

Employee Benefit Guide



MONTE VISTA SCHOOL DISTRICT

Plan Year | 2021





Our people are our most important resource and the key to our success.

That's why at Monte Vista School District we are committed to offering a comprehensive employee benefits program that helps our employees and their families stay healthy, feel secure and maintain a work/life balance.

About This Guide

This guide includes information about your benefit options and provides a summary of the general provisions of your insurance plan benefits. For more detailed information, please see the Summary of Benefits Coverage (SBC), Summary Plan Description (SPD) or Certificate of Coverage booklet for each plan. Official plan documents govern how the plans are administered.

If you have any questions after reading this guide, please contact the District Office.

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Table of Contents

EASE Online Enrollment Instructions	Page 4
Medical Insurance – Cigna	Page 5
Medical Insurance – Telehealth - Cigna	Page 6 & 7
Medical Expense Reimbursement – MERP	Page 8 & 9
Medical, and HSA ID Cards	Page 10
EZMerp Details and ID Card	Page 11 & 12
Prescription Drug Savings Programs	Page 13
Advocacy Program – Cigna	Page 14
On-Demand Fitness - Wellbeats	Page 15
Dental Insurance – AXA	Page 16 & 17
Basic Vision Insurance – Reliance Standard	Page 18
VSP Choice Vision Insurance – Reliance Standard	Page 19
Short Term & Long Term Disability, Life and AD&D– Lincoln Financial Group	Page 20
Additional Benefits – Lincoln Financial Group	Page 21 & 22
Contact Information	Page 23

Eligibility and Enrollment Information

Eligibility

If you are a Monte Vista School District full-time employee working 30+ hours a week, you are eligible to enroll in benefit plans. You may also cover your eligible dependents including: your legal spouse, your domestic partner, and/or your dependent child(ren)/stepchild(ren) or children of your domestic partner up to age 26 or any age if they are incapable of self-support due to a physical or mental disability.

New Hire Enrollment

The benefits you elect will become effective on the first day of the month following 30 days of your date of hire.

During Open Enrollment (June)

The benefit plan year for Monte Vista School District is July 1 to June 30 of each year. You generally have one opportunity each year to make changes to your benefits during the open enrollment period in May for a July 1 effective date.

EASE Open Enrollment

To enroll online during the annual open enrollment period, you will need to utilize EASE. A welcome letter will arrive in your inbox with a link and instructions. Your open enrollment window will be May 3rd to May 17th, 2021. All eligible employees are required to log in and confirm, change, or waive coverage during the open enrollment window. Should you have questions please reach out to Candy with the District or Hudson at Assured Partners. Contact information can be found on the last page of this guide.

When to Enroll or Make Changes

Under IRS rules, your enrollment choices or declination of coverage when you are first eligible will remain in place until the next Open Enrollment, period unless you have a qualified change in status. Qualified status changes include marriage, divorce or legal separation, the birth or adoption of a child, death, change in child's dependent status due to attained age 26, or your spouse's gain or loss of employment, Medicare eligibility.

Only certain types of changes may be permitted, and all changes must be made within 30 days of the qualified status change and be consistent with the change.

Ease-Online Enrollment system

How to Enroll online?

Monte Vista School District has adopted an online enrollment system called EASE. This is where you can enroll in benefits for you and your family. Below is a guide on how to enroll in benefits, as well as a link that gives you a step by step video on how to enroll: <https://youtu.be/OozXCYSZArw>

The link to your website is: <https://monte.ease.com/>

1. Log in to Ease per the instructions you have received from your HR administrator or Broker. For optimal performance it is recommended that you use

Chrome  or Firefox  as your browser.

2. Click  to begin your enrollment.

3. Follow the prompts on each page to complete your benefit enrollment.

Click  to proceed to the next section.

4. Verify your personal information is correct and enter in any of your dependent information.

5. If requested during the enrollment process, provide any emergency contacts, employment documents, Medicare status, previous/current coverage and/or health information.

6.  your benefit by selecting  or  for each plan.

Click  to proceed to the next benefit.

7. You will then be prompted to provide any missing data. Once you have done this, you will be able to review and sign your forms using your mouse or mobile device 

8. Before you review your forms



Create your signature
Start typing your full name as it appears below.

Your Name Here

type your name.

THEN



Sign your signature
Create your signature
Some carriers require a hand drawn signature. Please make your signature in the box below.

[Handwritten Signature]

and follow the prompts to finish.

Base Medical Insurance: Cigna HSA (oAP Plus Network)



The Open Access network provides members with access to a large national network of quality providers. Please visit www.mycigna.com to confirm your provider(s) are in the network before you seek services.

CIGNA Group #611227		
Plan Features	In-Network Benefits	Out-of-Network Benefits
Calendar Year Deductible	\$6,750 Individual \$13,500 Family	\$13,500 Individual \$27,000 Family
Coinsurance	Plan pays 100%	Plan pays 50%
Calendar Year Out-of-Pocket Maximum (OOPM)	\$6,750 Individual \$13,500 Family	\$13,500 Individual \$27,000 Family
Lifetime Maximum	Unlimited	Unlimited
Office Visit PCP / Specialist	100% after deductible	50% after deductible
Preventive Care	100% after deductible	50% after deductible
Telemedicine/Telehealth MDLive	100% after deductible (\$55 Charge)	Not Covered
Urgent Care	100% after deductible	50% after deductible
Emergency Services	100% after deductible	100% after in-network deductible
Ambulance	100% after deductible	50% after deductible
Inpatient Hospitalization	100% after deductible	50% after deductible
Outpatient Surgery	100% after deductible	50% after deductible
Chiropractic Services (12 visit limit)	100% after deductible	50% after deductible
Advanced Radiology (MRI, PET, CT Scan)	100% after deductible	50% after deductible
Lab & X-Ray	100% after deductible	50% after deductible
Durable Medical Equipment	100% after deductible	50% coinsurance
Prescription Drug Coverage (Rx) Tier 1 – Generic Tier 2 – Brand Tier 3 – Non- Formulary Tier 4 – Specialty	Retail (30-day supply) 100% after deductible 100% after deductible 100% after deductible 100% after deductible	Not Covered
Prescription Drug Coverage (Rx) Tier 1 – Generic Tier 2 – Brand Tier 3 – Non- Formulary Tier 4 - Specialty	Home Delivery (90-day supply) 100% after deductible 100% after deductible 100% after deductible Not Covered	Not Covered

2021 Cigna Plan updates:

- All Specialty medications must be filled via Cigna Specialty Home Delivery
- All Pharmacy will be on Express Scripts claims engine – New ID cards for everyone

Medical Insurance: Cigna Telehealth



WHEN LEAVING THE HOUSE IS EASIER SAID THAN DONE.

Get care whenever and wherever with minor medical and behavioral/mental health virtual care.



- › Access care from anywhere via video or phone.
- › Get minor medical virtual care 24/7/365 – even on weekends and holidays.
- › Schedule a behavioral/mental health virtual care appointment online in minutes.
- › Connect with quality board-certified doctors and pediatricians as well as licensed counselors and psychiatrists.
- › Have a prescription sent directly to your local pharmacy, if appropriate.

Minor medical virtual care

Board-certified doctors and pediatricians can diagnose, treat and prescribe most medications for minor medical conditions, such as:

- › Acne
- › Allergies
- › Asthma
- › Bronchitis
- › Cold and flu
- › Constipation
- › Diarrhea
- › Earaches
- › Fever
- › Headaches
- › Infections
- › Insect bites
- › Joint aches
- › Nausea
- › Pink eye
- › Rashes
- › Respiratory infections
- › Shingles
- › Sinus infections
- › Skin infections
- › Sore throats
- › Urinary tract infections

MDLIVE providers can also conduct virtual wellness screenings.

Connect with virtual care your way.

- › Contact your in-network provider or counselor
- › Talk to an MDLIVE medical provider on demand on **myCigna.com**
- › Schedule an appointment with an MDLIVE provider or licensed therapist on **myCigna.com**
- › Call MDLIVE 24/7 at 888.726.3171

Behavioral/Mental health virtual care

Licensed counselors and psychiatrists can diagnose, treat and prescribe most medications for nonemergency behavioral/mental health conditions, such as:

- › Addictions
- › Bipolar disorders
- › Child/Adolescent issues
- › Depression
- › Eating disorders
- › Grief/Loss
- › Life changes
- › Men's issues
- › Panic disorders
- › Parenting issues
- › Postpartum depression
- › Relationship and marriage issues
- › Stress
- › Trauma/PTSD
- › Women's issues

To connect with an MDLIVE virtual provider, visit **myCigna.com**, locate the "Talk to a doctor or nurse 24/7" callout and click "Connect Now."

To locate a Cigna Behavioral Health provider, visit **myCigna.com**, go to "Find Care & Costs" and enter "Virtual counselor" under "Doctor by Type," or call the number on the back of your Cigna ID card 24/7.



Medical Insurance: Cigna Telehealth Continued & Additional Services

Cigna Telehealth Virtual Visits

www.MDLIVEforCigna.com 1-888-726-3171

HDHP – \$55 charge



MDLIVE for Cigna®

Signing up is easy!

1. Set up and create an account with MDLIVE
2. Complete a medical history using their “virtual clipboard”
3. Download MDLive app to your smartphone/mobile device

Additional Cigna Services:

Omada for Cigna – program is administered by Omada Health Inc.

Let Cigna help you manage your diabetes and build healthier, long-lasting habits Omada is a digital lifestyle change program designed to help you lose weight, gain energy, and reduce the risks of type 2 diabetes and heart disease.

- The program surrounds you with the tools and support you need to make lasting, meaningful changes to the way you eat, move, sleep, and manage stress – one small step at a time.
- You'll receive the program at no additional cost if you or your covered adult dependents are enrolled in the company medical plan offered through Cigna, are at risk for type 2 diabetes or heart disease and are accepted into the program.

Employee Assistance Program (EAP) services are in the addition to, not instead of health plan benefits. These services are separate from health plan benefits and do not provide reimbursement for financial losses. Customers are required to pay the entire discounted charge for any discounted legal and/or financial services. Legal consultations related to employment matters are excluded.

Call 24/7 live assistance at 877-231-1492 or the number on your ID card

Visit www.mycigna.com

Self-Service Digital Tools

Prevail - A digital therapeutics program designed by experience health care providers to help employee take control of the stresses of everyday life. It's loaded with interactive video lessons and one-on-one coaching to help with depression and anxiety provided by independent companies/entities and not by Cigna.

Happify - A self-directed program with activities, science-based games and guided meditations. These are designed to help employees reduce stress and anxiety, gain confidence, defeat negative thoughts and boost overall health performance.

Cigna Mobile App and www.mycigna.com

The myCigna® app uses one-touch access, making it easy for you to personalize, organize and access your health information on the go. This app is a must-have for Cigna customers. Features may vary based on your specific plan type and individual security profile.

- ID cards -View, print or send ID card information (front and back) right from your mobile device
- Claims - View, search and bookmark claims quickly
- Account balances- Instantly access your deductibles, out-of-pocket maximums
- Cigna Home Delivery Pharmacy - Manage your prescriptions right from your mobile device
- Drug search - Look up drugs and compare actual costs at pharmacies nationwide
- Provider search - Research quality and cost of in-network doctors, dentists and pharmacies
- Medical procedure search - Look up common procedures and compare costs of providers
- What's covered - View your plan coverage and details
- Health incentives - Track progress toward achieving your goals and awards
- Languages supported - Available in Spanish and English



Medical Insurance & MERP: How does it work?

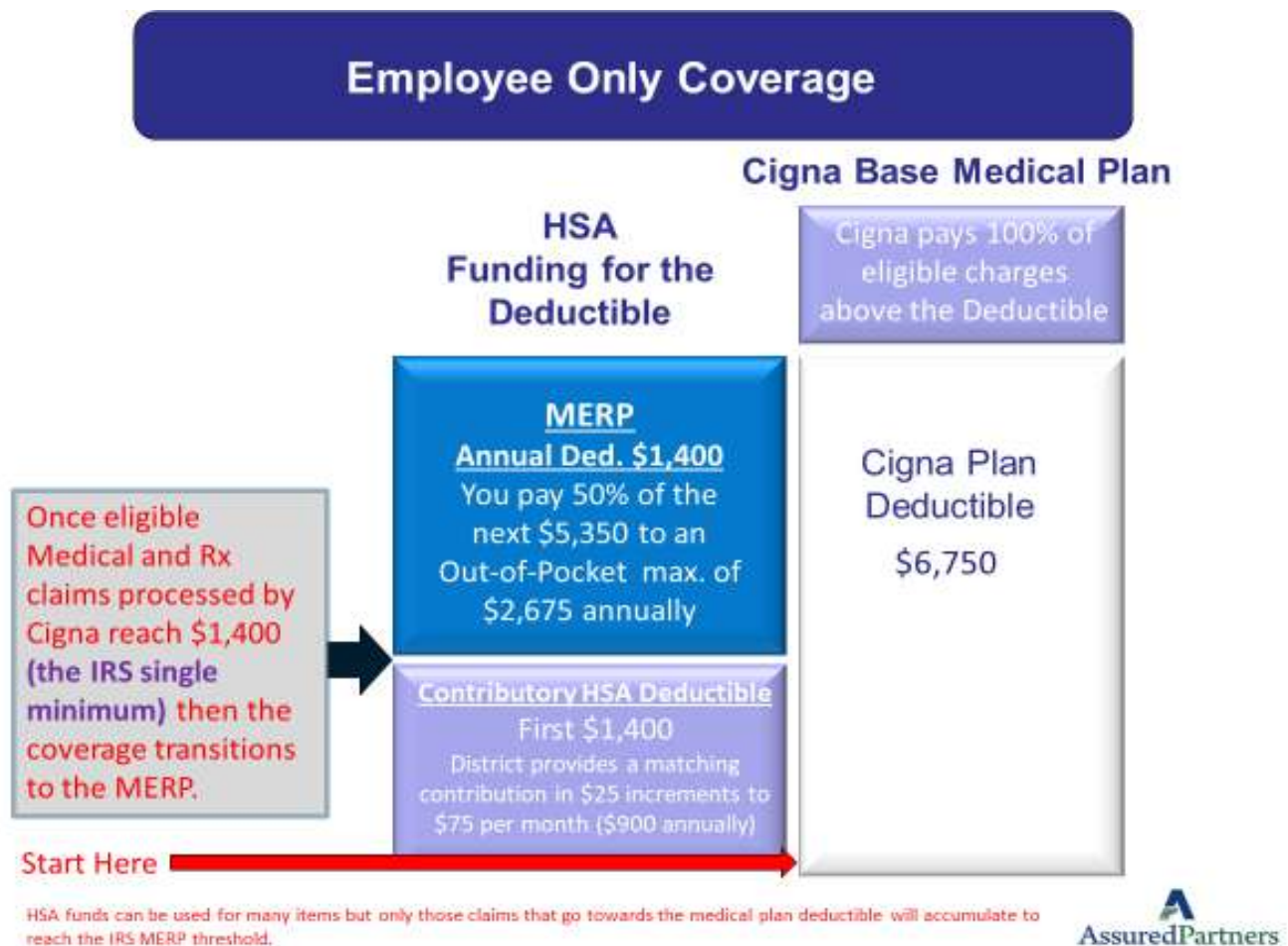


Your medical plan has a \$6,750 deductible for individual coverage or \$13,500 for family coverage, which means the plan does not begin to pay for claims until the deductible is met. Once you have met your plan year \$6,750 or \$13,500 deductible, the plan will pay for all covered services for the remainder of the year at 100%.

There are two components to your medical plan which will help you pay for claims:

- (1) your Health Savings Account (HSA), which is funded both by you and Monte Vista School District and
- (2) your Medical Expense Reimbursement Plan (MERP)

The following illustrations show how your HSA and MERP accounts work together to help offset your out-of-pocket costs before you meet your deductible:



Your HSA funds are used to help pay for your first **\$1,400** claims (**Your individual HSA deductible**). As a reminder, the district matches your contribution in \$25 increments up to \$75 a month, or \$900 annually.

You will only have access to funds that have already been deposited into your account to pay for claims. Once you reach \$1,400 in claims, the MERP will pay 50% of the next **\$5,350** in claims until you reach your \$6,750 deductible/out of pocket maximum.

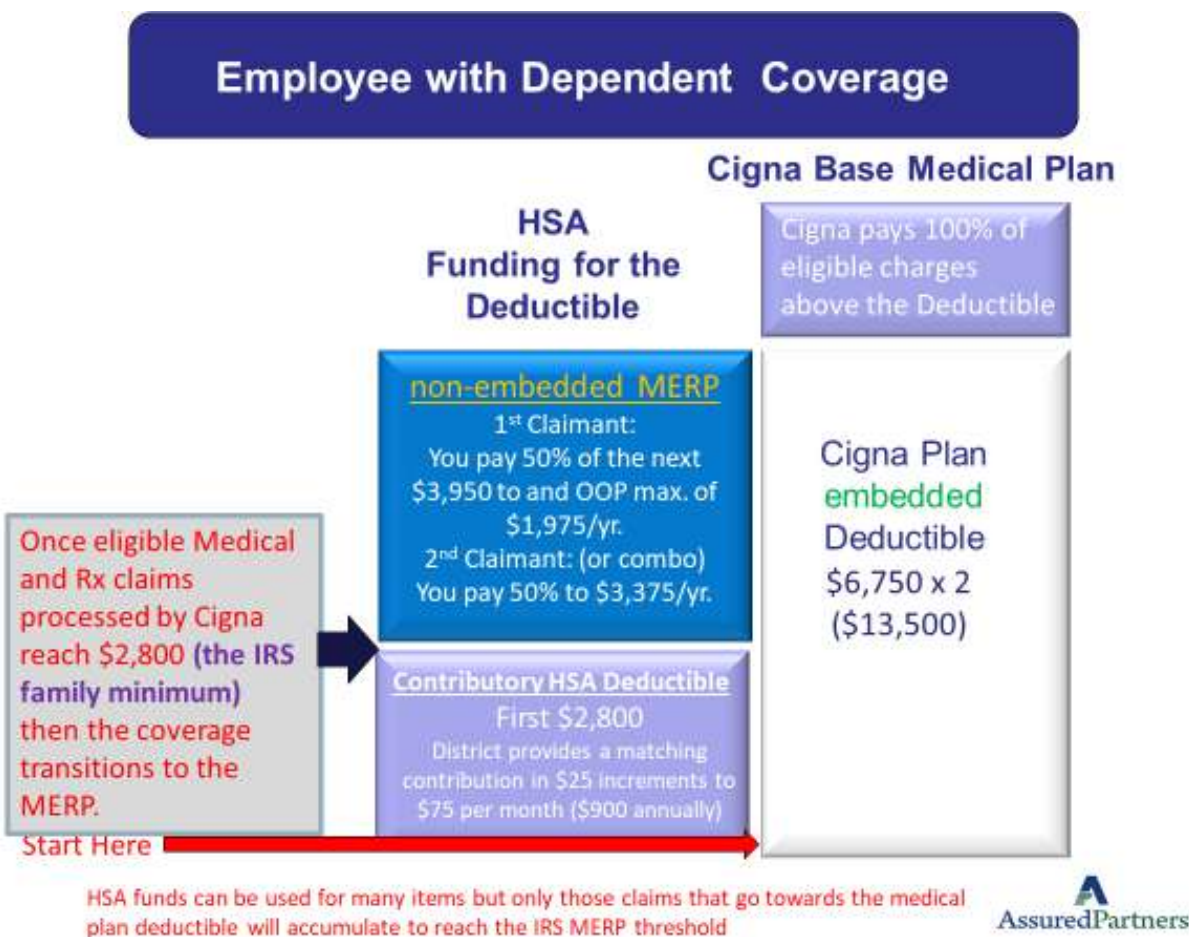
Medical Insurance & MERP: How does it work?



If you have Family coverage, your annual deductible is 2x the individual deductible of \$6,750. Once you and your family member(s) have met your plan year \$13,500 deductible, the plan will pay for all covered services for the remainder of the year at 100%.

This plan includes an embedded deductible. This means that a single member of the family does not have to meet the full family deductible for the after deductible benefits to kick in. If an individual member meets the \$6,750 individual deductible, that member's claims will be covered at 100% for the remainder of the plan year.

The family deductible of \$13,500 will be considered met when two members reach the \$6,750 individual deductible or when several different family members have each paid enough towards their individual deductibles that, added together, reach the family deductible.



Your HSA funds are used to help pay for your first **\$2,800** in claims (**Your family HSA deductible**). The district matches your contribution, in \$25 increments, up to \$75 a month or \$900 annually.

You will only have access to funds that have already been deposited into your account to pay for claims. Once the first claimant reaches \$2,800 in claims, the MERP will pay 50% of the next **\$3,950** in claims until that claimant reaches the individual \$6,750 deductible. Any combination of remaining dependents can combine to meet the second \$6,750 deductible, subject to the 50% MERP supplemental coverage.

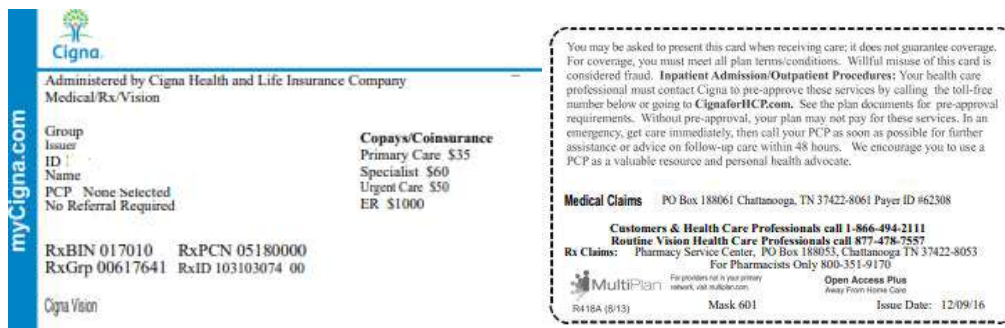
Cigna ID Card & HSA Debit Card



You will receive three different cards to be used to obtain medical services or pay for medical expenses:

You WILL receive a new Medical Card from CIGNA that will be effective July 1, 2021.

Please use this card first when receiving services



Your Cigna card needs to be presented for ALL medical and Rx services. Your provider or pharmacy will use the information on this card to verify your eligibility and benefits.

HSA Mastercard Debit Card from American Fidelity



- **Your HSA card is used to pay for eligible incurred medical and prescription drug expenses. This card does not need to be presented to the provider for eligibility or benefit verification purposes. It is only to be presented to pay for eligible services.**
- **You can also use this card to pay invoices you receive online or in the mail from your providers for eligible services.**

EZMERP Details and ID Card



We are pleased to have you as a member of an EZMerp plan. Your ID card is below.

FULL SERVICE PLAN: MEMBER DOES NOT NEED TO SUBMIT A CLAIM, EZMERP WILL OBTAIN INFORMATION FROM THE INSURANCE COMPANY FOR YOU.

If for some reason you do need to submit something to us, use these instructions below:

- First, you must get copies of your Explanation of Benefits (EOBs) from your primary insurance carrier.
 - All you do is go to your primary insurance carrier website and set up your personal account.
 - Sign into your account
 - Find your claims information. You can click on the button that says, “View EOB”. Download (save to a file on your computer) any EOBs that have not been processed by us.

Submit them to EZMerp in 4 ways:

1. Your plan has a dedicated email: plan1236@merpclaims.com
2. Fax them to: 1-888-551-8357
3. Print and send via regular mail: **EZMerp, PO Box 4826, Greenwood Village, CO 80155**
4. Use the convenient upload feature now available. You will receive secure emails providing you with a username and password.

This is the link: Bookmark this for convenience!

<https://a54189.fmphost.com/fmi/webd#>



MERP ID Cards Employee Only Coverage

This is your ID card.

- Peel it.
- Fold it.
- Stick it in your wallet!

Name:	Deductible:	\$1,400
Status:	Coinsurance:	50%
Group Name: Monte Vista School Dist	Maximum:	\$2,675

Group Num: 1236 ID Number:
 RxBin: 610548 RxPCN: SERVU

This plan covers a portion of the in-network medical costs that are out-of-pocket due to the deductibles and coinsurance. Out-of-network not covered.

First Payor: member's primary insurance plan.

Second payer: Employer plan (this plan) administered by EZmerp.

Call 1-888-553-6426 to verify benefits.

MERP Administration Services Inc.

P.O. Box 4826
 Greenwood Village, CO80155
 Fax 1-888-551-8357

SERVE YOU

Prescription claims: Call: (800)759-3203
 serve-you-rx.com

Medical Provider and Members



1. The employer self-funds (pays) a portion of the charges that are out-of-pocket due to the deductible and/or coinsurance.
2. The charges need to be submitted to the primary insurance carrier first. That carrier determines eligibility.
3. Once the carrier produces an Explanation of Benefits (EOB), EZmerp will obtain a copy of that EOB. You do not need to send us a bill.
4. EZmerp will process the claim based on the reimbursement benefits available and will send payment to the participant.
5. It is the participants responsibility to pay the provider.

Possession of this card does not guarantee eligibility for benefits.
 Call 1-888-553-6426 to verify eligibility and benefits.

Employee Spouse, Employee Child(ren) or Family Coverage

This is your ID card.

- Peel it.
- Fold it.
- Stick it in your wallet!

Name:	Deductible:	\$2,800
Status:	Coinsurance:	50%
Group Name: Monte Vista School Dist	Maximum:	\$5,350

Group Num: 1236 ID Number:
 RxBin: 610548 RxPCN: SERVU

This plan covers a portion of the in-network medical costs that are out-of-pocket due to the deductibles and coinsurance. Out-of-network not covered.

First Payor: member's primary insurance plan.

Second payer: Employer plan (this plan) administered by EZmerp.

Call 1-888-553-6426 to verify benefits.

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2. The charges need to be submitted to the primary insurance carrier first. That carrier determines eligibility.
3. Once the carrier produces an Explanation of Benefits (EOB), EZmerp will obtain a copy of that EOB. You do not need to send us a bill.
4. EZmerp will process the claim based on the reimbursement benefits available and will send payment to the participant.
5. It is the participants responsibility to pay the provider.

Possession of this card does not guarantee eligibility for benefits.
 Call 1-888-553-6426 to verify eligibility and benefits.

Prescription Drug Savings Programs



Contact AssuredPartners for one-on-one assistance.

Local retail discount clubs:

[https://www.walmart.com/cp/\\$4-prescriptions/1078664](https://www.walmart.com/cp/$4-prescriptions/1078664)

<https://www.walgreens.com/images/adaptive/pdf/psc/PSCBrochure-English-20171024.pdf>

Online coupon sites:

<https://www.singlecare.com/prescription-discount-card>

<https://www.goodrx.com/discount-card>

<https://www.wellrx.com/discount-pharmacy-prices/>

<https://rxsaver.retailmenot.com/>

Manufacturer's Financial Assistance

Some manufacturers offer financial assistance programs and frequently have websites set up with information on the specific drugs they have programs for. You can go to the manufacturer's home page or try [www.\(insert the name of the drug\).com](http://www.(insert the name of the drug).com) to see if there are programs available. These programs provide cash in the form of a downloadable "card" that you show to the pharmacy after your prescription has been run. **Some of the programs are limited to people below a certain income level.**

National Foundations

National foundations that provide support for a specific condition can be a good source of information related to available financial assistance programs.

Physicians

Asking your physician's office if they are aware of any state or federal assistance programs for specific medications can be another source of information. They also have regular visits from the drug manufacturer's sales representatives who have the resources to be able to research the available programs from the company they work for.

Cigna Diabetic Medication – Patient Assurance Program

Managing the high cost of prescription medications is important and that's why we want to let you know about the **Patient Assurance ProgramSM**. It's our way of helping you get the insulin medication you need. The program starts on 7/1/2020. Additional information can be found at www.mycigna.com or by calling the number on the back of your card.

There's nothing special you need to do to take part in the program and there's no extra cost.

Here's how it works.

1. Fill a prescription for one of these eligible insulin products. If you're already using one of these medications, you're all set.

Lispro	Basaglar
Lyumjev	Humalog
Ozempic	Humalin
Tybelsus	Levemir
Trulicity	

2. If you don't see your insulin listed, call us. We'll be happy to talk with you about what insulin medications the program covers. Or talk with your doctor about whether switching to an eligible insulin covered under the Patient Assurance Program may be right for you.
3. Pay for your prescription. You'll pay no more than \$25 for a 30-day supply (or \$75 for a 90-day supply) out-of-pocket.

**WANT TO SAVE \$
ON YOUR INSULIN?**

When you fill an eligible insulin product with the Patient Assurance Program, you'll pay no more than \$25 for a 30-day supply (or no more than \$75 for a 90-day supply).

Advocacy Program: Cigna One Guide



CHOOSE A PLAN WITH CONFIDENCE

Cigna One Guide service can help.

We understand how confusing and overwhelming it can be to review your health plan options. And we want to help by providing the resources you need to make a decision with confidence. That's why **Cigna One Guide® service is available to you now.**

Call a Cigna One Guide representative during preenrollment to get personalized, useful guidance.

Your personal guide will help you:

- › Easily understand the basics of health coverage
- › Identify the types of health plans available to you
- › Check if your doctors are in-network to help you avoid unnecessary costs
- › Get answers to any other questions you may have about the plans or provider networks available to you

The best part is, during the enrollment period, your personal guide is just a call away.

Don't wait until the last minute to enroll.

Call **888.806.5094** to speak with a Cigna One Guide representative today.

After enrollment, the support continues for Cigna customers.

Cigna One Guide service will be there to guide you through the complexities of the health care system, and help you avoid costly missteps. Our goal is a simpler health care journey for you and your family.

Cigna One Guide service provides personalized assistance to help you:

- › Resolve health care issues
- › Save time and money
- › Get the most out of your plan
- › Find hospitals and health care providers in your plan's network
- › Get cost estimates and avoid surprise expenses
- › Understand your bills

Access Cigna One Guide - after enrollment - in the way that's most convenient for you:

myCigna.com or the myCigna® app

Live chat

Phone



Together, all the way.®



On-Demand Fitness: Wellbeats



Why Wellbeats?

Wellbeats is the on-demand fitness program that lets employees work out however they'd like, whenever they'd like and wherever they'd like. Access Wellbeats at: <https://wellbeats.com/> or Download the app "Wellbeats"

Wellbeats give you access to over 350 on-demand fitness classes, workout plans, and Fit Tests for everyone from kids to adults to seniors. With classes ranging in length, difficulty, and style, our user-friendly filters make it easy for you to find an activity you'll love, whether it be cycling, strength training, or prenatal yoga.

<https://wellbeats.com/>



Inspiring, high-quality content

Reliable, easy-to-use video streaming

Great for multiple locations and remote workers

No equipment necessary

Track your fitness program's success with Wellbeats



Dental Insurance: AXA PPO Group#005526



Monte Vista School District offers you a PPO dental plan through AXA that gives you the freedom to choose any dentist when you need care. Participating dentists file claims directly with and accept reimbursement as payment in full. You are only responsible for your deductible and coinsurance, as well as any charge for non-covered services up to approved amount.

If you choose to see a non-participating dentist, you may incur additional out-of-pocket expenses and will be billed the total amount the dentist charges (called balance-billing). When you see an in-network PPO dentist, you are protected from balance-billing.

You can locate in-network dentists by visiting the AXA website and following the “Find a Provider” link <https://equitable.com/employee-benefits/employee>.



Type of Service	In-Network	Out-of-Network 90% of R&C Fee
Calendar Year Deductible <i>(Individual / Family)</i>	\$50 / \$150	\$50 / \$150
Annual Maximum Benefit <i>(per covered person)</i>	\$2,000	\$2,000
Orthodontia Lifetime Maximum <i>(Adult and Child(ren))</i>	\$1,000	\$1,000
Type A - Preventive Services <ul style="list-style-type: none"> • Prophylaxis – Cleanings • Oral Examinations • Topical Fluoride Applications • Full Mouth X-rays • Bitewing X-Rays (Adult/Child) • Sealants 	Plan Pays: 100% You Pay: 0%	Plan Pays: 100% You Pay: 0%
Type B - Basic Restorative <ul style="list-style-type: none"> • Space Maintainers • Periodontal Maintenance • Amalgam & Composite Fillings • Emergency & Palliative Treatment • Endodontics - Root Canal • Periodontal Surgery • Periodontal Scaling & Root Planning • General Anesthesia • Oral Surgery (Simple Extractions) • Oral Surgery (Surgical Extractions) 	Plan Pays: 80% You Pay: 20%	Plan Pays: 80% You Pay: 20%
Type C - Major Restorative <ul style="list-style-type: none"> • Repairs/Adjustments (Dentures) • Implants • Bridges • Dentures • Crowns/Inlays/Onlays 	Plan Pays: 50% You Pay: 50%	Plan Pays: 50% You Pay: 50%
Type D - Orthodontia <i>(Adult and Child(ren))</i>	Plan Pays 50% You Pay: 50%	Plan Pays 50% You Pay: 50%

Child(ren) are covered until age 26

Usual, Customary and Reasonable (R&C) Fees means fees calculated by AXA are based on available data resources of competitive fees in that geographic area.

How to Register on AXA's Website and Print Your Dental ID card!



To Register:

1. Go to www.equitable.com and click on the Sign In button in the top right-hand corner of the screen. If you are not yet registered, choose "Register Now".
2. Select "I am an individual" and "Employer Provided Benefits".
3. Follow the instructions and input your Social Security Number, Last Name, and Date of Birth for a one-time validation of your identity.
4. You will be asked to create an individual USER ID.
5. Select "Secret Questions" from the drop-down menu. These will be used for password verification in case you forget or want to change your password later.

Once you've registered, you will receive an email confirmation, as well as a letter of confirmation, which will be mailed to your address of record.

To Print Your Dental ID card:

1. Go to equitable.com and click on the red LOG IN button on the top right. Enter the USER ID and PASSWORD you set up during registration.
2. Click "Print ID Card" to the right of the details of your Dental policy. The ID Card will open up in a separate tab as a PDF. You can save it to your device or print it as many times as you need.
3. If you need assistance registering or printing your ID card, please contact the customer service team at 866-274-9887.

To learn more, visit www.Equitable.com/employee-benefits

Vision Insurance: Reliance Standard *(Option 1 Basic Vision)* Group #136-413608



Monte Vista School District offers you a choice of two (2) vision plans through Reliance Standard that gives you the freedom to choose any eye care provider when you need care. However, you will maximize your benefits and pay less out of your pocket when an in-network provider is used. Additionally, if a non-network provider is used, you will be responsible for filing a claim for reimbursement and the balance of the bill.

The chart below outlines Option 1, the Basic Vision Plan. It works with Wal-Mart only and is a reimbursement plan.

Plan Features	Option 1 Basic Vision – Walmart Only Vision Centers
Deductible	\$0*
Calendar Year Maximum	\$150
Calendar Year Eye Exam <i>(once per 12 months)*</i>	You will be reimbursed: Up to \$45
Eyeglass Lenses <i>(once per 12 months)*</i> • Single Vision • Bifocal • Trifocal • Lenticular	You will be reimbursed: Up to \$35 Up to \$50 Up to \$65 Up to \$70
Frames <i>(once per 24 months)*</i>	\$80
Contact Lenses • Medically Necessary • Elective	You will be reimbursed: Up to \$95
Additional Plan Features • Eyewear Savings	15% discount at Walmart Vision Centers
<p>Members may also bring in their current vision prescription from any vision care provider and purchase eyewear at Walmart. This savings arrangement is not insurance: it is available to members at no additional cost to their plan premium.</p> <p>To receive the eyewear savings identification card, plan members can visit www.reliancestandard.com/dental-vision and sign-in (or create) a secure member account. Members must present the Eyewear Savings Card at time of purchase to receive the discount.</p>	

Child(ren) covered to age 26

Claims must be submitted within 90 days of the date of service for the plan to consider benefits.

*Frequencies are based on date of service

**Contact lenses are in lieu of eyeglass lenses and frames

eCard

Once you are enrolled in the plan, your plan member ID card is provided electronically. Access your eCard online by creating a Secure Member Account – it's fast, easy and secure. To get one of these ID cards, visit www.reliancestandard.com/dental-vision and sign into (or create) a Member Services secure account. Enrolled members may receive care without the card just by giving the provider their name, date of birth, and social security number/member identification number.

Vision Insurance: Reliance Standard *(Option 2 VSP Choice Network)*

Group #136-413608



The chart below outlines the vision option 2, the VSP Vision Plan. It provides in network coverage with VSP providers and reimburses you for out of network usage.

www.VSP.com – Choice Network



Plan Features	Option 2 – TriChoice Sharper Vision VSP Choice Network	
	In-Network	Out-of-Network
Annual Eye Exam <i>(once per 12 months)*</i>	\$10 Copay	\$10 Copay
Materials	You will pay a \$25 copay at the time of service. The materials copay is a single payment that applies to a complete pair of glasses or to frames, whichever is selected.	You will pay a \$25 copay at the time of service.
Eyeglass Lenses <i>(once per 12 months)*</i> • Single Vision • Bifocal • Trifocal • Lenticular	Covered in Full Covered in Full Covered in Full Covered in Full	You will be reimbursed: Up to \$30 Up to \$50 Up to \$65 Up to \$100
Lens Options • Scratch Resistant Coating • Anti-Reflective Coating • Ultraviolet Coating	\$17-33 \$43-\$85 \$16	No Benefit No Benefit No Benefit
Frames <i>(once per 24 months)*</i>	\$150 allowance	You will be reimbursed: Up to \$75
Contact Lenses ** Fit & Follow Up Exams	You will pay: Up to \$60	No Benefit
Contact Lenses • Medically Necessary • Elective	Covered in Full \$150 allowance <i>Elective contact lens allowance can be applied to disposables, but the dollar amount must be used all at once (provider will order 3- or 6-month supply). Applies when contacts are chosen in lieu of glasses.</i>	You will be reimbursed: Up to \$210 Up to \$120
Additional Plan Features • Additional Glasses • Frame Discount • Low Vision <i>(w/ prior auth.)</i>	20% discount (complete pair) 20% discount above retail allowance 75% up to \$1,000 every 2 yrs.	No Benefit No Benefit No Benefit
Laser VisionCare	VSP offers an average discount of 15% off or 5% off a promotional offer for LASIK Custom LASIK and PRK. The maximum out-of-pocket per eye for members is \$1,800 for LASIK and \$2,300 for custom LASIK using Wavefront technology, and \$1,500 for PRK. In order to receive the benefit, a VSP provider must coordinate the procedure.	

Child(ren) covered to age 26

***Frequencies are based on date of service**

Reliance Standard Customer service: 800-497-7044

VSP Customer Care: 800-877-7195

Disability and Life AD&D Insurance: Lincoln Financial Group Group #10192604, 1019603 & 10192602



SHORT TERM DISABILITY

Short Term Disability helps cover your lost income when you are unable to work due to illness or injury for briefer periods of time. After a 31-day elimination period it will replace 2/3rds of your income up to \$1,200 a week for up to 9 weeks. Your STD benefits can coordinate with income from other sources, such as continued income from sick pay from your employer during your disability. This allows you to receive up to 100% of your pre-disability earnings. Please see the certificate of coverage for additional details. **You are automatically enrolled in this benefit at no cost to you unless you are already enrolled in PERA.**

LONG TERM DISABILITY

Long Term Disability is the most important insurance for you and your family to have. Should you be unable to work due to illness or injury, long term disability will replace 66 2/3% of your lost income, up to \$5,000 a month, after a 90-day elimination period. This benefit pays up to 24 months for your own occupation and social security retirement age for most illnesses and injuries for any occupation. This plan has a 3/12 pre-existing condition clause. Pre-Existing conditions is treatment for illness or accident 3 months prior to your effective date will not be paid until you are 12 months enrolled in the plan. of Please see the certificate of coverage for details. **You are automatically enrolled in this benefit at no cost to you unless you are already enrolled in PERA.**

LIFE and AD&D INSURANCE

Life and Accidental Death and Dismemberment (AD&D) benefits are essential to the financial security of you and your family. Discussing what might happen to your family if you were not around to provide for isn't always the easiest conversation, but it is necessary. Survivor benefits provide financial assistance in an absence and can help you plan for the unexpected.

As such, Monte Vista School District provides all full-time, active employees with a \$20,000 Basic Life and AD&D benefit through Lincoln Financial. Benefits will be reduced as follows:

- At age 65, by 35% of the original amount
 - At age 70, by an additional 25% of the original amount
 - At age 75, by an additional 15% of the original amount
- Benefits will terminate when you retire

You are automatically enrolled in this benefit at no cost to you.

BENEFICIARY DESIGNATION

A beneficiary is the person you designate to receive your Life Insurance benefit in the event of your death. Your beneficiary for Life Insurance is also your beneficiary for AD&D Insurance.

It is important that your beneficiary is clear so there will be no question as to your intentions. You must designate a primary beneficiary and have the option of designating contingent beneficiaries. You may select a person, your estate or an organization such as a charity as your beneficiary(ies). When naming your beneficiary(ies), please indicate their full name, address, Social Security number, relationship, date of birth and distribution percentage. If your beneficiary is not legally related, please indicate as such by inserting "Not Related" in the relationship field. It is important that you keep your beneficiary designations up to date. In the event of your death, the last beneficiary designation on file with the District will be filed with your claim and the named beneficiary(ies) will receive the death benefit proceeds

Additional Benefits

Employee Connect Services (EAP) Employee Assistance Program



Assistance with life's daily issues such as stress, relationships, parenting, caregiving, family, legal, financial, emotional and much more is available 24 hours a day, 7 days a week through this confidential plan. We offer confidential guidance and resources for you or an immediate household family member

- **Up to 5 sessions with a counselor per person, per issue, per year**
- Toll-free phone and web online access 24/7
- Unlimited phone access to legal, financial and work-life services
- A 25% discount on in-person consultations with network lawyers
- Financial consultations and referrals
- Work/life services for assistance with childcare, finding movers, kennels/pet care, vacation planning, and more

EmployeeConnect Program and Services

- www.GuidanceResources.com
- User Name: LFGSupport Password: LFGSupport1
- Download the "GuidanceNow" mobile app or call 888-628-4824

EmployeeConnectSM
EMPLOYEE ASSISTANCE PROGRAM SERVICES
 Confidential help 24 hours a day, seven days a week for employees and their family members. Get help with:

▪ Family	▪ Emotional	▪ Relationships
▪ Parenting	▪ Legal	▪ Stress
▪ Addictions	▪ Financial	

EmployeeConnectSM
EMPLOYEE ASSISTANCE PROGRAM SERVICES
 To find out more:

- Visit GuidanceResources.com
username: LFGSupport password: LFGSupport1
- Download the GuidanceNowSM mobile app
- Call 888-628-4824

Travel Assistance Services – Travel Connect

The TravelConnectSM program, provides a wealth of travel, medical and safety-related services you can access while traveling more than 100 miles from home, for business and leisure, 24/7

For a complete list of TravelConnect Services, go to www.mysearchlightportal.com and enter your Group ID: LFGTravel123

TravelConnect[®]
GLOBAL ASSISTANCE PROGRAM
 Provided by On Call International
 Medical, security and travel assistance services for participants traveling 100+ miles from home

Visit mysearchlightportal.com and enter Group ID #: LFGTravel123 for access to plan documents, international calling instructions and destination information.



If you need medical, security or travel assistance, regardless of the nature or severity of your situation, contact On Call 24 hours a day:

Call collect from anywhere in the world:
 +1-603-328-1955
 Call toll free from U.S. or Canada:
 866-525-1955
 Email: mail@oncallinternational.com

Global Assistance Services must be coordinated and approved by On Call in order to be covered.
 See your plan description for full terms and conditions of the services offered in your plan.

 On Call International
 A member of the Tokio Marine HCC group of companies

Additional Benefits Continued



LifeKeys – Because life doesn't always go as planned

When you choose life insurance, you're planning for your family's future — assuring their comfort and securing their plans. LifeKeys services, provide assistance to you, your family and your beneficiaries. No matter how well you plan, unexpected challenges will arise. When they do, help and support are nearby – thanks to LifeKeys services from Lincoln Financial Group. Services include:

Save money on shopping and entertainment

- Save up to 60% on a variety of products and services, such as electronics, health and fitness, Broadway shows and much more. 24/7 access to the Working Advantage discount also available in the "GuidanceNow" mobile app

Protection against identity theft

- LifeKeys include an online resource for the information you need to recognize and prevent identity theft – and restore your good name

EstateGuidance® will preparation

- Create your will online — easily and economically. Follow a step-by-step guide through the entire process, and then use online instructions to execute your will. You can: Name an executor to manage your estate, choose a guardian for your children, specify wishes for your property, and provide funeral and burial instructions

Guidance and support for your beneficiaries

- Services are available for up to one year after a loss, and include:
- A combination totaling six (6) in-person sessions for grief counseling, or legal or financial information and Unlimited phone counseling.
- Make sure your loved ones have the support they need, should you pass away. Unlimited phone contact with master's-level grief counselors lets your beneficiaries access information, advice and referrals for topics such as: Grief and loss, stress, anxiety, depression, memorial planning information, and concerns about children/teens, advice on financial and legal matters and help coping with occasional challenges of day-to-day life.

Financial services 1-855-891-3684 www.guidanceResources.com

First-time User: Enter Web ID = LifeKeys

Contact Information

Plan and Group Number	Contact	Phone
Medical Group #00611227	Cigna www.mycigna.com	1-866-494-2111
Medical Expense Reimbursement Program (MERP)	EZMERP www.ezmerp.biz cindy@ezmerp.com	303-872-2044
Health Savings Account (HSA)	American Fidelity	1-800-654-8489
Cigna Member Advocacy Program	Cigna One Guide www.mycigna.com	888-806-5094
On-Demand Fitness	Wellbeats www.wellbeats.com	855-520-7500
Dental Group #005526	AXA https://equitable.com/employee-benefits/employee To print off a Dental ID card, please register at this site.	1-866-274-9887
Vision Group #136-413608	Reliance Standard www.reliancestandard.com/dental-vision	1-800-877-7195
STD Group #00010192604 LTD Group #00010192603 Life AD&D Group #000010192602	Lincoln Financial Group www.lfg.com	800-423-2765
AssuredPartners	Hudson Howard, Account Representative Hudson.Howard@assuredpartners.com Bonnie Montoya, Senior Account Executive Bonnie.Montoya@assuredpartners.com Arnie Aranoff, Broker Arnie.Aranoff@assuredpartners.com	720-510-9505 303-228-2150 303-887-1555
Compass Financial Group	Vincent Rogers, Insurance Broker vrogers@voyafa.com	719-580-5495
Monte Vista School District	Candy Briles, Human Resources candaceb@monte.k12.co.us Leona Holland, Accounting/Risk Mgr. leona@monte.k12.co.us	719-852-5996 Ext. 1014 719-852-5996