



2016 2017 Plan Year



Understanding Your Benefits

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When can I Enroll?

Please reference each specific Plan Document to verify the Dependent Eligibility rules.

Elections made now will remain until the next open enrollment period unless you or your family members experience a qualifying event. If you experience a qualifying event, you must contact HR within 31 days.

WELCOME TO ENROLLMENT FOR YOUR 2016/2017 BENEFITS!

Newark City Schools offers you and your eligible family members a comprehensive and valuable benefits program. We encourage you to take the time to educate yourself about your options and choose the best coverage for you and your family.

You can find more detailed information about your benefits and how to enroll at your Benefit Enrollment Portal at:

www.explainmybenefits.biz/newark-city-schools

Enrollment Process!

- 1. All benefit eligible employees are required to complete the enrollment process whether you are electing benefits or waiving all benefits in order to confirm your choices.
- 2. Employees will self-enroll online from any computer, tablet or smartphone and the system will guide you through the benefit offerings.
- 3. Please be prepared to complete your enrollment with all your demographic and dependent information. You will be verifying all this information that will be in the system so it is accurate when sent to all the insurance carriers.



When can I Enroll?

New hire initial enrollment and annual open enrollment allows for employees of the District to enroll or make changes in any of the plans without a qualifying event.

In order to make changes outside of your enrollment period, there would need to be a qualifying event such as the birth of a child, change in marital status, death, or loss of coverage due to no fault of your own. An enrollment application must be submitted to the insurance carrier via the Treasurer's office within thirty-one (31) days of the qualifying event in order for coverage to be effective.

BlueCross BlueShield

Anthem.

Anthem Blue Cross Blue Shield is the medical provider this year for Newark City schools. To find an innetwork provider go to www.anthem.com

Comprehensive healthcare provides peace of mind. In case of an illness or injury, you and your family are covered with an excellent medical plan through Newark City Schools.

The PPO plan allows you to select where you receive your medical services; however, if you use in-network providers, your out-of-pocket costs will be less. **Your Cost Share is:**

| | Anthem Blue Cross Blue Shield | |
|--|-------------------------------|----------------------|
| | In Network | Out of Network |
| Deductible | | |
| Individual | \$500 | \$1,000 |
| Family | \$1,000 | \$2,000 |
| Coinsurance | 20% | 40% |
| Out of Pocket Maximum | | |
| Individual | \$1,000 | \$2,000 |
| Family | \$2,000 | \$4,000 |
| Doctor's Office | | |
| Office Visit | \$25 copay | 40% after deductible |
| Preventive Care Services (routine exams, x-rays/tests, immunizations, well baby care and mammograms) | No Charge | 40% after deductible |
| Hospital Services | | |
| Emergency Room | \$200 copay | \$200 copay |
| Urgent Care Center Services | \$75 copay | 40% after deductible |
| Inpatient | 20% after deductible | 40% after deductible |
| Outpatient Surgery | 20% after deductible | 40% after deductible |
| Ambulance Service | 20% after deductible | 20% after deductible |
| Other Services | | |
| Maternity Services | 20% after deductible | 40% after deductible |
| Diagnostic Lab/X-ray | No Cost Share | 40% after deductible |
| Diagnostic (MRI, CT Scans, Nuclear Medicine) | 20% after deductible | 40% after deductible |
| Prescriptions | | |
| Retail - 30 day supply | \$10 / \$30 / \$50 | 50% - minimum \$50 |
| Direct Mail - 90 day supply | \$30 / \$60 / \$90 | Not Covered |

Good oral care enhances overall physical health, appearance and mental well-being. Problems with the teeth and gums are common and easily treated health problems. Keep your teeth healthy and your smile bright with the Newark City Schools dental benefit plan.

| Plan | Delta Dental PPO | | |
|---|--------------------------------------|-----------------|------------------------------|
| | PPO Dentist | Premier Dentist | Non-Participating Dentist |
| Calendar Year Deductible | | · | |
| Individual / Family* | | \$25 / \$50 | |
| | | | |
| Annual Maximum | | \$2,500 | |
| Preventative Services Exams, Cleanings, X-Rays, etc. | Plan pays 100% Deductible is waived. | | waived. |
| | Deductible Applies | | |
| Basic Services Fillings, Oral Surgery, Root Canals, etc. | 80% Covered | 80% Covered | 80% Covered |
| Major Services Crowns, Bridges Dentures, etc. | 50% Covered | 50% Covered | 50% Covered |
| Orthodontics | | | |
| Lifetime Annual Maximum | \$1,000 | | |
| Adults & Eligible Dependents Deductible does not apply to Orthodontic services. | 50% Covered | | |

Go to **www.deltadentaloh.com** to locate a network PPO provider. Please note that your out-of-pocket costs may be more if you choose to go to an out-of-network provider.



Regular eye examinations cannot only determine your need for corrective eyewear, but also may detect general health problems in their earliest stages. Protection for your eyes should be a major concern to everyone. VSP Choice Network

| Description | In-Network | Out-of-Network | |
|---|--|---------------------------------|--|
| Comprehensive Eye Exam Once every 12 months | \$10 co-pay | Up to \$45 reimbursement | |
| Eyeglass Lenses | Once every 12 months | Once every 12 months | |
| Single Vision, Lined Bifocal and Trifocal | \$25 co-pay | Up to \$30 - \$65 reimbursement | |
| Standard Progressive | \$55 co-pay | Up to \$50 reimbursement | |
| Premium Progressive | \$95 - \$105 co-pay | Up to \$50 reimbursement | |
| Custom Progressive | tom Progressive \$150 - \$175 co-pay | | |
| Eyeglass Frames | Once every 24 months | Once every 24 months | |
| | \$150 allowance \$170 allowance feature frame brands 20% off amount over allowance | Up to \$70 reimbursement | |
| Contact Lenses (in lieu of glasses) | Once every 12 months | Once every 12 months | |
| Conventional (Elective) Contact lens exam | \$150 allowance Up to \$60 | Up to \$105 reimbursement | |
| Laser Vision Correction (LASIK) | Discounts available from contracted facilities | | |

To take advantage of your VSP vision benefit, simply contact a VSP provider and let them know you have VSP coverage—they handle the paperwork for you. No need for an ID card.

MONTHLY PAYROLL DEDUCTIONS

| Employee Only | \$8.36 |
|---------------|---------|
| Family | \$18.92 |



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on care for life

Term Life Insurance

Basic Term Life and Accidental Death & Dismemberment

Newark City Schools provides a basic life and accidental death and dismemberment (AD&D) insurance coverage to all benefit eligible employees at no cost to the employee based on your contract.

Voluntary Supplemental Life

You also have the opportunity to purchase supplemental coverage for yourself and your dependents. Please note that dependent children include unmarried adopted, natural or stepchildren age 15 days to age 19 (26 if full-time student).

You may elect Voluntary Life Insurance in increments of **\$10,000** to a maximum of **\$500,000**, not to exceed 5x base salary.

Guaranteed Issue Amount for Newly Eligible Employees \$200,000 employee / \$50,000 spouse / \$10,000 children Can buy Life Only or Life /AD&D

| | Employee & Spouse | | | Employee | e & Spouse |
|----------|----------------------------------|------------------------------------|----------|----------------------------------|------------------------------------|
| Age Band | Life Monthly Rate per \$1,000 | AD & D Monthly Rate per \$1,000 | Age Band | Life Monthly Rate per \$1,000 | AD & D Monthly Rate per \$1,000 |
| <30 | \$0.031 | \$0.021 | 55 - 59 | \$0.358 | \$0.021 |
| 30 - 34 | \$0.040 | \$0.021 | 60 - 64 | \$0.457 | \$0.021 |
| 35 - 39 | \$0.057 | \$0.021 | 65 - 69 | \$0.716 | \$0.021 |
| 40 - 44 | \$0.088 | \$0.021 | 70 - 74 | \$1.217 | \$0.021 |
| 45 - 49 | \$0.140 | \$0.021 | 75+ | Contact HR | Contact HR |
| 50 - 54 | \$0.221 | \$0.021 | | | |

COSTS FOR VOLUNTARY SUPPLEMENTAL LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT

| | Dependent | | |
|----------|-------------------|---------------------|--|
| | Life Monthly Cost | AD & D Monthly Cost | |
| \$5,000 | \$0.91 | \$0.26 | |
| \$10,000 | \$1.82 | \$0.51 | |

Example: A 36 year old female, Sally, wants to purchase \$50,000 of term life insurance with no Ad&D

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50
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\$2.85

Monthly rate per \$1,000 # of units/\$1,000

.057

monthly

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Dearborn 🚖 National" Strength. Independence. Solutions.

Voluntary Benefits through Transamerica

TRANSAMERICA

What are Voluntary Benefits?

Voluntary Benefits are offered to strengthen your overall benefits package. You customize the benefit based on need and affordability.

- Ownership Policies are fully portable and belong to you if you leave your employer, same price and same plan
- Benefits are payroll deducted
- Cash benefits are paid directly to you, <u>not</u> to a hospital or to a doctor
- Benefits are paid regardless of any other coverage you may have
- Level premiums—Rates do not increase with age
- Guaranteed Renewable
- Designed to provide additional cash flow to assist with out of pocket medical costs and other bills

The Voluntary Benefits offered through Transamerica are Accident, Critical Illness/Cancer and Universal Life.

ACCIDENT PLAN

A plan that helps pay for the unexpected expenses that result from an accident

- On and off the job coverage = 24 hours per day, 7 days a week
- Family coverage available
- Sports related injuries covered as well

Just a few examples of benefit included in the plan:

- Initial Accident Treatment \$163
- Hospitalization \$2,100 admission benefit, \$275 per day benefit
- Fractures up to \$6,500
- Dislocations up to \$5,200
- Wellness Benefit \$100 per insured per year
- See brochure for a complete list of benefits

| SEMI-MONTHLY | |
|-------------------|---|
| PAYROLL DEDUCTION | S |

| Employee | Employee & Spouse | Employee & Children* | Family* |
|----------|----------------------|-------------------------|---------|
| \$14.93 | \$23.27 | \$18.67 | \$27.65 |

*Dependents through age 25 can be covered regardless of student status.



Voluntary Benefits through Transamerica

CRITICAL ILLNESS/CANCER

Critical Illness/Cancer is a benefit that will pay you a lump sum of money if you are diagnosed with a critical illness, heart attack, internal cancer or stroke. The cash benefit is provided upon the first diagnosis of a covered condition to help you with associated costs and beyond.

Special Underwriting at Initial Offering: Guaranteed Issue \$25,000 employee / \$12,5000 spouse / \$12,500 children

Regardless of other coverage in force, the benefit is paid out in a full lump sum.

Examples of covered conditions: Heart Attack, Stroke, Major Organ Transplant, End-Stage Renal Failure, Coma, Loss of Sight, Speech and/or Hearing, Paralysis (not due to stroke), Invasive Cancer, Bone Marrow Transplant, Carcinoma in situ (25% benefit), Coronary Bypass Surgery (25% benefit), and others.

A Wellness Benefit is included in your Critical Illness/Cancer Policy and pays \$100 for each insured. Each covered person will get one screening test per calendar year.

Examples of Wellness Benefit Screenings:

- Low dose mammography
 Stress Test
 Serum Cholesterol
 Bone Marrow
- Pap Smear
 Colonoscopy
 Prostate Specific Antigen
 Chest X-ray

Also included is a Recurrent benefit that provides a second cash payment in the event a covered person is diagnosed with the same condition. Pays an additional 50% of the original benefit.

<u>Rates:</u> This benefit is customized by each employee so rates vary, but can start as little as a few dollars a week. See brochure for more details.

Universal Life

The amount of life insurance that is right for you depends on a variety of factors, including your age, family status, personal savings, financial commitments, etc. Newark City Schools offers a variety of programs to meet your life insurance needs.

Universal Life with Long Term Care includes both a death benefit and a living benefit.

- Universal Life with Long Term Care is a permanent life insurance that is designed to match your needs throughout your lifetime.
- The Universal Life with Long Term Care is priced to remain the same cost to you until age 100.
- The Living Benefit, Long Term Care is 4% of the death benefit per month for up to 25 months if confined in a nursing or assisted living facility or 2% of the death benefit per month for up to 50 months if receiving home health care or day care.
- Monthly premiums are waived while using the Long Term Care benefits.
- If you use the Long Term Care benefit, your death benefit amount does reduce .
- Coverage available for spouse and children as well.

Special Underwriting for Initial Offereing: Guaranteed Issue Up to \$150,000 employee / up to \$15,000 spouse / \$25,000 children

<u>Rates</u>

This benefit is customized by each employee so rates vary, but can start as little as a few dollars a week.

LifeLock Identity Theft Protection

Identity theft in the United States is a major problem that continues to be on the rise. Professional protection and assistance have become important tools in fighting the identity theft epidemic.

Thieves today can get a hold of your personal information from trash cans, dumpsters, stolen mail, and even shoulder surfing. Once thieves have your information, it's a simple matter to open new fraudulent accounts and make purchases in your name.

When you enroll in LifeLock, you can be confident knowing that they are available 24 hours a day, 7 days a week, and committed 100% to helping protect your information as if it were their own.

LifeLock offers Proactive Protection:

- LifeLock Identity Alert System
- eRecon
- TrueAddress
- WalletLock
- Reduction in Pre-Approved Credit Card offers
- 24-Hour Customer Service
- Offered through payroll deduction at a 15% discount off retail rates

\$1 Million Total Service Guarantee

LifeLock's proactive approach works to help stop identity theft before it happens. As a LifeLock member, if you become a victim of identity theft because of a failure in their service, they will help fix it at their expense, up to \$1,000,000.

SEMI-MONTHLY PAYROLL DEDUCTIONS

| Employee Only | \$4.25 |
|-----------------------|---------|
| Employee & Spouse | \$8.50 |
| *Employee & *Children | \$7.44 |
| *Family | \$11.69 |

*Employee & Children and Family Tiers: You may enroll up to 8 children with 4 of those children between the ages of 18 and 26.





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Important Contacts

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|---|---|---|---|
| | - | | - |

| Vendor | Phone | Website |
|---|------------------------------|--------------------------------------|
| Medical Anthem Blue Cross Blue Shield | 800-552-9159 | www.anthem.com |
| Dental Delta Dental | 800-524-0149 | www.deltadentaloh.com |
| Vision Vision Service Plan (VSP) | 800-877-7195 | www.vsp.com |
| Voluntary Benefits Transamerica | 888-763-7474 | www.transamericaemployeebenefits.com |
| Life Insurance Dearborn National | 800-348-4512 | www.dearbornnational.com |
| Identity Theft Protection LifeLock | 800-543-3562 | www.lifelock.com |
| District Insurance Brokers Gallagher Benefit Services | 614-761-2901 800-435-1552 | www.ajg.com |
| Transamerica Claims Help Explain My Benefits | 888-743-6937, Option 2 | service@explainmybenefits.biz |





Benefit Guide Description

Please Note: This guide provides information regarding the Newark City Schools benefit program. More detailed information is available from the plan documents and administrative contacts. The plans and policies stated in this information are not a contract or a promise of benefits of any kind, and therefore, should not be interpreted as such.