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Benefit Contact Information

Refer to this list when you need to contact one of your benefit providers. For general information please contact a Benefits Department Representative or log on to www.myaisdbenefits.net.

Program	Vendor	Phone Number	Website/Email
ARLINGTON ISD BENEFITS OFFICE STAFF			
Linda Scott	FBS Client Services Representative	(682) 867-7364	hrbenefits@aisd.net
Patrice Whiteside	HR Specialist-Leaves and Retirements	(682) 867-7362	hrbenefits@aisd.net
Patrice Simmons	HR Specialist-Benefits and Wellness	(682) 867-7480	hrbenefits@aisd.net
Office Fax (682) 867-4651			
Website www.myaisdbenefits.net			
INSURANCE PLANS PHONE NUMBERS 2015-2016			
TRS ActiveCare Medical	Aetna	(800) 222-9205	www.trsactivecare.aetna.com
TRS ActiveCare Pharmacy	Caremark	(800) 222-9205	www2.caremark.com/trsactivecare/
Scott & White HMO Medical and Pharmacy	Scott & White	(844) 216-4150	www.trs.swhp.org
Wellness Program	Vivarae	(888) 848-3723	www.AISDWellnessProgram.com
TRS Teladoc	Aetna	(855) 835-2362	www.teladoc.com/aetna
MDLive Tele-health	MDLive	(888) 365-1663	www.consultmdlive.com
Medlink Medical Gap Plan	American Public Life	(800) 256-8606	www.ampublic.com
Healthcare Savings Account (HSA)	Hsabank	(800) 357-6246	www.hsabank.com
Dental	CIGNA	(800) 244-6224	www.cigna.com
Vision	VSP	(800) 877-7195	www.vsp.com
Disability	Aetna	(888) 266-2917	www.wkabsystem.com
Cancer	American Public Life	(800) 256-8606	www.ampublic.com
Life and AD&D	Symetra	(800) 796-3872	www.symetra.com
Individual Life	Texas Life	(800) 283-9233	www.texaslife.com
Long Term Care	Unum	(800) 277-4165	www.unum.com
Pet Insurance	Metlife	(800) 438-6388	www.petinsurance.com/myaisdbenefits
MetLaw Hyatt Legal Plan	MetLaw	(800) 821-6400	www.legalplans.com
Identity Theft Protection	ID Watchdog	(800) 970-5182	www.idwatchdog.com
Medical & Dependent Care Reimbursement Accounts	National Benefit Services	(800) 274-0503	www.nbsbenefits.com
Employee Assistance	Aetna	(855) 283-1915	www.mylifevalues.com
Retirement	Teacher Retirement Systems	(800) 223-8778	www.trs.state.tx.us
403(b)	National Benefits Services	(800) 274-0503	www.nbsbenefits.com
457(b)	Russ Ross Financial	(817) 795-7877	www.russ-ross.com
Benefits Third Party Administrator	Financial Benefit Services	(800) 583-6908	www.fbsbenefits.com

Annual Benefit Enrollment

9/01/2016 - 8/31/2017

www.myaisdbenefits.net

AISD Enrollment is from 07/18/2016 through 08/21/2016



Benefit Updates - What's New or Changing:

- ⇒ **AISD is requiring that this year's enrollment will be a Full Active Enrollment. This means all employees must either enroll in medical coverage or decline coverage.**
- ⇒ **The following changes have been made to the TRS Medical Plans.**
 - ⇒ 2016-2017 Medical Rates and Plan Changes Effective 9/1/16 – There are some changes to the TRS Active Care Medical Plans and Rates for the next plan year.
 - ⇒ ALEX Virtual Benefits Advisor—ALEX is a new online, interactive tool to help you choose the medical plan that is best for you and your family. Friendly, funny, engaging and easy to use, ALEX explains how the plan works in simple language. For more information please see the benefits website.
- ⇒ **Wellness Program**
 - ⇒ The AISD Wellness Program will still be available to all eligible employees. Any employee enrolled in a TRS ActiveCare medical plan, who opts to participate in the Wellness Program, will be eligible for a \$20 reduction in medical premiums each month. Participants have until August 31, 2017 to get 200 points for the 2016-2017 plan year. Additional information is enclosed.
- ⇒ **Dental Insurance**
 - ⇒ The Calendar Year Maximum for the Cigna High PPO plan is increasing from \$1,000 to \$1,500.
 - ⇒ Rates for all dental plans are increasing slightly.
- ⇒ **Life, AD&D Insurance**
 - ⇒ The vendor for these plans is changing from Aetna to Symetra effective 9/1/16. All of your current elections will remain the same if you do not make any changes.
- ⇒ **Supplemental Benefit Plans**
 - ⇒ AISD has added the following supplemental plans: Voluntary HSA, Voluntary Tele-Health, Pet Insurance, Discount Program, and a Legal Plan.

AISD Employee Benefits HUB: www.myaisdbenefits.net

Benefit Information access / Online Enrollment Access / Contact Information

Important Reminders

The Arlington ISD open enrollment will be from **July 18, 2016-August 21, 2016.**

During your annual enrollment period, you have the opportunity to review, change or continue benefit elections each year. **Open Enrollment will be conducted online at www.myaisdbenefits.net.**

- ◇ Benefit elections will become effective 9/1/2016 (elections requiring evidence of insurability, such as life insurance, may have a later effective date, if approved). After annual enrollment closes, benefit changes can only be made if you experience a qualifying event (and changes must be made within 30 days of event).
- ◇ If you are declining the TRS ActiveCare Medical Plans for yourself or any of your dependents for the first time, you are required to complete the "Declination Process." This can be done online at www.myaisdbenefits.net. If you previously completed the declination process, you are **not** required to complete it again.
- ◇ During the enrollment process, you will also be required to complete the Medical offerings page required by the Affordable Care Act. You will complete this page online.
- ◇ Changes, additions or drops may be made only during the annual enrollment period without a qualifying event.
- ◇ Employees must review their personal information and verify that dependents they wish to provide coverage for are included in the dependent profile.
- ◇ Additionally, you must notify your employer of any discrepancy in personal and/or benefit information.



New Hire Enrollment

- ◇ If you are hired anytime during the plan year, your benefits effective date is the first day of the month following your hire date.
- ◇ **You will need to enroll within 31 days of your hire** date or you will not be eligible for coverage until the next open enrollment period unless you have a qualifying event that affects your eligibility.

Employee Eligibility Requirements

- ◇ To be eligible for benefits you must be an active, contributing Teacher Retirement System (TRS) member.
- ◇ For Medical, Dental, Vision and Flexible Spending Accounts (FSA), you must be regularly scheduled to work 10 or more hours each work week.
- ◇ For Basic Life, Disability, Cancer, Voluntary Life, Voluntary AD&D, Texas Life, Identity Theft Protection, HSA, Pet Insurance, Legal Services and Telehealth you must be regularly scheduled to work 20 or more hours each work week.

Please see the Enrollment Section of this guide for more details about the enrollment process

Dependent Eligibility Requirements

Dependent Eligibility: You can cover:

- Your Spouse
- A child under the age of 26
- Any other child or grandchild whose primary residence is the household of the employee
- An unmarried child regardless of age, may be eligible provided that the child is either mentally or physically incapacitated

Pooling or Splitting Premiums

- Married couples both working for AISD may "pool" funds to pay for medical premiums.
- Married couples working for different TRS ActiveCare participating entities may "split" the cost of medical premiums. (This requires an *Application to Split Premium* form to be completed by both employees and employers).
- Contact the Benefits Department for more details about pooling or splitting premiums

Q&A



Who do I contact with Questions?

For supplemental benefit questions, you can contact your Benefits department.

Where can I find forms?

For benefit summaries and claim forms, go to your school district's benefit website: www.myaisdbenefits.net. Click on the benefit plan you need information on (i.e., Dental) and you can find the forms you need under the Benefits and Forms section.

How can I find a Network Provider?

For benefit summaries and claim forms, go to your school district's benefit website: www.myaisdbenefits.net. Click on the benefit plan you need information on (i.e., Dental) and you can find provider search links under the Quick Links section.

When will I receive ID cards?

If the insurance carrier provides ID cards, you can expect to receive those 3-4 weeks after your effective date. For most dental and vision plans, you can login to the carrier website and print a temporary ID card or simply give your provider the insurance company's phone number and they can call and verify your coverage if you do not have an ID card at that time. If you do not receive your ID card, you can call the carrier's customer service number, or go directly to the carrier's website to request another card.

Changing Your Benefits

Arlington ISD participates in the Section 125 Benefit Election Plan which allows employees to pay eligible benefits on a pre-tax basis. Because of this there are special rules and requirements for the plan.

Making Changes to Benefits

The Arlington ISD Benefit Plan Year is September 1st through August 31st. An annual open enrollment is conducted each year. You can change your benefit elections during the open enrollment period. Once you have made your selection, you may not change benefit elections until the next open enrollment unless you have a qualifying change in employment or family status.

Requests for a change in coverage must be completed within 31 days. The request will be made effective the first day of the month following the qualified event date. If you do not make changes within the required 31 day period, you must wait until the next open enrollment period.

The benefit change must result in the gain or loss of coverage by you, your spouse, or any of your dependent children, and the new election must reflect that gain or loss.

You must contact the Benefits Department for assistance with any qualifying event.

Changes In Status (CIS):	Qualifying Events
Marital Status	A change in marital status includes marriage, death of a spouse, or divorce.
Change in Number of Dependents	A change in number of dependents includes the following: birth, adoption and placement for adoption.
Change in Status of Employment Affecting Coverage Eligibility	Change in employment status of a spouse or dependent, that results in a loss or gain of employer provided coverage.
Gain/Loss of Coverage	You, your spouse or child involuntarily loses other health insurance coverage.
Gain/Loss of Dependents' Eligibility Status	An event that causes a dependent to satisfy or cease to satisfy coverage requirements under an employer's plan may include change in age, student, marital, employment or tax dependent status.
Death of Spouse or Dependent	The death of a spouse or covered dependent.
Eligibility for Government Programs	Gain or loss of Medicare/Medicaid coverage.

You cannot elect to drop medical coverage retroactively; a future cancellation date is required. The drop date will be the first of the month following the date of the request.

Voluntary terminations of other coverage, such as dropping coverage due to premium or benefit changes, are not considered qualified status change events.

TRS ActiveCare 1-HD and 2

A list of Aetna Network Physicians can be found at www.tractivecareetna.com.

Benefits	ActiveCare 1-HD	ActiveCare 2
Deductible (per plan year)	\$2,500 employee only \$5,000 employee and spouse; employee and child(ren); employee and family	\$1,000 individual \$3,000 family
Maximum Out of Pocket (per plan year; does include medical deductibles/any medical copays/coinsurance, plus pharmacy copayments, coinsurance and deductibles)	\$6,550 employee only \$13,100 employee and spouse; employee and child(ren) employee and family	\$6,850 individual \$13,700 family
Coinsurance (after deductible)	80% - Plan pays 20% - You pay	80% - Plan pays 20% - You pay
Preventive Care	Plan pays 100%**	Plan pays 100%**
Doctor Office Visits	20% after deductible	\$30 copay for primary \$50 copay for specialist
Teladoc Physician Services	\$40 consultation fee applies to deductible and out-of-pocket expenses	Plan pays 100%
Services Provided Outside the Doctor's Office (CT scan, MRI, Nuclear medicine)	20% after deductible	\$100 copay plus 20% after deductible
Quest Diagnostic Labs	20% after deductible	Plan pays 100%
Maternity Care	20% after deductible	\$30 copay for primary \$50 copay for specialist (initial visit only; delivery, 20% after deductible)
Inpatient Hospital (preauthorization required)	20% after deductible	\$150 copay per day plus 20% after deductible (\$750 maximum copay per admission; \$2,250 maximum copay per plan year)
Outpatient Surgery	20% after deductible	\$150 copay per visit plus 20% after deductible
Emergency Room	20% after deductible	\$150 copay plus 20% after deductible (copay waived if admitted)

**Required by the Patient Protection and Affordable Care Act (PPACA). A list of covered services can be found at <http://www.healthcare.gov/law/about/provisions/services/lists.html>

TRS ActiveCare Select Plan

Important Note regarding ActiveCare Select:

When selecting providers in the ActiveCare Select plan, you must choose a network based on where you live (see chart at the bottom of this page). **Most AISD Employees will be in the Baylor Scott & White Quality Alliance Network.**

No out of network coverage on this plan (except in the event of an emergency).

Benefits	ActiveCare Select
Deductible (per plan year)	\$1,200 individual \$3,600 family
Maximum Out of Pocket (per plan year; does include medical deductibles/any medical copays/coinsurance, plus pharmacy copayments, coinsurance and deductibles)	\$6,850 individual \$13,700 family
Coinsurance (after deductible)	80% - Plan pays 20% - You pay
Preventive Care	Plan pays 100%**
Doctor Office Visits	\$30 copay for primary \$60 copay for specialist
Teladoc Physician Services	Plan pays 100%
Services Provided Outside the Doctor's Office (CT scan, MRI, Nuclear medicine)	\$100 copay plus 20% after deductible
Quest Diagnostic Labs	Plan pays 100%
Maternity Care	\$30 copay for primary \$60 copay for specialist (initial visit only; delivery, 20% after deductible)
Inpatient Hospital (preauthorization required)	\$150 copay per day plus 20% after deductible (\$750 maximum copay per admission)
Outpatient Surgery	\$150 copay per visit plus 20% after deductible
Emergency Room	\$150 copay plus 20% after deductible (copay waived if admitted)
**Required by the Patient Protection and Affordable Care Act (PPACA). A list of covered services can be found at http://www.healthcare.gov/law/about/provisions/services/lists.html	

If you live in the counties on the list you will automatically be enrolled in the **ActiveCare Select/Aetna Whole Health Plan** for your area.

- You must stay in your specific **ActiveCare Select/Aetna Whole Health** network to receive benefits. **This plan does not have out-of-network benefits (unless it is an emergency situation)!** There are specific providers assigned to the plan for your county.

If you live in one of these counties...	Please enter your search criteria in the gray box on the provider directory page and look under the "ActiveCare Select/Aetna Whole Health Plan Options" section for the Select plan that applies to your county.
<ul style="list-style-type: none"> • Collin • Dallas • Denton • Ellis • Parker • Rockwall • Tarrant 	Baylor Scott & White Quality Alliance

TRS ActiveCare Pharmacy Plans

Benefits	ActiveCare 1-HD	ActiveCare 2	ActiveCare Select
Deductible (per plan year)	Subject to plan year deductible	\$0 for generic drugs \$200 per person for brand-name drugs	\$0 for generic drugs \$200 per person for brand-name drugs
Retail Short-Term (up to a 31-day supply) • Generic copay • Brand copay (preferred list) • Brand copay (non-preferred list)	20% after deductible	\$20 \$40*** \$65***	\$20 \$40*** 50% coinsurance
Retail Maintenance (after second fill; up to a 31-day supply) • Generic copay • Brand copay (preferred list) • Brand copay (non-preferred list)	20% after deductible	\$35 \$60*** \$90***	\$35 \$60*** 50% coinsurance
Mail order and Retail-Plus (up to a 90 day supply) • Generic copay • Brand copay (preferred list) • Brand copay (non-preferred list)	20% after deductible	\$45 \$105*** \$180***	\$45 \$105*** 50% coinsurance
Specialty Drugs	20% after deductible	\$200 per fill (up to 31 day supply) \$450 per fill (32- to 90 day supply)	20% Coinsurance per fill

***If the patient obtains a brand-name drug when a generic equivalent is available, the patient will be responsible for the generic copayment plus the cost difference between the brand-name drug and the generic drug

TRS Scott & White HMO Medical Plan

A list of Scott & White HMO Network Physicians can be found at www.trs.swhp.org

Benefits	Scott & White HMO Health Plan
Deductible (per plan year)	\$1,000 employee only \$3,000 employee and spouse; employee and child(ren); employee and family
Maximum Out of Pocket (per plan year; does include medical deductibles/any medical copays/coinsurance, plus pharmacy copayments, coinsurance and deductibles)	\$5,000 employee only \$10,000 employee and spouse; employee and child(ren), employee and family
Coinsurance (after deductible)	80% - Plan pays 20% - You pay
Preventive Care	Plan pays 100%**
Doctor Office Visits	\$20 copay for primary: for first visit for illness waived, does not apply to wellness or preventive visits \$50 copay for specialist
Services Provided Outside the Doctor's Office (CT scan, MRI, Nuclear medicine)	20% after deductible
Maternity Care	\$150 per day and 20% after deductible
Inpatient Hospital	\$150 per day and 20% after deductible
Outpatient Surgery	\$150 per day and 20% after deductible
Emergency Room	\$150 per day and 20% after deductible
Urgent Care Facility	\$55 co-pay
Durable Medical Equipment Coinsurance	20% after deductible
Manipulative Therapy	New Benefit: 20% without office visit \$40 plus 20% with office visit (5 visits max per month 35 max visits per year)
**Required by the Patient Protection and Affordable Care Act (PPACA). A list of covered services can be found at http://www.healthcare.gov/law/about/provisions/services/lists.html	

TRS Scott & White Pharmacy Plan

Benefits	Scott & White HMO Health Plan
Deductible (per plan year, does not apply to generic drugs)	\$100
Retail Short-Term (up to a 34-day supply) <ul style="list-style-type: none"> •Preferred Generic ** •Preferred Brand •Non-preferred •Non-formulary 	\$3 co-pay 30% after deductible 50% after deductible Greater of \$50 or 50% after deductible
Maintenance Quantity SWHP Pharmacies Only (Up to a 90-day supply) <ul style="list-style-type: none"> •Preferred Generic ** •Preferred Brand •Non-preferred •Non-formulary 	\$6 co-pay 30% after deductible 50% after deductible Not available
Mail Order	Please call 1-800-707-3477
Specialty Drugs	20% after deductible
**If a brand name drug is dispensed when a generic equivalent is available, 50% co-pay applies	

Ask a SWHP Pharmacy representative how to save money on your prescriptions
 800-321-7947

Meet Alex

Need help to decide? This year, you will have ALEX.

ALEX is an online tool you can use to learn more about TRS-ActiveCare plan options available to you and decide which works best for you and your family. ALEX collects some simple information and walks you through benefits, features and costs – without all the insurance jargon.



Let ALEX:

- Help you understand and compare plan options
- Explain health benefits terms
- Show you how different plan features work – deductibles, coinsurance, out-of-pocket maximums
- Walk you through estimating tax savings with a health savings account (if you are considering the ActiveCare 1-HD plan)

When you are done, ALEX will summarize his recommendations on your own personal benefits web page. Just click the link to restart the conversation any time.

ALEX can help you make sense of it all!



To use the tool, visit www.myalex.com/trsactivecare.

TRS Medical Rates

2016-2017 TRS ActiveCare Health Insurance Premiums Without Wellness Program Incentive

12 Pay—Administrators and Professionals

	TRS ActiveCare 1-HD	TRS ActiveCare 2	TRS ActiveCare Select	Scott & White HMO
Employee Only	\$106.00	\$410.00	\$249.00	\$295.16
Employee + Children	\$380.00	\$807.00	\$544.00	\$604.16
Employee + Spouse	\$679.00	\$1,317.00	\$912.00	\$957.82
Family	\$996.00	\$1,362.00	\$1,126.00	\$1,087.98

12 Pay—Para-Professionals

	TRS ActiveCare 1-HD	TRS ActiveCare 2	TRS ActiveCare Select	Scott & White HMO
Employee Only	\$91.00	\$395.00	\$234.00	\$280.16
Employee + Children	\$365.00	\$792.00	\$529.00	\$589.16
Employee + Spouse	\$664.00	\$1,302.00	\$897.00	\$942.82
Family	\$981.00	\$1,347.00	\$1,111.00	\$1,072.98

18 Pay

	TRS ActiveCare 1-HD	TRS ActiveCare 2	TRS ActiveCare Select	Scott & White HMO
Employee Only	\$60.67	\$263.33	\$156.00	\$186.77
Employee + Children	\$243.33	\$528.00	\$352.67	\$392.77
Employee + Spouse	\$442.67	\$868.00	\$598.00	\$628.55
Family	\$654.00	\$898.00	\$740.67	\$715.32

26 Pay

	TRS ActiveCare 1-HD	TRS ActiveCare 2	TRS ActiveCare Select	Scott & White HMO
Employee Only	\$42.00	\$182.31	\$108.00	\$129.30
Employee + Children	\$168.46	\$365.54	\$244.15	\$271.92
Employee + Spouse	\$306.46	\$600.92	\$414.00	\$435.15
Family	\$452.77	\$621.69	\$512.77	\$495.22

AISD contributes the following each month to employees participating in a medical plan:

- \$235 per month for Professional employees
- \$250 per month for all Para-Professional and Auxiliary employees
- The rates shown reflect the amount employees will pay if this district contribution amount is approved for the 2016-2017 plan year.

TRS ActiveCare Medical Rates—Continued

2016-2017 TRS ActiveCare Health Insurance Premiums With Wellness Program Incentive

12 Pay—Administrators and Professionals				
	TRS ActiveCare 1-HD	TRS ActiveCare 2	TRS ActiveCare Select	Scott & White HMO
Employee Only	\$86.00	\$390.00	\$229.00	\$275.16
Employee + Children	\$360.00	\$787.00	\$524.00	\$584.16
Employee + Spouse	\$659.00	\$1,297.00	\$892.00	\$937.82
Family	\$976.00	\$1,342.00	\$1,106.00	\$1,067.98

12 Pay—Para-Professionals				
	TRS ActiveCare 1-HD	TRS ActiveCare 2	TRS ActiveCare Select	Scott & White HMO
Employee Only	\$71.00	\$375.00	\$214.00	\$260.16
Employee + Children	\$345.00	\$772.00	\$509.00	\$569.16
Employee + Spouse	\$644.00	\$1,282.00	\$877.00	\$922.82
Family	\$961.00	\$1,327.00	\$1,091.00	\$1,052.98

18 Pay				
	TRS ActiveCare 1-HD	TRS ActiveCare 2	TRS ActiveCare Select	Scott & White HMO
Employee Only	\$47.33	\$250.00	\$142.67	\$173.44
Employee + Children	\$230.00	\$514.67	\$339.33	\$379.44
Employee + Spouse	\$429.33	\$854.67	\$584.67	\$615.21
Family	\$640.67	\$884.67	\$727.33	\$701.99

26 Pay				
	TRS ActiveCare 1-HD	TRS ActiveCare 2	TRS ActiveCare Select	Scott & White HMO
Employee Only	\$32.77	\$173.08	\$98.77	\$120.07
Employee + Children	\$159.23	\$356.31	\$234.92	\$262.69
Employee + Spouse	\$297.23	\$591.69	\$404.77	\$425.92
Family	\$443.54	\$612.46	\$503.54	\$485.99

Participation in the Wellness Program reduces premiums by \$20 per month. The above rates reflect the amount employees will pay.

Wellness Program

The AISD Wellness Program is a vital part of our overall benefits program. We have partnered with Viverae, a leading provider of health management services, to bring you the latest health and wellness content, educational programs, and an online community to keep you motivated.

The health management program is run on a point system. If you choose to participate in the plan, are enrolled in a TRS medical plan, and earn 200 points before 8/31/2017, you will be eligible for a \$20 monthly reduction in your medical premiums.

The Wellness Program is available to all employees. The \$20 medical premium reduction is only available to TRS ActiveCare medical plan participants.

AISD Wellness Program

ASSESSMENTS	POINTS
Biometric Screening (Required)	50
Member Health Assessment (Required)	50
PREVENTIVE CARE COMPLIANCE	POINTS
Preventive Care Compliance (Required)	50
PROGRAM ACTIVITIES	POINTS
Employer Challenges	15 each/45 max
Online Courses	10 each/30 max
Webinars	5 each/30 max
Questionnaires	5 each/45 max
Targeted Programs	15 each/45 max
Healthy Events	5 each/15 max
PROGRAM GOAL	200

If you fail to reach the goal of 200 points by 8/31/17, you will not be eligible to enroll in the Wellness Program for the following plan year.

TRS ActiveCare Teledoc Plan

Teladoc Services are included with the TRS ActiveCare Medical Plans.

Teladoc is an added benefit that gives you 24/7 telephone access to a national network of U.S. board-certified doctors.

Call Teladoc from anywhere-home, work, or on the road-and let the doctor come to you! Teladoc doctors diagnose non-emergency medical problems, recommend treatment, and can even call in a prescription to your pharmacy of choice when necessary.

MDLive Tele-health Plan

AISD is offering an additional Telehealth Plan administered by MDLive.

Unlike the TRS Teladoc plan, you do not have to be enrolled in any of the TRS Medical Plans to utilize this benefit. MDLive voluntary tele-health plan will allow employees to cover themselves and dependents for **\$10 per month**.

	Teladoc	MDLive
Medical Plan Enrollment Required	YES	NO
What Can Be Treated	<ul style="list-style-type: none"> • Respiratory infections • Ear Infections • Urinary tract infections • Allergies • Colds and Flu • Sore Throat • Pink Eye • Asthma • Bronchitis • Joint Aches and Pain And More! 	<ul style="list-style-type: none"> • Respiratory infections • Ear Infections • Urinary tract infections • Allergies • Colds and Flu • Sore Throat • Pink Eye • Asthma • Bronchitis • Joint Aches and Pain And More!
Co-Pay	\$40 per consultation (waived if enrolled in ActiveCare 2 and ActiveCare Select)	\$0 per consultation
Are family members covered	Family members are covered only if they are enrolled as a dependent under the employee's medical plan	Family members are covered if enrolled in the MDlive plan (no medical plan enrollment needed)
Quality	Are U.S. board-certified in internal medicine, family practice, emergency medicine or pediatrics	Are U.S. board-certified in internal medicine, family practice, emergency medicine or pediatrics

MEDLink Medical Gap Plan

The Medlink Medical Gap Plan is designed to help supplement TRS ActiveCare 1-HD. It provides supplemental coverage to help offset out-of-pocket costs that you may experience due to deductibles, co-payments and coinsurance.

Medlink Medical Gap Plan for ActiveCare 1-HD	
	In-Patient Hospital Benefits
Benefit Amount	\$2500 per covered person per confinement
	Outpatient Benefits
Benefit Amount	\$500 per covered person per occurrence (if due to same or related condition, must be separated by 90 days)
Hospital Emergency Room	Payable up to a maximum outpatient benefit of \$500
Urgent Care Facility	Maximum of 3 Urgent Care visits per person or 6 per family per calendar year. Payable up to the maximum outpatient benefit of \$500
Outpatient Surgery	Outpatient Surgery performed in a hospital outpatient or free-standing outpatient surgery center facility. Payable up to the maximum outpatient benefit of \$500
Diagnostic Testing	Diagnostic Testing in hospital outpatient facility or MRI Facility. Payable up to the maximum outpatient benefit of \$500
Outpatient Treatment for Serious Mental Illness in a Hospital Outpatient Facility	Maximum of 60 days of treatment per person per year. Payable up to the maximum outpatient benefit of \$500
Pre-existing Conditions	Pre-existing condition exclusion applies if the covered person is subject to a pre-existing condition exclusion under the medical plan

You must be enrolled in TRS ActiveCare 1-HD in order to elect the Gap plan

MDLink Medical Gap Plan Rates

12 PAY	Medlink Medical Gap Plan for TRS ActiveCare 1-HD
	Ages 18-54
Employee Only	\$30.68
Employee & Spouse	\$70.55
Employee & Children	\$52.15
Employee & Family	\$92.03
	Ages 55+
Employee Only	\$46.01
Employee & Spouse	\$105.83
Employee & Children	\$78.22
Employee & Family	\$138.04

18 PAY	Medlink Medical Gap Plan for TRS ActiveCare 1-HD
	Ages 18-54
Employee Only	\$20.45
Employee & Spouse	\$34.77
Employee & Children	\$47.03
Employee & Family	\$61.35
	Ages 55+
Employee Only	\$30.67
Employee & Spouse	\$52.15
Employee & Children	\$70.55
Employee & Family	\$92.03

26 PAY	Medlink Medical Gap Plan for TRS ActiveCare 1-HD
	Ages 18-54
Employee Only	\$14.16
Employee & Spouse	\$24.07
Employee & Children	\$32.56
Employee & Family	\$42.48
	Ages 55+
Employee Only	\$21.24
Employee & Spouse	\$36.10
Employee & Children	\$48.84
Employee & Family	\$63.71

Healthcare Savings Account (HSA)

If you are enrolled in TRS ActiveCare Plan 1-HD, the HSA Bank Health Savings Account, or HSA, is a great way for you to save and pay for healthcare expenses.

You can use this tax-advantaged account to pay for current or future healthcare expenses including deductibles, co-insurance, prescriptions, vision, dental care, and more.

You can pay these expenses by using your HSA Bank debit card. You can also pay for part or all of your medical expenses out-of-pocket and reimburse yourself later with HSA funds .

Unused HSA funds roll over year to year; there is no “use it or lose it” penalty. Funds that are rolled over continue to grow and earnings are tax-free. At age 65, you will have the ability to use your HSA funds for any purpose on a taxable basis. This makes funding your HSA a great way to save for retirement.

Your HSA funds are never lost due to changes in employment or health plan. If at some point you are no longer enrolled In TRS ActiveCare Plan 1-HD, you still have access to your funds and can use them to pay for medical expenses; however, you are simply no longer eligible to make contributions.

Families can contribute up to \$6,750 and individuals can contribute up to \$3,350 per year.

HSA Advantages	
Funds Roll Over Annually	There is no “use it or lose it” philosophy. If you don’t use it, save it for next year. Or better yet, for retirement.
Tax Advantages	Contributions can be made pre-tax, distributions for eligible expenses are tax free and earning grow tax –deferred.
You Own the Account	Even if your HSA-compatible coverage ends, you can still use your HSA funds tax-free for eligible medical expenses.
You’re in Charge	You choose when to use your HAS or pay out-of-pocket.

Important Note: Federal law prohibits anyone from having access to a Flexible Spending Account (also known as an FSA) while making contributions to an HSA. This prohibition includes access to FSA funds that are rolled over from the prior plan year. If you are planning to elect the HSA and have not spent all of the funds from your FSA, our plan administrator will assume that you have revoked the FSA rollover. If you have any questions, contact the benefits office.

You must be enrolled in TRS ActiveCare 1-HD in order to elect the HSA Bank Health Savings Account plan

Dental Plans

Dental PPO Plans

The Dental PPO Plans allow you to visit any dental provider. However, when you use a CIGNA network dentist you usually pay less out of your pocket because the network dentists have agreed to charge pre-negotiated reduced fees. If you visit a dentist outside the network, you may be responsible for additional fees.

DHMO Plan

The DHMO plan provides dental care through a network of dentists who charge set fees for their services. You must use a CIGNA network dentist to receive coverage. You will be required to select a DHMO Dental provider within the CIGNA network. For a list of participating providers go to www.cigna.com.

These summaries only show a few of the covered procedures.
Please visit www.myaisdbenefits.net to obtain a complete summary.

Benefits	CIGNA PPO High Plan		CIGNA PPO Low Plan		CIGNA DHMO Plan
Calendar Year Maximum (Class I, II and III Expenses)	\$1,500		\$750		NONE
Calendar Year Deductible (Applies to Classes II III and IV only)	\$50 per person \$150 per family		\$50 per person \$150 per family		NONE
Class I-Preventive and Diagnostic Care <i>Oral Exams, Routine Cleanings, X-Rays</i>	Plan Pays:	You Pay:	Plan Pays:	You Pay:	\$5.00
	100%	No Charge *	80%	20%	
Class II-Basic Restorative Care <i>Fillings, Extractions., Periodontal Scaling</i>	80%*	20%*	50%*	50%*	\$10-\$135 See DHMO Patient Charge Schedule for exact costs
Class III-Major Restorative Care <i>Surgical Extractions., Crowns, Dentures</i>	50%*	50%*	50%*	50%*	\$115-\$350 See DHMO Patient Charge Schedule for exact costs
Class IV-Orthodontia	Only covers dependent children to age 19		No Orthodontia coverage		Dependent and Adult coverage available
	50%*	50%*	Not Covered	100%	\$375-4400 See DHMO Patient Charge Schedule for exact cost
*In-Network *Subject to annual deductible	\$1,000 Lifetime maximum				

NOTE: Although the AISD Benefits Plan year is from September through August, the CIGNA Dental PPO deductibles and maximums begin each January 1st and go through December 31st

Dental Plan Rates

Effective September 1 – August 31

12 Pay

	CIGNA PPO High	CIGNA PPO Low	CIGNA DHMO
Employee Only	\$32.93	\$21.41	\$16.16
Employee + Children	\$75.34	\$48.62	\$29.26
Employee + Spouse	\$66.56	\$42.96	\$27.96
Family	\$106.04	\$68.32	\$39.28

18 Pay

	CIGNA PPO High	CIGNA PPO Low	CIGNA DHMO
Employee Only	\$21.95	\$14.27	\$10.77
Employee + Children	\$50.23	\$32.41	\$19.51
Employee + Spouse	\$44.37	\$28.64	\$18.64
Family	\$70.69	\$45.55	\$26.19

26 Pay

	CIGNA PPO High	CIGNA PPO Low	CIGNA DHMO
Employee Only	\$15.20	\$9.88	\$7.46
Employee + Children	\$34.77	\$22.44	\$13.50
Employee + Spouse	\$30.72	\$19.83	\$12.90
Family	\$48.94	\$31.53	\$18.13

Vision Plan & Rates

Your eyes deserve the best care to keep them healthy year after year. With VSP, you'll get a great value on your eyecare and eyewear.

Using your VSP Benefits is easy.

- To find a VSP doctor, visit vsp.com or call **800.877.7195**.
- **At your appointment, tell them you have VSP.** There's no ID card necessary.

That's it! There are no claim forms to complete when you see a VSP doctor

Benefits	Description	Copay	Frequency
WellVision Exam	•Focuses on your eyes and overall wellness	\$10.00	Every plan year*
Prescription Glasses		\$10.00	See frame and lenses
Frame	•\$150 allowance for a wide selection of frames •20% off amount over your allowance	Included in Prescription Glasses	Every plan year
Lenses	•Single vision, lined trifocal lenses •Polycarbonate lenses for dependent children	Included in Prescription Glasses	Every plan year
Lens Options	•Standard progressive lenses •Premium progressive lenses •Custom progressive lenses •Average 20-25% off other lens options	\$55 \$95-105 \$150-\$175 50%	Every plan year
Contacts (Instead of glasses)	•\$150 allowance for contacts and contact lens exam (fitting and evaluation) •15% off contact lens exam (fitting and evaluation)	\$0	Every plan year
Primary Eyecare	•Treatment and diagnosis of eye conditions like pink eye, vision loss and monitoring of cataracts, glaucoma, and diabetic retinopathy	\$20	As needed
Extra Savings and Discounts	Glasses and Sunglasses •20% off additional glasses and sunglasses, including lens options, from any VSP doctor within 12 months of your last WellVision Exam. Laser Vision Correction •Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities.		

*Plan year begins in September

12 Pay	
Employee Only	\$8.92
Employee + Children	\$14.58
Employee + Spouse	\$14.26
Family	\$23.48

18 Pay	
Employee Only	\$5.94
Employee + Children	\$9.72
Employee + Spouse	\$9.51
Family	\$15.65

26 Pay	
Employee Only	\$4.12
Employee + Children	\$6.73
Employee + Spouse	\$6.58
Family	\$10.84

To obtain more detailed information about the VSP Plan, please visit www.myaisdbenefits.net or www.vsp.com

Disability Plans

Disability benefits replace a portion of your pay when you are unable to work due to illness, injury or pregnancy. You pay the full cost of this coverage.

Benefit Amount

You may purchase a monthly benefit in \$100 units, starting at a minimum of \$200 and up to two-thirds of your monthly earnings to a maximum monthly benefit of \$7,500, depending on your income.

Elimination Period

The elimination period is the length of time of continuous disability due to a covered sickness or injury, which must be satisfied before you are eligible to receive benefits. You can choose from 0/7 days up to 180 days.

If you have selected an elimination period of 30 days or less, and if because of your disability you are hospital confined as an inpatient for 24 hours or more, benefits will begin immediately and the remainder of the elimination period will be waived.

Duration of Benefits

Your duration of benefits is based on your age when the disability occurs as shown in the following chart:

<u>Age at Disability</u>	<u>Duration of Benefits</u>
Less than age 60	To age 65, but not less than 5 years
Age 60-64	5 years
Age 65-69	To age 70, but not less than 1 year
Age 70 and over	1 year

Reduction of Benefits

Your Long-Term Disability benefit is reduced by other sources of income that are payable to you, such as Social Security or TRS Retirement benefits. A Disability claim is not payable to the insured for any work-related injury.

Pre-Existing Condition Exclusion

The plan will not cover any disability that begins in the first 12 months after your effective date of coverage that is caused by, contributed to by, or resulting from a pre-existing condition. In addition, **if during an annual enrollment period you apply for additional benefits or select a shorter elimination period, this plan will not cover the increase in your coverage if you have a pre-existing condition. The pre-existing condition exclusion applies to all conditions including pregnancy.**

How to File a Claim

- Call the Aetna Disability Service Center at 888-266-2917 to file your claim.
- Aetna will send a claim packet to your home address that includes an authorization form.
- Fax the completed authorization form to Aetna at 866-667-1987.
- Forward a copy of the completed authorization form to your health care provider.

See full plan details in the Aetna LTD Benefit Summary document provided at www.myaisdbenefits.net.

Cancer Plan & Rates

Treatment for cancer can be expensive. Cancer insurance can help offset out-of-pocket expenses you may experience for treatment.

Advantages to the Policy

- Benefits are paid directly to you (unless you specify otherwise)
- Benefits are paid regardless of other insurance you may have
- Coverage is available for the entire family (dependent children under age 26)

Low Base Plan Benefits	
First Occurrence Benefit	\$2,500
Hospital Indemnity Benefit	\$100/day
Radiation Therapy/Chemotherapy	\$500/month
Blood, Plasma, and Blood Components	\$7,500/year
Annual Cancer Screening	\$50/year
Surgery (Inpatient and Outpatient)	\$1,600

High Base Plan Benefits	
First Occurrence Benefit	\$2,500
Hospital Indemnity Benefit	\$300/day
Radiation Therapy/Chemotherapy	\$1,500/month
Blood, Plasma, and Blood Components	\$12,500/year
Annual Cancer Screening	\$50/year
Surgery (Inpatient and Outpatient)	\$1,600

12 Pay				
	Low Base Plan	Low Base Plan with ICU Rider	High Base Plan	High Base Plan with ICU Rider
Employee Only	\$13.20	\$15.20	\$27.80	\$30.80
Employee + Children	\$18.40	\$21.20	\$38.20	\$42.40
Family	\$23.60	\$27.80	\$48.70	\$55.00

18 Pay				
	Low Base Plan	Low Base Plan with ICU Rider	High Base Plan	High Base Plan with ICU Rider
Employee Only	\$8.80	\$10.13	\$18.53	\$20.53
Employee + Children	\$12.27	\$14.13	\$25.47	\$28.27
Family	\$15.73	\$18.53	\$32.47	\$36.67

26 Pay				
	Low Base Plan	Low Base Plan with ICU Rider	High Base Plan	High Base Plan with ICU Rider
Employee Only	\$6.09	\$7.02	\$12.83	\$14.22
Employee + Children	\$8.49	\$9.78	\$17.63	\$19.57
Family	\$10.89	\$12.83	\$22.48	\$25.38

Information regarding specific benefit exclusions, limitations, terms and conditions appear in the plan brochure on the Benefits website—www.myaisdbenefits.net

Group Life Insurance Plan & Rates

BASIC LIFE INSURANCE—AISD provides each eligible employee with \$10,000 in life insurance at no cost. This benefit is reduced if you are age 65 or older.

VOLUNTARY GROUP TERM LIFE INSURANCE—You can purchase this insurance for you, and your eligible spouse and children.

Levels of Coverage

- **For You** – You can elect coverage in units of \$10,000 up to a maximum of 7 times your annual salary or \$500,000. For newly hired employees, the guaranteed coverage amount that can be elected without having to provide evidence of good health is the lesser of 4 times your salary or \$300,000. This benefit is reduced if you are 70 years of age or older.
- **For Your Spouse** – You may elect coverage for your spouse in units of \$5,000 up to a maximum of \$100,000. The guaranteed coverage amount for your spouse is \$50,000.
- **For Your Dependent Children** – You may select coverage for your eligible dependent children in units of \$1,000 up to a maximum of \$10,000. You may only elect a maximum of \$1,000 for children under 6 months of age.

***You must elect life insurance for yourself in order to cover your spouse or children.**

Guaranteed Coverage and Evidence of Insurability

- **As a new hire**, if you and your dependents are eligible and you apply during the initial enrollment period (within 31 days of your hire date), you are entitled to choose up to the guaranteed coverage amount without having to provide evidence of good health.
- **During Open Enrollment** each year, if you have at least the minimum amount of coverage, you may elect to increase your life insurance by one unit (\$10,000 for you, \$5,000 for your spouse) up to the guaranteed coverage amount without evidence of good health.
- If you are applying for the first time, or for an amount of coverage for yourself and any dependents greater than the guaranteed coverage amount, you will be required to submit evidence of good health. Coverage above the guaranteed amount will not be issued until the insurance company approves the evidence of good health.

Employee/Spouse Age	Employee Monthly Cost Per \$10,000 Unit	Spouse Monthly Cost per \$5,000 Unit
<25	\$.27	\$.27
25-29	\$.34	\$.34
30-34	\$.43	\$.43
35 to 39	\$.58	\$.58
40 to 44	\$.82	\$.82
45 to 49	\$1.30	\$1.30
50 to 54	\$1.99	\$1.99
55 to 59	\$3.06	\$3.06
60 to 64	\$3.83	\$3.83
65 to 69	\$5.45	\$5.45
70-74	\$11.69	\$11.69
75+	\$18.17	\$18.17

The monthly cost for children is \$.80 per \$10,000 of coverage. One premium will insure all your eligible children, regardless of the number of children you enroll.

When enrolling online for term life insurance, the cost for each level of coverage is pre-calculated based on your age and payroll class. For a complete list of benefits and exclusions, please see the plan summary located at www.myaisdbenefits.net

Individual Life Insurance (Texas Life)

Voluntary permanent life insurance can be an ideal complement to the group term and optional term your employer might provide. Designed to be in force when you die, this voluntary universal life product is yours to keep, even when you change jobs or retire, as long as you pay the necessary premium. Group and voluntary term, on the other hand, typically is not portable if you change jobs and, even if you can keep it after you retire, usually costs more and declines in the death benefit.

The policy, PURELIFE—Plus, is underwritten by Texas Life Insurance Company, and it has these outstanding features:

- **High Death Benefits.** With one of the highest death benefits available at the worksite, 1 PURELIFE—Plus gives your loved ones peace of mind, knowing there will be significant life insurance in force should you die prematurely.
- **Minimal Cash Value.** Designed to provide high death benefit, PURELIFE—Plus does not compete with the cash accumulation in your employer-sponsored retirement plans.
- **Long Guarantees.** Enjoy the assurance of a policy that has a guaranteed death benefit to age 121 and level premium that guarantees coverage for a significant period of time (after the guaranteed period, premiums may go down, stay the same, or go up).
- **Refund of Premium.** Unique in the marketplace, PURELIFE—Plus offers you a refund of five years' premium, should you surrender the policy if the premium you pay when you buy the policy ever increases. (*Conditions apply.*)
- **Accelerated Death Benefit Rider.** Should you be diagnosed as terminally ill with the expectation of death within 12 months, you will have the option to receive 92% of the death benefit (percentages lower in Massachusetts,) minus a \$150 administrative fee. This valuable living benefit gives you peace of mind knowing that, should you need it, you can take the large majority of your death benefit while still alive. (*Conditions apply.*)

1 Voluntary and Universal Whole Life Products, Eastbridge Consulting Group, October 2008

***Flexible Premium Life Insurance to Age 121
Policy Form FRFNG-NI-07 OR ICC-07-PRFNG-NI-07***

Contact Linda Scott at 682-867-7364 for more details
See the PURELIFE—Plus brochure for details

Accidental Death & Dismemberment (AD&D) Plan & Rates

Accidental Death and Dismemberment Insurance can help ensure that tragedy doesn't take both an emotional and a financial toll on you and your family. The coverage will pay in the event of a serious injury to you or your covered spouse or children.

Levels of Coverage

For You – You may select coverage up to 10 times your salary in increments of \$10,000 not to exceed \$500,000. You may purchase AD&D coverage for yourself regardless of whether you purchase Life coverage.

For Your Family – Your spouse's benefit amount will be 50% of yours. Each of your covered children's benefit will be 10% of your benefit. In order to purchase AD&D coverage for your spouse and/or child, you must purchase AD&D coverage for yourself.

You will receive this % of the benefit amount: Employee, Spouse and Child	
Loss of life (including exposure and disappearance)	100%
Loss of any two: hand, feet Sight of both eyes Loss of both speech and hearing Quadriplegia Third degree burn covering 75% or more of the body	100%
Loss of both speech or loss of hearing Loss of one hand or one foot Loss of sight of one eye Paraplegia, or hemiplegia Third degree burn covering 50-74% of the body	50%
Loss of thumb and index finger of the same hand	25%

Your Benefit Amount	Monthly Cost for You and your Family	Monthly Cost for You Only
\$500,000	\$15.00	\$12.50
\$400,000	\$12.00	\$10.00
\$250,000	\$7.50	\$6.25
\$200,000	\$6.00	\$5.00
\$150,000	\$4.50	\$3.75
\$100,000	\$3.00	\$2.50
\$50,000	\$1.50	\$1.25
\$10,000	\$.30	\$.25

Your cost will depend on the benefit amount and coverage option you select. This rate chart shows the most common benefit amounts. A complete list of the coverage amounts and rates can be seen when you enroll online.

Long Term Care Insurance

Whether it's due to a motorcycle accident or serious illness, it is the type of care you may need if you couldn't independently perform the basic activities of daily living.

Long term care insurance may help you avoid a far more difficult decision: whether to exhaust your savings or liquidate your assets to pay for a period of long term care. This policy may help you maintain control of some important decisions, such as:

- Who would take care of me?
- Where can I choose to receive care?
- Would I be a burden on my children if my savings couldn't cover my care?

Guaranteed Coverage and Long Term Care Application

- **As a new hire**, you are eligible for benefit amounts on a Guarantee Issue basis of up to and including \$4,000 and a Facility Benefit Duration of 3 or 4 years without being required to complete a Long Term Care Insurance Application (medical questionnaire).
- **Long Term Care Insurance Application:** required if you enroll after your initial new hire eligibility period. Spouses and all Family Members must complete the Long Term Care Insurance Applications and be approved for coverage in order to enroll in the Long Term Care Plan.

Plan	Benefit
Plan 1	Long Term Care Facility - 100% of Facility Monthly Benefit Amount Professional Home and Community Care - 75% of Facility Monthly Benefit Amount Facility Monthly Benefit Amount of \$2,000 Facility Benefit Duration of 3 years Lifetime Maximum of \$72,000
Plan 2	Long Term Care Facility - 100% of Facility Monthly Benefit Amount Professional Home and Community Care - 75% of Facility Monthly Benefit Amount Facility Monthly Benefit Amount of \$3,000 Facility Benefit Duration of 4 years Lifetime Maximum of \$144,000
Plan 3	Long Term Care Facility - 100% of Facility Monthly Benefit Amount Professional Home and Community Care - 75% of Facility Monthly Benefit Amount 5% Simple Inflation Protection Facility Monthly Benefit Amount of \$4,000 Facility Benefit Duration of 4 years Lifetime Maximum of \$192,000
Elimination Period	90 accumulated days. The Elimination Period need only be satisfied once during the lifetime of the insured, but must be completed within a period of 730 consecutive dates.

You will see plan rates applicable to you when you enroll or you can visit the Benefits website for a complete list of plan rates

Identity Theft Protection Plan & Rates

Here's how it works:

- **Basic Identity Monitoring:** Standard monthly scans of public records databases searching for new information associated with your Social Security Number.
- **Advanced Identity Monitoring:** Additional scans of the National Change of Address (NCOA) database, which identifies new addresses associated with your personal information as well as Non-Credit Loan ("Payday Loan") databases which provide high-interest, quick cash transactions and generally require minimal personal information to obtain.
- **Cyber Monitoring:** Scans underground websites and other illicit online sources which buy, trade and sell personal information including (but not limited to) credit card numbers, passwords and Social Security Numbers.
- **Full-Service Identity Restoration:** A dedicated team of trained and certified resolution specialists who work on your behalf to restore your identity by addressing record-keeping and reporting agencies and removing erroneous and fraudulent records that appear in your name while under the protection of a qualified identity monitoring service.
- **Credit Report Monitoring:** Monitors your credit and notifies you when changes such as new accounts, delinquent accounts and other credit-related information is recorded.
- **Credit Reports & Scores:** Access to your credit reports and scores from the three primary credit reporting agencies; Equifax, Experian and TransUnion.
- At the end of the open enrollment period, ID Watchdog will contact you via email (if available), or by letter, with instructions on activating your account. The activation process only takes about two minutes, and can be done online or over the phone with the ID Watchdog customer service center.

	ID Watchdog Plus	ID Watchdog Platinum
Basic Identity Monitoring	√	√
Advanced Identity Monitoring	√	√
Cyber Monitoring	√	√
Full-Service Identity Restoration	√	√
Credit Report Monitoring	√	√
Credit Report & Scores		√
INDIVIDUAL PLAN	\$7.95 / MO	\$11.95 / MO
FAMILY PLAN	\$14.95 / MO	\$22.95 / MO

For more information, go to: www.idwatchdog.com or call: 1-800-970-5182

Pet Insurance

You work hard to provide your family with everything they need. So whether your family includes kids with two feet or kids with four paws, you know what responsibility looks like.

My Pet ProtectionSM plans help you provide your pets with the best care possible.

- **90% cash back**—Use any vet and get 90% reimbursement on the bill
- **Open to all ages**—No age limits or age-based premium increases
- **More than just accident & illness coverage** - Spay/neuter, hereditary, Rx therapeutic diets, dental and more
- **Exclusive** - Available only for employees, not to the general public
- **Easy enrollment**—Just a few simple questions to get coverage



Accidents, including poisonings and allergic reactions	✓	✓
Injuries, including cuts, sprains and broken bones	✓	✓
Common illnesses, including ear infections, vomiting and diarrhea	✓	✓
Serious/chronic illnesses, including cancer and diabetes	✓	✓
Hereditary and congenital conditions	✓	✓
Surgeries and hospitalization	✓	✓
X-rays, MRIs and CT scans	✓	✓
Prescription medications and therapeutic diets	✓	✓
Wellness exams	✓	
Dental cleaning	✓	
Vaccinations	✓	
Spay/neuter	✓	
Flea and tick prevention	✓	
Heartworm testing and prevention	✓	
Routine blood tests	✓	


my pet protectionSM
 with wellness
 90% back on veterinary bills
Starting at \$66/month


my pet protectionSM
 90% back on veterinary bills
Starting at \$40/month

MetLaw Hyatt Legal Plan

MetLaw Hyatt Legal Plan provides employees with affordable, convenient access to a qualified network of attorneys.

With one simple phone call to a toll free number, you will have your choice of 14,000 network attorneys anywhere in the US anytime a personal legal matter should arise.

Just \$16.50 per month covers you, your spouse, and your children up to age 26.

The plan covers the most commonly needed legal matters.

MetLaw Hyatt Legal Plan Covered Issues	MetLaw Hyatt Legal Plan Non-Covered Issues
Law for Family & Personal	Employment-related Matters
Law for Money Matters	Appeals and class actions
Law for Vehicle & Driving	Farm Matters
Law for Home & Real Estate	Business Or Invest Matters
Civil Lawsuits	Matters Involving Property Held for Investment or Rental
Law to Protect Your Future/Estate	Issues When The Participant Is The landlord
Law for Elder-Care Issues	Patent, Trademark and Copyright Matters

For more information, visit the employee benefits website: www.myaisdbenefits.net

Medical & Dependent Care Reimbursement

Medical Reimbursement Account

You can set aside up to \$2,550 per Plan Year in the Medical Reimbursement Account. The minimum contribution is \$25 per month and the maximum contribution is \$212.50 per month.

You use the account to pay for eligible health care expenses that your health plan does not cover, such as:

- Deductibles, co-pays and coinsurance
- Dental Services
- Contact lenses, eyeglasses and eye exams
- Prescription drugs

In general, health care expenses are eligible for reimbursement if they are incurred during the Plan Year and are considered tax-deductible by the IRS. ***For a detailed list of eligible expenses, log on to www.myaisdbenefits.net and click on Benefits and Forms and then Reimbursement Accounts.***

You will receive a Flex Visa Card which will be loaded with your annual elected amount. You will use this card for all eligible medical expenses at all locations that accept Visa. The amount of the purchase will be deducted from the card balance. You will be charged a \$1.50 monthly fee for the Flex Visa Card.

Important: Keep your receipts for all your Flex Visa Card transactions in the event of an audit.

Dependent Care Reimbursement Account

You can set aside up to \$5,000 a year in the Dependent Care Reimbursement Account. If you are married and you and your spouse file separate tax returns, the maximum you can contribute is \$2,500. You can use this money to reimburse yourself for eligible dependent care expenses.

Generally, you may use the money in the Dependent Care Account to care for:

- Your children under age 13 whom you claim as dependents for tax purposes.
- Spouses and dependents of any age that are mentally or physically disabled who spend at least eight hours a day in your home.

There are some special rules for participation:

- The day care must be necessary so you can work.
- If you are married, your spouse must be employed or a full-time student at least five months during the year, or mentally or physically disabled and unable to care for himself or herself.

How to file a Reimbursement Claim:

All claims for Dependent Care Reimbursement Account must be filed by submitting a paper claim form.

To File Paper Claims

- Visit www.myaisdbenefits.net and click forms to download Reimbursement Claim Form.
- Claim Form may be faxed or mailed with proper documentation.
- You may receive your reimbursement via check or direct deposit
- Claims may be viewed on-line by clicking the on "Check FSA" link on the www.myaisdbenefits.net website.

Focus on the facts:

- **Use It or Lose It** – You MUST use all of the money in your accounts during the Plan Year. You will lose any remaining balance in the account at the end of the Plan Year.
- Money in your accounts may be used only for reimbursement of expenses you have incurred during the Plan Year.
- Claims for expenses you incur during the Plan Year must be submitted for reimbursement within 90 days after the Plan Year ends.

You can access your account information by contacting NBS at 1-800-274-0503 or visiting their website at www.nbsbenefits.com

Employee Assistance Program

Aetna Resources For LivingSM

Kids, job, bills, health, world events ... Life — it happens to all of us

Some days it can be tough to manage the competing priorities in our lives, and keep it all running smoothly. Aetna Resources For Living, a comprehensive Employee Assistance Program, is there for you when you need it. This confidential and round-the-clock service offers support and resources to you and others in your household.

Everyone needs a little help sometimes

Aetna Resources for Living includes three face-to-face counseling sessions a year with an EAP network provider. That's up to three visits a year for you and also for members of your household.

Just a call or click away, we can confidentially discuss your situation and help you get information and education, as well as referrals to local counselors if you want face-to-face visits.

Common issues:

- Mental health and well-being
- Personal and professional relationships
- Substance abuse
- Family life
- Daily stress

Online worklife resources: there when you need them

Visit www.mylifevalues.com for free webinars; online child care, eldercare, education searches; concierge database; and discount programs. You'll also have access to thousands of articles, videos, and tools on worklife and behavioral health topics.

The Legal ReferenceTM Program

Estate Planning Documents offered FREE for you and your spouse.

Simply visit www.iChooseLegal.com for these FREE documents	
Simple Will	Make basic decisions about how you want to distribute your assets.
Living Will	Ease the burden on your family by creating a living will that states the kind of care you wish.
Healthcare Power of Attorney	Grant someone permission to make medical decisions on your behalf in you're unable.
Financial Power of Attorney	Grant someone permission to make financial decisions on your behalf in you're unable.
Plus, you'll find FREE Information at iChooseLegal.com	
Educational information on Estate Planning	
Legal research tools	
Information on Identity Theft and a downloadable Victim Action Kit	

Contact the Aetna EAP anytime, toll-free 1-855-283-1915. Or visit www.mylifevalues.com, (log in user name and password: RESOURCES)

Retirement Planning

A 403(b) and 457(b) plan is an easy way to save for retirement and benefit from pre-tax savings. These plans allow employee contributions to grow tax deferred until withdrawn at retirement. Because the money is coming out of your paycheck pre-tax, your taxable income is lower and your tax burden is decreased.

403(b) Plan	457(b) Plan								
<p>Invest Tax Deferred income in Annuities or Mutual Funds. Company must be on the AISD list of approved 403(b) companies—list available at www.myaisdbenefits.net. District Contact-National Benefit Services (NBS)-800-274-0503</p>	<p>Invest Tax Deferred income in Variable Annuities through: Russ Ross Financial District Contact-Russ Ross-817-795-7877 E-mail: russ@russ-ross.com</p>								
<p>There is a 10% penalty on any funds withdrawn prior to age 59 1/2</p>	<p>No Penalty for Early Withdrawal (upon separation of service)</p>								
<p>Investment Options</p> <p>Annuities</p> <ul style="list-style-type: none"> Offered by Insurance Companies Fixed and variable annuities <p>Mutual Funds</p> <ul style="list-style-type: none"> Offered by Mutual Fund Companies directly Risk varies by fund Surrender charges may apply 	<p>Investment Options</p> <p>Fixed Annuities</p> <ul style="list-style-type: none"> Offered by Life of the Southwest 								
<p>Retirement Funds can begin to be withdrawn at age 59 1/2 but no later than 70 1/2. Distributions are available upon termination of employment, death, disability, retirement or certain types of hardships. Distributions can or could be: Rolled into an IRA, 403(b) or 401(k) plan, or funds can be used to buy TRS service.</p>									
<p>Earn interest or appreciation on your investment TAX DEFERRED</p>									
<p>No matching by Arlington ISD at this time</p>									
<p>Enrollment can be done at anytime during the year</p>									
<p>Maximum contribution: Employees that wish to maximize their contributions can elect to participate in both plans.</p> <table border="1" data-bbox="211 1522 1429 1606"> <thead> <tr> <th>Calendar Year</th> <th>Annual Maximum</th> <th>Age 50 Catch Up</th> <th>Total Calendar Year Maximum</th> </tr> </thead> <tbody> <tr> <td>2016</td> <td>\$18,000</td> <td>\$6,000</td> <td>\$24,000</td> </tr> </tbody> </table>		Calendar Year	Annual Maximum	Age 50 Catch Up	Total Calendar Year Maximum	2016	\$18,000	\$6,000	\$24,000
Calendar Year	Annual Maximum	Age 50 Catch Up	Total Calendar Year Maximum						
2016	\$18,000	\$6,000	\$24,000						
<p>Special Catch-Up for 403(b) only—if you have 15 or more years with Arlington ISD, you may contribute up to \$3,000 more per calendar year for up to five years.</p>									
<p>If the participant is eligible to elect the 15-year Catch-Up and the 50+ CatchUp, the 15-year Catch-Up MUST be utilized first.</p>									

For more information, visit the employee benefits website: www.myaisdbenefits.net

Online Enrollment

For benefit information and to enroll go to: www.myaisdbenefits.net



Arlington ISD
Employee Benefits Portal



THEbenefitsHUB

Delivering Instant Access to Your Employee Benefits

Login

Home

Benefits Guide

THEbenefitsHUB

Check FSA

Contact Us

1

If you have trouble logging in, click on the “Login Help Video” for assistance.



Login Help Video

[Español]

2

Passwords

All passwords have been RESET to the default described below:

Username:

The first Six (6) characters of your last name, followed by the first letter of your first name, followed by the last four (4) digits of your Social Security Number.

Default Password:

Last Name* (lowercase, excluding punctuation) followed by the last four (4) digits of your Social Security Number.

3

Login

Username

Password

Language

Login

[Forgot Username or Password?](#)

Supported Browsers

Google Chrome
Microsoft Internet Explorer (7.0 or Later)
Mozilla Firefox (3.5 or Later)

Example: Jane Washington
000-00-1234

Username: washinj1234
Password: washington1234

Example: John Smith
000-00-4321

Username: smith4321
Password: smith4321

Enrollment Instructions

Click on “Enrollment Instructions” for more information about how to enroll

Online Enrollment

EMPLOYEE GUIDE TO ENROLL IN BENEFITS WITH THEbenefitsHUB


With THEbenefitsHUB, you have access to benefits 24 hours a day, 7 days a week, from anywhere that you have Internet access.

Logging In

THEbenefitsHUB will guide you through the simple enrollment process page by page.

Employee Usage Agreement:






This agreement is displayed when you login to the system as an employee. Please read this section to ensure that you understand the terms of your “electronic signature” within THEbenefitsHUB. When you agree with this information, click the **Continue** button.

-  **Change Password:** Update your password following your organization’s password policy. Once your new password has been set, click the **Save & Continue** button.

Demographic Information

The **Employee Data Entry** process requires you to enter demographic information. Please review current information for accuracy. Enter in any new or missing information and click on the **Save & Continue** button when you are ready to proceed to the next step.









*Please Note: All fields in **BOLD** are required.*

-  **Personal Information:** Please enter an email address if you have one. If you need to use the Forgot Password link on the Login page, the system will deliver your new login credentials to this email address.
-  **Emergency Information:** Enter an emergency contact and the contact method.
-  **Dependent Information:** To add a dependent, click on the **+** icon. To edit an existing dependent, click on the  icon or the name of the dependent. Click on the **Save** button after successfully adding information for each dependent. *Please make sure to indicate if your child is a full-time student and/or claimed on your tax return as this could affect eligibility on some benefit plans.*
-  To revisit any of the sections mentioned select the **Back** button to return to the previous section.

Benefits Enrollment

Once all personal and dependent data has been entered, you will have access to enroll online in the benefits for which you are eligible.

Each **benefit plan type** will appear individually for you to review. Select the **Sign & Continue** button to proceed to the next benefit plan type.

-  **View Benefit Descriptions:** To view, click on the [View Plan Outline of Benefit](#) link or the  next to the name of the plan you would like to review. This shows a plan summary and any available links or additional documentation related to this plan.
-  **View Plan Cost:** Click on the checkbox next to each eligible family member or choose the coverage level you would like. The cost will automatically appear in the box to the right of the members’ names. The “Election Summary” box will be updated as coverage is adjusted.
-  **View Total Plan Cost:** As you select plans, the cost will be adjusted in the “Election Summary” box under the plans.
-  **Forms:** *One or more of your Benefit Plans may require a paper form to be submitted with the Insurance Carrier.* If this is the case, THEbenefitsHUB will prompt you to print the necessary forms during your online enrollment session.
-  **View Important Plan Information:** Your benefits administrator will spotlight the importance of specific features of the plan or add any disclaimers that may be necessary to include in the Plan Information section. You may expand/collapse this information by clicking on the “Plan Information” section.
-  **Product Summary Video:** Videos are placed throughout the benefit election process. You can access product videos that explain the purpose, function and importance of the benefit package by clicking on the  icon.

Online Enrollment

Beneficiary Information

Beneficiaries are required; please choose your beneficiary *for each* applicable plan.

Consolidated Enrollment Form

Consolidated Enrollment Form:

This form will display all data from each of the sections listed above, including personal and enrollment information. You may make changes to anything that is incorrect by clicking on the [Benefit Plan](#) name. Once you are finished with the enrollment process, you will be sent to the “Employee Menu” where you may make changes. (See *Employee Menu* section)

When you have completed your benefit selections, click the  button and you will be redirected to the Employee Menu screen.

Employee Menu

Once the enrollment is completed in the system, you will see the following Employee Menu icons:



Personal Information: Access and edit information by selecting the menu items under [Personal Information](#). You can also change your [Password](#) in this section.
















Dependent Information: Access and edit information for **Dependents** in this section. *Make sure the HR Department knows of any changes made as this may change eligibility status or give an opportunity to change enrollment in certain benefits!*



Benefit Plan Information: Access and view benefits in this section. You will not be able to change benefit elections unless it is an open enrollment period for your company. See a **quick review** of all information on the [Consolidated Enrollment Form](#).

Navigation and Data Entry Tips...

Below are tips to help you familiarize with the **THEbenefitsHUB**:

-  **HELP?** If you need assistance during the enrollment process, select [HELP](#) located at the upper right corner of the screen.
-  **BACK & FORTH:** Please do not use the web browser’s “back” or “forward” arrows while in the system. Use the navigation buttons in the **THEbenefitsHUB** instead:  
-  **REQUIRED DATA:** As noted on each screen, the **BOLD** items are required to allow continuation to the next page. The more information entered, the better the system will work for you; but you may skip non-bolded items if they don’t apply.
-  **MOVING ON:** When each election page is complete, go to the bottom of the page and select the  button.
-  **UNABLE TO FINISH?** If for any reason you are unable to complete the enrollment process you may [LOGOUT](#) and login at a later time. When you login again, you will walk through the same process. The data previously entered will be stored.
-  **WHAT ARE THOSE SYMBOLS?** If you “toggle” the cursor/arrow on the icons, the definition of the icons will be revealed.
 = Edit  = View
-  **LINKS...** [words, names or phrases with your organization’s primary color that becomes underlined](#) when you put your cursor/arrow on them, these are links that will take you to a certain section.
-  **SCREEN NAVIGATOR:** This line is at the top of your screen. You may click on the links to quickly jump back to those previous screens.