

BENEFITS BULLETIN



Annual Benefits Open Enrollment Period

MAY 2020

ANNUAL ENROLLMENT PERIOD July 20 – August 14, 2020

The CFISD Annual Enrollment Period opens Monday, July 20 and ends Friday, August 14, 2020. This is the one time per year when you can enroll, change or cancel your benefits without a life event. Do not miss this opportunity. All new enrollments and changes made during this Enrollment Period will be effective September 1, 2020, or the first of the month following insurance company approval (life insurance, cancer & specified disease), whichever is later. The First Financial Benefits Online Enrollment System will be available to all eligible employees via the Internet 24 hours a day, 7 days a week, during the enrollment period. While this enrollment is considered passive, meaning your coverage will roll forward to the new benefit year if you do nothing, we encourage you to log on to the system and confirm your benefit coverage and life insurance beneficiaries.

FIRST FINANCIAL BENEFITS ONLINE ENROLLMENT SYSTEM

This is our fifth year using the First Financial (formerly TCG) Benefits Online Enrollment System. You will use the same login criteria you created last year and provide the answer to your security question. If this is your first time using the system, the registration instructions are below.

To enroll, make changes or cancel your coverage:

Go to: www.cfid.net Staff / HR / Insurance

Click on: **First Financial Benefits Online Enrollment System**

Click on: <http://cfisd.ffga.com>

First Time Login Instructions:

Step 1: click on “Register” to create your account

Step 2: enter Company Key: “cfisd” (all lowercase)

Step 3: enter your Social Security Number

Step 4: enter your Date of Birth

Step 5: enter continue and then create your account

New User Name: At least 8 characters with no spaces.

New Password: At least 8 characters with a combination of numbers and letters and no spaces.

Note: Your user name, password, and answer to security phrase are case sensitive.

Problems Logging In? Contact First Financial Benefits Online Enrollment System Customer Service at (855) 523-8422 Monday – Friday from 8:00 a.m. – 5:00 p.m. for log-in assistance.

WHAT’S NEW FOR 2020-21 BENEFIT PLAN YEAR?

- TRS Board of Trustees established a new carrier, plans, and rates effective September 1, 2020.
- **Blue Cross Blue Shield** will be the new medical carrier.
- 1-HD will now be called **HD**. The Employee + Child and Employee + Family premiums will decrease. There will also be an individual deductible effective 9/1/20, instead of meeting a family deductible for coinsurance to begin.
- Select will now be called Primary+. All tiers for this plan have decreased.
- Guardian Vision will have a new tier to offer frames yearly.
- iLock 360 is comprehensive identify protection plan that will be offered at no cost to employees on the basic employee only plan.

KEY CHANGES FOR 2020-2021

HD Plan:

- Reduced premiums for Employee Child and Employee Family plans.
- New deductible cap for individuals on family plans means coinsurance coverage takes effect sooner.

Primary+ (formerly Select):

- Reduced premiums for all tiers.
- Reduced maximum out-of-pockets.
- Statewide plan; no longer Accountable Care Networks.
- Participants must select a primary care physician (PCP).
- PCP referrals required to see specialists.

Primary (new plan):

- Lowest premium plan.
- Statewide plan similar to Primary Plus.
- Participants must select a primary care physician (PCP).
- PCP referrals required to see specialists.
- The difference between Primary and Primary Plus is the monthly premium is lower, while the deductible and maximum out-of-pocket costs are higher on the Primary Plan.

Medical Access:

- Beginning June 1, 2020, you may view the list of providers for Blue Cross Blue Shield.
- Beginning September 1, 2020, you may sign up for Blue Access.

CY-FAIR ISD OFFERS MEDICAL INSURANCE TO ELIGIBLE SUBS, TEMPS, AND PART-TIME EMPLOYEES AND TO ALL FULL-TIME EMPLOYEES

All full-time employees, regardless of number of hours worked, and all substitute, temporary, seasonal and part-time Cypress-Fairbanks ISD employees working 10 or more hours per week are eligible to enroll in the 2020-2021 TRS-ActiveCare Health Insurance plans during the up-coming open enrollment period. Substitutes and temporary employees can enroll by submitting an enrollment form to the insurance office by end of the open enrollment period. Substitutes and temporary workers should contact the insurance department for the medical enrollment form. TRS retirees are prohibited from enrolling per TRS regulations.

REQUIRED: EMPLOYEES CHOOSING NOT TO ENROLL IN TRS-ACTIVE CARE MUST “WAIVE” (DECLINE) COVERAGE EVERY YEAR.

In compliance with Affordable Care Act regulations, all CFISD employees eligible for medical insurance are required to enroll in one of the TRS-ActiveCare health plans or waive (decline) the coverage in the First Financial Online Enrollment System. The waiver must be submitted each year even if the coverage was waived previously.

GET ANSWERS TO YOUR QUESTIONS AND OBTAIN ENROLLMENT ASSISTANCE



This year, due to COVID-19, we will not conduct in-person open enrollment meetings. The Insurance Department will post a video presentation of the benefits along with a power point slide. Communication will be sent out in July when the presentation is available to view on line.

You may contact the Insurance Department, Benefit Agents, or Blue Cross Blue Shield for any questions you may have. All contact information is on page 10 of this bulletin.

USEFUL INFORMATION TO ENROLL ONLINE:

Your social security number, the dates of birth and social security numbers of all eligible dependents you plan to enroll for coverage, the primary care physicians' names and identification numbers, and the names and contact information for the beneficiaries you name for your life insurance benefits.

ENROLLMENT DEADLINE

All new enrollments, changes and cancellations must be made no later than **Friday, August 14, 2020**. There will be no exceptions to this hard deadline. If you want your Blue Cross Blue Shield (BCBS) ID card or HSA Bank card by September 1, 2020, please enroll by **August 6, 2020**. The Evidence of Insurability form for Cancer and Specified Disease policy application **MUST BE MAILED OR FAXED** to the appropriate underwriting offices no later than **Friday, August 31, 2020**. **Please review your September 15, 2020 paycheck to ensure all deductions are correct.**

VISIT THE INSURANCE DEPT WEBSITE

www.cfishd.net

Staff / HR / Insurance / Your Benefits Station

Go to - “Your Benefit Station” website for plan designs, premium rates, agent contact information, and links to insurance companies and their provider networks. Complete TRS-ActiveCare plan information is available on the 2020-2021 TRS-ActiveCare Enrollment Guide which can be found at:

<http://www.yourbenefitstation.com/html/cy-fair-ppo.htm>

MID-YEAR PLAN CHANGES

Employees enrolling or making changes in their elections during the annual open enrollment period should be aware that they cannot make changes during the benefit plan year, September 1, 2020 through August 31, 2021 unless they have a “Special Enrollment Event”. Some examples of special enrollment events are below.

Change in Marital Status: Marriage or divorce

Newly Eligible Dependents: Birth, adoption, foster care placement

Loss or Gain of Other Coverage: Change in your spouse’s employment status that results in a loss or gain of coverage or loss or gain of Medicaid coverage.

Acquiring Other Coverage: Change in your spouse’s employment status that results in your gaining coverage, or a spouse’s Annual Enrollment Period.

A change in your dependent’s eligibility status due to age: Coverage ends on a child’s 26th birthday.

SPECIAL NOTE: Any changes outlined above must be made within thirty (30) days of the change of status event date and must be evidenced at the time of the change with documented proof of the change. If in doubt as to whether an event qualifies for a change in elections or what is accepted as documentation of the status change, please call the Insurance Department for assistance well in advance of the thirty (31) day deadline. New coverage will be effective retroactively to the first day of the month following the qualifying event date or cancellation date of the former coverage, whichever is later. Any termination of your coverage will be effective the last day of the month in which you submit the cancellation request. To terminate a former spouse or stepchildren’s coverage, please make sure it is documented in the divorce decree.

TRS-ACTIVECARE PRIMARY AND PRIMARY+

TRS-ActiveCare Primary and Primary+ are statewide plans and replace the Select Plan. If you are currently in the Select Plan, you will automatically be moved to the Primary+ Plan. If you want to participate in the Primary Plan, you must select this plan during open enrollment. Both plans will REQUIRE you to select a PCP. This plan is beneficial for employees who prefer a plan with co-pays and who have dependents who live within the state of Texas. There is no out-of-network coverage on this plan.

MEDICAL ID CARDS

All participants in all plans will receive new cards for the plan year effective 9/1/20. If you are enrolled in the HD or AC2 Plans, you will receive one card with the employee's name on it which will cover all family members. If you enroll in the Primary or Primary Plus Plans, you will receive a card for each participant with their PCP on the card. If you would like your cards in hand by September 1, 2020, enroll by August 6, 2020.

DETERMINE IF YOUR MEDICAL PROVIDER ACCEPTS THE TRS-ACTIVECARE PLAN YOU ARE CONSIDERING

Before enrolling in a TRS-ActiveCare Health Plan, employees should determine whether their preferred providers accept the plan they are considering. The BlueCross BlueShield of Texas website at www.bcbstx.com/trsactivecare enables employees to "Find a Doctor or Facility" that accepts the various plans. Employees should also confirm their findings by contacting their providers directly.

ASK EMMA!!!

In previous years, Meet Alex was the tool to assist employees in choosing which plan was the best fit for themselves or their families. Emma takes the place of Alex and will help employees select the best plan for them based on age, gender, address, plan details and plan costs. Emma also evaluates expected doctor visits and current prescription drugs.

MOBILE ACCESS

The BCBSTX App will be available September 1, 2020. To download the app, text BCBSTXAPP to 33633 or search for BCBSTX in the Apple App Store or Google Play. The app will allow you to view claims, explanation of benefits (EOBs), live chat, and view your card.

VIRTUAL HEALTH

Teladoc along with RediMD will be available for virtual health needs. Teladoc can provide medical and mental health needs inclusive of cold, flu, respiratory infections, depressive and anxiety disorder. RediMD can provide medical needs for back strains, shoulder strains, pulled muscles, asthma, and infections.

CAREMARK PRESCRIPTION DRUG PLAN: HOW TO SAVE MONEY ON YOUR PRESCRIPTIONS

- TRS-ActiveCare members with diabetes may qualify for a OneTouch blood glucose meter at no cost. Contact CVS Caremark Member Services Diabetic Meter Team at (800) 588-4456 for details.
- Even though the HD plan normally requires members pay their deductibles before the plan pays for any prescription drugs, participants are not required to pay anything for certain preventive generic drugs when they fill a short term 31-day supply. Many of the drugs on the High Deductible Health Plan Generics Only Preventive Drug List are common maintenance medications. The drug list can be found on the Caremark website at: <http://info.caremark.com/trsactivecare>
- Primary and Primary+ participants can also save money by filling their 60 to 90 day supply generic or preferred brand prescriptions through a Retail-Plus pharmacy. A list of Retail-Plus pharmacies can be found at: <http://info.caremark.com/trsactivecare>

MEDICAL TIPS AND REMINDERS

- Please remember to get your annual well-visit checkup. Preventative care is covered at 100% and only 18% of participants in Texas are taking advantage of this benefit.
- Always try and stay in network for medical services; this can save you hundreds if not thousands of dollars in medical care. Stand alone Emergency Rooms (ERs) are typically out of network, so please be cautious.
- It is best to go an Urgent Care or Ready Clinic unless it is truly a life-threatening emergency that requires an ER visit.
- CAT Scans and MRIs are cheaper at imaging centers than hospitals. Always research the price of your medical needs.

403(b) and 457 TAX SHELTERED SAVINGS PLANS

All CFISD employees, including substitutes and temporary workers are eligible to enroll in a Tax Sheltered Saving Plan to supplement their retirement. Contact TCG Administrators at 1-800-943-9179 for 403(b) and 457 enrollment information or visit the retirement website at cfisd.net under Staff / HR / Retirement.

Employees can enroll in the 457 plan during open enrollment through the First Financial Benefits On-Line Enrollment System. There are six levels of portfolios for employees to choose from ranging from a Preservation Portfolio with the least amount of risk to the Aggressive Growth Portfolio which has the highest level of risk. The Signature Portfolio is the default investment for the 457 Plan with a moderate level of risk.

Financial consultants recommend employees start saving as early as possible. You may start with a contribution as low as \$10 per check and gradually increase or cancel as you choose.

CYPRESS- FAIRBANKS ISD Employee Monthly Premium Rates 2020-2021

TRS-ACTIVECARE PLANS *

MONTHLY PREMIUMS	TRS ActiveCare Primary	TRS ActiveCare HD	TRS ActiveCare Primary+	TRS ActiveCare 2**	SCOTT & WHITE HMO
EMPLOYEE CONTRIBUTION	FULL-TIME EMPLOYEE RATES (MINIMUM 35 HOURS PER WEEK)				
Employee Only	\$161	\$172	\$283	\$699	\$321.10
Employee & Child(ren)	\$406	\$426	\$534	\$1,083	\$602.50
Employee & Spouse	\$653	\$684	\$815	\$1,761	\$946.06
Employee & Family	\$821	\$858	\$1,101	\$2,133	\$1,032.56
EMPLOYEE CONTRIBUTION	PART-TIME EMPLOYEE RATES (15 - 34 HOURS PER WEEK)				
Employee Only	\$161	\$172	\$283	\$699	\$321.10
Employee & Child(ren)	\$469	\$489	\$597	\$1,146	\$658.50
Employee & Spouse	\$716	\$747	\$878	\$1,824	\$1,006.06
Employee & Family	\$924	\$961	\$1,204	\$2,236	\$1,135.56
EMPLOYEE CONTRIBUTION	SUBSTITUTE, TEMP, PART-TIME RATES (10+ HOURS PER WEEK)				
Employee Only	\$386	\$397	\$514	\$937	\$551.10
Employee & Child(ren)	\$695	\$715	\$834	\$1,393	\$883.50
Employee & Spouse	\$1,089	\$1,120	\$1,264	\$2,222	\$1,382.06
Employee & Family	\$1,301	\$1,338	\$1,588	\$2,627	\$1,478.56

DENTAL INSURANCE	Cigna PPO	Cigna DHMO	QCD of America Dental Discount	MSofA Dent-All Discount Plan (See Website for Plan Details)	
Employee Only	\$ 35.92	\$ 9.48	No Charge	Plan A	\$ 10.00
Employee & 1 Dependent	\$ 76.30	\$ 14.88	\$ 6.00	Plan B	\$ 5.00
Employee & 2 Dependent or more	\$ 107.88	\$ 23.50	\$ 9.00	Plan C	\$ 5.00

VISION INSURANCE	Guardian VSP Vision Plan A	Guardian VSP Vision Plan B	DISABILITY INSURANCE	Assurant Employee Benefits
Employee Only	\$ 10.36	\$13.80	PLAN A (see website for plan details / rates)	\$ 5.56 - \$ 316.26
Employee & Child(ren)	\$ 17.80	\$23.70	PLAN B (see website for plan details / rates)	\$ 4.98 - \$ 281.90
Employee & Spouse	\$ 17.44	\$23.22		
Employee & Family	\$ 28.18	\$37.50		

Identity Protection	iLock 360 Plus Plan	iLock 360 Premium Plan	CANCER AND SPECIFIED DISEASE INSURANCE	Humana Insurance Company
Employee Only	\$ 8.00	\$ 15.00	Monthly Rates (Depending on Coverage Selections - See website for Plan Details)	\$9.47 -\$118.39
Employee & Child(ren)	\$ 13.00	\$ 20.00		
Employee & Spouse	\$ 15.00	\$ 22.00		
Employee & Family	\$ 20.00	\$ 27.00		

OPTIONAL LIFE INSURANCE	Optional Employee	Optional Spouse	Optional Child	LONG TERM CARE INSURANCE
Voya Financial	\$.59-\$875.50	\$.30-\$218.88	\$0.42	www.trs.state.tx.us

* FOR POOLING AND SPLIT EMPLOYEE RATES SEE INSURANCE DEPT WEBSITE
** PLAN CLOSED. ONLY FOR CURRENT ENROLLEES.

2020-21 TRS-ActiveCare Plan Highlights Sept. 1, 2020 – Aug. 31, 2021



What's New

- Primary plan with a lower premium and copays
- Primary+ (formerly Select) decreased premiums by up to 8%
- Broader networks of health care providers
- Lower premiums for families with children

Leverage Your \$0 Preventive Care*

- Annual routine physicals (ages 12+)
- Annual mammogram (ages 40+)
- Annual OB/GYN exam & pap smear (ages 18+)
- Annual prostate cancer screening (ages 45+)
- Well-child care (unlimited up to age 12)
- Healthy diet/obesity counseling (unlimited to age 22; ages 22+ get twenty-six visits per year)
- Smoking cessation counseling (8 visits per year)
- Breastfeeding support (six per year)
- Colonoscopy (ages 50+ once every ten years)

*Available for all plans. See benefits guides for more details.

Did You Know

- Our provider search tool will be available in June.
- Choosing a PCP helps you meet your health goals faster.
- Generic medications save money! Ask your provider if your medicine has a generic.

All TRS-ActiveCare participants have **three plan options**. Each is designed with the unique needs of our members in mind.

	NEW! TRS-ActiveCare Primary	TRS-ActiveCare HD	TRS-ActiveCare Primary+
Plan summary	<ul style="list-style-type: none"> • Lower premium • Copays for doctor visits before you meet deductible • Statewide network • PCP referrals required to see specialists • Not compatible with health savings account (HSA) • No out-of-network coverage 	<ul style="list-style-type: none"> • Similar to current 1-HD • Lower premium • Compatible with health savings account (HSA) • Nationwide network with out-of-network coverage • No requirement for PCPs or referrals • Must meet deductible before plan pays for non-preventive care 	<ul style="list-style-type: none"> • Simpler version of the current Select plan • Lower deductible than HD and primary plans • Copays for many services and drugs • Higher premium • Statewide network • PCP referrals required to see specialists • Not compatible with health savings account (HSA) • No out-of-network coverage
If you make no changes during Annual Enrollment, you'll have the following plan...	Only employees that choose this new plan during Annual Enrollment will be enrolled in it.	If you're currently in TRS-ActiveCare 1-HD and you make no change during Annual Enrollment, this will be your plan next year.	If you're currently in TRS-ActiveCare Select and you make no changes during Annual Enrollment, this will be your plan next year.

Total Monthly Premiums

Employee Only	\$366	\$397	\$514
Employee and Spouse	\$1,089	\$1,120	\$1,264
Employee and Children	\$695	\$715	\$834
Employee and Family	\$1,301	\$1,338	\$1,588

Plan Features

Type of Coverage	In-Network	Out-of-Network
Individual/Family Deductible	\$2,800/\$5,600	\$5,500/\$11,000
Conscience	You pay 30% after deductible	You pay 40% after deductible
Individual/Family Maximum Out-of-Pocket	\$8,150/\$16,300	\$20,250/\$40,500
Network	Statewide Network	Nationwide Network
Primary Care Provider (PCP) Required	Yes	No
		Yes

Doctor Visits

Primary Care	\$30 copay	You pay 40% after deductible	\$30 copay
Specialist	\$70 copay	You pay 40% after deductible	\$70 copay
TRS Virtual Health	\$0 per consultation	\$30 per consultation	\$0 per consultation

Immediate Care

Urgent Care	\$50 copay	You pay 20% after deductible	You pay 40% after deductible
Emergency Care	You pay 30% after deductible	You pay 20% after deductible	You pay 20% after deductible
TRS Virtual Health	\$0 per consultation	\$30 per consultation	\$0 per consultation

Prescription Drugs

Drug Deductible	Integrated with medical	Integrated with medical	\$200 brand deductible
Generics (90-Day Supply / 90-Day Supply)	\$15/\$45 copay	You pay 20% after deductible	\$15/\$45 copay
Preferred Brand	You pay 30% after deductible	You pay 25% after deductible	You pay 25% after deductible (\$40 min/\$80 max)/ You pay 25% after deductible (\$105 min/\$210 max)
Non-preferred Brand	You pay 50% after deductible	You pay 50% after deductible	You pay 50% after deductible (\$100 min/\$200 max)/ You pay 50% after deductible (\$215 min/\$430 max)
Specialty	You pay 30% after deductible	You pay 20% after deductible	You pay 20% after deductible (\$200 min/\$900 max)/ No 90-Day Supply of Specialty Medications

This plan is closed and not accepting new enrollees. If you're currently enrolled in TRS-ActiveCare 2, you can remain in this plan.

TRS-ActiveCare 2
<ul style="list-style-type: none"> • Closed to new enrollees • Current enrollees can choose to stay in plan • Lower deductible • Copays for many drugs and services • Nationwide network with out-of-network coverage • No requirement for PCPs or referrals
If you're currently in TRS-ActiveCare 2, and you make no changes during Annual Enrollment, you will remain in TRS-ActiveCare 2 next year.

\$937
\$2,222
\$1,393
\$2,627

In-Network	Out-of-Network
\$1,000/\$3,000	\$2,000/\$6,000
You pay 20% after deductible	You pay 40% after deductible
\$7,900/\$15,800	\$23,700/\$47,400
Nationwide Network	Nationwide Network
No	No

You pay \$30 copay after deductible	You pay 40% after deductible
You pay \$70 copay after deductible	You pay 40% after deductible
\$0 per consultation	\$0 per consultation

\$50 copay	You pay 40% after deductible
You pay a \$250 copay plus 20% after deductible	You pay 40% after deductible
\$0 per consultation	\$0 per consultation

\$200 brand deductible	\$20/\$45 copay
You pay 25% after deductible (\$40 min/\$80 max)/ You pay 25% after deductible (\$105 min/\$210 max)	You pay 25% after deductible (\$105 min/\$210 max)
You pay 50% after deductible (\$100 min/\$200 max)/ You pay 50% after deductible (\$215 min/\$430 max)	You pay 50% after deductible (\$215 min/\$430 max)/ No 90-Day Supply of Specialty Medications

TRS-ActiveCare: What's New and What's Changing

Effective: Sept. 1, 2020

We listened to what your district leadership had to say about providing you enhanced health plan choices. Here are some **key changes you'll see for each plan.**

	Total Premium Before Your District Contribution		Change in Dollar Amount	Key Plan Changes
	Current 2019-20 Total Premium	New 2020-21 Total Premium		
TRS-ActiveCare Primary (New!)	Employee Only	\$386.00		<ul style="list-style-type: none"> • New plan with lowest premium and copays for doctor visits and generic drugs before you meet the deductible. • Statewide network. • Participants must select a primary care provider who will make referrals to specialists.
	Employee and Spouse	\$1,089.00		
	Employee and Children	\$695.00		
	Employee and Family	\$1,301.00		
TRS-ActiveCare HD (formerly 1-HD)	Employee Only	\$378.00	\$19.00	<ul style="list-style-type: none"> • Less than \$20 increase in premiums for employee-only tier and reduced premiums for tiers with children. • New deductible cap for individuals on family plans means coinsurance coverage takes effect sooner. • Increase in deductible (+\$50 individual/+\$100 family) and maximum out-of-pocket (+\$150 individual/+\$300 family) to align with IRS guidelines
	Employee and Spouse	\$1,066.00	\$54.00	
	Employee and Children	\$722.00	-\$7.00	
	Employee and Family	\$1,415.00	-\$77.00	
TRS-ActiveCare Primary+ (formerly Select)	Employee Only	\$556.00	-\$42.00	<ul style="list-style-type: none"> • 8% reduction in premiums for all tiers. • Reduced maximum-out-of-pocket by \$1,000 for individuals and \$2,000 for family plans. • Statewide network. • Participants must select a primary care provider who will make referrals to specialists.
	Employee and Spouse	\$1,367.00	-\$103.00	
	Employee and Children	\$902.00	-\$68.00	
	Employee and Family	\$1,718.00	-\$130.00	
TRS-ActiveCare 2 (closed to new enrollees)	Employee Only	\$852.00	\$85.00	<ul style="list-style-type: none"> • TRS-ActiveCare 2 has experienced a decline in membership and a steady rise in high cost claims. To keep pace with higher health care costs, premiums for TRS-ActiveCare 2 will increase by 10%. • This plan is closed to new enrollees.
	Employee and Spouse	\$2,020.00	\$202.00	
	Employee and Children	\$1,267.00	\$126.00	
	Employee and Family	\$2,389.00	\$238.00	

At a Glance

	Primary	HD	Primary+
Premiums	Lowest	Lower	Higher
Deductible	Mid-range	High	Low
Copays	Yes	No	Yes
Network	Statewide	Nationwide	Statewide
PCP Required?	Yes	No	Yes
HSA-eligible?	No	Yes	No



2020 – 2021 BENEFIT PLAN OPTIONS

Benefit Plans	Features	Monthly Rates
TRS-ActiveCare Medical Insurance	Health Plan Administrator – Blue Cross Blue Shield (BCBS) Pharmacy Benefit Manager – CVS Caremark	Please see page 4 for rates. http://www.cfid.net/dept2/insur/egmi.htm
Health Savings Account (HSA) HSA Bank	Participants must be enrolled in the qualifying high deductible TRS-ActiveCare HD medical plan and NOT enrolled in Medicare. Tax-Deferred Health Savings Account allowing you to make pre-tax contributions into a savings account set up with HSA Bank to pay for eligible medical expenses. HSA Bank monthly administrative fee: \$2.50 HSA funds may be used to pay for out of pocket eligible medical expenses incurred by anyone you claim as a dependent on your income tax return. Unspent funds remain yours to spend in the future for eligible expenses.	2020 Annual Pre-Tax Allowable Contributions: Emp Only \$3,550 Emp + Dep \$7,100 Individuals age 55 or over may make an additional \$1,000 per year catch-up contribution. http://www.cfid.net/dept2/insur/egmi_savings.htm
Basic Life / AD&D (Accidental Death and Dismemberment) Insurance Voya Financial	Basic life benefit is \$30,000; AD&D benefit is \$30,000 Benefit reduces to \$19,500 at age 65 and to \$15,000 at age 70 Additional Benefits: Accelerated Death Benefit <ul style="list-style-type: none"> • 75% coverage for life Expectancy less than 12 months Everest Funeral Planning Travel Assistance	District Paid Benefit for all part-time and full-time employees working a minimum of 15 hours per week. Have you named your beneficiary? Name or change your life beneficiary on the First Financial Benefits Online Enrollment System at any time.
Optional Life / AD&D Insurance (Group Policy # 69486-0) Voya Financial	Employee - Coverage amounts up to \$500,000; \$10,000 minimum. Spouse - Coverage up to 100% of employee's coverage; \$125,000 maximum; \$5,000 minimum. Child - Coverage of \$10,000 available for each dependent child. GUARANTEED ISSUE AMOUNTS <ul style="list-style-type: none"> • Employee - \$250,000 as a new hire; \$10,000 each year thereafter up to \$500,000 maximum • Spouse - \$50,000 as a spouse of a new hire; \$5,000 each year thereafter to a \$125,000 maximum • Child(ren) - \$10,000 **CFISD spouses cannot cover each other under spouse life. All coverage requests that exceed the Guaranteed Issue amounts require an Evidence of Insurability form (EOI), a health questionnaire, and will require approval from Voya Financial .	Monthly Rates Optional Employee: \$.59-875.50 Optional Spouse: \$.30-218.88 Optional Child: \$.42 http://yourbenefitstation.com/cfid/voya-financial-life-insurance.html
iLock 360 Identity Protection	Comprehensive Identity Protection at your fingertips. <ul style="list-style-type: none"> • Complete CyberAlert protection • Credit bureau monitoring • Lost wallet protection • \$1M insurance CyberAlert Internet Surveillance scours websites, chat rooms, and bulletin boards 24/7/365 to identify trading or selling of your personal information.	Monthly Rates Basic Employee Only: District Paid Plus/Premium Plan Rates Emp \$8.00/\$15.00 Emp+ Children \$13.00/\$20.00 Emp + Spouse \$15.00/\$22.00 Emp + Fam \$20.00/\$27.00

2020 – 2021 BENEFIT PLAN OPTIONS (continued)

<p>PPO Dental Plan Cigna Dental</p>	<p>A dental insurance plan allowing employees to choose your own dental provider and specialists.</p> <p>Coinsurance Percentages: Type I (Preventive Services) = 100%; No waiting period for services. Type II (Basic Restorative Services) = 80%; No waiting period for Services. Type III (Major Services) = 50%; No waiting period for services. Type IV (Orthodontia) = 50%; 12 month waiting period.</p> <p>Annual maximum benefit per member = \$2,000</p> <p>Orthodontia lifetime maximum = \$1200</p> <p>Vision Discount Services offered by Cigna Vision Network.</p>	<p>Emp Only \$ 35.92 Emp + 1 Dep \$ 76.30 Emp + 2 or more \$107.88 Dependents</p>
<p>DHMO Dental Plan Cigna Dental</p>	<p>A Dental Health Maintenance Organization (DHMO) offering a Copayment schedule for services received from their network dental providers.</p> <p>Members MUST indicate their selected provider's network ID number in the online enrollment system at the time of their enrollment.</p> <p>No deductibles, waiting periods, or annual maximums.</p> <p>Vision Discount Services offered by Cigna Vision Network. Additional Benefits: Identity Theft Program, Healthy Rewards</p>	<p>Emp Only \$ 9.48 Emp + 1 Dep \$ 14.88 Emp + 2 or more \$ 23.50 Dependents</p>
<p>Dental & Vision Discount Plan MSofA Dent-All</p>	<p>Receive discounts on dental services, orthodontics, cosmetic, oral surgery, prosthodontics and more.</p> <p>Members pay a monthly membership fee to receive services at discounted prices that are 20% to 80% off the usual and customary fees.</p> <p>Members must use plan providers.</p> <p>Vision Discount Services offered by U.S. Vision Plan.</p> <p>Neighborhood Pharmacy Discounts available to members.</p> <p>Plan A: Employee + Dependents (Dental, Vision & Prescription) Plan B: Employee + Dependents (Dental & Vision) Plan C: Employee + Dependents (Vision & Prescription Discounts)</p>	<p>Plan A \$10.00 Plan B \$ 5.00 Plan C \$ 5.00</p>
<p>Dental & Vision Discount Plan QCD of America</p>	<p>A managed cost plan in which subscribers pay for dental services received from a provider in the QCD Affiliated Dentist Network.</p> <p>The subscriber pays for services at a discounted rate based upon the QCD fee schedule.</p> <p>Vision Discount Services offered by Davis Vision through their Clear Vision Discount Program.</p> <p>Wellness program provides discount on prescriptions for family and pets.</p>	<p>Emp Only \$ 0.00 Emp + 1 Dep \$ 6.00 Emp + 2 or more \$ 9.00 Dependents</p>

2020 – 2021 BENEFIT PLAN OPTIONS (continued)

Benefit Plans	Features	Monthly Rates																
<p>Disability Insurance Plan</p> <p>Sun Life (acquired by Assurant)</p>	<p>Provides a maximum benefit of 66 2/3% of your monthly earnings up to \$7,500 if you are disabled and unable to work. Treats pregnancy as any other illness. You do not have to use your leave days prior to filing a claim.</p> <p>Elimination Period options (in days) for injury/sickness: 0 days for injury/7days for sickness; 14 days/14 days, 30 days/30 days.</p> <p>Elimination periods are waived on first day of hospital confinement.</p> <p>Plan A pays for disabling injury or illness to the age of 65. Plan B pays for disabling illness up to 5 years; injury to age 65. (Benefit available over age 65 – reduced benefit schedule applies)</p> <p>GUARANTEED ISSUE – NO health questions to answer. A 3 month / 12 month Pre-Existing Condition Exclusion Limitation exists for the first 12 months after the effective date of coverage. Pre-existing condition means a condition for which you received medical treatment, consultation, care or services including diagnostic measures, or took prescribed drugs in the 3 months prior to your effective date of coverage; and the disability begins in first 12 months of coverage.</p> <p>CURRENT ENROLLEES – NO health questions to change your benefit. Pre-existing will apply only to the increased benefits.</p>	<p>Plan A Rates: \$5.56 - \$316.26</p> <p>Plan B Rates: \$4.98 - \$281.90</p> <p>Employees should re-evaluate their monthly disability benefit at least every two years to keep their benefit in pace with their salary.</p>																
<p>Cancer & Specified Disease Insurance</p> <p>Humana</p>	<p>I've got a major medical plan; why do I need a cancer plan?</p> <p>The plan pays cash benefits directly to the covered member when services are received for the treatment of cancer or other diseases specifically named in the policy. Includes an Annual Wellness Benefit of up to \$100 for cancer screening. Employees having a family history of cancer or a personal life-style risk (smoking or other exposure) might want to consider the policy.</p> <p>A health questionnaire must be answered to pass eligibility. Bay Bridge Administrators will mail all employees that enroll an application. Applications must be mailed back or faxed to Bay Bridge Administrators by August 31, 2020.</p>	<p>Monthly Rates: \$9.47 - \$118.39</p> <p>Depending on coverage selections</p>																
<p>Return Applications to: Bay Bridge Administrators, Attn: Underwriting, PO Box 161630, Austin, TX 78716 or FAX TO: (512) 275-9352</p>																		
<p>Guardian VSP Vision Insurance</p>	<p>Provides vision coverage for regular eye exams, lenses and frames. Includes coverage for single vision, bifocal, trifocal, and lenticular, and medically necessary contact lenses. Provides a contact lens discount program.</p> <p>Plan A – Frame allowance every other year. Plan B – Frame allowance yearly.</p>	<p>Plan A Rates:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding-left: 20px;">Emp Only</td> <td style="text-align: right;">\$ 10.36</td> </tr> <tr> <td style="padding-left: 20px;">Emp + Child(ren)</td> <td style="text-align: right;">\$ 17.80</td> </tr> <tr> <td style="padding-left: 20px;">Emp + Spouse</td> <td style="text-align: right;">\$ 17.44</td> </tr> <tr> <td style="padding-left: 20px;">Emp + Family</td> <td style="text-align: right;">\$ 28.18</td> </tr> </table> <p>Plan B Rates:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding-left: 20px;">Emp Only</td> <td style="text-align: right;">\$ 13.80</td> </tr> <tr> <td style="padding-left: 20px;">Emp + Child(ren)</td> <td style="text-align: right;">\$ 23.70</td> </tr> <tr> <td style="padding-left: 20px;">Emp + Spouse</td> <td style="text-align: right;">\$ 23.22</td> </tr> <tr> <td style="padding-left: 20px;">Emp + Family</td> <td style="text-align: right;">\$ 37.50</td> </tr> </table>	Emp Only	\$ 10.36	Emp + Child(ren)	\$ 17.80	Emp + Spouse	\$ 17.44	Emp + Family	\$ 28.18	Emp Only	\$ 13.80	Emp + Child(ren)	\$ 23.70	Emp + Spouse	\$ 23.22	Emp + Family	\$ 37.50
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Emp + Family	\$ 37.50																	
<p>TRS Group Long Term Care Insurance</p>	<p>This benefit is available to all TRS members and their family members.</p> <p>No Open-Enrollment Period; you can apply for coverage at any time. Underwritten by Genworth Life Insurance Company. Go to the TRS website at: www.trs.state.tx.us for information.</p>	<p>Premiums are based on plan selections and age of the insured.</p>																

DO YOU NEED SOME HELP?

The district's Insurance Department staff is always available to assist you with your benefits questions and concerns. We are located in the Instructional Support Center (North), 10300 Jones Rd., Suite 335, phone, **(281) 897-3882**. Additional assistance with your plan selections may be received by contacting the following companies directly or by visiting the **Insurance Department website**. The website has links to each benefit plan administrator and their provider networks.

FOR ASSISTANCE				
Benefit	Provider	Contact	Phone Number	Website or Email
CFISD Insurance Dept.	EE's Last Name A – K	Laura Unger	(281) 897-4138	www.cfisd.net/
	EE's Last Name L – Z	Robin Rubalcava	(281) 897-4747	<i>Go to: Staff / HR / Insurance</i>
Medical	TRS-ActiveCare Plans BlueCross BlueShield	Customer Service	(866) 355-5999	www.bcbstx.com/trsactivecare
Prescription Drug	CVS Caremark			
Medical HMO (must reside in the service area)	Scott & White HMO	Customer Service	(800) 321-7947	https://trs.swhp.org
HSA (Health Savings Account)	Only available to those enrolling in: TRS-ActiveCare 1-HD (all tiers of coverage)		(800) 357-6246	For HSA information: www.hsabank.com For enrollment procedures: http://www.cfisd.net/dept2/insur/egmi_savings.htm
Dental Insurance	Cigna PPO & DHMO	Audrey Ayers (Station & Ayers)	(281) 333-9792	audrey@yourbenefitstation.com
Discount Dental	MSofA Dent-All	Wes Ryan Customer Service	(281) 894-5080 (866)362-1517	wryaninsurance@hotmail.com
	QCD of America	Member Services	(800) 229-0304 ext. 170	www.qcdofamerica.com
Disability Insurance	Sun Life	Audrey Ayers Customer Service	(281) 333-9792 (800) 877-2701	audrey@yourbenefitstation.com
Cancer & Specified Disease Insurance	Humana	Lou Moore Customer Service	(281) 380-1488 (800) 845-7519	ritagmoore@yahoo.com
Basic Life & AD&D and (Optional) Life Insurance	Voya Financial	Tammy Southivorarat (Kainos Partners) Customer Service	(281) 810-4943 (877) 886-5050	tammy@kainos-partners.com
Guardian Vision Insurance	Guardian Life Insurance	Reginald Lillie Customer Service	(281) 213-9663 (888) 600-1600	rlillieins@sbcglobal.net
Identity Protection	iLock 360	Customer Service	(855) 287-888	www.iLOCK360.com
TRS Group Long Term Care Insurance	Genworth Life Insurance	Customer Service	(866) 659-1970	www.trs.state.tx.us
Tax-Deferred Investments	403(b) and 457 Plan	TCG Administrators	(800) 943-9179	www.region10rams.org