



2022-23 Open Enrollment

# Friendswood ISD Benefits **Overview**





# Presentation Disclaimers

## **GENERAL DISCLAIMER:**

This presentation of benefits for employees is meant only as a brief description of some of the programs for which employees may be eligible. This presentation does not include specific plan details. You must refer to the specific plan documentation for specific plan details such as coverage expenses, limitations, exclusions, and other plan terms, which can be found at Friendswood ISD Benefits Website. This presentation does not replace or amend the underlying plan documentation. In the event of a discrepancy between this s and the plan documentation the plan documentation governs. All plans and benefits described in this summary may be discontinued, increased, decreased, or altered at any time with or without notice.



# It's Time To Start Thinking About...

- How much did you pay toward your health expenses last year?
- What changes in your life and health may affect your upcoming benefit needs?
- What benefits are available to help you address your benefit needs?



# Things To Remember

- Benefits will become effective September 1st and will remain in effect until August 31st.
- You must enroll or decline coverage on yourself AND your eligible dependents (even if you aren't taking coverage).
- You can only change your benefits during open enrollment unless you have a qualifying event (marriage, divorce, birth, etc.). If you have a qualifying event, you only have 30 days to contact your Benefit Administrator.



# Mobile Enrollment

Enrollment made simple through your smartphone or tablet

Text **"FBS FRNDSWD"** to **800.583.6908** and get access to everything you need to complete your benefits enrollment:

- Mobile App – Group # - FBSFRNDSWD
- Online Support
- Interactive Tools
- And More



# FBS Call Center

Help is just a phone call away with the FBS Call Center!

- **Call** 866-914-5202
- **Available** Monday-Friday 8:00 AM - 6:00 PM (CST)
- **English or Spanish Representatives** available to answer questions or to enroll via the phone.

# How To Login



Login

← Click the login button

Visit

[www.mybenefitshub.com/friendswoodisd](http://www.mybenefitshub.com/friendswoodisd)



Home | THEbenefitsHUB | Check FSA | Contact Us

#### Plan Years

2020-2021  
2019-2020

#### Benefits 2020-2021

BASIC LIFE  
MEDICAL  
EAP  
HSA  
HOSPITAL INDEMNITY PLAN

#### Welcome to Your Employee Benefits Portal

We encourage you and your family to become familiar with this website. Inside, you will find detailed information about your employee benefits program including benefit summaries, claim forms, administrative forms, customer service numbers, provider directories and direct links to the insurance carriers. You will also find some helpful information regarding each employee benefit product so you can choose a benefit package that's right for you and your family.

#### Quick Links


• [Benefit Presentation](#)



# How To Login

Type in your username and password

LOGIN



**Login Help Video**  
*[Español]*

**Your Username Is:**  
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.

**Your Password Is:**  
Last Name (Excluding punctuation) followed by the last four (4) digits of your Social Security Number.

If you have previously logged in this year, you will use the password that you created, NOT the password format listed above.

[Enrollment Instructions](#)

LOGIN

Username

Password


Login

[Forgot Username or Password?](#)

**Supported Browsers**

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

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 **SSAE 16**  
TYPE II CERTIFIED





# How To Login

## Username and Password Instructions

Your Username is:

**Your district email address**

Your Password is:

**Your 4-digit birth year followed by the last 4 digits of your social security number**

# Questions?

Use the **Contact Us** link to send us your questions

Home | Benefits Guide | THEbenefitsHUB | Check FSA | Contact Us

**Plan Years**

[2017-2018](#)  
[2016-2017](#)

**Benefits**

MEDICAL  
HSA  
TELEHEALTH  
MEDICAL SUPPLEMENT  
DENTAL  
VISION  
DISABILITY  
CANCER  
BASIC LIFE  
VOLUNTARY GROUP LIFE  
AD&D  
INDIVIDUAL LIFE  
CRITICAL ILLNESS  
ACCIDENT  
IDENTITY THEFT  
EMERGENCY TRANSPORTATION  
REIMBURSEMENT PLANS  
FINANCIAL PLANNING  
EAP

**Contact Us**

Question is related to: Enrollment Login Que ▾

Name:

Daytime Phone:

Evening Phone:

Email:

Best Time to Contact You:

Preferred Contact Method: Daytime Phone ▾

Description of Issue:



# TRS Medical Insurance

## Primary Plan -

- In Network Coverage Only and Statewide Network
- Must designate a Primary Care Physician (PCP) and referral from PCP is needed to see a specialist. If you do not designate a PCP, one will be chosen for you!
- Copays available for some appointments prior to meeting deductible
- Preventative Care is covered 100%
- Deductible/Out of Pocket Maximum
  - Individual - \$2,500/\$8,150
  - Family - \$5,000/\$16,300
- Prescriptions
  - Deductible integrated with medical
  - Generics - \$15/\$45 copay for 30/90 day supply – Some generics are \$0 copay
  - Preferred, Non-Preferred & Specialty – Deductible then Coinsurance; Specialty Drugs – may qualify for Prudent Rx



# TRS Medical Insurance

## TRSAC HD –

- In or Out of Network Coverage and Nationwide Network
- No requirement to designate a Primary Care Physician and no referral needed for specialist visits
- No Copays – Deductible then Coinsurance – *Both higher if you are out of network*
- Preventative Care is covered 100%
- Deductible/Out of Pocket Maximum – In Network
  - Individual - \$3,000/\$7,050
  - Family - \$6,000/\$14,100
- In/Out Network Coinsurance – 30%/50%
- Prescriptions
  - Deductible integrated with medical
  - Generics, Preferred, Non-Preferred & Specialty – Deductible then Coinsurance; Specialty Drugs – may qualify for Prudent Rx



# TRS Medical Insurance

## Primary Plan+ -

- In Network Coverage Only and Statewide Network
- Must designate a Primary Care Physician (PCP) and referral from PCP is needed to see a specialist
- Copays available for some appointments prior to meeting deductible
- Preventative Care is covered 100%
- Deductible/Out of Pocket Maximum
  - Individual - \$1,200/\$6,900
  - Family - \$3,600/\$13,800
- Prescriptions
  - \$200 Brand deductible
  - Generics - \$15/\$45 copay for 30/90 day supply
  - Preferred, Non-Preferred & Specialty – Deductible then Coinsurance; Specialty Drugs – may qualify for Prudent Rx



# Health Savings Accounts (HSA)

If you are enrolled in the ActiveCare HD medical plan, you are eligible to enroll in a health savings account.

## What You Need To Know

- Personal savings account, stays with you even if you change jobs or retire
- Balances rollover every year, no "use it or lose it"
- Unlike an FSA, funds are NOT front loaded - only the balance is available
- IRS approved medical, dental and vision expenses for your family
- Employee only : Up to \$3,650 | Family: Up to \$7,300
- If you are 55+, you may contribute an addition \$1,000 to your H.S.A.



# Flexible Spending Accounts (FSA)

Flexible Spending Accounts (FSA) use pre-tax dollars to help pay toward eligible medical expenses.

- **New Administrator** - Higginbotham – All who enroll will receive a new Flex card
- Contribute up to \$2,850 per year
- Not tied to Medical plan elections
- Use it or lose it (60 day grace period)
- Funds are available upfront on a debit card
- Can't enroll in both an HSA and an FSA
- **Employees are encouraged to use up their Flex funds prior to 9/1/22 to ease the transition to Higginbotham.**



# Dependent Care FSA

Dependent Care Flexible Spending Accounts (FSA) use pre-tax dollars to help pay towards eligible work-related dependent daycare costs.

- **New Administrator** - Higginbotham
- You can elect up to \$5,000 (if you are married filing a joint return or you are head of a household) or \$2500 (if you are married filing separate returns)
- Contributions are use-it-or-lose-it and must be used within the plan year
- Funds aren't upfronted; can only claim up to balance in account
- If you enroll in this account, you cannot also claim the childcare tax credit when filing your federal taxes; you can only do one or the other





# Hospital Indemnity

A supplemental product that pays you cash when confined to a hospital.

- Carrier – American Public Life
- You don't have to be enrolled in a medical plan
- Guarantee Issue- some exclusions do apply
- No Pre-existing conditions clause
- HSA Compatible
- High/Low Plan Options Available
- Hospital/ICU Admission Benefit - \$2,500/\$1,500 – 1<sup>st</sup> day, per insured
- Hospital/ICU Confinement Benefit - \$200/day, 30 day max per insured
- Rehabilitation Benefit - \$200/day, 5 day max per insured
- This plan is replacing the current APL plan. No age bands, lower premiums.



# Dental: High Plan Option

- Carrier – Cigna
- Network – Cigna Total DPPO
- \$1,250 Calendar Year Maximum
- 100% Preventive & Diagnostic
- 80% Basic Restorative Care
- 50% Major Restorative Care
- 50% Orthodontic Care up to a lifetime maximum of \$1,000(children only to age 19)
- \$50 Deductible for Basic and Major Restorative Care



## Dental: Low Plan Option

- Carrier –Cigna
- Network – Cigna Total DPPO
- \$750 Calendar Year Maximum;
- 100% Preventive & Diagnostic
- 70% Basic Restorative Care
- 50% Major Restorative Care- 6 month waiting period for first time enrollees
- No Orthodontia on the Low Plan
- \$50 Deductible for Basic and Major Restorative Care



## Dental: DHMO Plan Option

- Carrier – Cigna
- Network – Cigna Dental Care
- Lowest plan in premium costs
- **Coverage only when going to assigned provider**
- Contracted Fee Per Service (see full fee schedule on benefits website)
- Orthodontia available for covered adults and dependent children to 19
- You **must** pick a primary care provider or one will be assigned for you



# Vision

- Carrier – MetLife
- \$10 Copay for Exam/\$25 Copay for Materials
- Exam every 12 months
- Lenses every 12 month
- Frames every 12 months \$150 Frame Allowance
- Contacts covered in lieu of glasses/\$150 Allowance for contacts
- Lens Options Covered in Full in Network
  - Single Vision
  - Lined Bifocal and Trifocal
  - Lenticular
  - Polycarbonate for Dependents to age 18
  - Standard UV and Scratch Coat



# Disability- Short Term

Disability Insurance pays a benefit to you should you become sick or injured and unable to work.

- **New Carrier** – New York Life
- Coverage is guaranteed issue for 60% of your salary.
- Benefit Period is 90 days
- You may choose elimination (waiting) periods in days of: 7 or 14 days
- Both the 7 and 14 day elimination period includes 1<sup>st</sup> Day Hospital Benefit - If you are hospital confined as an inpatient for at least 24 hours because of your disability, benefits begin on the first day of inpatient hospital confinement.
- **New** coverage and **increases** to existing coverage are subject to a 12-month pre-existing condition exclusion.



# Disability- Long Term

Disability Insurance pays a benefit to you should you become sick or injured and unable to work.

- **New Carrier** – New York Life
- Employees may **voluntarily** elect to cover 60% of their monthly earnings
- **New** coverage is subject to a 12-month pre-existing condition exclusion with a 3 month look back period.
- Coverage begins after being disabled for 90 days
- Maximum Benefit Duration is to age 65 or your Normal Social Security Retirement Age whichever is later
- **Employer paid disability is no longer provided starting 9/1/2022 – Employees who have been enrolled in the district paid plan for at least 12 months will have continuity of coverage.**



# Basic Life

- Carrier - OneAmerica
- All eligible employees will receive a \$20,000 Basic Life Insurance. This policy includes a matching amount of accidental death and dismemberment.
- This benefit is paid by your Employer
- This benefit is paid to your beneficiary should you pass away while employed with the Friendswood ISD. If you suffer an accident related dismemberment, the policy will pay you a pro-rata amount based on the severity of your dismemberment.





# Voluntary Life

- Carrier - OneAmerica
- Voluntary Group Life Insurance New Hire Guarantee Issue: \$250,000 for employees and \$50,000 for spouses and \$10,000 for children.
- Employees and spouses are eligible for up to \$500,000 in \$10,000 increments. Evidence of insurability (EOI) is required for amounts over GI
- Employee must cover themselves to cover a spouse or dependent child.
- Rates are age-banded, this means costs increase as you age
- Death benefit reduces at age 70 to 50% of original amount. Spouse and dependent coverage reduce based on employee's reduction

*\*New Hires must be actively at work and enrolled within the first 30 days of hire date*

*\*Current employees applying for the first time must complete an Evidence of Insurability*



# Accidental Death & Dismemberment

AD&D is coverage that pays a death benefit to the beneficiary, should death occur due to a covered accident. Dismemberment benefits are paid to you, according to the benefit level you select, if accidentally dismembered.

- Carrier - OneAmerica
- Employees can elect up to \$500,000 in AD&D, no health questions asked
- If you elect coverage, you may also cover spouses and eligible dependent children
- Death benefit reduces at age 70 to 50% of original amount. Spouse and dependent reduction are based on employee's reduction



# Individual Life Insurance

- Carrier – 5 Star
- Rates are based on your current age and will not change simply due to a change in your age
- New Hire Guarantee Issue: \$100,000 for employees and \$30,000 for spouses and \$10,000 for children.
- Quality of Life Benefit
- No reduction in death benefit due to age
- Employees do not have to enroll to obtain coverage for dependents
- Fully PORTABLE. This coverage belongs to you and can be kept into retirement



# Cancer

Cancer insurance offers extra insurance protection if you or a family member are diagnosed with cancer. This benefit is meant to help with costs your medical insurance may not cover.

- Carrier – American Public Life
- High/Low Plan Options Available
- First Occurrence Benefit
- Daily Radiation, Chemo, Immunotherapy And Experimental Treatment
- Annual \$50 diagnostic testing benefit
- Guarantee Issue (no health questions asked); Pre-existing exclusions apply
- Portable (you can take it with you when you leave or retire)
- Benefit pays directly to you



# Accident

Accident insurance is a supplemental benefit that helps reimburse out-of-pocket costs when an accident occurs.

- Carrier – The Hartford
- Low cost coverage for accidental injuries
- High/Low Plan Options available
- Pays a benefit amount for:
  - physicians treatment, surgery, x-rays, reductions of fractures and dislocations, and/or other emergency treatment expenses, ambulance benefit, and hospital confinement (see plan summary for full schedule of benefits)
- Guarantee Issue
- Portable



# Critical Illness

Supplemental Insurance providing financial protection if you are diagnosed with a covered condition.

- Carrier - UNUM
- Lump sum benefit up to \$30,000 for employee, Spouse 100% of Employee amount, Children automatically enrolled at 100% of employee amount for no additional cost.
- Covered conditions include Heart Attack, Stroke, End Stage Renal Failure, Dementia including Alzheimer's, Parkinson's, ALS, MS (see plan summary for full list of covered conditions)
- Spouse and dependent coverage available
- Guarantee Issue (no health questions asked); Pre-existing exclusions apply
- Portable (you can take it with you when you leave or retire)



# Emergency Medical Transportation

Be prepared for the unexpected, this plan provides emergency medical transport via Air or Ground to cover out of pocket costs not covered by medical insurance.

- Carrier - MASA
- No deductibles
- No provider network limitations; coverage extends to continental U.S. and Canada
- Non-emergency air transport and repatriation also covered
- \$14/mo – covers you, spouse and eligible dependent children



# Mustang Clinic

FISD and UTMB have partnered to offer care for minor illnesses for employees, their spouses and dependent children.

- Same day appointments
- \$10 fee per visit
- 2 convenient locations
- Call 281.338.8937





# Employee Assistance Program

The EAP is a counseling service for employees, their spouses and dependent children who may be experiencing work related or personal issues.

- Up to 6 face to face counseling sessions per year
- \$10 fee per visit
- 100% Confidential
- Call 281.335.8422
- Issues include but not limited to
  - Family, marital, grief or loss issues
  - Work stress, alcohol and drug abuse
  - Depression/anxiety
  - Teenage or other child issues
  - Financial concerns