

## 2018/2019 SFISD Employee Benefit Open Enrollment Event

The Open Enrollment Event for the 2018/2019 school year will be held in the FBI Annex and online beginning Monday, July 30 and will continue through Friday, August 10. Enrollers will be present Monday through Thursday during **the first week only** to assist you with your enrollment choices or you can go to

<https://plansource.com/santa-fe/>

to make your benefit selections. Remember to utilize the chat feature or call the Benefit Center at 877-297-1417 with your questions.

**Come join the fun on Kick-Off Day, Monday, July 30. We will once again host a Vendor Fair including our SFISD benefits providers, 403(b) vendors with supplemental retirement options and information, tables with items for purchase and more. A door prize from every vendor will be awarded!**

### Benefits offered this year include:

Health coverage with TRS Active Care (See 18/19 new rates below)

Flexible Spending Account - OR -

Health Savings Account with Gulf Coast Educators FCU

Dental (**new rates**) and Vision offered by Humana

Disability and our new Hospital Indemnity Plan offered by Aetna

Term Life, Accident, Critical Illness, and Legal Protection by Met Life

RediMD Kiosks with (6) locations throughout the district at no monthly cost to employees

LifeWorks Employee Assistance Program offering counseling at no cost to our employees and their dependents.

	Monthly Premiums	Per Paycheck Premiums
<b>MEDICAL</b>	<b>AETNA</b>	
<b>TRS ACTIVECARE1-HD</b>		
EMPLOYEE ONLY	367.00	183.50
EMPLOYEE & SPOUSE	1,035.00	517.50
EMPLOYEE & CHILDREN	701.00	350.50
EMPLOYEE & FAMILY	1,374.00	687.00
<b>TRS ACTIVECARE SELECT</b>		
EMPLOYEE ONLY	540.00	270.00
EMPLOYEE & SPOUSE	1,327.00	663.50
EMPLOYEE & CHILDREN	876.00	438.00
EMPLOYEE & FAMILY	1,668.00	834.00
<b>TRS ACTIVECARE 2</b>		
EMPLOYEE ONLY	782.00	391.00
EMPLOYEE & SPOUSE	1,855.00	927.50
EMPLOYEE & CHILDREN	1,163.00	581.50
EMPLOYEE & FAMILY	2,194.00	1,097.00
<b>DENTAL</b>	<b>HUMANA</b>	
<b>PPO</b>		
Employee Only	33.60	16.80
Employee & Spouse	74.84	37.42
Employee & Children	73.57	36.79
Employee & Family	117.17	58.59
<b>DHMO</b>		
Employee Only	9.55	4.78
Employee & Spouse	19.10	9.55
Employee & Children	21.49	10.75
Employee & Family	31.98	15.99

<b>VISION</b>	<b>HUMANA</b>	
<b>PLAN 1</b>		
Employee Only	10.94	5.47
Employee & Spouse	21.65	10.83
Employee & Children	21.22	10.61
Employee & Family	32.25	16.13
<b>PLAN 2</b>		
Employee Only	4.59	2.30
Employee & Spouse	9.09	4.55
Employee & Children	8.91	4.46
Employee & Family	13.53	6.77

<b>DISABILITY</b>	<b>AETNA</b>
<b>BASED ON AGE, SALARY</b>	

<b>TERM LIFE</b>	<b>METLIFE</b>
<b>BASED ON AGE, SALARY</b>	

<b>CRITICAL ILLNESS</b>	<b>METLIFE</b>	
<b>NON TOBACCO-\$15,000.00</b>		
25 YEARS OLD	7.50	3.75
35 YEARS OLD	14.55	7.28
45 YEARS OLD	30.35	15.18
55 YEARS OLD	52.05	26.03
65 YEARS OLD	72.15	36.08
<b>NON TOBACCO-\$30,000.00</b>		
25 YEARS OLD	15.00	7.50
35 YEARS OLD	29.10	14.55
45 YEARS OLD	60.90	30.45
55 YEARS OLD	104.10	52.05
65 YEARS OLD	144.30	72.15
<b>*PREMIUMS INCREASE FOR TOBACCO USERS</b>		

<b>ACCIDENT</b>	<b>METLIFE</b>	
<b>LOW PLAN</b>		
Employee Only	7.64	3.82
Employee & Spouse	14.6	7.30
Employee & Children	11.47	5.74
Employee & Family	18.81	9.41
<b>HIGH PLAN</b>		
Employee Only	14.54	7.27
Employee & Spouse	27.73	13.87
Employee & Children	21.8	10.90
Employee & Family	57.89	28.95

<b>LEGAL SERVICES</b>	<b>METLIFE</b>	
Employee & Family	22.50	11.25

<b>HOSPITAL INDEMNITY **NEW**</b>	<b>AETNA</b>	
Employee Only	17.18	8.59
Employee & Spouse	34.83	17.42
Employee & Children	27.54	13.77
Employee & Family	43.53	21.77

<b>DISTRICT SPONSORED PROGRAMS</b>		
<b>REDIMD</b>		
<b>Annual District Contributions</b>	\$20 employee copay \$30 dependent copay	
<b>LIFEWORKS **NEW**</b>	Up to (8) counseling sessions for employees and their dependents	
<b>District Sponsored / No Cost to Employee</b>		