

# Employee Benefits Guide

2020  
2021



This guide provides highlights of our benefits program. A complete description of your benefit plans can be found in the plan documents, Summary Plan Descriptions (SPD) and contracts. While every effort has been made to provide an accurate summary of the plans, the information contained in this guide does not replace or change the meaning of our employer-sponsored benefit(s) plan documents; SPDs and contracts; the plan documents and contracts are controlling in the event of any discrepancy. We reserve the right to terminate or amend these employer-sponsored plans at any time, in whole or in part, for any reason. Any such amendment or termination may apply to current and future participants, covered spouses, beneficiaries, and dependents.

## Contacts

### **Medical**

SelectHealth  
(800) 538-5038  
selecthealth.org

### **Nebo Health & Wellness Center**

(877) 423-1330  
CareHere.com  
Code: NSD2start  
135 West 300 South  
Spanish Fork

### **Health Savings Account**

HealthEquity  
(866) 346-5800  
healthequity.com

### **Dental**

EMI Health  
(800) 662-5851  
emihealth.com

### **Vision**

VSP  
(800) 363-0950  
vsp.com

EyeMed  
(866) 939-3633  
eyemedvisioncare.com

### **Flexible Spending Account**

AxisPlus  
(877) 872-2125  
myaxisplus.com

### **Basic Life & AD&D**

The Hartford  
(888) 563-1124  
thehartford.com

### **Disability**

The Hartford  
(888) 563-1124  
thehartford.com

### **Critical Illness**

#### **Accident**

#### **Hospital Indemnity**

MetLife  
(800) GET-MET8  
<https://portal.metlink.com/MetLinkPortal/jsp/index.jsp>

### **Employee Assistance Program**

Blomquist Hale  
(800) 926-9619  
blomquisthale.com

### **Human Resources**

Ryan Kay, *Human Resources*  
(801) 354-7452  
ryan.kay@nebo.edu



## Nebo School District

September 1, 2020 - August 31, 2021

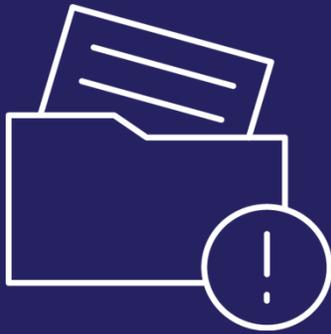
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**This Guide is designed to highlight your benefit options so that you can make the best possible decisions for you and your family. Use this guide as your go-to-resource when you're enrolling for benefits and throughout the plan year. The choices you make will remain in effect during the plan year, unless you have a qualifying major life event.**

We are committed to providing our employees with quality benefits programs that are comprehensive, flexible and affordable. Giving our employees the best in benefit plans is one way we can show you that as an employee, YOU are our most important asset. Eligible employees have many benefit plans to choose from, so we ask that you read this benefits guide carefully to help you make the benefit elections that are the best fit for you and your family.

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# Important Information

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Nebo School District

## **Benefits Overview**

Making wise decisions about your benefits requires planning. By selecting benefits that provide the best care and coverage, you can optimize their value and minimize the impact to your budget. The best thing you can do is “shop” for benefits carefully, using the same type of decision-making process you use for other major purchases.

- 1. Take advantage of the tools available to you.** That includes this guide, access to plan information, provider directories, and enrollment materials.
- 2. Be a smart shopper.** If you were buying a car or purchasing a home, you would do a lot of research beforehand. You should do the same for benefits because the wrong decision could be costly.
- 3. Don't miss the deadline and keep record of your enrollment!** Pay attention to the enrollment deadline and be sure to provide Human Resources with your benefit elections in a timely manner. It is important to review your paycheck to ensure the accuracy of payroll deductions. Notify HR immediately if there are any discrepancies.

### **Who Is Eligible?**

Please see the eligibility guidelines on the following page.

### **How We Define Medical Benefits Eligibility**

We are a large employer according to the Employer Shared Responsibility provisions of the ACA. The enrollment guidelines listed in this guide may vary if you are hired to work less than 30 hours per week (130 hours per month) or your hours worked drop below the threshold. Please contact us for our complete policy on Measurement Methods to determine full-time benefits eligibility status under the Employer Shared Responsibility.

### **When Do I Enroll?**

You can enroll for coverage within 30 days of your date of hire, or during the annual open enrollment period. Outside of your open enrollment period, the only time you can change your coverage is within 30 days after you experience a qualifying event.

## **Benefits Overview**

You are eligible for benefits if you fall into one of the following classes:

### **Medical Plan**

- Active CERTIFIED employees working 20 or more hours per week
- Active CLASSIFIED employees hired prior to July 1, 2013 and working 30 or more hours per week
- Active CLASSIFIED employees hired July 1, 2013 through February 7, 2018 and working 30 or more hours per week
- Active CLASSIFIED employees hired February 8, 2018 or later and working 30 or more hours per week are eligible for a family base medical plan under ACA. Plan premium is prorated based on hours and capped at \$90 per month for a single plan.
- Active CLASSIFIED BUS DRIVERS hired July 1, 2013 or later and working 30 or more hours per week

### **Long-Term Disability Plan**

- Active CERTIFIED employees working 20 or more hours per week
- Active CLASSIFIED employees hired prior to July 1, 2013 and working 20 or more hours per week
- Active CLASSIFIED employees hired July 1, 2013 through February 7, 2018 and working 30 or more hours per week
- Active CLASSIFIED employees hired February 8, 2018 or later and working 40 or more hours per week
- Active CLASSIFIED BUS DRIVERS hired July 1, 2013 or later and working 30 or more hours per week

### **The Hartford Life Insurance**

- Active CERTIFIED employees working 20 or more hours per week
- Active CLASSIFIED employees hired prior to July 1, 2013 and working 20 or more hours per week
- Active CLASSIFIED employees hired July 1, 2013 through February 7, 2018 and working 30 or more hours per week
- Active CLASSIFIED employees hired February 8, 2018 or later and working 40 or more hours per week
- Active CLASSIFIED BUS DRIVERS hired July 1, 2013 or later and working 30 or more hours per week

Coverage will begin on the first of the month following date of hire. Eligible dependents include your legal spouse and your natural, adopted or step-child(ren). The dependent age limit for children on your plan is age 26.

# Benefits Overview

## **Making Changes During The Year**

The IRS provides strict regulations about the changes to pre-tax elections during the plan year. Once you enroll in benefits, you will not be able to make any changes to your elections until the next annual open enrollment period, unless you experience a qualified life event.

Qualified life events include, but are not limited to:

- Change in your legal marital status
- Change in number of dependents
- A dependent no longer meets the eligibility requirements
- You and/or your dependent becomes eligible or loses eligibility for Medicare, Medicaid or the Children's Health Insurance Program (CHIP)
- Employee or dependents change in employment status resulting in loss or gain of eligibility for employer sponsored benefits
- A court or administrative order

It is your responsibility to notify Human Resources within 30 days after a qualified life event. Any benefit changes must be directly related to the qualified life event.

## **When Coverage Ends**

For most benefits, coverage will end on the last day of the month in which:

- Your regular work schedule is reduced to fewer than 30 hours per week
- Your employment with Nebo School District ends

Your dependent(s) coverage ends:

- When your coverage ends, or
- The last day of the month in which the dependent is no longer eligible



## Important Information

### **GoodRx Comparison Tool**

Stop paying too much for your prescriptions! With the GoodRx Comparison Tool, you can compare drug prices at over 70,000 pharmacies, and discover free coupons and savings tips.

**Isn't health insurance all I need?** Your health insurance provides valuable prescription and other health benefits, but a smart consumer can save much more, especially for drugs that are not covered by health insurance (weight-loss medications, some antihistamines, etc.), drugs that have limited quantities, drugs that can be found for less than your copay, or drugs with a lower priced generic.

**How can I find these savings?** The GoodRx Comparison Tool provides you with instant access to current prices on more than 6,000 drugs at virtually every pharmacy in America.

**1. On the web:** <https://www.goodrx.com/> Instantly look up current drug prices at CVS, Walgreens, Walmart, Costco, and other local pharmacies.

**2. On your phone:** Available in the App Store or Google Play. Or, simply visit [m.goodrx.com](http://m.goodrx.com) from your phone.

#### **Please Note:**

- Prescription drug pricing displayed on the GoodRx Comparison Tool may be more or less than your insurance drug card.
- Please be sure to compare all discount pricing options before you purchase.
- Check your insurance carrier's pharmacy benefit before purchasing a 90 day supply.

### **Health Care Reform And You**

For the most up-to-date information regarding the ACA, please visit [www.healthcare.gov](http://www.healthcare.gov).

### **Summary of Benefits and Coverage (SBC) and Uniform Glossary**

In addition to the plan information in this Benefits Guide, you can also review a Summary of Benefits and Coverage for each medical plan. This requirement of the ACA standardizes health plan information so that you can better understand and compare plan features. We will automatically provide you a copy of the SBC and Uniform Glossary annually during open enrollment. Please contact HR should you need an additional copy.

# Online Benefits Enrollment

Please follow the simple steps below to elect or waive coverage for the current plan year. Before you begin, you will need to have the following information: You/your dependent(s) names, social security number(s), dates(s) of birth and home address.

## Account Information

- Your User ID is: **[last name] [last four of SSN]**
- For Example: Name John Doe, SSN xxx-xx-1234, User ID = doe1234

## New User

- You will receive an email requesting you to verify your account. Open the email, click the **“Verify Account”** link, and follow the instructions to create a password, then log in.

## Returning User

- In your web browser, type [www.infinityhr.com](http://www.infinityhr.com) in the address bar
- If you forgot your password, click **“Forgot Your Password”**, then enter your Username and click **“Send Password Reset”**.
  - If you have an email address in the system, you will receive an email with a link to reset your password. Click the link and follow the instructions to reset your password and log in.
  - If you don't have an email address in the system, you will be instructed to enter your Date of Birth and Social Security Number, then you will be prompted to create a password. Create your password and log in.

## Getting Started

- Once you have logged in, on the home screen look for **Change Events**.
- Select the event available, which should be **“Open Enrollment”**, then click **“Begin Event”**.
  - If enrolling outside of Open Enrollment, select the options that are appropriate, such as New Hire or Marriage.

## Verify Your Personal and Dependent Information

- Verify your Personal Information and click **“Save & Continue”**.
- If you need to add a dependent, click **“Add Dependent”**. If you need to change a dependent's information, click **“Edit”**, then add/update the information and click **“Save Information”**.
- Once all of your dependents have been added/updated, click **“Save & Continue”**.
  - If your spouse will be enrolled in coverage, they are considered a dependent for insurance purposes.
  - **Please Note:** If you plan on enrolling in Spouse Life Insurance or Child Life Insurance, you need to add your spouse and children as dependents on this screen.

## Make Your Elections

- Follow the enrollment wizard through each step of the enrollment process and elect or decline each benefit
- **Please Note:** As you elect plans, your dependents will appear at the bottom of the screen. Please remove the check mark from the box if you do not want a dependent covered on that specific plan.
- Click **“Save and Continue”** to continue at the top of the screen navigating through the system.

## Confirm Your Elections

- After you have made all your elections you will be at the Review Tab.
- Review the benefit elections for yourself and your dependents to ensure accuracy
- Click **“Save & Confirm”**.
- The Enrollment Confirmation Statement will be emailed to you.



# Medical

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SelectHealth  
Base Plan  
Option Plan

# Medical

## SelectHealth

Plan Features	Share Base Plan		Share Option Plan	
	In-Network Only		In-Network Only	
<b>Deductible</b>	\$2,700/person \$5,400/family		\$1,600/single \$3,200/family	
<b>Out-of-Pocket Maximum</b>	\$3,700/person \$7,400/family		\$3,250/single \$6,500/family	
<b>Preventive Care</b>	Covered in Full		Covered in Full	
<b>Office Visits</b>				
<i>Primary Care</i>	20% AD		20% AD	
<i>Specialist</i>	20% AD		20% AD	
<i>Urgent Care</i>	20% AD		20% AD	
<i>Intermountain Connect Care</i>	20% AD		20% AD	
<b>Hospital Services</b>				
<i>Inpatient</i>	20% AD		20% AD	
<i>Outpatient</i>	20% AD		20% AD	
<b>Emergency Room</b>	20% AD		20% AD	
<b>Mental Health Services</b>				
<i>Office Visit</i>	20% AD		20% AD	
<i>Inpatient</i>	20% AD		20% AD	
<i>Outpatient</i>	20% AD		20% AD	
<b>Pharmacy</b>	<b>Retail 30 day supply</b>	<b>Mail Order 90 day supply</b>	<b>Retail 30 day supply</b>	<b>Mail Order 90 day supply</b>
<i>Tier 1</i>	\$10 AD	\$10 AD	\$10 AD	\$10 AD
<i>Tier 2</i>	\$25 AD	\$50 AD	\$25 AD	\$50 AD
<i>Tier 3</i>	\$50 AD	\$150 AD	\$50 AD	\$150 AD
<i>Tier 4</i>	\$100 AD	N/A	\$100 AD	N/A
<b>Preventive Maintenance</b>				
<i>Tier 1</i>	\$10	\$10	\$10	\$10
<i>Tier 2</i>	\$25	\$50	\$25	\$50
<i>Tier 3</i>	\$50	\$100	\$50	\$150
<i>Tier 4</i>	\$100	N/A	\$100	N/A

AD = After Deductible



# Medical

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SelectHealth  
Dual Employee Base Plan  
Dual Employee Option Plan

# Medical

## SelectHealth

Plan Features	Dual Employee Share Base Plan		Dual Employee Share Option Plan	
	In-Network Only		In-Network Only	
<b>Deductible</b>	\$2,700/person \$5,400/family		\$3,200/family	
<b>Out-of-Pocket Maximum</b>	\$2,700/person \$5,400/family		\$3,200/family	
<b>Preventive Care</b>	Covered in Full		Covered in Full	
<b>Office Visits</b>				
<i>Primary Care</i>	Covered in Full AD		Covered in Full AD	
<i>Specialist</i>	Covered in Full AD		Covered in Full AD	
<i>Urgent Care</i>	Covered in Full AD		Covered in Full AD	
<i>Intermountain Connect Care</i>	Covered in Full AD		Covered in Full AD	
<b>Hospital Services</b>				
<i>Inpatient</i>	Covered in Full AD		Covered in Full AD	
<i>Outpatient</i>	Covered in Full AD		Covered in Full AD	
<b>Emergency Room</b>	Covered in Full AD		Covered in Full AD	
<b>Mental Health Services</b>				
<i>Office Visit</i>	Covered in Full AD		Covered in Full AD	
<i>Inpatient</i>	Covered in Full AD		Covered in Full AD	
<i>Outpatient</i>	Covered in Full AD		Covered in Full AD	
<b>Pharmacy</b>	<b>Retail 30 day supply</b>	<b>Mail Order 90 day supply</b>	<b>Retail 30 day supply</b>	<b>Mail Order 90 day supply</b>
<i>Tier 1</i>	Covered	Covered	Covered	Covered
<i>Tier 2</i>	in Full AD	in Full AD	in Full AD	in Full AD
<i>Tier 3</i>	for all	for all	for all	for all
<i>Tier 4</i>	tiers	tiers	tiers	tiers
<b>Preventive Maintenance</b>				
<i>Tier 1</i>	Covered	Covered	Covered	Covered
<i>Tier 2</i>	in Full for	in Full for	in Full for	in Full for
<i>Tier 3</i>	all tiers	all tiers	all tiers	all tiers
<i>Tier 4</i>				

AD = After Deductible

# SelectHealth Share

## Welcome to SelectHealth Share, let's get started on your journey to better healthcare!

As part of SelectHealth Share, there are several, what we call, *engagements* that are required. You're going to hear this word a lot now that you're part of team Share. There are two different time frames in which you must complete your engagements. The first 90 days and the first nine months of your plan year.

Now, we don't expect you to remember everything you have to do. That's why we've created a checklist. Keep it handy and check things off as you complete them. And you know what? As you complete each of these, you will be on your way to living your healthiest life possible. And that's the whole point! So, let's dig in. Read about each of the engagements, and remember to complete them on time!

## SelectHealth Share Network Service Area

SelectHealth Share members have access to 5,100+ participating providers, including many Intermountain Medical Group physicians and thousands more affiliated providers. Additionally, you can use 20 Intermountain Healthcare hospitals in Utah, including:

- Cedar City Hospital
- Heber Valley Hospital
- Logan Regional Hospital
- Park City Hospital
- Primary Children's Hospital
- Intermountain Medical Center
- The Orthopedic Specialty Hospital (TOSH)
- Utah Valley Hospital
- McKay-Dee Hospital
- Dixie Regional Medical Center
- Mountain West Medical Center

Don't see your hospital? Visit [selecthealth.org/providers](http://selecthealth.org/providers) to see all the hospitals included on SelectHealth Share.

## SelectHealth also includes:

- ❖ **Intermountain Health Answers** - a 24/7 nurse line that allows you to speak to a registered nurse who will listen to your concerns, answer your medical questions, and help you decide what course of action to take. All you need is your phone.
- ❖ **Intermountain Connect Care** - use your computer, tablet, or phone to video connect with a doctor or nurse practitioner anytime (24/7 access). Visit [intermountainconnectcare.org](http://intermountainconnectcare.org) or download the ConnectCare app. It's a great option for colds, sore throats, earaches, and more.
- ❖ **Intermountain InstaCare/KidsCare** - They're open late - and are a great choice for sore throats, broken bones, sprains, and other urgent medical conditions. With nearly 40 locations, there's a site near you. Use our app to reserve your spot in line!

# SelectHealth Share

## Your First Ninety Days

**Create an online *My Health* account.** This is key to accessing your Healthy Living tools and tracking your engagements. It's your health hub.

**Pick your Primary Care Provider (PCP).** Once you choose your doctor, make sure to tell us via *My Health* or by calling Member Services at 800-538-5038. Establishing a PCP is critical. From getting care quickly when you need it to referrals, your PCP is your #1.

**Attend a work-site health screening event or obtain the screening from a physician.** This is how we establish your health baseline and figure out the best plan for you.

**Complete the annual online health assessment on the Healthy Living website (via your *My Health* account).** Your assessment can identify health risks so you can address those risks sooner rather than later.

**Establish and contribute to a Health Savings Account (HSA).** This is for those of you who have a high-deductible health plan and contribute at least 25 percent of your annual deductible. Consider this your health bucks account - a real lifesaver if you need it.

## Your First Nine Months

**Complete at least one digital coaching program.** Receive tips and resources on improving any health issues - and hey, we all have at least one. Go to *My Health*, then find "Digital Coaching" in the Healthy Living section of your dashboard.

**Get moving with Virgin Pulse.** This is a two-part engagement. First, create a Virgin Pulse account. This is where we track your activity. Then, complete at least two of the wellness/activity campaigns. Keep in mind, company team challenges, 7,000 steps in 20 days, or Healthy Habits Challenges all count as activity campaigns.

## A Few Extras

For employees who have a condition, or are of a specific age and/or gender, there are a few special engagements that will help you feel your best. And because we care, these are also required.

### Complete age and gender based screenings.

- Women age 42 - 69 - one mammogram every two years
- Women age 24 - 64 - one pap test every three years
- Men & women age 51 - 80 - one colonoscopy every 5 years, or other colorectal cancer screening every 1 - 5 years

### Complete prediabetes education.

If your health screening/assessment indicates you have prediabetes, you will need to complete prediabetes education and health coaching. Plus, we'll reward you for improving your health with Healthy Rewards Visa cash cards.

### Participate in Disease Management

If you have asthma, diabetes, Chronic Obstructive Pulmonary Disease (COPD), or heart failure, you need to work with a SelectHealth care manager. Plus, we'll reward you for improving your health with Healthy Rewards Visa cash cards.

# HERE BECAUSE WE CARE

## HEALTHCARE SERVICES AVAILABLE AT THE NEBO SCHOOL DISTRICT HEALTH & WELLNESS CENTER

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- Preventive exams including school, sports & camp physicals
- Health Risk Assessments: Biometric screening including blood draws
- Flu shots
- Wellness, health coaching & health maintenance
  - Lifestyle/Risk coaching
  - Tobacco Cessation
  - Cholesterol
  - Pre-Diabetes
  - Pre-Hypertension
  - Stress
- Dispensary
- Chronic Disease Management
  - Diabetes
  - Heart failure
  - Asthma
  - Obesity
  - Hypertension
- Acute care
  - Strep throat
  - Sinus
  - Sore throat
  - Ear infections
  - Minor burns
  - Pink eye
  - Cuts & contusions
  - Minor rashes
  - Flu
  - Bronchitis
  - Bladder/urinary tract

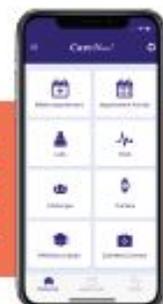
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- Symptom Management
  - Colds/flu
  - Gastric reflux
  - Headache
  - Fever
  - Allergy symptoms
  - Muscular strains/sprains
  - Cough
  - Fatigue
  - Upper respiratory
  - Sinusitis
  - Abdominal pain/stomach upset
  - Other minor aches and pains
- Mental Health
  - Anxiety
  - ADD
  - Seasonal Affective Disorder
  - Depression
  - ADHD
  - Premenstrual Dysphoric Disorder
- Lab services
  - CareHere can provide savings on labs ordered by the Provider in the health center from a list of over 2,779 approved labs
  - Minor surgical procedures such as sutures for laceration treatment
- Dermatology
  - Removal of moles & skin lesions
  - Acne treatment
  - Freezing of warts
  - Treatment of eczema & psoriasis
- Occupational conditions
  - DOT Exams (no drug testing)
- Well-Women / Well-Men Visits
  - Pap smears
  - Contraception management
  - Pre-marital counseling
  - Conception/infertility counseling
  - Men's physicals
  - Impotence

**SCHEDULE ANYWHERE**

877.423.1330 | CareHere.com | CareHere App

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# Health Savings Account

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HealthEquity

# Health Savings Account

## HealthEquity

A Health Savings Account (HSA) paired with our qualified high deductible health plan helps you and your family plan, save and pay for qualified health care expenses. An HSA empowers you to build savings for health care expenses in a tax advantaged account.

### **About Health Savings Accounts**

A Health Savings Account (HSA) is a tax advantaged savings account that you own and control. HSAs are similar to retirement accounts in that they rollover year-to-year, they are portable when you move jobs or retire, the balance can be invested in mutual funds, and there are survivor benefits.

### **Who Is Eligible?**

You must be enrolled in our qualified high deductible health plan and meet the following requirements:

- Have no other health insurance coverage except what's permitted by the IRS
- Not be enrolled in Medicare
- Not be claimed as a dependent on someone else's tax return

### **What Is A Qualified Health Care Expense?**

You can use money in your HSA to pay for any qualified health care expenses for you, your spouse and your tax dependents, even if they are not covered on your plan. Examples of qualified health care expenses include: your insurance plan deductibles, copayments, and coinsurance; doctor's office visits; prescriptions; dental treatments and x-rays; and eyeglasses and vision exams.

### **How Much Can I Contribute To A HSA?**

Each year the IRS establishes the maximum contribution limit. The chart below represents the limits for 2020. These limits are for the total funds contributed, including company contributions, your contributions and any other contributions. Please keep in mind you can change your HSA allocation at any time during the plan year.

### HSA Contribution Limits

#### IRS HSA Contribution Limits for 2020

<b>Employee Only</b>	\$3,550
<b>Employee + One</b>	\$7,100
<b>Family</b>	\$7,100

*At age 55, an additional \$1,000 contribution is allowed annually*

# Health Savings Account

## Qualified Health Care Expenses

You can use money in your HSA to pay for any qualified health care expenses you, your legal spouse and your tax dependents incur, even if they are not covered on your plan. Qualified health care expenses are designated by the IRS (Publication 502). They include medical, dental, vision and prescription expenses not covered by the insurance carrier.

### Qualified expenses include, but are not limited to:

- Acupuncture
- Alcoholism (rehab)
- Ambulance
- Amounts not covered under another health plan
- Annual physical examination
- Artificial limbs
- Birth control pills/prescription contraceptives
- Body scans
- Post-mastectomy breast reconstruction surgery
- Chiropractor
- Contact lenses
- Crutches
- Dental treatments
- Eyeglasses/eye surgery
- Hearing aids
- Long-term care expenses
- Medicines (prescribed)
- Nursing home medical care
- Nursing services
- Optometrist
- Lasik surgery
- Orthodontia
- Oxygen
- Stop-smoking programs
- Surgery, other than unnecessary cosmetic surgery
- Telephone equipment for the hearing-impaired
- Therapy
- Transplants
- Weight-loss program (prescribed)
- Wheelchairs
- Wigs (prescribed)

**Non-qualified expenses include any expenses incurred before you establish your HSA.**

### Other non-qualified expenses include, but are not limited to:

- Concierge services
- Dancing lessons
- Diaper service
- Elective cosmetic surgery
- Electrolysis or hair removal
- Funeral Expenses
- Future medical care
- Hair transplants
- Health club dues
- Insurance premiums\*
- Medicines and drugs from other countries
- Non-prescription drugs (other than insulin)
- Teeth whitening

### The following insurance premiums may be reimbursed from your HSA:

- COBRA premiums
- Health insurance premiums while receiving unemployment benefits
- Qualified long-term care premiums
- Medicare premiums (Parts A, B, C, etc.)

### > Important

Any funds you withdraw for non-qualified expenses will be taxed at your income tax rate plus a 20% tax penalty if you're under age 65. After age 65, you pay taxes but no penalty.

### Documentation is Key

An HSA can be used for a wide range of health care services within the limits established by law. Be sure you understand what expenses are HSA qualified, and be able to produce receipts for those items or services that you purchase with your HSA. You must keep records sufficient to show that:

- The distributions were exclusively to pay or reimburse qualified medical expenses,
- The qualified expenses had not been previously paid or reimbursed from another source, and
- The qualified expense had not been taken as an itemized deduction in any year.

Do not send these records with your tax return. Keep them with your tax records.



# Dental

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EMI Health

# Dental

## EMI Health

### Advantage Plus PPO Plan

Plan Features	In-Network	Out-of-Network
<b>Deductible</b> <i>waived for Preventive Services and Orthodontics</i>		No Deductible
<b>Annual Maximum</b>		No Annual Maximum
<b>Type 1 - Preventive Services</b> <i>x-rays, cleanings, exams</i>	100%	No Coverage
<b>Type 2 - Basic Services</b> <i>fillings, extractions, root canals</i>	See Member Schedule Discount Only	No Coverage
<b>Type 3 - Major Services</b> <i>dentures, crowns, bridges</i>	See Member Schedule Discount Only	No Coverage
<b>Type 4 - Orthodontics</b> <i>for adults and children</i>	25% Discount Only	No Coverage
<b>Orthodontic Lifetime Maximum</b>		No Maximum









# Dental

## EMI Health

### Advantage Co-Pay Plan

Plan Features	In-Network	Out-of-Network
<b>Deductible</b> <i>waived for Preventive Services and Orthodontics</i>		No Deductible
<b>Annual Maximum</b>		No Annual Maximum
<b>Type 1 - Preventive Services</b> <i>x-rays, cleanings, exams</i>	100%	See Co-Pay Schedule
<b>Type 2 - Basic Services</b> <i>fillings, extractions, root canals</i>	See Co-Pay Schedule	See Co-Pay Schedule
<b>Type 3 - Major Services</b> <i>dentures, crowns, bridges</i>	See Co-Pay Schedule	See Co-Pay Schedule
<b>Type 4 - Orthodontics</b> <i>for adults and children</i>	25% Discount Only	No Coverage
<b>Orthodontic Lifetime Maximum</b>		No Maximum









# Dental

## EMI Health

### Choice PPO Plan

Plan Features	In-Network Advantage Plus Network	In-Network Premier Network	Out-of-Network
<b>Deductible</b> <i>waived for Preventive Services and Orthodontics</i>	\$50/person \$150/family	\$50/person \$150/family	\$50/person \$150/family
<b>Annual Maximum</b>	\$1,500/person	\$1,200/person	\$1,200/person
<b>Type 1 - Preventive Services</b> <i>x-rays, cleanings, exams</i>	100%	100%	100% up to TOA
<b>Type 2 - Basic Services</b> <i>fillings, extractions, root canals</i>	80% AD	80% AD	80% AD up to TOA
<b>Type 3 - Major Services</b> <i>dentures, crowns, bridges</i>	50% AD	50% AD	50% AD up to TOA
<b>Type 4 - Orthodontics</b> <i>for dependent children ages 7 - 18</i>	50%	50%	50%
<b>Orthodontic Discount</b> <i>for all members</i>	Up to 25%	Up to 25%	No Discount
<b>Orthodontic Lifetime Maximum</b>		\$1,000 per person	

AD = After Deductible

TOA = Table of Allowances.

When using a non-participating provider, the insured is responsible for all fees in excess of the Table of Allowances.



# Vision

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EyeMed  
VSP



## Vision EyeMed

### Access Network

Plan Features	In-Network You Pay	Out-of-Network Plan Reimburses You
<b>Exam</b> <i>once every 12 months</i>	\$20	Up to \$35
<b>Frames</b> <i>once every 24 months</i>	\$130 allowance + 20% off balance over \$130	Up to \$65
<b>Lenses</b> <i>once every 12 months</i>		
Single Vision	\$20	Up to \$25
Bifocal	\$20	Up to \$40
Trifocal	\$20	Up to \$55
Standard Progressive	\$85	Up to \$40
Premium Progressive	\$85 + 80% of charge less \$120 allowance	Up to \$40
<b>Contact Lenses</b> <i>once every 12 months</i>		
Elective	\$120 allowance + 15% off balance over \$120	Up to \$96
Medically Necessary	Covered in Full	Up to \$200
<b>Laser Vision Correction</b>	15% off retail price 5% off promotional price	No Benefit



## Vision VSP

### VSP Choice Network

Plan Features	In-Network You Pay	Out-of-Network Plan Reimburses You
<b>Exam</b> <i>once every 12 months</i>	\$20	Up to \$45
<b>Frames</b> <i>once every 24 months</i>	\$120 allowance \$140 allowance for featured frame brands \$70 Costco frame allowance 20% discount on remaining balance over allowed amount	Up to \$70
<b>Lenses</b> <i>once every 12 months</i>		
Single Vision	\$0	Up to \$30
Bifocal	\$0	Up to \$50
Trifocal	\$0	Up to \$65
Standard Progressive	\$0	Up to \$50
Premium Progressive	Cost varies by option chosen	Up to \$50
<b>Contact Lenses</b> <i>once every 12 months</i>		
Elective	\$120 allowance	Up to \$105
<b>Laser Vision Correction</b>	15% off retail price 5% off promotional price	No Benefit



# Life and AD&D

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The Hartford

# Life and AD&D

## The Hartford

Life Insurance and Accidental Death & Dismemberment (AD&D) benefits provide you and your loved ones financial protection in the event of an illness, accident, or death.

### Basic Life Insurance and Accidental Death and Dismemberment (AD&D)

Nebo School District provides all eligible employees with a basic group life insurance and accidental death and dismemberment coverage at no cost to you (see page 7).

### Voluntary Life Insurance and AD&D

You also have the option to purchase additional life insurance coverage for yourself, your spouse and your dependent children to age 26. However, you may only elect coverage for your dependents if you elected additional coverage for yourself. You pay for the cost of additional coverage through payroll deductions on a post-tax basis.

### Beneficiary Designation

We recommend you designate a beneficiary for your life insurance policy(ies). A beneficiary is the person (or people, estate, trust, etc.) to whom benefits will be paid to in the event of your death. You may change your beneficiary at any time during the plan year.

Plan Features	Basic Life And AD&D	Voluntary Life And AD&D
<b>Life Benefit Amount</b>	Employee: \$29,000 Spouse: \$5,000 Child(ren): \$3,000	Employee, Spouse & Child(ren): Elect in increments of \$5,000
<b>AD&amp;D Benefit Amount</b>	Equal to life benefit (employee only)	N/A
<b>Maximum Life / AD&amp;D Benefit</b>	Employee: \$29,000 Spouse: \$5,000 Child(ren): \$3,000	Employee: \$300,000 Spouse: \$250,000 not to exceed 100% of the employee's amount Child(ren): \$10,000
<b>Voluntary Life Guaranteed Issue</b> <i>new employees only</i>		Employee: \$250,000 Spouse: \$40,000 Child(ren): \$5,000 or \$10,000
<b>Increasing coverage at Open Enrollment</b> <i>all eligible employees</i>	For both employees and their spouses, if you were previously eligible and are electing coverage for the first time or electing to increase your current coverage, you will need to provide evidence of insurability (EOI) before coverage can become effective. Child(ren) insurance is guaranteed issue coverage - it is available without having to provide EOI.	



# Disability

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The Hartford

# Disability

## Nebo School District

Disability insurance benefits replace a portion of your income if you are unable to work for a period of time due to a qualified off-the-job injury or illness.

### Long-term Disability

Long-term disability provides an ongoing source of income if your disability is prolonged.

### Eligibility

You are eligible for Long-Term Disability if you meet one of the following criteria:

- All active, certified employees working 20 or more hours per week
- active classified employees hired prior to July 1, 2013 through February 7, 2018 and working 30 hours or more per week
- Active classified employees hired February 8, 2018 or later and working 40 hours or more per week
- Active classified bus drivers hired July 1, 2013 or later and working 30 hours or more per week

### Definition Of Disability

Disability means that, solely because of a covered injury or sickness, you are unable to perform the material duties of your regular occupation and you are unable to earn 80% or more of your indexed earnings from working in your regular occupation. After benefits have been payable for 24 months, you are considered disabled if solely due to your injury or sickness, you are unable to perform the material duties of any occupation for which you are (or may reasonably become) qualified by education, training or experience, and you are unable to earn 80% or more of your indexed earnings.

Plan Features	Long-Term Disability
Benefit Amount	60% of monthly earnings
Maximum Benefit	\$5,000 monthly
Benefit Waiting Period	120 days
Maximum Benefit Duration	Social Security Normal Retirement Age
Own Occupation	24 months



# Voluntary Benefits

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MetLife

# Accident Plan

## MetLife

### Group Accident Insurance (off-the-job)

With MetLife, you'll have a comprehensive plan which provides payments in addition to any other insurance payments you may receive. Here are just some of the covered events/services:

Benefit Type	MetLife Accident Insurance Pays You
Fractures	\$320 - \$8,000
Dislocations	\$240 - \$6,000
Second and Third Degree Burns	\$100 - \$20,000
Concussions	\$200
Cust / Lacerations	\$25 - \$400
Eye Injuries	\$250
Ambulance	\$1,000 - \$2,000
Emergency Care	\$50 - \$200
Non-Emergency Care	\$50
Physician Follow-Up	\$30
Therapy Services (including physical therapy)	\$25 - \$30
Medical Testing Benefit	\$200
Medical Appliances	\$100 - \$1,00
Inpatient Surgery Admission	\$200 - \$2,000
	\$500 - \$1,000
Hospital Confinement	\$200 per day (non-ICU) up to 31 days \$400 per day (ICU) up to 31 days
Inpatient Rehab (paid per accident)	\$75 a day, up to 15 days
Employee receives 100% of amount shown. Spouse receives 50% and children receive 20% of amount shown	\$50,000 \$100,000 for common carrier
Dismemberment, Loss & Paralysis	\$1,250 - \$50,000 per injury
Lodging - pays for lodging for companion	\$100 per night up to 31 days per year; up to \$3,100 total per calendar year
Health Screening Benefit	\$50 once per year

### Accident Plan Premiums (10 month premiums)

	Annual Premium	Monthly Premium
Employee Only	\$120.72	\$12.07
Employee & Spouse	\$243.84	\$24.38
Employee & Child(ren)	\$242.88	\$24.29
Family	\$305.28	\$30.53

# Critical Illness Plan

## MetLife

### Group Critical Illness Insurance

Critical Illness insurance provides a lump sum benefit to help you cover the out-of-pocket expenses associated with a critical illness diagnosis.

Eligible Individual	Initial Benefit	Requirements
Employee	\$10,000 or \$20,000	Coverage is guaranteed provided you are actively at work
Spouse / Domestic Partner	50% of the employee's Initial Benefit	Coverage is guaranteed provided the employee is actively at work and the spouse/domestic partner is not subject to a medical restriction as set forth on the enrollment form and in the Certificate
Dependent Child(ren)	50% of the employee's Initial Benefit	Coverage is guaranteed provided the employee is actively at work and the dependent is not subject to a medical restriction as set forth on the enrollment form and in the Certificate

Your Initial Benefit provides a lump-sum payment upon the first diagnosis of a Covered Condition. Your plan pays a Recurrence Benefit for the following Covered Conditions: Heart Attack, Stroke, Coronary Artery Bypass Graft, Full Benefit Cancer and Partial Benefit Cancer. A Recurrence Benefit is only available if an Initial Benefit has been paid for the Covered Condition. There is a Benefit Suspension Period between Recurrences.

The maximum amount that you can receive through your Critical Illness Insurance Plan is called the Total Benefit and is 3 times the amount of your Initial Benefit. This means you can receive multiple Initial Benefit and Recurrence Benefit payments until you reach the maximum of 300% or \$45,000 or \$90,000.

Eligible Individual	Initial Benefit	Requirements
Full Benefit Cancer	100% of Initial Benefit	50% of Initial Benefit
Partial Benefit Cancer	25% of Initial Benefit	12.5% of Initial Benefit
Heart Attack	100% of Initial Benefit	50% of Initial Benefit
Stroke	100% of Initial Benefit	50% of Initial Benefit
Coronary Artery Bypass Graft	100% Initial Benefit	50% of Initial Benefit
Kidney Failure	100% of Initial Benefit	Not Applicable
Alzheimer's Disease	100% of Initial Benefit	Not Applicable
Major Organ Transplant Benefit	100% of Initial Benefit	Not Applicable
22 Listed Conditions	25% of Initial Benefit	Not Applicable

### 22 Listed Conditions

MetLife Critical Illness Insurance will pay 25% of the Initial Benefit Amount for each of the 22 Listed Conditions until the Total Benefit Amount is reached. A Covered Person may only receive one payment for each Listed Condition in his/her lifetime. For a complete list of conditions, please see your plan documents.

# Critical Illness Plan

## MetLife

### Health Screening Benefit

After your coverage has been in effect for 30 days, MetLife will provide an annual benefit of \$50 per calendar year for taking one of the eligible screening/prevention measures. MetLife will pay only one health screening benefit per covered person per calendar year. For a complete list of screenings, please see your plan documents.

#### Monthly Premium - \$10,000 of coverage - Non-Tobacco (10 month premiums)

Issue Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
< 30	\$3.40	\$6.20	\$6.50	\$9.30
30 - 39	\$5.20	\$9.10	\$8.30	\$12.20
40 - 49	\$10.20	\$17.30	\$13.30	\$20.50
50 - 59	\$19.50	\$33.40	\$22.60	\$36.50
60 - 69	\$39.30	\$68.00	\$42.40	\$71.10
70+	\$72.50	\$122.30	\$75.60	\$125.40

#### Monthly Premium - \$10,000 of coverage - Tobacco (10 month premiums)

Issue Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
< 30	\$4.30	\$7.50	\$7.40	\$10.60
30 - 39	\$7.40	\$12.60	\$10.60	\$15.70
40 - 49	\$16.30	\$27.00	\$19.30	\$30.10
50 - 59	\$32.80	\$55.60	\$35.90	\$58.70
60 - 69	\$67.90	\$117.20	\$71.00	\$120.40
70+	\$127.40	\$214.40	\$130.60	\$217.60

#### Monthly Premium - \$20,000 of coverage - Non-Tobacco (10 month premiums)

Issue Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
< 30	\$6.80	\$12.40	\$13.00	\$18.60
30 - 39	\$10.40	\$18.20	\$16.60	\$24.40
40 - 49	\$20.40	\$34.60	\$26.60	\$41.00
50 - 59	\$39.00	\$66.80	\$45.20	\$73.00
60 - 69	\$78.60	\$136.00	\$84.80	\$142.20
70+	\$145.00	\$244.60	\$151.20	\$250.80

#### Monthly Premium - \$20,000 of coverage - Tobacco (10 month premiums)

Issue Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
< 30	\$8.60	\$15.00	\$14.80	\$21.20
30 - 39	\$14.80	\$25.20	\$21.20	\$31.40
40 - 49	\$32.60	\$54.00	\$38.60	\$60.20
50 - 59	\$65.60	\$111.20	\$71.80	\$117.40
60 - 69	\$135.80	\$234.40	\$142.00	\$240.80
70+	\$254.80	\$428.80	\$261.20	\$435.20

# Hospital Indemnity Plan

## MetLife

### Group Hospital Indemnity Insurance

With MetLife, you'll have a comprehensive plan with provides payments in addition to any other insurance payments you may receive. Here are just some of the covered benefits/services when an accident or illness puts you in the hospital:

Benefit Type	MetLife Accident Insurance Pays You
<b>Hospital Coverage (accident)</b>	
<b>Admission</b> - must occur within 180 days after the accident	\$1,500 per accident (non-ICU) \$2,000 per accident (ICU)
<b>Confinement</b> - must occur within 180 days after the accident	\$150 per day up to 31 days (non-ICU) \$400 per day up to 31 days (ICU)
<b>Inpatient Rehab</b> - stay must occur immediately following hospital confinement and occur within 365 days of an accident	\$200 per day, up to 15 days per accident and 30 days per calendar year
<b>Hospital Coverage (sickness)</b>	
<b>Admission</b> - payable one time per calendar year	\$1,000 (non-ICU) \$2,000 (ICU)
<b>Confinement</b> - paid per sickness	\$200 per day up to 31 days (non-ICU) \$400 per day up to 31 days (ICU)
<b>Other Benefits</b>	
<b>Health Screening (wellness) Benefit</b> - provided if the covered insured takes one of the covered screening/prevention tests	\$50 once per calendar year

### Hospital Plan Premiums (10 month premiums)

	Annual Premium	Monthly Premium
<b>Employee Only</b>	\$236.52	\$23.65
<b>Employee &amp; Spouse</b>	\$455.88	\$45.59
<b>Employee &amp; Child(ren)</b>	\$370.44	\$37.04
<b>Family</b>	\$620.40	\$62.04



# Employee Assistance Program

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Blomquist Hale

# Employee Assistance Program

## Blomquist Hale

### When life gets too challenging, we can help

The Blomquist Hale Employee Assistance Program provides direct, **face-to-face** guidance to address virtually any stressful life situation problem. Not to mention there is absolutely **no cost** to you. Meeting with our team is simple. Call to schedule an appointment today at **800-926-9619**

### We can help with

- Marital & Family Counseling
- Stress, Anxiety or Depression
- Personal & Emotional Challenges
- Grief or Loss
- Financial or Legal Problems
- Substance Abuse or Addictions
- Senior Care Planning

### Orem Branch

891 W. Center Street  
Orem, UT 84057  
801-225-9222

### You can count on

- |                               |                        |
|-------------------------------|------------------------|
| ✓ 24/7 Crisis Service         | ✓ Convenient Locations |
| ✓ 100% Confidential           | ✓ Extended Hours       |
| ✓ Professional, Friendly Team | ✓ No Co-Pay Required   |

Call us today or visit us at [www.blomquisthale.com](http://www.blomquisthale.com)





# **Wellness**

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Nebo School District

# SelectHealth Healthy Living

## How to participate in Healthy Living for SelectHealth Share

SelectHealth Share seeks to achieve better health, better care, and lower costs by encouraging healthy lifestyles while providing quality healthcare. As a SelectHealth Share member, use this information to learn how to complete your requirements and join the journey to better health.

**Employees who successfully complete the below requirements will be eligible for a reward.**

- 1. Attend your Workplace Health Education and Screening Event.** Make sure to check out the informative health and wellness displays located in your facility and participate in a biometric screening and personalized health coaching. If preferred, you can be screened by your personal physician as an alternative to your workplace event.
- 2. Create a My Health Account.** *My Health* is a secure site where you can review your medical claims, see lab results, and more. *My Health* is also your gateway to **Healthy Living**. When registering for *My Health* and participating in the **Healthy Living** program, you'll need to use an up-to-date web browser such as Google, Chrome, Microsoft, Edge, or Internet Explorer (11 or above). If you have trouble creating a *My Health* account, please call Online Services at 800-442-5502 weekdays, from 7:00 a.m. to 8:00 p.m. and Saturdays, from 7:00 a.m. to 3:00 p.m.
- 3. Select your Primary Care Physician.** Log in to your *My Health* account. Choose “**Select Primary Provider**” from your Member Checklist. Then scroll down and click on “**Select New Primary Care Provider**” on the lower left hand corner of the page. Using the “**Find a Doctor**” tool, select “**+Add as Primary Care Provider (PCP)**” below the provider of your choice.
- 4. Create your Health Living Virgin Pulse account and Complete the Health Check.** The Health Check is an online assessment that gives you a Health Score based on everyday things like nutrition, exercise, sleep, and your health history. To get started, click on the Health Assessment icon from your Member Checklist on selecthealth.org to get to Virgin Pulse. The Health Check can also be found under the Program section of the Virgin Pulse tool.
- 5. Complete one or more Digital Coaching Journeys.** Digital Coaching programs, known as Journeys, can help you create new healthy habits or keep the ones you have. Choose the Journey that's right for you and check in daily to complete. Choose Digital Coaching from your Member Checklist to get to the Virgin Pulse home page. On the app, Journeys can be found under Menu or Programs.
- 6. Participate in two or more Activity Campaigns.** There are three different types of challenges available in Virgin Pulse that you can choose from to earn your two Activity Campaigns. You can choose from any combination of Company Team Challenges, 7,000 Steps Challenges or four Healthy Habit Challenges.

# SelectHealth Healthy Living

## Company Team Challenges

In these four week, virtual destination challenges, you'll join a team and compete against others to achieve a collective goal. Participants are encouraged to form teams of up to 10 members-but you may also register and participate as an individual. As a team accumulates steps, they take a virtual journey and unlock destinations that include a map, leaderboard, and online support. Track your steps (or step equivalents) in Virgin Pulse for the duration of the challenge. Activity tracking may be done manually on the Virgin Pulse website or smartphone app. You may also automate your activity tracking by using a wearable device (e.g., Fitbit), or a compatible smartphone app if you sync it to the Virgin Pulse platform. To receive credit for completion, you'll need to track your physical activity each week during the challenge.

## 7,000 Steps Challenges

Get at least 7,000 steps per day\* for at least 20 days in a calendar month to earn one activity requirement. For non-stepping activity (i.e. swimming,) the "add a workout" tool can be used to convert the activities to steps.

## Healthy Habits Challenge

These one-week challenges are offered once a month throughout the year. They can help you create a new healthy habit! To participate, you'll track daily activities in one of nine wellness areas, such as being more active, choosing healthy foods, reducing stress, building relationships, and managing finances. To "complete" the Healthy Habit Challenge, you must report successfully performing the target behavior at least five of seven days on the Virgin Pulse website or app. Completing four Healthy Habit Challenges equals one Activity Campaign.

\*If you have a medical condition or injury that limits your mobility, you could choose a Company Team Challenge with no steps requirement or complete for Individual Healthy Habit Challenges.

**Note:** In the event that you participate in a Company Team Challenge and achieve 7,000 steps for 20 days in the same month, only one of the activities will be counted.

**7. Complete Prediabetes education, if Applicable.** SelectHealth offers many helpful resources for those at risk for diabetes. Some options include meeting with a dietician, taking a Prediabetes 101 class, and participating in The Weight to Health Program. You can earn incentives each year from SelectHealth by participating. Call 800-442-5260 for details.

## SelectHealth Healthy Living

**8. Participate in Care Management if Applicable.** SelectHealth subscribers and covered spouses are eligible for financial incentives when you take steps to improve your health. This program is available to members with these ongoing health conditions: asthma, diabetes, chronic obstructive pulmonary disease (COPD), and heart failure. You can earn incentives each year from SelectHealth by participating.

**9. Get your Preventive Care.** Regular preventive care can help you stay healthy and identify health problems early - when they are easier to treat and cure. It means taking small actions now, when you may not have an illness or symptoms. The type of preventive care and screening you should receive is based on your age, gender, lifestyle and risk factors.

Important age and gender based screenings include: Colon cancer (men and women starting at age 50), breast cancer (women starting at age 40), and cervical (women starting at age 21). Consult your primary care physician for details on the frequency of the screenings and what other preventive care/screenings that may be recommended for you. SelectHealth Share covers preventive care services at no additional cost to you. However, if a condition is found during a preventive service that needs further testing or treatment, regular copays, coinsurance, and deductibles may apply.

### **What if I have a Medical Condition?**

Healthy Living is designed to help you live the healthiest life possible. If you have a medical condition that limits your physical ability, you may be able to earn your wellness incentive another way. Contact your human resources department for more information.

### **Who will see my Personal Information?**

Your information, including personal health information will be provided to and kept confidential by SelectHealth. We will only disclose your personal health information to third parties as permitted or required by law. Your screening data will be loaded into your secure Healthy Living user profiles and used to provide you with personal feedback. Your name may be shared with your employer for incentive determination purposes.

### **Questions?**

If you have questions, call Member Services at **800-538-5038** weekdays, from 7:00 a.m. to 8:00 p.m., and Saturdays, from 9:00 a.m. to 2:00 p.m.



# Premiums

# Premiums

September 1, 2020 - August 31, 2021

Medical

SelectHealth Share

\$2,700/\$5,400 Base Plan		
Status	Premium	Nebo will <u>MATCH</u> into HSA for 2020-2021 (Sept. - June)
Single	\$25 monthly over 10 months (Sept. - June)	\$675*
Two-Party	\$85 monthly over 10 months (Sept. - June)	\$1,350*
Family	\$135 monthly over 10 months (Sept. - June)	\$1,350*
*Requires an employee contribution in order to receive <u>MATCH</u> . NSD will match up to this amount		
\$1,600/\$3,200 Option Plan		
Status	Premium	Nebo will <u>MATCH</u> into HSA for 2020-2021 (Sept. - June)
Single	\$34 monthly over 10 months (Sept. - June)	\$400*
Two-Party	\$107 monthly over 10 months (Sept. - June)	\$800*
Family	\$187 monthly over 10 months (Sept. - June)	\$800*
*Requires an employee contribution in order to receive <u>MATCH</u> . NSD will match up to this amount		
\$2,700/\$5,400 Dual Base Plan (Both spouses working for the District)		
Status	Premium	Nebo will <u>MATCH</u> into HSA for 2020-2021 (Sept. - June)
Two-Party Dual	\$85 monthly over 10 months (Sept. - June)	\$1,350* + non-match contribution of \$1,350 (over 10 months)
Family Dual	\$135 monthly over 10 months (Sept. - June)	\$1,350* + non-match contribution of \$1,350 (over 10 months)
*Requires an employee contribution in order to receive <u>MATCH</u> . NSD will match up to this amount		
\$3,200 Dual Base Plan (Both spouses working for the District)		
Status	Premium	Nebo will <u>MATCH</u> into HSA for 2020-2021 (Sept. - June)
Two-Party Dual	\$94 monthly over 10 months (Sept. - June)	\$800* + non-match contribution of \$800 (over 10 months)
Family Dual	\$191 monthly over 10 months (Sept. - June)	\$800* + non-match contribution of \$800 (over 10 months)
*Requires an employee contribution in order to receive <u>MATCH</u> . NSD will match up to this amount		

Employees working under 40 hours a week will pay a pro-rated premium.

# Premiums

September 1, 2020 - August 31, 2021

## Dental

EMI Health

Dental Plan Options - 10 Month Rates			
Status	Advantage Plus (100)	Advantage Co-Pay	Choice PPO
Single	\$17.48	\$29.50	\$39.02
Two-Party	\$35.45	\$68.66	\$89.45
Family	\$58.60	\$107.00	\$154.80

## Vision

VSP & EyeMed

Vision Plan Options - 10 Month Rates		
Status	VSP	EyeMed
Single	\$6.65	\$13.13
Two-Party	\$13.32	\$24.74
Family	\$21.43	\$33.78

## Supplemental Insurance

MetLife

Supplemental Insurance is often used to help bridge the gap until money can be saved into an HSA. The plan pays cash to policy holders when qualified expenses occur. Please see the MetLife link on the Benefits page for detailed information.

Accident Plan	
Non-Occupational Plan	Premium (10 months)
Single	\$12.07
Employee & Spouse	\$24.38
Employee + Child(ren)	\$24.29
Family	\$30.53

Hospital Indemnity	
HSA Plan 1	Premium (10 months)
Single	\$23.65
Employee & Spouse	\$45.59
Employee + Child(ren)	\$37.04
Family	\$62.04

## Critical Illness

Rates for the Critical Illness coverage are determined by age and other factors. Please see the MetLife booklet on the Employee Home Page (under Benefits 2020-21) for the detailed chart.



This guide was prepared for the employees of Nebo School District by GBS Benefits, Inc.