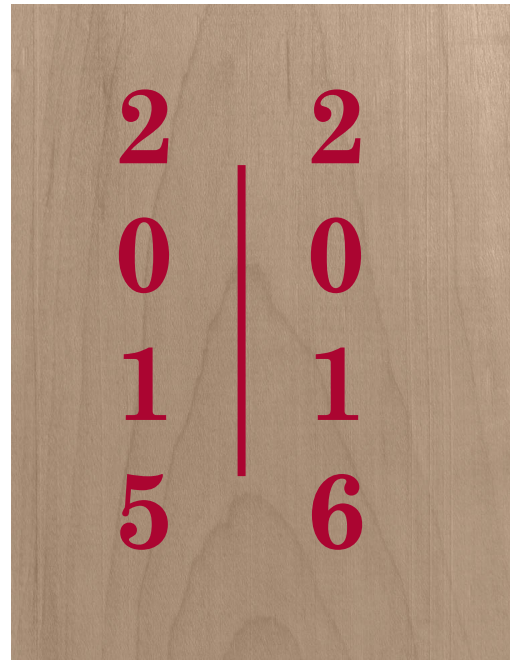




Improving Our Wellness Together



Benefit Guide Content

Overview	2 - 3
Medical	4 - 5
Voluntary Benefits	6 - 8
Life Insurance	8 - 9
Disability	10 - 11
Dental	12
Vision	13
LifeLock Identity Theft Protection	14
Important Contacts	15

When can I Enroll?

Open enrollment allows for employees of the District to enroll or make changes in any of the plans without a qualifying event.

In order to make changes outside of the annual open enrollment period, there would need to be a qualifying event such as the birth of a child, change in marital status, death, or loss of coverage due to no fault of your own. An enrollment application must be submitted to the insurance carrier via the Treasurer's office within thirty-one (31) days of the qualifying event in order for coverage to be effective.

WELCOME TO OPEN ENROLLMENT FOR YOUR 2015-2016 BENEFITS!

We are honored to present your 2015-2016 Benefit Options! The elections you make during enrollment will become effective run through **September 30, 2016**.

Rocky River City Schools offers you and your eligible family members a comprehensive and valuable benefits program. We encourage you to take the time to educate yourself about your options and choose the best coverage for you and your family.

For more information about your Benefits and Enrollment please visit:

www.explainmybenefits.biz/rockyriver

1. All benefit eligible employees are required to complete the enrollment process whether you are electing benefits or waiving all benefits in order to confirm your choices.
2. This year we have moved to an online enrollment process. This new technology, **EMB Enroll**, will enable a more efficient process to communicate and administer the benefits to our insurance carriers. Employees will self-enroll online and the system will guide you through the benefit offerings.
3. Please be prepared to complete your enrollment with all your demographic and dependent information. You will be verifying all this information that will be in the system so it is accurate when sent to all the insurance carriers.

Medical Mutual of Ohio is the medical provider for Rocky River City schools.

Comprehensive healthcare provides peace of mind. In case of an illness or injury, you and your family are covered with an excellent medical plan through Rocky River City Schools.

The PPO plan allows you to select where you receive your medical services; however, if you use in-network providers, your out-of-pocket costs will be less.

	Medical Mutual	
	In Network	Out of Network
Deductible		
<i>Individual</i>	\$300	\$600
<i>Family*</i>	\$600	\$1,200
<i>Coinsurance</i>	10%	30%
Out of Pocket Maximum		
<i>Individual</i>	\$500	\$1,000
<i>Family</i>	\$1,000	\$2,000
Doctor's Office		
Primary Care Visit	\$25 copay	\$25 copay
Specialist Visit	\$25 copay	\$25 copay
Chiropractic Visit	10% after deductible	30% after deductible
Acupuncture Visit	Not Covered	Not Covered
Preventive care/Screening/Immunization	No Charge	30% after deductible
Laboratory Services		
Diagnostic X-ray	10% after deductible	30% after deductible
Diagnostic Blood Work	10% after deductible	30% after deductible
Imaging (CT/PET scans, MRIs)	10% after deductible	30% after deductible
Outpatient Services		
Facility Fee (e.g. ambulatory surgery center)	10% after deductible	30% after deductible
Physician/Surgeon Fees (Outpatient)	10% after deductible	30% after deductible
Emergency Services		
Emergency Room Services	\$75 copay	\$75 copay
Emergency Medical Transportation	10% after deductible	30% after deductible
Urgent Care	\$25 copay	\$25 copay
Inpatient Hospital Services		
Facility Fee (e.g. hospital room)	10% after deductible	30% after deductible
Physician/Surgeon Fee (Inpatient)	10% after deductible	30% after deductible

	Medical Mutual (Continued)	
	In Network	Out of Network
Mental Health/Behavioral Health/Substance Abuse Services		
Mental/Behavioral Health Outpatient Services	Benefits paid based on corresponding medical benefits	
Mental/Behavioral Health Inpatient Services	Benefits paid based on corresponding medical benefits	
Substance Use Disorder Outpatient (Alcoholism)	Benefits paid based on corresponding medical benefits	
Substance Use Disorder Outpatient (Drug Use)	Benefits paid based on corresponding medical benefits	
Substance Use Disorder Inpatient (Alcoholism)	Benefits paid based on corresponding medical benefits	
Substance Use Disorder Inpatient (Drug Use)	Benefits paid based on corresponding medical benefits	
Maternity Services		
Prenatal and Postnatal Care	10% after deductible	30% after deductible
Delivery and all Inpatient Services	10% after deductible	30% after deductible
Home Health/Rehabilitation Services		
Home Health Care	10% after deductible	30% after deductible
Rehabilitation Services (Physical Therapy)	10% after deductible	30% after deductible
Habilitation Services (Occupational Therapy)	10% after deductible	30% after deductible
Habilitation Services (Speech Therapy) (10 visits, then Medical Review - Professional; Unlimited - Institutional)	10% after deductible	30% after deductible
Skilled Nursing Care	10% after deductible	30% after deductible
Durable Medical Equipment (Includes Wigs, which are limited to 1 per benefit period, when hair loss is due to chemotherapy or radiation)	10% after deductible	30% after deductible
Hospice Services	10% after deductible	30% after deductible
Dental or Eye Care for Children		
Eye Exam (Child)	No Charge	30% after deductible
Glasses	Not Covered	
Dental Check-up (Child)	Not Covered	
Prescription		
Generic Drugs	\$10 copay - retail (34 days) \$25 copay - mail order (90 days)	\$10 copay - retail (34 days) Not covered - mail order
Preferred Brand Drugs	\$20 copay - retail (34 days) \$50 copay - mail order (90 days)	\$20 copay - retail (34 days) Not covered - mail order
Non-preferred Brand Drugs	\$40 copay - retail (34 days) \$100 copay - mail order (90 days)	\$40 copay - retail (34 days) Not covered - mail order
Specialty Drugs	Same as Retail Copays	Same as Retail Copays

**Dependent children up to age 26 regardless of financial dependence, student status, residence or marital status. Dependents are automatically dropped from health insurance coverage at the end of the month in which the dependent turns 26.*



What are Voluntary Benefits?

Voluntary Benefits are offered to strengthen your overall benefits package. You customize the benefit based on need and affordability.

- Ownership – Policies are fully portable and belong to you if you leave your employer, same price and same plan
- Benefits are payroll deducted
- **Cash benefits are paid directly to you, not to a hospital or to a doctor**
- **Benefits are paid regardless of any other coverage you may have**
- Level premiums—Rates do not increase with age
- Guaranteed Renewable
- Designed to provide additional cash flow to assist with out of pocket medical costs and other bills

The Voluntary Benefits offered are **Accident Insurance, Critical Illness with Cancer Insurance and Universal Life with Long Term Care Insurance** from Trustmark.

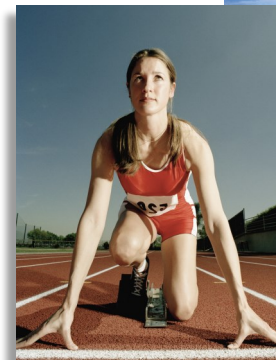
Trustmark Accident Plan

A plan that helps pay for the unexpected expenses that result from an accident

- **On and off the job coverage** = 24 hours per day, 7 days a week
- Family coverage available
- Sports related injuries covered as well

Just a few examples of benefit included in the plan:

- Emergency Room Visits - \$200
- Hospitalization - \$2,000 admission benefit, \$400 per day benefit
- Fractures - up to \$10,000
- Dislocations - up to \$8,000
- Health Screening Benefit - \$100 per insured per year
- See brochure for a complete list of benefits



SEMI-MONTHLY PAYROLL DEDUCTIONS

Employee	Employee & Spouse	Employee & Children*	Family*
\$9.53	\$14.54	\$17.68	\$22.69

*Dependents up to age 26 can be covered regardless of student status.

TRUSTMARK CRITICAL ILLNESS/CANCER PLAN

Critical Illness/Cancer is a benefit that will pay you a lump sum of money if you are diagnosed with a critical illness, heart attack, internal cancer or stroke. The cash benefit is provided upon the first diagnosis of a covered condition to help you with associated costs and beyond.

Special Underwriting for Initial Offering ONLY

Guaranteed Issue:

\$20,000 employee / \$10,000 spouse / \$2,000 children

Regardless of other coverage in force, the benefit is paid out in a full lump sum.

Examples of covered conditions:

Invasive Cancer, Heart Attack, Stroke, Renal (Kidney Failure), Blindness, ALS (Lou Gehrig's Disease), Major Organ Transplant, Paralysis of Two or More Limbs, Coronary Artery Bypass Surgery (25% benefit), Carcinoma In Situ (25% benefit)

A Health Screening Benefit is included in your Critical Illness/Cancer Policy and Trustmark pays up to \$100 for each insured. Each covered person will get one immunization or one screening test per calendar year.

Examples of health screenings:

- Low dose mammography
- Stress test
- Serum Cholesterol
- Bone Marrow
- Pap Smear
- Colonoscopy
- Prostate specific antigen
- Chest X-ray

Also included is a Subsequent Benefit that provides a cash payment for each of the covered conditions in the event the covered person is diagnosed with multiple different covered conditions or illnesses. Each subsequent diagnosed condition is paid at 100% of the original benefit with a 90 day separation period.

Rates

This benefit is customized by each employee so rates vary, but can start as little as a few dollars a week. See brochure for more details.



Basic Term Life and Accidental Death & Dismemberment

The amount of life insurance that is right for you depends on a variety of factors, including your age, family status, personal savings, financial commitments, etc. Rocky River City Schools offers a variety of programs to meet your life insurance needs.

Rocky River City Schools provides a basic life and accidental death and dismemberment (AD&D) insurance coverage, through **MetLife**, to all benefit eligible employees at no cost to the employee based on your contract.

Trustmark Universal Life with Long Term Care

Universal Life with Long Term Care includes both a death benefit and a living benefit.

- Trustmark Universal Life with Long Term Care is a permanent life insurance that is designed to match your needs throughout your lifetime. It pays a higher death benefit during your working years when expenses are high and you need maximum protection.
- The Universal Life with Long Term Care is priced to remain the same cost to you until age 100.
- The death benefit reduces at age 70 when the need for life insurance typically decreases.
- The Living Benefit, Long Term Care never reduces and is 4% of the original death benefit per month for up to 25 months.
- **If you use the Long Term Care benefit, your death benefit amount does not reduce due to the Benefit Restoration feature included.**
- Coverage available for spouse and children as well.

Special Underwriting for Initial Offering

Guaranteed Issue (Employee Only)

The lesser of the face amount purchased by \$16 per week or \$200,000

Rates

This benefit is customized by each employee so rates vary, but can start as little as a few dollars a week. Please speak to a Benefit Counselor to customize your plan and rates.



Short Term Disability

As an employee of Rocky River City Schools, you are able to enroll in Short Term Disability (STD) coverage. STD coverage supplements your lost wages should you be unable to work due to an illness, injury or pregnancy. STD coverage begins after missing the specific elimination period below due to a medically certified reason. Benefit are payable up to the specific benefit duration period below.

There are two elimination period and benefit period options available to you:

Elimination Period for sickness, accident or pregnancy: 7 Days

Maximum Benefit Period: 26 Weeks

Elimination Period for sickness, accident or pregnancy: 30 Days

Maximum Benefit Period: 22 Weeks

Weekly Benefit: 60% of your weekly earnings to a maximum benefit of \$2,500

Pre-Existing Condition: Anything you received medical treatment, advice or consultation, care or services including diagnostic measures, or had drugs or medicine prescribed or taken in the 3 months prior to your insurance effective date will not be covered for the first 6 months of the policy.

SEMI-MONTHLY COST CALCULATION FOR 7 DAY ELIMINATION PERIOD & 26 WEEK BENEFIT PERIOD

Example: Employee has a \$30,000 annual salary and wants to purchase short term disability

1. Weekly Earnings	\$576.92
2. Multiply by 60%	\$346.15
3. Determine Coverage (Round down to lower \$100)	\$300.00
4. Multiply by the premium factor	0.082
5. Your estimate monthly premium	\$24.60
6. Divide by 2 to get Semi-Monthly Deduction	\$12.30

SEMI-MONTHLY COST CALCULATION FOR 30 DAY ELIMINATION PERIOD & 22 WEEK BENEFIT PERIOD

Example: Employee has a \$30,000 annual salary and wants to purchase short term disability

1. Weekly Earnings	\$576.92
2. Multiply by 60%	\$346.15
3. Determine Coverage (Round down to lower \$100)	\$300.00
4. Multiply by the premium factor	0.050
5. Your estimate monthly premium	\$15.00
6. Divide by 2 to get Semi-Monthly Deduction	\$7.50

Long Term Disability

As an employee of Rocky River City Schools, you are eligible to enroll in Long Term Disability (LTD) coverage. LTD coverage supplements your lost wages should you be unable to work due to an illness or injury. LTD coverage begins after missing the specified elimination period below due to a medically certified reason. Benefits are payable up to the specified benefit duration period below.

Elimination Period for sickness, accident or pregnancy: 180 days

Maximum Benefit Period: Age 65 or Social Security Normal Retirement Age

Monthly Benefit: 40% of your monthly earnings to a maximum benefit of \$5,000

Pre-Existing Condition: Anything you received medical treatment, advice or consultation, care or services including diagnostic measures, or had drugs or medicine prescribed or taken in the 3 months prior to your insurance effective date will not be covered for the first 12 months of the policy.

SEMI-MONTHLY COST CALCULATION

Example: A 35 year old employee has a \$32,000 annual salary and wants to purchase long term disability

1. Monthly Earnings	\$2,666.66
2. Multiply by 40%	\$1,066.66
3. Determine Coverage (Round down to lower \$100)	\$1,000.00
4. Multiply by the premium factor from table at right	.00520
5. Your estimate monthly premium	\$5.20
6. Divide by 2 to get your Semi-Monthly Deduction	\$2.60

Attained Age	Premium Factor
0 - 29	.00210
30 - 34	.00310
35 - 39	.00520
40 - 44	.00790
45 - 49	.01110
50 - 54	.01430
55 - 59	.01830
60 - 64	.01530
65 - 69	.01200
70 - 99	.01040

Good oral care enhances overall physical health, appearance and mental well-being. Problems with the teeth and gums are common and easily treated health problems. Keep your teeth healthy and your smile bright with the Rocky River City Schools dental benefit plan.

Coverage Type	Low Plan		High Plan	
	In-Network % of PDP Fee	Out-of-Network % of PDP Fee	In-Network % of PDP Fee	Out-of-Network % of R&C Fee
Deductible (Individual/Family) Applies to Type B & C Services Only	\$25 / \$50	\$25 / \$50	\$25 / \$50	\$25 / \$50
Annual Maximum Benefits (per individual)	\$1,750	\$1,750	\$1,750	\$1,750
Type A - Preventive (Cleanings, Oral Exams, Topical Fluoride Applications, Full Mouth X-Rays, Bitewing X-Rays, Space Maintainers, Sealants)	100%	100%	100%	100%
Type B - Basic Restorative (Endodontics - Root Canal, General Anesthesia, Simple Extractions, Surgical Extractions, Other Oral Surgery, Periodontal Surgery, Periodontal Scaling & Root Planing, Periodontal Maintenance, Amalgam & Composite Fillings, Consultations, Emergency Palliative Treatment)	80%	80%	80%	80%
Type C - Major Restorative (Repairs, Implants, Bridges, Dentures, Crowns/Inlays/Onlays, Prefabricated Stainless Steel & Resin Crowns)	70%	70%	70%	70%
Orthodontia Lifetime Maximum (per individual) Child Only up to Age 19	\$1,500	\$1,500	\$1,500	\$1,500
Insured Responsibility	Deductible; and any other part of the Maximum Allowed Charge for which MetLife does not pay	Deductible; and any other part of the Maximum Allowed Charge for which MetLife does not pay; and any amount in excess of the MAC	Deductible; and any other part of the Maximum Allowed Charge for which MetLife does not pay	Deductible; and any other part of the Reasonable & Customary Charge for which MetLife does not pay; and any amount in excess of the R&C Charge

Go to www.metlife.com/dental to locate a network PPO provider. Please note that your out-of-pocket costs may be more if you choose to go to an out-of-network provider.

**Dependents ages up to age 26. Coverage terminates on the date the child turns 26.*

Regular eye examinations cannot only determine your need for corrective eyewear, but also may detect general health problems in their earliest stages. Protection for your eyes should be a major concern to everyone.

Description	In-Network	Out-of-Network
Comprehensive Eye Exam <i>Once every 12 months</i>	\$10 co-pay	Up to \$40 reimbursement
Eyeglass Lenses	<i>Once Every 12 Months</i>	<i>Once Every 12 Months</i>
Single Vision, Lined Bifocal and Trifocal	\$10 co-pay	Up to \$40 - \$80 reimbursement
Lenticular	\$10 co-pay	Up to \$80 reimbursement
Standard Progressive	\$80 co-pay	Up to \$60 reimbursement
Premium Progressive	\$120 - \$260 co-pay	N/A
Eyeglass Frames	<i>Once Every 24 Months</i>	<i>Once Every 24 Months</i>
	\$130 allowance	Up to \$45 reimbursement
Contact Lenses (in lieu of glasses)	<i>Once Every 12 Months</i>	<i>Once Every 12 Months</i>
Necessary Contact Lenses	\$10 co-pay	Up to \$210 reimbursement
Non-Selection Disposable Contact Lenses	\$105 allowance	Up to \$105 reimbursement
Selection Disposable Contact Lenses	\$10 for Boxes 1-4	N/A
Selection Planned Replacement Monthly Wear Contact Lenses	\$10 for Boxes 1-2	N/A

Go to www.uhc.com to locate a network provider. Please note that your out-of-pocket costs will be more if you choose to go to an out-of-network provider.



Dependents ages 26 and under can be covered with no requirements. Coverage terminates for dependents at the end of the month in which they turn 26.



Identity theft in the United States is a major problem that continues to be on the rise. Professional protection and assistance have become important tools in fighting the identity theft epidemic.

Thieves today can get a hold of your personal information from trash cans, dumpsters, stolen mail, and even shoulder surfing. Once thieves have your information, it's a simple matter to open new fraudulent accounts and make purchases in your name.

When you enroll in LifeLock, you can be confident knowing that they are available 24 hours a day, 7 days a week, and committed 100% to helping protect your information as if it were their own.

LifeLock offers Proactive Protection:

- LifeLock Identity Alert System
- eRecon
- TrueAddress
- WalletLock
- Reduction in Pre-Approved Credit Card offers
- 24-Hour Customer Service
- **Offered through payroll deduction at a 15% discount off retail rates**



\$1 Million Total Service Guarantee

LifeLock's proactive approach works to help stop identity theft before it happens. As a LifeLock member, if you become a victim of identity theft because of a failure in their service, they will help fix it at their expense, up to \$1,000,000.

SEMI-MONTHLY PAYROLL DEDUCTIONS

Employee Only	\$4.25
Employee & Spouse	\$8.50
*Employee & Children	\$7.44
*Family	\$11.69

**Employee & Children and Family Tiers: You may enroll up to 8 children with 4 of those children between the ages of 18 and 26.*

Medical Mutual of Ohio	800-523-8558 www.medmutual.com
Express Scripts (Prescription Coverage)	877-842-2879 www.express-scripts.com
MetLife Dental	800-275-4638 www.metlife.com/dental
United Healthcare Vision	866-633-2446 www.myuhc.com
MetLife - Basic Life	800-438-6388 www.metlife.com
Lincoln Financial Group (Voluntary Life, STD, LTD)	800-423-2765 www.lincolnfinancial.com
Trustmark Voluntary Benefits	800-918-8877 www.trustmarksolutions.com
LifeLock	www.lifelock.com
Explain My Benefits <i>Trustmark claims help</i>	888-734-6937, Option 2 service@explainmybenefits.biz



Benefit Guide Description

Please Note: This guide provides information regarding the Rocky River City Schools benefit program. More detailed information is available from the plan documents and administrative contacts. The plans and policies stated in this information are not a contract or a promise of benefits of any kind, and therefore, should not be interpreted as such.

