

PfISD Insurance Committee Meeting

September 21, 2022

Medical Plan Updates

- Minor change to BCBS HD Plan
 - IRS increased the minimum annual deductible for HDHP plans
 - Increase individual deductible from \$2,800 to \$3,000
 - Increase family deductible from \$5,600 to \$6,000
- District HSA contribution moving from \$300 automatic + \$300 match to only \$300 match
 - IRS HSA maximum limits for 2023 increase to \$3,850 for individual and \$7,750 for family
 - Catch up contribution is still \$1,000 for age 55+
- District contribution increasing from \$400 to \$410 per month
- No employee rate changes

- No new ID cards (unless changing plans)
 - Old BCBS HD ID cards will have the prior year deductible. Members can go online to request new ID cards after January 1 to get an ID that shows the new deductible amounts

Medical Plans

	BCBS		HCH		BCBS		HCH	
	BCBS High Plan		HCH Low Plan		BCBS Low Plan		HCH HD Plan	
Medical - Dual Plan Features	Plan Network							
	<i>In Network Only</i>		<i>In Network Only</i>		<i>In Network Only</i>		<i>In Network Only</i>	
	Individual Deductible	\$1,500	\$2,000	\$2,600	\$3,000	\$3,300		
	Family Deductible	\$3,000	\$4,000	\$5,200	\$6,000	\$6,600		
	Embedded or Aggregate (HSA plans only)	Embedded	Embedded	Embedded	Embedded	Embedded		
	Coinsurance Paid by the Plan	80%	80%	70%	70%	70%		
	Individual Maximum Out of Pocket*	\$5,000	\$5,500	\$6,500	\$6,750	\$6,750		
	Family Maximum Out of Pocket*	\$10,000	\$11,000	\$13,000	\$13,500	\$13,500		
	Primary Office Visit	\$35 copay	\$20 copay	\$40 copay	70% after deductible	70% after deductible		
	Specialist Office Visit	\$50 copay	\$35 copay	\$55 copay	70% after deductible	70% after deductible		
	Virtual Visit	\$0 copay	\$0 copay	\$0 copay	100% after deductible	100% after deductible		
	Inpatient Hospital	80% after deductible	80% after deductible	70% after deductible	70% after deductible	70% after deductible		
	Outpatient Surgery	80% after deductible	80% after deductible	70% after deductible	70% after deductible	70% after deductible		
	ER - Facility	\$400 copay + 80% after deductible	\$400 copay + 80% after deductible	\$500 copay + 70% after deductible	70% after deductible	70% after deductible		
	ER - Physician				70% after deductible	70% after deductible		
	Urgent Care	\$50 copay	\$35 copay	\$55 copay	70% after deductible	70% after deductible		
	Lab/X-Ray Billed by Doctors Office	Included in office visit	Included in office visit	Included in office visit	70% after deductible	70% after deductible		
	Lab/X-Ray Billed by Outside Facility	100% no deductible	100% no deductible	100% no deductible	70% after deductible	70% after deductible		
	Inpatient Advanced Imaging	CT Scan, MRI, Ultrasound, PET Scan	80% after deductible	80% after deductible	70% after deductible	70% after deductible		
	Outpatient Advanced Imaging		80% after deductible	80% after deductible	70% after deductible	70% after deductible		
In-Network Prescriptions								
Retail Prescription Drugs (30 days)	\$15 / \$40 / \$65 / 10% to \$2,500	\$15 / \$40 / \$65 / 10% to \$2,500	\$15 / \$50 / \$75 / 10% to \$2,500	70% after deductible	70% after deductible			
Mail Order Prescription Drugs (90 days)	3x retail	3x retail	3x retail	70% after deductible	70% after deductible			

Notes	* Maximum Out of Pocket includes deductibles, coinsurance, medical and Rx copays.				HSA: \$300 match	HSA: \$300 match
	All coinsurance shown is after deductible unless otherwise noted.					

EE Rates	BCBS High Plan		HCH Low Plan		BCBS Low Plan		BCBS HD Plan		HCH HD Plan	
	Employee Only	\$185.00	\$63.00	\$80.00	\$50.00	\$0.00	\$540.00	\$440.00		
Employee + Spouse	\$730.00	\$560.00	\$600.00	\$370.00	\$282.00					
Employee + Children	\$570.00	\$390.00	\$410.00	\$370.00	\$282.00					
Employee + Family	\$1,120.00	\$870.00	\$940.00	\$850.00	\$722.00					

Voluntary Benefits

- Dental, Vision, and Permanent Life were marketed for 2023
- Dental: Move from MetLife to Guardian
 - MetLife renewal at 19% increase; Guardian at 10.7% increase
 - Guardian had more of the providers PfISD members use in their network
 - Guardian high plan includes adult ortho included and a rollover benefit
- Vision: Move from UHC to VSP
 - UHC renewal at rate pass; VSP at 4% decrease
 - VSP has a higher lens allowance (\$175 vs \$150)
 - VSP covers standard progressive lenses at 100% from network providers

Voluntary Benefits

- Permanent Life: Move from Chubb to Trustmark
 - Trustmark has higher maximums and 100% restoration of benefits when using the Long Term Care option
 - Trustmark premiums are lower for many age bands
 - Anyone with a Chubb policy can continue it – Chubb will be sending out paperwork closer to January on how to set up direct billing
- Accident & Critical Illness: More flexibility
 - Employees will be able to elect accident and critical illness separately instead of as a bundle
 - No changes to rates
- No changes to other benefits:
 - Voluntary Term Life
 - Voluntary Disability
 - Hospital

Dental & Vision Plans

Guardian

Dental - Dual Plan Features	Dental Services by Plan	Guardian Dental			
		High Plan		Low Plan	
	Dual Option	In Network	Out of Network	In Network	Out of Network
	Individual Deductible	\$50		\$50	
	Family Deductible	\$150		\$150	
	Annual Maximum	\$2,000		\$1,250	
	Late Entrant Penalty	Annual Open Enrollment		Annual Open Enrollment	
	Preventive (Type 1)	100%		100%	
	Basic (Type 2)	80%		80%	
	Major (Type 3)	50%		Not Covered	
	Orthodontics (Type 4)	50%		Not Covered	
	Endodontics	50%		Not Covered	
	Periodontics	50%		Maintenance only	
	Implants	50%		Not Covered	
	Child Orthodontia	Covered		Not Covered	
	Adult Orthodontia	Covered		Not Covered	
	Orthodontic Lifetime Maximum	\$1,500		Not Covered	
	Out-of-Network Reimbursement	80th		80th	
	Rate Guarantee	2 years			
	Participation Requirement	65%			

Notes	High Plan: Maximum Rollover Included (\$800 threshold, \$400 rollover, \$1,500 limit)
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Guardian

Premium	Enrollment & Rates by Plan	Guardian Dental	
	Employee Only	\$45.76	\$24.94
	Employee + Spouse	\$101.68	\$50.30
	Employee + Children	\$92.22	\$42.16
	Employee + Family	\$131.20	\$64.68

Vision - Plan Features	Vision Services by Plan	VSP	
	Single Option	In Network	Out of Network
	Eye Exam Copay	\$10	up to \$45
	Retinal Imaging	up to \$39	Not Covered
	Materials Copay	\$25	See Below
	Lenses (Standard)	- Single Vision	100% up to \$40
		- Bifocal	100% up to \$60
		- Trifocal	100% up to \$80
	Contact Lenses	- Medically Necessary	100% up to \$210
		- Elective	\$175 Allowance up to \$150
		- Standard Fitting Exam Fee	Included in allowance Not Covered
	Frames (Standard)		\$175 Allowance + 20% off balance Up to \$50
	Lens Options	- Anti-reflective coating	\$41 Not Covered
		- Polycarbonate (children only)	100% Not Covered
		- Standard Progressive lenses	100% Not Covered
		- Scratch-resistant coating	100% Not Covered
	Service Frequency		
	Comprehensive Eye Exam	Once every 12 months	
	Lenses	Once every 12 months	
	Contact Lenses	Once every 12 months	
	Frames	Once every 24 months	
	Rate Guarantee	5 years	
	Participation Requirement	No Minimum	

Notes	Featured frames allowance of \$195 Walmart frame at \$175 & Costco at \$95
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Premium	Enrollment & Rates by Plan	Enroll	VSP
		Employee Only	879
	Employee + Spouse	211	\$10.42
	Employee + Children	146	\$11.04
	Employee + Family	388	\$16.54

Find Providers

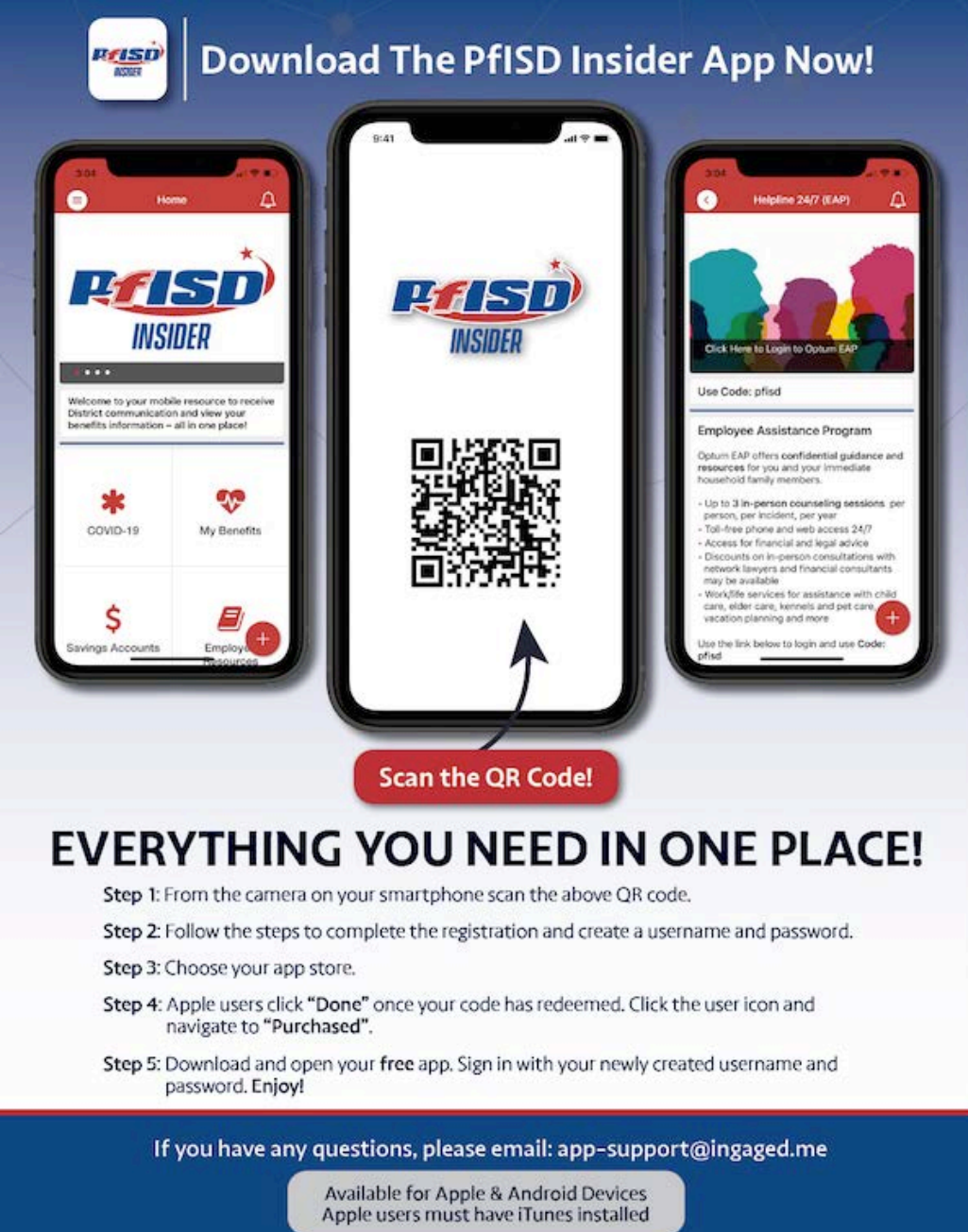
- Guardian (dental)
 - Visit www.guardiananytime.com
 - Under “Connect with Us” select “Find a Provider”
 - Plan type will be PPO: DentalGuard Preferred
- VSP
 - Visit www.vsp.com
 - Select “Find a Doctor”

NEW! Pet Insurance

- Pet Insurance will be offered through MetLife
- Employees can enroll on or after January 1, 2023
 - Enrollment can be done at www.metlife.com/getpetquote and by selecting Pflugerville ISD as the employer
- Plans are customizable
 - Pick accident only or add wellness option
 - Select your deductible
 - Select your reimbursement percentage
- No upper age limit on pets
- Plans include telehealth, lost pet coverage, and death benefits
- Payment will be made directly to MetLife (not through payroll)
- More information will be coming closer at the end of the year

PfISD Insider App

- Drawing during OE for downloading the PfISD Insider App
- Chance to win one of four \$50 gift card
- A winner announced at the end of each week
- Employees who have already downloaded the app will be automatically entered into the drawing



The graphic features three smartphones. The left phone shows the app's home screen with the PfISD Insider logo and a welcome message. The middle phone displays a QR code with an arrow pointing to a red button labeled 'Scan the QR Code!'. The right phone shows the login screen with the code 'pfisd' and a list of Employee Assistance Program benefits.

Download The PfISD Insider App Now!

EVERYTHING YOU NEED IN ONE PLACE!

Step 1: From the camera on your smartphone scan the above QR code.

Step 2: Follow the steps to complete the registration and create a username and password.

Step 3: Choose your app store.

Step 4: Apple users click "Done" once your code has redeemed. Click the user icon and navigate to "Purchased".

Step 5: Download and open your free app. Sign in with your newly created username and password. Enjoy!

If you have any questions, please email: app-support@ingaged.me

Available for Apple & Android Devices
Apple users must have iTunes installed

Open Enrollment

- Open Enrollment: October 1 – October 31
- Must go in to elect for:
 - Dental
 - Vision
 - FSA (healthcare, limited purpose, and dependent care)
 - HSA
 - Trustmark permanent life
- New enrollment vendor: SMBO
 - Visit www.pfisdbenefits.com and select Enroll Online, then select Click Here to Begin
 - Login with your employee ID number with three zeros before the number (ex: 000123456)
 - PIN is last 4 digits of your SSN and last 2 digits of your birth year
 - Or Call SMBO at 877-282-0808 (M-F 7:00-5:00)



SUMMARIES & FORMS

VIDEOS

Benefits Call Center | 877-282-0808



SMBO Meeting



Summaries & Forms

The best benefits for our most valuable resource, our employees.



Important Information

[Benefits Guide 2023](#)



Vision



Voluntary Coverages - Cigna

[Accident Coverage](#)

Employee ID or SSN

PIN [Need help?](#)

[Log in](#)

By entering your user ID and Personal Identification Number, you are agreeing to the terms of the [Consent to Enroll Electronically](#).

Welcome!

Welcome to Pflugerville ISD Benefits. By logging into this website, you will be able to enroll in and view your benefits. To use this website, you must have your employee ID or Social Security Number and your confidential Personal Identification Number (PIN).

Employee ID Number: is your EID with three zeros before the number - example 000801001.

Pin: is the last 4 digits of your social security number and the last 2 digits of your birth year.

Enrollers, use the [admin site](#) instead.

[Security Info](#) | [Privacy Policy](#)



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