



Welcome to Open Enrollment

Plan Year: July 2025 – June 2026



WELCOME TO OPEN ENROLLMENT




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 Open Enrollment Guide.

IMPORTANT: If no changes are desired, your elections will roll over and no action is needed. This guide outlines the benefit plans, so you can identify which offerings are best for your situation.

Elections you make during open enrollment are effective **July 1, 2025**. 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 OPEN ENROLLMENT



ELIGIBILITY

Juneau School District Employees:

Please refer to your individual union contract.

WELCOME TO OPEN ENROLLMENT

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 open enrollment can have a significant impact on your life and finances, so it is important to weigh your options carefully.

Remember, all employees are suggested to review their coverage during this Open Enrollment to ensure accuracy for the following plan year.

When To Enroll

Open enrollment is **Monday, May 5 through Friday, May 23, 2025**

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 OPEN ENROLLMENT

What do I need to do for Open Enrollment?

- Open enrollment is a **PASSIVE enrollment** this year—you will need to review your prior benefit elections.

Where can I learn more about my benefit options?

- We partner with TheBenefitseXpert® (TBX) for a comprehensive online enrollment experience. You will have access to videos and handouts with more information about each benefit option. You also have access to LIVE benefit counselors who can help walk you through enrollment options!

How do I enroll in benefits?

- Click the “**My Benefits**” link on the www.thebenefitsexpert.com/juneau portal to access TheBenefitseXpert® enrollment site.
- You will be prompted to fill in your personal details to access your personalized account:

User ID

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

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.

Username

First Name.Last Name

Employees that include middle initial will be contacted directly

Example: John Doe

Social Security Number: 123456789

Date of Birth: June 1st, 1980

PIN is 678980



WELCOME TO OPEN ENROLLMENT

MEDICAL / PRESCRIPTION DRUG INSURANCE

This plan is less expensive and 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 **If enrolled on the family plan, you must meet the family level deductible prior to the plan paying at 80% of all
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 90-day supply retail and mail) Generic Preferred Formulary Preferred Specialty Non-Preferred	20% after deductible 20%, after deductible 20%, after deductible 20%, after deductible
Hearing Exam/Hardware Max Hardware Limit	20% after deductible, Max coverage of \$3,000/36 months for hardware and max of \$400 for exam

YOUR COST—Medical Insurance

*Bi-Weekly = 26 pay periods per year

**Specialty drugs 30-day supply at specific pharmacies

BI-WEEKLY PAYROLL DEDUCTIONS*	HDHP
Employee Only	\$93.23**
Employee & Family	\$172.23**

** Part-Time employees pay a prorated amount for this plan.



WELCOME TO OPEN ENROLLMENT

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 (individual/family)	\$2,000/\$6,000	\$1,450/\$4,350
Prescriptions** (per 30-day supply retail) (per 90-day supply mail) Generic Preferred Formulary Preferred Specialty Non-Preferred	\$10, after deductible \$35, after deductible \$55, after deductible \$150, after deductible	\$10, after deductible \$25, after deductible \$45, after deductible \$100, after deductible
Hearing Exam/Hardware Max Hardware Limit	Covered in full up to \$400 once per plan year Covered up to \$3,000/36 months	Covered in full up to \$400 once per plan year Covered up to \$3,000/36 months

YOUR COST—Medical Insurance

*Bi-Weekly = 26 pay periods per year

**Specialty drugs only covered at specific pharmacies

BI-WEEKLY PAYROLL DEDUCTIONS*	ECONOMY PLAN	STANDARD PLAN
Employee Only	\$146.63**	\$197.63**
Employee & Family	\$251.23**	\$323.63**

** Part-Time employees pay a prorated amount for this plan.



WELCOME TO OPEN ENROLLMENT

TELADOC 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.

- Get everything from fast diagnosis and treatment of common ailments to routine checkups and ongoing monitoring of chronic conditions anytime.
- Getting an appointment for mental health help can take days or weeks. With virtual care 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:

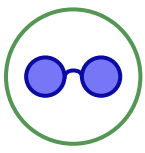
- Convenient high-quality care at low or no out-of-pocket costs
- The ability to get your prescriptions filled
- Great customer experience by addressing your healthcare concerns in a timely manner and providing treatment options within minutes

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 OPEN ENROLLMENT

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 / Bartlett Hospital'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	\$3.50**
Employee & Family	\$6.80**

** *Part-Time employees pay a prorated amount for this plan.*





WELCOME TO OPEN ENROLLMENT

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**	\$21.00**
Employee & Family	\$0.00**	\$34.50**

** *Part-Time employees pay a prorated amount for this plan.*





WELCOME TO OPEN ENROLLMENT

The FY26 CBJ Employee Parks & Recreation Pass provides benefit-eligible employees (CBJ/BRH/JSD Admin) and their immediate families with free access to all Parks & Recreation facilities. This pass grants unlimited entry to public drop-in programs at:

- Augustus G. Brown Swimming Pool
- Dimond Park Aquatic Center
- Dimond Park Field House
- Mount Jumbo Gym
- Treadwell Ice Arena



The CBJ Employee Parks & Recreation Pass does not include private rentals or registrations such as swim lessons, Start Smart, adult volleyball, youth sports, Parent & Tot, etc.

To receive a pass for yourself and/or your family, **you must elect it during open enrollment** by selecting one of the following options below: Employee OR Employee + Family. Passes will only be issued to those who complete the enrollment process by the open enrollment deadline. **It is the employee's responsibility to ensure they make their selection before open enrollment closes—passes will not be added after the deadline under any circumstances.**

All FY26 CBJ Employee Park & Rec Passes will be active from July 1, 2025, through June 30, 2026. If an employee separates during the fiscal year, the pass(es) will become inactive on the last day of employment.



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.

