



2020

Employee Benefits Guide

Welcome to your 2020 Benefits Enrollment

We are honored to present your 2020 Benefit Options! The elections you make during your enrollment will be effective through **December 31, 2020**.

Delaware 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.

Important Change for Dependent Coverage

In 2015 the Ohio House of Representatives passed H.B. 201, reducing the dependent eligibility age requirement to 26 for employer provided medical plans in Ohio. Former Ohio law required that such coverage be extended until an unmarried dependent who met certain conditions reached the age of 28. With the passage of H.B. 201, effective January 1, 2016, Delaware City Schools will only cover dependents up to the age of 26 for medical, vision or any other supplemental offerings. ***Please make adjustments as needed during your enrollment process.***

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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.

Enrollment Process

Delaware City Schools provides electronic enrollment through Explain My Benefits. Explain My Benefits provides eligible employees the ability to make group insurance benefit elections and changes online during the annual open enrollment, new hire orientation and qualifying events.

Enrollment has never been easier. Accessible 24 hours a day, information about all of your employee benefits election options, including premiums and carrier contact information, are also available to help you make informed decisions.

You can also log into the Explain My Benefits portal at anytime or download the Mobile App, to review your benefits, access carrier links, update your personal information for yourself and dependents, update your beneficiaries and process qualifying life events.

Options to Enroll

Decide which of these convenient enrollment options best fits your needs:



Self-Service

- ◆ Visit www.explainmybenefits.com/delaware, click on the red “Log into Your Benefit System” button and move through the enrollment system at your own pace.
- ◆ Please see login instructions on page 5.
- ◆ If choosing this option, be sure to click “submit” at the end of the process and make note of your confirmation number. If you do not receive a confirmation number you have not completed your enrollment and you will not be enrolled for the new plan year.
- ◆ Return to the system anytime and click your confirmation number to view your confirmation statement.



Mobile App - Log into the Delaware mobile app, select enroll from the menu on the right. Go through the enrollment and finalize by clicking “SUBMIT”. Please see login instructions on page 5.

Reminders

When using any of the above options for enrollment:

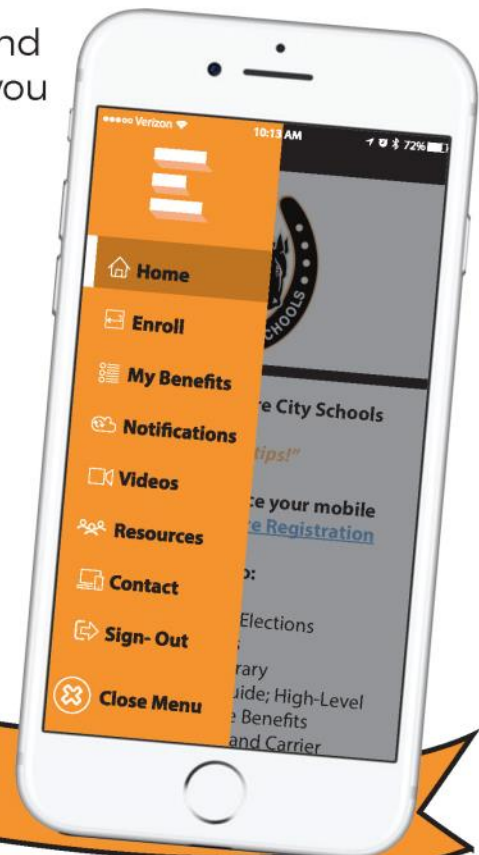
- ◆ Be sure to review the 2020 Benefit Guide and plan summaries **prior** to going through any enrollment process
- ◆ Be prepared by gathering dependent and beneficiary information (i.e. Social Security Numbers and Dates of Birth)



NEW! BENEFITS ENROLLMENT APP

Delaware City Schools has provided you a brand new app to manage your benefits that allows you to:

- ✓ **View your current benefits**
- ✓ **Enroll in new benefits from your phone**
- ✓ **Watch benefit education videos, review benefit guides and plan summaries**
- ✓ **Receive important message notifications about your benefits**



TO DOWNLOAD:

1. Visit the Apple or Android App Store
2. Search for: Explain My Benefits
3. Download the free app!
4. Enter company code: Delaware



Login Instructions



ACCESSING EMB ENROLL

Access your company's **Benefit Resource Website** and select **"Log Into Your Benefit System"**

Create a New Account

1. Enter User Name
**1st Initial of First Name AND
Up to the 1st Six Characters of your Last
Name AND
Last 4 of SSN**
**Example: Tim Johnson SSN 1234 =
tjohnso1234**
2. Enter Password
Date of Birth (YYYYMMDD) and click Login
3. Select **"Get Started"** from the middle
section of the screen
4. Confirm your information along with
dependents
5. Shop for your insurance benefits

Login

Username

Password

Login

[Forgot your password?](#)



Consider the benefits of a Health Savings Account. By contributing to these accounts, you lower your taxable income, reducing the amount you pay in taxes each year. The money in these accounts can be used to pay for eligible medical expenses. A Health Savings Account (HSA) rolls over from year to year, letting the funds accumulate all the way into retirement and your account stays with you even if you change jobs. *We strongly encourage you to set aside some money each pay period to put into your Health Savings Account. The Board will contribute \$1,250 for Single and \$2,500 for Family toward your deductible.*

HSA

What is a HSA?

A health savings account (HSA) is a tax-advantaged medical savings account available to taxpayers in the United States who are enrolled in a high-deductible health plan (HDHP). The funds contributed to the HSA account are not subject to federal income tax at the time of deposit. Unlike a flexible spending account (FSA), HSA funds roll over and accumulate year to year if they are not spent. HSAs are owned by the individual.

Can I contribute more to my HSA beyond the Board contribution?

Yes. Employees enrolled in the HSA Plan for tax year 2020 may contribute up to \$3,550 for a single individual or \$7,100 for married participants pre-tax, this amount includes the amount contributed by the Board.

Since a Health Savings Account (HSA) is subject to IRS regulations, contributions are capped by your income tax filing status. Employees who are age 55+, may contribute an additional \$1,000 to their savings account, as part of a “Catch Up” provision under the IRS rule.

	Board Contribution	Employee Contribution	HSA Balance	+55 Catch Up	Potential HSA Balance
Single	\$1,250	\$2,300	\$3,550	\$1,000	\$4,550
Family	\$2,500	\$4,600	\$7,100	\$1,000	\$8,100

If you answer YES to any of the following questions, you are NOT eligible to open or fund a Health Savings Account:

1. In 2020, will you be covered by another non-qualified medical plan such as a PPO, Medicare or Tricare?
2. In 2020, will you or a spouse participate in a *General Purpose* Flexible Spending Account?
3. In 2020, will you be enrolled in either Medicare Part A, Part B, Part C or Part D?
4. In 2020, if you are under age 26, will you be claimed as a dependent on your parents tax return, or covered under your parents health insurance plan?

If you do not qualify to open or fund an HSA based on the questions above, the Board will contribute \$1,250 for Single and \$2,500 for Family into an HRA account for you to use.



United Healthcare HDHP

	In Network	Out of Network
Deductible		
<i>Individual / Family*</i>	\$1,500 / \$3,000	\$3,000 / \$6,000
<i>Coinsurance</i>	10%	30%
Out of Pocket Maximum		
<i>Individual / Family</i>	\$3,000 / \$6,000	\$6,000 / \$12,000
Doctor's Office		
Office Visit	\$25 copay after deductible	30% after deductible
Preventive Care Services	No Charge	30% after deductible
Hospital Services		
Emergency Room	\$100 copay after deductible	\$100 copay after deductible
Urgent Care Center Services	\$50 copay after deductible	30% after deductible
Inpatient	10% after deductible	30% after deductible
Outpatient Surgery	10% after deductible	30% after deductible
Ambulance Service	10% after deductible	10% after deductible
Other Services		
Maternity Services	10% after deductible	30% after deductible
Diagnostic Lab/X-ray	10% after deductible	30% after deductible
Diagnostic (MRI, CT Scans, Nuclear Medicine)	10% after deductible	30% after deductible
Prescriptions		
Retail (31 day supply)	After Deductible - \$15 / \$25 / \$35	After Deductible - \$15 / \$25 / \$35
Direct Mail (90 day supply)	After Deductible - \$25 / \$50 / \$75	N/A

Dental

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 Delaware City Schools dental benefit plan.

Your dental plan allows you to visit any licensed dentist you like but, choose a **Delta Dental of Ohio** dentist and you 'll experience a greater benefit and a lower cost for care. Locate a participating provider at www.deltadentaloh.com.



	Delta Dental PPO		
	PPO Dentist	Premier Dentist	Non-Participating Dentist**
Calendar Year Deductible			
Individual / Family*	\$25 per person		
Annual Maximum	1,000		
Preventive Services Exams, Cleanings, X-Rays, etc.	Plan pays 100%, deductible is waived		
Basic Services Fillings, Oral Surgery, Root Canals, etc.	80% Covered, after deductible	80% Covered, after deductible	80% Covered, after deductible
Major Services Crowns, Bridges, Implants, Dentures, etc.	80% Covered, after deductible	80% Covered, after deductible	80% Covered, after deductible
Orthodontics			
Lifetime Annual Maximum	\$1,000 per person		
Eligible Dependents to age 19 Deductible does not apply to Orthodontic Services	60% Covered		

** When you receive services from a Non-participating Dentist, the percentages in this column indicate the portion of Delta Dental's Non-participating Dentist Fee that will be paid for those services. The Non-participating Dentist Fee may be less than what your dentist charges and you are responsible for the difference.

**Dependents ages up to age 19 or 23 if unmarried and a full-time student.*



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.

When you use a provider who participates in the **EyeMed Vision Care** network, you will experience a greater benefit and a lower cost for care. Locate a participating provider at www.eyemedvisioncare.com.

	In-Network	Out-of-Network
Comprehensive Eye Exam	<i>Once Every 12 Months</i>	<i>Once Every 12 Months</i>
	\$20 co-pay	\$30 reimbursement
Eyeglass Lenses	<i>Once Every 12 Months</i>	<i>Once Every 12 Months</i>
Single Vision, Lined Bifocal and Trifocal	\$0 co-pay	\$25 - \$60 reimbursement
Lenticular	\$0 co-pay	\$60 reimbursement
Standard Progressive	\$65 co-pay	\$40 reimbursement
Premium Progressive	\$85 - \$110 co-pay	\$40 reimbursement
Eyeglass Frames	<i>Once Every 12 Months</i>	<i>Once Every 12 Months</i>
	\$200 allowance 20% off amount over allowance	\$100 reimbursement
Contact Lenses (in lieu of glasses)	<i>Once Every 12 Months</i>	<i>Once Every 12 Months</i>
Conventional (Elective)	\$200 allowance; 15% off over \$200	\$160 reimbursement
Disposable	\$200 allowance; plus balance over \$200	N/A
Contact Lens Exam	Up to \$55	
Additional Pairs	40% off complete pair of eyeglasses and 15% off contact lenses once the funded benefit has been used	N/A
Laser Vision Correction (LASIK)	15% off Retail or 5% off Promotional	N/A

Semi-Monthly Payroll Deductions	Employee Only	Employee & Spouse	Employee & Children	Family
	\$5.00	\$9.51	\$10.01	\$14.71

Coverage terminates for dependents at the end of the month in which they turn 26.

Voluntary Benefits

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** 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.*



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 is available for spouse (\$25,000) and children (child term rider).
- **Employee must enroll in coverage in order to cover spouse and/or children.**
- Available through age 64.

Special Underwriting for Initial Offering
Guaranteed Issue - \$100,000 (Employee Only)



If you waived this benefit previously, you must answer a few health questions and be approved for coverage.

Life with Long Term Care example: \$100,000 Death Benefit

Long Term Care Benefit (LTC):	Before Age 70	After Age 70
Pays a monthly benefit equal to 4% of your death benefit for up to 25 months.	\$100,000	\$100,000
Benefit Restoration:		
Restores the death benefit that is reduced to pay for LTC.	\$100,000	\$33,333
Total Maximum Benefit:		
Long Term Care Benefits may double the value of your insurance	\$200,000	\$133,333

Rates

This benefit is customized by each employee so rates vary, but can start as little as a few dollars a week. **Your specific rate will be calculated for you in the electronic enrollment system.**

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. Delaware City Schools offers a variety of programs to meet your life insurance needs. Delaware 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.

Voluntary Supplemental Life

You also have the opportunity to purchase supplemental coverage for yourself, your spouse and dependent children. Please note that dependent children include unmarried adopted, natural or stepchildren age 14 days to age 26.

How much can I get?

Employee:

You may purchase in \$10,000 increments up to a maximum of \$500,000, not to exceed 5x annual salary.

Spouse:

You may purchase in \$5,000 increments up to a maximum of \$100,000, not to exceed 50% of your Voluntary Life Benefit, for your spouse.

Child(ren):

You may purchase in \$1,000 increments up to a maximum of \$10,000 for your child(ren).

Guarantee Issue (At Initial Offering Only)

Employee - \$100,000

Spouse - \$25,000

Child(ren) - \$10,000

Monthly Employee Rates for Voluntary Term Life

Age	Rate per \$1,000	Age	Rate per \$1,000
<30	\$0.054	50 - 54	\$0.215
30 - 34	\$0.059	55 - 59	\$0.322
35 - 39	\$0.070	60 - 64	\$0.455
40 - 44	\$0.096	65 - 69	\$0.767
45 - 49	\$0.142	70+	\$1.435

Monthly Spouse Rates for Voluntary Term Life

Age Band	Rate per \$1,000	Age Band	Rate per \$1,000
<30	\$0.075	50 - 54	\$0.411
30 - 34	\$0.077	55 - 59	\$0.718
35 - 39	\$0.093	60 - 64	\$1.616
40 - 44	\$0.135	65 - 69	\$2.832
45 - 49	\$0.226	70+	\$4.963

Monthly Child Rates per \$1,000

All Ages	\$0.195
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Example: A 36 year old employee wants to purchase \$50,000 of term life insurance.

.070	X	50	=	\$3.50
Rate per \$1,000		# of units/\$1,000		Monthly Premium

Your specific rate will be calculated for you in the electronic enrollment system.

Identity Theft Protection



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 Theft Alert System
- Address Change Verification
- Live Member Service Support
- Reduce Pre-Approved Credit Card Offers
- Stolen Funds Replacement - up to \$100,000
- Court Records Scanning
- Investment Account Activity Alerts
- Lost Wallet Protection
- Black Market Website Surveillance
- LifeLock Privacy Monitor
- Identity Restoration Support
- Fictitious Identity Monitoring
- Data Breach Notifications

\$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	Employee & Spouse	Employee & Children*	Family*
	\$4.25	\$8.50	\$7.44	\$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.*

Important Contacts

Vendor	Phone	Website
Medical United Healthcare	866-633-2446	www.myuhc.com
Dental Delta Dental	800-524-0149	www.deltadentaloh.com
Vision EyeMed	866-800-5457	www.eyemedvisioncare.com
Basic & Term Life Insurance MetLife	800-438-6388	www.metlife.com
Voluntary Benefits Trustmark	800-918-8877	www.trustmarksolutions.com
Identity Theft Protection LifeLock	800-543-3562	www.lifelock.com
District Insurance Brokers Arthur J. Gallagher & Company	614-761-2901 800-435-1552	www.ajg.com
Trustmark Claims Help Explain My Benefits	888-734-6937, Option 2	service@explainmybenefits.com



Benefit Guide Description

This summary of benefits is not intended to be a complete description of Delaware City Schools' insurance benefit plans. Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document, rather than by this or any other summary of the insurance benefits provided by the plan.

In the event of any conflict between a summary of the plan and the official document, the official document will prevail. Although Delaware City Schools maintains its benefit plans on an ongoing basis, Delaware City Schools reserves the right to terminate or amend each plan in its entirety or in any part at any time.

For questions regarding the information provided in this overview, please contact your human resources representative.