

BENEFITS INFORMATION FOR FULL-TIME EMPLOYEES







BENEFITS SALARY

- Benefits salary is defined by each union's salary schedule and it is equal to the employee's annual base salary.
- Benefits salaries will be updated to meet current salary levels and will be determined for all employees annually on June 30th of each year.
- Benefits salary determines:
 - Employee & dependent healthcare premium contribution
 - Board-paid Life Insurance amount (amount is determined by your bargaining unit contract)
 - Disability enrollment eligibility





SALARY BANDS

- Salary bands determines the Board contribution and the employee's per pay deduction for employee and dependent healthcare cost
- Will be reviewed for indexing on a cycle of a three-year term based upon an average of most recently published Consumer Price Index (CPI)





CORE BENEFITS

HEALTH INSURANCE (Board-paid): Following a 90-calendar day waiting period, all full-time benefits-eligible employees will be eligible for Board-paid healthcare (Cigna LocalPlus plan (employee-only)). Coverage will be effective on the 91st day. You will be able to enroll in a plan of your choice for the following plan year after satisfying 12 months of continuous employment in a benefits-eligible position.

Cigna Local Plus – Free Employee-only Option

- No referrals are needed
- Includes In & Out-of-Network specialists
- Comprised of a network of physicians that have demonstrated the best outcomes



CORE BENEFITS

LIFE INSURANCE (Board-paid): Following a 90-calendar day waiting period, all full-time employees receive one time their annual base salary rounded up to the next \$1,000. Coverage will be effective on the 91st day. Administrators and Confidential Exempt employees receive two times their annual base salary. The minimum benefit for employees represented by AFSCME is \$10,000. Additional life insurance may be purchased through payroll deduction to bring maximum benefits to an additional one times the amount provided by the School Board. You will be eligible to increase your coverage to a maximum of fives times the annual base salary after the first year of participation in the optional life program. Evidence of Insurability will be required for any increases in coverage. To find out more about Board-Paid Term Life and Accidental Death and Dismemberment, contact the MetLife Representative at 305.995.7029.

CORE BENEFITS

STANDARD SHORT-TERM DISABILITY (STD) (Board-paid): Following a 90-calendar day waiting period, all full-time benefits eligible employees are provided STD coverage that pays 60% of their weekly earnings. Coverage will be effective on the 91st day. If you do not elect to upgrade your STD plan at the time of hire, you will be subject to Evidence Of Insurability (EOI) when you decide to purchase an upgrade during the open enrollment period.





DECLINATION OF HEALTHCARE

DECLINATION OF HEALTHCARE COVERAGE (OPT-OUT) PROVISION: Following a 90-calendar day waiting period, employees that decline healthcare coverage, will receive \$100 per month paid bi-weekly through the payroll system based on their deduction pay schedule, which is taxable income. You will be required to provide proof of other group or state-funded program coverage.



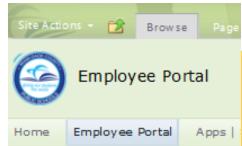


ENROLLMENT AT A GLANCE

As a new employee you will receive an email notification 91-calendar days after your date of hire prompting you to enroll online for your benefits. The email will provide you with your enrollment deadline.

HOW TO ENROLL:

- Log on to your employee portal through dadeschools.net and click on the SAP icon
- ☐ Click on the *Employee Self Service* tab
- ☐ Click on the *Benefits* link
- ☐ Under Life Events, click on the New Hire Enrollment link







Cigna LOCALPLUS PLAN - NO COST SHARE

Coverage	In-Network	Out-of-Network					
Deductible (Individual/Family)	\$750/\$1,500 \$1,500/\$3,000						
Coinsurance	30%	50%					
Maximum Out of Pocket (co-pays, deductibles & co-insurance)	\$4,000/\$8,000	\$8,000/\$16,000					
Primary Care Physician	\$20 (\$10 UHealth Medical Facility)	50%					
CCN Specialist Office Visit	\$50	50%					
Physical, Speech & Occupational Therapies	\$35	50%					
Convenience Care Centers	\$10	50%					
Urgent Care	\$55	\$55					
Emergency Room	\$300/ \$150						
	Prescription Drug Benefits (no out-of-network coverage)						
Prescription Drug Deductible (Ind/Fam)	N/A						
Retail Drug Network	Walgreens, CVS (including Target and Navarro), Wal-Mart, Publix, & some independent pharmacies						
Generic	\$15						
Brand	\$40						
Non-Preferred Brand	You pay 50% (\$100 min/ \$150 max)						
Mail Order Prescription (90-day supply)							
Generic Seven Drug Classes	\$0						
Generic	\$15						
Brand	\$40						
Non-Preferred Brand	You pay 50% (\$100 min/ \$150 max)						





RETAIL PHARMACY NETWORK

What pharmacies participate in the Retail Pharmacy Network?



















KNOW BEFORE YOU GO

Lower Cost and time Greater

Cigna Telehealth Connection	Convenience Care clinic	Doctor's office	Urgent care center	Emergency room
Access telehealth services to treat minor medical conditions. Connect with a board-certified doctor via video or phone when where and how it works best for you. Visit the website or call to register.¹ AmwellforCigna.com 855-667-9722 MDLIVEforCigna.com 888-726-3171	Treats minor medical concerns. Staffed by nurse practitioners and physician assistants. Located in retail stores and pharmacies. Often open nights and weekends.	The best place to go for routine or preventive care, to keep track of medications, or for a referral to see a specialist.	For conditions that aren't life threatening. Staffed by nurses and doctors and usually have extended hours.	For immediate treatment of critical injuries or illness. Open 24/7. If a situation seems life–threatening, call 911 or go to the nearest emergency room. "Freestanding" emergency room (ER) locations are becoming more common in many areas. Because these ERs are not inside hospitals, they may look like urgent care centers. When you receive care at an ER, you're billed at a much higher cost than at other health care facilities.



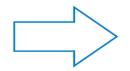


90-DAY PRESCRIPTION FILLS (CVS RETAIL OR CIGNA EXLUCSIVE HOME DELIVERY)

- Cigna 90 Now Broad Retail Network provides an increase in pharmacy access
- Two months co-payment for a 90 day fill
- Maintenance medications have to be filled in a 90-day supply at a CVS pharmacy or Cigna Home Delivery PharmacySM.*

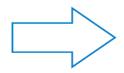


Get a 90-day prescription for your maintenance medication





Take your prescription to a CVS pharmacy or contact Cigna Home Delivery Pharmacy





Receive your medication in a 90-day supply for convenience



2019 FLEXIBLE BENEFITS

Benefits-eligible employees may purchase any of the offered flexible benefits for you and your eligible dependents on a pre or post-tax basis through payroll deductions. Benefits become effective the first of the following month after your first payroll deduction.

Dental Options

DHMO Plans:

Delta Care USA Dental DHMO Plans – Standard and High UnitedHealth care Solstice Dental DHMO Plans – Standard and High

Indemnity Plans:

Delta Dental PPO Plans – Standard and High UnitedHealth care PPO Plans – Standard and High

Vision Options

UnitedHealth care Vision Plan







2019 FLEXIBLE BENEFITS

Legal Plans

ARAG Legal Plan and ARAG Senior Advocate Met Law Legal Plan and Met Law Senior Plan

Identity Theft Protection

Offered by ID Watchdog

Hospital Indemnity

Offered by Cigna

Disability Plans

Offered by The Hartford







2019 FLEXIBLE BENEFITS

Voluntary Life Insurance

Offered by MetLife

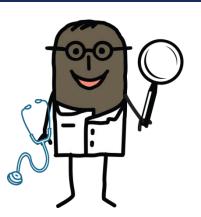
Accidental Death and Dismemberment

Offered by Metropolitan Life Insurance Company (Employees represented by AFSCME are not eligible to purchase this benefit)

Flexible Spending Accounts (FSAs)

Medical and Dependent Care FSA
Offered by TASC









SPOUSAL/DOMESTIC PARTNER SURCHARGE

SPOUSAL/DOMESTIC PARTNER SURCHARGE: Employees who enroll a spouse or domestic partner in a medical plan are required to disclose at the time of enrollment if their dependent has access to group healthcare coverage from their own employer. If so, an additional annual surcharge of \$500 will be charged. The annual surcharge will be billed on a bi-weekly basis according to your pay schedule. If not, the spousal/domestic partner surcharge will not be applied.

Deductions Per Pay Period	Deducciones Por Periodo de Pago	Dediksyon Pou Chak Peryòd Peye
10-month employees: \$25.00	Empleado de 10 meses: \$25.00	10 mwa anplwaye: \$25.00
11-month employees: \$20.84	Empleado de 11 meses: \$20.84	11 mwa anplwaye: \$20.84
12-month employees: \$19.23	Empleado de 12 meses: \$19.23	12 mwa anplwaye: \$19.23





DEPENDENT ELIGIBILITY DOCUMENTATION

- Dependent Social Security Numbers are required during the enrollment process
- Dependent documentation must be provided when requested.
 Failure to submit this required documentation will result in termination of your dependent coverage
- Domestic partner of the same-sex and legally married are able to be added on a tax-free basis with a marriage certificate









plan.

HEALTHCARE BLUEBOOK TRANSPARENCY TOOL

Online and mobile tool that quickly helps you find cost and quality information by ranking local providers in an easy-to-read color system.

Knowing how much your care cost is just as helpful as finding the right provider.

Healthcare Bluebook is available to you as part of your benefits plan for those enrolled in a Cigna









HEALTHCARE BLUEBOOK TRANSPARENCY TOOL

Earn up to a \$500 Reward!

No form to fill out, no receipts to turn in. It's simple! Have questions? Call 888-316-5217

Just follow the steps below, which differ by procedure:

OUTPATIENT

\$35 Reward:

CT Scans

MRIs

\$50 Reward:

Removal of Adenoids Tonsillectomy Cataract Surgery

Cholecystectomy (Laparoscopic)
Ear Tube Replacement
Lithotripsy

\$100 Reward: -

Shoulder Arthroscopy Colonoscopy Knee Arthroscopy Upper Gastrointestinal Endoscopy

INPATIENT

\$500 Reward

Total Hip Replacement Total Knee Replacement Spinal Fusion (Lumbar/Cervical) Hysterectomy (Laparoscopic, Total Abdominal, Vaginal, Lap. Assisted) Benign Breast Tumor Removal







WELL WAY

Visiting your physician for an annual physical is a great start to taking control of your health and welfare.

The mission of Miami-Dade County Public Schools Wellness Program is to:

- Increase employee awareness of benefits and personal health status.
- Maintain a workplace that encourages environmental and social support of healthy lifestyles.

What's Our Goal?

- Build a healthy community of employees and their dependents
- Change the culture of health
- Improve productivity and engagement
- Decrease organizational turnover
- Increase job satisfaction and morale
- Decrease usage of sick days
 - Decrease overall healthcare cost







WELL WAY

Strategies that Drive Wellness Communications:

- Analyzed claim data (health/wellness)
- Field experience
- Needs of employees
- Topics set forth by National Heath Observance Calendar
- Best practices recommended by healthcare carrier







WELL WAY

Goals:

- Increased awareness
- Increased engagement
- Target sites Well Way has never visited
- Increased financial wellness awareness
- Biometric/Health Risk Assessment 60% engagement
- Preventive visit for members who have never used their benefits
- Target chronic conditions in a personalized, in-depth manner
- Site/District competitions (HRA completion, steps, etc.)
- Virtual walking program
- Participation at school based staff meetings





CONTACT INFORMATION

For additional information and to schedule a personal confidential wellness session with our Wellness Educators, call 305.995.2265.

For additional information regarding your benefits, please feel free to contact us at:

- Office of Risk and Benefits Management 1.305.995.7129
- Cigna Healthcare 1.800.806.3052
- M-DCPS/Cigna Wellness Team 1.305.995.2265
- Healthcare Bluebook 1.888.316.5217



