



2023

Benefit Summary



Table of Contents

Benefits Overview3

Medical Benefits4

Health Savings Account.....6

Dental Benefits7

Vision Benefits8

Life and Accidental Death & Dismemberment Insurance9

Supplemental Life and AD&D Insurance9

Voluntary Benefits.....9

Flexible Spending Account and Dependent Care.....10

Employee Assistance Program.....10

Contact Information11

Employee/Board Monthly Premiums.....12

This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request.

The intent of this document is to provide you with general information regarding the status of, and/or potential concerns related to, your current employee benefits environment. It does not necessarily fully address all of your specific issues. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by your general counsel or an attorney who specializes in this practice area.

Benefits Overview

Worthington City Schools is proud to offer a comprehensive benefits package to eligible employees. The complete benefits package is briefly summarized in this booklet. Plan summary booklets, which are available online, provide more detailed information about each of these programs, as well as dependent eligibility.

You share the costs of some benefits (medical, dental and vision), and Worthington City Schools provides other benefits at no cost to you (life, accidental death & dismemberment and an employee assistance program). In addition, there are supplemental benefits with reasonable group rates that you can purchase through payroll deductions.

Benefits Offered

- Medical
- Dental
- Vision
- Life Insurance and Accidental Death & Dismemberment (AD&D) Insurance
- Supplemental Life and AD&D Insurance
- Flexible Spending Account (FSA)
- Health Savings Account (HSA)
- Employee Assistance Program
- Voluntary benefits through American Fidelity

Eligibility

You and your dependents are eligible for Worthington City Schools benefits on the first of the month coinciding with or following your date of hire.

You can access the Benefit Resource website for all benefit information, certificates of coverage, and required notices at www.worthington.k12.oh.us. Proceed to Leadership, Treasurer, click on Benefits.

Elections made at the time of hire or during open enrollment will remain in place until the end of the calendar year of the benefit effective date. You may only change benefit elections during the annual open enrollment period unless you or your family members experience a qualifying event. If you experience a qualifying event, you have 30 days from the date of the event to make a change and must contact the District's Benefit Administration office to do so. Qualifying events include marriage, divorce, child birth, adoption, loss of other coverage and change in employment status.



Medical Benefits

Administered by Anthem

Comprehensive and preventive healthcare coverage is important in protecting you and your family from the financial risks of unexpected illness and injury. A little prevention usually goes a long way—especially in healthcare. Routine exams and regular preventive care provide an inexpensive review of your health. Small problems can potentially develop into large expenses if left unmanaged. By identifying health conditions early, they can often be managed and treated at little cost.

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

Worthington City Schools offers you a High Deductible Healthcare PPO medical plan. You may select where you receive your medical services. If you use in-network providers, your out-of-pocket costs will be less.

	HDHP	
	In-Network	Out-of-Network
Lifetime Benefit Maximum	Unlimited	
Annual Deductible	\$1,750 single / \$3,500 family	\$3,500 single / \$7,000 family
Coinsurance	100%	70%
Out of Pocket Maximum (Includes the ER copay OOP of \$750 single / \$1,500 family)	\$2,500 single / \$5,000 family	Unlimited single / Unlimited family
Benefit Period	Calendar Year	
Physician/Office Services		
Office Visits — PCP/Specialist (Illness/Injury)	100% after deductible	70% after deductible
Preventative Care (routine exams, x-rays/tests, immunizations, well baby care and mammograms)	100%, not subject to deductible	70% after deductible
Prescription Drugs		
Retail (31-day supply)	100% after deductible	70% after deductible
Mail Order (90-day supply)	100% after deductible	70% after deductible
Hospital Services		
Inpatient Facility	100% after deductible	70% after deductible
Outpatient Services	100% after deductible	70% after deductible
Emergency Room *	After the deductible is met, \$250 copay per visit (ER copay waived if admitted)	
Urgent Care Services	100% after deductible	70% after deductible
Ambulance Service	100% after deductible	100% after deductible

* After deductible is met, all Emergency Room visits are subject to a \$250 copay per visit up to the Out of Pocket Maximum. If admitted, the copay will be waived.

Medical Benefits

Administered by Anthem

	HDHP	
	In-Network	Out-of-Network
Mental Health Services		
Inpatient Services	100% after deductible	70% after deductible
Outpatient Services	100% after deductible	70% after deductible
Other Services		
Maternity Services	100% after deductible	70% after deductible
All other maternity hospital/ physician services	100% after deductible	70% after deductible
Home Healthcare (60 visits per benefit period)	100% after deductible	70% after deductible
Physical and Occupational Services (20 visits per benefit period)	100% after deductible	70% after deductible
Chiropractic Therapy (50 visits per benefit period)	100% after deductible	70% after deductible
Speech Therapy (40 visit per benefit period)	100% after deductible	70% after deductible
Cardiac Rehabilitation Facility (36 visits per benefit period — Professional — Unlimited)	100% after deductible	70% after deductible
Respiratory/Pulmonary Rehabilitation Facility (20 visits per benefit period — Professional — Unlimited)	100% after deductible	70% after deductible
Other Services (Artificial limbs and other prosthetic devices; durable medical equipment, leg, arm and neck braces; surgical dressings; casts and splints)	100% after deductible	70% after deductible
Vision Services (Routine vision exam — includes refraction) One per benefit period	100%, not subject to deductible	100%, not subject to deductible

*Dependent children may be covered **up to age 26** regardless of financial dependence, student status, residence, or marital status. Dependents are automatically dropped from health insurance coverage at the end of the month in which the dependent turns 26.



Health Savings Account (HSA)

Administered by CME Federal Credit Union

An HSA is a medical savings account owned by an employee and is designed to help save for future qualified medical expenses (QME), as well as retiree health expenses. Funds are contributed to an HSA on a pretax basis, and any unused funds rollover from year to year. Only HSA eligible employees may contribute to an HSA. An individual is HSA eligible if he or she:

- Is covered by an HSA-qualified High Deductible Health Plan (HDHP)
- Has no other disqualifying coverage (HRA, FSA, etc.)
- Is not enrolled in Medicare
- Cannot be claimed as a tax dependent of another person; and
- Is not covered by any non-HDHP coverage like spousal coverage, Tricare, Medicaid, etc.

Any contribution by the employee to his/her HSA up to the maximum limits provided by law may, at the member's discretion, be made either by payroll deduction or in a lump sum payment. The HSA shall be maintained by the employee for his/her exclusive benefit and that of his/her dependents. Distribution of funds from the HSA may be made at any time at the discretion of the employee. The employee is responsible for substantiating the distribution for qualified medical expenses (QME).

2023 Employer HSA Contribution

Worthington City Schools contributes a flat dollar amount to each participating member's account in January. For 2023, the employer contribution for eligible **Classified** employees is \$250 for those enrolled in the single plan and \$500 for those enrolled in the family plan. An additional \$250 or \$500 respectively, may be earned through wellness initiatives completed in the prior calendar year. The employer contribution for eligible **Certified** employees and **Administrators** is \$200 for those enrolled in the single plan and \$400 for those enrolled in the family plan. An additional \$200 or \$400 respectively, may be earned through wellness initiatives completed in the prior calendar year. The earned portion of the Board HSA contribution will be deposited in February.

If you are joining the district's medical plan mid-year due to a mid-year hire date or qualifying life event, please review your negotiated union agreement for more details on the employer contribution to your HSA.

2023 HSA Contribution Limits

Single Plan **\$3,850**

Family Plan **\$7,750**

Catch-Up Contributions (age 55 or older) **\$1,000**

Employees should note that the total of the Board contribution plus all personal contributions to your HSA cannot exceed the contribution limit. If an individual over contributes to the HSA, he or she will be subject to tax penalty on the excessive funds. Any excessive amounts must also be reported on the individual's tax return as regular income. These can be corrected prior to April 15 of the following year by contacting CME Federal Credit Union.

Increased Tax Penalty for Non-Eligible Expenses

If HSA funds are used for ineligible medical expenses, such as the purchase of a new television, those amounts are taxed as normal income on the individual's tax return. If the individual is under age 65 at the time of the distribution, he or she is also subject to a **substantial** "early withdrawal" tax penalty.

Definition of Dependent for HSA is Different than Group Health Plan

An HSA owner can use the funds to cover qualified medical expenses of the account owner, his or her legal spouse, and tax dependents. Under Health Care Reform, an employee can cover his or her adult children up to age 26 on their medical plan regardless of student or marital status, financial dependence or where they reside. However, medical expenses incurred by the adult child will **NOT** be a qualified expense under the HSA unless the employee's adult child is a tax dependent. If the adult child is not a tax dependent, any HSA dollars used must be declared as regular income and will be subject to a penalty (~20%).

For a list of Qualified Medical Expenses and additional HSA information, please see IRS Publication 969 Health Savings Accounts and Other Tax-Favored Health Plans, and IRS Publication 502 Medical and Dental Expenses at www.irs.gov.

Worthington City Schools partners with CME Federal Credit Union to administer their Health Savings Account.

1. To establish an HSA account: Visit www.cmefcu.org and click on "Open an Account" to begin the application process. Step-by-step instructions are available on the district benefits webpage. You will receive an email response back from CME within 1-2 days.
2. Respond back to CME providing an electronic signature on required documents via email.
3. If you have any questions about this process, please contact: the **CME Member Service Center @ 1.888.224.3108**.

Dental Benefits

Administered by Delta Dental of Ohio

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

Services	In-Network and Out-of-Network
Annual Deductible	\$50 per person; \$150 family limit
Annual Benefit Maximum	\$1,500
Type A — Preventive Dental Services (cleanings, exams, x-rays)	100%
Type B — Basic Dental Services (fillings, root canal therapy, oral surgery ¹ , periodontics, TMJ ²)	85%
Type C — Major Dental Services (bridges, dentures, implants)	50%
Type D — Orthodontia Services (covered dependent to end of month age 19)	50% to \$1,600 lifetime maximum
Type E — Impacted Teeth	100% to \$2,000 lifetime maximum

Dependent children may remain on a parent's plan until the end of the month in which the child turns 24 if the child is a full-time student at an accredited school, college or university, is unmarried and not employed on a full-time basis. If a dependent child does not meet those eligibility requirements, then coverage ends at the end of the month in which the child turns 19.

¹ Surgical extractions are covered at 100% and capped at \$2,000 per person per lifetime. Simple extractions and other dental surgery is covered at 85%.

² TMJ is capped at \$1,000 per person per lifetime.



Vision Benefits

Administered by EyeMed

Regular eye examinations can determine your need for corrective eyewear and also may detect general health problems in their earliest stages. Vision health should be included in your annual wellness routine.

Service	In-Network	Out-of-Network
Eye Exam — once every 12 months	\$20 copay	Reimbursement up to \$40
Frames — once every 24 months	\$0 copay; \$150 allowance, 20% off balance over \$150	Reimbursement up to \$105
Lenses or contacts— once every 12 months		
Single Vision Lenses	\$20 copay	Reimbursement up to \$30
Lined Bifocal Lenses	\$20 copay	Reimbursement up to \$50
Lined Trifocal Lenses	\$20 copay	Reimbursement up to \$70
Lenticular Lenses	\$20 copay	Reimbursement up to \$70
Contact Lenses — Fit and follow-up	\$40 copay	N/A
Conventional Contact Lenses	\$0 copay, \$150 allowance, 15% off balance over \$150	Up to \$150
Disposable Contact Lenses	\$0 copay, \$150 allowance,	Up to \$150

Dependent children may remain on a parent’s plan until the end of the month in which the child turns 24 if the child is a full-time student at an accredited school, college or university, is unmarried and not employed on a full-time basis. If a dependent child does not meet those eligibility requirements, then coverage ends at the end of the month in which the child turns 19.

When searching for an in-network provider, please search by the **Insight** network. Website: www.eyemed.com

For **LASIK** providers, please call: 1-800-988-4221

Additional Savings For Members

Lasik

Lasik or PRK benefits from US Laser Network offers 15% off retail price or 5% off promotional price.

Hearing Care

Amplifon Hearing Health Care Network offers a discount on hearing aids at certain locations, free batteries for 2 years and 3-year warranty. (Call Amplifon for additional information)

To reach **Amplifon**, please call (877) 203-0675



Life and Accidental Death & Dismemberment Insurance

Insured by Metropolitan Life Insurance Company

Life insurance provides financial security for the people who depend on you. Your beneficiaries will receive a lump sum payment if you become deceased while employed by Worthington City Schools. Accidental Death and Dismemberment (AD&D) insurance provides payment to you or your beneficiaries if you lose a limb or perish in an accident. This coverage is in addition to your basic life insurance. Your AD&D amount is equal to your basic term life amount.

Features

- ◇ **Accelerated benefit option**
- ◇ **Conversion option**
- ◇ **Waiver of premium**
- ◇ **Portability option**

Life Insurance Amounts Covered:

- Administrators - \$100,000
- Certified Employees - \$70,000
- Classified Employees (Full-Time) - \$50,000
- Classified (Part-Time) - \$20,000



Supplemental Life and AD&D Insurance

Insured by Metropolitan Life Insurance Company

You may purchase optional term life insurance in addition to the company-provided coverage. This coverage complements your basic life insurance benefit, and helps protect you 24 hours a day, 365 days a year. Your AD&D amount is equal to your supplemental term life amount.

Features

- ◇ **Accelerated Benefit option**
- ◇ **Conversion option**
- ◇ **Waiver of premium**
- ◇ **Portability option**
- ◇ **Will preparation**
- ◇ **Estate resolution**

Voluntary Benefits

Insured by American Fidelity

Voluntary Benefits such as **Accident, Disability, Cancer, Hospital Indemnity, Critical Illness and Life** insurance are offered through American Fidelity. These options allow you to strengthen your overall benefits package, and are designed to provide additional cash flow to assist with your out of pocket medical costs and bills. For more information, [visit www.afadvantage.com](http://www.afadvantage.com) or contact Mike Moore at American Fidelity at Mike.Moore@AmericanFidelity.com.

Flexible Spending Account (FSA) & Dependent Care Spending Account (DCA)

Administered by American Fidelity

Worthington City Schools offers three types of Flexible Spending Accounts. These accounts allow employees to set aside funds each pay period on a pretax basis and use them for qualified expenses covered by the specific type of FSA. **Unlike an HSA, Flexible Spending Accounts are a “Use it or lose it” account. Please take care in determining the amount of funds you elect to contribute to these types of accounts.** FSA’s can be elected during open enrollment and cannot be changed without a qualifying event once elected.

Flexible Spending Accounts available include:

- 1) Limited FSA - This **FSA** is for employees who also have an **HSA**. It can only be used to cover qualified dental and vision expenses. The total amount elected is available to be spent at the beginning of the plan year, but is collected through payroll each pay. If you retire or resign, any funds not yet collected will be withheld from one of your last two paychecks.
- 2) Full medical FSA - Only non-**HSA** participants and Medicare enrollees may participate in this type of FSA. You can use this type of FSA to pay for qualified medical, dental, vision and prescription drug expenses. The total amount elected is available to be spent at the beginning of the plan year, but is collected through payroll each pay. If you retire or resign, any funds not yet collected will be withheld from one of your last two paychecks.
- 3) Dependent Care Account (DCA) - This type of FSA allows employees to put aside funds pre-tax to help pay for dependent care expenses (such as daycare). You pay for eligible expenses when incurred, and then submit a reimbursement claim form or file a claim online to be repaid from the DCA. It should be noted that for DCA, you cannot be reimbursed for more than you have currently contributed to the account.

Claim reimbursements for any of these FSA plans can be filed online at afadvantage.com or through the American Fidelity Mobile App. A paper claim form for FSA or DCA are also available on the district benefits web page.

Like the **HSA**, the IRS sets an annual maximum contribution limit for FSA’s as follows:

2023 FSA Contribution Limits:

Limited purpose or full medical FSA = \$2,850

Dependent Care Account = \$5,000 per family

Note: If you are enrolled in Medicare, by law you are not allowed to contribute to an **HSA**.

Employee Assistance Program

Insured by Metropolitan Life Insurance Company/LifeWorks US Inc.

Problems are just a part of everyday life. In addition to the benefits provided under your MetLife Group Insurance coverage, you and your household members have access to an Employee Assistance Program (EAP). This program provides you with services to help with the everyday challenges of life that may affect your health, family life and desire to excel at work. The EAP may be used to address a broad range of issues including: marriage, relationship and family problems, problems at work, legal and financial issues, stress and anxiety, alcohol and drug dependency, identity theft, and health and wellness concerns.

Log on to metlifeeap.lifeworks.com. User name: metlifeeap and Password: eap or call toll free at 888.319.7819.

Contact Information

If you have specific questions about a benefit plan, please contact the Administrator listed below, your Benefits Office, or Gallagher Benefit Services, Inc.

Benefit	Administrator	Phone	Website/Email
District Benefit Administrator	Beth Hohenstein	614.450.6163	bhohenstein@wsccloud.org
Medical	Anthem	844.995.1752	www.anthem.com
HSA Administrator	CME Federal Credit Union	614.224.8890 888.224.3108	www.cmefcu.org
Dental	Delta Dental	800.524.0149	www.DeltaDentalOH.com
Vision	EyeMed	866.804.0982	www.eyemed.com
EAP	MetLife/LifeWorks	888.319.7819	www.metlifeeap.lifeworks.com
District Insurance Broker	Gallagher Benefit Services, Inc.	614.761.2901 800.435.1552	www.ajg.com/dublin
Voluntary Benefits	American Fidelity	800.325.0654	www.afadvantage.com



Worthington City Schools
Certified Staff & Administration
2023 Health Insurance Premiums Per Month

HEALTH INSURANCE PREMIUMS						
FTE	Single			Family		
	Employee	Board	Total	Employee	Board	Total
Full Time	\$ 112.94	\$ 693.77	\$ 806.71	\$ 325.64	\$ 1,845.30	\$ 2,170.94
.90 FTE	\$ 182.32	\$ 624.39	\$ 806.71	\$ 510.18	\$ 1,660.76	\$ 2,170.94
.80 FTE	\$ 251.70	\$ 555.01	\$ 806.71	\$ 694.70	\$ 1,476.24	\$ 2,170.94
.70 FTE	\$ 321.08	\$ 485.63	\$ 806.71	\$ 879.24	\$ 1,291.70	\$ 2,170.94
.60 FTE	\$ 390.46	\$ 416.25	\$ 806.71	\$ 1,063.76	\$ 1,107.18	\$ 2,170.94
.50 FTE	\$ 459.82	\$ 346.89	\$ 806.71	\$ 1,248.30	\$ 922.64	\$ 2,170.94
.40 FTE	\$ 529.20	\$ 277.51	\$ 806.71	\$ 1,432.82	\$ 738.12	\$ 2,170.94
.30 FTE	\$ 598.58	\$ 208.13	\$ 806.71	\$ 1,617.36	\$ 553.58	\$ 2,170.94
.20 FTE	\$ 667.96	\$ 138.75	\$ 806.71	\$ 1,801.88	\$ 369.06	\$ 2,170.94
.10 FTE	\$ 737.34	\$ 69.37	\$ 806.71	\$ 1,986.42	\$ 184.52	\$ 2,170.94

Worthington City Schools
Certified Staff
2023 Dental Insurance Premiums Per Month

DENTAL INSURANCE PREMIUMS						
FTE	Single			Family		
	Employee	Board	Total	Employee	Board	Total
Full Time	\$ 7.46	\$ 92.05	\$ 99.51	\$ 7.46	\$ 92.05	\$ 99.51
.90 FTE	\$ 16.67	\$ 82.84	\$ 99.51	\$ 16.67	\$ 82.84	\$ 99.51
.80 FTE	\$ 25.87	\$ 73.64	\$ 99.51	\$ 25.87	\$ 73.64	\$ 99.51
.70 FTE	\$ 35.08	\$ 64.43	\$ 99.51	\$ 35.08	\$ 64.43	\$ 99.51
.60 FTE	\$ 44.28	\$ 55.23	\$ 99.51	\$ 44.28	\$ 55.23	\$ 99.51
.50 FTE	\$ 53.49	\$ 46.02	\$ 99.51	\$ 53.49	\$ 46.02	\$ 99.51
.40 FTE	\$ 62.69	\$ 36.82	\$ 99.51	\$ 62.69	\$ 36.82	\$ 99.51
.30 FTE	\$ 71.90	\$ 27.61	\$ 99.51	\$ 71.90	\$ 27.61	\$ 99.51
.20 FTE	\$ 81.10	\$ 18.41	\$ 99.51	\$ 81.10	\$ 18.41	\$ 99.51
.10 FTE	\$ 90.31	\$ 9.20	\$ 99.51	\$ 90.31	\$ 9.20	\$ 99.51

2023 Vision Insurance for certified staff is provided 100% by the Board of Education.

Worthington City Schools**Classified Staff****2023 Health Insurance Premiums Per Month**

HEALTH INSURANCE PREMIUMS						
Hours per	Single			Family		
	Employee	Board	Total	Employee	Board	Total
Full Time	\$ 80.68	\$ 726.03	\$ 806.71	\$ 217.10	\$ 1,953.84	\$ 2,170.94
5 Hrs.	\$ 334.80	\$ 471.91	\$ 806.71	\$ 900.96	\$ 1,269.98	\$ 2,170.94
4 Hrs.	\$ 443.70	\$ 363.01	\$ 806.71	\$ 1,194.02	\$ 976.92	\$ 2,170.94
3 Hrs.	\$ 534.46	\$ 272.25	\$ 806.71	\$ 1,438.26	\$ 732.68	\$ 2,170.94
2 Hrs.	\$ 806.71	-	\$ 806.71	\$ 2,170.94	-	\$ 2,170.94
1 Hr.	\$ 806.71	-	\$ 806.71	\$ 2,170.94	-	\$ 2,170.94

Classified Staff**2023 Dental Insurance Premiums Per Month**

DENTAL INSURANCE PREMIUMS						
Hours per	Single			Family		
	Employee	Board	Total	Employee	Board	Total
Full Time	\$ 7.46	\$ 92.05	\$ 99.51	\$ 7.46	\$ 92.05	\$ 99.51
5 Hrs.	\$ 39.68	\$ 59.83	\$ 99.51	\$ 39.68	\$ 59.83	\$ 99.51
4 Hrs.	\$ 53.49	\$ 46.02	\$ 99.51	\$ 53.49	\$ 46.02	\$ 99.51
3 Hrs.	\$ 64.99	\$ 34.52	\$ 99.51	\$ 64.99	\$ 34.52	\$ 99.51
2 Hrs.	\$ 99.51	-	\$ 99.51	\$ 99.51	-	\$ 99.51
1 Hr.	\$ 99.51	-	\$ 99.51	\$ 99.51	-	\$ 99.51

Classified Staff**2023 Vision Insurance Premiums Per Month**

VISION INSURANCE PREMIUMS						
Hours per Day	Single			Family		
	Employee	Board	Total	Employee	Board	Total
Full Time	-	\$ 4.69	\$ 4.69	-	\$ 11.97	\$ 11.97
5 Hrs.	\$ 1.64	\$ 3.05	\$ 4.69	\$ 4.19	\$ 7.78	\$ 11.97
4 Hrs.	\$ 2.35	\$ 2.34	\$ 4.69	\$ 5.99	\$ 5.98	\$ 11.97
3 Hrs.	\$ 2.93	\$ 1.76	\$ 4.69	\$ 7.48	\$ 4.49	\$ 11.97
2 Hrs.	\$ 4.69	-	\$ 4.69	\$ 11.97	-	\$ 11.97
1 Hr.	\$ 4.69	-	\$ 4.69	\$ 11.97	-	\$ 11.97

Example: If you are a 5.5 hour employee, benefits premiums are based on 5 hours

NOTES:

