



BENEFITS GUIDE

Jan 1 – Dec 31

Hoosier School
Benefit Trust

WELCOME

to your

BENEFITS



This digital interactive benefit guide was created to help you navigate through your benefits with just a few simple clicks.

If you are using your computer, be sure to use your mouse to hover over graphics — some will lead you to interactive links.

If you are using a tablet or smartphone, look for the cursor icon and be sure to tap it on certain pages.

WHAT ONLINE FUNCTIONS ARE AVAILABLE?

Your Home Screen.



Use the side arrows to jump to the next page or the previous page.

Navigation Bar on the bottom of the page.



Toggle thumbnails to quickly glance through the pages and pick which one you want to view.

Use full-screen mode to get a closer look. For an even closer look, zoom in with the magnifying glass.

Download a PDF to save the guide to your device. Please note that some digital functions will be lost. You can also print your guide from the PDF.

DISCOVERING YOUR BENEFITS

	Carrier	HSBT Pays	You Pay	Find it on Page
Enrolling in Your Benefits	HSBT	-	-	5
Medical Plan Options	Anthem	✓	✓	8
About an HSA	Contact Your HR Department for info			12
Prescriptions	TrueScripts	✓		14
HSBT Health and Wellness Clinic	Community Health	✓		15
Smart Shopping Resources	Anthem	✓		18
AIM Specialty Health	Anthem	✓		20
Dental	Anthem	✓	✓	21
Vision	Anthem	✓	✓	22
Employee Assistance Program	Community Health	✓		23
Life and AD&D Insurance	SunLife	✓		25
Voluntary Life and AD&D Insurance	SunLife		✓	26
Benefits Bootcamp	HSBT	-	-	27
Benefits Contacts	HSBT	-	-	28

ENROLLING IN YOUR BENEFITS

NEW HIRE

You have until the end of the month of your date of hire to enroll.

Visit your school's enrollment site.

What should you know?

- Elections made now will remain until the next open enrollment
- You may elect to participate or waive benefits that are offered to you

OPEN ENROLLMENT

During the annual benefits open enrollment period.

Visit your school's enrollment site.



Each school has a different Open Enrollment period! Review the next page for this year's schedule.

Benefits run Jan 1 - Dec 31



QUALIFYING EVENTS

Within 30 days of a qualifying life event.

Contact Human Resources

Some tips if you have a QLE

1. Gather the benefit information that both you and your spouse are eligible for and make sure you have some time to make your decision within 30 days.
2. Review the following questions to compare the two evenly.
 - What level of coverage do we fall into?
 - Does it benefit us financially to both elect our own coverage or is it less expensive for everyone to be covered by HSBT's plan? To decide this, look at Deductibles, Out of Pocket Maximums & Health Savings Contributions.
3. If you've decided to elect HSBT's coverage at any level, the proper paperwork will be made available in HR. We'll help associates through the election process and answer any questions you and your family still have about your options.

ENROLLING IN YOUR BENEFITS

Find your school's enrollment time-frame below. Remember, whether you're electing benefits or waiving them, all decisions must be made by the deadline! Your next opportunity to enroll in benefits will be next year's Open Enrollment or if you experience a Qualifying Life Event.

Beech Grove School Corporation: October 19th - November 5th

CIESC: October 15th - November 30th

Decatur School Corporation: November 1st - November 19th

Franklin Township Schools Corporation: October 1st - October 24th

Lebanon School Corporation: November 1st - November 15th **Perry**

School Corporation: October 13th - November 1st

SSSMC: October 25th - November 5th



WHAT DOES THAT WORD MEAN?

ANNUAL DEDUCTIBLE

ANNUAL OUT-OF-POCKET
MAXIMUM

BALANCE BILLING

COINSURANCE

COPAYMENTS OR COPAYS

HEALTH SAVINGS ACCOUNT
(HSA)

FLEXIBLE SPENDING ACCOUNT
(FSA)

EXPLANATION OF BENEFITS
(EOB)

IN-NETWORK

MEDICARE

PREFERRED PROVIDER
ORGANIZATION (PPO)

USUAL, CUSTOMARY, AND
REASONABLE (UCR) CHARGES

Hoosier School
Benefit Trust

Health

BENEFITS



YOUR MEDICAL INSURANCE OPTIONS

Find Doctors in Your Network 🌟



	PPO PLAN I & II		PPO PLAN III	
	IN NETWORK	OUT OF NETWORK	IN NETWORK	OUT OF NETWORK
IN-NETWORK BENEFITS				
Calendar Year Deductible Individual Family	\$1,500 \$3,000	\$3,000 \$6,000	\$2,700 \$5,400	\$5,000 \$10,000
Out-of-Pocket Maximum Individual Family	\$6,000 \$10,000	\$12,000 \$20,000	\$6,000 \$10,000	\$12,000 \$20,000
PHYSICIAN SERVICES				
Office Visits PCP SPECIALIST	\$40 \$60 copay	40% after deductible	\$40 \$60 copay	50% after deductible
Preventative Care	No Cost		No Cost	
HOSPITAL SERVICES & IMAGING SERVICES				
Inpatient & Outpatient Surgery	30% after deductible	40% after deductible	30% after deductible	50% after deductible
Behavioral Health	\$40 copay - Deductible does not apply		\$40 copay - Deductible does not apply	
Urgent Care	\$100 copay		\$100 copay	
Emergency Room Services	\$250 copay, waived if admitted		\$250 copay, waived if admitted	
Ambulance Services	30% after deductible	30% after deductible	50% after deductible	20% after deductible
Hospice Care	No Charge	No Charge	No Charge	No Charge

CONTINUED PPO I/II, and PPO III



	PPO PLAN I & II		PPO PLAN III	
	IN NETWORK	OUT OF NETWORK	IN NETWORK	OUT OF NETWORK
PRESCRIPTION COVERAGE				
Prescription Drugs RETAIL (30 day supply)	- 30%	40% after deductible	- 30%	50% after deductible
- Tier 1	- 30%, \$40 min		- 30%, \$40 min	
- Tier 2	- 30%, \$60 min		- 30%, \$60 min	
- Tier 3	- 30%, \$300 max		- 30%, \$300 max	
- Tier 4				
Prescription Drugs MAIL ORDER (30 day supply)	- \$40	Not Covered	- \$40	Not Covered
Tier 1	- \$80		- \$80	
Tier 2	- \$120		- \$120	
Tier 3	- 30%, \$300 max		- 30%, \$300 max	
Tier 4				
TOTAL MONTHLY PREMIUM = EMPLOYER + EMPLOYEE CONTRIBUTION				
Employee	\$789		\$649	
Employee + Spouse	\$1,760		\$1,459	
Employee + Child(ren)	\$1,567		\$1,292	
Family	\$2,100		\$1,758	



YOUR MEDICAL INSURANCE OPTIONS



Find Doctors in Your Network 📍

	HDHP/HSA PLAN IV		HDHP/HSA PLAN V	
	IN NETWORK	OUT OF NETWORK	IN NETWORK	OUT OF NETWORK
IN-NETWORK BENEFITS				
Calendar Year Deductible Individual Family	\$3,500 \$7,000	\$5,000 \$10,000	\$5,700 \$11,400	\$10,000 \$20,000
Out-of-Pocket Maximum Individual Family	\$6,900 \$11,500	\$12,000 \$20,000	\$6,900 \$13,800	\$12,900 \$25,800
PHYSICIAN SERVICES				
Office Visits PCP SPECIALIST	30% after deductible	40% after deductible	30% after deductible	50% after deductible
Preventative Care	No Cost		No Cost	
HOSPITAL SERVICES & IMAGING SERVICES				
Inpatient & Outpatient Surgery	30% after deductible		30% after deductible	
Behavioral Health		40% after deductible		50% after deductible
Urgent Care				
Emergency Room Services		30% after deductible		30% after deductible
Ambulance Services		30% after deductible		30% after deductible
Hospice Care		40% after deductible		50% after deductible



	HDHP/HSA PLAN IV		HDHP/HSA PLAN V	
	IN NETWORK	OUT OF NETWORK	IN NETWORK	OUT OF NETWORK
PRESCRIPTION COVERAGE				
Prescription Drugs RETAIL (30 day supply)				
- Tier 1				
- Tier 2	30% after deductible	40% after deductible	30% after deductible	50% after deductible
- Tier 3				
- Tier 4				
Prescription Drugs MAIL ORDER (30 day supply)				
Tier 1				
Tier 2	30% after deductible	Not Covered	30% after deductible	Not Covered
Tier 3				
Tier 4				
TOTAL MONTHLY PREMIUM = EMPLOYER + EMPLOYEE CONTRIBUTION				
Employee	\$519		\$464	
Employee + Spouse	\$1,157		\$1,035	
Employee + Child(ren)	\$1,037		\$928	
Family	\$1,390		\$1,244	



HEALTH SAVINGS ACCOUNT

WHAT IS AN HSA?

By enrolling in the HDHP medical plan, you will have access to a Health Savings Account (HSA), which provides tax advantages and can be used to pay for qualified health care expenses, such as your deductible, copayments, and other out-of-pocket expenses.

YOU HAVE CONTROL:

- Unused money rolls over from year to year in an interest bearing savings account.
- You can use the funds on medical, dental and vision expenses for you and your family.
- You can even invest your funds for the future.
- There is no “use it or lose it” rule.

YOU SAVE ON TAXES:

- All money deposited is not taxed.
- Withdrawals for eligible expenses are exempt from federal income tax.
- You can earn interest tax free.

WHO IS ELIGIBLE FOR AN HSA?

ANYONE WHO IS:

- Enrolled in the HDHP medical plan which is a qualified High Deductible Health Plan.

ANYONE WHO IS **NOT**:

- Covered under any other medical plan that has copays.
- Currently enrolled or plan to enroll in any other medical insurance plan (including, but not limited to: Medicare, a spouse or parent’s plan, Tri-Care or Medicaid) you should consult your tax advisor to determine your eligibility to receive contributions or to contribute to a Health Savings Account.
- Eligible to be claimed as a dependent on someone else’s tax return.





HEALTH SAVINGS ACCOUNT

IMPORTANT CONTRIBUTIONS

FOR 2022, contributions cannot exceed \$3,650 for individual coverage and \$7,300 for employee with dependent(s) coverage annually on a pre-tax basis for the 2022 tax year.

Individuals age 55 and older are eligible to make catch-up contributions of an additional \$1,000 annually.

What if I just want to start my own savings account?

You could! But by shifting money from your paycheck directly into an HSA, you're earning triple-tax savings. Here's how...

1. You avoid income tax on the amount you move into an HSA
2. The interest it accumulates in the account will not be taxed
3. Money that you withdraw from the account is also tax-free

SAVING MONEY

ON PRESCRIPTIONS

WHAT ARE YOUR DRUG COSTS?

If you're not using TrueScripts, they're probably too high. With TrueScripts Pharmacy Benefit Manager, your prescription spending can be tracked, managed and directed towards the best costs.

The difference between costs could be up to the drug brand, where you're filling it, the way it was prescribed and other complex reasons that you shouldn't have to manage each time you need medication. Allow a TrueScripts Member Care Team to help you with it.

By calling the Member Care Team, you will have quick and reliable help ensuring your prescription is both covered and being filled at the best cost for you. You may also learn that you have generic and/or maintenance drugs available to you at NO COST!

Visit

www.truescripts.com

Call

844-257-1955

Learn More!

Click the flyer for more information on TrueScripts and their services.



HEALTH AND WELLNESS

CLINIC SERVICES

FOR QUICK AND AFFORDABLE MEDICAL CARE

NO copayment, **FREE VISIT** for HSBT members and covered dependents covered under the HSBT Health Plan. Some of our favorite services include:

- Personal Health Coaching
- Immunizations, Lab Draws, and Testing
- Prescriptions Fills and Refills

EXAMPLES OF MEDICAL CONDITIONS

Cold & Flu symptoms
Allergies
Pink eye
Respiratory Infection
Sinus + skin problems
Vaccines
Physicals
And much more!

LEARN MORE ABOUT HSBT'S BEST BENEFIT

Schedule an appointment today by visiting
mywebahead.com/hsbt or call 317-497-6140

Learn more by clicking on the flyer to right. There you will find information on locations, hours, complete services and direct phone numbers.

THE IMPORTANCE *of* PREVENTIVE CARE



WHY DO YOU NEED PREVENTIVE CARE?

Even when you're feeling fine, a serious condition could later put your health at risk. Your health coverage offers specific preventive care services at **no out-of-pocket cost** when completed by an in-network provider.

Taking advantage of available services at the right time can help you stay healthier by:

- ✓ Identifying minor issues now before they develop into a major issue later
- ✓ Preventing certain illnesses and conditions
- ✓ Proactively detecting health problems at early stages, when treatments may be more successful

WHAT IS PREVENTIVE CARE?

Services are considered preventive when you don't have any symptoms or diagnosed health issues connected with the preventive service. These services are often provided as part of your wellness exam.

You and your doctor will determine what services are right for you based on your:

Age | Gender | Personal health history | Current health

WHAT IS NOT PREVENTIVE CARE?

If you have been diagnosed by a doctor with a health issue, the additional screenings and tests following this diagnosis are no longer considered preventive.

Your health coverage still provides coverage for these services, but they are not covered under your preventive benefit.

HOW TO

save more

MONEY



UTILIZE IN-NETWORK PROVIDERS.

Your medical costs increase when you visit a provider that is **not in your network**. Make sure to check and confirm your provider is in the correct Anthem network based on your plan selection, especially when being referred to another facility. Go to www.anthem.com/find-care/



LIMIT YOUR VISITS TO THE EMERGENCY ROOM.

Visit the emergency room only in the case of a true emergency. Check your area for an Urgent Care location or Convenience Care Clinic.



SAVE TIME AND MONEY.

Take advantage of the mail order prescription drug program. Check out truescripts.com for more details.



USE GENERIC PRESCRIPTIONS IF AVAILABLE.

Ask your doctor for a Generic or request the Generic equivalent when having your prescription filled. Check with your local retail pharmacy (Fry's, Walmart, Sam's Club, Target, Costco, etc.) to see if your generic medication is on their \$4 or \$10 Generic Prescription List. If your generic medication is on their list, you can save money and also reduce plan costs. To learn more about being a good Rx consumer, [click here!](#)



SAVE MONEY ON PRESCRIPTIONS WITH GOODRX.

GoodRx is 100% free - no obligations, no sign-ups. All you do is download the app, search for your medication, and save money. Even when a prescription drug is covered by insurance, GoodRx is frequently able to find cheaper prices.

RESOURCES FOR THE SMART SHOPPER



Powered by: **Anthem.**

With just one click, you can:

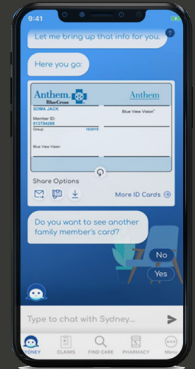
- Find care and check costs
- Check all benefits
- See claims
- Get answers even faster with our chatbot
- View and use digital ID cards

Already using the Anthem app?

It's easy to make the switch. Simply download the Sydney app and log in with your Anthem username and password. When you search "Anthem" in the app store, Sydney Health will be your first option!

Anthem's new app is simple, smart, and **ALL ABOUT YOU**

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.



AT HOME HEALTHCARE WITH LIVE HEALTH ONLINE

No one wants to drive to the doctor's office after waking up with a sore throat or fever. With LiveHealth Online, you can see a board-certified doctor or mental health professional in minutes.

Just use your smartphone, tablet or computer with a webcam. It's so convenient, almost 90% of people who've used it feel they saved two hours or more and would use it again in the future.

SIGN UP FOR FREE TODAY AND GET...

24/7 ACCESS TO DOCTORS.

They can assess your condition, provide treatment options and even send a prescription to the pharmacy of your choice, if needed. It's a great way to get care when your doctor isn't available.

MEDICAL CARE WHEN YOU NEED IT.

For things like the flu, a cold, sinus infection, pink eye, rashes, fever and more.

CONVENIENCE

Since there are no appointments or long waits. In fact, most people are connected to a doctor in about 10 minutes or less.

YOUR GOAL IS OUR GOAL:

QUALITY CARE AT AFFORDABLE COSTS

We offer tools to help you make more informed decisions about care that's right for you. And better choices can mean better value. To learn more about your benefits and ways we can help you, visit [anthem.com](https://www.anthem.com).

HELPING YOU GET THE RIGHT CARE

Taking care of your health is stressful enough. Minding the cost is yet another burden. That's why we have AIM Specialty Health to provide programs that can help you get quality care while keeping your costs down. This allows you to focus more on your health and less on figuring things out.

WHAT AIM PROGRAMS CAN DO FOR YOU:

- Find lower-cost options with high-quality care for common procedures.
- Let you compare prices for specific procedures, like sleep studies, MRIs and arthroscopy.
- Encourage you to find doctors in your plan, which can help you save money.
- Help you get care at the right place, based on your needs.
- Find out if there's evidence a treatment you're told to have is medically necessary.

Anthem **READY TO BEGIN?**
Visit [anthem.com](https://www.anthem.com) today.



YOUR DENTAL INSURANCE

Provided by Anthem 



	DENTAL ENHANCEMENT PLAN	DENTAL CORE PLAN
Annual Deductible (waived for diagnostic services) Individual Family	\$50 \$150	\$50 \$150
Calendar Year Maximum Benefit	\$2,500 per person	\$1,000 per person
Preventive Services Two cleanings per year, Exams, Topical Fluoride, X-rays	Covered 100%	Covered 100%
Basic Services Fillings, Oral Surgery, Sealants, Stainless, Crown	Covered 80%	Covered 80%
Major Services Bridges, Dentures, Crowns, Periodontics	Covered 50%	Covered 50%
Orthodontic Lifetime Max	50% to lifetime max of \$1,500	50% to lifetime max of \$1,000
COST PER MONTH		
Employee	\$46.00	\$33.00
Employee + Spouse	\$99.00	\$72.00
Employee + Child(ren)	\$83.00	\$60.00
Family	\$140.00	\$102.00

YOUR VISION INSURANCE

Provided by Anthem 



Eye Exams (Every Calendar Year)

Prescription Glasses (Every 2 Years)

Frames

Lenses

Contacts (in lieu of glasses)

Extra Savings

CORE VISION PLAN

BENEFITS

\$10 copay

\$10 copay

\$130 allowance, then 20% off any balance

\$10 copay, then included in prescription glasses

\$130 allowances for lenses, then 15% off any balance

See Plan Details



EMPLOYEE ASSISTANCE PROGRAM

provided through Community Health

Problems are just a part of everyday life. You and your household members have access to the WorkLife Matters 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.

Community Health's EAP provides resources to assist with personal and job-related issues. EAP trained counselors maintain confidentiality in providing services to the Individual or Individual's family.

Click on the arrows to view some of the resources an EAP counselor can address.

FOR 24/7 ASSISTANCE:

CALL: 800-543-4158 or 317-621-7742

**AN EAP CAN HELP
ADDRESS THE FOLLOWING ISSUES:**



Hoosier School
Benefit Trust

Financial

BENEFITS



LIFE AND AD&D INSURANCE

Provided through Sun Life 🌟

EMPLOYER-PAID LIFE AND AD&D

In order to assist in providing financial security for an Individual's family in the event of death, HSBT provides Basic Term Life and Accidental Death & Dismemberment coverage at no cost to eligible Individuals through Sun Life. Life insurance may be converted to an individual policy within 31 days of termination or if you cease to be in an eligible class.

COVERAGE AMOUNT	Benefit is based on employment classification
AGE REDUCTION	According to Plan Summary

You must designate a beneficiary for Basic Life and AD&D and Voluntary Life and AD&D. You have the right to change the beneficiary at any time.

CONTINUED

You must designate a beneficiary for Individual Voluntary Life and AD&D. You have the right to change the beneficiary at any time.

VOLUNTARY LIFE AND AD&D BENEFITS

INDIVIDUAL BENEFIT

Increments of \$1,000 up to 5x earnings or \$500,000
Guaranteed Issue: \$200,000

SPOUSE BENEFIT

Increments of \$5,000, not to exceed 50% of employee coverage
Guaranteed Issue: \$50,000

CHILD BENEFIT

Flat amount of \$10,000 beginning at 6 months of age.

THINGS TO KNOW

1. A “guaranteed issue” amount is the dollar amount of coverage you can be approved for without completing a health questionnaire. **Guaranteed issue amounts only apply during the 31 days following your initial eligibility period.**
2. If you wish to enroll in the Voluntary Life and AD&D plan or increase your coverage after your initial eligibility period, you will be required to complete the Evidence of Insurability Form, which contains questions about your health.
3. Rates are based on your age and the amount of coverage you elect. Spouse rates are also based off of the employee age.

Weekly Cost										
Age	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
Employee	.04	.05	.07	.10	.15	.23	.43	.66	1.27	2.06
Spouse	.04	.05	.06	.09	.14	.26	.50	.60	.98	2.63
Child Rate	\$0.1									

BENEFITS BOOTCAMP

WELCOME TO YOUR BENEFITS BOOTCAMP!

Click on the buttons below to dive deeper into lessons behind your benefits. This is your chance to get a better understanding of how these topics can benefit you. These knowledge checks may help you now, and in the future when it comes to saving money in the medical world. *Please login or sign up to have access to quizzes + knowledge checks.*



IMPORTANT **BENEFIT CONTACTS**

BENEFIT	PROVIDER	PHONE		WEBSITE
Medical	Anthem	(800) 295-4119		anthem.com
Prescriptions	TrueScripts	(844) 257-1955		truescripts.com
Dental	Anthem	(877) 604-2142		anthem.com
Vision	Anthem	(866) 723-0515		anthem.com
Life Insurance Voluntary Life Insurance	Sun Life Financial	(800) 247-6875		sunlife.com/us
Employee Assistant Program	Community Health	(800)-543-4158 317-621-7742		
HSBT Health and Wellness Center	Community Health	Harding Street P: 317-497-6140 F: 317-497-6147	Speedway P: 317-497-6140 F: 317-497-6147	East Washington P: 317-497-6140 F: 317-497-6147

HOW TO FIND AN IN-NETWORK PROVIDER

MEDICAL | ANTHEM

www.anthem.com

1. Select Find a Doctor in the top right
2. Log in with either your Anthem login credentials or by using your Identification Number listed on your Anthem ID card
3. Select a specialization and enter your zip code.
4. You can then narrow your search event further and/or review details such as the expected cost of certain procedures and if they are accepting new patients.

DENTAL | ANTHEM

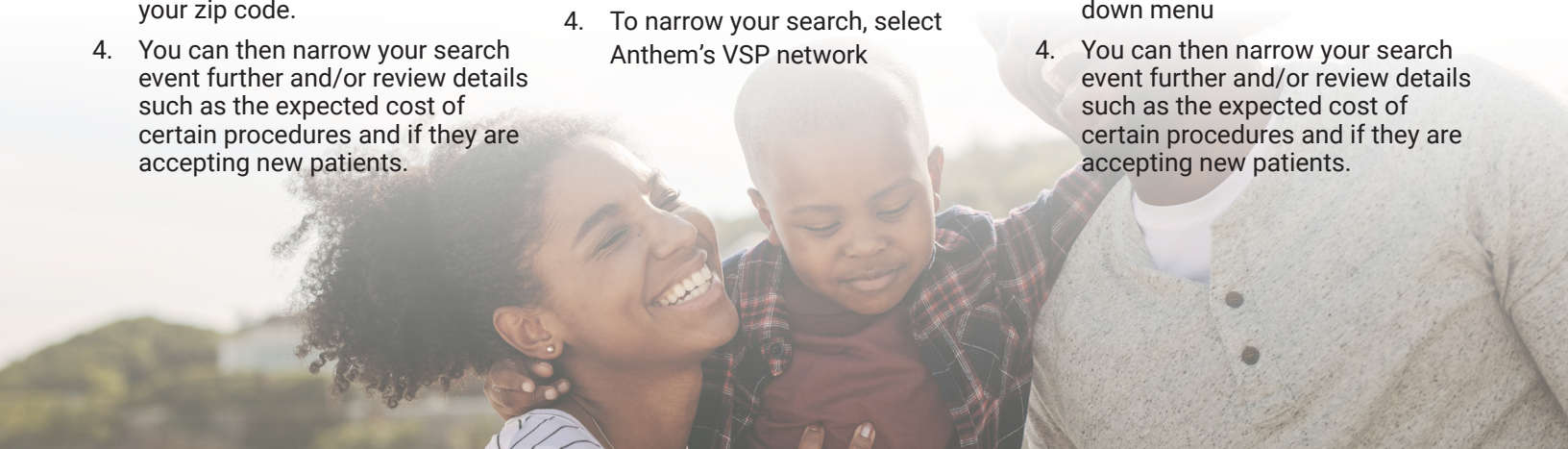
www.anthem.com

1. Select "Provider Search" then "Find a Network Dentist"
2. Enter your search criteria and select "Search"
3. If you would like to enter additional search criteria, do so and select "Update"
4. To narrow your search, select Anthem's VSP network

VISION | ANTHEM

www.anthem.com

1. Select Find a Doctor in the top right
2. Log in with either your Anthem login credentials or by using your Identification Number listed on your Anthem ID card
3. Choose "Vision" from the drop down menu
4. You can then narrow your search event further and/or review details such as the expected cost of certain procedures and if they are accepting new patients.



Hoosier School Benefit Trust

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 always possible. In case of discrepancy between the Guide and the actual plan documents, the actual plan documents will prevail. All information is confidential pursuant to the Health Insurance Portability and Accountability Act of 1996.