



RISK MANAGEMENT

Benefits Orientation

Renée Brunelle - *Director of Risk Management*

August 5, 2022

Welcome!

- ▶ Benefits Team:
 - ▶ Marlyne Velazquez - *Benefits Specialist*
 - ▶ Monni Villela - *Benefits Specialist*
 - ▶ Jesse Sotelo - *Risk Management Program Analyst*
 - ▶ Tami Garcia - *Work Comp Specialist*
- ▶ All Enrollment forms must be completed on the Ease portal by: Friday, August 12th, 2022



BURNHAM BENEFITS

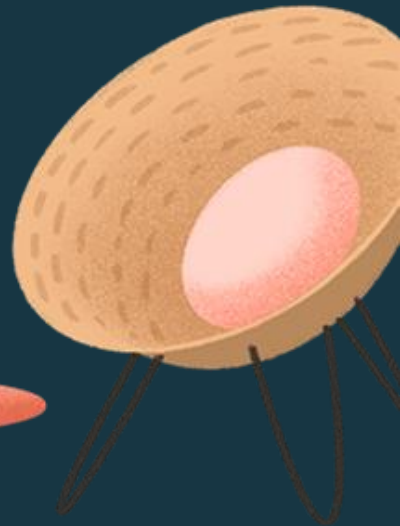
Ann Marie Estrada
Kelly Fox



Ease Portal

Kelly Fox

Benefits Enrollment



Online Benefits Enrollment

Enrollment is easy with our online enrollment system!



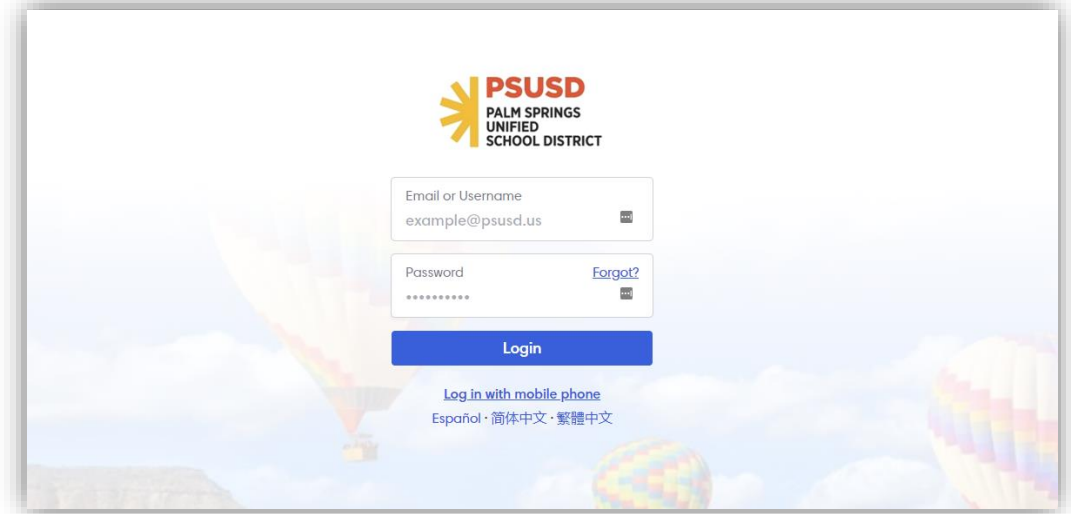
Online Benefits Enrollment

Ease Log-in Screen

Employer URL: psusd1.ease.com

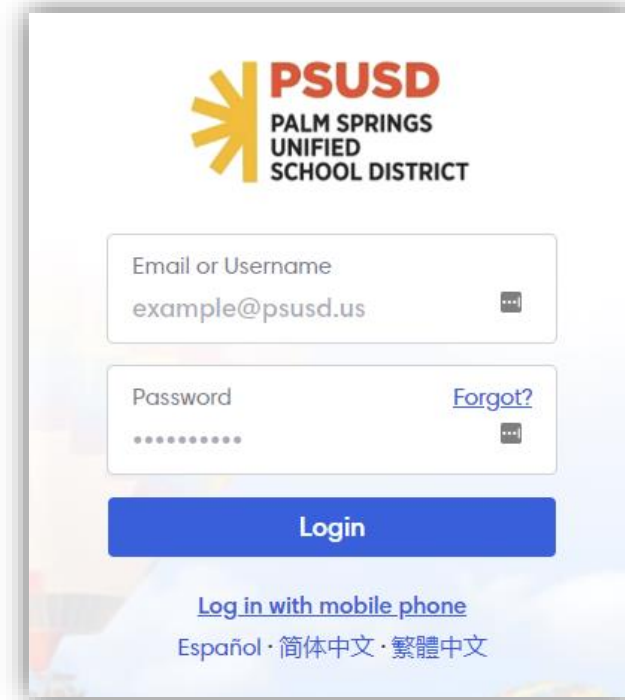
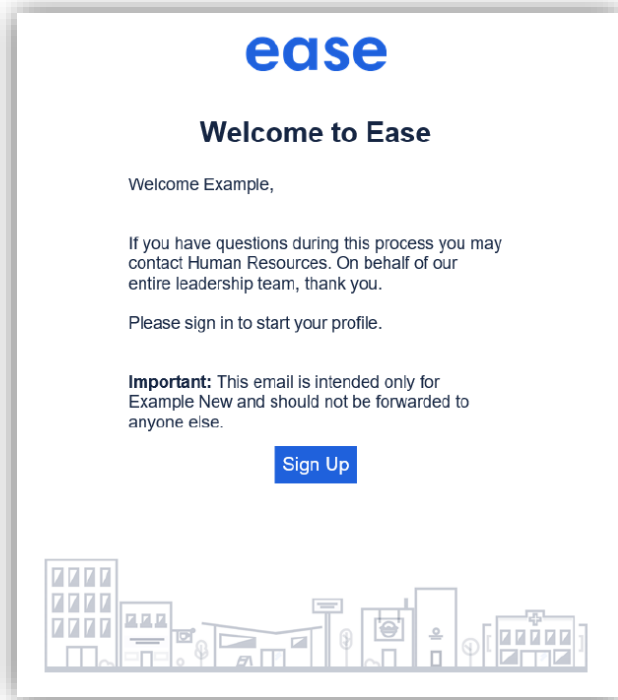
Username: PSUSD Email Address

Password: You will be prompted to create when you click on Welcome Email link



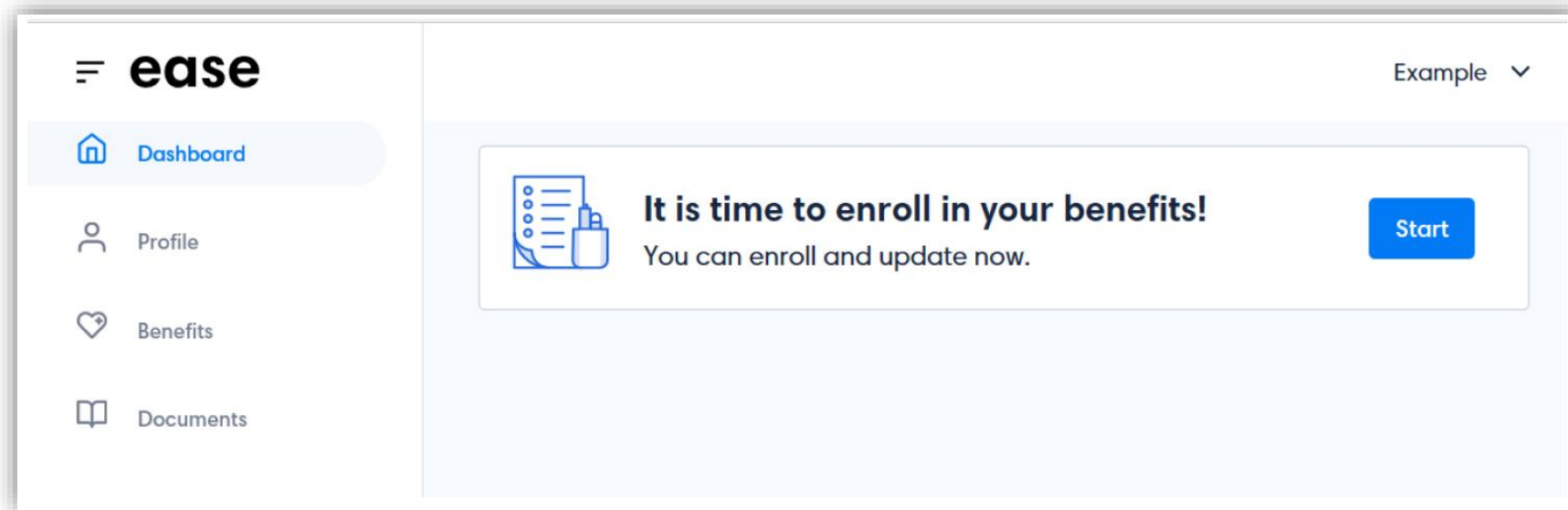
Online Benefits Enrollment

Welcome Email + Create a Password and Sign In



Online Benefits Enrollment

Getting started



Online Benefits Enrollment

Overview and Profile Information

1 Overview
2 Profile
3 Dependents
4 Benefits
5 Summary
6 Sign Forms
7 Finish

Overview

Welcome! Please follow the prompts on each page to complete your benefit enrollment. If you have any questions, please reach out to our HR department.

[Continue](#)

- Verify your personal information
- Dependents must be entered in order to enroll in benefits
- SSN will be needed for dependents

1 Overview
2 Profile
3 Dependents
4 Benefits
5 Summary
6 Sign Forms
7 Finish

Personal Information

First Name *

Middle Name

Last Name *

1 Overview
2 Profile
3 Dependents
4 Benefits
5 Summary
6 Sign Forms
7 Finish

Dependents

If you have any dependents (e.g. spouse, domestic partner, children) please add them here. If you do not have any dependents please click 'Continue'.

[Add a Dependent](#) [Add](#)

[Continue](#)

Online Benefits Enrollment

Select Benefit Options

- Be sure to enroll or waive coverage for each dependent

The screenshot shows a sidebar on the left with seven numbered steps: 1 Overview, 2 Profile, 3 Dependents, 4 Documents, 5 Benefits (highlighted), 6 Beneficiaries, and 7 Summary. The main content area is titled 'Benefits' and lists three dependents:

- Cheddar Test** (Employee): Enrolled (green checkmark and X icon)
- Papa Cheddar Test** (Spouse): Waived (red checkmark and X icon). Below this is a 'Waive Reason *' dropdown menu with the text 'Waive Reason (Required)' and a downward arrow.
- Baby Cheddar TEST** (Child): Enrolled (green checkmark and X icon)

The screenshot shows a 'Select your plan' interface. At the top, it states: 'The cost below is the employee cost deducted on a Per Pay Period (Bi-Weekly) basis.' There are two plan options:

- MetLife 2018-2019 MetLife Dental DHMO**: Cost is \$0.00 Per Pay Period. A blue 'Select' button is visible.
- MetLife 2018-2019 MetLife Dental PPO**: Cost is \$0.00 Per Pay Period. A green 'Selected' button is visible.

Both options include a 'Documents' section with links for 'Find a Provider' and 'Summary of Benefits DHMO' (for the DHMO plan) or 'Summary of Benefits Dental PPO' (for the PPO plan).

Online Benefits Enrollment

Specify Beneficiaries

Beneficiaries

Specify your beneficiaries for each plan type below.

Your beneficiary can be the person or persons for whom you wish to provide financial protection in the event of your death.

You can name as many beneficiaries as you want, subject to the policy. The beneficiary to whom the proceeds go first is called the primary beneficiary (required). Secondary beneficiaries (optional) are entitled to the proceeds only if they survive both you and the primary beneficiary.

If you name multiple beneficiaries, you must also specify how much each beneficiary will receive. The totals of which must add up to 100%.

If you do not want to name an individual or entity as your beneficiary, you may prefer to name your estate or a trust as your beneficiary. The proceeds will then be distributed with your other assets according to your will if a valid, legal trust exists at the time of your death.

Online Benefits Enrollment

Review your Benefit Elections and Sign Forms

Benefit Summary

Review your benefit elections. If you need to make changes, click 'Edit'. Otherwise, click 'Continue' and sign your forms. You may also [print your summary](#).

The cost below is the employee cost deducted on a Per Pay Period (Bi-Weekly) basis.

Create your signature

Start typing your full name as it appears below.

Example New

 SHA-256 with RSA Encryption

I understand this is a legal representation of my signature.

Next

0 signatures remaining (1 pages)

Finish Signing

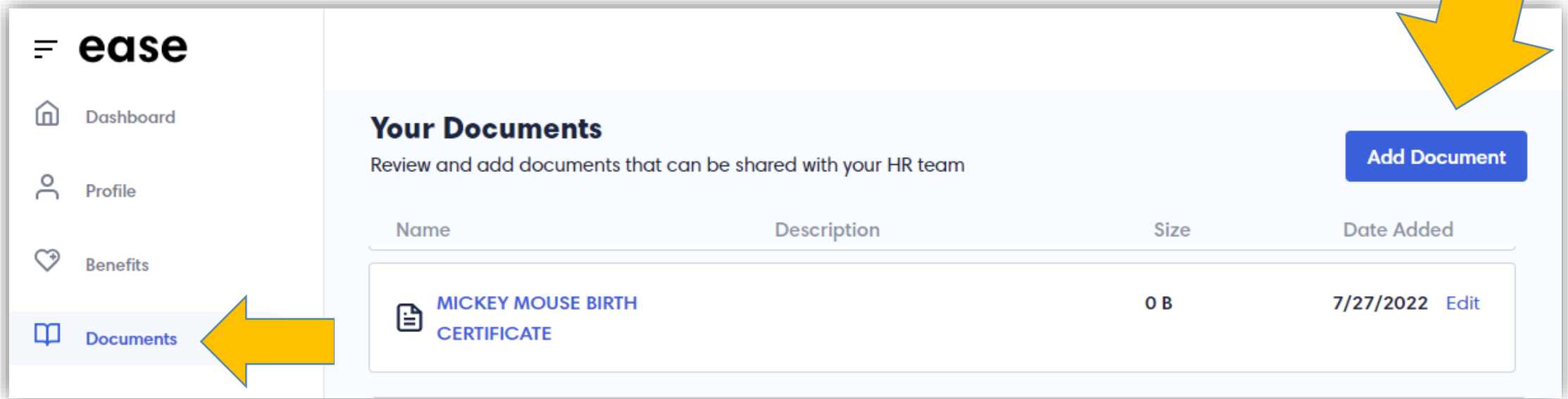
Enrollment Confirmation

You have completed the enrollment process. You're required to electronically sign to acknowledge your personal details and elections.

Upload Supporting Documents

Go your profile, select -> **“DOCUMENTS”**

Then select -> **“ADD DOCUMENT”**

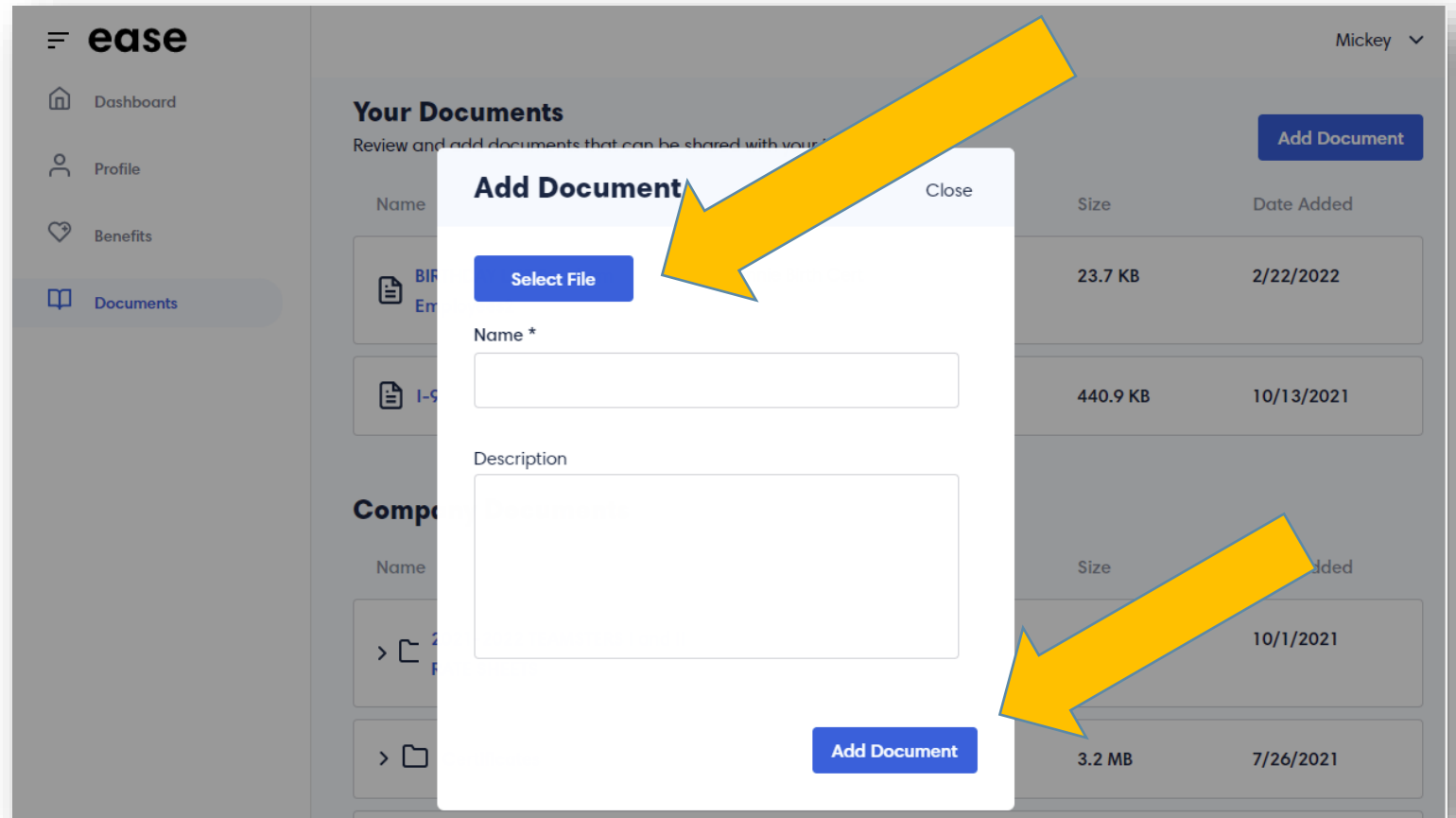
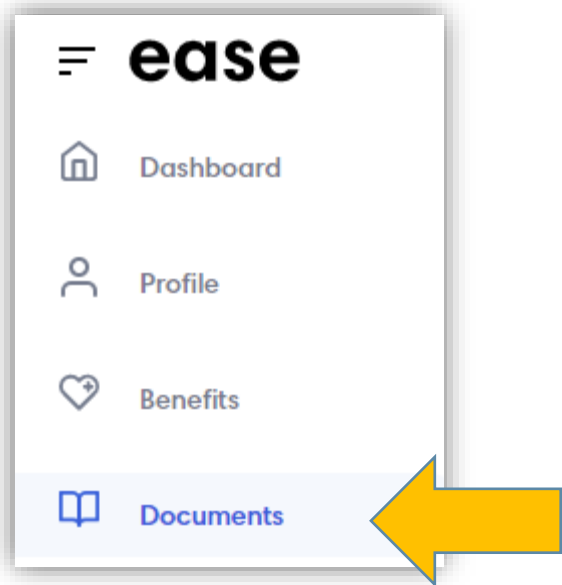


The screenshot displays the 'ease' application interface. On the left is a sidebar with navigation options: Dashboard, Profile, Benefits, and Documents. The 'Documents' option is highlighted with a yellow arrow. The main content area is titled 'Your Documents' and includes a sub-header 'Review and add documents that can be shared with your HR team'. In the top right of this area is a blue 'Add Document' button, also highlighted with a yellow arrow. Below the sub-header is a table with columns for Name, Description, Size, and Date Added. A single document is listed: 'MICKEY MOUSE BIRTH CERTIFICATE' with a size of '0 B' and a date of '7/27/2022'. An 'Edit' link is visible next to the date.

Name	Description	Size	Date Added
MICKEY MOUSE BIRTH CERTIFICATE		0 B	7/27/2022 Edit

Upload Supporting Documents

Click **“SELECT FILE”** to upload document, then **NAME** document and select **“ADD DOCUMENT”**



ease

Upload Supporting Documents

To review your uploaded documents go your profile, select -> **“DOCUMENTS”**

The screenshot shows the 'ease' user interface. On the left is a sidebar with navigation options: Dashboard, Profile, Benefits, and Documents. The 'Documents' option is highlighted with a yellow arrow. The main content area is titled 'Your Documents' and includes a sub-header 'Review and add documents to be shared with your HR team' and an 'Add Document' button. Below this is a table with columns for Name, Description, Size, and Date Added. A single document entry is shown: 'MICKEY MOUSE BIRTH CERTIFICATE' with a size of '0 B' and a date of '7/27/2022'. A yellow arrow points to this document entry.

Name	Description	Size	Date Added
MICKEY MOUSE BIRTH CERTIFICATE		0 B	7/27/2022 Edit

See rates in Benefits Guide

10

Certificated Rates: 2022 – 2023

Employee Deductions		
DENTAL PLAN SELECTED	Kaiser HMO	Blue Shield HMO 10
11 Month + Delta Dental PPO-Incentive	\$21.17	\$172.81
11 Month + Delta Dental PPO	\$15.43	\$167.07
11 Month + DeltaCare USA DHMO	\$6.50	\$158.13

MEDICAL PLAN FEATURES		
	Kaiser Providers and Facilities	In-Network Only
Calendar Year Maximum	Unlimited	Unlimited
Deductible (Annual)	None	None
Out-of-Pocket Maximum – Individual / Family	\$1,500 / \$3,000	\$1,000 / \$2,000
Co-Insurance (Plan Pays)	100%	100%
Office Visit Copay – Primary Physician/Specialist	\$15 copay / \$15 copay	\$10 copay / \$10 copay
Inpatient Hospitalization	No cost	No cost
Outpatient Diagnostic Tests	No cost	No cost
Emergency Services (Copay waived if admitted)	\$100 copay	\$100 copay
Urgent Care Copay	\$15 copay	\$10 copay
Preventive Care	No cost	No cost
Mental Health/Substance Abuse – Outpatient Copay/Inpatient	\$15 copay / No cost	\$10 copay / No cost
Chiropractic Copay	\$10 copay / 30 visits combined	\$10 copay / 30 visits combined

PRESCRIPTION DRUGS		
	Kaiser Pharmacy	Navitus
Out-of-Pocket Max – Individual / Family	Included in Medical	\$1,500 / \$2,500
Retail: 30 Day Supply – Generic/Brand	\$5/\$20	Network \$7/\$25 Costco \$0/\$25
Mail Order – Generic/Brand – Supply Limit	\$10/\$40 61 – 100 Days	\$0/\$60 90 Days

	Delta Dental Incentive PPO	Delta Dental PPO	Calculate your Payroll Deduction for your Core Benefits
Dependents	11 Mo.	11 Mo	Rate for Benefit Package
One	\$ 83.56	\$ 75.44	Cost to add Dependent to PPO Dental Plan +
Two or More	\$ 155.33	\$ 140.21	Total Payroll Deduction for Core Benefits =
There is no cost to add Dependents on the DeltaCare USA DHMO plan.			

11

Certificated Rates: 2022 – 2023

Employee Deductions		
DENTAL PLAN SELECTED	Blue Shield PPO 100-B	Blue Shield PPO 80-G
11 Month + Delta Dental PPO-Incentive	\$374.63	\$56.08
11 Month + Delta Dental PPO	\$368.89	\$50.34
11 Month + DeltaCare USA DHMO	\$359.95	\$41.41

MEDICAL PLAN FEATURES		
	In-Network	In-Network
Calendar Year Maximum	Unlimited	Unlimited
Deductible (Annual) – Individual / Family	\$100 / \$300	\$500 / \$1,000
Out-of-Pocket Maximum – Individual / Family	\$1,000 / \$3,000	\$2,000 / \$4,000
Co-Insurance (After Deductible)	0%	20%
Office Visit Copay – Primary Physician/Specialist	\$20 copay	\$30 copay
Inpatient Hospitalization	Ded, 0%	Ded, 20%
Outpatient Diagnostic Tests	Ded, 0%	Ded, 20%
Emergency Services (Copay waived if admitted)	\$100 copay / Ded, 0%	\$100 copay / Ded, 20%
Urgent Care Copay	\$20 copay	\$30 copay
Preventive Care	No cost	No cost
Mental Health/Substance Abuse – Outpatient Copay/Inpatient	\$20 copay / Ded, 0%	\$30 copay / Ded, 20%
Chiropractic Copay	Ded, 0% (limits apply)	Ded, 20% (limits apply)

PRESCRIPTION DRUGS		
	Navitus	Navitus
Out-of-Pocket Max – Individual / Family	\$1,500 / \$2,500	\$1,500 / \$2,500
Retail: 30 Day Supply – Generic/Brand	Network: \$7/\$25 Costco: \$0/\$25	Network: \$7/\$25 Costco: \$0/\$25
Mail Order : 90 Day Supply – Generic/Brand	\$0/\$60	\$0/\$60

DISTRICT CONTRIBUTION TOWARDS YOUR BENEFITS

For the 2022-2023 Medical Benefit Year, PSUSD contributes **\$16,780** towards the cost of the benefit package based on the medical and dental plan you select. If the rate for the benefit package is over this amount, the balance is paid by the employee in 11 Month payroll deductions using pre-tax dollars.

The tables above reflect rates for the Employee + Family Medical, Employee + Family Vision, and Dental for Employee Only. For each added Dependent enrolled in a PPO Dental plan, there will be an additional cost. There is no cost to add Dependents to the DeltaCare USA DHMO plan.



SISC

Ann Marie Estrada



Palm Springs Unified School District
New Employee Meeting
2022

Certificated and Management
Open Enrollment for Medical Plans



Agenda

The purpose of this presentation is to provide an overview of the health benefits offered by PSUSD.

Medical Plan Options

Blue Shield PPO

Blue Shield HMO

Kaiser Permanente HMO

SISC Value-Added Services

Member Resources



Medical Plan Options

Active employees are given the choice between 4 medical plans.

2 - SISC Blue Shield PPO Plans

100-B \$20 co-pay, Rx \$7-25

80-G \$30 co-pay, Rx \$7-25

1 - SISC Blue Shield HMO – Full Network

\$10-0 Admit, Rx \$7-25

1 - Kaiser Permanente HMO

\$15 Office Visit co-pay, Rx \$5-20 (30 day fill)

SISC medical plans offer a “Discount Premium for Dual Covered SISC Members” the following criteria must be met.

- Married/Domestic Partner couples enrolled in a SISC medical plan at any SISC member district qualifies
- Must cover each other
- Composite rated Medical and Rx rates

Medical Plan Options



	Blue Shield PPO 100-B \$20 Member Pays	Blue Shield PPO 80-G \$30 Member Pays	Blue Shield HMO 10-0 Member Pays	Kaiser HMO Trad HMO \$15 Member Pays
MEDICAL - CALENDAR YEAR Deductibles & Maximums				
Individual/Family Deductibles	\$100/\$300	\$500/\$1,000	\$0/\$0	\$0
Individual/Family Out-of-Pocket (OOP) Max (includes medical deductibles, co-insurance and co-pays)	\$1,000/\$3,000	\$2,000/\$4,000	\$1,000/\$2,000	\$1,500/\$3,000
PROFESSIONAL SERVICES				
Office Visit (OV) co-pay	\$0 copay 1st 3 visits then \$20	\$0 copay 1st 3 visits then \$30	\$10	\$15
Urgent Care co-pay	\$20	\$30	\$10	\$15
Specialists/Consultants co-pay	\$20	\$30	10	\$15
Prenatal, postnatal office visit co-pay	\$20	\$30	\$0	\$0
Scans: CT, CAT, MRI, PET etc.	0%	20%	\$0	\$0
Diagnostic X-ray & Laboratory Procedures	0%	20%	\$0	\$0
Infertility (Refer to Plan Document)	Not covered	Not covered	50%	Co-pay applies
Preventive Care (includes physical exams & screenings)	0% Ded Waived	0% Ded Waived	\$0	\$0
HOSPITAL & SKILLED NURSING FACILITY SERVICES				
Emergency Room visit (copay waived if admitted)	0% \$100 co-pay	20% \$100 co-pay	\$100	\$100
Inpatient Hospital (preauthorization required) - limits may apply	0%	20%	\$0	\$0
Outpatient Hospital	0%	20%	\$0	\$15
Surgery, Outpatient (performed in Surgery Center)	0%	20%	\$0	\$15
Surgery, Outpatient (performed in a Hospital) - limits may apply	0%	20%	\$0	\$15
MENTAL HEALTH & SUBSTANCE ABUSE TREATMENT				
INPATIENT: Facility Based Care (preauth required)	0%	20%	\$0	\$0
OUTPATIENT: Facility Based Care (preauth required)	0%	20%	\$10	\$15
OTHER SERVICES				
Ambulance (Ground or Air)	0% \$100 co-pay	20% \$100 co-pay	\$100	\$50
Acupuncture - Limits apply	0%	20%	\$10/30 visits (ASH Network) combined w/chiro	\$10/30 visits (ASH Network) combined w/chiro
Chiropractic - Limits apply	0%	20%	\$10/30 visits (ASH Network) combined w/acu	\$10/30 visits (ASH Network) combined w/acu
Durable Medical Equipment (DME)	0%	20%	\$0	no charge
Physical and Occupational Therapy - Limits apply	0%	20%	\$10	\$15
Hearing Aids	Amount in excess of \$700 allowance/24 months	20% and Amount in excess of \$700 allowance/24 months	50% Coinsurance 1 device/24 months	Amount in excess of \$500 allowance every 36 months

Pharmacy Plan Options

	Blue Shield PPO	Blue Shield PPO	Blue Shield HMO	Kaiser HMO
	100-B \$20	80-G \$30	10-0	Trad HMO \$15
MEDICAL - CALENDAR YEAR Deductibles & Maximums	Member Pays	Member Pays	Member Pays	Member Pays
Individual/Family Deductibles	\$100/\$300	\$500/\$1,000	\$0/\$0	\$0
Individual/Family Out-of-Pocket (OOP) Max (includes medical deductibles, co-insurance and co-pays)	\$1,000/\$3,000	\$2,000/\$4,000	\$1,000/\$2,000	\$1,500/\$3,000

	7-25	7-25	7-25	Custom \$5-\$20 (30 day)
PHARMACY BENEFITS				
Pharmacy Benefit Manager	Navitus	Navitus	Navitus	Kaiser
Individual/Family Brand & Specialty Rx Deductibles	none	none	none	none
Individual/Family Rx Out-of-Pocket (OOP) Max (includes Rx deductibles and co-pays)	\$1,500/\$2,500	\$1,500/\$2,500	\$1,500/\$2,500	Included w/ Med OOP Max
Generic co-pay/30 days supply	\$0 at Costco \$7 at Other Network	\$0 at Costco \$7 at Other Network	\$0 at Costco \$7 at Other Network	\$5 up to 30 day supply
Brand co-pay/30 days supply	\$25	\$25	\$25	\$20 up to 30 day supply
Specialty co-pay/up to 30 days supply	\$25 Must Use Navitus Mail	\$25 Must Use Navitus Mail	\$25 Must Use Navitus Mail	\$20 up to 30 day supply
Mail Order (Generic-Brand co-pay/90 days supply)	\$0-\$60	\$0-\$60	\$0-\$60	\$10-\$40/up to 100 day supply
Mail Order Pharmacy	Costco Mail Order Pharmacy	Costco Mail Order Pharmacy	Costco Mail Order Pharmacy	Kaiser Mail Order Pharmacy

This sheet is only a brief summary of In-Network patient costs. Please refer to the plan documents available through your district for applicable details, limitations, and exclusions. Out-of-Network services may not be covered. Employee cost/payroll deduction, if applicable, can be requested from the district.



100-B \$20; Rx 7-25

- \$0 Office visit copay for the 1st 3 visits to Primary Doctor each calendar year, then \$20 office visit copay.
- \$20 Urgent Care & Specialist co-pay
- \$100 individual/ \$300 family Deductible
- \$100 Emergency room co-pay (waived if admitted within 24 hrs.)
- \$100 Ambulance co-pay (air and ground)
- \$1,000 individual/ \$3,000 family Out-of-Pocket Maximum (*this is the most you will pay in a calendar year while using In-Network providers and facilities. Think of it as a 'safety net'*).

Outpatient **prescription drug** coverage through Navitus Health Solutions

- \$7 co-pay for generics and \$25 co-pay for brand medication for a 30-day supply – Fill at participating pharmacies **except Walgreens**.
- \$0 co-pay for generics at Costco for a 30 or 90-day supply (exception of some narcotic pain medication and some cough syrup with codeine).
- You do not need to be a member of Costco to use the pharmacy.
- Mail Order will be through Costco up to a 90-day supply. You will need a new prescription and complete the Costco Mail Order form to begin.
- It is always the patient's responsibility to confirm benefits and if providers are in-network or contracting. Out-of-network benefits are limited or not covered at all.

SISC Blue Shield PPO



80-G \$30; Rx \$7-25

- \$0 Office visit copay for the 1st 3 visits to Primary Doctor each calendar year, then \$30 office visit copay.
- \$30 Urgent Care & Specialist co-pay
- \$500 individual/ \$1,000 family deductible
- Plan pays 80% and member pays 20% after deductible has been met for in-network services.
- \$100 Emergency room co-pay (waived if admitted within 24 hrs.)
- \$100 Ambulance co-pay (air and ground)
- \$2,000 individual/ \$4,000 family Out-of-Pocket Maximum *(this is the most you will pay in a calendar year while using In-Network providers and facilities, think of this as a 'safety net')*.

Outpatient **prescription drug** coverage through Navitus Health Solutions

- \$7 co-pay for generics and \$25 co-pay for brand medications for a 30-day supply – Fill at participating pharmacies **except Walgreens.**
- \$0 co-pay for generics at Costco (30 or 90-day supply)
- You do not need to be a member of Costco to use the pharmacy.
- Mail Order will be through Costco up to a 90-day supply. You will need a new prescription and complete the Costco Mail Order form to begin.
- *It is always the patient's responsibility to confirm benefits and if providers are in-network or contracting. Out-of-network benefits are limited or not covered at all.*

Additional PPO plan information



- Some services provided by non-contracting or out-of-network providers/facilities are not covered and do not accumulate towards Out-Of- Pocket Maximum such as;
 - X-ray, Lab, Durable Medical Equipment (DME) and Physical Medicine which includes chiropractic, physical or occupational therapy.
 - If you use an OON Provider you will be responsible for any charges over the allowed amount that would have been paid to an in-network provider. This is called balance billing.
 - This does not apply to emergency services.

Always best to use In-Network Providers

- **IMPORTANT:** Surgeries are to have prior authorization before scheduling. It is best to confirm with the carrier for possible facility restrictions **before** any surgery or scheduled procedure is done.

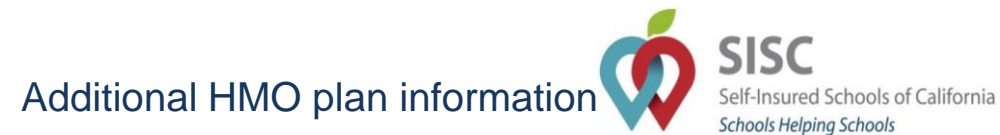


\$10-0; Rx 7-25 FULL NETWORK

- \$10 Office visit, Urgent Care & Specialist co-pay
- \$0 Copay per admission for Inpatient Hospital Stays
- \$0 co-pay for Lab, X-Ray, Skilled nursing care, Hospice and Durable Medical Equipment (DME)
- \$0 Deductible on this plan
- \$100 Emergency room co-pay (waived if admitted within 24 hrs.)
- \$100 Ambulance co-pay (air and ground)
- \$1,000 individual/ \$2,000 family Out-of-Pocket Maximum

Outpatient **prescription drug** coverage through Navitus Health Solutions

- \$7 co-pay for generics/\$25 co-pay for brand medication with a 30-day supply – Fill at participating pharmacies **except Walgreens.**
- \$0 co-pay for generics at Costco (30 or 90-day supply)
- Costco Mail Order up to a 90-day supply. Will need a new prescription and complete Costco Mail Order form to begin.



- Chiropractic and Acupuncture Benefit:
 - 30 combined visits per calendar year
 - \$10 copay
 - Must use American Specialty Health network (ASH)

- Hearing Aid Benefit:
 - Audiological evaluations \$10 copay
 - Hearing aid instrument & ancillary equipment every 24 months. 50% coverage.

- It is always the patient's responsibility to obtain referrals from their HMO Primary Care Physician or Medical Group to ensure medical services are covered and that their providers are in-network or contracting.

- Make sure to check your new Blue Shield ID cards to ensure the Provider/Medical Group you want is accurate.
 - If the information is not correct, call Blue Shield's customer service number on the back of the ID card to request a change. **Confirm the effective date of requested change with Blue Shield's customer service.**



Navitus Health Solutions manages the pharmacy benefits for the SISC PPO & HMO Blue Shield plans

SISC/Navitus Network

- The network includes most independent pharmacies and all major chain pharmacies **except Walgreens.**

Navitus Formulary – Are my medications covered?

Once enrolled you can register with Navitus at www.navitus.com and have access to benefit information and find out if your medication is covered.

To find out if your medication is covered **before** you are enrolled:

- Call Navitus Health Solutions at 1-866-333-2757
- Tell Customer Care you are **“New to SISC but not active in the system”**
- Provide Navitus with this code: **RXPID 7x25, SISC Formulary G.** Make sure you mention “SISC”

NOTE: *The SISC Formulary requires step-therapy for some covered medications or a prior authorization. There are some therapeutic classes of medication that have preferred medications. Members should register with www.navitus.com to view the most up-to-date formulary.*

SISC
Kaiser Permanente HMO



\$15 OV; Rx \$5-20 (30 day)

- \$15 co-pay for:
 - Office visit, Urgent Care & Specialist visits
 - Outpatient Hospital or Surgery center visits
 - Physical or Occupational Therapy visits
- \$50 Ambulance co-pay
- \$100 Emergency room co-pay
- \$0 Durable Medical Equipment (must use approved Kaiser DME providers)
- Outpatient **prescription drugs** are filled at a Kaiser Pharmacy
 - \$5 co-pay for generic (30 day supply)
 - \$20 co-pay for brand (30 day supply)
 - Kaiser Mail Order available. (Call Customer Service to begin the process).
- Kaiser members will access care at a Kaiser facility. There are no out-of-network benefits without approval from Kaiser.

Additional Kaiser Permanente HMO



Chiropractic and Acupuncture Benefits

- \$10 co-pay up to 30 combined visits per year
You can self-refer through American Specialty Health (ASH) Network
- Hearing Aid Benefit
 - \$500 allowance per device; 1 device per ear; 2 devices every 36 months
- Kaiser members have access to SISC's Value Added Services:
 - EAP – Employee Assistance Program
 - Expert Medical Opinion - Advance Medical
 - 24/7 Nurse Line
 - Kaiser members can call Member Service and request a “Phone Appointment” (This allows the member to speak with the physician without making a trip to the waiting room).
- Currently enrolled members will maintain their same medical record number.

ID Card Information



- **Blue Shield** will provide new ID cards with the new group number and pharmacy information to the subscriber.
 - **PPO Plans:** Blue Shield does not automatically issue PPO ID cards to dependent children. If you need an ID card for your dependent children call Blue Shield Member services at 1-855-256-9404 and request the ID card. ID cards are issued in the subscribers name.
 - **HMO Plans:** Blue Shield HMO ID cards will be issued for each person enrolled on the plan as they may all have a different PCP or Medical Group.

****Be sure to share your new ID card information when accessing medical services and filling a prescription.****

- **Kaiser Permanente** will only provide new ID cards IF the member has not received a card in the last 395 days or:
 - New Enrollment
 - Name Change
 - Requested a Replacement card
- If you have questions regarding benefits or claims, please contact the customer service numbers on your ID cards.



How to Access benefits without an ID card

One ID card is used for both medical and pharmacy services

Blue Shield MEDICAL benefits:

- Call Blue Shield Member Services at 1-855-599-2657 and ask for your ID number and Group Number.
- This information will allow you to register on Blue Shield's website www.blueshieldca.com and print a temporary ID Card.

Blue Shield PHARMACY benefits:

Are managed by Navitus Health Solutions 1-866-333-2757.

Pharmacy ID is your Blue Shield ID with a two digit extension (01 for subscriber, 02 for next dependent etc.).

Kaiser Permanente members:

- Call member services at 1-800-464-4000 to confirm enrollment and request your Medical Record Number (MRN).
- Kaiser plans use a Kaiser pharmacy.



Definitions:

Office Visit Co-pays – Member's responsibility.

Deductible – Member's responsibility before the plan pays.

Out-of-Pocket Maximum - this is the most you will pay in a calendar year while using In-Network providers and facilities. Look at it as a safety net.

(Office Visit Co-pays, deductible and coinsurance are all included in the OOP Max).

4th Quarter Carryover - SISC plans with a deductible have a 4th Quarter Deductible carry over.
(except the Anchor Bronze plan)

What this means is any money a member has paid towards their **deductible** in the months of Oct, Nov and Dec will be carried over to the next year to help satisfy that year's deductible.

Only the **deductible** is carried over not OV Co-pays or Co-insurance.

Dependent Eligibility Documentation is Required

DEPENDENT TYPE	REQUIRED DOCUMENTATION
Spouse	<ul style="list-style-type: none"> • Prior year's Federal Tax Form that shows the couple was married filing jointly (financial information may be blocked out). If you file separately SISC requires a copy of the Marriage Certificate and a Notarized SISC Marriage Affidavit. • For <u>newly married</u> couples where the prior year tax return is not available a marriage certificate will be acceptable
Domestic Partner	<ul style="list-style-type: none"> • Certificate of Registered Domestic Partnership issued by State of California (AB205 Compliant)
Children, Stepchildren, and/or Adopted Children up to age 26	<ul style="list-style-type: none"> • Legal Birth Certificate or Hospital Birth Certificate for newborns less than 6 months of age (to include full name of child, parent(s) name (s) & child's DOB) • Legal Adoption Documentation
Legal Guardianship up to <u>age 18</u>	<ul style="list-style-type: none"> • Legal Court Documentation establishing Guardianship
Disabled Dependents over <u>age 26</u>	<p><i>Blue Shield (All items listed below are required)</i></p> <ul style="list-style-type: none"> • Legal Birth Certificate or Hospital Birth Certificate (to include full name of child, parent(s) name & child's DOB) • Prior year's Federal Tax Form that shows child is claimed as an IRS dependent (income information may be blocked out) • Proof of 6 months prior creditable coverage • Completed Blue Shield Disabled Dependent Certification Form <p><i>Kaiser (All items listed below are required)</i></p> <ul style="list-style-type: none"> • Legal Birth Certificate or Hospital Birth Certificate (to include full name of child, parent(s) name & child's DOB) • Prior year's Federal Tax Form that shows child is claimed as an IRS dependent (income information may be blocked out) • Proof of 6 months prior creditable coverage • Completed Disabled Dependent Enrollment Application • Most recent Kaiser Certification notice (if available)

Value-Added Features Benefits and Services – No Cost



Individual flyers available upon request

Employee Assistance Program (EAP)–PPO, HMO & Kaiser plans

- Counseling for life's challenges; marriage, stress, grief, legal &, financial services. For all employees, dependents and anyone living in the household.

Expert Medical Opinion Benefit - Teledoc Medical –PPO, HMO & Kaiser Plans

- Members can request a second opinion from world-class specialist throughout the country. Confidential and HIPAA compliant. All done remotely by phone. Up to 6 hours phone consult with expert.

24/7 physician line – MDLive – PPO & HMO plans

- Must register before using. Make sure you are registering under SISC. Great program to use if you can't get to a doctor or are on vacation.

\$0 copay generic drugs at Costco and Mail Order- PPO and HMO Plans - HSA Plans excluded

- You do not need to be a member of Costco to use the pharmacy.
- Excludes some pain narcotic medication and some cough syrups.

Value Added Features Benefits and Services – No Cost



Enhanced Cancer Benefit with City of Hope – PPO Plans

SISC and Contigo Health have partnered to bring this benefit to SISC PPO members.

PPO members with a cancer diagnosis can call Contigo and request a second opinion from an Oncologist with City of Hope.

- Member will have a 1:1 in-person or virtual evaluation.
- Travel costs for patient and one adult companion.
- Recommended care plan from a cancer expert who will discuss it with the member and their treating oncologist.
- Continued access to cancer care experts for 12 months following the evaluation.

Vida Health-virtual health coaching – PPO & HMO Plans

- Addresses the person as a whole, several programs to participate in such as Chronic Conditions, Mental Health and Lifestyle.
- Vida Health will match the member with a health coach.
- Vida Coach will develop a personal plan and guide the member every step of the way.
- Be able to sync devices like fitness trackers, scales and blood sugar meters. These will be provided dependent on which program you select.
- Members must download the Vida Health App

Value Added Features Benefits and Services – No Cost



Hinge Health – virtual Physical Therapy for “Joint Pain”- PPO Plans

- Member has access to 1:1 coaching
- Tablet and sensors will be provided
- Members wear the sensors that records the members progress and reports back to the health coach
- Tablet will show the member how to do stretches and exercise without hurting themselves

\$0 Copay, 1st 3 visits to a PCP in a calendar year – PPO Plans

- Encourages members to have a Primary Care Provider
- Studies show that when a member regularly see’s a PCP they are apt to be more aware of any health issues sooner rather than later
- Having this knowledge shows that the person will begin treatment earlier for more serious illnesses
- Early detection has better outcome



Value Added Features Benefits and Services – No Cost

- **Maven Prenatal and Postpartum Support**
- Maven offers 24/7 virtual access to one-on-one maternity and postpartum support. Eligible SISC PPO members are matched with a 'Care Advocate' who connects them to trustworthy maternity and postpartum content.
- Download and log into the Maven Clinic app to access maternity and postpartum doctors, specialists, coaches, mental health experts, and so much more.
- Maven provides Pregnancy, Postpartum and Return to work support.
- Free 6 month diaper subscription for SISC PPO members who:
 - Enroll during their first or second trimester
 - Have an intro call with a Care Advocate
 - Have two appointments with Maven providers during pregnancy
 - Complete the exit survey with their baby is born.

Member Resources Benefit Information & Claims



Blue Shield PPO & HMO - Member Services

- Blue Shield Concierge 1-855-599-2657 (enhanced level of customer service)
 - www.blueshieldca.com/sisc (register as a member)
 - Download the Blue Shield Mobile App
 - Access EOBs, find providers, contact Blue Shield

Navitus Health Solutions (Rx)

- 1-866-333-2757 (on back of ID card, pharmacy services)
- www.navitus.com (register as a member)
- Review formulary, medication history, mail order form, specialty pharmacy info, prescription benefits

Kaiser Permanente – Customer Service

- 1-800-464-4000
- <https://my.kp.org/sisc/>

What do I need to do?

- 1 You Must Complete Appropriate Enrollment Form**
Fill all required fields with complete social security numbers, dates of birth and signature.
- 2 Provide the required dependent eligible documents (Tax form, Birth Cert etc.)**
Hard Copies are required to be submitted to the district office.
Dependent Eligibility Chart will be available
- 3 Palm Springs employees will be able to access Ease to enroll. See district for questions.**



Thank you!

Please contact HR/Benefits if you have any questions



BREAK SESSION

Risk Management
9:15 am - 9:30 am



DELTA

DENTAL

Duane Cook



Welcome Palm Springs USD
Members!

YOUR CHOICE - PREPAID OR PPO

Features	DeltaCare USA plan (Prepaid)	Delta Dental PPO plan
Dentist network	<ul style="list-style-type: none"> Visit your assigned DeltaCare USA network dentist to receive benefits. Easy referrals to a large specialty care network (referred by selected primary care dentist). 	<ul style="list-style-type: none"> Freedom to choose any licensed dentist, anywhere in the world, each time you or a family member requires treatment. No referral required for specialty care
Selecting a dentist	<ul style="list-style-type: none"> Ability to change selected network dentist monthly with a phone call or email to Customer Service 	<ul style="list-style-type: none"> No need to preregister with a dental office. Ability to change dentists anytime without contacting Delta Dental
Deductible / Maximum	<ul style="list-style-type: none"> No annual deductible and no annual dollar maximum 	<ul style="list-style-type: none"> No annual deductible Has annual maximum
Copayments / Coinsurance	<ul style="list-style-type: none"> All covered procedures have predetermined copayments. No or minimal copayments for most diagnostic and preventive services Minimal or no copayments for many restorative services. 	<ul style="list-style-type: none"> Covered services paid at applicable percentage of contract allowance (for example, 100%, 90%, 80%, etc.)
Out-of-area coverage	<ul style="list-style-type: none"> Out-of-area (35 or more miles from selected network dentist) emergency care allowance, up to \$100 per incident. 	<ul style="list-style-type: none"> Can visit any licensed dentist

YOUR CHOICE - PREPAID OR PPO

Features	DeltaCare [®] USA plan (Prepaid)	Delta Dental PPO plan
Covered Benefits	<ul style="list-style-type: none"> Wide range of covered services, including orthodontia Orthodontic takeover provision for new enrollees who have orthodontic treatment in progress (see plan booklet for full details) 	<ul style="list-style-type: none"> Wide range of covered services, including orthodontia
Administration	<ul style="list-style-type: none"> No claim forms 	<ul style="list-style-type: none"> Claim forms filed by Delta Dental dentists
Cost savings	<ul style="list-style-type: none"> Visit your selected DeltaCare[®] USA dentist to receive benefits. Pay only the copayment at the time of treatment. 	<ul style="list-style-type: none"> You usually have the lowest out-of-pocket expenses when visiting a Delta Dental PPO dentist. If you don't see a PPO dentist, a Delta Dental Premier dentist is usually your next best option.



Delta Dental
PPO™

We've got you covered

Delta Dental PPO

- Visit a PPO dentist to save the most.
- You can visit any licensed dentist.
- You won't be charged more than your expected share of the bill.



We've got you covered

Delta Dental PPO



- You don't need an ID card to check in.
- We'll coordinate dual coverage.
- Create an online account to check your benefits and claims online.

Emergency coverage

Visit any licensed dentist worldwide and receive benefits

Submit a claim for reimbursement



Delta Dental PPO

The Delta Dental Difference[®]



Delta Dental PPO



Delta Dental
Premier[®]



Non-Delta Dental



DeltaCare[®]
USA

Comprehensive coverage



Once enrolled, select a primary dentist from the DeltaCare USA network to start enjoying:

- Set copays
- No annual maximums
- No deductibles
- No claims
- Low premiums

How DeltaCare USA works

Getting dental care is easy

1



Choose a primary care dentist online or by phone

Make an appointment



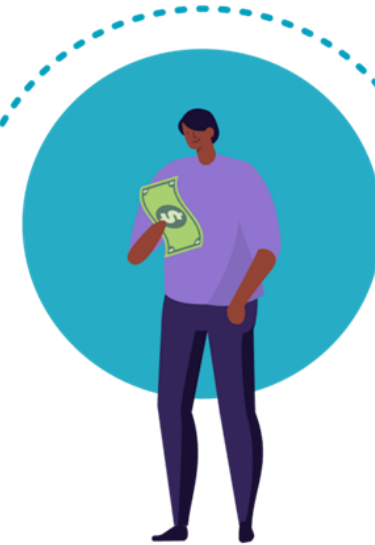
2



3

Visit the dentist

Pay your copayment (if any)



4

Specialty and emergency care

DeltaCare USA

- If you need specialty care, your primary care dentist will refer you
- Your primary care dentist requests authorization for specialty services
- Plan includes out-of-network coverage for emergencies



How to choose your dentist

Go to deltadentalins.com to browse the DeltaCare USA dentists in your area.

Write down the facility number of the primary care dentist you would like.

Submit your request

- Online: Create an online account at deltadentalins.com
- By phone: Call Customer Service at **800-422-4234**



Web and mobile resources



Check out the website



- Search for a network dentist in your area.
- Sign up for an online account
- Get answers to common questions about your dental plan.
- Read articles, browse recipes and watch videos about oral health and wellness.
- Subscribe to *Grin!*, our quarterly wellness e-magazine.

Go mobile

Download the app to have all the information you need at your [fingertips](#)



What can you do with the app?

Find a dentist	Coverage details	Electronic ID card	Cost estimator
✓	✓	✓	✓

To find the app, visit the [App Store](#) or [Google Play](#) and search for “Delta Dental.”

Download the **Delta Dental** app by Delta Dental Plans Association.

Thanks for your
time

We're pleased to take your questions



MetLife

Barry Baricza



Life

MetLife Legal Plans/
Legal Services

Group Voluntary Insurance Benefits

Prepared for: Palm Springs USD



L0222019711[exp0423][All States][DC, GU, MP, PR, VI]
Metropolitan Life Insurance Company, New York, NY 10166

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ADF# MULT1825.18

Life insurance – Key features

- A wide range of coverage options to fit your needs
- Your beneficiary receives the death benefit income tax free
- Underwriting requirements waived for certain amounts
- Competitive^{L1} group rates
- Convenient payroll deduction
- Portability^{L2} — take your coverage with you



Life/AD&D overview

[Basic Life/AD&D] coverage	Benefit – employer paid
Employee Life / AD&D coverage	Flat Amount Based on Your Class
Spouse/Domestic Partner Life/AD&D	\$1,500
Dependent Child Life/AD&D	\$1,500

Voluntary / Supplemental Life and AD&D coverage	Benefit – voluntary – employee paid
Employee Life / AD&D coverage	<p>Increments of \$10,000 up to a maximum of 5 times your base annual earnings or \$500,000 (whichever is less)</p> <p>Guaranteed Issue: \$100,000 – no age reduction</p>
Spouse Life / AD&D	<p>Increments of \$10,000</p> <p>Up to a maximum of \$500,000 but cannot exceed 100% of the employee amount</p> <p>Guaranteed Issue: \$25,000 – no age reduction</p>
Dependent Child Life / AD&D	<p>Under 15 days: \$100</p> <p>15 days – 6 months: \$1,000</p> <p>6 months – 26 years: options of \$2,500, \$5,000 or \$10,000</p> <p>Guaranteed Issue: \$10,000, not to exceed Spouse Coverage</p>



MetLife Group Life insurance... MetLife AdvantagesSM

Support, planning and protection when you need it most



Support

- Face-to-Face Grief Counseling^{L4}
- Delivering the Promise^{L5}
- Employee Assistance Program^{L6}
- Total Control Account^{L7}
- Travel Assistance^{L8}

Planning

- Face-to-Face Will Preparation^{L9}
- Face-to-Face Estate Resolution Services^{L9}
- WillsCenter.com^{L10}
- Funeral Planning Services^{L11}

Protection

- Coverage for active and retired employees^{L12}
- Services for workplace transitions^{L5}
 - Transition Solutions^{L5}
 - Portability^{L12}

Please refer to the notes at the end of this presentation regarding these value-added services.

Planning for the future



Will Preparation¹

Do you have a will? Many put this off because they believe it's too expensive, too complicated or simply think they don't own enough assets to make a one worthwhile.

Unfortunately, this may mean that your last wishes aren't carried out.

You and your spouse have unlimited access legal consultation from a network of over 15,000 attorneys who can help prepare or update a will, living will or power of attorney services.

Face-to-Face

- Call MetLife Legal Plans' toll-free number at **1-800-821-6400**.
- Provide the company name (Partners), customer number and the last four digits of the life policy holder's social security number.

Online

- Visit **www.willscenter.com²** and register as a new user
- Follow the simple instructions to create your online document
- Return at your convenience to complete or update stored documents

Assisting through life's changes



Travel Assistance⁴

When traveling internationally or domestically*, you and your dependents can access professional medical, travel, legal, financial and concierge services 24 hours a day, 365 days a year.

If you have any questions about the services,



Call:
Within the U.S.: (800) 454-3679
Outside the U.S.: (312) 935-3783 (collect)



Visit:
www.metlife.com/travelassist

All users are required to set up their unique profile via the registration process for first time access.

Once registration is completed you can access your account by selecting "Log in" which will then prompt you to enter your username and password.

- **Medical Assistance** Medical Evacuation and Repatriation, Hospital admission validation, prescription replacement, physician, hospital or dental referrals
- **Travel and Financial Support** Travel information, emergency pet boarding and repatriation, emergency cash or bail assistance, lost document and luggage assistance
- **Concierge Services** Restaurant, shopping, hotel and airline recommendations and reservations, destination information, entertainment recommendations

*Traveling more than 100 miles from home

Support through difficult times

Estate Resolution Services¹

Settling an estate can be a complex and lengthy process, but it doesn't have to be.

Estate representatives and beneficiaries may receive legal assistance with probating estates.

With unlimited consultations, either in person with an attorney or by phone, including court representations, you can feel confident you've made the right decisions.



MetLife Legal Plans

Simply contact a Client Services representative to get started.

- Call 1-800-821-6400
- Provide the company name, customer number (if available) and the last 4 digits of the employee's social security number.
- A Client Services representative will assign you a case number and help you locate a participating plan attorney in your area.

Personal Financial Profile

Organizing personal financial and digital information is a huge step in the financial wellness journey



Providing individuals with the right tool to keep track of important financial information should the unexpected happen

To access this guide, visit www.metlife.com/financial-wellness-content-hub/ or scan the QR code.



My Personal Information

Place of birth, spouse, children, identification numbers, medical and employer information, etc.

My Insurance Information

Life, health, homeowners, auto, etc.

Personal Advisors

Doctors, attorneys, dentists, landlords, etc.

Banks and Financial Partners

Checking and savings accounts, safety deposit boxes, pensions, etc.

Assets: What you have

Addresses, vehicles, boats, etc.

Liabilities: Who you owe

Mortgage, credit cards, automated payments, etc.

Digital Life

Social media, email, subscriptions, memberships, etc.

Important Document Locations

Location of wills, deeds, titles, certificates, etc.



MetLife Legal Plan



VSP VISION CARE

Susan Moua



Get to Know Your VSP Vision Bene

PALM SPRINGS USD

Classification: Confidential



Your VSP Plan at a Glance

	Signature Plan
Exam <i>(\$15 Copay – Applies to exam and glasses)</i>	<ul style="list-style-type: none"> WellVision Exam covered Every 12 months
Frame Allowance <i>(\$15 Copay – Applies to exam and glasses)</i>	<ul style="list-style-type: none"> \$120 Frame allowance (\$65 at Costco) Every 24 months
Lenses <i>(\$15 Copay – Applies to exam and glasses)</i>	<ul style="list-style-type: none"> Single vision, lined bifocal, or lined trifocal lenses Impact-resistant lenses for dependent children. Every 12 months
Lens Enhancements	<ul style="list-style-type: none"> Standard Progressive lenses covered with \$50 copay Average 30% savings on lens enhancements like Scratch-resistant coating, UV protection, or Anti-glare coatings
Contact Lens Allowance (instead of glasses)	<ul style="list-style-type: none"> \$105 allowance for contacts lenses and contacts lens exam (fitting and evaluation) Every 12 months



Why VSP?



See Well. Be Well.®



Care

As a health-focused company, your well-being is at the core of everything we do. Eye care is essential to your overall health.



Savings

With VSP®, your family can rely on additional savings and offers to get the care you need at low out-of-pocket costs.



Access

From private practice doctors to retail chain locations, VSP is here to help you with safe, convenient access to local eye doctors.



Eye Care is Essential

Keep yourself healthy with a yearly eye exam from a VSP network doctor.

Did you know?

Annual eye exams provide an unobstructed view of the blood vessels and can help detect early signs of serious eye and health conditions like glaucoma, diabetes, high cholesterol, and high blood pressure.

- Nearly **96 million** US adults are living with **pre-diabetes** and **84%** don't know they have it.*

*Centers for Disease Control and Prevention (CDC)

Classification: Confidential



Convenient Access You Want

With thousands of in-network doctors, it's easy to find an eye doctor near you.

With Even More Options

Maximize your benefits at a Premier Program location (at no extra cost) including thousands of private practice doctors and more than 700 Visionworks® retail locations nationwide.

- Exclusive bonus offers and savings
- A wide selection of featured frame brands
- Advanced eye exam technology, like retinal imaging

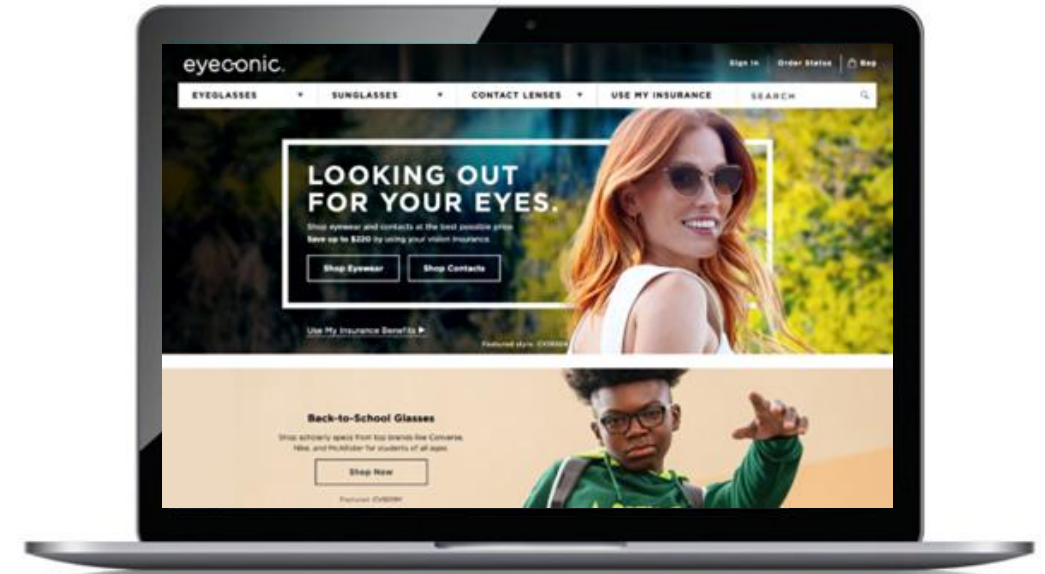


Eyeconic

As a VSP-owned company, **Eyeconic** seamlessly connects your VSP vision benefits to your account.

Eyeconic offers a variety of well-known brands and contact lenses. Choose from more than 70 eyewear brands like Calvin Klein, Cole Haan, Nike, and more.

Find your product, customize your order and we do the rest. Start saving today at **eyeconic.com**[®] today.



eyeconic

a vsp vision company



Participating Retail Chains

There are more than 10,000 retail chain locations in the VSP network in addition to Visionworks, including:

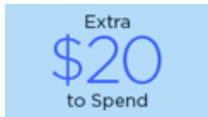
- Costco Optical
- Pearle Vision
- MyEyeDr
- Clarkson Eyecare
- RxOptical
- And more



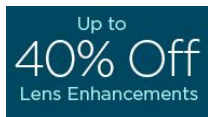
Exclusive Member Extras

Get the Savings You Need.

Visit **vsp.com** to see all the Exclusive Member Extras. VSP puts members first by providing you with exclusive special offers from leading industry brands, totaling more than **\$3,000 in savings**. Discover great deals on glasses, sunglasses, contact lenses, and more.



Enjoy an Extra \$20 on Featured Frame Brands.



Save up to 40% on popular lens enhancements*.

Offers vary based on state and benefit plan. Brands and offers subject to change.

*Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details.



Using Your Benefit is Easy

Once you're enrolled...

- Create an account at **vsp.com** and review your personalized benefit information.
- You can find a VSP in-network doctor by visiting **vsp.com** or calling **800.877.7195**.
- At your appointment, simply tell them you have VSP. No ID card needed—and we'll take care of the rest! There are no claim forms to fill out when you see a VSP network doctor.



Thank you!

VSP helps you see well and be well with the coverage and quality care you deserve.

Questions? Contact us.

Call **800.877.7195** or visit **VSP.com**.

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All other brands or marks are the property of their respective owners. 102051 VCCM



AMERICAN FIDELITY

Jason Czajkowski



Plan Today for Tomorrow's Expenses

EMPLOYER BENEFIT SOLUTIONS FOR YOUR INDUSTRY

ESB-4015-0320

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a different opinion

What Is a Section 125 Plan & Why Have it?

- Allows employers to offer eligible benefits to employees on a pre-tax basis
- Helps reduce your tax and increase your spendable income
- **Designed to help employees save money on important eligible costs, like:**
 - Insurance premiums
 - Health-related expenses
 - Dependent day care expenses



When you designate money to pay for your benefits on a pre-tax basis, you are decreasing your taxable income, allowing you to take more money home from each paycheck.





Healthcare Flexible Spending Accounts (FSA)

Healthcare Flexible Spending Accounts

How It Works

- Used to reimburse eligible medical expenses
- Expenses may be incurred by you, your spouse, or eligible dependents
- Eligible employees may participate, even if you do not have major medical coverage through your employer

Examples of Eligible and Ineligible Expenses

Examples of Eligible Expenses

- Copayments
- Eye exams
- Prescription eyeglasses
- Menstrual Products
- Lasik
- Orthodontia expenses¹ and other dental expenses
- Eligible over-the-counter medicines and drugs
- Transportation expenses relative to medical care including mileage at Internal Revenue Code (IRC) allowable rate

Examples of Ineligible Expenses

- Cosmetic procedures
- Chapstick
- Toothbrushes
- Expenses reimbursed under any other health plan or from any other source
- Insurance premiums
- Vitamins (for general health)

¹ Future service dates require proof of payment.

Healthcare FSA Reminders

Use or Lose

- Carefully choose your election amount each year
- Under Treasury regulations, if you don't use your full election amount during the required timeframe, any remaining funds are forfeited
- Check with your employer to see if your plan offers a:
 - Runoff Period
 - Carryover Provision
 - Grace Period

Dependent Care Account



Dependent Care Account (DCA)

- Used to reimburse eligible dependent day care expenses incurred while you are working
- You may allocate up to \$5,000 pre-tax per calendar year for reimbursement of dependent day care services or \$2,500 if you are married and file a separate tax return

Eligible Dependent Care Expenses

- After-school care or extended day care programs
- Babysitter, during work hours, inside or outside participant's household
- Custodial or elder care expenses if the qualifying individual still spends at least eight hours each day in the employee's household

Ineligible Dependent Care Expenses

- Educational expenses (kindergarten and above)
- Custodial elder care (not work-related, for other purpose)
- Nursing home care
- Transportation to and from eligible care
(not provided by the care provider)

Limited Benefit Accident Only Insurance



24-Hour Coverage



Sport-Related
Injury



Wellness Benefit



Over 25
Treatments
Covered

americanfidelity.com/info/accident

This product may contain limitations, exclusions, and waiting periods.

This product is inappropriate for people who are eligible for Medicaid coverage. Wellness not available in all states.

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Limited Benefit Cancer Insurance



Transportation
and Lodging
Expenses



Multiple Coverage
Options



Diagnostic and
Prevention
Testing



More than 25
Benefits

americanfidelity.com/info/cancer

This product may contain limitations, exclusions, and waiting periods.
This product is inappropriate for people who are eligible for Medicaid coverage.

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a different opinion

Disability Income Insurance



Guaranteed Issue



Custom Coverage Options



Return-to-Work Benefit



Employee Assistance Program

americanfidelity.com/info/disability

This product may contain limitations, exclusions, and waiting periods.

Limited Benefit Hospital Indemnity Insurance



Hospital Benefit



Accident Benefit



Benefits Paid to You



No Health Questions Asked

americanfidelity.com/info/hospital-indemnity

This product may contain limitations, exclusions, and waiting periods. **This product is inappropriate for people who are eligible for Medicaid coverage.** *This product may not be HSA qualified if optional benefits or riders for this coverage are selected.

"Hospital" shall not include an institution, or part thereof, used by the Covered Person as a place for rest or for the aged, a nursing or convalescent home, a long term nursing unit or geriatrics ward, or an extended care facility for the care of convalescent, rehabilitative or ambulatory patients.

Limited Benefit Critical Illness Insurance



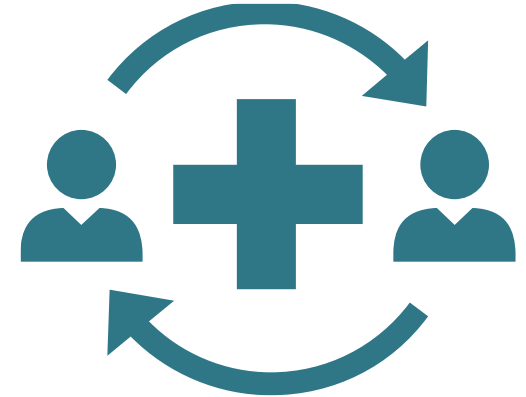
Simplified
Underwriting



Health
Screening



Lump Sum Benefit



Recurrent
Diagnosis Benefit

americanfidelity.com/info/critical-illness

This product may contain limitations, exclusions, and waiting periods.
This product is inappropriate for people who are eligible for Medicaid coverage.

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a different opinion

Life Insurance Options



- AF™ Term Life Insurance
- AF™ Whole Life Insurance
- Universal Life Insurance

americanfidelity.com/info/life

AF™ Whole Life Insurance and AF™ Term Life Insurance: This product may contain limitations, exclusions, and waiting periods. Not generally qualified benefits under Section 125 Plans.

Universal Life Insurance: This product may contain limitations, exclusions, and waiting periods. Not generally qualified benefits under Section 125 Plans. After the guaranteed period, the premiums may change. Underwritten by Texas Life Insurance Company. Not affiliated with American Fidelity Assurance Company.

AMERICAN FIDELITY 
a different opinion

Questions?

To learn more, contact:

800-365-9180 Ext 0

<https://benefits.americanfidelity.com>

americanfidelity.com

RISK MANAGEMENT

Benefits Orientation

Renée Brunelle - *Director of Risk Management*

August 5, 2022