



College Station ISD EMPLOYEE BENEFITS GUIDE

2021-2022 Plan Year

First Financial Group of America

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College Station ISD offers eligible employees a competitive benefits package that includes both district-paid and voluntary products. We have worked closely with First Financial (FFGA) to provide you with a variety of benefits and resources to help you reach your healthcare and retirement needs. Details of all available benefits can be found on the Employee Benefits Center website, <https://benefits.ffga.com/collegestationisd>

Be sure to read the product descriptions carefully so you are well prepared before enrollment begins. If you have questions, feel free to reach out to your First Financial Account Manager or your Benefits department.

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College Station ISD Benefits Office
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ELIGIBILITY

Eligible employees must be actively at work on the plan effective date for new benefits to be effective.

BENEFITS ENROLLMENT – OPEN ENROLLMENT IS JULY 21 - AUGUST 18, 2021

EMPLOYEE BENEFITS CENTER

The Employee Benefits Center (EBC) is a one-stop-shop for you to find all things benefits related. On the website, you'll find open enrollment and plan year dates, benefit descriptions, carrier contact information, product brochures, claim forms and enrollment details. Visit <https://benefits.ffga.com/collegestationisd>

NEW EMPLOYEES

You have 31 days from your actively-at-work date to make benefit elections. Your New Hire Enrollment elections will be made at College Station ISD.

EXISTING EMPLOYEES

When it's time to enroll in your benefits, your First Financial Account Representative will be onsite to assist you with making your elections. Your elections can be made anytime during annual enrollment online from your work or home computer. Before enrollment, take time to educate yourself on the available benefits and what options would work best for you and your family by visiting the Employee Benefits Center.

AGENT ASSIST ON-SITE ENROLLMENT- 2 LOCATIONS

Your First Financial Account Manager will be on site to assist you in enrolling in your benefits. Please have your dependents social security numbers ready and any questions that you may have.

CSISD Human Resources Office- Appointments Only!

To schedule an appointment, you must visit: <https://collegestationisd.timetap.com/>

- July 21st – 8:00 – 3:00pm
- July 23rd – 8:00 – 11:00am
- July 27th – 8:00 – 3:00pm
- July 28th – 8:00 – 3:00pm

A&M Consolidated High School Library

August 2nd-13th Monday-Friday from 8:00am- 3:00pm

TCG Advisors Representative for Retirement Plans will be on-site August 4th, 9th, and 10th

Appointments are not required but recommended for quicker service. To schedule an appointment, you must visit: <https://collegestationisd.timetap.com/>

ONLINE ENROLLMENT - JULY 21st – AUGUST 18th

ENROLL ONLINE

To begin online enrollment, visit <https://ffga.benselect.com/Enroll/login.aspx>

LOGIN

- Login: Your Employee ID or Social Security Number (no dashes)
- PIN (first login only): The last four digits of your Social Security Number and the last two digits of the year you were born (six digits total)
- New PIN: The first time you log in you will be required to change to a new PIN. Please note your new PIN because you will use the new PIN from that point forward.

VIEW CURRENT BENEFITS

After logging in, you will arrive at the welcome screen. Your current benefits and premium deductions will be listed on this screen.

VIEW/ADD DEPENDENTS

Click next to view your dependents. It is very important to make sure the social security numbers and birth dates listed are correct. If you plan to add dependents, you will need to enter their social security numbers and birth dates.

BEGIN ELECTIONS

Click next again to begin making your benefit elections. Remember, no changes to your elections can be made during the plan year unless you have either a qualified mid-year change under Section 125 or a special enrollment event.

MID-YEAR BENEFIT CHANGES

You may add or cancel coverage during the plan year if you have a change in family status. You must notify the benefits department within 31 days of the change.

QUALIFYING LIFE EVENTS INCLUDE:

- Changes in household, including marriage, divorce, legal separation, annulment, death of a spouse, birth, adoption, placement for adoption, or death of a dependent child
- Loss of health coverage, attributable to your spouse's employment, losing existing health coverage including job-based, individual & student plans, losing eligibility for Medicare, Medicaid, or CHIP, turning 26 and losing coverage through a parent's plan
- Change in place of residence or worksite, a student moving to or from the place they attend school, a seasonal worker moving to or from the place they both live & work, moving to or from a shelter or other transitional housing.

DECLINING COVERAGE

If you are eligible for benefits, but wish to DECLINE coverage, please complete the online enrollment either on your work or home computer. Under each option, you will need to select "waive." You must still complete the beneficiary information.

SECTION 125 PLAN INFORMATION AND RULES

A Section 125 Plan provides a tax-saving way to pay for eligible medical or dependent care expenses. The funds are automatically deducted from your paycheck on a pre-tax basis.

Here's How It Works

A Section 125 Plan reduces your taxes and increases your spendable income by allowing you to deduct the cost of eligible benefits from your earnings before tax. Plus, the plan is available to you at no cost, and you're already eligible – all you have to do is enroll.

Is It Right for Me?

The savings you may experience with a Section 125 Plan are outlined in the example below. For instance, you could potentially take home about \$70 more each month if you participated in your employer's Section 125 Plan – that's a savings of \$840 a year!

You cannot change your benefit elections for the plan year unless the benefits office receives notification in writing within 31 days of the status change. If the benefits office is not notified within 31 days of the status change, no benefit change can be made until the next annual open enrollment.

IRS specified changes in family status include:

- Change in legal married status
- Change in number of dependents
- Termination or commencement of employment
- Dependent satisfies or ceases to satisfy dependent eligibility requirements
- Change in residence or worksite that affects eligibility for coverage

SECTION 125 PLAN SAMPLE PAYCHECK		
	WITHOUT S125	WITH S125
Monthly Salary	\$2,000	\$2,000
Less Medical Deductions	-N/A	-\$250
Taxable Gross Income	\$2,000	\$1,750
Less Taxes (Fed/State at 20%)	-\$400	-\$350
Less Estimated FICA (7.65%)	-\$153	-\$133
Less Medical Deductions	-\$250	-N/A
Take Home Pay	\$1,197	\$1,267
YOU COULD SAVE \$70 PER MONTH IN TAXES BY PAYING FOR YOUR BENEFITS ON A PRE-TAX BASIS!		

**The figures in the sample paycheck above are for illustrative purposes only.*

Medical



BLUE CROSS BLUE SHIELD | www.bcbstx.com/trsactivecare | 1.866.355.5999
SCOTT AND WHITE HMO | <https://trs.swhp.org/> | 1.800.321.7947

TRS-ACTIVECARE

The district's medical plans are offered through TRS. From in- and out-of-network options to comprehensive prescription drug coverage and special health and wellness programs, TRS-ActiveCare has been designed to flexibly meet the needs of nearly half a million public education employees.

PPO Plans – Administered by BCBSTX

ACTIVECARE PRIMARY

Only employees that choose this new plan during Annual Enrollment will be enrolled in it.

- Lower premium
- Copays for doctor visits before you meet deductible
- Statewide network
- PCP referrals required to see specialists
- Not compatible with health savings account (HSA)
- No out-of-network coverage
- Employee will receive 2 ID cards (BCBS & Caremark)

ACTIVECARE HD

If you're currently in TRS-ActiveCare 1-HD and you make no change during Annual Enrollment, this will be your plan next year.

- Similar to current 1-HD
- Lower premium
- Compatible with health savings account (HSA)
- Nationwide network with out-of-network coverage
- No requirement for PCPs or referrals
- Must meet deductible before plan pays for non-preventive care
- Employee will receive 2 ID cards (BCBS & Caremark)

ACTIVECARE PRIMARY+

If you're currently in TRS-ActiveCare Select and you make no changes during Annual Enrollment, this will be your plan next year.

- Simpler version of the current Select plan
- Lower deductible than HD and primary plans
- Copays for many services and drugs
- Higher premium
- Statewide network
- PCP referrals required to see specialists

- Not compatible with a health savings account (HSA)
- No out-of-network coverage
- Employee will receive 2 ID cards (BCBS & Caremark)

ACTIVECARE 2

If you're currently in TRS-ActiveCare 2, and you make no changes during Annual Enrollment, you will remain in TRS-ActiveCare 2.

This plan is closed and not accepting new enrollees. If you're currently enrolled in TRS-ActiveCare2, you can remain in this plan.

- Closed to new enrollees
- Current enrollees can choose to stay in plan
- Lower deductible
- Copays for many drugs and services
- Nationwide network with out-of-network coverage
- No requirement for PCPs or referrals
- Employee will receive 2 ID cards (BCBS & Caremark)

TRS-ActiveCare Primary	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$417.00	\$401.00	\$16.00	\$8.00
Employee + Child(ren)	\$751.00	\$450.00	\$301.00	\$150.50
Employee + Spouse	\$1,176.00	\$485.00	\$691.00	\$345.50
Employee + Family	\$1,405.00	\$500.00	\$905.00	\$452.50
Pooled Family- Pool Enrolled	\$1,405.00	\$830.00	\$575.00	\$287.50
Split Employee & Spouse-Split Enrolled	\$588.00	\$485.00	\$103.00	\$51.50
Split Family- Split Enrolled	\$702.50	\$500.00	\$202.50	\$101.25

TRS-ActiveCare HD	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$429.00	\$412.00	\$17.00	\$8.50
Employee + Child(ren)	\$772.00	\$450.00	\$322.00	\$161.00
Employee + Spouse	\$1,209.00	\$485.00	\$724.00	\$362.00
Employee + Family	\$1,445.00	\$500.00	\$945.00	\$472.50
Pooled Family- Pool Enrolled	\$1,445.00	\$830.00	\$615.00	\$307.50
Split Employee & Spouse-Split Enrolled	\$604.50	\$485.00	\$119.50	\$59.75
Split Family- Split Enrolled	\$722.50	\$500.00	\$222.50	\$111.25

TRS-ActiveCare Primary +	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$542.00	\$420.00	\$122.00	\$61.00
Employee + Child(ren)	\$879.00	\$450.00	\$429.00	\$214.50
Employee + Spouse	\$1,334.00	\$485.00	\$849.00	\$424.50
Employee + Family	\$1,675.00	\$500.00	\$1,175.00	\$587.50
Pooled Family- Pool Enrolled	\$1,675.00	\$830.00	\$845.00	\$422.50
Split Employee & Spouse-Split Enrolled	\$667.00	\$485.00	\$182.00	\$91.00
Split Family- Split Enrolled	\$837.50	\$500.00	\$337.50	\$168.75

IMPORTANT: The TRS Active Care 2 plan is closed to any new enrollments. Only those employees staying in the plan will get to keep it. Once Active Care 2 has been dropped the plan cannot be re-elected.

TRS-ActiveCare 2	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$1,013.00	\$420.00	\$593.00	\$296.50
Employee + Child(ren)	\$1,507.00	\$450.00	\$1,057.00	\$528.50
Employee + Spouse	\$2,402.00	\$485.00	\$1,917.00	\$958.50
Employee + Family	\$2,841.00	\$500.00	\$2,341.00	\$1,170.50
Pooled Family- Pool Enrolled	\$2,841.00	\$830.00	\$2,011.00	\$1,005.50
Split Employee & Spouse-Split Enrolled	\$1,201.00	\$485.00	\$716.00	\$358.00
Split Family- Split Enrolled	\$1,420.50	\$500.00	\$920.50	\$460.25

HMO Network- Baylor Scott and White

- Copays for doctor visits and generic prescriptions before you meet deductible
- In-Network only – no out-of-network benefits
- Employee will receive 1 ID card for medical and prescription benefits. If you are covering dependents you will receive 2 cards. Additional cards can be added

Baylor Scott and White HMO	TRS Total (Monthly)	District Contribution (Monthly)	Employee Cost (Monthly)	Employee Cost (24 Pay)
Employee Only	\$542.48	\$405.00	\$137.48	\$68.74
Employee + Child(ren)	\$872.16	\$435.00	\$437.16	\$218.58
Employee + Spouse	\$1,362.70	\$470.00	\$892.70	\$446.35
Employee + Family	\$1,568.42	\$500.00	\$1,068.42	\$534.21
Pooled Family- Pool Enrolled	\$1,568.42	\$830.00	\$738.42	\$369.21
Split Employee & Spouse-Split Enrolled	\$681.35	\$470.00	\$211.35	\$105.68
Split Family- Split Enrolled	\$784.21	\$500.00	\$284.21	\$142.11

TRS-ActiveCare Plan Prescription Benefits

CVS Caremark | <https://info.caremark.com/trsactivecare> | 1.866.355.5999

When you enroll in a BCBSTX Plan, you automatically receive prescription drug coverage through CVS Caremark which gives you access to a large, national network of retail pharmacies.



Clever RX | <https://partner.cleverrx.com/ffga> | 1.800.873.1195

Clever RX helps you save money by using a prescription drug savings card. They partner with the healthcare community to bring state-of-the-art, money-savings tools to participants. It helps you save up to 80% off prescriptions drugs and often beats the average copay. Plus, it's completely free. Thanks to Clever RX, you will never overpay for prescriptions again!

HIGHLIGHTS

- 100% FREE to use.
- Unlock discounts on thousands of medications.
- Save up to 80% on prescription medication – Often beats your copay!
- Download the Clever RX app by using the information on your card below to unlock exclusive savings at over 60,000 pharmacies nationwide.
- Available to use now!

Use Clever RX every time you pay for a medication for instant savings! Download the app or visit the site to price a drug: <https://partner.cleverrx.com/ffga>.



Flexible Spending Accounts



First Financial Administrators, Inc. | www.ffga.com | 1.866.853.3539
P.O. Box 161968 | Altamonte Springs, FL 32716

HEALTHCARE FSA

A Health Flexible Spending Account (Health FSA) is an IRS-approved program to help you save taxes and pay for out-of-pocket medical expenses not covered under your medical plan. If your plan includes a grace period option, you have additional time to incur and claim against unused funds in the new plan year. Keep in mind that remaining balances after the grace period is exhausted will be forfeited under the use-it-or-lose-it rule.

Your maximum contribution amount for 2021 is \$2,750.

HIGHLIGHTS:

- Contributions are automatically deducted from your paycheck on a pre-tax basis, which helps reduce your taxable income and increase your spendable income.
- Your full election will be available to you at the beginning of the plan year.
- Be conservative – any money left in your account at the end of the plan year will be forfeited.
- Use your benefits card to pay for qualified expenses upfront so you don't have to spend money out of pocket.
- Keep all receipts in case you need to substantiate a claim for tax purposes.

NOTE: The IRS requires proof that all expenses are eligible. Keep all receipts in case you need to substantiate a claim for tax purposes. Your receipt must include: Date of purchase or service, amount you were required to pay after insurance, description of the product or service, merchant or provider name, and the patient name.

DEPENDENT CARE FSA

With a Dependent Care Flexible Spending Account, you can set aside part of your pay on a pre-tax basis to pay for eligible dependent care expenses like childcare, babysitters and adult day care.

You may allocate up to \$10,500 per tax year for reimbursement of dependent care services. If you are married and file a separate tax return, the limit is \$5,250.

HIGHLIGHTS:

- Eligible dependents must be claimed as an exemption on your tax return.
- Eligible dependents must be children under age 13 or an adult dependent incapable of self-care.
- Contributions are not loaded upfront. Funds become available as contributions are made to your account.
- Keep all receipts in case you need to substantiate a claim for tax purposes.
- Balances will be forfeited at the end of the runoff or grace period.

FSA RESOURCES

BENEFITS CARD

The First Financial Benefits Card is available to all employees that participate in Medical FSA and/or a Dependent Care FSA. The Benefits Card gives you immediate access to your money at the point of purchase. Cards are available for participating employees, their spouse, and eligible dependents that are at least 18 years old.

- The IRS requires validation of most transactions for FSAs. You must submit receipts for validation of expenses when requested. If you fail to substantiate by providing a receipt to First Financial within 90 days of the purchase or date of service your card will be suspended until the necessary, receipt or explanation of benefits from your insurance provider is received.
- Dependent Care FSA Contributions are not loaded upfront. Funds become available as contributions are made to your account.

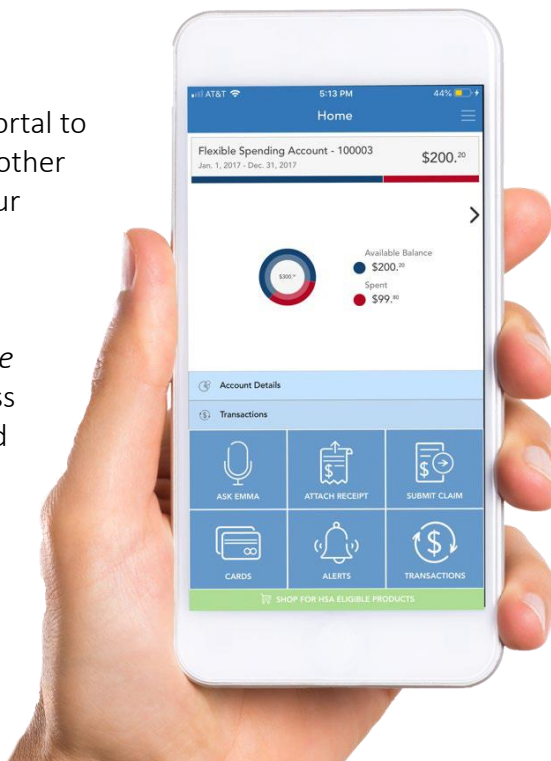
ONLINE FSA PORTAL

Flexible Spending Account participants can log in to their online FSA portal to access account balances, check on claims, upload receipts and access other account details. Visit <https://ffga.com/individuals> to login or set up your account.

FF MOBILE ACCOUNT APP

Managing your benefit accounts on the go is made easy with *FF Mobile Account App*. This powerful, intuitive mobile application gives you access to view your account balances, update your profile, submit a claim and much more – right from your Android or Apple device.

- Access account Information
- View card details and profile information
- Submit FSA claims using an electronic claim form
- View pending claims
- Upload receipts and documentation
- Receive alerts
- Update direct deposit information



FSA STORE

First Financial has partnered with the FSA Store to bring you an easy to use online store to better understand and manage your FSA. An online marketplace that connects consumers to FSA-eligible products, seasonal deals, and account support resources such as open enrollment guides and educational videos.

Visit <http://www.ffga.com/fsaextras> for more details & special deals!

- Shop for eligible items from bandages to wheelchairs and thousands of products in between
- Browse or search for eligible products and services using the Eligibility List
- Visit the Learning Center to help find answers to questions you may have about your account.

Health Savings Accounts



First Financial Administrators, Inc. | www.ffga.com | 1.866.853.3539
P.O. Box 161968 | Altamonte Springs, FL 32716

HEALTH SAVINGS ACCOUNTS

A Health Savings Account (HSA) is a great way to help you control your healthcare costs. It works in conjunction with a qualified High Deductible Health Plan (HDHP) to combine tax-free savings earmarked for qualified medical expenses. An HSA allows you to set aside money to pay for higher deductibles associated with a lower monthly premium HDHP. The money you save in monthly insurance premiums is reserved for eligible medical expenses you incur in the future. Eligible expenses include things like co-pays and deductibles, prescriptions, vision expenses, dental care, therapy and medical supplies.

Your maximum contribution amount in 2021 for Employee Only is \$3,600 and \$7,200 for Family.

HIGHLIGHTS:

- Balances roll over from year to year and earn interest along the way.
- Portable – you keep it even after you leave employment.
- Tax advantages – invest money in mutual funds to grow your tax savings for either future healthcare costs or retirement.
- Pay for expenses with a benefits debit card that gives you immediate access to your money at the time of purchase.
- Expenses also can be reimbursed through our online portal, online bill pay directly to your provider or submitting a distribution request form.
- Receipts are not required for reimbursement but be sure to save them for tax purposes.

Who can participate in an HSA and are there any restrictions?

- You must be enrolled in a qualified High Deductible Health Plan (HDHP)
- You cannot be enrolled in Tricare or Medicare or covered under your spouse's traditional (non-HDHP) health care plan
- You or your spouse (at their place of employment) cannot participate in a general-purpose Flexible Spending Account (FSA) or Health Reimbursement Arrangement
- You cannot participate if you are being claimed as a dependent on another person's tax return

What is CIP Verification and why is it required?

The Customer Identification Program (CIP) is a combination of requirements set forth in the US Patriot Act. It states that all financial institutions must verify the identity of individuals wishing to conduct financial transactions with them. A Health Savings Account is a bank account established with UMB and is therefore required to follow the CIP verification process. The verification process reviews your SSN, home mailing address, date of birth, and full legal name against two federal databases. UMB will send you information regarding the CIP process after Open Enrollment.

IF THE REQUESTED DOCUMENTATION IS NOT RECEIVED WITHIN 60 DAYS, THE ACCOUNT WILL BE CLOSED AND YOU MUST RE-APPLY IN ORDER TO OPEN UP YOUR HSA ACCOUNT.

HSA RESOURCES

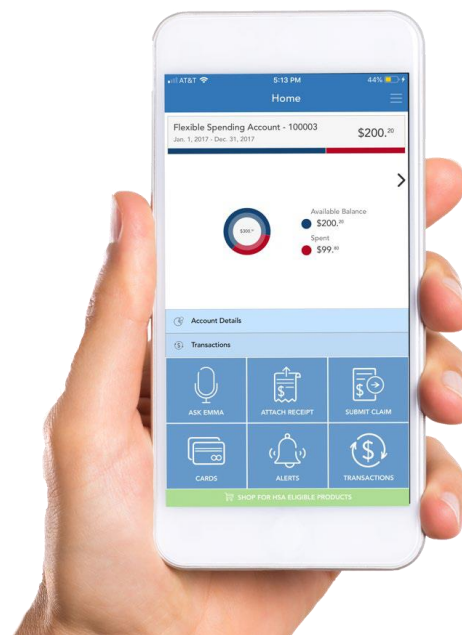
ONLINE HSA PORTAL

Health Savings Account participants can log in to their online HSA portal to access account balances, check on claims, upload receipts and access other account details. Visit <https://ffga.com/individuals> to login or set up your account.

FF MOBILE ACCOUNT APP

Managing your benefit accounts on the go is made easy with *FF Mobile Account App*. This powerful, intuitive mobile application gives you access to view your account balances, update your profile, submit a claim and much more – right from your Android or Apple device.

- Request distributions
- Invest in HSA funds
- Make additional contributions
- Pay a provider or pay yourself
- Download tax forms



HSA STORE

First Financial has partnered with the HSA Store to bring you an easy to use online store to better understand and manage your HSA. An online marketplace that connects consumers to HSA-eligible products, seasonal deals, and account support resources such as a national database of providers as well as an HSA Learning Center.

Visit <http://www.ffga.com/fsaextras> for more details & special deals!

- Shop for eligible items from bandages to wheelchairs and thousands of products in between
- Browse or search for eligible products and services using the Eligibility List
- Visit the Learning Center to help find answers to questions you may have about your account.

Dental Insurance



MetLife | www.metdental.com | 1.800.275.4638

Taking care of your oral health is not a luxury, it is a necessity to long-term optimal health. Dental insurance can greatly reduce your costs when it comes to preventative, restorative, and emergency procedures. Review the plan benefits to the right to see which option is best for you and your family's dental needs.

PLAN BENEFITS INCLUDE:

- Plan Year Maximum – \$1,500 High Plan/\$1,000 Low Plan
- Annual Deductible – \$50/Individual and \$150/Family on both plans
- Preventive Care covered at 100% – Cleanings, X-rays, Exams
- Basic Care covered at 80% after deductible – Fillings, Extractions, Root Canals
- Major Services covered at 50% – Crowns, Bridges and Dentures
- Orthodontia- High Plan Only- covered at 50%, \$1,500 per person (adults and children) lifetime max

METLIFE DENTAL SEMI-MONTHLY PREMIUMS		
COVERAGE TIER	LOW PLAN	HIGH PLAN
EMPLOYEE ONLY	\$11.53	\$17.82
EMPLOYEE + SPOUSE	\$23.04	\$35.65
EMPLOYEE + CHILDREN	\$23.44	\$36.27
EMPLOYEE + FAMILY	\$34.96	\$54.08

Please Note: The dental plans are MAC (Maximum Allowable Charge) plans. The Maximum Allowable Charges are based on negotiated rates with contracted PPO dentists. If you utilize the PPO in-network dentist, the plans will benefit you and pay a larger amount for your dental services. Out-of-network dentists are not regulated and can charge any amount for their services. If you choose an out-of-network dentist, the plans will only pay the same amounts they pay the in-network dentists and YOU are responsible for the difference. Referred to as "balance billed".

Question for your dentist is: Are you an In-Network dentist for "MetLife PDP Plus Network"?

Vision Insurance



EyeMed | www.eyemed.com | 1.866.804.0982

Proper vision care is essential to your overall wellbeing. Regular eye exams at any age will help prevent eye disease and keep your vision strong for years to come. Your employer provides you with a vision plan to take care of you and your family's needs. You must enroll in the vision plan each plan year and premiums are typically paid through payroll deduction.

PLAN BENEFITS INCLUDE:

- \$10 co-pay for eye exam
- \$25 co-pay for basic glass lenses or contact fitting and follow-up
- Frames are covered up to \$150 allowance plus an additional 20% off the remaining balance
- Contacts are covered up to \$130 allowance plus an additional 15% off the remaining balance
- Laser Eye Surgery benefit includes 15% off retail or 5% off promotional pricing

EYEMED VISION SEMI-MONTHLY PREMIUMS	
EMPLOYEE ONLY	\$4.19
EMPLOYEE + SPOUSE	\$8.74
EMPLOYEE + CHILD(REN)	\$8.92
FAMILY	\$11.67

Hospital Indemnity Insurance



MetLife | www.metlife.com | 1.800.438.6388

Hospital stays are costly. If you or a family member find yourself in the hospital due to a sudden accident or illness, you may struggle financially, even if you have a good medical plan. With a hospital indemnity plan, you can rest assured those extra expenses won't be a financial burden. Unlike medical plans, there are no deductibles to meet with a hospital indemnity plan. As soon as you incur a qualified event, you can file a claim and start receiving benefits.

The plan pays a lump sum benefit in a previously specified amount. The money can be used for medical costs, insurance deductibles, groceries, transportation, childcare – the choice is up to you!

PLAN BENEFITS INCLUDE:

- Hospital Admission Benefit: \$1000 (Low Plan) \$2,000 (High Plan)
- Hospital Confinement Benefit: \$150 per day (Low Plan) \$200 per day (High Plan) Max is 15 days per confinement
- Intensive Care Benefit: \$150 per day (Low Plan) \$200 per day (High Plan) Max is 15 days per confinement. Pays in addition to non-ICU confinement
- Pregnancy is a covered benefit
- Health Screening Benefit of \$50 per year

METLIFE HI SEMI-MONTHLY PREMIUMS		
COVERAGE TIER	LOW PLAN	HIGH PLAN
EMPLOYEE ONLY	\$8.47	\$14.58
EMPLOYEE + SPOUSE	\$15.11	\$25.88
EMPLOYEE + CHILDREN	\$13.09	\$22.44
EMPLOYEE + FAMILY	\$19.73	\$33.74

Critical Illness Insurance



Aflac | www.aflacgroupinsurance.com | 1.800.433.3036

If you've heard of heart attacks, strokes, organ transplants or paralysis, then you're familiar with critical illness. It's likely you or someone you know has experienced one of these life-altering events. Often, a critical illness has a powerful impact on people's lives, affecting their livelihood and finances.

A critical illness plan can help with the treatment costs of covered illnesses. Benefits are paid directly to you, unless otherwise assigned, giving you the choice of how to spend the money. Plus, there are plans available to provide coverage for you, your spouse and dependent children.

Prepare now for the unexpected with a critical illness insurance plan. The plan helps you focus on getting well rather than worrying about finances. Visit the Employee Benefits Center and view policy for more details.

PLAN BENEFITS INCLUDE:

- Plan covers Cancer, Heart Attack, Stroke, Kidney Failure, Major Organ Transplant etc.
- Also includes a Childhood Illness rider that covers conditions such as; Cystic Fibrosis, Spina Bifida, Type 1 Diabetes, Cleft Lip or Palate, Down Syndrome and Autism Spectrum Disorder (ASD)-NEW for 2019-2020.
- Pays a lumps sum benefit
- You choose the amount between \$5,000 to \$50,000, Guarantee Issue!
- Spouse and Children are covered at 50% of employees selected benefit amount
- Waiver of premium after 90 days of total disability.
- Health Screening Benefit (Employee and Spouse Only) up to \$100 for preventative care tests. This benefit can be paid once per calendar year, if covered on the plan.
- Portable Plan under certain stipulations, such as if you change jobs or retire.

Accident Insurance



Aetna | www.myaetnasupplemental.com | 1.800.607.3366

The costs associated with an injury can add up. Between hospital visits, exams and treatment, out-of-pocket costs could put you in a financial hardship. An accident plan pays benefits directly to you so you can determine where to spend the money. It's comforting to know that an accident insurance policy can be there through all stages of your care, from initial treatment to follow-up care.

PLAN BENEFITS INCLUDE:

- Fractures (benefit amounts vary by size and location of break or fracture), up to \$5,500 on the Low Plan, up to \$8,250 on the High Plan
- Emergency Room Visit- \$50 on the Low plan, \$100 on the High Plan
- Hospital Admissions due to accident- \$500 on the Low Plan, \$1,000 on the High Plan
- Hospital Confinement due to accident- \$100 per day on the Low Plan, \$200 per day on the High Plan
- Includes a Ground and Air Ambulance Benefit:
 - Ground: \$300 on the both plans
 - Air: \$1500 on both plans
- Lacerations- up to \$600 on both plans
- Major Diagnostic Exam Benefits, payable once per accident Include:
 - CT, EEG, MRI: \$100 on the Low Plan, \$200 on the High Plan

AETNA ACCIDENT SEMI-MONTHLY PREMIUMS		
COVERAGE TIER	LOW PLAN	HIGH PLAN
EMPLOYEE ONLY	\$3.41	\$5.78
EMPLOYEE + SPOUSE	\$5.84	\$9.91
EMPLOYEE + CHILD(REN)	\$6.79	\$11.41
EMPLOYEE + FAMILY	\$9.07	\$15.25

Disability Insurance



Unum | www.unum.com | 1.866.679.3054

Have you ever wondered what would happen to your income if you had an accidental injury, sickness, or pregnancy? That is why you need disability coverage. It replaces a portion of income for the period of time you are unable to work due to those reasons. You are able to choose the benefit amount, which is the amount of your income to replace, and the waiting period that you begin receiving payments.

Short-Term Disability:

If you were disabled, how long could you go without a paycheck? If you have Long Term Disability Insurance could you afford to wait on it to take effect? Here is how Short-Term Disability works:

- If you become sick, injured or pregnant and are unable to work, disability insurance will step in to help take the place of your missing paycheck
- NEW HIRES within 31 days of hire and CURRENT POLICY HOLDERS: Policy pays from day 8 of disability and continues up to a maximum of 13 weeks
- ALL NEW or INCREASED COVERAGE AMOUNTS: Will be subject to pre-existing conditions. A pre-existing condition is any condition for which you received medical treatment, consultation, care or services, including medication, in three months prior to the effective date of coverage of pre-existing conditions will not be covered until after twelve months of continuous coverage

Long-Term Disability (Employer Paid):

Coverage Begins after ninety (90) days of disability and continues until; you can return to work, up to 5 years, or age 65, whichever is longer.

- Paid by College Station ISD for employees who work 30+ hours a week
- Pays 60% of your salary to a maximum, of \$1,800 per month
- If you become sick, injured or pregnant and are unable to work, disability insurance will step in to help take the place of your missing paycheck

Buy-Up LTD plan available:

- ✓ You may buy additional coverage of 60% up to a maximum of \$5,200 a month
- ✓ Employees with salaries higher than \$36,000 can cover at their cost, extra buy LTD coverage for family needs!
- ✓ Covers 60% of your salary to a maximum of an additional \$5,200 a month
- ✓ With the District paid \$1,800 that would be up to \$7,000 a month of coverage
- ✓ Guaranteed Issue this year! Pre-existing conditions will apply to any coverage for only the first 12 month
- ✓ Coverage begins after ninety days of disability and continues until you can return

Cancer Insurance



American Fidelity | www.americanfidelity.com | 1.800.662.1113

Thousands of Americans are diagnosed with cancer each day. No doubt, the news is devastating, both personally and financially. It's impossible to anticipate a cancer diagnosis, but it is possible to prepare for it with a cancer insurance plan.

It is likely that your major medical coverage will not cover all the costs associated with a cancer diagnosis. Supplementing your major medical with cancer insurance may help you pay for related expenses, such as copays and deductibles, specialists, experimental treatment, specialty hospitals, travel expenses, in-home care and more. Benefits are paid directly to you, so you can choose how to spend the money. Visit the Employee Benefits Center and view policy for more details.

PLAN BENEFITS INCLUDE:

- Benefits are paid directly to you
- Pays you based upon a schedule of 25 benefits; some of the key benefits include:
 - Chemotherapy, Radiation and Immunotherapy benefits pay up to \$10,000 (Basic Plan) or \$15,000 (Enhanced Plan) per 12-month period
 - Blood, Plasma and Platelets benefits pay \$200/day (\$10,000 calendar year max) for Basic Plan and \$300/day (\$15,000 calendar year max) for Enhanced Plan
- Initial Cancer Diagnosis benefit pays \$2500 for Basic Plan and \$5000 for Enhanced Plan
- Hospital Confinement benefit pays \$100/day Basic Plan and \$300/day Enhanced Plan up to 30 days (Day 31+, plan pays \$200/day Basic Plan and \$600/day Enhanced Plan)
- Diagnostic and Prevention benefit pays you \$25/Basic Plan and \$75/Enhanced Plan
- Intensive Care Unit (ICU) pays \$600 daily, up to 30 days, if you are confined to the ICU for ANY reason on both Basic and Enhanced Plans (benefit reduced by 50% at age 70)

- Enhanced Plan also includes a Heart Attack/Stroke benefit of \$5000 (paid once per lifetime; reduces to 50% at age 70)

AF CANCER SEMI-MONTHLY PREMIUMS		
COVERAGE TIER	BASIC	ENHANCED PLUS
EMPLOYEE ONLY	\$7.90	\$15.81
FAMILY	\$13.43	\$26.90

PLEASE NOTE: Certain pre-existing condition limitations apply for one year for those who are not currently in the Allstate cancer plan for the past 12 months. A pre-existing condition is a disease or physical condition for which symptoms existed or medical advice or treatment was recommended or received within the twelve-month period prior to the effective date of coverage. AFA does not pay for any loss due to a pre-existing condition during the first 12 months of coverage.

Life Insurance



Texas Life | www.texaslife.com | 1.800.283.9233

PERMANENT, PORTABLE LIFE INSURANCE

The peace of mind voluntary, permanent life insurance provides is unmatched. It is a solid companion to your group life insurance plan. Texas Life provides life insurance that you can keep for a lifetime. The plan is easy to purchase, pay for, and keep through the convenience of payroll deduction. Coverage is affordable and dependable. Plus, Texas Life has over a century of experience protecting families and giving the peace of mind only permanent life insurance can provide.

HIGHLIGHTS:

- Portable: Since the policy belongs to you, you can take it with you if you change jobs or retire
- The policy remains in force until you die or up to age 121, if you pay the necessary premium on time
- Employees 49 years old and under are eligible to receive up to \$300k in coverage
- Employees 50-65 years old are eligible to receive up to \$100k in coverage
- Spousal coverage up to \$50k; varies based on spouse age
- Child(ren) and grandchild(ren) coverage up to \$50k
- Chronic Illness Rider included which pays up to 92% of the benefit amount to help cover the cost of long-term care if you are unable to perform 2 of the 5 ADL (Assisted Daily Living) functions

Life Insurance



Unum | www.unum.com | 1.866.679.3054

EMPLOYER-PAID TERM LIFE & AD&D INSURANCE

Life insurance protects your loved ones. It pays a benefit so they can afford to pay for funeral expenses, pay off debt and maintain their current standard of living. It is one of the best ways to show you care. Your employer provides all 20+ hours per week employees a \$10,000 policy. The cost of this policy is paid for 100% by your employer. This is a term life policy that is in effect while you are employed.

VOLUNTARY TERM LIFE INSURANCE

Voluntary life insurance is term life coverage you can purchase in addition to the basic life plan provided by your employer. It will cover you for a specific period while you are employed. Plan amounts are offered in tiers so you can choose the amount of coverage that works best for you and your family. Because it's a group plan, premiums are typically lower, so it's more affordable to gain the peace of mind that life insurance provides. Limitations apply, please see policy for details. Visit the Employee Benefits Center for more details.

You choose the term life amount based on the following:

Employee: Increments of \$10k up to 5x annual salary to a maximum of \$500k of coverage

Spouse: Increments of \$10k up to \$500k of coverage or 100% of employee coverage

Child(ren): Increments of \$2k up to \$10k of coverage up to age 25

AD&D Voluntary Insurance available:

Employee: Increments of \$10k up to 10x annual salary or \$500k (whichever is less)

Spouse: Up to \$250k maximum coverage, cannot exceed employee Voluntary AD&D elected amount

Child(ren): Up to \$10k maximum coverage, cannot exceed employee Voluntary AD&D elected amount

Please Note: Employees enrolling in the term life coverage after the first 31 days of their employment will be subject to insurability and must complete a health questionnaire prior to coverage being issued.

If you currently have a term life policy in place, you can increase up to the Guaranteed Issue amount without completing a health questionnaire. Guaranteed Issue Amounts are \$300k Employee/\$25k Spouse/\$10k Child(ren).

Legal Plan



Legal Ease | www.legaleaseplan.com | 1.800.562.2929

Have you ever found yourself in need of legal advice, but aren't sure where to go? A voluntary group legal

plan helps fill that need. It provides you with access to professional lawyers at a low monthly rate. For just a few dollars a month, you can consult with a lawyer about having your will prepared, reviewing documents, contesting a traffic ticket, lawsuits, divorce and so much more. Expert legal advice is available at your fingertips.

PLAN BENEFITS INCLUDE:

- Access to a national network of attorneys
- In- and out-of-network coverage
- Provides coverage for Home/Residential, Financial, Auto/Traffic, Estate Planning/Wills, Family etc.

LEGAL EASE SEMI-MONTHLY PREMIUMS	
EMPLOYEE/FAMILY	\$7.59

Identity Theft Protection



iLock 360 | www.ilock360.com | 1.855.287.8888

Millions of Americans report having their identity stolen each year. People are online and mobile more than any time in history, so it's no surprise that identity theft is on the rise. And it goes far beyond simply having your credit card number stolen. While credit card fraud is one of the highest reported types of identity theft, it also includes bank, loan, phone and tax-related fraud.

Identity theft insurance won't prevent your identity from being stolen. But it will be there to alert you if any suspicious activity is noticed under your name.

Here is how it works:

- All employees eligible
- Monitors your identity 24/7/365
- Personal email address for both employee and spouse (if applicable) required to sign up

ILOCK360 SEMI-MONTHLY PREMIUMS		
COVERAGE TIER	PLUS	PREMIUM
EMPLOYEE ONLY	\$4.00	\$7.50
EMPLOYEE + SPOUSE	\$7.50	\$11.00
EMPLOYEE + CHILD(REN)	\$6.50	\$10.00
EMPLOYEE + FAMILY	\$10.00	\$13.50

Medical Transport



MASA Medical Transport | www.masamts.com | 1.954.334.8261

Americans today suffer from a false sense of security that their medical coverage will pay for all costs associated with emergency or critical care transport. The reality is that a majority of Americans are only partially covered for these high costs.

Most medical plans will only pay a portion of costs leaving you with the remainder of the bill. There is also the possibility of your medical provider denying your claim altogether, which means you would be responsible for paying the entire bill.

With medical transport protection, you will have zero out-of-pocket expenses for any emergent air or ground transport from anywhere in the United States, regardless of who transports you. You will receive medical emergency transportation solutions to help cover your out-of-pocket medical transport costs when your insurance falls short.

PLAN BENEFITS INCLUDE:

- Easy claim process
- No deductibles
- No health questions
- Basic Coverage Area includes US, Canada, Mexico and the Caribbean (excluding Cuba)

MASA SEMI-MONTHLY PREMIUMS	
PLAN	EMPLOYEE/FAMILY
EMERGENT PLUS	\$7.00
PLATINUM	\$19.50

Voluntary Retirement Plans



TCG Services | www.tcgservices.com | 1.800.943.9179

VOLUNTARY RETIREMENT PLANS

Research shows that Americans are living longer and their number of years in retirement is increasing. While your TRS pension may be enough to cover expenses during your initial retirement years, the reduced monthly income may not be sufficient for costly factors such as medical bills, taxes, and your desired standard of living. Contributing to a retirement savings plan can help supplement your pension during retirement. Most plans allow you to make adjustments to your contribution amount at any time.

HELP IS AVAILABLE

For assistance enrolling or if you'd like to speak with a Retirement Plan Specialist, please call the **TCG Advisors Hotline at 512-600-5204** or visit www.tcgservices.com/openenrollment.

457(b) RETIREMENT PLAN

457(b) is an employer-sponsored, voluntary retirement plan that allows you to save money in a pre-tax (Traditional) or after-tax (Roth) account. Contributions to the plan are salary-deducted from your paycheck and automatically deposited into your 457(b) retirement savings account. Early withdrawals from a 457(b) account are not subject to a 10% percent excise tax. The 457(b) plan offers employees personalized guidance and flexible strategies to start the process of saving for retirement. TCG delivers investment advice and plan administration solutions that are transparent and cost-effective. The plan does not have any surrender charges or penalties upon distribution. To get started, simply visit www.tcgservices.com/enroll and establish your account.

403(b) RETIREMENT PLAN

403(b) is a voluntary retirement plan that allows you to save money in a pre-tax (Traditional) or after-tax (Roth) account. Contributions to the plan are salary-deducted from your paycheck and automatically deposited into your 403(b) retirement savings account. Early withdrawals from a 403(b) account are subject to a 10% excise tax. TCG is the 403(b) plan administrator—managing your contributions, distributions, and personal updates. Money and investments are held with the vendor of your choice. To get started, visit www.tcgservices.com/documents and find your employer's 403(b) Approved Vendor List. Open an account by contacting one of the approved 403(b) providers directly. Next, register your access to your TCG 403(b) administration account and set up salary deferrals at www.tcgservices.com/enroll.

CONTRIBUTION LIMITS

In 2020, you can contribute 100 percent of your compensation up to \$19,500, whichever is less. If you are age 50 or older, you can contribute up to an additional \$6,500 for a total of \$26,000. You may simultaneously contribute to both 403(b) and 457(b) plans.

COBRA

First Financial Cobra Administrators | www.cobrapoint.benaissance.com | 1.800.523.8422, option 4

Life is full of unexpected events that may impact your health insurance coverage. Under the Consolidated Omnibus Budget Reconciliation Act, better known as COBRA, you have the right to continue your group health coverage such as medical, dental, vision insurance and flexible spending accounts for a limited period of time.

HIGHLIGHTS:

- Temporary continuation of coverage that generally lasts for 18 months due to employment termination or reduction of hours of work, divorce, death or a child no longer qualifying as a dependent. Certain qualifying events, or a second qualifying event during the initial period of coverage, may permit a beneficiary to receive a maximum of 36 months of coverage.

- Either you or your family member are responsible for notifying your employer of a divorce, legal separation or child losing dependent status within 60 days of the event. In the case of termination, death or reduction in hours, your employer will be responsible for letting the provider know that you have the right to continue coverage under COBRA.
- Benefits will remain identical to what you had while employed. However, you will be responsible for paying the full premium, plus any applicable fees.

CONTACT INFORMATION

College Station ISD Benefits Office
1812 Welsh, College Station, TX 77840
979.764.5466

FIRST FINANCIAL GROUP OF AMERICA

JR Cornejo, FFGA Sr Account Administrator
JR.CORNEJO@ffga.com | 903.245.3889

CONTACTS

BENEFIT	CARRIER	WEBSITE	PHONE
Medical	Blue Cross Blue Shield of Texas	www.bcbstx.com/trsactivecare	866.355.5999
Prescription Benefits	CVS Caremark	www.caremark.com	866.355.5999
Medical	Scott and White HMO	https://trs.swhp.org/	800.321.7947
Flexible Spending Accounts	First Financial Administrators, Inc.	www.ffga.com	866.853.3539
Health Savings Accounts	First Financial Administrators, Inc.	www.ffga.com	866.853.3539
Dental	MetLife	www.metdental.com	800.275.4638
Vision	EyeMed	www.eyemed.com	866.804.0982
Hospital Indemnity	MetLife	www.metlife.com	800.438.6388
Critical Illness	Aflac	www.aflacgroupinsurance.com	800.433.3036
Accident	Aetna	www.myaetnasupplemental.com	800.607.3366
Disability Insurance	Unum	www.unum.com	866.679.3054
Cancer	American Fidelity	www.americanfidelity.com	800.662.1113
Permanent Life	Texas Life	www.texaslife.com	800.283.9233
Group Term Life	Unum	www.unum.com	866.679.3054
Legal Plan	Legal Ease	www.legaleaseplan.com	800.562.2929
Identity Theft Protection	iLock360	www.ilock360.com	855.287.8888
Medical Transport	MASA	www.masamts.com	954.334.8261
403(b)/457(b) Retirement	TCG Services	www.tcgservices.com	800.943.9179
COBRA	First Financial Administrators, Inc.	www.cobrapoint.benaissance.com	800.523.8422

EMPLOYEE BENEFITS CENTER – <https://benefits.ffga.com/collegestationisd>

Open enrollment info, benefit descriptions, carrier contact information, product brochures and claim forms can be found here! 23