

# CYPRESS-FAIRBANKS ISD

Benefit Plan Year:

September 1, 2023 - August 31, 2024



**BENEFITS PRESENTATION  
OPEN ENROLLMENT:  
July 24 - August 11, 2023**

# Discussion Points



The Insurance Department web page  
Benefit Enrollment  
What is TRS-ActiveCare?  
What's new with TRS-ActiveCare?  
Medical Plan Options and Benefits  
Employee Premium Rates  
Plans Maximum Cost Comparisons  
Express Scripts Drug Plan  
TRS-ActiveCare BCBS Support  
CFISD's Optional Plans

# Insurance Department Website



## INSURANCE

- Insurance
- Insurance & Benefits

## INSURANCE & BENEFITS

The 2023-2024 CFISD Open Enrollment will be held July 24 – Aug. 11.



Employee Benefits Center

## ONLINE BENEFIT ENROLLMENT

- [First Financial Login Instructions](#)

## BENEFIT INFORMATION 2023 – 2024

- [2023 - 2024 Benefit Bulletin](#)

## STAFF

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# Insurance Department Website

*District Website: [www.cfisd.net](http://www.cfisd.net)*

*Staff → Insurance*

Employee Benefit Center (EBC)

TRS-ActiveCare Plan Designs and Summaries

Monthly Premium Rates

Employee Assistance Program (EAP)

Retirement Plan Information

Insurance Company Links

Agent Contact Information

# Benefit Enrollment Information

- ▶ Enroll through **First Financial Benefits** Online Enrollment System during the Open Enrollment Period from July 24<sup>th</sup> - August 11<sup>th</sup>.
- ▶ <https://my.cfid.net>
  - ▶ Employee Resource Folder
  - ▶ Click Benefit Solver Icon
- ▶ All eligible employees must either enroll in TRS-ActiveCare or decline(waive).
- ▶ **Mid-Year Plan Changes** are made by submitting the change in the benefit system and submitting the required documentation of your “qualifying event” **NO LATER THAN 31 DAYS from the event date.**
- ▶ Instructions are on the Insurance Department web page under “Mid-Year Plan Changes”

You should choose your plan carefully – You may not change plans during a plan year unless you experience a “qualified change of status” that results in a Special Enrollment Event.

# The Importance of Enrolling or Waiving

This will be the ninth year the Affordable Care Act is requiring Providers and Employers to submit form 1094-C to the IRS and form 1095-C to employees for the 2023 tax year.

Employers must offer health insurance to eligible employees and collect declination forms from employees that choose not to enroll in order to satisfy reporting requirements and avoid penalties.

Employees failing to “decline” may not be allowed to enroll later should they experience a Special Enrollment Event.

It is imperative that you log into the First Financial Benefit System and either enroll or waive a medical plan.

# NEW CFISD EMPLOYEES



**Enroll through First Financial online benefit enrollment system during your first 31 days of employment.**



***Example:* Date of Hire: Monday, 8/14/2023**



**Enrollment Eligibility Ends: Wednesday, 9/13/2023**



***Example:* Date of Hire: Tuesday, Jan 2, 2024**



**Enrollment Eligibility Ends: Thursday 02/01/2024**



Access through [my.cfid.net](https://my.cfid.net) / Employee Resource Folder / Benefit Solver

# Mid-year plan changes

Enrollees may make plan changes during the plan year due to a “Special Enrollment Event”

- ▶ Individuals who voluntarily drop coverage because of a Special Enrollment Event during the plan year may re-enroll during the plan year due to experiencing another Special Enrollment Event
- ▶ Changes must be made within 31 days after the event date
- ▶ All changes must be made on the benefit system and your documentation must also be uploaded within 31 for us to approve the change.

**Special enrollment event/family status change:** Marriage, divorce (resulting in a loss of coverage), birth, adoption or placement for adoption, or if an individual with other health insurance coverage involuntarily loses that coverage

**Common law marriage:** Not considered a special enrollment event unless there is a Declaration of Common Law Marriage filed with an authorized government agency



# What is TRS-ActiveCare?



A statewide health care benefits program for employees of school districts, charter schools, regional educational service centers and other educational districts



Established and signed into law in 2001 by Texas Legislature. Today over 90% of Texas school districts participate.



Law authorizes minimum funding levels to help employees pay for coverage (**\$150 from districts; \$75 from state**).



CFISD joined TRS-ActiveCare September 1, 2011.

**1,120 districts/entities participate in TRS-ActiveCare**

# WHAT'S NEW WITH TRS-ACTIVECARE Effective September 1, 2023 ?

- ▶ The Texas Legislature invested \$588.5 million in TRS-ActiveCare for the FY 24-25 biennium to help educators have affordable health coverage.
- ▶ Express Scripts will replace CareMark.
- ▶ Primary, Primary+, and AC2 will have a \$0 co-pay for virtual mental health visits.
- ▶ Primary+ PCP co-pay reduced to \$15. Mental health office visit co-pay reduced to \$15.



# Who is Eligible to Enroll?

To be eligible for TRS-ActiveCare coverage, you must:

- Be employed by a participating district/entity and
- Be an active, contributing TRS member or
- Be expected to work 10 or more hours each week. This includes substitutes and temporary workers.



Health care coverage for public school employees and their families

# Employees NOT Eligible to Enroll in TRS-ActiveCare

- ▶ State of Texas employees or retirees
- ▶ Higher education employees or retirees
- ▶ TRS retirees, either receiving or who have declined coverage under TRS-Care

These individuals are not eligible to enroll for TRS-ActiveCare coverage as employees, but they can be covered as a **dependent** of an eligible employee.

# Eligible Dependents

- ▶ **Spouse** (including a common law spouse and same sex marriage)
- ▶ **Children (married or unmarried) under age 26**
  - ▶ Natural child
  - ▶ Adopted child
  - ▶ Stepchild
  - ▶ Foster child
  - ▶ Child under the employee's legal guardianship
- ▶ **Other eligible dependents**
  - ▶ Other child under age 26 (unmarried) in parent-child relationship
  - ▶ Grandchildren (under age 26)
  - ▶ Disabled children (of any age)



# Special Eligibility Situations

- ▶ If an employee and spouse both work for a participating district/entity:
  - ▶ A spouse may be covered as an employee or as a dependent of an employee
  - ▶ Only one parent can cover dependent children
- ▶ A child (under age 26) employed by a district/entity and is a contributing TRS member can be covered as a dependent on his or her parent's TRS-ActiveCare coverage.
  - ▶ Current law only allows pooling of state and district funds for married couples.
  - ▶ An employee who is covered as a dependent child will not be entitled to state or district funding.

# COINSURANCE & COPAYMENTS



## WHAT IS A DEDUCTIBLE?

It is the fixed dollar amount (i.e., HD Plan Employee Only: \$3,000) of the eligible expenses you are required to pay before your insurance either reimburses you or pays your medical provider directly for a covered service.



## WHAT IS COINSURANCE?

Coinsurance is your share of the costs (i.e., 20%) of a covered health care service - usually a percentage of an eligible expense due **AFTER** you have met your annual deductible.



## WHAT IS A COPAYMENT?

A copayment is a fixed dollar amount (i.e., \$30.00 Copay for an office visit) that you are required to pay for a covered service at the time you receive care. Can also be charged in addition to the deductible and coinsurance

# Plan Overview (Network Level of Benefits)

Services	ActiveCare Primary	ActiveCare HD	ActiveCare Primary+	ActiveCare 2
<b>Deductible</b> In-Network Out-of-Network	<b>\$2,500 / \$5,000</b> This plan does not cover out of network services	<b>\$3,000 / \$6,000</b> <b>\$5,500 / \$11,000</b>	<b>\$1,200 / \$2,400</b> This plan does not cover out of network services	<b>\$1,000 / \$3,000</b> <b>\$2,000 / \$6,000</b>
<b>Out-of-Pocket Maximum</b> In-Network Out-of-Network (includes medical & pharmacy deductibles, co-pays and co-insurance)	<b>\$7,500 / \$15,000</b> Not applicable. This plan does not cover out-of-network services except for emergencies	<b>\$7,500 / \$15,000</b> <b>\$20,250 / \$40,500</b>	<b>\$6,900 / \$13,800</b> Not applicable. This plan does not cover out-of-network services except for emergencies	<b>\$7,900 / \$15,800</b> <b>\$23,700 / \$47,400</b>
<b>Coinsurance</b> In- Network Out-of-Network participant pays (after deductible)	<b>30%</b> Not applicable to this plan	<b>30%</b> 50% of allowed amount	<b>20%</b> Not applicable to this plan	<b>20%</b> 40% of allowed amount
<b>Office Visit Copay</b>	<b>\$30 for primary</b> <b>\$70 for specialist</b>	<b>30%</b> after deductible	<b>\$15 for primary</b> <b>\$70 for specialist</b>	<b>\$30 for primary</b> <b>\$70 for specialist</b>
<b>Preventive Care</b>	<b>Plan pays 100% when using network providers</b>			



# Plan Overview

## (Network Level of Benefits)

Services	ActiveCare Primary	ActiveCare HD	ActiveCare Primary+	ActiveCare 2
High-tech Radiology (CT scan, MRI, nuclear medicine)	30% after deductible	30% after deductible	20% after deductible	20% after deductible + \$100 copay per procedure
Inpatient Hospital	30% after deductible	30% after deductible	20% after deductible	20% after deductible (\$150 facility copay per day)
Freestanding Emergency Room	\$500 copay + 30% after deductible	\$500 copay +30% after deductible	\$500 copay + 20% after deductible	\$500 copay + 20% after deductible
Outpatient Costs	30% after deductible	30% after deductible	20% after deductible	20% after deductible (\$150 facility copay per incident)

# TRS Virtual Health

Your BCBSTX coverage includes TRS Virtual Health choices powered by **Teladoc®** and **RediMD™**.



## Medical

- Cold and flu symptoms
- Allergies
- Bronchitis
- Respiratory infections
- Stomach upset
- Sinus problems
- Skin problems

## Mental Health

- Depressive and anxiety disorders
- Bipolar, schizophrenia and psychotic disorders
- Attention disorders
- Alcoholism and addiction and substance-related disorders



## Medical

- Back Strains
- Ankle Injuries
- Shoulder Strains
- Pulled Muscles
- Contusions/Bruises
- Asthma
- Shortness of Breath
- Infections
- Allergies
- Chemical Exposure

# TRS Virtual Health

- ▶ As a TRS-ActiveCare plan participant you and your eligible dependents have 24/7/365 access to U.S. board-certified doctors via telemedicine.
- ▶ Copay waived for ActiveCare Primary, ActiveCare Primary+, and ActiveCare 2 plans for RediMD; \$30 consultation fee for ActiveCare HD plan. Teladoc is \$12 for Primary, Primary+, and AC2; \$42 for HD.
- ▶ Common diagnosis includes upper respiratory infection, bronchitis, ear infection, influenza, and the common cold.
- ▶ Consults available where the patient is - at home, work, or traveling within the United States.
- ▶ The average call back time is 20-30 minutes or schedule a specific call back time.
- ▶ Diagnosis, recommended treatment and prescriptions ordered when appropriate
- ▶ Contact Information: Teladoc (855) 835-2362 & RediMD (866) 989-2873.

# 2023-2024 CFISD FULL-TIME EMPLOYEE MONTHLY PREMIUMS

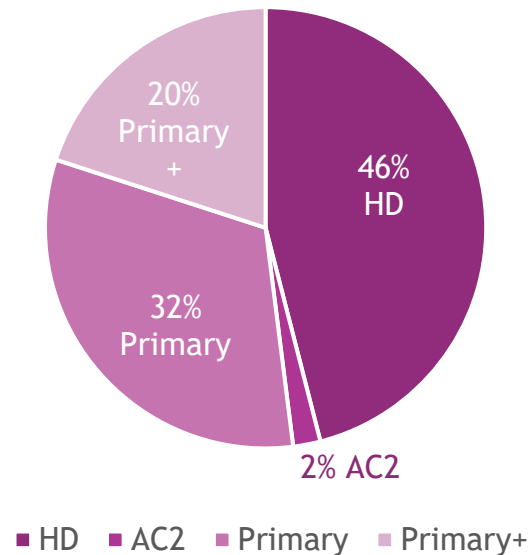
	<b>Full –Time Employee Premium Rates</b>				
<b>Plans</b>	<b>Primary</b>	<b>HD</b>	<b>Primary+</b>	<b>AC2</b>	<b>Scott &amp; White HMO</b>
<b>Coverage Category</b>	<b>Emp Cost</b>	<b>Emp Cost</b>	<b>Emp Cost</b>	<b>Emp Cost</b>	<b>Emp Cost</b>
<b>Employee Only</b>	<b>\$207</b>	<b>\$219</b>	<b>\$276</b>	<b>\$775</b>	<b>\$328.46</b>
<b>Employee + Child(ren)</b>	<b>\$446</b>	<b>\$466</b>	<b>\$562</b>	<b>\$1,197</b>	<b>\$664.98</b>
<b>Employee + Spouse</b>	<b>\$731</b>	<b>\$763</b>	<b>\$870</b>	<b>\$1,941</b>	<b>\$954.74</b>
<b>Employee + Family</b>	<b>\$989</b>	<b>\$1,030</b>	<b>\$1,187</b>	<b>\$2,347</b>	<b>\$1,154.72</b>

# Cypress-Fairbanks Enrollment Summary

## CFISD - April 2023

- ▶ AC HD            3,945 = 46%
- ▶ AC Primary    2,818 = 32%
- ▶ AC Primary+   1,735 = 20%
- ▶ AC 2            171 = 2%
- ▶ Scott & White     7 = 0%
- ▶ **Total**            **8,676**
  
- ▶ Total Eligible Employees   16,423
- ▶ Insured Employees 53%

## Participation



Type of Service	ActiveCare Primary	ActiveCare HD	ActiveCare Primary+	ActiveCare 2
Annual Premiums	\$2,484	\$2,628	\$3,312	\$9,300
Monthly Premiums	\$207	\$219	\$276	\$775
Deductible	\$2,500	\$3,000	\$1,200	\$1,000
Coinsurance	30%	30%	20%	20%
Out of Pocket Maximum	\$7,500	\$7,500	\$6,900	\$7,900


## CFISD Employee Only Premium & Plan Comparison

Type of Service	ActiveCare Primary	ActiveCare HD	ActiveCare Primary+	ActiveCare 2
Annual Premiums	\$11,868	\$12,360	\$14,244	\$28,164
Monthly Premiums	\$989	\$1,030	\$1,187	\$2,347
Deductible	\$5,000	\$6,000	\$2,400	\$3,000
Coinsurance	30%	30%	20%	20%
Out of Pocket Maximum	\$15,000	\$15,000	\$13,800	\$15,800

## CFISD Employee & Family Premium & Plan Comparison

# Split Premium Process

- Must be employed by different districts/entities participating in TRS-ActiveCare
- One Employee chooses employee/spouse or employee/family
- One Employee must decline coverage
- Please contact the Insurance Department if you choose to split. This must be renewed yearly going forward.



### Application to Split Premium

Group Number 085000      [www.trs.state.tx.us/trs-activecare](http://www.trs.state.tx.us/trs-activecare)  
 Toll-Free Customer Service 1-866-355-5999

**Please print  
in blue or  
black ink.**

This form is to be completed by both husband and wife who wish to split the cost of employee and spouse or employee and family coverage while being employed by different districts/entities participating in TRS-ActiveCare.  
 The employee identified in Section 1 is required to select a plan under TRS-ActiveCare. The employee's spouse, identified in Section 3, is required to decline (waive) TRS-ActiveCare coverage. The employing district/entity for EACH person must also complete Sections 2 or 4, as appropriate.  
 The cost for TRS-ActiveCare coverage will be split between the two employers. Each employer will be billed 50 percent of the total cost of the TRS-ActiveCare plan selected by the employee in Section 1.  
 The entity employing the spouse who declined coverage will consider the employee as covered under a group health plan for funding purposes.

SECTION 1 — TO BE COMPLETED BY EMPLOYEE that has elected employee and spouse or employee and family coverage			
Employee Last Name	First Name	Middle Initial	Social Security Number
I have elected employee and spouse or employee and family coverage, and I elect to split the cost of coverage 50/50 with my spouse.			
Employee Signature		Date	

SECTION 2 — TO BE COMPLETED BY EMPLOYER of the employee in Section 1	
District/Entity Name	TRS Reporting Number
Health Benefits Plan (Check One) <b>PPO:</b> <input type="checkbox"/> ActiveCare 1-HD <input type="checkbox"/> ActiveCare 1 (discontinued effective 9/1/2013) <input type="checkbox"/> ActiveCare 2 <input type="checkbox"/> ActiveCare 3 <b>HMO:</b> <input type="checkbox"/> FirstCare <input type="checkbox"/> Scott & White Health Plan <input type="checkbox"/> Valley Baptist Health Plans	Effective Date
I confirm this employee is an active employee enrolled for TRS-ActiveCare coverage. I understand that the cost of this employee's coverage will be split 50/50 between our district/entity and the participating district/entity of the employee's spouse.	
Employer Verification Signature	Date

SECTION 3 — TO BE COMPLETED BY EMPLOYEE that will be declining coverage			
Employee Last Name	First Name	Middle Initial	Social Security Number
I elect to split the cost of coverage 50/50 with my spouse. I have declined TRS-ActiveCare coverage under my participating district/entity and will be covered as a dependent of my spouse as listed in Section 1.			
Employee Signature		Date	

SECTION 4 — TO BE COMPLETED BY EMPLOYER of the employee in Section 3	
District/Entity Name	TRS Reporting Number
I confirm this employee is an active employee who has declined TRS-ActiveCare coverage. I understand that 50 percent of the cost of coverage elected by this employee's spouse will be billed to our district/entity.	
Employer Verification Signature	Date

SECTION 5 — TO BE COMPLETED BY EMPLOYER of the employee in Section 3 to TERMINATE SPLIT PREMIUM	
District/Entity Name	TRS Reporting Number
Please terminate the split premium funding arrangement for this employee.	
Employer Verification Signature	Date
Effective Date	



# Medical Tips and Reminders

- ▶ Remember to get your annual well-visit checkup. Preventative care is covered at 100% on all plans.
- ▶ Always stay in network, as this can save you hundreds, if not thousands, of dollars in medical care.
- ▶ Stand alone Emergency Rooms (ERs) are typically out of network, so be cautious.
- ▶ It is best to go to an Urgent Care or Ready Clinic unless it is truly a life-threatening emergency.
- ▶ CAT Scans and MRIs are cheaper at imaging centers than in hospitals.
- ▶ Always research the cost of your medical needs!

# Prescription Benefits

**Express Scripts - New!**

<https://esrx.com/trsactivecare>



**EXPRESS SCRIPTS®**

## Website Features Include:

- ▶ See Plan Option Details
- ▶ Price a Medication
- ▶ Request a Temporary ID
- ▶ Locate a participating pharmacy
- ▶ Check order status with tracking
- ▶ Enroll in automatic refills

Member Services (844) 367-6108

# Prescription Drug Benefits Summary

	ActiveCare Primary	ActiveCare HD	ActiveCare Primary+	ActiveCare 2
Drug Deductible	Integrated with medical	Integrated with medical	\$200 Brand Deductible	\$200 Brand Deductible
Generics (31-Day Supply/90-Day Supply)	\$15/\$45 copay; \$0 copay for certain generics	You pay 20% after deductible; \$0 coinsurance for certain generics	\$15/\$45 copay	\$20/\$45 copay
Preferred Brand	You pay 30% after deductible	You pay 25% after deductible	You pay 25% after deductible	You pay 25% after deductible
Non-Preferred Brand	You pay 50% after deductible	You pay 50% after deductible	You pay 50% after deductible	You pay 50% after deductible
Specialty (31-Day Max)	\$0 if SaveonSP eligible; You pay 30% after deductible	You pay 20% after deductible	\$0 if SaveOnSP eligible; You pay 30% after deductible	\$0 if SaveONSP eligible; You pay 30% after deductible
Insulin Out-of-Pocket Costs	\$25 copay for 31-day supply; \$75 copay for 61–90-day supply	You pay 25% after deductible	\$25 copay for 31-day supply; \$75 copay for 61–90-day supply	\$25 copay for 31-day supply; \$75 copay for 61–90-day supply



# Ways to Lower your Prescription Drugs

- ▶ Use generic drugs when they are available.
- ▶ SaveOn SP is a drug benefit where participants pay \$0 for eligible specialty drugs on Primary, Primary+, and AC2. It is the replacement for Prudent RX and TRS-ActiveCare reps will reach out to employees to enroll in this benefit.
- ▶ Participants on AC HD and Primary can receive certain preventive generic drugs at no cost. TRS waives the deductible and coinsurance under these two plans for these drugs.
- ▶ When you're on a maintenance drug, it saves you money to fill a 90-day supply, rather than filling a 31-day supply three times. Use Express Scripts Home Delivery or one of the Smart90 participating retail pharmacies.

# TRS-ACTIVECARE Enrollment Support

Plan Overview

Plan Highlights

Provider Locator for Doctors & Hospitals

Prescription Drug Benefits

The screenshot displays the TRS-ActiveCare website interface. At the top left is the TRS-ActiveCare logo, and at the top right is the BlueCross BlueShield of Texas logo. A search bar is located in the top right corner. Below the logos is a green navigation bar with the following menu items: Home, Enrollment Toolkit, Coverage and Benefits, Doctors and Hospitals, Health and Wellbeing, Tools and Resources, Contact Us, and Log In. The main content area features a banner for the "2023-24 Annual Enrollment Season" with the text "Enrollment dates vary by district. Check with your Benefits Administrator for your dates to enroll." and a button labeled "Visit Annual Enrollment Toolkit". Below the banner are three white boxes with green borders, each containing a resource: "Annual Enrollment Guide" (with a button "Review Annual Enrollment Guide"), "Annual Enrollment Videos" (with a button "Watch Annual Enrollment Videos"), and "Provider Finder" (with a button "Find a Doctor").

## What if I Have Questions on TRS-ActiveCare medical or prescription drug plans?

Call TRS-ActiveCare BCBS / Express Scripts customer support for:

- ▶ Claim questions/status
- ▶ Network provider information
- ▶ Membership and eligibility
- ▶ Medical coverage questions
- ▶ Inquiries (telephone and e-mail)
- ▶ ID card requests
- ▶ Transition of care information
- ▶ Help with online tools!



**Customer Service**  
**1-866-355-5999**

# ID Cards

- ▶ **TRS-ActiveCare HD, Primary, Primary+ and AC 2**
  - ▶ HD & AC2 are family ID cards and will only have the subscriber's name on them. You will receive two per household.
  - ▶ Primary & Primary+ ID cards will be issued to each member of the family with the PCP on the card.
  - ▶ Express Scripts Prescription Drug ID cards will be mailed in mid-August based on enrollments as of July 30<sup>th</sup>.
  - ▶ For additional or temporary cards call customer service at 1-866-355-5999.
- ▶ **HMO Plan**
  - ▶ Each individual covered under the plan will receive a card.

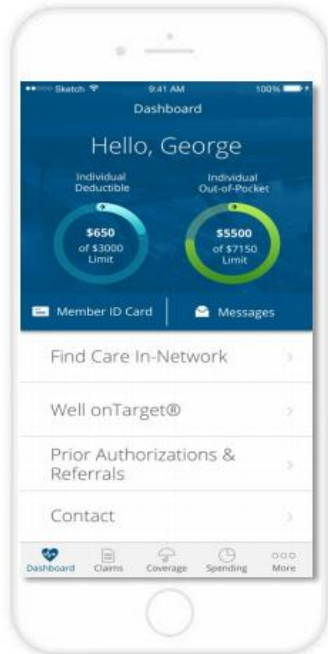
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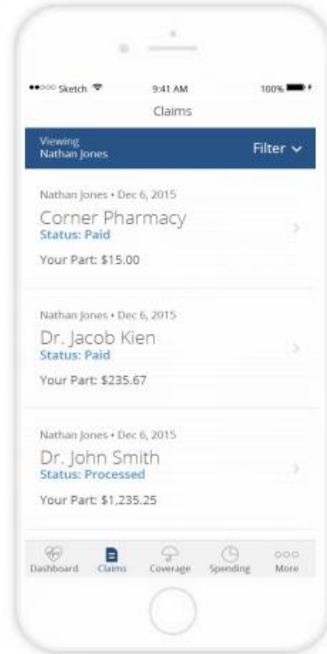
# Mobile Access



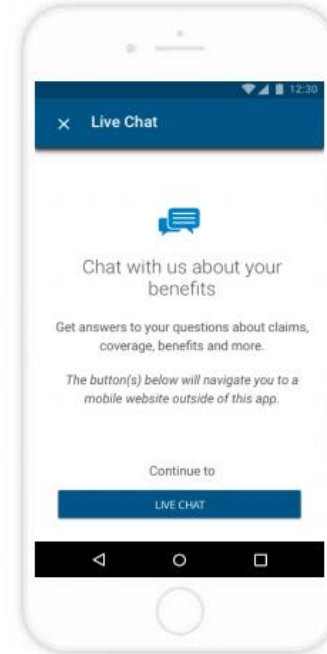
Text\* **BCBSTXAPP**  
to **33633** to get the  
app.



Dashboard



See claims and EOBs



Live chat  
Monday-Friday 7:00AM-6:00PM



# Optional Benefit Plans

Employee Assistance Program  
Voya

Health Saving Account  
HSA Bank

Life Insurance  
Voya

Disability  
Sun Life

Dental  
Cigna Dental PPO & DHMO Dental Plan (Insurance)

MSofA Dent-All Discount Plan (Discount plan)

QCD of America Discount Plan (Discount Plan)

Vision  
Guardian VSP Vision Insurance Plan

Cancer & Specified Disease  
Humana (requires Application Form)

Critical Illness  
Met Life

Hospital Indemnity  
AETNA

Accident  
AETNA

Permanent Life  
Texas Life

Legal  
ARAG

Identity Protection  
iLock



**Contact Your  
GuidanceResources® Program**

Call: 877.533.2363

TTY: 800.697.0353

Online: [guidanceresources.com](http://guidanceresources.com)

App: GuidanceNow<sup>SM</sup>

Web ID: MY5848i

# Employee Assistance Program

District-Paid benefit for all employees.

Confidential solution to life's challenges. 24/7 Support

Confidential Emotional Support

Anxiety, depression, stress, grief,  
relationship/marital conflicts

Work-Life Solutions

Assistance finding child/elder care, hiring  
movers, home repairs

Legal Guidance

Divorce, adoption, family law, wills, trusts

Financial Support

Retirement planning, taxes, mortgages,  
budgeting, debt, bankruptcy

Plan Administered by Voya

Please contact Lalainia Noble with Assured  
Partners for additional information on this  
benefit. (281) 309-9459

# Health Savings Account (HSA)

## What is an HSA?

(See IRS Publication 969)

- Special account owned by an individual and used to pay out-of-pocket expenses (such as deductibles) or to grow as savings for future qualifying expenses
- Funded by the employee
- **Pre-tax payroll deduction, maximum contribution per year of \$3,850 for individual or \$7,750 per family; 55 years of age and over = \$1,000 additional catch-up per year.**
- Portable - meaning the HSA funds always belong to the individual

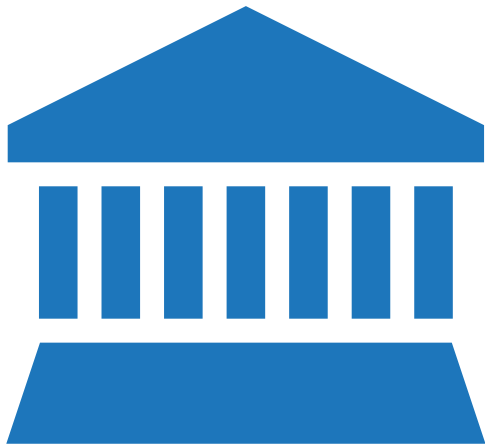
## Who is eligible?

Per IRS rules, any adult can contribute to an HSA if he/she:

- Has coverage under an HSA-qualified high deductible health plan (TRS-ActiveCare HD)
- Has no other first-dollar medical coverage
- Is **NOT** enrolled in Medicare
- Cannot be claimed as a dependent on someone else's income tax return

## Who administers the HSA?

- **HSA Bank**
- Maintenance fee of **\$2.50** per month paid by employee (waived with a balance over \$3,000)
- Employee receives two debit cards and views statement online



# Optional Term Life/AD&D Insurance

District-Paid Basic Life Insurance / AD & D - \$30,000

Optional Life Insurance up to \$500,000

(Guaranteed Issue up to \$250,000 for new hires)

Optional Spouse Life Insurance up to \$125,000

Guaranteed Issue up to \$50,000 for new hires

Optional Child Life Insurance - \$10,000 for each of your children

Guaranteed with a minimum of \$10,000 coverage for employee

Plan Administered by Voya Financial

Please contact Lalaia Noble with Assured Partners for additional information on this benefit (281) 309-9459.

# Disability Insurance

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Plan provides a maximum benefit of 66% of your monthly earnings up to \$7,500 if you are disabled or unable to work.

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Elimination periods apply but are waived on the first day of hospital confinement.

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Plan A: pays for disability injury or illness to the age of 65

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Plan B: pays for disability illness up to 5 years; injury to age 65

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Guaranteed Issue - No health questionnaire

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Plan Administered by Sun Life

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Please contact Audrey Ayers with Station & Ayers for additional information on this benefit. (281) 333-9792

# Dental Insurance

- ▶ Cigna Dental PPO : allows employee to choose provider
- ▶ Cigna Dental DHMO: offers copayment schedule  
Plan Administered by Cigna Dental
- ▶ Please contact Audrey Ayers with Station & Ayers for additional information on these benefits.  
(281) 333-9792
- ▶ MS of A Dent All- Receive discounts on dental services.
- ▶ Please contact Wes Ryan for additional information on this benefit. (281) 894-5080
- ▶ QCD of America - Managed cost plan for dental services.
- ▶ Please contact Member Services at (800) 229-0304 for additional information on this benefit.

# Vision Insurance



- ▶ Provides vision coverage for regular eye exams, lenses, and frames. Includes coverage for single vision, bifocal, trifocal, lenticular, and medically necessary contact lenses.
- ▶ Plan A: frame allowance every other year
- ▶ Plan B: frame allowance every year

Plan Administered by Guardian VSP Vision

Please contact Reginald Lillie for additional information on this benefit.  
(281) 213-9663

# Cancer & Specified Disease

- ▶ This plan pays cash benefits to the covered member when services are received for the treatment of cancer or other disease specifically named in the policy.
- ▶ Includes an annual wellness benefit up to \$100 for cancer screening
- ▶ A health questionnaire must be submitted to pass eligibility

The Plan is Administrated by Humana

Please contact Lou Moore for additional information on this benefit. (281) 380-1488





# Critical Illness - New!

- ▶ Critical illness plan can help with the treatment of costs such as heart attacks, strokes, organ transplants.
- ▶ Benefits are paid directly to you.
- ▶ Plan pays a lump-sum initial benefit upon the first verified diagnosis of a covered condition.
- ▶ Covered conditions include but are not limited to: brain tumors, cancer, coronary artery bypass graft, certain childhood disease, certain infectious disease, heart attacks, or major organ transplants.
- ▶ \$50 Wellness Benefit

Plan administered by Met Life (800) 438-6388



# Hospital Indemnity - New!

- ▶ The Hospital Indemnity plan assist with extra expenses from the result of a hospital stay.
- ▶ The plan pays a lump benefit that can be used for medical costs, insurance deductibles, groceries, transportation, or childcare. The choice is yours!

Plan Administered by AETNA  
(800) 872-3862

# Accident Insurance - New!

- ▶ Pays benefits directly to you so you can determine where to spend the money.
- ▶ May assist with costs associated with concussions, lacerations, broken teeth, ER visits, ICU.

Plan Administered by  
AETNA (800) 872-3862



The background of the slide features a blurred ECG (heart rate) monitor strip on the left side, showing a black line on a grid of orange dots. The rest of the slide has a white background with blue and purple geometric shapes on the right side.

# Permanent Life - New!

- ▶ Companion to life insurance plan
- ▶ Provides life insurance that you can keep for a lifetime.
- ▶ You will own this policy, even if you change jobs or retire.
- ▶ Policy remains in force until you die or up to age 121.

Plan Administered by Texas  
Life (800) 283-9233

# Legal - New!

- ▶ Provide access to professional lawyers.
- ▶ You can consult with a lawyer about having your will prepared, reviewing documents, contesting a traffic ticket, lawsuits, divorce.
- ▶ Expert legal advice at your fingertips!

Plan Administered by  
ARAG (800) 247-4184





# Identity Protection

- ▶ District-Paid Benefit for the basic employee only plan. Employee must opt-in to enroll in this plan.
- ▶ Comprehensive Identity Protection at your fingertips
  - ▶ Complete Cyber Alert protection
  - ▶ Credit Bureau monitoring
  - ▶ Lost wallet protection
  - ▶ \$1M insurance

Plan Administered by iLock 360

Please contact customer service at  
(855) 287-888



# Tax-Deferred Retirement Investment Plans

## Tax Defer Savings for Your Retirement

- ▶ **403(b) Plan:**
  - ▶ Administered by TCG
  - ▶ Start an Account any time of year
- ▶ **457 Plan:**
  - ▶ Administered by TCG
  - ▶ Easier to open than a 403(B) account - just fill out the forms
  - ▶ 15 Investment Choices
  - ▶ Start an Account any time of year (minimum \$5.00 per paycheck)

TCG Customer Service: (800) 943-9179

# Insurance Department Contacts

- ▶ If your last name is A - K, please contact Laura Unger
  - ▶ (281) 897-4138
  - ▶ [Laura.Unger@cfisd.net](mailto:Laura.Unger@cfisd.net)
- ▶ If your last name is L-Z, please contact Robin Rubalcava
  - ▶ (281) 897-4747
  - ▶ [Robin.Rubalcava@cfisd.net](mailto:Robin.Rubalcava@cfisd.net)

If you have technical Issues with the benefit system,  
please contact First Financial Benefits Online  
Enrollment System Customer Service.

(855) 523-8422

Monday - Friday 8:00 am - 5:00 pm





Have a  
healthy  
year!