2017

Annual Enrollment

A quick reference guide







Choose the benefits that fit your budget and life.

It's never been easier.

You have a lot of great benefits to consider for 2017, along with a completely redesigned Benefits Outlook website to help you do that. Try the new Price Your Plan tool for a quick look at your costs as you consider your choices. And check out the updated Ben 101 video tour for help understanding more about how your benefits work.

To see your current coverage, go to **katybenefits.org**, click the QUICK LINKS button in the top right-hand corner, and then click ENROLL IN 2017 BENEFITS. If prompted, use your Katy ISD login and password.

Remember, even if you're happy with what you have now, you must enroll in 2017 benefits. Your 2016 benefits don't automatically roll over to 2017.

A look at what's new for 2017

Unfortunately, as health care costs continue to rise, so do our premiums. For 2017, the medical plan premiums are going up for all but the Consumer Basic Limited employee-only coverage. The increases for all other plans range from \$2 to \$25 per pay period, depending on how many people you cover.

The district continues to share the cost by contributing \$385 per month toward your premium.

Medical plan coverage changes

ER copay now \$250

Unnecessary trips to the emergency room cost the district millions of dollars each year. That's why it's so important not to use hospital or standalone ERs for minor illnesses and injuries, even after hours—especially when there are so many urgent care and walk-in retail clinics available.

These ER costs affect all of us. To compensate, the ER copays for 2017 are going up from \$150 to \$250 and the coinsurance is increasing by 10%.

Wellness incentive changes

In 2017, there are no HealthFund incentives for completing your online health assessment or your annual well-person visit. Please don't let that keep you from getting your preventive care (it's free) and taking advantage of all the great Viverae wellness program resources (also free), including online health challenges and personal fitness tools and trackers.

Viverae is introducing a points-based Healthy Challenge program for 2017, along with a new website and mobile app to make it even more fun to join in and get healthy.

Voluntary plan highlights

There are no changes to the way our voluntary plans work, and only a rate change for the Dental HMO premiums. Increases range from \$0.46 to \$1.13 per pay period.

The Affordable Care Act

The Affordable Care Act requires everyone to have health care coverage that meets minimum guidelines for affordability and value. If you don't, you may have to pay a fee on your federal tax return.

All Katy ISD health plans meet the guidelines for value, and the Consumer Basic Limited employee-only premium qualifies as affordable. If you're eligible for benefits, you can simply enroll in any Katy ISD health care plan to avoid the fee and enjoy the generous contributions Katy ISD makes on your behalf.

For complete details about the Affordable Care Act and how it affects you, go to healthcare.gov.

Benefits run on a different schedule.

If you enroll during annual enrollment, your 2017 coverage begins January 1 and ends December 31. It's one of the few things that don't follow the school calendar.

The Affordable Care Act rates health plans based on their actuarial value (the percentage of expenses paid for by the plan). Plans are distinguished by metal levels, from bronze to platinum.

Here's how Katy ISD's coverage options are rated.

Katy ISD medical plan option	Metal level
Consumer Basic Limited and Choice	Silver
Consumer Plus Limited and Choice	Gold

Enrollment options

Be sure to check out the Benefits Outlook website at **katybenefits.org** as you consider your coverage for 2017. It's a great place to find friendly, helpful answers and information about all of your Katy ISD benefits, along with tips and tools for staying healthy.

When you're ready, this is also where you complete your online enrollment, or you can enroll by phone if you prefer.

Remember, your benefits don't roll over to 2017 automatically. You have to enroll every year even if you want to keep the same options. If you don't, you won't be covered starting January 1, 2017.

Sign up for benefits-related text messages.

Text *KISD* to 313131 to sign up for text alerts with important Katy ISD benefits information—things like advance notice of enrollment meetings, special benefits programs, updates and more.

Use your benefits to stay healthy.

Katy ISD provides a wide array of great benefits, from health insurance to life insurance, and from dental plans to wellness programs. Take your time. Study your options. Everyone has different needs, health issues, budgets and goals. By choosing your options carefully, you and your family can get the coverage you need, and maybe even transform your health.

Affordable Care Act accountability

For tax purposes, the IRS requires us, and you, to verify and report your medical plan eligibility, coverage selection and covered dependents' tax ID numbers and legal names. You should receive your 2016 Form 1095-C with this information in early 2017.

Take a good look at provider networks.

Pay a little more to have more options. Or don't. It's up to you. Here's help making your selection.

Consumer plan network options

The Consumer plans have two provider networks to choose from: Limited and Choice.

Limited network highlights

- Choose any primary care physician in the Aetna network.
- You're "limited" to Memorial Hermann hospitals and facilities for inpatient or outpatient hospital care.
- You must choose from specialists in 12 certain designated categories, plus oncologists and hematologists who have admitting privileges and can arrange for hospital procedures at a Memorial Hermann hospital.
- Outside of these designated specialties, you're free to choose any physicians in the Aetna network.

Choice network highlights

- Choose any primary care physician in the Aetna network.
- Choose from two tiers of hospitals and specialists in 12 designated categories.
- Tier I hospitals and specialists cost you less because they're designated as the most efficient providers based on quality of service and cost of care.
- · You choose between Tier I and Tier II when you receive care, not when you enroll.
- Outside of these designated specialties, you're free to choose any physicians in the Aetna network.

For a complete list of network hospitals in Tier I and Tier II, please go to katybenefits.org/plan-benefits/medical-plans.

Consumer plan designated specialties*

Cardiology
Obstetrics & gynecology

▶ Cardiothoracic surgery
▶ Orthopedics

▶ Gastroenterology
▶ Otolaryngology

► General surgery ► Plastic surgery

▶ Neurology
▶ Urology

*Limited network members must also choose oncologists and hematologists who have admitting privileges and can arrange for hospital procedures at a Memorial Hermann hospital.

Find the plan that works best for you.

You have several choices. Compare and save.





Consumer Basic and Plus

You have two Consumer plan options to choose from. These options give you great flexibility, allowing you to control how you spend your health care dollars. The main differences between the two options are the premium rates and your potential out-of-pocket costs.

It's a tradeoff, basically. If you choose a Consumer Basic option, your premiums (what comes out of your paycheck) are lower, but your annual deductibles and coinsurance percentages are higher. With a Consumer Plus option, you pay slightly higher premiums, but your annual deductibles and coinsurance percentages are lower.

We get you started with a HealthFund.

The district contributes annually to a HealthFund for all employees enrolled in a medical plan. You use this money to pay for covered medical expenses like office visits, lab work, tests and to help you meet your deductible. The contributions are prorated, depending on when you sign up for coverage.

Any unused funds roll over to the next year, so you can build a nest egg for future health care expenses as long as you stay enrolled in a Katy ISD Consumer option.

If you're enrolled in a health care flexible spending account (FSA), your HealthFund pays for eligible medical expenses first. When your HealthFund is exhausted, you can use your health care FSA for remaining medical expenses. Dental and vision expenses are the exceptions; you can use your health care FSA for those, regardless of the status of your HealthFund.

Quick plan comparisons

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© Consumer Basic	Consumer Plus
HealthFund	HealthFund
\$400 employee only	\$650 (i) employee only
\$650 employee + spouse	\$900 employee + spouse
\$650 employee + child(ren)	\$900 🎧 employee + child(ren)
\$900 employee + family	\$1,150 employee + family
From each pa	ycheck, you pay
Limited Choice	Limited Choice
\$46 🚯 \$56	\$63 (3) \$81
\$244 💮 \$271	\$271 🙀 \$338
\$164 😱 \$183	\$185 🔬 \$232
\$326 🕋 \$365	\$361 \$451
When you get in-	network care, you pay
Limited Choice Tier I / Tier II	Limited Choice Tier I / Tier II
Annual deductible	Annual deductible
\$2,250 \$2,250 / \$2,750	\$1,750 (\$) \$1,750 / \$2,250
\$4,500 \$4,500 / \$5,000	\$3,500 \$3,500 / \$4,000
Out-of-pocket max	Out-of-pocket max
\$5,500 \$5,500 / \$6,850	\$4,500 (3) \$4,500 / \$6,000
\$11,000 \$11,000 / \$12,500	\$9,000 \$9,000 / \$10,500
Doctor visits Free preventive care	Doctor visits Free preventive care
25% primary care 25% / 45% primary and specialist care and specialist	20% primary care 20% / 35% primary and specialist care and specialist

Rates shown are per pay period, based on 24 paychecks per year.

Review your prescription drug benefits.

Short-term prescriptions

For short-term prescriptions, take your prescription and your ID card to a participating pharmacy. For generic drugs, you pay a \$20 copay with no deductible. For brand-name drugs, you have an annual \$200 per-person prescription drug deductible. After you meet this deductible, you pay the lesser of the actual drug cost or a copay for each prescription.

Mail or retail partner pharmacies for maintenance medications

Save money by purchasing 90-day supplies of your maintenance medications through the Express Scripts mail service or at a local retail partner. These include Kroger, Costco, HEB, Costco, Randalls, Sam's Club and Walmart. (Please note: CVS and Walgreens are not 90-day retailers.) You can place your order online, by phone or by mail. Ask your physician for a 30-day prescription for your initial fill(s) and a second prescription for a 90-day supply and refills for up to one year, if appropriate, so you can take advantage of these savings.

No-cost prescriptions for high blood pressure, high cholesterol, asthma and diabetes

Generic drugs for high blood pressure, high cholesterol, asthma or diabetes (including injectable insulin) remain available at no cost to you, as long as you're enrolled in a Katy ISD medical plan and purchase 90-day supplies through Express Scripts or at an Express Scripts retail pharmacy partner.

Specialty drug prescriptions

For specialty drugs, which are only available in a 30-day supply, use the Express Scripts specialty mail program or Accredo.

All medical plan options include prescription drug benefits through Express Scripts, available at any participating pharmacy and through mail order.

Prescription drug plan highlights

Prescription deductibles

Generic	No deductible
Brand name	\$200 per person

Prescription drugs—30-day retail

Generic	\$20
Preferred brand	\$40
Non-preferred brand	\$80

Prescription drugs—90-day mail or retail

Generic	\$40
Preferred brand	\$100
Non-preferred brand	\$200

Make your plan work harder.

Take advantage of extra coverage options for you and your family.

There are many ways to customize your plan with voluntary options that add financial protection to meet your individual needs.



Flexible spending accounts (FSAs)

Set aside pre-tax dollars to pay for eligible medical or dependent day care expenses. You decide ahead of time how much you anticipate spending for the entire calendar year, and that amount is available to you tax-free.



Dental plans

Both dental plans pay preventive care at 100%.

Dental HMO

You select a primary care dentist who directs your dental care. Only in-network services are offered.

Dental PPO

You pay a deductible for basic, major and orthodontic care. You may visit any dentist you choose, but using an in-network dentist can save you money.

	Dental HMO	Dental PPO
Employee only	\$6.79	\$22.86
Employee + spouse	\$12.71	\$46.39
Employee + child(ren)	\$9.66	\$41.60
Employee + family	\$16.62	\$58.63



Vision plan

This plan provides in- or out-of-network coverage for an eye exam and pair of corrective lenses once per calendar year.

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Employee only	\$4.11
Employee + 1	\$7.18
Employee + 2 or more	\$10.29

Rates shown are per pay period, based on 24 paychecks per year.



Life and accidental death and dismemberment (AD&D)

Life insurance is paid to your beneficiaries if you die while covered by the plan. AD&D benefits are paid to you or your beneficiary if you have a covered loss that is the direct result of an accident. Katy ISD provides a basic level of coverage for all benefits-eligible employees (\$20,000 each for both life and AD&D for most employees) at no charge. You can purchase additional coverage for yourself, your spouse and your children.

Supplemental Life and AD&D (Rates are per \$10,000)

Your age	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
January 1 of plan year	\$0.30	\$0.35	\$0.40	\$0.45	\$0.65	\$0.90	\$1.30	\$2.00	\$2.95	\$4.65

	Spous	se Life		Child	d Life
Benefit level	\$10,000	\$20,000	\$35,000	\$5,000	\$10,000
	\$0.70	\$1.40	\$2.45	\$0.20	\$0.40



Disability

Pays a benefit of 66.67% of your annual salary if your doctor says you can't work due to an injury, illness or pregnancy. You can choose a waiting period of 14 or 90 days.

Disability

14-day waiting period	1.26% of salary
90-day waiting period	.60% of salary



Personal legal plan

This plan provides personal legal guidance on a variety of issues and services, including will preparation, name change, real estate closing and uncontested adoption.

Lega

Employee only	\$6.89
Family	\$8.11

Take advantage of great, free resources.

Free to all employees

24/7 Nurse Line

For help from a registered nurse day or night, call 866-222-KISD (5473).

Beacon Health employee assistance program

Available to all employees and their families, for free and confidential 24-hour support for all kinds of personal challenges, call 877-694-9281.

Viverae

Take advantage of personalized wellness resources through the MyViverae website, including health challenges, activity tracking, webinars and special programs. If you're enrolled in a medical plan, you also have access to personal health coaches and disease management coaches.

Free to medical plan members

DiabetesAmerica

Get complete, personalized diabetes care, from doctor visits, diagnostic testing and lab work to treatment and education—all under one roof.

Aetna Member Payment Estimator

Go to Benefits Outlook and click the Aetna Navigator quick link to use the Member Payment Estimator to compare cost estimates for more than 550 common services and procedures, from office visits and lab tests to high-tech scans, surgeries and more.

Now you're ready to enroll.

Online enrollment, made easy.

Once you've studied your options and made your selections, it's time to let us know about them.

Here's how you get there:

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- Go to **katybenefits.org** and click the QUICK LINKS button in the top right-hand corner.
- Click ENROLL IN 2017 BENEFITS and follow the prompts. If asked to log in, use your Katy ISD login and password.
- Look for the personalized confirmation statement you receive by mail in early December and report any changes or corrections to Benefits Outlook.
- 4 Check the numbers and verify that your deductions are correct on your first pay stub in January.

Enrollment dates

November 2 - 16, 2016

Don't miss the deadline.

Online enrollment ends at 11 p.m. CT and phone enrollment ends at 7 p.m. CT on Wednesday, November 16.

If you need help enrolling, call a Benefits Outlook specialist at 866-222-KISD (5473). English- and Spanish-speaking representatives are available Monday through Friday, 7 a.m. to 7 p.m. CT, except holidays.





DISCLAIMER: This guide provides an overview of your benefits options. The complete provisions of the plans, including legislated benefits, exclusions and limitations, are set forth in the plan documents or insurance contracts. The insurance contracts are available for your review in the Katy ISD Benefits Office. If the information in this guide is not consistent with the plan documents or insurance contracts or state and federal regulations, the plan documents, insurance contracts and state and federal regulations will prevail. This guide is not intended as a contract of employment or a guarantee of current or future employment. This enrollment guide constitutes a summary of material changes for the 2017 plan year. Please share these materials with your covered family members.