



OPEN ENROLLMENT 2020-2021

Wentzville School District



OUR BENEFIT PLANS

- Effective October 1 (unless otherwise noted) and continue through September 30
- As you prepare to enroll from August 10-30
 - Consider your benefit coverage needs for the upcoming year
 - Consider other available coverage
 - Gather information you'll need
 - If you are covering dependents, you will need their dates of birth and social security numbers

CHANGES TO PLANS

- Effective October 1, there is no longer a free 30-day period for newborns under the mother's plan
- See rate sheets for new plan rates
 - Medical: 4.6% increase
 - KIDZ Plan: 10% increase
 - Dental: Slight decrease
 - Vision: No change

BENEFIT ELIGIBILITY

- Benefits eligible if you work at least 25 hours per week
- Eligible dependents include your legal spouse and children up to age 26
- You may only make or change your benefits as a new hire or during the open enrollment period unless you experience a qualified life event such as:
 - Marriage, divorce or legal separation
 - Birth or adoption of a child
 - Loss or gain of other coverage
 - Eligibility for Medicare or Medicaid
- Life event changes need to be made within 30 days of the qualified event or you will have to wait until open enrollment

MEDICAL PLAN OVERVIEW

1: YOUR DEDUCTIBLE

After the Health Reimbursement Arrangement (HRA) amount has been met, you pay the corridor amount until you reach the deductible, unless there is a copay for the service.

For Health Savings Account (HSA) plans, you pay the full deductible. You can use your HSA to pay for these expenses.

2: YOUR COVERAGE

Under the **Premium HRA plans**, once your deductible is met, you are covered in full for the remainder of the plan year (excluding copays), unless you go to an out-of-network provider or facility.

Under the **HSA plan**, once the deductible is met it is 100% except copays for Rx up to an additional \$1,000 until you reach the out-of-pocket maximum. Once you reach your out-of-pocket maximum, you will be covered in full for the remainder of the plan year.

Under the **KIDZ plan**, once your deductible is met, you will cost-share with the plan (coinsurance and copays) until you reach the out-of-pocket maximum. Once you reach your out-of-pocket maximum, you will be covered in full for the remainder of the plan year with the exception of providers and facilities that are out of network. Copays will apply to the out-of-pocket maximum but not to the deductible.

UNDERSTANDING THE HRA

The district funds it for you

- When you enroll in a medical plan with an HRA, the district funds the HRA up to the corridor amount.
- Then you are responsible for the corridor amount until you satisfy the deductible.



It helps you pay for medical expenses

- Once you reach deductible, the plan pays 100% for in-network so there is no cost share.



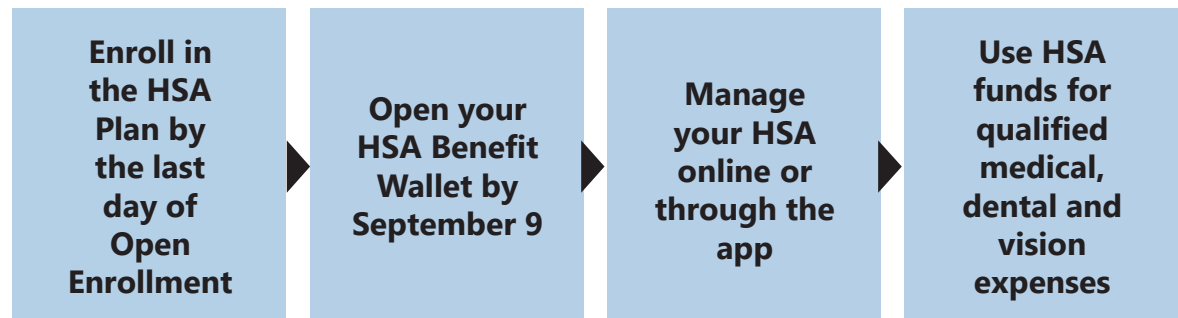
Unused funds roll over

- If you have HRA credits left over at the end of the year, and you're still enrolled in the HRA medical plan the following year, your funds roll over up to \$1,000 in the \$1000 and \$2000 Corridor plans.

UNDERSTANDING THE HSA

- Contributions to the HSA are tax-free for you — whether they come from you or the district.
- The district contributes \$2,436 per year (contributions are pro-rated per pay period).
- All of the money in your HSA is yours even if you leave your job, change plans or retire.
- Unused money in your HSA will roll over, earn interest and grow tax-free over time.

Open your HSA with Benefit Wallet



YOUR MEDICAL BENEFITS

PLAN PROVISIONS	Premium Plan \$0 Corridor	Premium Plan \$1,000 Corridor	Premium Plan \$2,000 Corridor	HSA Plan \$3,000 Deductible	KIDZ Plan
	In-Network	In-Network	In-Network	In-Network	In-Network
Deductible – Individual	\$3,000	\$3,000	\$3,000	\$3,000	\$750
Deductible – Family	\$6,000	\$6,000	\$6,000	\$6,000	\$2,250
Out-of-Pocket Maximum – Individual	Copays	\$1,000 + copays	\$2,000 + copays	\$4,000 Deductible + Rx Copays	\$3,500
Out-of-Pocket Maximum – Family	Copays	\$2,000 + copays	\$4,000 + copays	\$8,000 Deductible + Rx Copays	\$10,500
HRA/HSA District Contribution	\$3,000 individual, \$6,000 family	\$2,000 individual, \$4,000 family	\$1,000 individual, \$2,000 family	\$2,436	N/A
Employee Corridor	N/A	\$1,000 individual, \$2,000 family	\$2,000 individual, \$4,000 family	N/A	N/A

YOUR MEDICAL BENEFITS

PLAN PROVISIONS	Premium Plan \$0 Corridor	Premium Plan \$1,000 Corridor	Premium Plan \$2,000 Corridor	HSA Plan \$3,000 Deductible	KIDZ Plan
	In-Network	In-Network	In-Network	In-Network	In-Network
Preventive Care	No Charge	No Charge	No Charge	No Charge	No Charge
Primary Care Physician Office Visit	\$25 Copay	\$25 Copay	\$25 Copay	0% After Deductible	20% Coinsurance After Deductible
Specialist Care Physician Office Visit	\$40 Copay	\$40 Copay	\$40 Copay	0% After Deductible	20% Coinsurance After Deductible
Urgent Care	\$50 Copay	\$50 Copay	\$50 Copay	0% After Deductible	\$75 Copay
Emergency Room*	\$250 Copay*	\$250 Copay*	\$250 Copay*	0% After Deductible	\$150 Copay
Diagnostic Test & Imaging	0% Coinsurance	0% Coinsurance After Deductible	0% Coinsurance After Deductible	0% After Deductible	20% Coinsurance After Deductible

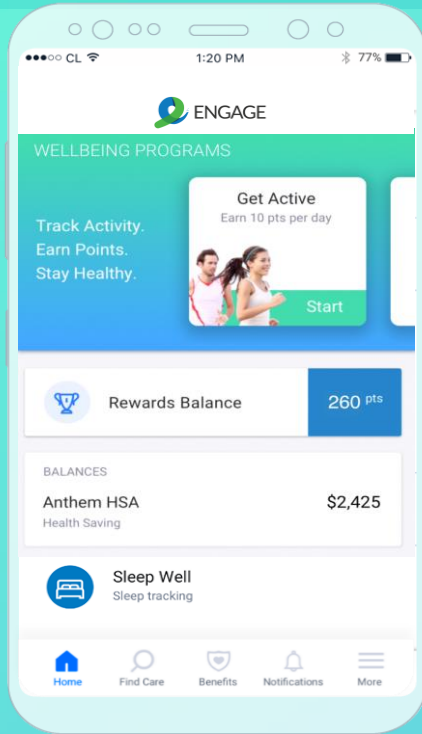
YOUR PRESCRIPTION DRUG BENEFITS

PLAN PROVISIONS	Premium Plan \$0 Corridor	Premium Plan \$1,000 Corridor	Premium Plan \$2,000 Corridor	HSA Plan \$3,000 Deductible	KIDZ Plan
	In-Network	In-Network	In-Network	In-Network	In-Network
Retail					
Tier 1 - Generic Drugs	\$5	\$5	\$5	\$10*	\$10
Tier 2 - Brand Preferred Drugs	\$30	\$30	\$30	\$30*	\$25
Tier 3 - Brand Non-Preferred Drugs	\$60	\$60	\$60	\$50*	\$45
Mail Order					
Tier 1 - Generic Drugs	\$10	\$10	\$10	N/A	\$25
Tier 2 - Brand Preferred Drugs	\$60	\$60	\$60	N/A	\$62
Tier 3 - Brand Non-Preferred Drugs	\$120	\$120	\$120	N/A	\$112

SAVINGS AND REIMBURSEMENT ACCOUNTS

- **Health Reimbursement Arrangement (HRA)** – This is a reimbursement arrangement only; you cannot contribute to this account. The HRA helps pay deductible expenses.
- **Health Savings Account (HSA)** – Available to those enrolled in the HSA Plan (\$3,000). IRS qualifications apply to be eligible for a HSA. You cannot have a Health Care FSA during the same tax year.
- **Health Care Flexible Spending Account (FSA)** – If you are not enrolled in an HSA plan, you can use this account for medical, pharmacy, dental and vision expenses.
- **Dependent Care FSA** – Use for eligible childcare expenses for dependents under age 13 or elder care.

Anthem Engage App



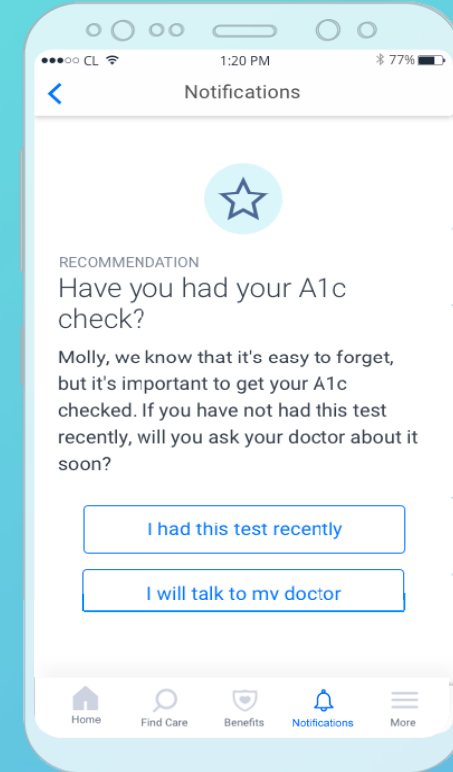
A single health and wellness hub driven by meaningful data. In real time.

Show what's most important to members, such as:

- Wellbeing programs
- Health recommendations
- Personal health information
- Care-based alerts
- Healthy living tips

Sydney connects you to everything you need to know about your health plan — all in one place. You can:

- Find care and check costs
- View claims & benefits
- View and use digital ID cards
- Sync with your fitness tracker



Coming
10/1/2020:
Sydney
Health App

LiveHealth Online

Access to care from anywhere



The Features of LiveHealth Online Medical

- Live, on-demand video doctor visits 24x7/365
- Accessible by smart phone, tablet or computer
- Cost is less than or equal to your office visit
- Available in all states with an average wait time of 10 minutes
- Choice of board certified, Anthem network doctors
- Secure and private, HIPAA compliant video visit
- E-prescribing to your pharmacy of choice*
- Available to Anthem members and non-members

Commonly Treated Medical Conditions:

- Asthma
- Allergies/allergic rhinitis
- Cough/Cold
- Depression
- Diarrhea
- Ear pain
- Fever/Influenza/flu
- Headache/migraine
- Hypertension
- Nausea/Vomiting
- Pinkeye and other eye infections
- Rashes/skin disturbances
- Sinus infection
- Sore throat/pharyngitis
- Sprains and strains
- Urinary tract infection



Helping Employees Be Healthy

Programs for every stage of life and health



24/7 NurseLine

Round-the-clock answers to health questions



LiveHealth Online

24/7 doctor care from computer or mobile device



Future Moms

Education and support throughout pregnancy



ConditionCare

Support for employees with a chronic condition



Engage

Custom health engagement app connecting the right benefits at the right time through access to information and timely and personal outreach



Cost & Care Finder

Find doctors and compare costs, quality metrics and more for a true picture of what an employee will pay

SAVINGS AND REIMBURSEMENT ACCOUNTS

COMPARISON OF ACCOUNTS	HSA	HRA	FSA
Does the district contribute? <i>Amount for full-year</i>	✓ \$2,436 per year	✓	X
Can I contribute my own savings?	✓	X	✓
Is there an IRS maximum annual contribution?	✓ Employee: \$3,600 Family: \$7,200 Those 55 and older can contribute an additional \$1,000 annually.	X	✓ Health Care: \$2,750 Dependent Care: \$5,000
Can I also have a FSA?	! Dependent Care FSA only	✓	N/A
Plan year for contributions	Effective October 1 to September 30	Effective October 1 to September 30	Effective January 1 to December 31

YOUR DENTAL BENEFITS

You have one dental plan through Delta Dental of Missouri

PLAN PROVISIONS	PPO NETWORK	PREMIER NETWORK	OUT-OF-NETWORK
Dental Deductible - Individual		\$25	
Dental Deductible - Family		\$75	
Annual Benefit Maximum		\$2,000	
Orthodontic Lifetime Maximum		\$2,000	
Services	Coverage Amount		
Diagnostic and Preventive	100%	100%	100%
Basic Services	80%	80%	80%
Major Services	60%	60%	60%
Orthodontia Services	50%	50%	50%
Orthodontia	Dependents up to age 19 only		

Late Enrollment Clause: A participant that does not enroll when first eligible will only receive benefits for preventive services for the first 12 months of coverage. Dependents enrolled prior to their third birthday are not subject to the late entrant penalty.

YOUR VISION BENEFITS

You have access to a vision plan through VBA

PLAN PROVISIONS	IN-NETWORK
Exam	\$0 copay in Network
Frequency	Exam - Every 12 months Lenses - Every 12 months Frames - Every 24 months
Frames	Up to \$150 allowance (every other year)
Materials	\$0 copay in Network
Contacts (in lieu of all eyeglasses benefits listed above)	Up to \$141.00
Medically necessary contact lenses	100% In-Network

LIFE INSURANCE & DISABILITY

- The district provides \$50,000 life and AD&D insurance coverage at no cost (coverage decreases at age 65).
- You may choose to purchase an additional 1x-5x your salary, rounded to the next higher \$1,000, in additional life and AD&D coverage for yourself. Dependent coverage is also available for your spouse and children.
- You have the option to purchase short- and long-term disability.
 - Choose short-term disability coverage for 50%, 60% or 66.67% of your weekly pay, up to a maximum of \$1,000.
 - Long-term disability is 60% of your pay, up to a maximum of \$5,000 per month.
 - Please see the Empyrean enrollment site for full plan description.
- During open enrollment an Evidence of Insurability (EOI) form must be completed to add or increase life and disability coverage.

ADDITIONAL RESOURCES

Medical Plan Resources

- 24/7 NurseLine
- LiveHealth Online – 24/7 online visits with a doctor
- ConditionCare and ComplexCare – Support for medical conditions
- Future Moms – Support for expecting mothers
- myStrength – Support for your emotional wellbeing

Additional Resources

- Employee Assistance Program (EAP)
- Travel Assistance and Identity Theft Protection Services
- EstateGuidance® Will Services
- Funeral Concierge Services
- TrustWellness Program

STEPS TO ENROLL

1 Go to

<https://compass.empyreanbenefits.com/CSDTRUST>

2 Register.

- You only register once. Return and log in with your user ID and password.
- Enter your first and last name (as filed with the district), date of birth and Social Security Number.
- Then add a new User ID (personal email address, for example) and follow the rest of the instructions to complete your account set-up.

3 Elect the benefits you want.

- Be prepared to provide eligible dependents' and beneficiaries' full names, dates of birth and Social Security Numbers.

4 Save or submit your elections.

- To know if you completed enrollment, look for a green check mark and message that says your benefits are confirmed and ready to take effect when Open Enrollment closes.
- Print the confirmation for your records.

OPEN ENROLLMENT NEXT STEPS

Enroll in your benefits August 10-30 at

<https://compass.empyreanbenefits.com/CSDTRUST>

If you have any questions while enrolling, contact the Benefits Service Center at **833-269-2142**.

Additional Benefits Questions

Contact the benefits team at **benefits@wsdr4.org**.

About this presentation: This benefit summary provides selected highlights of the CSD Insurance Trust employee benefits program. It is not a legal document and shall not be construed as a guarantee of benefits nor of continued employment at the company. All benefit plans are governed by master policies, contracts and plan documents. Any discrepancies between any information provided through this summary and the actual terms of such policies, contracts and plan documents shall be governed by the terms of such policies, contracts and plan documents. CSD Insurance Trust reserves the right to amend, suspend or terminate any benefit plan, in whole or in part, at any time. The authority to make such changes rests with the Plan Administrator.