

Employee Benefits Package

Benefit Options for Your Unique Needs

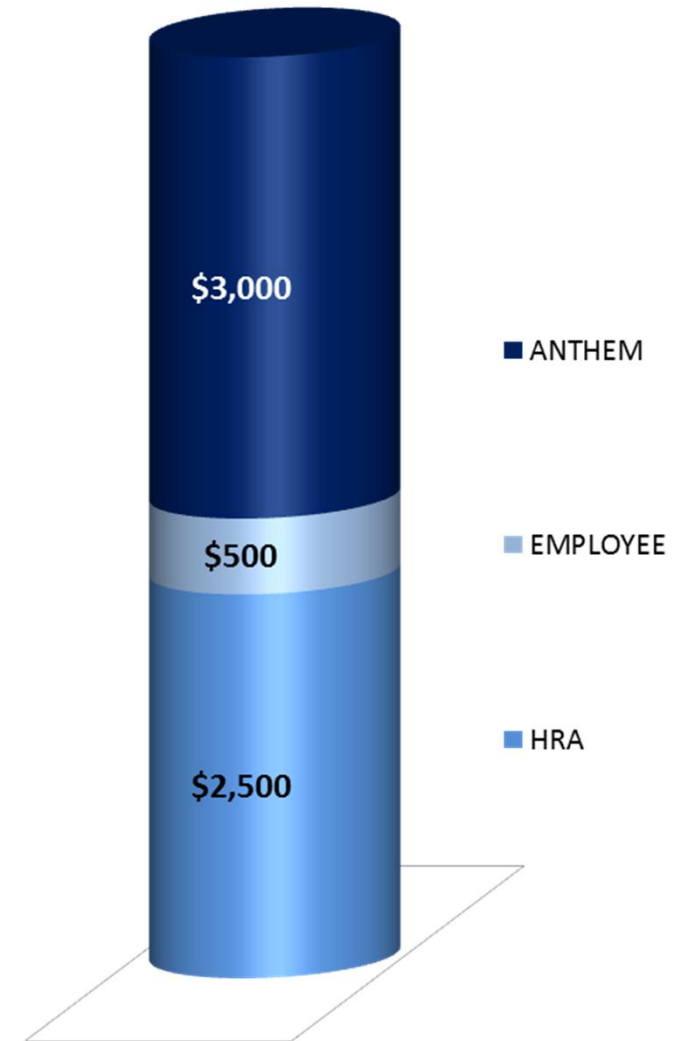
- Medical Plan with Prescription Drug Benefit
 - \$500 Corridor Plan without BJC Network (board paid)
 - \$500 Corridor Plan with BJC Network (buy up)
- Dental Plan – employee & dependent coverage
- Life Insurance
 - District Paid Basic Life with AD&D: \$20,000
 - Option to purchase additional life insurance for yourself & dependents (must complete evidence of insurability EOI)
- Voluntary Vision Plan – Anthem Blue View Vision
- Dependent children can be covered to end of month in which they attain age 26 for all plans listed above

Anthem Medical High Deductible Health Plans (HDHP)

- Premium Plan has \$3000 HDHP from Anthem (In Network)
- A Health Reimbursement Account (HRA) for each employee for initial expenses
 - First \$2500 of the \$3000 for Employee
 - First \$5000 of the \$6000 for Family Coverage
- **Last** \$500 of the \$3000 is the patient responsibility (Corridor)
- From \$3000 and up, all medical expenses paid at 100% (except copay services)
- Benefit Change Forms available at www.mybenergy.com

Premium Plan & Health Reimbursement Arrangement (HRA) How They Work

- Copay services covered with no deductible. The model applies to Hospitalization, Surgery, Diagnostic X-Ray and Lab Testing.
- The HRA pays claims up to the corridor (employee portion) and after employees pay their portion the insurance plan pays the remainder
- Unspent HRA Dollars up to the corridor amount can be carried over to the next year (like rollover minutes). Maximums apply.



2017-2018 Medical Plan Options

Benefits	Premium Plan with \$500 Corridor No BJC (Board Paid)	Premium Plan with \$500 Corridor with BJC	H S A Plan	KIDZ Plan
In Network Benefits				
Plan Deductible	\$3,000 (\$6,000 family)	\$3,000 (\$6,000 family)	\$3,000 (\$6,000 family)	\$750/\$2,250 Family
Health Reimbursement Account (HRA)	\$2,500/\$5,000 Family	\$2,500/\$5,000 Family	N/A	N/A
Employee Corridor	\$500/\$1,000 Family	\$500/\$1,000 Family	N/A	N/A
Annual Preventative Exam	100%	100%	100%	100%
Office Visit	\$25/\$40 Copay	\$25/\$40 Copay	100% After Deductible	80% After Deductible
LiveHealth Online	\$25 Copay	\$25 Copay	100% After Deductible	80% After Deductible
Lab, Xray (Wellness)	100%	100%	100%	100%
Diagnostic Lab, Xray	100% (after corridor)	100% (after corridor)	100% After Deductible	80% After Deductible
Ambulance	100% (after corridor)	100% (after corridor)	100% After Deductible	80% After Deductible
Hospital	100% (after corridor)	100% (after corridor)	100% After Deductible	80% After Deductible
Outpatient Surgery	100% (after corridor)	100% (after corridor)	100% After Deductible	80% After Deductible
Emergency Room	\$250 copay	\$250 copay	100% After Deductible	\$150 copay
Urgent Care	\$50 copay	\$50 copay	100% After Deductible	\$75 copay
Out of Pocket Limit	\$500 Corridor (\$1,000 family) + copays	\$500 Corridor (\$1,000 family) + copays	\$4,000/\$8,000 family (Deductible + \$1,000 Rx Copay)	\$3,500 Individual \$10,500 Family
Drug Card	\$5/\$30/\$60 - Mail order is 2 copays	\$5/\$30/\$60 - Mail order is 2 copays	After Deductible \$10/\$30/\$50 Copay until \$1,000 paid in copays	\$10/\$25/\$45 - Mail order is 2.5 copays
Out of Network Benefits				
Deductible	\$3,500/\$7,000 Family	\$3,500/\$7,000 Family	\$5,500/\$11,000 Family	\$1,500/\$4,500 Family
Coinsurance	80/20%	80/20%	80/20%	60/40%
Out of Pocket Limit	\$6,500 (\$13,000 Family) + Corridor	\$6,500 (\$13,000 Family) + Corridor	\$7,000 (\$14,000 Family)	\$6,500/\$19,500 Family
Health Reimbursement Account (HRA) Carryover				
Maximum HRA Carryover If enrolled prior to July 1st	\$500 Individual \$1000 Family	\$500 Individual \$1000 Family	N/A	N/A

Health Savings Account

Using HSA Dollars for non-qualified expenses...

- Yes, but...
 - Any amount you spend will be considered taxable income (you will have to pay taxes on the amount used), and you will have to pay a 20% penalty on the amount
 - Non-qualified expenses will not count toward your out-of-pocket responsibility under the Traditional Health Coverage
 - Once you are 65, you can withdraw the money without penalty, but it will be considered taxable income
- Using your HSA dollars for qualified medical, dental and vision expenses are always tax-free and penalty-free

Health Savings Account

Preparing for this change – How much should I save?

- Consider your annual medical and prescription expenses
 - Explanations of Benefits include costs for your services
 - Your local pharmacy and/or Anthem's web site will have your annual prescription drug expenditures
 - www.anthem.com – Create your own user name and password to get started.
 - <http://www.mercerhrs.com/video/cdhp/final.html> - HSA online video education tool
- Consider your future – Do you want to save for future medical expenses?
- IRS Maximum Contributions for 2017:
 - Individual - \$3,400
 - Family - \$6,750
 - Age 55 and older catch-up - \$1,000

2017 – 2018 Monthly Benefit Rates

ANTHEM BC/BS	Employee	Add Spouse	Add Children	Add Family
\$500 Corridor Plan (Board Paid No BJC)	\$610.00	\$698.00	\$549.00	\$1,024.00
\$500 Corridor Plan (buy-up with BJC)	\$659.00	\$755.00	\$593.00	\$1,108.00
HSA Plan (buy-down)	\$442.00	\$507.00	\$398.00	\$744.00

ANTHEM BC/BS	One Child	Two or More Children
KIDZ Plan	\$198.50	\$397.00

DELTA DENTAL PLAN	Employee Only	Add Spouse	Add Children	Add Family
PPO Plan	\$44.12	\$39.54	\$50.12	\$77.60

ANTHEM VOLUNTARY VISION PLAN	Employee Only	Employee + One	Employee + Family
Monthly Rates	\$8.36	\$12.55	\$22.09

On Line Resources

24/7 Access at Home or Work

- www.anthem.com – view medical & vision claims, locate providers, request ID card
- www.deltadentalmo.com – view claims and locate providers
- www.csdinsurancetrust.com - general health and nutrition information, view current challenges and events
- <http://www.mercerhrs.com/video/cdhp/final.html> - HSA online video education tool

Thank you for attending
Have a great school year

Questions?

Anthem Customer Service: 1-855-272-4938

(for Medical, Rx, HRA & Vision claims)

Delta Dental: 1-800-335-8266

CIGNA Life: 1-800-732-1603

CSD Help Center: 1-866-783-9384