non-qualified distributions are taxable but no longer carry a 20% penalty after age 65.
- Medicare Part(s) A, B, D and Medicare HMO premiums may be paid or reimbursed with tax-free HSA dollars. You cannot use your HSA to pay for Medigap premiums.



# Dental & Vision Benefit Summary



## Delta Dental

Annual Deductible	PPO / Premier Network
Individual	\$50
Family	\$150
<b>Annual Plan Maximum</b>	\$1,000
<b>Orthodontia Lifetime Maximum</b>	\$1,000
<b>Preventive/ Diagnostic Care</b> Includes: routine oral exams, cleanings, fluoride treatment (through 18), sealants, x-rays	You Pay 0% / 0%
<b>Basic Dental Services</b> Includes: fillings, consultations, space maintainers, brush biopsy, endodontics, periodontics	You Pay 20% / 20%
<b>Major Dental Services</b> Includes: oral surgery, dentures, bridges, implants	You Pay 50% / 50%
<b>Orthodontia for Children up to age 19</b>	You Pay 50% / 50%

Delta Dental benefits listed above are shown In-Network. See full plan details for description and Out-of-Network Coverage details.

### Premiums

The cost for this benefit is determined by hours worked and employee class.

Delta Dental offers three levels of benefit coverage: PPO Dentist, Premier Dentist and Non-Participating Dentist. Review summary of benefits for more details.

**PPO Coverage** - Offers significant discounts; no balance billing; acceptance of processing policies; and 108,000 dentist locations

**Premier Coverage** - Negotiated fees; no balance billing; acceptance of processing policies; and 186,000 dentist locations

**Non-Participating Coverage** - Balance billing and does not offer discounts



In partnership with VSP®



## Delta Vision

	In-Network	Out-Of-Network
<b>Routine Eye Exam - (once every 12 months)</b>		
	\$10 copay	\$45 allowance
<b>Frames - (once every 24 months)</b>		
	\$130 allowance	\$70 allowance
<b>Standard Plastic Lenses - (once every 12 months)</b>		
Single vision (1 pair)	\$10 copay	\$30 allowance
Bifocal lenses (1 pair)	\$10 copay	\$50 allowance
Trifocal lenses (1 pair)	\$10 copay	\$65 allowance
<b>Contact Lenses - (once every 12 months in lieu of glasses)</b>		
Elective	\$130 allowance	\$105 allowance
Non-Elective	Covered in full	\$210 allowance

Provider Directory: <https://www.deltadental.com>  
Allowances must be used on transaction

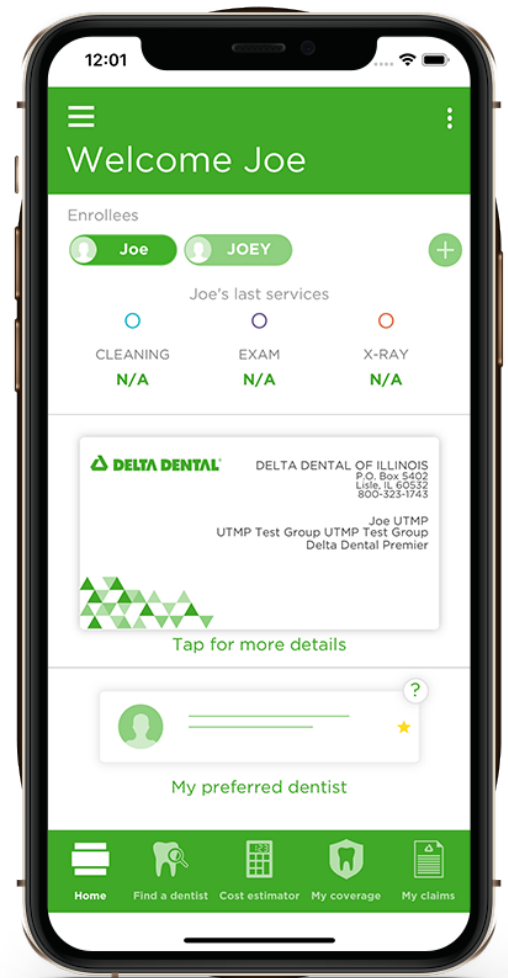
Premiums	20 Pays	26 Pays
Employee Only	\$4.60	\$3.18
Employee + Spouse	\$9.21	\$6.38
Employee + Child(ren)	\$7.80	\$5.40
Employee + Family	\$12.86	\$8.90



# Delta Dental Benefits

The new Delta Dental Mobile App helps you get the most out of your dental benefits anytime, anywhere. Use the dentist search or toothbrush timer without logging in or enter your username and password to securely access your personal benefit information or estimate your dental costs.

- **Coverage and Claims Information** – See your plan type, benefit levels, deductibles, maximums, and more. Check the status of recent dental claims. Add your dependents to your account to be able to access the whole family's coverage in one spot.
- **Dentist Search** - Find a dentist in your plan/network, narrow the list with criteria like 'language spoken' and 'specialty', and even find a dentist nearby using your current location. After you pick a dentist you can save the contact information and get directions.
- **Mobile ID Card** - No more paper! Provide your dentist with the information he or she needs by accessing your ID card right on your phone using Apple Passbook or Google Wallet.
- **Toothbrush Timer** – Keep up with your oral health routine by using this handy tool. Our time counts down for two minutes while reminding you to brush each tooth.
- **Dental Care Cost Estimator** – This easy-to-use tool provides estimated cost ranges on common dental care needs for dentists in your area. You can even select your dentist for tailored cost estimates.



**Get Started!** - Delta Dental's free app is optimized for iOS and Android devices. To download our app on your device, visit the App Store or Google Play and search for Delta Dental.

Delta Dental subscribers can log in using the username and password used to log in to [deltadental.com](http://deltadental.com). If you haven't registered for an account yet, you can do so within the app. If you've forgotten your username or password, you can also retrieve these within the app.



# Flexible Spending Accounts

## General Purpose FSA

**What is it?** It's an employer-sponsored benefit that allows those who don't have an HSA to set aside money on a pre-tax basis through payroll deduction to help offset unreimbursed medical, dental or vision expenses.

**Who can use it?** Funds can be used by the FSA owner's spouse and a person claimed as a dependent on FSA owner's taxes (with certain qualifications).

**What can the funds be used on?** Examples of eligible expenses FSA dollars can generally be used for include:

- Medical copays, deductibles, prescriptions
- Dental services such as crowns, bridges, dentures, implants, oral surgery
- Vision services such as prescription eyeglasses, eye exams, prescription sunglasses, Lasik surgery
- Contact lenses and related supplies
- Hearing exams and hearing aids
- Infertility treatments, in-vitro fertilization
- Mental health counseling (not marital)
- Birth control, tubal ligation, vasectomy
- CPAP machines and accessories
- Breast pumps and lactation supplies
- Diabetic supplies
- Sanitary napkins, pads, liners, tampons
- Walkers, wheelchairs, crutches
- Incontinent supplies
- Many other over-the-counter (OTC) and medical supplies

For more information on eligible OTC supplies go to <https://fsastore.com/fsa-eligibility-list>.

To file a claim, go to [www.hrpro.com](http://www.hrpro.com).

## Dependent Care FSA

**You may choose to have a Dependent Care FSA along with an HSA.**

**What is it?** It's an employer-sponsored benefit plan that allows employees to put aside funds for certain dependent care expenses on a pre-tax basis up to a specified limit (**\$5,000** in 2023 or \$2,500 if you are married and file separate tax returns).

**What dependent care expenses are eligible for reimbursement?** It must be an "employment-related expense" that allows the taxpayer to work.

**Who is a qualifying individual?** A taxpayer's dependent who is under age 13 or the taxpayer's dependent or spouse who is physically or mentally incapable of self-care and who has the same principal place of abode as the taxpayer for more than half the taxable year.

**May I pay for eligible services in advance?** No, services can only be paid for as they occur and as funds exist in the account.

**What are some examples of expenses eligible for reimbursement?**

- Nursery school, preschool or similar program below the level of kindergarten
- Before- and after-school care of a child in kindergarten or a higher grade
- Day camp expenses

**Ineligible expenses include:**

- Overnight camp costs
- Expenses for kindergarten or higher grade levels
- Payments to either the taxpayer's spouse or to a parent of a taxpayer's child who is not the taxpayer's spouse

For more information on how to file a claim, go to [www.hrpro.com](http://www.hrpro.com).



# Basic Life, AD&D, STD, LTD, Voluntary Life Insurance



## Basic Life, Accidental Death, Dismemberment Insurance

A life insurance policy is a contract with an insurance company. In exchange for premium payments, the insurance company provides a lump-sum payment, known as a death benefit, to beneficiaries upon the insured's death.

Eligible Full Time Employees
Employer Pays 100% of Premium for Basic Life
Coverage decreases incrementally beginning at age 70

## Short-Term Disability Benefits

Disability benefits protect your income during a period in which you are unable to work because of an illness or accident not related to your job. Employer pays 100% of premium.

Income Benefit	60% of Weekly Earnings
Employee pays 100% of Premium for Short-Term Disability	
Benefits Begin	15 <sup>th</sup> day of disability
Maximum Benefit Period	13 Weeks

## Long-Term Disability Benefits

Disability benefits protect your income during a period in which you are unable to work because of an illness or accident not related to your job. Employer pays 100% of premium.

Income Benefit	67% of Monthly Earnings
Employee pays 100% of Premium for LTD	
Benefits Begin	91 <sup>st</sup> day of disability
Maximum Benefit Period	To Normal Social Security Retirement Age (age 65-67)

## Voluntary Term Life Insurance

Employees pay 100% of the premiums for Voluntary Benefits. Evidence of Insurability is required for new enrollments in the plans or increases in benefit amount.

EMPLOYEE BENEFIT	<b>Benefit Increments</b>	\$10,000
	<b>Benefit Maximum</b>	\$500,000
	<b>Guarantee Issue</b>	\$200,000
	Premiums are based on your benefit choice and your age.	
SPOUSE BENEFIT	<b>Benefit Amount</b>	\$250,000 maximum. Increments of \$5,000
CHILD(REN) BENEFIT	<b>Benefit Amount</b>	\$10,000 maximum. Increments of \$2,000



# Employee Assistance Program



There are times in life when you might need a little help coping or figuring out what to do. The Employee Assistance Program (EAP) is available to you and your family from BDA/Morneau Shepell.

You, your dependents (children between ages 13-26) and all household members can contact a professional clinician 24/7/365 by phone, live chat or text.

Highlights	Description
<b>Eligibility</b>	Employees and household member that have Goshen Community Schools Insurance.
<b>Clinical issues addressed</b>	Confidential assistance for a range of personal problems and work life concerns: <ul style="list-style-type: none"> <li>•Addictions</li> <li>•Depression</li> <li>•Anxiety and stress</li> <li>•Relationships and parenting</li> <li>•Wellness</li> </ul>
<b>Clinical services</b>	Unlimited 24/7/365 telephone assessment utilizing evidence-based evaluation tools, referral, and crisis intervention services.  Up to Three (3) in-person assessment and short-term problem resolution services per presenting problem. Phone and video conferencing sessions are also available.
<b>Program access</b>	Multiple methods for program access 24/7: <ul style="list-style-type: none"> <li>•Toll-free number or text</li> <li>•Website via email or live chat</li> <li>•Mobile device application</li> <li>•Lifeworks monthly Newsletter</li> </ul>
<b>Case management</b>	Coordinated telephone intake, case management, and follow-up by the same master's degree clinician.
<b>Referral network</b>	Participants are connected with experienced, licensed/credentialed clinicians in their community.
<b>Work life services</b>	Assistance for daily challenges at home and work including: <ul style="list-style-type: none"> <li>•Financial</li> <li>•Legal</li> <li>•Child/elder care</li> <li>•Convenience</li> <li>•Identity theft</li> </ul>
<b>Wellness services</b>	Telephone based wellness coaching for tobacco cessation, weight loss/management, fitness/exercise, stress management, parenting and relationship support.

Website: <https://www.workhealthlife.com/us>



# Critical Illness Insurance

## How it Works

With Critical Illness Insurance offered through Reliance Standard you choose benefits to protect yourself and any family members if diagnosed with a critical illness. Then, if diagnosed with a covered critical illness, you will receive a cash benefit based on the percentage payable for the condition.

## Meeting your Needs

Coverage Amount	
<b>You</b>	\$10,000-\$30,000 in increments of \$10,000
<b>Spouse</b>	\$10,000-\$30,000 in increments of \$5,000, as long as it's not more than your coverage amount
<b>Children</b>	Automatically covered at 50% of your coverage amount up to a maximum of \$15,000

## 18 Pay Premiums

Benefit Amount	Age 0-29	Age 30-39	Age 44-49	Age 50-59	Age 60-69	Age 70+
\$10,000	\$2.53	\$4.53	\$8.53	\$15.33	\$23.47	\$46.13
\$20,000	\$5.07	\$9.07	\$17.07	\$30.67	\$46.93	\$92.27
\$30,000	\$7.60	\$13.60	\$25.60	\$46.00	\$70.40	\$138.40

## 20 Pay Premiums

Benefit Amount	Age 0-29	Age 30-39	Age 44-49	Age 50-59	Age 60-69	Age 70+
\$10,000	\$1.75	\$3.14	\$5.91	\$10.62	\$16.25	\$31.94
\$20,000	\$3.51	\$6.28	\$11.82	\$21.23	\$32.49	\$63.88
\$30,000	\$5.26	\$9.42	\$17.72	\$31.85	\$48.74	\$95.82

## 26 Pay Premiums

Benefit Amount	Age 0-29	Age 30-39	Age 44-49	Age 50-59	Age 60-69	Age 70+
\$10,000	\$2.28	\$4.08	\$7.68	\$13.80	\$21.12	\$41.52
\$20,000	\$4.56	\$8.16	\$15.36	\$27.60	\$42.24	\$83.04
\$30,000	\$6.84	\$12.24	\$23.04	\$41.40	\$63.36	\$124.56





# Accident Insurance



## How it Works

Reliance Standard coverage pays you cash benefits that correspond with hospital and intensive care confinement. Your plan may also include coverage for a variety of occurrences, such as: dismemberment; dislocation or fracture; ambulance services; physical therapy and more. The cash benefits can be used to help pay for deductibles, treatment, and more.

Benefits**	Amount
Ambulance	\$200 Ground, \$1,000 Air
Blood, Plasma and Platelets	\$300
Chiropractic Services (per Visit)	\$50 per session, 6 sessions maximum
Coma	\$7,500
Concussion	\$200
Dental Injury	\$300 for Crown; \$100 for Extraction
Diagnostic Exams	\$200 per CT/MRI scan

### 18 Pay Premiums

Employee Only	\$9.70
Employee + Spouse	\$15.21
Employee + Child(ren)	\$15.67
Family	\$21.17

### 20 Pay Premiums

Employee Only	\$8.73
Employee + Spouse	\$13.69
Employee + Child(ren)	\$14.10
Family	\$19.06

### 26 Pay Premiums

Employee Only	\$14.55
Employee + Spouse	\$22.81
Employee + Child(ren)	\$23.50
Family	\$31.76





# Voluntary Whole Life



## How it Works

The coverage offers fully guaranteed premiums payable to age 95, death benefits and cash value that can be used along the way. Allstate Benefits Whole Life coverage provides a lump sum death benefit during life changing events such as the death of a wage earner. Our Group Whole Life policy offers coverage amounts from a minimum of \$5,000 to a maximum of \$100,000. During initial enrollment, the employee can choose who to cover and how to cover them.

## Long-Term Care Rider

**Accelerated Death Benefit for Long Term Care with Restoration of Benefits** - a monthly advance of 4% of the death benefit for up to 25 months while receiving qualified long-term care services, after a 90-day elimination period when certified chronically ill by a licensed health care practitioner. The restoration benefit restores the death benefit and cash value to the pre-acceleration amounts.

Whole Life can be valuable as another way to buy up to \$100,000 in additional guaranteed life insurance. This product is unique because of its ability to provide a monthly advance of 4% of the death benefit for up to 25 months while receiving qualified long-term care services when certified as chronically ill.

Insured Person	Benefit Amount
Employee	\$5,000 Minimum and \$100,000 Maximum
Working Spouse	\$5,000 Minimum and \$20,000 Maximum
Non-working Spouse	\$5,000 Minimum and \$20,000 Maximum

Allstate Voluntary Whole Life Premiums	
Employee	Rates vary by coverage levels and ages.
Working Spouse	
Non-working Spouse	





# Identity Theft Protection

Protect yourself and your loved ones (under your roof or under your wallet) from identity theft and fraud with Privacy Armor. Please refer to the plan certificate for full detail.

## Privacy Armor

Show you your digital footprint – where your data goes once you enter it online

Provide 24/7 monitoring to help stop identity theft as soon as it starts

Provide you with early alerts and hunts down targeted threats

Provide Privacy Advocates that are available 24/7 because identity theft doesn't sleep

Reimburse you for any out-of-pocket expenses, lost wages, or legal fees incurred from identity theft

Reimburse you if funds are stolen from you bank, HSA, or 401 (k) accounts

## Cost Per Pay

Tier	20 Pay Base Premium	26 Pay Base Premium
<b>Single Coverage</b>	\$5.97	\$4.60
<b>Family Coverage</b>	\$10.77	\$8.29



# Contact Information

Please utilize the website resources for provider information, pharmacy information, and general claims information.

The Customer Service phone numbers can assist you with benefits and specific claims questions.



Additional education pieces and resources are available. Talk to your HR team for more information.

## Goshen Community Schools Contacts:

**Aaron Manning**  
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574 533-8631 ext 12022

**Susan Stiffney**  
[sstiffney@goshenschools.org](mailto:sstiffney@goshenschools.org)  
574 533-8631 ext 12017

[benefits@goshenschools.org](mailto:benefits@goshenschools.org)

01

**Anthem - Medical**

<https://www.anthem.com/>

02

**Delta Dental - Dental**

<https://deltadentalin.com/>

03

**DeltaVision provided by VSP - Vision**

<https://deltadentalin.com/>

04

**HSA - Interra Credit Union**

<https://www.interracu.com>

05

**FSA- HR Pro – Healthcare and Dependent Care FSA**

<https://www.hrpro.com/fsa-hsa-hra/#>

06

**Reliance Standard Life, Disability and Worksite**

<https://www.reliancestandard.com/home/>

07

**Privacy Armor – Identity Theft**

<https://privacyarmor.infoarmor.com/>

08

**Employee Assistance Program**

<https://us.lifeworks.com/>

