



Welcome to Your Benefits

Plan Year: July 2023 – June 2024






WELCOME TO YOUR BENEFITS

PICK THE BEST BENEFITS FOR YOU AND YOUR FAMILY.

The Juneau School District strives to provide you and your family with a comprehensive and valuable benefits package. We want to make sure you're getting the most out of your benefits—that's why we've put together this Benefit Guide.

Elections you now are effective through June 30, 2024. If you have questions about any of the benefits mentioned in this guide, please don't hesitate to reach out to HR or Natasha Peterson by phone: **(907) 586-5250 ext.4085** or by email: Natasha.Peterson@juneau.org

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WELCOME TO YOUR BENEFITS

ELIGIBILITY

Juneau School District Employees:

Effective on the date of hire when an employee is eligible to enroll in the plan, and chooses to “enroll” in the plan, if they satisfy the following:

- Become an active full-time employee, including a new seasonal employee, who regularly works a minimum of 37.5 hours per week
- Become an active permanent/probationary part-time employee, seasonal employee, or exempt employee working less than full time and who regularly works a minimum of 780 hours per year and a minimum of 15 hours per week, and agree to pay the portion of the premium, which will be pro-rated depending on the number of hours worked per pay period
- Become an Assembly Member



WELCOME TO YOUR BENEFITS

Ready to enroll? The first step is to review and verify all of your personal information, as well as any dependents, before making elections.

Once all your information is up to date, it's time to make your benefit elections. The decisions you make during enrollment can have a significant impact on your life and finances, so it is important to weigh your options carefully. **Remember, all employees are required to actively elect coverage.**

Qualifying Life Events

IRS rules place certain restrictions for when you can make changes outside of open enrollment. Once the new plan year begins, you are unable to make changes unless you experience a life-changing qualifying event. You'll need to fill out enrollment forms and provide supporting documentation within the allowable time frame (typically 30 days from the event).

Qualifying events include:

- Marriage, gain or loss of domestic partnership, divorce, or legal separation
- Birth or adoption of a child
- Death of a qualified dependent
- Change in employment status that impacts coverage or eligibility under another employer-sponsored plan



WELCOME TO YOUR BENEFITS

What do I need to do to enroll?

- Review this Benefit Guide to learn about all benefits available to you.

Where can I learn more about my benefit options?

- We partner with TheBenefitseXpert® (TBX) for a comprehensive online enrollment experience.
- Online resources to enhance your understanding of available benefits.
- **New!** We have an informational site for Life and Disability plans this year. You can access from TBX or directly at:

<https://www.newyorklife.com/group-benefit-solutions/juneau>

How do I enroll in benefits?

Register At > my.tbx360.com/Juneau

- You will be prompted to fill in your personal details to access your personalized account
- Click “Go Enroll”

User ID

Enter your Social Security Number or your employee ID. No dashes required.

Username: 123456789 (no dashes)

Personal ID Number(PIN)

Enter the last 4 digits of your Social Security Number and the last 2 digits of your birth year.
No dashes required.

Example: John Doe

Social Security Number: 123456789

Date of Birth: June 1st, 1980

PIN is 678980



WELCOME TO YOUR BENEFITS

MEDICAL / PRESCRIPTION DRUG INSURANCE

New this year is the High Deductible Health Plan (HDHP). This plan is a free plan that allows you to save on premiums compared to the Economy and Standard plan. It does come with a higher deductible which will have you pay a little more in the beginning before coinsurance will take effect.

To help with those early costs, this plan can also be paired with a Health Savings Account which allows you to set aside pre-tax dollars for medical expenses.. Unlike the other plans, unused funds will not expire each year.

BENEFITS	HDHP
	In-Network
Medical Deductible	\$2,000 Individual / \$4,000 Family
Medical Out-of-Pocket Maximum (includes medical deductible)	\$4,000 Individual / \$8,000 Family
Physician / Specialist Office Visit	20%, after deductible
Virtual care	Deductible does apply first Then general medical covered in full Other subject to outpatient cost
Hospitalization	20%, after deductible
Preventive Care	No charge
Emergency Room	20%, after deductible
Prescription Drug Deductible (per person)	Included in medical deductible
Prescription Drug Out-of-Pocket Maximum (per person)	Included in medical out-of-pocket maximum
Prescriptions (per 30-day supply)	
Generic	20% after deductible
Preferred Formulary	20%, after deductible
Preferred Specialty	20%, after deductible
Non-Preferred	20%, after deductible
Hearing	
Exam	Subject to deductible, max coverage of \$3,000/36 months
Hardware	

YOUR COST—Medical Insurance

* *Bi-Weekly = 26 pay periods per year*

BI-WEEKLY PAYROLL DEDUCTIONS*	HDHP
Employee Only	\$93.23
Employee & Family	\$167.08



WELCOME TO YOUR BENEFITS

MEDICAL PLANS CONTINUED

All of our plans do not require you to select a primary care physician or secure a referral from one provider to another. This may allow for quicker and more convenient access to specialty physicians.

The chart below compares the two PPO medical plan benefits that we offer based on network coverage. Refer to the Premera SBC for more detail and non-network benefit levels.

BENEFITS	ECONOMY	STANDARD
	In-Network	In-Network
Medical Deductible	\$700 Individual / \$1,400 Family	\$350 Individual / \$700 Family
Medical Out-of-Pocket Maximum (includes medical deductible)	\$3,000 Individual / \$8,000 Family	\$1,850 Individual / \$5,200 Family
Physician / Specialist Office Visit	20%, after deductible	20%, after deductible
Virtual care	General medical covered in full Other subject to outpatient cost	General medical covered in full Other subject to outpatient cost
Hospitalization	20%, after deductible	20%, after deductible
Preventive Care	No charge	No charge
Emergency Room	\$150 + 20%, after deductible	\$150 + 20%, after deductible
Prescription Drug Deductible (per person)	\$150	\$75
Prescription Drug Out-of-Pocket Maximum (per person)	\$2,000	\$1,450
Prescriptions (per 30-day supply)		
Generic	\$10, after deductible	\$10, after deductible
Preferred Formulary	\$35, after deductible	\$25, after deductible
Preferred Specialty	\$55, after deductible	\$45, after deductible
Non-Preferred	\$150, after deductible	\$100, after deductible
Hearing		
Exam	Covered once per year	Covered once per year
Hardware	Covered up to \$3,000/36 months	Covered up to \$3,000/36 months

YOUR COST—Medical Insurance

* *Bi-Weekly = 26 pay periods per year*

BI-WEEKLY PAYROLL DEDUCTIONS*	ECONOMY PLAN	STANDARD PLAN
Employee Only	\$143.00	\$193.03
Employee & Family	\$240.43	\$313.03



WELCOME TO YOUR BENEFITS

CHRONIC CONDITION SUPPORT PROGRAM

Premera's comprehensive chronic condition support program treats the whole person, not just the disease. This program supports employees who are at risk of developing diabetes, those who are working daily to manage their condition, and those who are managing hypertension. The program provides solutions to make healthcare simple and easy. It's just another way Premera is making healthcare work better for you.

Chronic condition support goes beyond just diabetes care

Going beyond diabetes prevention, you (or an eligible dependent) can opt-in to Premera's full chronic condition support program, or just the preventive diabetes or hypertension and diabetes management, depending on which program is most helpful.

Premera's chronic condition support program helps by offering:

- Personal health support from expert coaches
- Management and strategy support
- Connected technology that delivers real-time results and remote monitoring
- Continuing educational content support
- Free unlimited supply of test strips (Diabetes Management Program)

VIRTUAL CARE—24/7/365 ACCESS TO CARE

Primary Care / Urgent Care / Mental Health

The Premera virtual health network provides quality care that saves you money and time.

Contact **CirrusMD**, **Doctor On Demand**, or **Talkspace** anytime, anywhere.

- Get everything from fast diagnosis and treatment of common ailments to routine checkups and ongoing monitoring of chronic conditions anytime with **CirrusMD** and **Doctor On Demand**.
- Getting an appointment for mental health help can take days or weeks. With **Talkspace** and **Doctor On Demand**, you get specialized psychiatric treatment from a licensed prescriber—all from the comfort of your home.

These virtual providers are integrated into your health plan and provide:

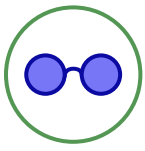
- Convenient high-quality care at low or no out-of-pocket costs
- The ability to get your prescriptions filled
- Great customer experience by addressing your healthcare concerns in a timely manner and providing treatment options within minutes

Substance Use Addiction Assistance

Achieve recovery for conditions like opioid and/or alcohol use addictions, wherever you are with virtual care. Take advantage of short wait times through your Premera health plan.

- **Boulder Care**—Video visits and text messaging with a therapist. boulder.care/getstarted

ALL INFORMATION IS CONFIDENTIAL BETWEEN YOU AND YOUR PROVIDER



WELCOME TO YOUR BENEFITS

VISION INSURANCE

Driving, reading, and interacting with technology are all activities you likely perform daily. Your ability to do all these activities depends on your vision and eye health. Regular vision exams help you maintain your vision as well as detect various health problems.

The City & Borough of Juneau’s vision insurance entitles you to specific eye care benefits.

If you seek the services of a provider listed in Premera’s provider directory, your Standard plan benefits include the following:

Adult Vision Benefit:

- Vision exam is covered at 100% and limited to once per year
- \$200 maximum per year hardware allowance (glass lenses are allowed and do not accrue to maximum)

Pediatric Vision Benefit:

- Vision exam is covered at 100% and limited to once per year
- The following is covered at 100%: one pair of frames and lenses once per year or contact lenses every 12 months

YOUR COST—Vision Insurance

* *Bi-Weekly = 26 pay periods per year*

BI-WEEKLY PAYROLL DEDUCTION*	VISION PLAN
Employee Only	\$3.17
Employee & Family	\$6.34





WELCOME TO YOUR BENEFITS

DENTAL INSURANCE

In addition to protecting your smile, dental insurance helps pay for dental care and includes regular checkups, cleanings and X-rays. Several studies suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body—including your heart.

The following chart outlines the dental benefits we offer, just like on the medical plan, you'll receive negotiated and contracted rates when using a network provider.

BENEFITS	BASE PLAN	BUY-UP PLAN
Deductible (per member)	\$50	\$50
Annual Maximum (per member) Preventive services do not accrue to maximum	\$2,000	\$3,000
Diagnostic & Preventive Services (Exams, cleanings, X-rays)	No charge	No charge
Basic Services (Fillings, simple extractions, stainless steel crowns)	20%, after deductible	20%, after deductible
Major Services (Oral surgery, root canal, gold and resin crowns)	50%, after deductible	20%, after deductible
Orthodontia (per member)	Excluded	50%, after deductible \$2,500 maximum per lifetime

YOUR COST—Dental Insurance

* *Bi-Weekly = 26 pay periods per year*

BI-WEEKLY PAYROLL DEDUCTIONS*	BASE PLAN	BUY-UP PLAN
Employee Only	\$0.00	\$19.61
Employee & Family	\$0.00	\$32.22



The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are possible. In case of discrepancy between the guide and actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about the guide, please contact HR.

