

# BENEFIT<sup>+</sup> GUIDE



**JANUARY 1–DECEMBER 31 | 2025**

**Hoosier School  
Benefit Trust**



# WELCOME






Hoosier School Benefit Trust would not be the success it is today without the dedication of our hard-working employees. We are proud to offer a comprehensive benefits package to support your physical, mental, and financial wellness.

This guide highlights the options available to you as a benefits-eligible employee.



Please take time to review this guide so you can make informed decisions and get the most from your benefits.



## TIPS FOR *USING* THIS GUIDE

- ✓ View this guide on your computer, tablet, or smartphone. It's designed to let you easily navigate through your benefits!
- ✓ Use the icons at the top-left to jump to these sections:
  -  **Table of Contents**
  -  **Search for an In-Network Provider**
  -  **Benefit Contacts**
  -  **Benefit Glossary**
- ✓ When you see the **CURSOR ICON**  click or tap for more information.
- ✓ Open the **SEARCH BAR** to type in a key word you want to find:
  - **On your computer:** Type **Ctrl + F**.
  - **On your smartphone:** In the bottom menu, tap the three dots for more options, tap **“Find in page.”** Then, tap on the top search bar to type in your search term.

## TIPS FOR *SAVING* THIS GUIDE

- ✓ **On your computer:** Save the link as a bookmark on your browser.
- ✓ **Add on your smartphone home screen:**
  - On Android, tap the options menu. ⋮
  - On iPhone, tap the share icon. 
  - Select **Add to Home Screen** (you might need to scroll to find it).
  - Give the guide a name you'll remember, then click **Add**.
  - The icon will appear as a Red “A” on your home screen. 



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# COVERING YOU & YOUR FAMILY



## EMPLOYEES

HSBT is proud to offer a comprehensive benefits package to eligible employees. Please contact your school's Human Resources department to determine eligibility requirements.

## DEPENDENTS

Many of the plans allow you to cover your eligible dependents, which include:

- Legally married spouse
- Dependent children including:
  - Children up to age 26 regardless of student or marital status
  - Disabled children of any age who are (or become) physically or mentally incapable of self-support



# WHEN CAN YOU ENROLL IN BENEFITS?

## NEW HIRE

**Enroll within your new-hire enrollment window.**

Visit your school's enrollment site.

### **Closely review your options as a new hire**

- Please check your school's enrollment site to determine when you are eligible
- Some benefits include special enrollment opportunities that are only available when you first enroll, so don't miss out!

## OPEN ENROLLMENT

**Enroll during the annual benefits open enrollment period.**

Visit your school's enrollment site.

### **Your annual opportunity to review & change your benefits**

- Typically held in the fall
- The benefits you select become effective on Jan. 1



## QUALIFYING LIFE EVENT

**Enroll within 30 days of a qualifying life event.**

Contact Human Resources

### **“Qualifying life events” allow you to make a mid-year benefit change**

Examples include:

- Marriage or divorce
- Birth or adoption of child
- You and/or your dependents become eligible or lose coverage with another group health plan
- Spouse's open enrollment
- Change in work status (part-time to full-time)



# QUALIFYING LIFE EVENTS

You can only make mid-year changes if you have a qualifying life event.

See some examples on the previous page.

## WHAT TO DO IF YOU HAVE A QUALIFYING LIFE EVENT

### 1. GATHER YOUR BENEFIT INFORMATION

Gather the benefit information that both you and your spouse are eligible for.

Give yourself time to make your decision, as **you must request your change within 30 days of the event.**

### 2. CONSIDER YOUR OPTIONS

Consider the following to compare your options for coverage.

- What level of coverage does my family need?
- Does it benefit my family financially for my spouse and I to elect our own coverage through our own employers?
- Or is it less expensive for my entire family to be covered by HSBT's plan?
- To evaluate each option, consider premiums, deductibles, and out-of-pocket maximum costs.

### 3. CONTACT HR

+ If you've decided to elect HSBT's coverage at any level, contact Human Resources for assistance.

+ We'll help you through the election process and answer any questions you and your family may have about your options.





# HEALTH BENEFITS



# CHOOSING YOUR MEDICAL BENEFITS



## ANTHEM MEDICAL PLAN OPTIONS

Everyone's healthcare needs are different. That's why HSBT offers you choice in your medical, dental and vision benefits.

You may choose from four medical plans through Anthem. All of your plan options include pharmacy coverage and allow you to visit any doctor or hospital of your choice (just keep in mind you'll pay a lot less in-network).

### PPO PLANS

**PPO Plans I/II and III are traditional Preferred Provider Organization (PPO) plans.** These two plans offer some services, such as doctor office visits and prescription drugs, for a flat copay.

### HDHP/HSA PLANS

**HDHP/HSA Plans IV and V are qualified High-Deductible Health Plans (HDHP) that can be combined with a Health Savings Account (HSA)** to give you more control over your healthcare spending.

Both HDHP plans have a lower cost per paycheck, so you can put these savings in a tax-advantaged HSA to pay for the care you need.

## HSBT HEALTH & WELLNESS CENTERS

If you enroll in one of the Anthem medical plans, you can also access **FREE care** through the three HSBT Health & Wellness Centers!

*Learn more on page 19. ✨*







[Click here to find an in-network provider](#)

# MEDICAL BENEFITS



PLAN OPTIONS	PPO PLAN I/II	PPO PLAN III
	IN-NETWORK*	IN-NETWORK*
NETWORK	Anthem Blue Access	Anthem Blue Access
PLAN BASICS		
<b>Deductible</b> Individual   Family	\$1,500   \$3,000	\$2,700   \$5,400
<b>Coinsurance</b> Member Pays   Plan Pays	30%   70%	30%   70%
<b>Out-of-Pocket Maximum</b> Individual   Family	\$6,000   \$10,000	\$6,000   \$10,000
<b>Eligible for Health Savings Account?</b>	No	No
WHAT YOU PAY WHEN YOU NEED CARE		
<b>Preventive Care</b> 🌿	No charge	No charge
<b>Doctor Visits</b> Primary Care   Specialist	\$40 copay   \$60 copay	\$40 copay   \$60 copay
<b>Virtual Visits</b> 🌿	\$40 copay	\$40 copay
<b>Emergency Care</b> Urgent Care   ER	\$100 copay   \$250 copay (waived if admitted)	\$100 copay   \$250 copay (waived if admitted)
<b>Inpatient &amp; Outpatient Services</b>	30% after deductible	30% after deductible
<b>Diagnostic Imaging</b> (ex: MRI, CT, PET scans)	30% after deductible	30% after deductible
<b>Behavioral Health</b>	\$40 copay	\$40 copay
<b>Hospice Care</b>	No charge	No charge

\*Out-of-network coverage is available on this plan. Please refer to the benefit summary for more information.

*Continued on next page.* 🌿



[Click here to find an in-network provider](#)

# MEDICAL BENEFITS CONTINUED



PLAN OPTIONS	PPO PLAN I/II	PPO PLAN III
	IN-NETWORK*	IN-NETWORK*

## WHAT YOU PAY FOR PRESCRIPTION DRUGS

**Retail Pharmacy (up to 30-day supply)** [See Prescription Savings on page 13 for more details.](#)

Tier 1	30%	30%
Tier 2	30%, \$40 minimum	30%, \$40 minimum
Tier 3	30%, \$60 minimum	30%, \$60 minimum
Tier 4	30% up to \$300 maximum	30% up to \$300 maximum

**Mail-Order (up to 90-day supply)** [See Prescription Savings on page 13 for more details.](#)

Tier 1	\$40	\$40
Tier 2	\$80	\$80
Tier 3	\$120	\$120
Tier 4	30% up to \$300 maximum	30% up to \$300 maximum

**\*Out-of-network coverage is available on this plan.** Please refer to the benefit summary for more information.

[Continued on next page.](#)



[Click here to find an in-network provider](#)

# MEDICAL BENEFITS CONTINUED



PLAN OPTIONS	HDHP/HSA PLAN IV	HDHP/HSA PLAN V
	IN-NETWORK*	IN-NETWORK*
NETWORK	Anthem Blue Access	Anthem Blue Access
PLAN BASICS		
<b>Deductible</b> Individual   Family	\$3,500   \$7,000	\$5,700   \$11,400
<b>Coinsurance</b> Member Pays   Plan Pays	30%   70%	30%   70%
<b>Out-of-Pocket Maximum</b> Individual   Family	\$6,900   \$11,500	\$6,900   \$13,800
<b>Eligible for Health Savings Account?</b>	Yes! <a href="#">Learn more on page 15.</a>	Yes! <a href="#">Learn more on page 15.</a>
WHAT YOU PAY WHEN YOU NEED CARE		
<b>Preventive Care</b>	No charge	No charge
<b>Doctor Visits</b> Primary Care   Specialist	30% after deductible	30% after deductible
<b>Virtual Visits</b>		
<b>Emergency Care</b> Urgent Care   ER		
<b>Inpatient &amp; Outpatient Services</b>		
<b>Diagnostic Imaging</b> (ex: MRI, CT, PET scans)		
<b>Behavioral Health</b>	30% after deductible	30% after deductible
<b>Hospice Care</b>		

\*Out-of-network coverage is available on this plan. Please refer to the benefit summary for more information.

[Continued on next page.](#)



[Click here to find an in-network provider](#)

# MEDICAL BENEFITS CONTINUED



PLAN OPTIONS	HDHP/HSA PLAN IV	HDHP/HSA PLAN V
	IN-NETWORK*	IN-NETWORK*
<b>WHAT YOU PAY FOR PRESCRIPTION DRUGS</b>		
<b>Retail Pharmacy (up to 30-day supply)</b> Tier 1   2   3   4 <a href="#">Learn more on page 13.</a>	30% after deductible	30% after deductible
<b>Mail-Order (up to 90-day supply)</b> Tier 1   2   3   4 <a href="#">Learn more on page 13.</a>		

*\*Out-of-network coverage is available on this plan. Please refer to the benefit summary for more information.*

## HELPFUL TIPS

**Not sure what a word means?**

[See the benefit glossary.](#)

**Make the most out of your medical plan.**

[See the importance of preventive care.](#)

**Be savvy with your healthcare costs.**

[See our tips to save money.](#)



# PRESCRIPTION SAVINGS *TrueScripts* Amazing Care

TrueScripts provides you with personalized support to help you manage and reduce your prescription drug costs.

You can contact TrueScripts whenever you have questions or need help navigating your pharmacy benefits. If you find that you're paying a lot for your medications, they can often find ways for you to save!

## PRICEPROTECTOR+, POWERED BY GOODRX

TrueScripts ensures you get the greatest savings possible while getting credit toward your deductible and out-of-pocket maximum.

With PriceProtector+, TrueScripts will automatically apply GoodRx discount card pricing if it is lower than the cost through your medical plan. No shopping around, no forms to send in, no headaches!

[Learn more](#) | [PriceProtector+](#) 

[Back to your medical plan options.](#) 

## TRUESCRIPTS MEMBER PORTAL

Register online to manage your pharmacy benefits.

[MemberPortal.TrueScripts.com](https://MemberPortal.TrueScripts.com) 

### TrueScripts member portal features:

- Recent claim history
- Network pharmacy locator
- Drug price lookup—check real-time pricing on medication!
- Live chat available Monday–Friday, 8 a.m. to 6 p.m. ET

### QUESTIONS?

**Call** | 844-257-1955





# MAIL-ORDER PRESCRIPTION SAVINGS



Save time and money on medications you take regularly with the mail-order program. Get a 90-day supply delivered right to your door with no changes in your plan setup!

**Enroll in mail order with one of our partner pharmacies.**

## CARE-FILL LTC

**Visit** | [CareFillLTC.com](https://www.CareFillLTC.com)

**Call** | 844-522-2273

**Fax** | 844-308-1485

## COSTCO MAIL-ORDER PHARMACY

*You do not need to be a Costco member to use the Costco mail-order pharmacy.*

**Visit** | [Pharmacy.Costco.com](https://www.Pharmacy.Costco.com)

**Call** | 844-607-6861

**Fax** | 800-633-0334

## GET STARTED

1. **Contact** one of our mail-order pharmacy partners.
2. **Set up a profile.** Have a list of medications and prescribing doctors ready to input.
3. **Provide your TrueScripts processing info.**
  - RxBin: 017274
  - RxPCN: PDMI
  - RxGroup: 99993923
  - Your Member ID number
4. If you have current refills at another pharmacy, you can ask the mail-order pharmacy to **call and request that they are transferred** over to your new pharmacy.
5. **You may need a new prescription from your healthcare provider for 90-day fills.** The mail-order pharmacy can reach out to your provider to request the new script. Since your provider should be able to call this into your pharmacy of choice, typically you do not need an office visit.
6. If the pharmacy tells you that your insurance is not contracted with TrueScripts, **ask them to call TrueScripts.** You can also contact the TrueScripts Member Care Team, who will be happy to provide you with assistance and amazing care.





# HEALTH SAVINGS ACCOUNT

By enrolling in one of the HDHP/HSA plans, you get access to a Health Savings Account (HSA), which can be used to pay for qualified healthcare expenses.

## ELIGIBILITY

Anyone who fits **all** the following conditions may contribute to an HSA:

- ✓ **IS** enrolled in an HDHP medical plan.
- ✗ **IS NOT** enrolled in Medicare, Tri-Care, Medicaid, or a medical plan with copays.<sup>1</sup>
- ✗ **IS NOT** eligible to be claimed as a dependent on someone else’s tax return.

<sup>1</sup>**Medicare & your HSA:** Because enrollment in Part A is backdated by six months, you should stop your HSA contributions six months prior to enrollment to avoid penalties. Consult your tax advisor for guidance.

## HSA CONTRIBUTIONS

You can contribute up to the IRS annual maximum, which is based on your age and enrollment in the HSA medical plan.

Contact your school’s HR team for information about your school’s contributions. The IRS maximum includes your contributions **and** your school’s contributions.

2025 IRS Contribution Limits	UNDER AGE 55	AGE 55+
Individual	\$4,300	\$5,300
Family (one or more dependents)	\$8,550	\$9,550

[Back to your medical plan options.](#) ↗

## THREE REASONS TO LOVE YOUR HSA

### 1. TRIPLE TAX SAVINGS.\*

- Tax deductions when you contribute to your account
- Tax-free withdrawals to pay for qualified medical expenses
- Tax-free earnings

### 2. IT’S FLEXIBLE.




You can use the money in your HSA for eligible health expenses or save it and let it grow. Your HSA savings roll over year after year, so it’s there when you need it.

### 3. USE IT FOR RETIREMENT

When you reach a certain balance, you can invest your HSA. And you can use it as retirement income at age 65 without penalty (normal income tax still applies).

*\*Please note that state taxes still apply in some states.*

Visit [HSASore.com/learning-center.html](https://HSASore.com/learning-center.html) and watch the videos below to learn more!

-  [HSA Basics](#)
-  [Tax Advantages](#)
-  [Eligible Expenses](#)



# THE IMPORTANCE OF PREVENTIVE CARE



Your medical plan covers in-network preventive care services at no cost to you! Preventive care can help keep you healthy and identify minor issues early, when they're easier—and less costly—to treat.

## ✓ **WHAT IS PREVENTIVE CARE?**

Preventive care includes a range of services to help keep you healthy. While regular (diagnostic) medical care focuses on treating illness, preventive care aims to keep you from getting sick in the first place.

## ✗ **WHAT IS NOT PREVENTIVE CARE?**

If you see a doctor because you have symptoms or have been diagnosed with an illness, the services you receive are not preventive.

Your medical plan still provides coverage for these services, but they are not covered at 100%.

*Note: Your medical plan may charge a fee if you receive services from an out-of-network provider or if the preventive service is not the primary purpose of your office visit.*

### **SEE WHAT PREVENTIVE TESTS AND SCREENINGS ARE RECOMMENDED FOR YOUR AGE**

**Visit |** [Anthem.com/preventive-care](https://www.anthem.com/preventive-care) \*👉

*Call Anthem to confirm which preventive services are covered under your plan.*

*[Back to your medical plan options.](#)* \*👉



# VIRTUAL VISITS

LiveHealth<sup>®</sup>  
ONLINE

## AN AFFORDABLE OPTION FOR QUALITY MEDICAL CARE

Visit with a doctor any day, any time, from your smartphone, computer or tablet. Telehealth is a convenient option when you need care for yourself or your child in the middle of the night or while traveling.

### WHAT DOES IT COST?

#### HDHP/HSA PLANS

30% after deductible

#### PPO PLANS

- **Medical Visit** | \$55
- **Allergy Specialist Visit** | \$55
- **Pediatrician Visit** | \$55
- **Psychology Visit** | \$80/\$95  
*cost is dependent on services billed*
- **Psychiatry Visit** | \$175  
*initial evaluation*
- **Psychiatry Visit** | \$75  
*follow-up visit*
- **Dermatology Visit** | \$95
- **Sleep Specialist Visit** | \$175  
*initial evaluation*
- **Sleep Specialist Visit** | \$270  
*home sleep test*
- **Sleep Specialist Visit** | \$75/\$105  
*follow-up visit; cost is dependent on services billed*
- **Lactation Support Visit** | no cost

[Back to your medical plan options.](#)

### GET STARTED!

Visit | [LiveHealthOnline.com](https://LiveHealthOnline.com)

Call | 888-548-3432

### DOWNLOAD THE APP

Click the links below to get the app!





# HEALTHCARE ON THE GO



## YOUR SYDNEY HEALTHCARE APP

With Sydney, you can find everything you need to know about your Anthem benefits—personalized and all in one place. Sydney makes it easier to get things done, so you can spend more time focused on your health.

- Access your digital ID card
- Find care and check costs
- View your benefits coverage
- Check claims and deductible expenses
- Get answers even faster with the chatbot

## DOWNLOAD THE APP

Visit | [SydneyHealth.com](https://SydneyHealth.com) for a link to download the app.





# HSBT HEALTH & WELLNESS CENTER



## NO-COST MEDICAL CARE

The HSBT Health & Wellness Center is created for the exclusive use of employees and dependents of HSBT who are covered under an HSBT Anthem medical plan.

The Health & Wellness Center is staffed by primary care providers who can evaluate and treat your entire family for a wide variety of ailments.

The Center offers all of the services provided in a typical primary care office, including physical evaluation and treatment for everything from the flu to complicated chronic diseases, physical examinations, immunizations, and lab draws at **NO COST**.


## SERVICES INCLUDE


- Personal health coaching
- Immunizations, lab draws, and testing
- **Some generic prescriptions fills and refills**
- Urgent care visits

## LOCATIONS

*Click the location pin to generate a map*

 **Harding Street** | 6925 South Harding St., Ste. B1, Indianapolis, IN 46217

 **Speedway** | 1011 Main St., Ste. 260, Speedway, IN 46224

 **East Washington** | 7910 East Washington St., Ste. 350, Indianapolis, IN 46219

## MAKE AN APPOINTMENT

Schedule an appointment at the Center online or by phone.

Create an account for access to visit notes, lab results and more.

**Visit** | [MyWebAhead.com/hsbt](https://MyWebAhead.com/hsbt)

**Call** | 317-497-6140





# WHERE TO GO FOR CARE



	HSBT HEALTH & WELLNESS CENTER	VIRTUAL VISITS	PRIMARY CARE	URGENT CARE	EMERGENCY ROOM
COST	FREE	\$	\$\$	\$\$\$	\$\$\$\$
WHEN	Use for preventive and regular care	When you need care now	Use for preventive and regular care	When you need care now	When you need care now <b>and</b> your condition is life-threatening
WHAT	Routine checkups, preventive care, general health management. The clinic can be used as your primary care provider!	Flu-like symptoms, allergies, fever, sinus pain, diarrhea, eye infection, rash, other non-emergency symptoms	Routine checkups, preventive care, general health management Mild asthma, flu-like symptoms, fever, sprains, eye or sinus infection, sore throat, earache, other non-emergency symptoms	Sprain and strains, ear or sinus pain, minor allergic reactions, cough, sore throat, minor headache, urinary tract infection	Signs of a heart attack, difficulty breathing, severe burn or bleeding, and any other symptoms that are life-threatening
HOW	Schedule your appointments ahead of time. 317-497-6140 <a href="https://mywebahead.com/hsbt">MyWebAhead.com/hsbt</a>	When you request an appointment, you'll get a call back from a provider usually within an hour. 888-548-3432 <a href="https://livehealthonline.com">LiveHealthOnline.com</a>	Schedule your appointments ahead of time by contacting your provider.	Find an in-network urgent care center.	Find an emergency room.





# TIPS TO SAVE MONEY

## ✓ **SAVE THE EMERGENCY ROOM FOR TRUE EMERGENCIES**

Only visit the emergency room if you have a life- or limb-threatening emergency. If you need care when your doctor's office is closed, check your area for an urgent care location or use virtual care instead.

## ✓ **USE IN-NETWORK PROVIDERS**

Your medical, dental and vision costs increase greatly when you visit a provider who is not in your plan's network. Always confirm your provider is in your network, especially when being referred to another provider or facility for services.

## ✓ **GET YOUR ANNUAL CHECKUP**

You and your dependents should visit the doctor annually for health screenings and tests. Your plan covers preventive services at 100%.

## ✓ **CHOOSE GENERIC PRESCRIPTIONS**

Ask your doctor or pharmacist to give you generic prescriptions instead of brand-name if possible. Generic drugs are usually cheaper and can be just as effective.

## ✓ **SHOP AROUND TO FIND THE BEST PRESCRIPTION PRICES**

It can pay to be a savvy shopper. Look up your prescription on your TrueScripts member portal to find the lowest cost pharmacy.

Good news! TrueScripts automatically applies GoodRx discounts to your generic prescriptions. The amounts you pay will be automatically credited to your deductible and out-of-pocket maximum when appropriate. See page 13 to learn more.

## ✓ **TAKE ADVANTAGE OF THE MAIL-ORDER PHARMACY PROGRAM**

Save time and money by using the mail-order prescription drug program for your maintenance prescriptions. Check with your insurance company for more details.

*[Back to your medical plan options.](#)* ➤




[Click here to find an in-network provider](#)

# DENTAL BENEFITS



PLAN OPTIONS	ENHANCED PLAN	CORE PLAN
	IN- AND OUT-OF-NETWORK*	IN- AND OUT-OF-NETWORK*
NETWORK	Dental Complete	Dental Complete
PLAN BASICS		
Calendar-Year Deductible Individual   Family	\$50   \$150	\$50   \$150
Maximum Benefit for Basic & Major Services Per Person Per Year	\$2,500	\$1,000
Maximum Orthodontia Benefit Per Child Per Lifetime	\$1,500	\$1,000
WHAT YOU PAY FOR SERVICES		
Preventive Services (cleanings, exams, x-rays)	No charge (deductible waived)	No charge (deductible waived)
Basic Services (fillings, extractions)	20% after deductible	20% after deductible
Major Services (crowns, bridgework, root canal treatment)	50% after deductible	50% after deductible
Orthodontia (for children up to age 18)	You pay 50%	You pay 50%

 **\*Be aware of balance billing if you use an out-of-network dentist.** If your dentist is out-of-network and they charge more than what the plan allows, you are responsible for the extra charges. Save money by staying in-network! See Benefit Glossary on page 34 for more details.



[Click here to find an in-network provider](#)

# VISION BENEFITS



## PLAN OPTIONS

### NETWORK

### PLAN BASICS

#### Eye Exam

(every calendar year)

#### Eyeglass Lenses Single | Bifocal | Trifocal

(once every 12 months)

#### Frames

(once every 24 months)

#### Elective Contacts—instead of glasses

(once every 12 months)

### CORE VISION PLAN

### IN-NETWORK\*

### Blue View Vision

\$10 copay

\$10 copay

\$130 allowance +  
20% discount on remaining amount

\$130 allowance +  
15% discount on remaining amount

**\*Out-of-network coverage is available on this plan. Refer to the benefit summary for more information.**

## DISCOUNTS & SAVINGS

You are eligible for extra discounts and savings when you visit in-network providers!

## EXTRA SAVINGS

Certain lens enhancements for dependent children are included at no additional cost

Save on additional glasses and sunglasses, including lens enhancements from any network provider

## LEARN MORE

Visit | [Anthem.com](#)





# FINANCIAL BENEFITS



# LIFE INSURANCE



## BASIC LIFE AND AD&D (EMPLOYER-PAID)

To help provide financial security for your family in the event of death or dismemberment, we provide basic term life and accidental death & dismemberment (AD&D) coverage **at no cost to you.**

### Life Coverage Amount

Benefit is based on employment classification

### AD&D Coverage Amount\*

Benefit is based on employment classification

*\*The AD&D benefit is paid in addition to the life benefit if your death is due to an accident. A partial AD&D benefit may be paid in some instances such as loss of sight or paralysis. See plan summary for details.*



### KEEP YOUR BENEFICIARY INFORMATION UP TO DATE!

Life and AD&D benefits are paid to the beneficiary on file, so make sure you keep your beneficiary information up to date!

You can change your beneficiary information at any time on your benefit enrollment platform.







# LIFE INSURANCE CONTINUED

## SUPPLEMENTAL LIFE INSURANCE (EMPLOYEE-PAID)

Supplemental life insurance provides an extra layer of financial security for your family. You can give your loved ones greater peace of mind in the face of unforeseen circumstances by purchasing voluntary coverage at competitive group rates.

### SUPPLEMENTAL LIFE COVERAGE OPTIONS

<b>Employee Benefit</b>	\$1,000 increments up to \$500,000 <b>Guarantee Issue:</b> \$200,000
<b>Spouse Benefit</b>	\$5,000 increments up to 100% of employee's election <b>Guarantee Issue:</b> \$50,000
<b>Child Benefit</b>	<b>6 months and up:</b> \$10,000
<b>Benefit Reduction Schedule</b>	<b>Benefits reduce by:</b> 45% of original amount at age 70 61% of original amount at age 75 69% of original amount at age 80 73% of original amount at age 85 76% of original amount at age 90

**Note:** Your cost for voluntary life insurance varies by age and coverage amount (Spousal rates are based on the age of the employee). You can see your cost when you enroll online. Franklin Township Schools supplemental coverage includes Accidental Death & Dismemberment coverage.

### THINGS TO KNOW

A “**guarantee issue**” **amount** is the dollar amount of coverage you can be approved for without completing a health questionnaire—also commonly referred to as Evidence of Insurability (EOI). Guarantee issue amounts typically only apply during your initial enrollment period when hired.



#### NEW EMPLOYEES:

**Don't miss out on your guaranteed issue opportunity!**

If you wish to enroll in the Voluntary Life and AD&D plan or increase your coverage (above one additional increment) after the Open Enrollment period, you will be required to complete the EOI health questionnaire.





# ADDITIONAL BENEFITS



# EMPLOYEE ASSISTANCE PROGRAM

You and your household members have access to Community Health's Employee Assistance Program (EAP) to help with the everyday challenges of life that may affect your health, family life and desire to excel at work. **Your use of the EAP is completely confidential.** Your school will not be notified if you use the EAP.

You and the members of your household have up to **six face-to-face** counseling sessions per year, per person, per issue.

These six sessions may be used at any time of the year and are not based on a calendar year, but rather, a rolling year starting on the date you make your first appointment.

## FOR 24/7 ASSISTANCE

Call | 800-543-4158 or 317-621-7742

Visit | [MyWebAhead.com/hsbt](http://MyWebAhead.com/hsbt)



## AN EAP CAN ADDRESS:



**SUBSTANCE ABUSE & ADDICTION**



**LEGAL ASSISTANCE**



**FAMILY & RELATIONSHIPS**



**FINANCIAL WELLNESS**



**EMOTIONAL WELL-BEING**



**WORK & CAREER**



# ANTHEM DISCOUNTS AND PERKS



Anthem provides those enrolled in an HSBT medical plan with discounts on products and services that help promote better health and well-being. To learn more, log on to [Anthem.com](https://www.anthem.com), choose “Care” and then “Discounts.”

## FITNESS AND HEALTH DISCOUNTS

**Active&Fit Direct™** | Active&Fit Direct allows you to choose from more than 11,000 participating fitness centers nationwide for \$28 a month (plus a \$28 enrollment fee and applicable taxes). Offered through American Specialty Health Fitness, Inc.

**ChooseHealthy®** | Discounts are available on acupuncture, chiropractic, massage, podiatry, physical therapy and nutritional services. You also have discounts on fitness equipment, wearable trackers and health products, such as vitamins and nutrition bars.

**Jenny Craig®** | Join this weight loss program for free. Jenny Craig provides you with everything you need, making it easier to reach your goals. You can save \$200 in food, in addition to free coaching, with minimum purchase. Save an extra 5% off your full menu purchase. Details apply.

**Garmin** | Take 20% off select Garmin wellness devices.

**FitBit** | Work toward your fitness goals with Fitbit trackers and smartwatches that go with your lifestyle and budget. Save up to 22% on select Fitbit devices.

**GlobalFit** | Discounts apply on gym memberships, fitness equipment, coaching and other services.

## FAMILY AND HOME DISCOUNTS

**23andMe Take** | \$40 off each Health + Ancestry kit. Save 20% on a 23andMe kit and learn about your wellness, ancestry and more.

**Safe Beginnings®** | Babyproof your home while saving 15% on everything from safety gates to outlet covers.

**Nationwide Pet Insurance** | Receive an automatic 5% discount when you enroll through your company or organization. Save up to 15% when you enroll multiple pets.

**WINFertility®** | Save up to 40% on infertility treatment. WINFertility helps make quality treatment affordable.

**ASPCA Pet Insurance** | Take 5% off pet insurance. You can choose from three levels of care, including flexible deductibles and custom reimbursements.

**LifeMart®** | Take advantage of great deals on beauty and skin care, diet plans, fitness club memberships and plans, personal care, spa services and yoga classes, sports gear and vision care.



# ANTHEM DISCOUNTS AND PERKS CONTINUED



## VISION, HEARING, AND DENTAL DISCOUNTS

**Glasses.com™ and 1-800-CONTACTS®** | Shop for the latest brand-name frames at a fraction of the cost for similar frames at other retailers. You are also entitled to an additional \$20 off orders of \$100 or more, free shipping and free returns.

**EyeMed** | Take 30% off a new pair of glasses, 20% off non-prescription sunglasses and 20% off all eyewear accessories.

**Nations Hearing** | Receive hearing screenings and inhome service at no additional cost. All hearing aids start at \$599 each.

**Amplifon** | Take 25% off, plus an extra \$50 off one hearing aid; \$125 off two.

**Premier LASIK** | Save \$800 on LASIK when you choose any “featured” Premier LASIK Network provider. Save 15% with all other in-network providers.

**TruVision** | Save up to 40% on LASIK eye surgery at more than 1,000 locations.

**Hearing Care Solutions** | Digital instruments start at \$500, and a hearing exam is free. Hearing Care Solutions has 3,100 locations and eight manufacturers, and offers a three-year warranty, batteries for two years and unlimited visits for one year.

**ProClear™ Aligners** | Take \$1,200 off a set of custom aligners. You can improve your smile without metal braces and time-consuming dental visits. Your order is 50% off and includes a free whitening kit.

## MEDICINE AND TREATMENT DISCOUNTS

**SelfHelpWorks** | Choose one of the online living programs and save 15% on coaching to help you lose weight, stop smoking, manage stress or diabetes, restore sound sleep or face an alcohol problem.

**Allergy Control Products and National Allergy Supply** | Save up to 25% on select doctor-recommended products such as allergy-friendly bedding, air purifiers and filters, asthma products and more. Orders over \$59 include free ground shipping within the continental U.S.

**Brevena** | Enjoy a 41% discount on BREVENA® skin care creams and balms for smooth, rejuvenated skin from face to foot.

**Puritan's Pride®** | Choose from a large selection of discounted vitamins, minerals and supplements from Puritan's Pride.





# BENEFIT RESOURCES



# BENEFIT CONTACTS



BENEFIT	PROVIDER	PHONE	WEBSITE/EMAIL
Medical	Anthem	800-295-4119	<a href="https://www.anthem.com">Anthem.com</a>
Pharmacy	TrueScripts	844-257-1955	<a href="https://memberportal.truescripts.com">MemberPortal.TrueScripts.com</a>
Mail-Order Pharmacy	Care-Fill LTC	Call   844-522-2273 Fax   844-308-1485	<a href="https://carefillltc.com">CareFillLTC.com</a>
Mail-Order Pharmacy	Costco	Call   844-607-6861 Fax   800-633-0334	<a href="https://pharmacy.costco.com">Pharmacy.Costco.com</a>
HSBT Health and Wellness Centers	Community Health	317-497-6140	<a href="https://mywebahead.com/hsbt">MyWebAhead.com/hsbt</a>
Virtual Visits	LiveHealth Online	888-548-3432	<a href="https://livehealthonline.com">LiveHealthOnline.com</a>
Dental	Anthem	877-604-2142	<a href="https://www.anthem.com">Anthem.com</a>
Vision	Anthem	866-723-0515	<a href="https://www.anthem.com">Anthem.com</a>
Health Savings Account	Contact HR	Contact HR	Contact HR
Life and AD&D Insurance	OneAmerica	800-249-6269	<a href="https://www.oneamerica.com">OneAmerica.com</a>
Employee Assistance Program	Community Health	800-543-4158 or 317-621-7742	<a href="https://mywebahead.com/hsbt">MyWebAhead.com/hsbt</a>





# SEARCH FOR AN IN-NETWORK PROVIDER ONLINE



## MEDICAL

### ANTHEM

[Anthem.com](https://www.anthem.com)

1. Click “Find Care”
2. Log in or continue as a guest
3. If you continue as a guest, select your type of plan: “Medical Plan or Network”
4. Select your state
5. Select “Medical (Employer-Sponsored)”
6. Select “**Anthem Blue Access**”
7. Select “Continue”
8. Enter your City, County or ZIP and search by doctor, hospital, procedure and more

## DENTAL

### ANTHEM

[Anthem.com](https://www.anthem.com)

1. Click “Find Care”
2. Log in or continue as a guest
3. Select “Dental Plan or Network”
4. Select “Indiana”
5. Select “Dental”
6. Select “**Dental Complete**”
7. Select “Continue”
8. Enter your City, County or ZIP and search by doctor, hospital, procedure and more

## VISION

### ANTHEM

[Anthem.com](https://www.anthem.com)

1. Click “Find Care”
2. Log in or continue as a guest
3. Select “Vision Plan or Network”
4. Select “Indiana”
5. Select “Vision”
6. Select “**Blue View Vision**”
7. Click “Continue”
8. Enter your City, County or ZIP and search by doctor, hospital, procedure and more



# BENEFIT GLOSSARY

## BALANCE BILLING

When you are billed for the difference between the provider's actual charge and the amount reimbursed under the medical, dental or vision plan. This occurs when you go outside of the preferred provider network. Balance billing does not apply toward your out-of-pocket maximum.

## COINSURANCE

The percentage of the cost you pay for covered services after you meet your deductible.

## COPAYMENTS (ALSO CALLED COPAYS)

A flat fee you pay for a covered healthcare service. You will typically pay your copay at the time of service, and then the plan will pay any remaining amount.

## DEDUCTIBLE

The amount you are required to pay each year before certain benefits are paid for by the plan. Once you meet the deductible amount, expenses are covered by the plan based on the coinsurance percentage. The deductible resets on Jan. 1 each year.

## EXPLANATION OF BENEFITS (EOB)

A packet, usually mailed to you, that explains how your claim was processed by the insurance company. The EOB details what portion of the claim was paid by the insurance company and what portion is your responsibility.

## HEALTH SAVINGS ACCOUNT (HSA)

An HSA is a special, tax-advantaged, interest-bearing savings account you can use for qualified healthcare expenses such as your deductible, copayments, and other out-of-pocket expenses.

## HIGH-Deductible Health Plan (HDHP)

A plan with a higher deductible than a traditional insurance plan. You pay more health care costs yourself before the insurance company starts to pay its share (your deductible). An HDHP can be combined with a HSA, allowing you to pay for certain medical expenses with money free from federal taxes.

## NETWORK

The doctors, hospitals, and other healthcare providers your insurance company has contracted with to provide services at discounted rates. You will pay less when you use in-network providers. Some plans will not cover the care you get outside of the network.

## OUT-OF-POCKET MAXIMUM (OOPM)

The most you pay in a calendar year for covered services. If you reach the OOPM, the plan pays 100% of covered expenses for the rest of the plan year.

## PLAN YEAR

The plan year refers to Jan. 1 through Dec. 31.

## USUAL, CUSTOMARY, AND REASONABLE (UCR) CHARGES

Healthcare charges determined by your health insurance provider and based on the range of fees charged by doctors with comparable training and experience for the same or similar service in your area. When you receive in-network care, UCR charges do not apply. You are responsible for amounts over UCR for out-of-network care.



*The information in this enrollment guide is based on information provided by the employer and various benefit documents. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between this guide and the actual plan documents, the plan documents will prevail. All information is confidential pursuant to the Health Insurance Portability and Accountability Act of 1996.*

*Guide prepared by The MJ Companies.*