



TAKE ACTION REMINDERS!

- If you do not actively enroll in benefits within 30 days of your date of hire, you will not have benefits coverage for the upcoming plan year.
- Remember to provide/update beneficiaries as necessary for Voluntary Term Life and AD&D policies.
- New hire employees may be eligible for certain benefits without health questions (guaranteed issue). Please review and understand these guaranteed issue amounts and limitations.
- Submit any qualifying life event changes for you and eligible dependents within 30 days of event date for Campus Benefits and 60 days for State Health Insurance.

There are two separate benefit enrollments:

- 1. Campus Benefits Voluntary Benefits
- 2. State and School Employees' Health Insurance Plan
 *Benefits enrollment must take place within 30 days of hire date



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How to Enroll in Campus Benefits Voluntary Benefits

- 1. Visit https://www.stoneschoolsbenefits.com/
- Select the "Enroll" tab or the "Campus Connect" tab
- 3. Follow the on screen instructions OR
- 4. Contact Campus Benefits at 866.433.7661 opt 5
- Plan year is 9/1 8/31
- Annual open enrollment occurs in August

How to Enroll in your State and School Employees' Health Insurance Plan

- 1. Complete a State Health Insurance enrollment form within 30 days of your hire date
- 2. Submit the form to Katie Ratcliff at the District Office

Katie Ratcliff

601.928.7247 ext. 1115

E: kratcliff@stoneschools.org

- Plan year is 1/1 12/31
- Annual open enrollment occurs in the Fall (October/November)

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Stone County School District offers a comprehensive and valuable benefits program to all eligible employees. Our benefits package is designed to provide security and assistance during a time of need. Please become familiar with the various options and select the best coverage for the upcoming plan year.

Need Help? Start Here:

mybenefits@campusbenefits.com 866.433.7661, opt 5 Stone County School District Contact Katie Ratcliff P: 601.928.7247

Eligibility

- All full-time employees working 20 or more hours per week are eligible to enroll in the various benefits described throughout the guide (Certain rules may apply per benefit).
- General plan eligibility is listed on the top of each page. Specific employee and dependent eligibility rules are governed by each plan's policy document/certificate, which is available on your employee benefits website, or by contacting Campus Benefits (after 9.1.2023).

Enrollment

• New Hire: Benefits enrollment must take place within 30 days of hire date.

When Do Benefits Begin

- The effective date of coverage for benefits depends on your hire date.
- **Campus Benefits:** Typically, benefits will begin the first of the month following date of hire.
- **State and School Employees' Health Insurance Plan/State Life Insurance:** Typically, benefits begin on your date of hire.
- For all benefits, you must be actively at work on the effective date of coverage.

When Do Benefits End

• Upon termination of employment, the benefits end date will vary by benefit. Please consult with a Campus Benefits advisor (voluntary benefits) and Katie Ratcliff (State and School Employees' Health Insurance Plan & State Life) on your specific benefits end date.

Changes

- Employee benefit elections are allowed as a new hire and during the annual open enrollment period. The selected benefits will remain in effect throughout the plan year.
- A qualifying life event allows eligible changes to benefit elections throughout the plan year.
- For Campus Benefits all qualifying life events must be submitted within 30 days of the event date.
- For State and School Employees' Health Insurance Plan all qualifying life events must be submitted within 60 days.



SERVICE HUB/ SUPPORT CENTER

TOGETHER WE'RE US

Campus Benefits is your dedicated advocate for all your voluntary benefits.

When to contact the Campus Benefits Service Hub?

- Portability/Conversion
- Benefits Education
- Evidence of Insurability
- Qualified Life Event Changes
- Claims
- Card Requests
- Benefit Questions
- COBRA Information

The
Campus
Benefits team
understands the claims
processes and leverages
carrier relationships to
expedite the paperwork
efficiently and ensure claims
are not delayed due to
improper paperwork
completion.

How to File a Claim:

- 1. Contact Campus Benefits via Phone or Email
- 2. Work with Campus Benefits' claims specialist to complete the necessary paperwork
 - Employee Portion
 - Physician Portion
 - Employer Portion
- 3. Submit the Necessary Paperwork to Campus Benefits via the secure upload
 - Secure upload located at: https://www.stoneschoolsbenefits.com/

Frequently Asked Questions (FAQs):

Q: When must a qualifying life event change be made?

A: For voluntary benefits, please notify Campus Benefits within 30 days of the life event date.

A: For State Health Insurance life events, please contact Katie Ratcliff at Stone County School District within 60 days of the life event date.

Q: Am I required to contact Campus Benefits to file a claim?

A: No. However, in our experience the number one reason for claim denial or delay is due to incomplete or inaccurate paperwork. By working with Campus Benefits' claim specialist, we can advocate on your behalf.

Q: How can I access my dental card or vision card quickly?

A: Your group dental and vision plan information is available at: https://www.stoneschoolsbenefits.com/



Phone: 866.433.7661, Opt 5

Email: mybenefits@campusbenefits.com

Website:

https://www.stoneschoolsbenefits.com/

EMPLOYEE ASSISTANCE PROGRAM

Life's not always easy. Sometimes a personal or professional issue can get in the way of maintaining a healthy, productive life.

Your Employee Assistance Program (EAP) can be the answer for you and your family.

We're Here to Help

Mutual of Omaha's EAP assists employees and their eligible dependents with personal or jobrelated concerns, including:

- Emotional well-being
- Family and relationships
- Legal and financial matters
- Healthy lifestyles
- Work and life transitions

EAP Benefits

- Access to EAP professionals 24 hours a day, seven days a week
- Information and referral services
- Service for employees and eligible dependents
- Robust network of licensed mental health professionals
- Three face-to-face sessions* with a counselor (per household per calendar year)
- Legal assistance and financial resources
 - Online will preparation
 - Legal library and online forms
 - Financial tools & resources
- Resources for :
 - Substance use and other addictions
 - Dependent and Elder Care resources

Access to a library of educational articles, handouts, and resources via mutualofomaha.com/eap

*Face-to-face visits can also be used toward legal consultations

What to Expect

You can trust your EAP professional to assess your needs and handle your concerns in a confidential, respectful manner. Our goal is to collaborate with you and find solutions that are responsive to your needs.

Your EAP benefits are provided through your employer. There is **no cost** to you for utilizing EAP services. If additional resources are needed, your EAP professional will help locate appropriate resources in your area.

Don't delay if you need help

Visit <u>mutualofomaha.com/eap</u> or call **800.316.2796** for confidential consultation and resource services.

Plan RatesCoverage provided at no cost to you.

DON'T FORGET THE BENEFITS PORTAL!





What can you find on the Benefits Portal?

- Plan Highlight Sheets
- Policy Documents and Certificates
- Claim Forms
- Links to Carrier Websites

What can the Service Hub assist you with?

- Claims
- Card Requests
- Benefit Questions
- Qualified Life Events

Campus Benefits is your dedicated contact for the voluntary plans included within this benefits guide

(excludes State Health Insurance, State Life and Retirement).

CAMPUS BENEFITS ENROLLMENT

Website: https://www.stoneschoolsbenefits.com/

STOP!

Please note: For the 2023 Open Enrollment Period, August 1 - August 18th, 2023, you will need to schedule an appointment with an on-site representative to enroll in benefits.

You will be unable to log into the enrollment platform until after the plan year starts, 9/1/23.

Questions: Call 866.433.7661 opt 5

https://www.stoneschoolsbenefits.com/

Select "Campus Connect" to login

Existing User Login

- 1. Enter your username
- 2. Enter your password
- 3. Click "LOGIN"
- 4. Click on the "Start Benefits" button and begin the enrollment process

FAQ'S

What is my username?

- Work email address OR
- Email address you provided to HR when hired OR
- Email address you used to previously change your username

What is my password?

To create or reset a forgotten password follow the steps on the login page using tips below.

- Password must be at least 6 characters
- It must contain a symbol and a number
- Using uppercase, numbers and symbols greatly improves security

Company Identifier: SCSD21

New User Registration

- 1. On Login page click on "Register as a new user" and enter information below
 - First Name
 - Last Name
 - Company Identifier: SCSD21
 - PIN: Last 4 Digits of SSN
 - Birthdate
- 2. Click "Next"
- 3. Username: Work email address or one you have provided to HR when you were hired
- 4. Password: Must be at least 6 characters and contain a symbol and a number
- 5. Click on "Register"
- 6. On the next page, it will show your selected Username. Click on "Login"
- 7. Enter Username and Password
- 8. Click "Start Benefits" to begin the enrollment

STILL NEED HELP?

Contact Campus Benefits

Email <u>mybenefits@campusbenefits.com</u> Call 1-866-433-7661, opt 5

	Login Information	
į	Username:	į
	Password:	
		Į

SHORT-TERM DISABILITY

What is Short-Term Disability Insurance? A type of coverage that replaces a portion of your income if injury or illness prevents you from working for a short period of time. It provides financial security for you and any loved ones who may depend on your ability to earn a paycheck. You may also hear disability insurance referred to as disability income insurance or income protection.



Eligibility: All full-time employees working 20+ hours per week

- Coverage through Mutual of Omaha
- Employee must be actively at work on the effective date
- Pays in-addition to sick leave above 100% of pre-disability earnings
- No health questions EVERY YEAR!

Short-Term Disability Benefits		
Elimination Period	Benefits begin after you have been out of work due to an injury or illness for the elimination period Option 1: 7 Calendar days OR Option 2: 14 Calendar days	
Benefit Duration	Covers accidents and sicknesses: Up to 11 weeks (14 calendar days) OR Up 12 weeks (7 calendar days) (Based on elimination period option chosen)	
Benefit Percentage (weekly)	66.67% of your gross weekly salary	
Maximum Benefit Amount (weekly)	\$1,500	
Pre-existing condition	3/6 - Any condition that you receive medical attention for in the 3 months prior to your effective date of coverage that results in a disability during the first 6 months of coverage, would not be covered. (Applies to new enrollees only)	
Portability Included (a continuation option is available)		



Important Notes: Disability benefits offset with other outside sources of income. Please consult with a benefits counselor on how this benefit will coordinate.

Plan Rates

Enrollment system will calculate based on payroll information provided by employer.

Please contact a Campus Benefits counselor for rate details.

LONG-TERM DISABILITY

What is Long-Term Disability Insurance? A type of coverage that replaces a portion of your income if injury or illness prevents you from working for a long period of time, up to Social Security Normal Retirement Age. It provides financial security for you and any loved ones who may depend on your ability to earn a paycheck. You may also hear disability insurance referred to as disability income insurance or income protection.



Eligibility: All full-time employees working 20+ hours per week

- Coverage through Mutual of Omaha
- Employee must be actively at work on the effective date
- No health questions EVERY YEAR!
- Does not pay in-addition to sick leave

Long-Term Disability Benefits		
Elimination Period	Benefits begin after you have been out of work due to an injury or illness for 90 calendar days	
Benefit Duration	Covers accidents and sicknesses up to social security normal age of retirement	
Benefit Percentage (monthly)	60% of your gross monthly salary	
Maximum Benefit Amount (monthly)	\$5,000	
Pre-existing condition	6/12 - Any condition that you receive medical attention for in the 6 months prior to your effective date of coverage that results in a disability during the first 12 months of coverage, would not be covered. (Applies to new enrollees only)	
Additional Plan Features	Recurrent disability, survivor benefit, waiver of premium	



Important Notes: Disability benefits offset with other outside sources of income. Please consult with a benefits counselor on how this benefit will coordinate.

Plan Rates

Enrollment system will calculate rates based on payroll information provided by employer.

Please contact a Campus Benefits counselor for rate details.

LIFE INSURANCE 101

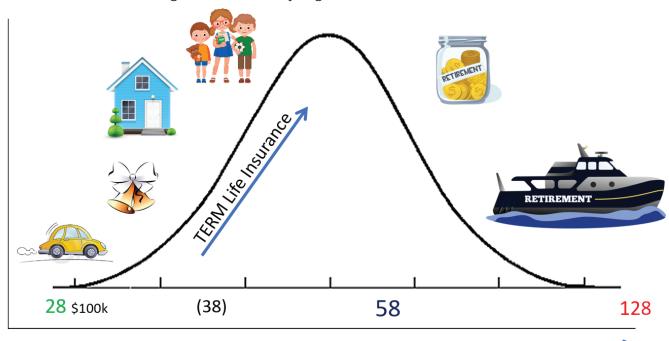
The need for life insurance depends on each individual life situation. If loved ones are financially dependent on you, then buying life insurance coverage can absolutely be worth it. Even if you don't have financial dependents yet, life insurance can be a valuable solution for making death easier on a family (at least financially.) There are two voluntary life insurance options offered through your employer: Term Life Insurance and Permanent Life Insurance. To follow is an overview of differences.

Term Life and Permanent Life work best used in conjunction with one another. Term Life can protect your family in your younger working years and Permanent Life can protect your family in your retirement years.

TERM LIFE INSURANCE

Term Life insurance is illustrated on the bell curve below. The term life offered is a group policy which allows you to get more benefit for less premium.

- Term life insurance is for the unexpected death
- Includes an Accidental Death & Dismemberment Benefit
- Term life insurance is flexible and allows changes to your benefit amount each year depending on life changes. For example, as you get married and have children the need for term insurance often increases. As you near retirement, the need for term life insurance often decreases.
- Coverage is portable at retirement or if you leave the employer (premium will increase)
- Premiums are based on age and increase as you get older



Permanent Life Insurance Monetary Life Line

PERMANENT LIFE INSURANCE

Permanent Life Insurance is illustrated above along the bottom of the graph with a straight blue arrow.

- Permanent life insurance offers a stable premium along the lifetime of the policy
- Permanent life offers a level premium and is meant to take into retirement
- Permanent life is an issue age policy is based on your age when the policy is issued
- This is an individual plan you can take with you regardless of where you work

VOLUNTARY TERM LIFE AND AD&D INSURANCE

What is Voluntary-Term Life and Accidental Death & Dismemberment Insurance? Proceeds can be used to replace lost potential income during working years and help ensure your family's financial goals will still be met; goals like paying off a mortgage, keeping a business running, and paying for college. AD&D coverage is included as a part of life insurance benefits and will pay out a lump-sum death benefit in the event you or a covered loved one are killed accidentally or die later as the direct result of an accident.



Eligibility: All full-time employees working 20+ hours/week, spouse and children (up to age 26)

- Coverage through Mutual of Omaha
- Employee must be actively at work on the effective date of coverage
- Only covered employees may elect dependent coverage
- Employee and Spouse cannot be double covered if both work for Stone County School District. Children cannot be covered by both parents, if both work for Stone County School District.
- Dependent coverage may not exceed employee coverage amounts.
- If electing for the first time outside of the initial open enrollment period or for an amount over the Guaranteed Issue Amount, health questions will be required

Voluntary Term Life and Accidental Death & Dismemberment (AD&D) Benefits

LIFE AND AD&D AMOUNT

(AD&D amount matches life amount)

Employee Increments of \$10,000 up to the lesser of \$500,000 or 5 times annual salary

Spouse (Coverage terminates when employee reaches age 90) Increments of \$5,000 up to \$250,000 (100% of Employee Election)

Child(ren) (up to Age 26) Minimum of \$2,000 up to \$10,000 (increments of \$1,000)

GUARANTEED ISSUE /NO HEALTH QUESTIONS (NEW HIRE/INITIAL ENROLLMENT)

 Employee
 \$200,000

 Spouse
 \$50,000

Child(ren) \$10,000

If currently enrolled:

GUARANTEED INCREASE IN BENEFITEmployee can increase up to \$50,000 at open enrollment, with no health questions, up to the guaranteed issue amount of \$200,000

Spouse can increase up to \$10,000 at open enrollment, with no health questions, up to the guaranteed issue amount of \$50,000

Age Reduction 50% at age 75

ADDITIONAL FEATURES

Portability (prior to age 70), Conversion, Living Care Benefit, Waiver of Premium

Plan Rates

Cost of coverage is based on the level of benefit you choose and your age. Spouse rates are based on employee's age. Please contact a Campus Benefits counselor for rate details.

PERMANENT LIFE INSURANCE

What is Permanent Life Insurance? Coverage that provides lifelong protection, and the ability to maintain a level premium.



Eligibility: All full-time employees working 20+ hours/week, spouse and children (up to age 23 if a full-time student)

- Coverage through Trustmark
- Offers the flexibility to meet a variety of personal needs while allowing employees the choice of benefit and premium amounts which fit their paychecks and lifestyles
- No Health Questions up to the guaranteed issue amount if enrolling during the 2023 open enrollment period
- If electing for the first time outside of the initial open enrollment period or for an amount over the Guaranteed Issue Amount, health questions will be required

Permanent Life Benefits		
PLAN MAX	IMUMS	
Employee & Spouse (based on age)	Up to \$300,000	
Children (based on age) Juvenile Policy: Ages 0-17 Full-time Student/Dependent on parent: Ages 18-22 Grandchildren: Ages 0-18	Based on weekly purchase amount and issue age	

GUARANTEED ISSUE (NO HEALTH QUESTIONS AT INITIAL/NEW HIRE ENROLLMENT)

Employee (to age 64)	Up to \$100,000 Modified GI (2 health questions) up to \$125,000	
Spouse (to age 64)	Modified GI (two health questions) based on \$3 per week of premium	
Child	Modified GI based on \$4.54 per week of premium	
Grandchildren	Simplified Issue (5 Health Ouestions)	

ADDITIONAL PLAN INFORMATION/OPTIONS

Coverage is portable at the same cost.

Accelerated Death Benefit: Receive 75% of benefit (life expectancy is 24 months or less)

Child GI Buy-up Option: Child can increase coverage as an adult with no health questions (up to a max)

Plan Rates

Cost of coverage is based on the level of benefit you choose and your age.

Please contact a Campus Benefits counselor for rate details.

STATE LIFE AND AD&D INSURANCE

What is State Life Insurance? A program offered to all Stone County School District employees through the State of Mississippi. This is a Basic Life Insurance program that can provide a cash benefit in the event the insured passes away.

Eligibility: All Stone County School District employees

- Coverage through Minnesota Life Insurance Company (Securian Financial)
- 50% of coverage is paid for by Stone County School District
- Coverage available: Up to 2 times basic annual earnings up to a max of \$100,000
- Retiree Coverage: Coverage up to \$20,000 available (based on retiree date)
- Continuation of Coverage: Policy Number: 33683 Access Key: msse Phone: 866.365.2374

Contacts and Beneficiary Update Information.

Minnesota Life Phone: 888.658.0193

To manage your beneficiary designation online:

- 1. Log in to <u>bcbsms.com</u>. If you have not previously registered, information will be required from your BCBSMS ID card to complete the registration process.
- 2. Go to the My Benefits tab.
- 3. Under the Life Benefits section, click the link to update the beneficiary information. You will see a notification asking you to "Agree" to be transferred to a secure portal provided by Minnesota Life. Click "I Agree."
- 4. Click "View beneficiary."
- 5. If you need to make any changes, click "Update Designation," and provide the name(s), relationship(s) and respective benefit shares.
- 6. After this information has been entered, you will receive an email acknowledgment, as well as a letter in the mail confirming your changes to your beneficiary designation.



DENTAL

What is Dental Insurance? A health and wellness plan designed to pay a portion of dental costs associated with preventive, basic, some major dental care, as well as orthodontia.



Eligibility: All full-time employees working 20+ hours/week, spouse and dependent children (up to age 26)

- Coverage through MetLife
- In-Network Provider Directory: www.metlife.com (Network: PDP Plus)
- Claims must be submitted within 90 days of date of service
- Orthodontics available for Adults (Employee & Spouse) and Children
- The chart below is a sample of covered services. Please see the Plan Certificate on your Employee Benefits website for a detailed listing of services in their entirety.

Coinsurance	Plan
Preventive - Type A	100%
Basic - Type B	80%
Major - Type C	50%
Orthodontics - Type D	50%

Monthly Rates		
Employee	\$28.17	
Employee + Spouse	\$55.18	
Employee + Children	\$64.56	
Family	\$90.56	

Dental Benefits Summary	Plan
Calendar Year Deductible	\$50/person \$150/family
Out of Network Coverage	80th percentile UCR
Waiting period	None
Calendar Year Plan Maximum	\$1,000 per person
Orthodontia (Lifetime) *Coverage for Adult Employee & Spouse and Children	\$1,000 per person



DENTAL

Services		
Type A - Preventiv	/e	
Oral Exams (2 times every 12 months)	100%	
Full mouth x-rays (1 time every 60 months)	100%	
Prophylaxis / Cleanings (2 times every 12 months)	100%	
Sealants	100%	
Space Maintainers (child<19)	100%	
Periodontal Maintenance	100%	
Type B - Basic		
Fillings (Amalgam & Resin-based)	80%	
Denture Repair	80%	
Repairs to Crowns, Inlays and Onlays	80%	
Endodontics (Root canal treatment)	80%	
Periodontics (Periodontal scaling and root planning)	80%	
Simple Extractions / Oral Surgery	80%	
Type C - Major		
Crowns, Inlays, Onlays Replacement (1 every 60 months)	50%	
Prefabricated Crowns (1 every 60 months)	50%	
Bridges and Dentures (1 every 10 years)	50%	
Please see the plan certificate on your employee		

benefits website for a more detailed listing of coverages as well as plan frequencies.

No waiting periods or late entrant penalties.

MetLife

PDP Plus Network

Employee Name Employee ID

Stone County School District 05570720

Group Name Group Number

This card is not a guarantee of coverage or eligibility. Access specific plan information at metlife.com/mybenefits.

1.800.942.0854 <u>metlife.com/mybenefits</u>

Monthly Rates		
Employee	\$28.17	
Employee + Spouse	\$55.18	
Employee + Children	\$64.56	
Family	\$90.56	

VISION

What is Vision Insurance? A health and wellness plan designed to reduce your costs for routine preventive eye care including eye exams and prescription eyewear (eyeglasses and contact lenses).



Eligibility: All full-time employees working 20+ hours/week, spouse and dependent children (up to age 26)

- Coverage through MetLife
- In-Network Provider Directory: https://www.metlife.com/insurance/vision-insurance/#find-a-provider
- Network: Vision PPO
- The chart below is a sample of covered services. Please see the Plan Certificate on your Employee Benefits
 website for a detailed listing of services in their entirety.

Vision Benefits Summary (In-Network)	High Plan	Low Plan
Exam	\$10 Copay	
Retinal Imaging	Up to \$39 Copay	
Frames (\$10 copay/\$25 copay)	\$175 allowance + 20% off balance (\$95 allowance at Walmart, Sams and Costco)	\$130 allowance + 20% off balance (\$70 allowance at Walmart, Sams and Costco)
Single/Bifocal/Trifocal/Lenticular	\$10 Copay	\$25 Copay
Disposable Contacts	\$175 Allowance	\$130 Allowance
Fitting & Evaluation	Up to \$60 Copay	
Medically Necessary Contacts	Covered in Full	
UV Coating	Covered in Full	
Tint (Solid and Gradient)	Pink I & II: \$0 Copay; Solid Plastic: \$15 Copay; Plastic Gradient Dye: \$17 Copay	
Scratch Resistant	Up to \$17 - \$33 Copay	
Polycarbonate	Covered in Full (children up to age 18)	
Progressive	Up to \$55 Co	pay
Anti-Reflective	Up to \$41 - \$85 Copay	
Frequencies (Exam/Frames / Lenses)	Once Every 12 Months Once Every 12/24/12 (Exam/Frames/Lenses)	
Second Pair Benefit	 Two pairs of prescription glasses One pair of prescription glasses and one allowance towards contacts Double your contact lens allowance 	N/A
Monthly Rates High P	lan Low Plan Mottife	Vision PPO

Monthly Rates	High Plan	Low Plan
Employee	\$11.25	\$6.97
Employee + Spouse	\$22.55	\$13.99
Employee + Children	\$19.09	\$11.83
Family	\$31.49	\$19.52

MetLife Visio	n PPO
Stone County School District	5570720
Group Name	Group Number
This card is not a guarantee of coverage information at metlife.com/mybenefits.	or eligibility. Access specific plan
1.800.438.6388	metlife.com/mybenefits

GET THE MOST OUT OF YOUR M MetLife DENTAL/VISION PLANS

DENTAL PLAN

Dental insurance pays a portion of the costs associated with dental care.

Tips for utilizing your benefit



Look for participating dentist online at metlife.com.
*Your plan allows you to visit any general dentist or specialist.
However, you usually save more with a participating dentist.



Go to metlife.com/mybenefits or download the MetLife Mobile App. Find providers, view claims and more.

Group name: STONE COUNTY SCHOOL DISTRICT



Your dentist can request a pre-treatment estimate for any service that is more the \$300 to help you manage your cost and care

• In-network discounts apply even after you reach your plan's annual maximum, reducing your out-of-pocket expense.

VISION PLAN

DID YOU KNOW?

Your vision plan allows you to visit any licensed vision specialist and receive coverage.

Just remember your benefits go further when you go in-network.

- You can price shop your lens & frame providers. Take your prescription from your out of network provider to an in-network provider to receive the most benefit from your vision plan.
- Visit <u>www.metlife.com</u> for a listing of in-network providers. Network: Vision PPO
- Your vision care expenditures qualify as an eligible expense under the available Flexible Spending Account Plan. See FSA page for more information.
- You can access additional plan information on your benefits website: https://www.stoneschoolsbenefits.com/
- Track your claims and plan usage by registering for a MetLife My Benefit Account (if enrolled in both dental and vision, you will utilize the same user name and password.
 - Visit <u>metlife.com/mybenefits.com</u>.
 - Enter Stone County School District as your employer/organization.



Use your benefits and shop online.

Visit <u>eyeconic.com</u> and click on insurance benefits (under Help menu) to apply your MetLife vision benefits.

CRITICAL ILLNESS

What is Critical Illness Insurance? A health and wellness plan in which you receive a lump sum cash payment if diagnosed with one of the specific illnesses on the predetermined list of critical illnesses.



Eligibility: All full-time employees working 20+ hours/week, spouse and dependent children (up to age 26)

- Coverage through MetLife
- Elect Critical Illness with or without Cancer coverage based on your individual needs
- Issue Age Rates are locked in and will not increase with age
- No health questions Every Year!
- The chart below is a sample of covered services. After 9.1.2023, please see plan certificate for a detailed listing of services in their entirety, which is available on your Employee Benefits Website.

Select Cri	itical Illness with or without cancer	
Employee	\$15,000 or \$30,000	
Spouse	50% of Employee Amount	
Dependent Children	50% of Employee Amount	
Max Payout	500% of elected benefit amount	
COVERED SPECIFIED CRITICAL ILLNESSES		
Heart Attack / Stoke	100%	
Sudden Cardiac Arrest	50%	
Major Organ Failure	100% (bone marrow, heart, lung, pancreas, and liver)	
Permanent Paralysis	100% (Two or more limbs)	
End Stage Renal Failure (Kidney)	100%	
Coronary Artery Disease	50%	
Coma / Benign Brain Tumor	100%	
Loss of Hearing, Sight, or Ability to Speak	100%	
Severe Burn	100%	
Cancer (If cancer is selected)	100%	
Non-Invasive Cancer - Carcinoma in Situ (If cancer is selected)	25%	
Skin Cancer (If cancer is selected)	5% (not less than \$250)	
Childhood Diseases	100% of Child Benefit Cerebral Palsy, Cleft lip or Cleft palate, Cystic Fibrosis, Diabetes Type 1, Down Syndrome, Sickle Cell Anemia, Spina Bifida	
Progressive Diseases	100% ALS, Alzheimer's, Multiple Sclerosis, Muscular Dystrophy, Parkinson's Advanced, Systemic Lupus Erythematosus	
Infectious Diseases	25% (treated in the hospital for 5 days) COVID-19, Bacterial Cerebrospinal Meningitis, Diphtheria, Encephalitis, Legionnaire's Disease, Malaria, Necrotizing Fasciitis, Osteomyelitis, Rabies, Tetanus, Tuberculosis	
ANNUAL WELLNESS EXAM	\$50 - View the wellness incentives page for details	
Re-occurrence Benefit*	90 Days after initial (same illness)	
*Exclusions apply - see plan certificate for details	Second Occurrence (different illness) Covered with no separation	
Age Reduction	None	
Pre-existing Condition	None	

Plan Rates

Cost of coverage is based on the level of benefit you choose and your age (dependent rates are based on employee age). Please contact a Campus Benefits counselor for rate details.

HOSPITAL INDEMNITY

What is Hospital Indemnity Insurance? A plan which pays you benefits when you are confined to a hospital, whether for planned or unplanned reasons.



Eligibility: All full-time employees working 20+ hours/week, spouse and dependent children (up to age 26)

- Coverage through MetLife
- No health questions Every Year!
- Benefits are not offset with health insurance payments and are paid directly to you.
- Routine delivery of a child or children or delivery of a child or children by non-emergency Cesarean section are covered.
- The chart below is a sample of covered services. After 9.1.2023, please see plan certificate for a detailed listing of services in their entirety, which is available on your Employee Benefits Website.

Hospital Indemnity Benefit Description		
	High Plan	Low Plan
Admission (4 x per year, separated by 90 days)	\$1,000	\$500
Continuous Hospital Confinement (365 days)	\$200/day	\$100/day
ICU Admission	\$1,000	\$500
ICU Confinement (365 days)	\$200/day	\$100/day
Confinement for Newborn Nursery Care (2 days per confinement)	\$50	\$25
Age Reduction	None	
Pre-existing Condition	None	
Benefits Waiting Period	None	
Wellness Benefit	\$50 per covered person See the wellness incentives page for details	
Please see plan certificate for additional plan rules, exclusions and details.		

Monthly Rates	High Plan	Low Plan
Employee	\$25.59	\$15.14
Employee + Spouse	\$46.01	\$27.45
Employee + Child(ren)	\$38.07	\$22.78
Employee + Family	\$58.50	\$35.09

ACCIDENT

What is Accident Insurance? A financial and family protection plan designed to help pay for the medical and out-of-pocket costs a covered individual may incur after an accidental injury either on or off the job.



Eligibility: All full-time employees working 20+ hours/week, spouse and dependent children (up to age 26)

- Coverage through MetLife
- No health questions Every Year!!
- The chart below is a sample of covered services. After 9.1.2023, please see plan certificate for a detailed listing of services and benefit limits in their entirety, which is available on your Employee Benefits Website.

Accident Benefit Description		
INJURIES	HIGH PLAN	LOW PLAN
Fractures	\$250 - \$12,000	\$200 - \$10,000
Dislocations	\$250 - \$12,000	\$200 - \$10,000
Second and Third Degree Burns	\$150 - \$17,500	\$100 - \$15,000
Concussions	\$750	\$500
Cuts/Lacerations	\$100 - \$800	\$75 - \$700
MEDICAL SER	VICES & TREATMENT	
Ambulance (Ground)	\$500	\$400
Emergency Room Visit	\$250	\$200
Outpatient Surgery	\$500	\$400
Physician Office Visit (Max 6)	\$125	\$100
Medical Testing Benefit	\$250	\$200
Broken Tooth Benefit (Accident)	\$75 - \$400	\$50 - \$300
Eye Injury	\$500	\$400
ACCIDI	NTAL DEATH	
Basic Accidental Death	EE: \$75,000 SP: \$37,500 CH: \$15,000	EE: \$50,000 SP: \$25,000 CH: \$10,000
Accidental Death Common Carrier	EE: \$225,000 SP: \$112,500 CH: \$45,000	EE: \$150,000 SP: \$75,000 CH: \$30,000
HOSPITAL CO	VERAGE (ACCIDENT)	
Hospital Admission ICU Admission (pays in addition to Hospital Admission)	\$2,000	\$1,500
Confinement (Max 365) ICU Confinement (pays in addition to Hospital Admission)	\$400/day	\$300/day
Inpatient Rehabilitation (15 days per accident; 30 days per calendar year)	\$300/day	\$200/day
Age Reduction	1	None
Pre-existing Condition	1	None
Health Screening		ss incentives page for letails

Employee \$14.74 Employee + Spouse \$28.92 Employee + Child(ren) \$34.61 Employee + Family \$40.90 Low Plan Monthly Rates Employee

\$11.37

Employee + Spouse
\$22.36

Employee + Child(ren)
26.81

Employee + Family
\$31.67

CANCER

What is Cancer Insurance? Cancer insurance is a form of supplemental insurance meant to offset cancer-related expenses so you can focus on recovery.



Eligibility: All full-time employees working 20+ hours/week, spouse and children (up to age 26)

- Coverage through Guardian
- No health questions Every Year!!
- The chart below is a sample of covered services. After 9.1.2023, please see plan certificate for a detailed listing of services in their entirety, which is available on your Employee Benefits Website.

Cancer Benefit Summary	Premier	Advantage	Value	
Hospital Related Benefits				
Initial Cancer Diagnosis (30 day waiting period)	Employee, Spouse & Child: \$5,000	Employee, Spouse & Child: \$2,500	Employee, Spouse & Child: \$1,500	
Hospital Confinement	\$400 (First 30 days) \$800 (After 30 days)	\$300 (First 30 days) \$600 (After 30 days)	\$300 (First 30 days) \$600 (After 30 days)	
ICU Confinement	\$600 (First 30 days) \$800 (After 30 days)	\$400 (First 30 days) \$600 (After 30 days)	\$400 (First 30 days) \$600 (After 30 days)	
At Home Nursing (Max 30 visits/yr)	\$100/day	\$50/day	N/A	
Extended Care Facility (Max 90 days/yr)	\$150/day	\$100/day	\$100/day	
Air Ambulance (Max 2 trips per confinement)	\$2,000/trip	\$1,500/trip	\$250/trip	
Hospice Care Benefit (Max 100 days)	\$100/day	\$50/day	\$50/day	
Radia	ition, Chemotherapy & Re	elated Benefits		
Radiation / Chemotherapy for Cancer	Up to \$15,000	Up to \$10,000	Up to \$5,000	
Blood, Plasma, and Platelets	Up to \$10,000	Up to \$5,000	Up to \$5,000	
Medical Imaging (max per year)	\$400	\$200	N/A	
	Surgery & Related Ber	nefits		
Surgical Benefit	Up to \$5,500	Up to \$4,125	Up to \$2,750	
Second Surgical Opinion	\$300	\$200	\$200	
General Anesthesia		25% of surgery benefit		
Bone Marrow or Stem Cell Transplant (Autologous & Non-Autologous)	Bone Marrow: \$10,000 Stem Cell: \$2,500	Bone Marrow: \$7,500 Stem Cell: \$1,500	N/A	
	Miscellaneous Bene	fits		
Prosthesis (per amputation)	Up to \$6,000	Up to \$4,000	Up to \$4,000	
Experimental Treatment (every year)	Up to \$2,400/month	Up to \$1,000/month	N/A	
Pre-existing Condition- A pre-existing condition includes any condition for which an employee, in the specified time period prior to coverage in this plan, consults with a physician, receives treatment, or takes prescribed drugs.	12/12 - Anything received treatment for 12 months prior to the effective date of coverage, will not be covered for the first 12 months			
Wellness Benefit	\$50 - See wellness incentives page for details			
Portability	Included (terms at age 70)			
Monthly Rates	Premier	Advantage	Value	
Employee	\$29.91	\$19.47	\$11.66	
Employee + Spouse	\$57.11	\$37.17	\$22.87	
Employee + Child	\$33.54	\$22.31	\$13.84	
Employee + Family	\$60.74	\$40.01	\$25.05	

WELLNESS INCENTIVES

What are Wellness Incentives? An annual reimbursement for covered members who complete one of the eligible screening procedures on your eligible critical illness, hospital indemnity, accident and cancer plans.



Eligibility:

- If you or a covered dependent get one of the eligible screenings, you can file a wellness claim
- Once approved, you will receive a check for the wellness benefit amount
- The wellness benefit can be submitted annually as long as your critical illness, hospital indemnity, accident and cancer plans are in force

Available Incentives	
Metlife Critical Illness, Hospital Indemnity & Accident	\$50/year
Guardian Cancer	\$50/year

What Qualifies as Wellness? MetLife Critical Illness, Hospital Indemnity & Accident **Guardian Cancer** Routine health check-up exam Bone marrow testing Fasting blood glucose test Biopsies for cancer **BRCA** testing Fasting plasma glucose test Blood chemistry panel Breast ultrasound Flexible sigmoidoscopy Blood test to determine total cholesterol Hearing test Breast MRI Blood test to determine triglycerides Hemoccult stool specimen CA 15-3 (blood test for breast cancer) Bone marrow testing Hemoglobin A1C CA125 (blood test for ovarian cancer) Breast MRI Human papilloma virus (HPV) vaccination Breast ultrasound CEA (blood test for colon cancer) Immunization Breast sonogram Chest x-ray Lipid panel Cancer antigen 15-3 blood test for breast Mammogram Colonoscopy/Virtual cancer (CA 15-3) Oral cancer screening Colonoscopy Cancer antigen 125 blood test for ovarian Pap smears or thin prep pap test CT scans /MRI scans cancer (CA 125) Prostate-specific antigen (PSA) test Carcinoembryonic antigen blood test for Flexible sigmoidoscopy Serum cholesterol test to determine LDL colon cancer (CEA) Hemoccult stool analysis and HDL levels Carotid doppler Serum protein electrophoresis Mammography Chest x-rays Skin cancer biopsy Pap smear /ThinPrep pap test Clinical testicular exam Skin cancer screening PSA (blood test for prostate cancer) Colonoscopy Skin exam Complete blood count (CBC) Serum protein electrophoresis Stress test on bicycle or treadmill Corona virus testing (blood test for myeloma) Successful completion of smoking Dental exam cessation program Testicular ultrasound Digital rectal exam (DRE) Tests for sexually transmitted infections Thermograph Doppler screening for cancer (STIs) Doppler screening for peripheral vascular Thermography Two-hour post-load plasma glucose test Echo cardiogram Ultrasounds for cancer detection Electrocardiogram (EKG) Ultrasound screening of the abdominal Electroencephalogram (EEG) aorta for abdominal aortic aneurysms Endoscopy Virtual colonoscopy Eye exams How to Submit a Claim?

- Call 1-800-GET-MET8. (800-438-6388)
- File your Health Screening Benefit online through the MyBenefits portal at <u>www.metlife.com/mybenefits</u> or by mail with a paper claim form.
- Important Note: Must use Stone County School District when registering for a MetLife MyBenefits Account.
- Log on to <u>guardianlife.com</u> and select "My Account/Login" to register or access your account

Additional wellness information and claim forms can be found on your employee benefits website

LEGAL PLAN

What is a Legal Plan? A plan which provides valuable legal and financial educational resources for a variety of life events and needs.



Eligibility: All full-time employees working 20+ hours/week, spouse and dependent children (up to age 26)

- Coverage through MetLife
- Elder Care extends to parents and in-laws
- Visit https://www.legalplans.com/why-enroll or call 800.821.6400 for additional information
- Plan participants, create an account for specific plan information
- The chart below is a sample of covered services. Additional resources are available on your employee benefits website.

	Low Plan (0530010)	High Plan (0531010)
Money Matters	 Identity Theft Defense Negotiations with Creditors Promissory Notes Debt Collection Defense Tax Collection Defense 	 Identity Theft Defense Negotiations with Creditors Promissory Notes Debt Collection Defense Tax Collection Defense 	 Personal Bankruptcy LifeStages Identity Management Tax Audit Representation Financial Education Workshops
Home & Real Estate	 Deeds Mortgages Foreclosure Tenant Negotiations Eviction Defense Security Deposit Assistance 	 Deeds Mortgages Foreclosure Tenant Negotiations Eviction Defense Security Deposit Assistance 	 Sale or Purchase (Primary or Vacation Home) Refinancing & Home Equity Property Tax Assessments Boundary & Title Disputes Zoning Applications
Estate Planning	 Simple and Complex Wills Healthcare Proxies Living Wills Codicils Powers of Attorney (Healthcare, Financial, Childcare, Immigration 	 Simple and Complex Wills Healthcare Proxies Living Wills Codicils Powers of Attorney (Healthcare, Financial, Childcare, Immigration 	Revocable & Irrevocable Trusts
Family & Personal	 Guardianship Conservatorship Name Change Review of ANY Personal Legal Document School Hearings Demand Letters Affidavits Personal Property Issues Garnishment Defense Domestic Violence Protection 	 Guardianship Conservatorship Name Change Review of ANY Personal Legal Document School Hearings Demand Letters Affidavits Personal Property Issues Garnishment Defense Domestic Violence Protection 	 Juvenile Court Defense (Including Criminal Matters) Parental Responsibility Matters Review of Immigration Documents Prenuptial Agreement Adoption
Civil Lawsuits	 Disputes over Consumer Goods & Services Administrative Hearings Incompetency Defense 	 Disputes over Consumer Goods & Services Administrative Hearings Incompetency Defense 	 Civil Litigation Defense & Mediation Small Claims Assistance Pet Liabilities
Elder Care Issues	Consultation & Document review for issues related to your (or spouses) parents:	Consultation & Document review for issues relat	Low Plan Monthly Rate \$8.00 \$16.50
Vehicle & Driving	 Repossession Defense of Traffic Tickets Driving Privileges Restoration License Suspension due to DUI 	 Repossession Defense of Traffic Tickets Driving Privileges Restoration License Suspension due to DUI 	NO CO-PAY if using an In-Network attorney

MEDCARECOMPLETE

THE SMART WAY TO REDUCE YOUR HEALTHCARE COSTS



What is MedCare Complete? A bundle of services constructed to save you time and money while simplifying your life.

Eligibility: All full-time employees working 20+ hours/week, spouse, and unmarried children (up to age 26)

- Coverage through MedCareComplete
- This is a supplemental benefit and does not replace health insurance.
- Register @ MCC: <u>Medcarecomplete.com/members</u> to access the full range of benefits
- Register @ 1800MD: 1800md.com or 800.388.8785 to access telemedicine benefits

Included with the MedCareComplete Membership:



Medical Bill Negotiator



Restoration Expert



Medication Management



Identity Loss Expense Reimbursement



Telemedicine



Social Media Tracking



Medical & ID Theft Monitoring



Sex Offender Alerts

1. Medication Management

This service takes the guesswork out of medication management by sorting, labeling, and organizing medications for you. For added convenience, the service provides medication delivery to your home or healthcare provider's office at no additional cost. Specially trained clinical pharmacists are on staff to ensure that medications are reviewed for potential drug interactions, are clearly understood by patients, and are as effective as possible.

2. Telemedicine

Get 24/7/365 on-demand telephone access to Board-certified physicians for diagnosis, and prescriptions for common and acute illnesses. **There are no co-pays and no limit to how many times you can utilize this feature.**

Acute Illnesses include but are not limited to the following:

Joint Aches Asthma Rashes Urinary Tract Fever Bacterial Infections Infections Pink Eve Headache Diarrhea Bronchitis Sore Throat Infections Heartburn Ear Infection Cold & Flu

Migraines Sinus Conditions Gout Nausea & Vomiting

3. Medical & ID Theft Protection

Service monitors the internet for instances of your personal health and financial information to protect you from becoming a victim of identity theft. The security of your personal health information (PHI) can have a large impact on the medical care you receive.

Individual	Family
Monthly Rate	Monthly Rate
\$10.50	\$12.50
Per Month	Per Month
N	O COPAY

MEDCARECOMPLETE

THE SMART WAY TO REDUCE YOUR HEALTHCARE COSTS

4. Medical Bill Negotiator

Members can use the Medical Bill Negotiator service to review their expensive medical bills for errors. A medical bill advocate will identify and appeal common billing errors and overcharges for the member. Advocates provide continuous support during appeals, which typically results in an average savings of 40% on 80% of medical bills reviewed.

5. Restoration Expert

A Restoration Expert is available if you become a victim of identity theft. The service provides a concierge level of identity resolution. A dedicated and Certified Identity Theft Risk Management Specialist (CITRMS) will work with the victim to assess their ID theft situation, and move forward with a fully managed resolution.

6. Medical & ID Theft Protection

Service monitors the internet for instances of your personal health and financial information to protect you from becoming a victim of identity theft. The security of your personal health information (PHI) can have a large impact on the medical care you receive.



7. Expense Reimbursement

Restoring one's name and good credit is a time-consuming and expensive process. In response, \$25,000 expense reimbursement coverage is included in the member ID theft protection plan. This ensures you are covered in those instances when expenses compound. A Certified Identity Theft Risk Management Specialist (CITRMS) representative can assist with filing these expense reimbursement claims.

8. Social Media Tracking

The Social Media Tracking tool allows you to receive alerts on your social media accounts including Facebook, LinkedIn, Twitter, and Instagram if reputation-damaging items are posted. As we utilize social media platforms, we are creating a permanent online trail of our personal history, including photos, geo-location data, employment data, birthday, email, address, and phone number details. Over-sharing can lead to an increased risk for reputation damage, fraud, and identity theft. Reputation-damaging items including racist, violent, derogatory, vulgar, or inappropriate comments directed at you or your family.

FLEXIBLE SPENDING ACCOUNTS

What are Medical Flexible Spending (FSAs) Accounts? A pre-tax benefit account used to pay for out-of-pocket healthcare costs such as deductibles, co-pays, prescribed medication, and other medical costs.

What are Dependent Care Accounts? A pre-tax benefit account used to pay for dependent care services such as preschool, summer day camp, before or after school programs, and child or elder daycare.

Eligibility:

- Coverage through Consolidated Admin Services (CAS)
- Plan year is from September 1 August 31 and employees must re-enroll each year
- Only family status changes will allow you to change your annual election. The altered election must be consistent with the status change
- Married and not filing jointly participants limited to \$2,500 deferral for Dependent Care
- Transfer of funds between the Dependent Care and Medical Care accounts are not allowed
- Please visit your Employee Benefits website for a complete listing of eligible expenses and qualifying dependent care services.

FSA Benefit Description		
MEDICAL FSA ACCOUNT		
Minimum Contribution	\$300 annually	
Maximum Contribution	\$3,050 annually	
CARRYOVER MAX- Amount of funds carried over to the next year	\$610 (Any unused amounts over \$610 will be forfeited)	

Medical FSA funds are available at the beginning of the plan year.

DEPENDENT CARE FSA ACCOUNT		
Minimum Contribution	\$300 annually	
Maximum Contribution	\$5,000 annually	
CARRYOVER MAX None (Unused funds are forfeited)		

Dependent care funds are available as they are payroll deducted.

Plan Rules

Runout Period - The amount of time to turn in receipts for services rendered during the plan year.

30 days after end date to turn in receipts

All receipts should be kept to submit if verification is requested

Admin Fee	
Fee Per Participant Per Month	No cost
Replacement Card Fee	\$10.00

IMPORTANT NOTE:

Dependent Care FSA is for eligible expenses related to the care of your child, disabled spouse, elderly parent, or other dependent who is physically or mentally unable for self-care (i.e. day care, adult day care) or is disabled. Medical expenses for your dependent are not eligible for reimbursement under the Dependent Care account.

FLEXIBLE SPENDING ACCOUNTS HELPFUL RESOURCES

What is covered under a Medical FSA Account?

- Medical coinsurance and deductible
- · Doctor's office visit co-pays
- Emergency Room costs
- Dental co-pays and out-of-pocket costs
- Vision co-pays and out-of-pocket costs
- Contacts and Glasses
- Prescriptions
- Please see the full eligibility list for other covered expenses

Who is covered under a Dependent Care Account?

 Children ages 12 and under (including stepchildren, grandchildren, adopted or foster children, and children related to you who are eligible for a tax exemption on your federal tax return).

FSA Eligibility List

https://fsastore.com

expenses.html

FSA Store

https://www.consolidatedadmin.com/fsa-eligible-

 Tax dependents residing with you and incapable of self-care (this could include your spouse, a child age 13 and over, and elderly parents).

The CARES Act permanently reinstates over-the counter products, and adds menstrual care products for the first time, as eligible expenses for your FSA funds WITHOUT A PRESCRIPTION!

Eligible items for purchase without a prescription now include, but are not limited to:

- Pain relief medications, e.g., acetaminophen, ibuprofen, naproxen sodium
- Cold & flu medications
- Allergy medications
- Acne treatments
- Eye drops
- Stomach & digestive aids
- Pads, Tampons and Menstrual sponges
- Sleep aids
- Children's pain relievers, allergy medicines, and digestive aids

Imagine what you could do with CAS' mobile app



Get Reimbursed Quickly



Track Receipts



Check Balances





IMPORTANT NOTE:

Dependent Care FSA is for eligible expenses related to the care of your child, disabled spouse, elderly parent, or other dependent who is physically or mentally unable for self-care (i.e. day care, adult day care) or is disabled. Medical expenses for your dependent are not eligible for reimbursement under the Dependent Care account.

MISSISSIPPI STATE AND SCHOOL EMPLOYEES' HEALTH INSURANCE PLAN



Notice: Stone County School District offers all eligible employees health insurance through the Mississippi State Health Insurance Plan. During the annual open enrollment, employees have the opportunity to review all available options and make elections for the upcoming plan year.

Coverage through BlueCross BlueShield of Mississippi

- Please visit the BCBS of Mississippi website for plan eligibility rules
- All qualifying life events must be submitted through the Stone County School District benefits department. Please contact Katie Ratcliff for questions.
- It is important to review plan options and coverage each year

BCBS of Mississippi Website: https://www.bcbsms.com/

More Questions?

Visit the Stone County School District benefits portal for all links, plan documents, and rates.

https://www.stoneschoolsbenefits.com/

NEW WELLNESS INCENTIVES FOR 2023 VISIT:

http://knowyourbenefits.dfa.ms.gov/wellness-preventive-coverage/

State Employee Provider Directory:

https://www.myaccessblue.com/AHSProviderSearchWeb

Mississippi State Health Insurance Plan

Email: KnowYourBenefits@dfa.ms.gov

BlueCross BlueShield of Mississippi Phone: 800.709.7881
Office of Insurance Phone: 601.359.3411 or TF 866.586.2781

Frequently Asked Questions

1. How do I know what type of coverage I have now?

If you are not sure what type coverage you currently have, you can setup a MyBlue account by visiting www.bcbsms.com, call Katie Ratcliff at 601.928.7247 with questions or contact Blue Cross & Blue Shield of Mississippi (BCBSMS) at 800.709.7881, or the Office of Insurance at 601.359.3411 or toll-free 866.586.2781.

2. How does each type of coverage work?

Under Select Coverage, there is a separate deductible (individual and family) for medical expenses and a separate individual deductible for prescription drugs. Once the appropriate medical deductible is met, you will start paying 20 percent of the allowable charge for covered medical services. Regardless of whether or not you have met your medical deductible, you will have to meet the \$75 individual prescription drug deductible before you start paying a co-payment for a covered drug. Under Select Coverage, there is no prescription drug copayment maximum, so you will continue to pay the copayment for your drug each time you have it filled for the remainder of the year.

Under Base Coverage, you will have to meet the full deductible (\$1,800 for individual coverage, \$3,000 for family coverage) before any covered medical or prescription drug charges will be paid by the Plan. This means that you will pay the full allowable charge for both medical and prescription drugs until the deductible is met. Once the deductible is met, you will start paying 20 percent of the allowable charge for covered medical services and a copayment for covered drugs. There is a \$75 preventive medications individual deductible. Other medications are subject to the calendar year deductible. Once your coinsurance/co-payment maximum is met, the Plan will pay 100 percent of the allowable charge for both covered prescription drugs and medical services.

3. What are some of the main differences in Base and Select Coverage?

The premium rates differ for Base and Select Coverage. Another difference between Base and Select Coverage is how the deductibles work. Under Base Coverage, all charges (medical and prescription drug) apply to the calendar year deductible. Under Select Coverage, there is a separate deductible for medical charges and a separate deductible for prescription drug charges.

MISSISSIPPI STATE HEALTH INSURANCE PLAN RATES

Plan Pricing as of 1.1.2023

Legacy - Initially Hired before 1/1/2006

Horizon - Initially Hired on or after 1/1/2006									
	LEGACY EMPLOYEES				HORIZON EMPLOYEES				
ACTIVE EMPLOYEES	MPLOYEES BASE		SELECT			BASE		SELECT	
	TOTAL PREMIUM	EMPLOYEE PORTION	TOTAL PREMIUM	EMPLOYEE PORTION		TOTAL PREMIUM	EMPLOYEE PORTION	TOTAL PREMIUM	EMPLOYEE PORTION
EMPLOYEE*	\$437	\$0	\$457	\$20		\$437	\$0	\$483	\$46
EMPLOYEE + SPOUSE	\$915	\$478	\$1,001	\$564		\$915	\$478	\$1,027	\$590
EMPLOYEE + SPOUSE & CHILD(REN)	\$1,165	\$728	\$1,251	\$814		\$1,165	\$728	\$1,277	\$840
EMPLOYEE + CHILD	\$561	\$124	\$648	\$211		\$561	\$124	\$674	\$237
EMPLOYEE + CHILDREN	\$754	\$317	\$840	\$403		\$754	\$317	\$866	\$429
* The State pays 100% of the employee's premium for Base Coverage. Active employees enrolling in Select Coverage must pay a portion of the employee premium. LEGACY EMPLOYEES HORIZON EMPLOYEES						premium.			
	LEGACY EMPLOYEES				HURIZUN	EMPLOTEES			
RETIRED EMPLOYEE (NON-MEDICARE ELIGIBLE)	В	ASE	SE	LECT		В	ASE	SE	LECT
RETIREE	\$	\$502 \$525			\$802		\$830		
RETIREE + SPOUSE (NON-MEDICARE)	\$1,052		\$1,151			\$1,608		\$1,712	
EMPLOYEE + SPOUSE & CHILD(REN) (NON-MEDICARE)	\$1	\$1,438 \$1,797		\$1,438		,797	\$1,902		
RETIREE + CHILD	\$645		\$716			\$	945	\$1	1,021
RETIREE + CHILDREN	\$	\$866 \$908 \$1,166 N/A \$738 N/A		\$908		,166	\$1,213		
RETIREE + SPOUSE (MEDICARE)	١			738		N/A		\$1,043	
EMPLOYEE + SPOUSE & CHILD(REN) (ONE OR MORE MEDICARE)	1	N/A	\$	929		N	I/A	\$1	1,234

EMPLOYEE + SPOUSE & CHILD(REN) (ONE OR MORE MEDICARE)	N/A	\$929
RETIRED EMPLOYEE MEDICARE ELIGIBLE	BASE	SELECT
RETIREE	N/A	\$213
RETIREE + SPOUSE (NON-MEDICARE)	N/A	\$839
EMPLOYEE + SPOUSE & CHILD(REN) (NON-MEDICARE)	N/A	\$1,126
RETIREE + CHILD	N/A	\$404
RETIREE + CHILDREN	N/A	\$596
RETIREE + SPOUSE (MEDICARE)	N/A	\$426
EMPLOYEE + SPOUSE & CHILD(REN) (ONE OR MORE MEDICARE)	N/A	\$617

N/A	\$1,234		
BASE	SELECT		
N/A	\$213		
N/A	\$1,095		
N/A	\$1,285		
N/A	\$404		
N/A	\$596		
N/A	\$426		
N/A	\$617		
HORIZON EMPLOYEES			
BASE	SELECT		

(ONE OR MORE MEDICARE)	1071	4017
	LEGACY EI	MPLOYEES
COBRA	BASE	SELECT
PARTICIPANT	\$445	\$466
PARTICIPANT + SPOUSE	\$933	\$1,021
PARTICIPANT + SPOUSE & CHILD(REN)	\$1,188	\$1,276
PARTICIPANT + CHILD	\$572	\$660
PARTICIPANT + CHILDREN	\$769	\$856
COBRA DISABILITY EXTENSION	BASE	SELECT
PARTICIPANT	\$665	\$685
PARTICIPANT + SPOUSE	\$1,372	\$1,501
PARTICIPANT + SPOUSE & CHILD(REN)	\$1,747	\$1,876
PARTICIPANT + CHILD	\$841	\$972
PARTICIPANT + CHILDREN	\$1,131	\$1,260

HORIZON EMPLOYEES			
BASE	SELECT		
\$445	\$492		
\$933	\$1,047		
\$1,188	\$1,302		
\$572	\$687		
\$769	\$883		
BASE	SELECT		
\$655	\$724		
\$1,371	\$1,540		
\$1,747	\$1,915		
\$841	\$1,011		
\$1,131	\$1,299		

MISSISSIPPI DEFERRED COMPENSATION PLAN



Part of financial health involves knowing how much you need in retirement.

Consider supplementing your future savings through the Mississippi

Deferred Compensation Plan

1. It's automatic and controlled by you

 You choose the amount you want to save.

2. It probably costs less than you think

You can start saving with as little as \$25 per month.

3. Give yourself some credit

 You may be eligible for an IRS Saver's Credit on the first \$2,000 you contribute to MDC, based on your adjusted gross income and tax filing status.

4. Starting early makes a difference

 Waiting could impact how much you'll have for retirement.

5. Lower expenses

 With MDC, you may have the potential for lower investment management expenses.

6. Investment assistance

 MDC provides a variety of investment choices so you can build the right mix for your future.

7. Local people for help

• Local MDC representatives are ready to help you plan for your future.

8. Resources at your fingertips

 Take advantage of convenient resources and plan educational materials available 24/7 at www.mdcplan.com.

9. Stay as long as you like

 Even after you retire or separate from service, you can keep your account right where it is so you have access to all the MDC resources.

10. A partner for your future

 PERS oversees MDC on an ongoing basis on your behalf.

How do I enroll?

- You can easily enroll online by visiting www.mdcplan.com.
- Prior to enrolling, contact your human resources department or your local MDC representative to obtain a Plan Enrollment Code flier, which will include a specific code needed to enroll online.
- Once you have the Plan Enrollment Code flier, visit <u>www.mdcplan.com</u> and click on the REGISTER button.
- Select I have a plan enrollment code and follow the prompts on the website.
- Visit www.mdcplan.com for more information, or to find your local MDC representative.
- For more information, please visit https://www.msdbbenefits.com/state-life-add.

RETIREMENT INFORMATION

What is PERS? PERS is the Public Employees' Retirement System of Mississippi. The Public Employees' Retirement System of Mississippi (PERS) is a governmental defined benefit plan qualified under Section 401(a) of the Internal Revenue Code. PERS was established by the state Legislature in 1952 to provide benefits to eligible Mississippi public employees working for state agencies, universities, community colleges and public schools, as well as counties, cities, and other participating political subdivisions.

The mission of PERS is to provide secure benefits to our members and consistently deliver quality service by meeting our customer's needs, operating efficiently and transparently, investing and managing assets prudently, and acting in the best interest of all members.

Visit the PERS website for helpful resources - pers.ms.gov

PERS Contact Information

Phone: 800.444.7377 / 601.359.3589 Email: <u>customerservice@pers.ms.gov</u> Hours: Monday - Friday 8:00am - 5:00pm



403B CARRIER CONTACTS

What are 403Bs? A 403B is a tax-deferred retirement plan that allows you to set aside pretax dollars out of your paycheck to save for retirement.

National Life Group/Life Insurance Company of the Southwest

Todd Haygood P: 601.657.2107

E: kevinhaygood@valuteachers.com



Phone: 866.433.7661, Opt 5 Email: mybenefits@campusbenefits.com

Benefits website address: https://www.stoneschoolsbenefits.com/

The 2023 -2024 Benefits Enrollment Guide is provided for illustrative purposes only. Actual benefits, eligibility, services, premiums, claims processes and all other features and plan designs for coverage offered is governed exclusively by the insurance contract and associated Summary Plan Description (SPD). In case of discrepancies between this document and the insurance contract and SPD, the contract and SPD will prevail.

We reserve the right to change, modify, revise, amend or terminate these plan offerings at any time.

Updates, changes and notices are all located at https://www.stoneschoolsbenefits.com/
These should be reviewed fully prior to electing any benefits.