

Risk Management

Benefits Orientation



Renée Brunelle
August 1, 2025

Welcome!

Benefits Team

- Marlyne Velazquez, Benefits Specialist
- Monni Villela, Benefits Specialist
- Brandon Aponte, Benefits Specialist
- Tami Garcia, Benefits/Worker's Comp. Specialist
- Jesse Sotelo, Program Analyst



All Enrollment forms must be completed on the
Ease portal by: Friday, August 8th, 2025



Things to note:

- Please keep questions for the end of all the vendor presentations
- You should have received a welcome email
 - Check PSUSD email
 - Check personal email you provided Human Resources
 - If no email was received, notify Benefits department by emailing riskmanagement@psusd.us



Introducing:

The Baldwin Group

- Ann Marie Estrada, Vice President
- Kelly Fox, Senior Client Executive



Introducing:

Self-Insured Schools of California

- Frank Impastato, Account Manager



SISC

Self-Insured Schools of California
Schools Helping Schools

Palm Springs Unified School District New Employee Orientation 2025

Agenda

The purpose of this presentation is to provide an overview of the health benefits offered by Palm Springs Unified School District:

- Medical Plan Options
- SISC Added-Value Services
- Member Resources

Medical Plan Options

Active employees are given the choice between 6 medical plans:

- **PPO Plans**

- Blue Shield 100-B
- Blue Shield 80-G
- Anthem Proactive Care Platinum+

- **HMO Plans**

- Blue Shield \$10 – Full Network
- Blue Shield \$10 – TRIO Network
- Kaiser \$15

Medical PPO: Blue Shield 100-B

- \$0 Office visit copay for the 1st 3 visits to Primary Doctor each calendar year, then \$20 office visit copay.
- \$20 Urgent Care & Specialist co-pay
- \$100 individual/ \$300 family deductible
- \$100 Emergency room co-pay (waived if admitted within 24 hrs.)
- \$100 Ambulance co-pay (air and ground)
- \$1,000 individual/ \$3,000 family Out-of-Pocket Maximum (*this is the most you will pay in a calendar year while using In-Network providers and facilities, think of this as a 'safety net'.*)

Outpatient **prescription drug** coverage through Navitus Health Solutions:

- \$7 copay for generic/ \$25 copay for brand medication for a 30-day supply
- \$0 copay for generic at Costco for a 30 or 90-day supply (*exception of some narcotic pain medical and some cough syrup with codeine*)
- You do not need to be a member of Costco to use the pharmacy
- Mail order will be through Costco up to a 90-day supply. You will need a new prescription and complete the Costco Mail Order form to begin

It is always the patient's responsibility to confirm benefits and if providers are in-network or contracting. Out-of-network benefits are limited or not covered at all.

Medical PPO: Blue Shield 80-G

- \$0 Office visit copay for the 1st 3 visits to Primary Doctor each calendar year, then \$30 office visit copay.
- \$30 Urgent Care & Specialist co-pay
- \$500 individual/ \$1,000 family deductible
- Plan pays 80% and member pays 20% after deductible has been met for in-network services.
- \$100 Emergency room co-pay (waived if admitted within 24 hrs.)
- \$100 Ambulance co-pay (air and ground)
- \$2,000 individual/ \$4,000 family Out-of-Pocket Maximum (*this is the most you will pay in a calendar year while using In-Network providers and facilities, think of this as a 'safety net'.*)

Outpatient **prescription drug** coverage through Navitus Health Solutions:

- \$7 copay for generic/\$25 copay for brand medication for a 30-day supply
- \$0 copay for generic at Costco for a 30 or 90-day supply (*exception of some narcotic pain medical and some cough syrup with codeine*)
- You do not need to be a member of Costco to use the pharmacy
- Mail order will be through Costco up to a 90-day supply. You will need a new prescription and complete the Costco Mail Order form to begin

It is always the patient's responsibility to confirm benefits and if providers are in-network or contracting. Out-of-network benefits are limited or not covered at all.

Medical PPO: Anthem Proactive Care Platinum+

- \$0 Office visit co-pay for Primary Doctor each calendar year
- \$0 Urgent Care & \$40 Specialist co-pay
- No deductible
- \$200/day Inpatient hospitalization
- \$200 Outpatient procedure at an ASC & \$600 at a Hospital
- \$0 Independent lab & \$50 Hospital lab
- \$25 Radiology center & \$75 Outpatient hospital
- \$300 Emergency room co-pay (waived if admitted within 24 hrs.)
- \$300 Ambulance co-pay (air and ground)
- \$1,000 individual/ \$3,000 family Out-of-Pocket Maximum (*this is the most you will pay in a calendar year while using In-Network providers and facilities, think of this as a 'safety net'.*)



Outpatient **prescription drug** coverage through Navitus Health Solutions:

- \$9 copay for generic/ \$35 copay for brand medication for a 30-day supply
- \$0 copay for generic at Costco for a 30 or 90-day supply (*exception of some narcotic pain medical and some cough syrup with codeine*)
- You do not need to be a member of Costco to use the pharmacy
- Mail order will be through Costco up to a 90-day supply. You will need a new prescription and complete the Costco Mail Order form to begin

It is always the patient's responsibility to confirm benefits and if providers are in-network or contracting. Out-of-network benefits are limited or not covered at all.

Additional: PPO Plan Information

Some services provided by non-contracting or out-of-network providers/facilities are not covered and do not accumulate towards Out-Of-Pocket Maximum such as;

- X-ray, Lab, Durable Medical Equipment (DME) and Physical Medicine which includes chiropractic, physical or occupational therapy.
- If you use an OON Provider, you will be responsible for any charges over the allowed amount that would have been paid to an in-network provider. This is called balance billing.
- This does not apply to emergency services.

Always best to use In-Network Providers

- **IMPORTANT:** Surgeries are to have prior authorization before scheduling. It is best to confirm with the carrier for possible facility restrictions **before** any surgery or scheduled procedure is done.

Medical HMO: Blue Shield “Full Network” HMO: \$10

- \$10 Office visit, Urgent Care & Specialist co-pay
- \$0 Copay per admission for Inpatient Hospital Stays
- \$0 co-pay for Lab, X-Ray, Skilled nursing care, Hospice and Durable Medical Equipment (DME)
- \$0 Deductible on this plan
- \$100 Emergency room co-pay (waived if admitted within 24 hrs.)
- \$100 Ambulance co-pay (air and ground)
- \$1,000 individual/ \$2,000 family Out-of-Pocket Maximum

Outpatient **prescription drug** coverage through Navitus Health Solutions

- \$7 co-pay for generics/\$25 co-pay for brand medication with a 30-day supply – Fill at participating pharmacies **except Walgreens.**
- \$0 co-pay for generics at Costco (30 or 90-day supply)
- Costco Mail Order up to a 90-day supply. Will need a new prescription and complete Costco Mail Order form to begin.

Medical HMO: Blue Shield “TRIO” HMO: \$10

- \$10 Office visit, Urgent Care & Specialist co-pay
- \$0 Copay per admission for Inpatient Hospital Stays
- \$0 co-pay for Lab, X-Ray, Skilled nursing care, Hospice and Durable Medical Equipment (DME)
- \$0 Deductible on this plan
- \$100 Emergency room co-pay (waived if admitted within 24 hrs.)
- \$100 Ambulance co-pay (air and ground)
- \$1,000 individual/ \$2,000 family Out-of-Pocket Maximum

Outpatient **prescription drug** coverage through Navitus Health Solutions

- \$7 co-pay for generics/\$25 co-pay for brand medication with a 30-day supply – Fill at participating pharmacies **except Walgreens.**
- \$0 co-pay for generics at Costco (30 or 90-day supply)
- Costco Mail Order up to a 90-day supply. Will need a new prescription and complete Costco Mail Order form to begin.

Additional: HMO Plan Information

Chiropractic and Acupuncture Benefit:

- 30 combined visits per calendar year
- \$10 copay
- Must use American Specialty Health network (ASH)

Hearing Aid Benefit:

- Audiological evaluations \$10 copay
- Hearing aid instrument & ancillary equipment every 24 months. 50% coverage.
- It is always the patient's responsibility to obtain referrals from their HMO Primary Care Physician or Medical Group to ensure medical services are covered and that their providers are in-network or contracting.
- Make sure to check your new Blue Shield ID cards to ensure the Provider/Medical Group you want is accurate.
- If the information is not correct, call Blue Shield's customer service number on the back of the ID card to request a change. ***Confirm the effective date of requested change with Blue Shield's customer service.***

Navitus Health Solutions

Navitus Health Solutions manages the pharmacy benefits for the SISC PPO & HMO Blue Shield plans

SISC/Navitus Network

- The network includes most independent pharmacies and all major chain pharmacies **except Walgreens.**

Navitus Formulary – Are my medications covered?

Once enrolled you can register with Navitus at www.navitus.com and have access to benefit information and find out if your medication is covered.

To find out if your medication is covered **before** you are enrolled:

- Call Navitus Health Solutions at 1-866-333-2757
- Tell Customer Care you are **“part of Self-Insured School of California but not yet an active member”**
- Tell Customer Care you need to check on your drug under the **RXPID 7x25** offered by your district
- Tell Customer Care you will have the Navitus Book of Business Formulary, and would like information on XYZ drug
- If asked, tell them the carrier is: **Shield NVSHD**

NOTE: The SISC Formulary requires step-therapy for some covered medications or a prior authorization. There are some therapeutic classes of medication that have preferred medications. Members should register with www.navitus.com to view the most up-to-date formulary.

Medical HMO: Kaiser Permanente HMO: \$15

- \$15 co-pay for:
 - Office visit, Urgent Care & Specialist visits
 - Outpatient Hospital or Surgery center visits
 - Physical or Occupational Therapy visits
- \$50 Ambulance co-pay
- \$100 Emergency room co-pay
- \$0 Durable Medical Equipment (must use approved Kaiser DME providers)
- Outpatient **prescription drugs** are filled at a Kaiser Pharmacy
 - \$5 co-pay for generic (30-day supply)
 - \$20 co-pay for brand (30-day supply)
 - Kaiser Mail Order available. (Call Customer Service to begin the process).
- Kaiser members will access care at a Kaiser facility. There are no out-of-network benefits without approval from Kaiser.

Additional: Kaiser Permanente HMO

Chiropractic and Acupuncture Benefits

- \$10 co-pay up to 30 combined visits per year
You can self-refer through American Specialty Health (ASH) Network

• **Hearing Aid Benefit**

- \$500 allowance per device; 1 device per ear; 2 devices every 36 months

• **Kaiser members have access to SISC's Added-Value Services:**

- EAP – Employee Assistance Program
 - Expert Medical Opinion - Teladoc
 - 24/7 Nurse Line
 - Kaiser members can call Member Service and request a “Phone Appointment” (This allows the member to speak with the physician without making a trip to the waiting room).
- Currently enrolled members will maintain their same medical record number.

ID Card Information

- **Blue Shield** will provide new ID cards with the new group number and pharmacy information to the subscriber.
- **PPO Plans:** Blue Shield does not automatically issue PPO ID cards to dependent children. If you need an ID card for your dependent children call Blue Shield Member services at 1-855-256-9404 and request the ID card. ID cards are issued in the subscriber's name.
- **HMO Plans:** Blue Shield HMO ID cards will be issued for each person enrolled on the plan as they may all have a different PCP or Medical Group.

****Be sure to share your new ID card information when accessing medical services and filling a prescription.****

- **Kaiser Permanente** will only provide new ID cards IF the member has not received a card in the last 395 days or:
 - New Enrollment
 - Name Change
 - Requested a Replacement card
- If you have questions regarding benefits or claims, please contact the customer service numbers on your ID cards.

How to Access benefits without an ID card

One ID card is used for both medical and pharmacy services

Blue Shield MEDICAL benefits:

- Call Blue Shield Member Services at 1-855-599-2657 and ask for your ID number and Group Number.
- This information will allow you to register on Blue Shield's website <https://myoptions.blueshieldca.com/sisc> and print a temporary ID Card.

Blue Shield PHARMACY benefits:

- Are managed by Navitus Health Solutions 1-866-333-2757.
- Pharmacy ID is your Blue Shield ID with a two-digit extension (01 for subscriber, 02 for next dependent etc.).

Kaiser Permanente members:

- Call member services at 1-800-464-4000 to confirm enrollment and request your Medical Record Number (MRN).
- Kaiser plans use a Kaiser pharmacy.

Dependent Eligibility Documentation is Required

DEPENDENT TYPE	REQUIRED DOCUMENTATION
Spouse	<ul style="list-style-type: none"> Prior year's Federal Tax Form that shows the couple was married filing jointly (financial information may be blocked out). If you file separately SISC requires a copy of the Marriage Certificate and a Notarized SISC Marriage Affidavit. For <u>newly married</u> couples where the prior year tax return is not available a marriage certificate will be acceptable
Domestic Partner	<ul style="list-style-type: none"> Certificate of Registered Domestic Partnership issued by State of California (AB205 Compliant)
Children, Stepchildren, and/or Adopted Children up to age 26	<ul style="list-style-type: none"> Legal Birth Certificate or Hospital Birth Certificate for newborns less than 6 months of age (to include full name of child, parent(s) name (s) & child's DOB) Legal Adoption Documentation
Legal Guardianship up to <u>age 18</u>	<ul style="list-style-type: none"> Legal Court Documentation establishing Guardianship
Disabled Dependents over <u>age 26</u>	<p>Blue Shield (All items listed below are required)</p> <ul style="list-style-type: none"> Legal Birth Certificate or Hospital Birth Certificate (to include full name of child, parent(s) name & child's DOB) Prior year's Federal Tax Form that shows child is claimed as an IRS dependent (income information may be blocked out) Proof of 6 months prior creditable coverage Completed Blue Shield Disabled Dependent Certification Form <p>Kaiser (All items listed below are required)</p> <ul style="list-style-type: none"> Legal Birth Certificate or Hospital Birth Certificate (to include full name of child, parent(s) name & child's DOB) Prior year's Federal Tax Form that shows child is claimed as an IRS dependent (income information may be blocked out) Proof of 6 months prior creditable coverage Completed Disabled Dependent Enrollment Application Most recent Kaiser Certification notice (if available)

Member Resources: Benefit Information & Claims

Blue Shield PPO & HMO - Member Services

- Blue Shield Concierge 1-855-599-2657 (enhanced level of customer service)
 - www.blueshieldca.com/sisc (register as a member)
 - Download the Blue Shield Mobile App
 - Access EOBs, find providers, contact Blue Shield

Navitus Health Solutions (Rx)

- 1-866-333-2757 (on back of ID card, pharmacy services)
- www.navitus.com (register as a member)
- Review formulary, medication history, mail order form, specialty pharmacy info, prescription benefits

Kaiser Permanente – Customer Service

- 1-800-464-4000
- <https://my.kp.org/sisc/>

Thank you!
Please contact Risk Management/Benefits
if you have any questions

Introducing:

Delta Dental

- Duane Cook, Account Manager





Welcome Palm Springs USD Members!



Dental care is health care

Our mouths tell the stories of our lives.

They also tell doctors important information about our health. That's why Delta Dental is committed to improving health by ensuring **everyone has access to high-quality preventive dental care.**





YOUR CHOICE - PREPAID OR PPO

YOUR CHOICE - PREPAID OR PPO

Features	DeltaCare USA plan (Prepaid)	Delta Dental PPO plan
Dentist network	<ul style="list-style-type: none"> Visit your assigned DeltaCare USA network dentist to receive benefits. Easy referrals to a large specialty care network (referred by selected primary care dentist). 	<ul style="list-style-type: none"> Freedom to choose any licensed dentist, anywhere in the world, each time you or a family member requires treatment. No referral required for specialty care
Selecting a dentist	<ul style="list-style-type: none"> Ability to change selected network dentist monthly with a phone call or email to Customer Service 	<ul style="list-style-type: none"> No need to preregister with a dental office. Ability to change dentists anytime without contacting Delta Dental
Deductible/Maximum	<ul style="list-style-type: none"> No annual deductible and no annual dollar maximum 	<ul style="list-style-type: none"> No annual deductible Has annual maximum
Copayments/Coinsurance	<ul style="list-style-type: none"> All covered procedures have predetermined copayments. No or minimal copayments for most diagnostic and preventive services Minimal or no copayments for many restorative services. 	<ul style="list-style-type: none"> Covered services paid at applicable percentage of (for example, 100%, 90%, 80%, etc.)
Out-of-area coverage	<ul style="list-style-type: none"> Out-of-area (35 or more miles from selected network dentist) emergency care allowance, up to \$100 per incident. 	<ul style="list-style-type: none"> Can visit any licensed dentist

YOUR CHOICE - PREPAID OR PPO

Features	DeltaCare USA plan (Prepaid) [®]	Delta Dental PPO plan
Covered Benefits	<ul style="list-style-type: none">▪ Wide range of covered services including orthodontia▪ Orthodontic takeover for new enrollees who have orthodontic treatment in progress	<ul style="list-style-type: none">▪ Wide range of covered services including orthodontia
Administration	<ul style="list-style-type: none">▪ No claim forms	<ul style="list-style-type: none">▪ Claim forms filed by Delta Dental contracted dentists
Cost Savings	<ul style="list-style-type: none">▪ Visit your selected DeltaCare USA dentist to receive benefits▪ Pay only the copayment at the time of treatment	<ul style="list-style-type: none">▪ You usually have the lowest out-of-pocket expenses when visiting a Delta Dental participating PPO dentist▪ If you don't see a PPO dentist, a Delta Dental Premier dentist is usually your next best option.



Delta Dental PPO

We've Got You Covered

- Visit a PPO dentist to save the most
- You can visit any licensed dentist
- You won't be charged more than your expected share of the bill
- You don't need an ID card to check in
- We'll coordinate dual coverage
- Create an online account to check your benefits and claims online



Visit any licensed
dentist worldwide
and receive benefits

Submit a claim for
reimbursement





Delta Dental PPO



Delta Dental
Premier®



Non-Delta Dental



DeltaCare USA DHMO

DeltaCare[®] USA plan

A great option



Low or no copays
on most preventive
services



All-inclusive
copayments,
so, no billing
surprises



Teeth whitening
covered
(most plans)



No material
or lab fees



No additional
charges for high or
noble metals or
porcelain



Coverage for out-of-
area emergencies



Children covered under a DeltaCare USA plan can now visit a
DeltaCare USA pediatric dentist through age 13

1



Choose a primary care dentist online or by phone

Make an appointment



2

3



Visit the dentist

Pay your copayment (if any)



4

- If you need specialty care, your primary care dentist will refer you
- Your primary care dentist requests authorization for specialty services
- Plan includes out-of-network coverage for emergencies





Go to **deltadentalins.com** to browse the DeltaCare USA dentists in your area.

Write down the facility number of the primary care dentist you would like.

Submit your request

- Online: Create an online account at **deltadentalins.com**
- By phone: Call Customer Service at **800-422-4234**



Member Resources

Online resources and value-added programs

Member portal

Delivering improved member experiences

Dental portal member site

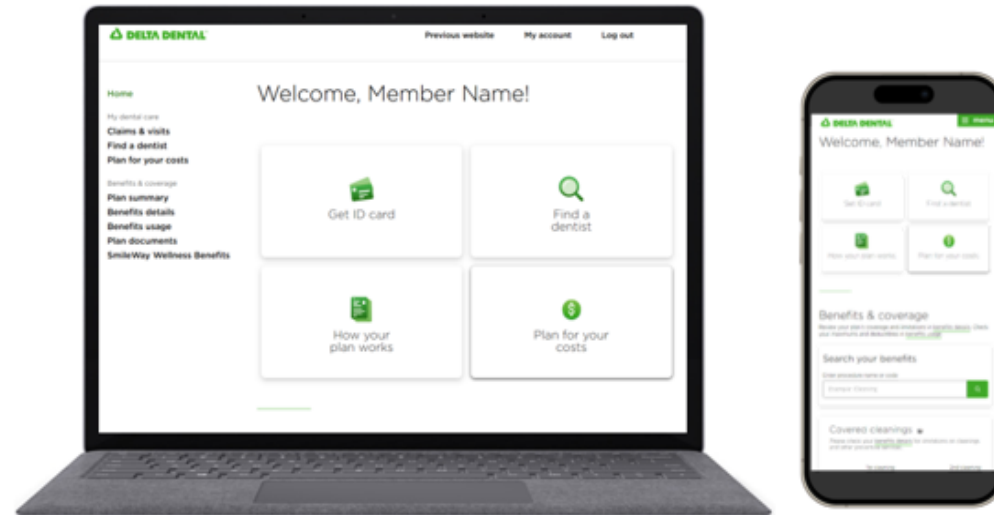
We continually enhance our members' dental portal experience by listening to feedback from our members and field teams and analyzing portal performance to ensure a seamless experience while expanding our self-service offerings.



Simple and intuitive portal dashboard

All members have direct access to:

- Claims
- ID card
- Benefits details
- Benefits usage
- Plan Summary
- Find a dentist
- Plan documents
- Member perks



Member perks

Extra features, exceptional outcomes



Virtual dentistry

Remote consultations
with a dentist

Hearing aids and LASIK

Discounts through
Amplifon and QualSight

LifePerks

Discounts on oral health
products, services,
memberships and more

Wellness resources

Online articles, recipes,
videos and more



Members can learn more at
www1.deltadentalins.com/memberperks



★ Thank you! ★

Break Session

Risk Management

- 9:15 am - 9:30 am



Introducing:

VSP Vision Care

- Ann Marie Estrada

vsp
vision care





Palm Springs Unified School District – New Hire Orientation



Meet VSP® Vision Care



70 Years of
Celebrating Vision

We believe
eye health is
essential for every
single person.

As the
only national,
not-for-profit
vision insurance
company, we put
people before
profits.

We help every
person get the full
benefit of their
benefits.



Essential Medical Eye Care

- Unlimited coverage for urgent and medical eye care¹
- Peace of mind for your Palm Springs Unified School District employees
- Addresses immediate issues with the eye and ongoing monitoring of eye conditions²

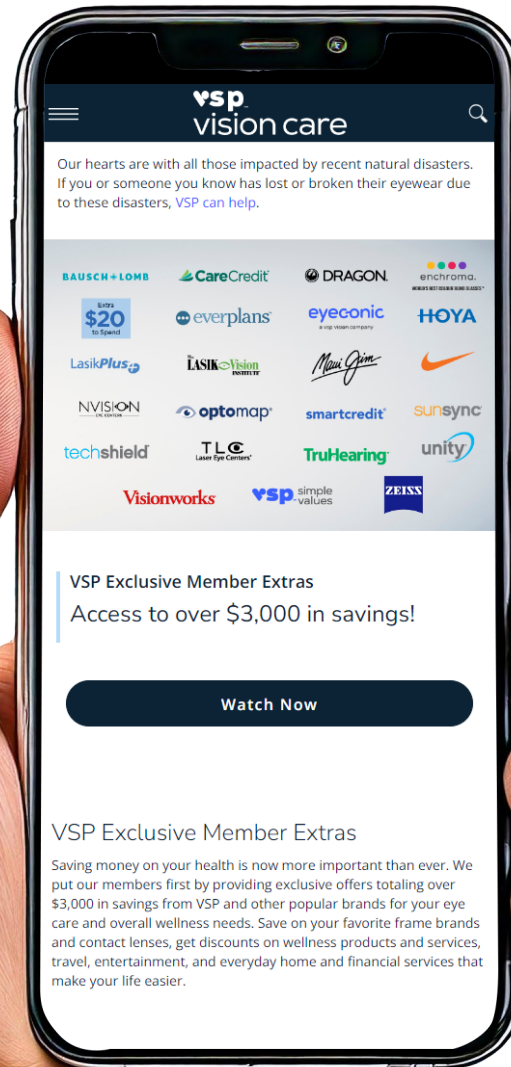


1. Some exceptions apply
2. Essential Medical Eye Care is secondary to your Palm Springs Unified School Districts' medical insurance coverage

Savings Beyond the Expected

Vision | Health | Lifestyle

Members have access to more than **\$3,000** in savings with Exclusive Member Extras



*Exclusive Member Extras are only available through VSP network doctors or participating partners. Some offers may only be available to VSP members with applicable plan benefits. Promotions are evaluated regularly and are subject to change. VSP shall have no liability whatsoever for the services or products or the discounts that may be offered by third parties. These third-party offers are void where prohibited.

VSP Vision Classification: CONFIDENTIAL

Exclusive Member Extras

Glasses & Sunglasses



Premier Edge Promise

LASIK



Contacts

Health & Wellness

Hearing Health



Money & Life Management

Leisure & Lifestyle



*Exclusive Member Extras are only available through VSP network doctors or participating partners. Some offers may only be available to VSP members with applicable plan benefits. Promotions are evaluated regularly and are subject to change. VSP shall have no liability whatsoever for the services or products or the discounts that may be offered by third parties. These third-party offers are void where prohibited.

Your Plan Design Today

	Signature Plan
Frequency	Exam [every service year] Lenses [every service year] Frame [every other service year]
Copays	Exam/Lens/Frame \$15
Frame	\$120 Allowance \$140 Featured Frame Brand Allowance
Contact Lenses	\$105 Allowance
Enhancements and Supplemental Benefits	Polycarbonate for Dependent Children Average savings of 40% on other lens enhancements
Essential Medical Eye Care	\$5 copay per medical exam

Big on Access **PREMIER EDGE VERSION**

137,000 Access Points Nationwide



Largest Network of
Independent Providers



Maximized Savings +
Worry-Free Guarantee



Wide Selection of
Retail Locations



Online
Shopping

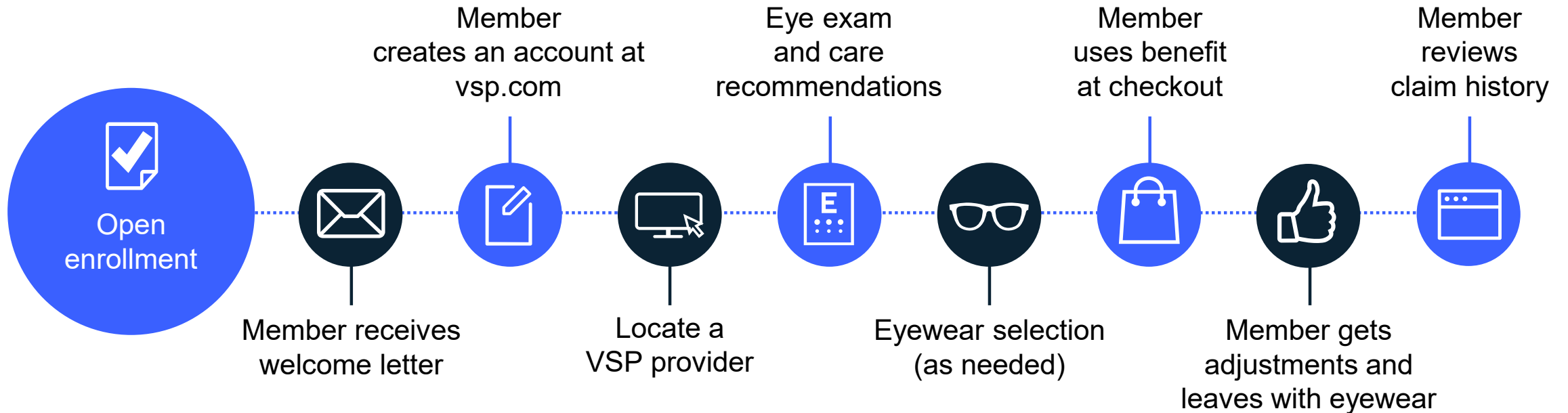
More National and Regional Retailers Near You



Premier Edge is not available for some members in the State of Texas

Palm Springs Unified School District Member Experience

Using VSP® Vision Care Benefits is Simple, Personalized, and Convenient



VSP WellVision Exam[®] Benefits

1. Learn about member's health and lifestyle
2. Assess eye health and vision
3. Screen for signs of diseases and chronic conditions
4. Determine the prescription strength of glasses or contacts



Thank You.



Introducing:

MetLife

- Barry Baricza, MetLife Representative



Group Insurance Benefits



Life Insurance



Life/AD&D Overview

Basic Life and AD&D coverage	Benefit – employer paid
Employee Life / AD&D coverage	Flat Amount Based on Your Class
Spouse/Domestic Partner Life/AD&D	\$1,500
Dependent Child Life/AD&D	\$1,500
Supplemental Life and AD&D coverage	Benefit – voluntary – employee paid
Employee Life / AD&D coverage	Increments of \$10,000 Up to a maximum of \$500,000 or 5 x salary, whichever is less Guaranteed Issue: \$100,000 – no age reduction
Spouse Life / AD&D	Increments of \$10,000 Up to a maximum of \$500,000 but cannot exceed 100% of the employee amount Guaranteed Issue: \$25,000 – no age reduction
Dependent Child Life / AD&D	Under 15 days: \$1,000 15 days – 6 months: \$1,000 6 months – 26 years: options of \$2,500; \$5,000 or \$10,000 Guaranteed Issue: \$10,000 , not to exceed Spouse Coverage

MetLife Advantages

Support, planning and protection when you need it most



Support

- Grief Counseling with Funeral Planning Services^{L2}
Delivering the Promise^{L3}
- Total Control Account^{L5}
- Travel Assistance^{L6}



Planning

- Face-to-Face Will Preparation^{L7}
- Face-to-Face Estate Resolution Services^{L7}
- Funeral Discount & Planning Services^{L9}



Protection

- Coverage for active and retired employees^{L10}
- Transition Solutions^{L3}
 - Portability^{L11}
 - Retirement Solutions^{L3}

Legal Plans



Why a legal plan matters now more than ever



Protection

62% of working adults experience a legal issue over the course of three years^{LP1}



Cost Savings

The average hourly rate to see an attorney is \$391,^{LP2} compared to \$18.00 a month for the legal plan^{LP3}



Increases Financial Security

Your whole family is covered for legal issues that arise.

75%

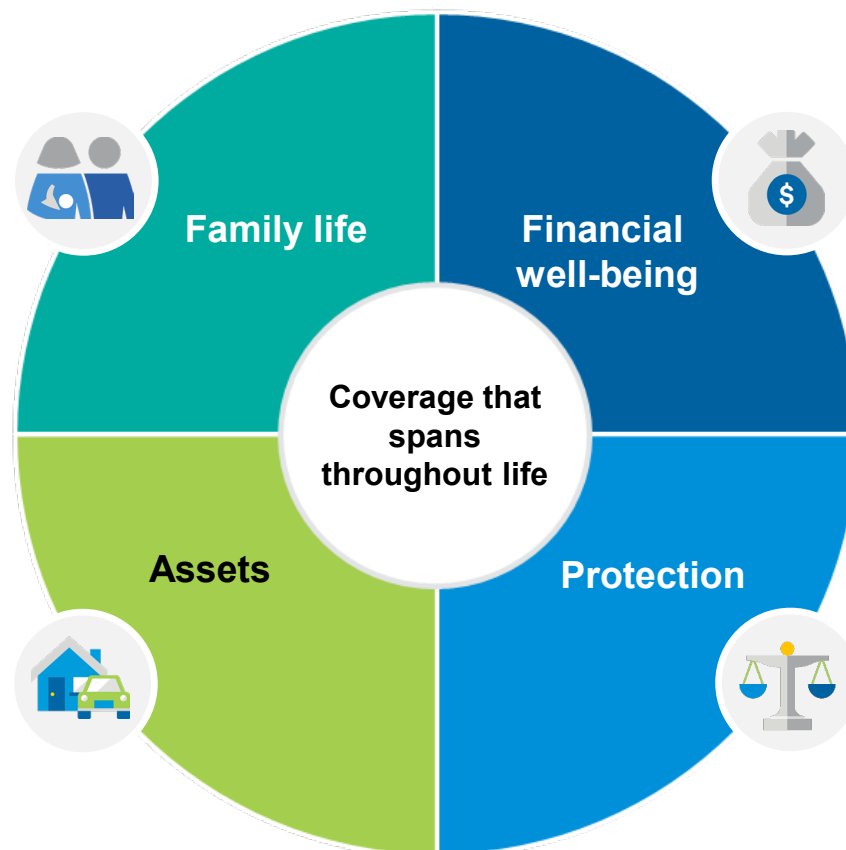
of working adults with a legal plan said they feel confident planning for today and the future^{LP1}

- No copays, deductibles or claim forms when using a network attorney for a covered matter.
- Unlimited consultations even for matters not covered under your plan
- All employees have access to our website to see coverages, attorneys and use our self-help document library

Helping you navigate life's planned and unplanned events

- Adoption
- Prenuptial agreement
- Elder care law matters
- Estate planning

- Buying or selling a home
- Property tax assessment
- Refinancing
- Foreclosure



- Debt issues, bankruptcy
- Negotiating with creditors
- Tax audit representation
- Financial planning workshops^{LP4}

- Identity theft
- Small claims assistance
- Pet liabilities
- Civil matters

Online experience that provides choice and flexibility

Simple and Streamlined Experience

members.legalplans.com



Simple,
secure log in



Get detailed info
on what your
plan covers



Find the
right network
attorney for your
legal matter

A screenshot of the members.legalplans.com website. On the left is a login form with fields for Email and Password, a Login button, and links for 'Create Account' and 'Reset Password'. On the right is a service selection grid titled 'John, what legal service do you need help with today?'. The grid contains six icons with labels: Family Law, Wills & Estates, Debt Matters, Real Estate, Traffic & Criminal, and Injury & Insurance. At the bottom of the grid is a link for 'Other Legal Services'.

Digital Estate Planning Services

While you can't predict life outcomes, you can help prepare for them with Digital Estate Planning



Only a few simple questions



As little as 15 minutes
to complete estate planning
documents online



If needed, can meet
with an attorney



Durable Financial
Power of Attorney



Last Will and
Testament



Advanced Healthcare
Directive (Living Will)

While **76%** of Americans surveyed acknowledge a Will is important, only **30%** have one in place.^{LP5}

The top reason for not creating a will was, **“haven’t gotten to it yet.”**^{LP5}

Legal Plan in Action: Estate Planning



Example covered services	Benefit amount
Will ^{LP6}	\$391
Power of attorney	\$391
Living Will	\$391
Total	\$1,173
Cost of legal plan per year ^{LP7}	\$216
Potential Savings^{LP8}	\$957

Questions? Need help or more info.?



Visit:

www.metlife.com



Call:

1-800-GET-MET8 (1-800-438-6388)

Mondays - Fridays, 8 a.m. – 9 p.m., ET
Saturdays - Sundays, 10 a.m. – 7 p.m., ET

MetLife Legal Plan

1-800-821-6400

Mondays - Fridays, 8 a.m. – 8 p.m., ET

members.legalplans.com

Thank you.

Introducing:

American Fidelity

- Jason Czajkowski, Senior Account Executive





Healthcare Flexible Spending Accounts (FSA)

What Is a Section 125 Plan & Why Have it?

- Allows employers to offer eligible benefits to employees on a pre-tax basis
- Helps reduce your tax and increase your spendable income
- **Designed to help employees save money on important eligible costs, like:**
 - Insurance premiums
 - Health-related expenses
 - Dependent day care expenses

Healthcare Flexible Spending Accounts

How It Works

- Used to reimburse eligible medical expenses
- Expenses may be incurred by you, your spouse, or eligible dependents
- Eligible employees may participate, even if you do not have major medical coverage through your employer

Dependent Care Account (DCA)

- Used to reimburse eligible dependent day care expenses incurred while you are working
- You may allocate up to \$5,000 pre-tax per calendar year for reimbursement of dependent day care services or \$2,500 if you are married and file a separate tax return

Eligible Dependent Care Expenses

- After-school care or extended day care programs
- Babysitter, during work hours, inside or outside participant's household
- Custodial or elder care expenses if the qualifying individual still spends at least eight hours each day in the employee's household

Ineligible Dependent Care Expenses

- Educational expenses (kindergarten and above)
- Custodial elder care (not work-related, for other purpose)
- Nursing home care
- Transportation to and from eligible care
(not provided by the care provider)

Limited Benefit Accident Only Insurance



24-Hour Coverage



Sport-Related
Injury



Wellness Benefit



Over 25
Treatments
Covered

americanfidelity.com/info/accident

This product may contain limitations, exclusions, and waiting periods.

This product is inappropriate for people who are eligible for Medicaid coverage. Wellness not available in all states.

AMERICAN FIDELITY 
a different opinion

Limited Benefit Cancer Insurance



Transportation
and Lodging
Expenses



Multiple Coverage
Options



Diagnostic and
Prevention
Testing



More than 25
Benefits

americanfidelity.com/info/cancer

This product may contain limitations, exclusions, and waiting periods.

This product is inappropriate for people who are eligible for Medicaid coverage.

AMERICAN FIDELITY 
a different opinion

Disability Income Insurance



Guaranteed Issue



Custom Coverage Options



Return-to-Work Benefit



Employee Assistance Program

americanfidelity.com/info/disability

This product may contain limitations, exclusions, and waiting periods.

Limited Benefit Hospital Indemnity Insurance



Hospital Benefit



Accident Benefit



Benefits Paid to
You



No Health
Questions Asked

americanfidelity.com/info/hospital-indemnity

This product may contain limitations, exclusions, and waiting periods. **This product is inappropriate for people who are eligible for Medicaid coverage.** *This product may not be HSA qualified if optional benefits or riders for this coverage are selected.

"Hospital" shall not include an institution, or part thereof, used by the Covered Person as a place for rest or for the aged, a nursing or convalescent home, a long term nursing unit or geriatrics ward, or an extended care facility for the care of convalescent, rehabilitative or ambulatory patients.

ESB-4015-0320

AMERICAN FIDELITY 
a different opinion

Limited Benefit Critical Illness Insurance



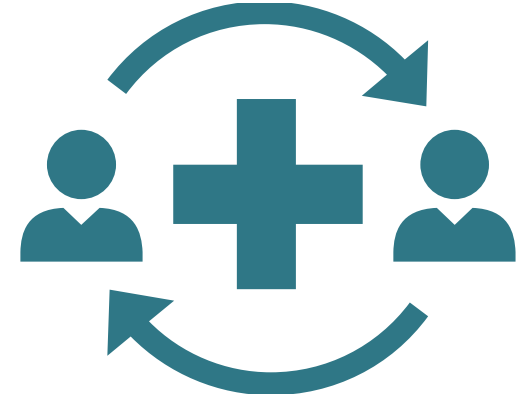
Simplified
Underwriting



Health
Screening



Lump Sum Benefit



Recurrent
Diagnosis Benefit

americanfidelity.com/info/critical-illness

This product may contain limitations, exclusions, and waiting periods.

This product is inappropriate for people who are eligible for Medicaid coverage.

AMERICAN FIDELITY 
a different opinion

Life Insurance Options



- AFTM Term Life Insurance
- AFTM Whole Life Insurance
- Universal Life Insurance

americanfidelity.com/info/life

AFTM Whole Life Insurance and AFTM Term Life Insurance: This product may contain limitations, exclusions, and waiting periods. Not generally qualified benefits under Section 125 Plans.

Universal Life Insurance: This product may contain limitations, exclusions, and waiting periods. Not generally qualified benefits under Section 125 Plans. After the guaranteed period, the premiums may change. Underwritten by Texas Life Insurance Company. Not affiliated with American Fidelity Assurance Company.

AMERICAN FIDELITY 
a different opinion

Questions?

To learn more, contact:

800-365-9180 Ext 0

<https://benefits.americanfidelity.com>

americanfidelity.com

Introducing:

Fringe Benefits Consortium

- Patrick Anabu, FBC Advisor



The FBC Model Plan

Your 403(b), 457(b)
solutions



**Fringe Benefits
Consortium**

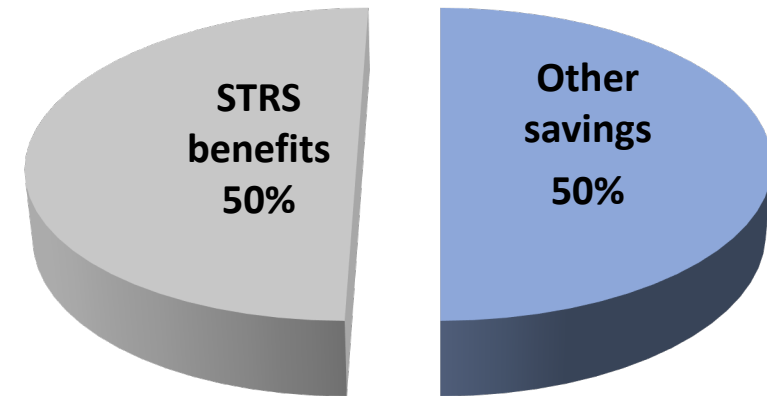


Powered by PlanMember®

Why do you need to save?

Your standard of living in retirement may depend on it!

- State retirement systems (STRS and PERS) are not complete retirement plans and are designed to complement other savings
- California STRS only provides approximately 50% of a career educator's salary*
- Benefits are expected to be reduced in future years



* Source: Welcome to CalSTRS 2023. Applies to applicants in the California State Teachers Retirement System only. Other state retirement system benefits will vary.



Bridging your savings gap

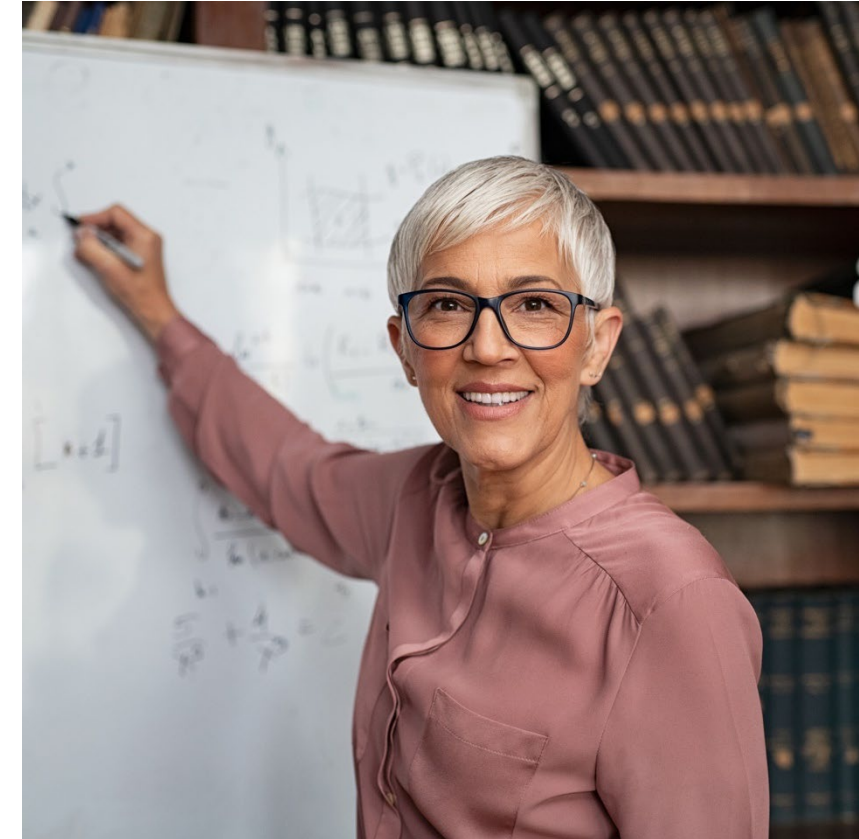
- Helps bridge the gap between State Retirement System benefits and your retirement income needs by participating in your employer's retirement plan
- Assists in providing financial security to you and your family during retirement



What is a 403(b) plan?

The basics

- Primary retirement plan for public schools and nonprofit employers
- Contributions made through automatic payroll deductions on pre-tax and/or after-tax (Roth) basis¹
- Investments grow tax-deferred
- Portable in the event employment changes
- Penalty-free withdrawals at age 59^{1/2} and for qualifying hardship situations
- Required minimum annual distributions (RMD) begin as early as age 73²



1. Roth option not available through all plans. 2. RMDs begin at age 73 for individuals who attain age 72 after December 31, 2022, and age 73 before January 1, 2033. RMDs begin at age 75 for individuals who attain age 74 after December 31, 2032.

What is a 457(b) plan?

The basics

- Voluntary retirement plan offered by governmental and other tax-exempt employers
- Can be made available to select employees
- Contributions made through automatic payroll deductions on pre-tax and/or after-tax (Roth) basis¹
- Investments grow tax-deferred
- Portable in the event employment changes
- Penalty-free withdrawals any time after severance of employment
- Required minimum annual distributions (RMD) begin as early as age 73²



1. Roth option not available through all plans. 2. RMDs begin at age 73 for individuals who attain age 72 after December 31, 2022, and age 73 before January 1, 2033. RMDs begin at age 75 for individuals who attain age 74 after December 31, 2032.

How does the plan work?

An easy, systematic way to save for retirement



Contributions automatically deducted from paycheck through salary reduction



Contributions invested in the investment options you choose from the plan's approved providers



Provides a variety of tax advantages



Transfer assets from account(s) at previous employers or from providers formerly available through the plan



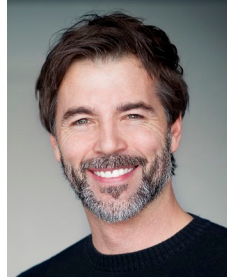
Time is your most valuable asset

The cost of waiting



Hypothetical saver Maria

- Age 21
- Begins saving \$3,000 annually
- Stops saving at age 36 (15 years)
- Account value at age 66 is \$425,119



Hypothetical saver Jim

- Age 36
- Begins saving \$3,000 annually
- Stops saving at age 66 (30 years)
- Account value at age 66 is \$251,405

A \$173,000 mistake		
	Lisa age 21	Jim age 36
Annual contribution	\$3,000	\$3,000
Number of years	15	30
Total investment	\$45,000	\$90,000
Accumulated value at age 65	\$425,119	\$251,405
<p><i>Example assumes hypothetical 6% annually compounded tax-deferred growth.</i></p> <p><i>Example is for illustrative purposes only and not meant to represent the performance of any investment product and should not be used to predict investment performance. Each individual situation is different. Any taxes and expenses associated with an actual investment are not reflected.</i></p>		

The FBC Model Plan | Support



Fringe Benefits
Consortium



Powered by PlanMember®

Website: fbcmodelplan.com

Enrollment: fbcmodelplan.com/enroll

Phone: (833) 752-6322 (Plan-FBC)

Email: support@fbcmodelplan.com



Patrick Anabu

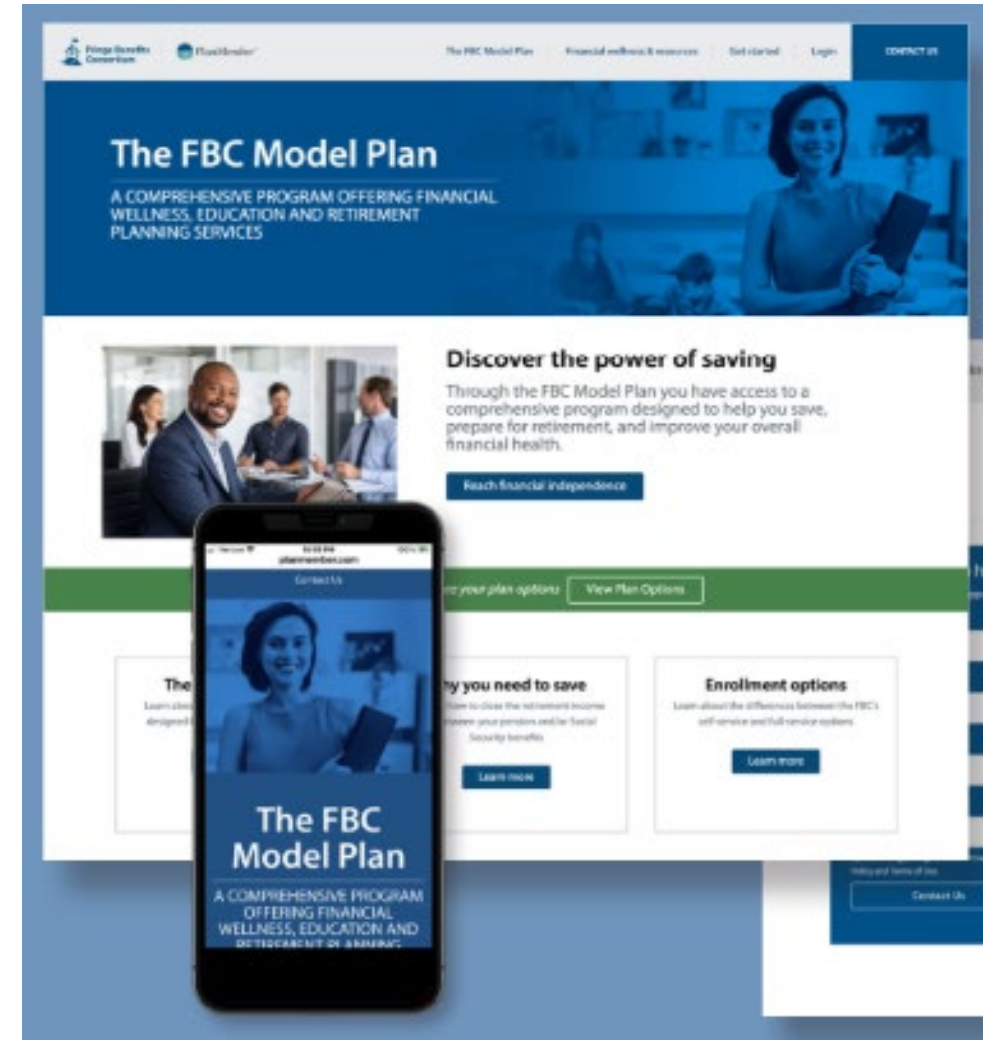
FBC Authorized Financial Advisor

AZ/CA/TX Insurance License #4260815

Phone: (760) 770-3500

patrick@fbcmodelplan.com

fbcmodelplan.com



Online Benefits Enrollment

Enrollment is easy with our online enrollment system!



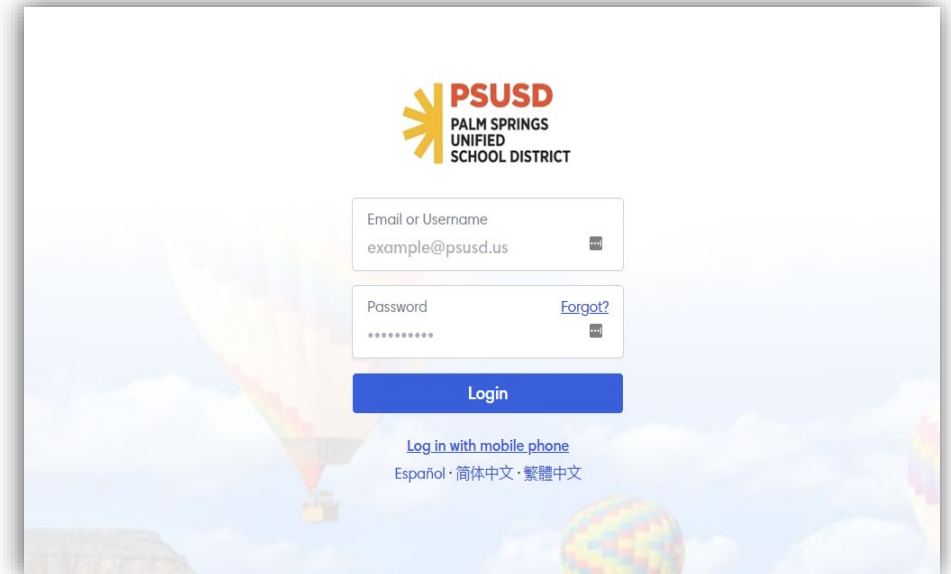
Online Benefits Enrollment

Ease Log-in Screen

Employer URL: psusd1.ease.com

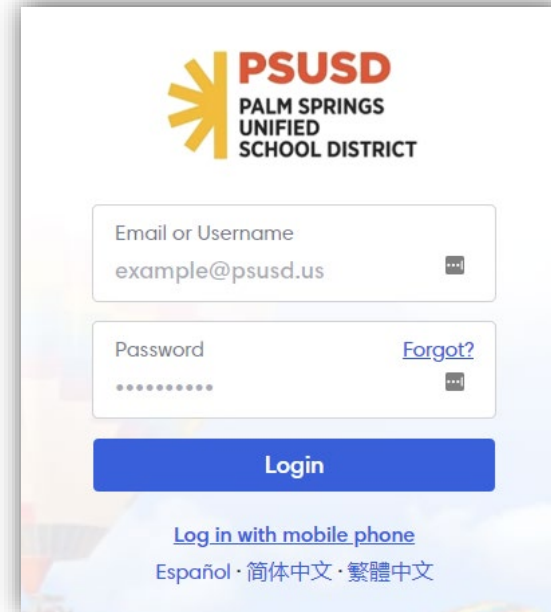
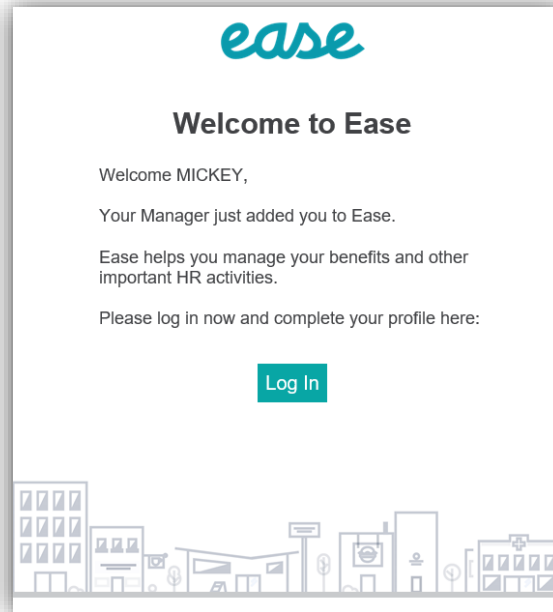
Username: PSUSD Email Address

Password: You will be prompted to create when you click on Welcome Email link



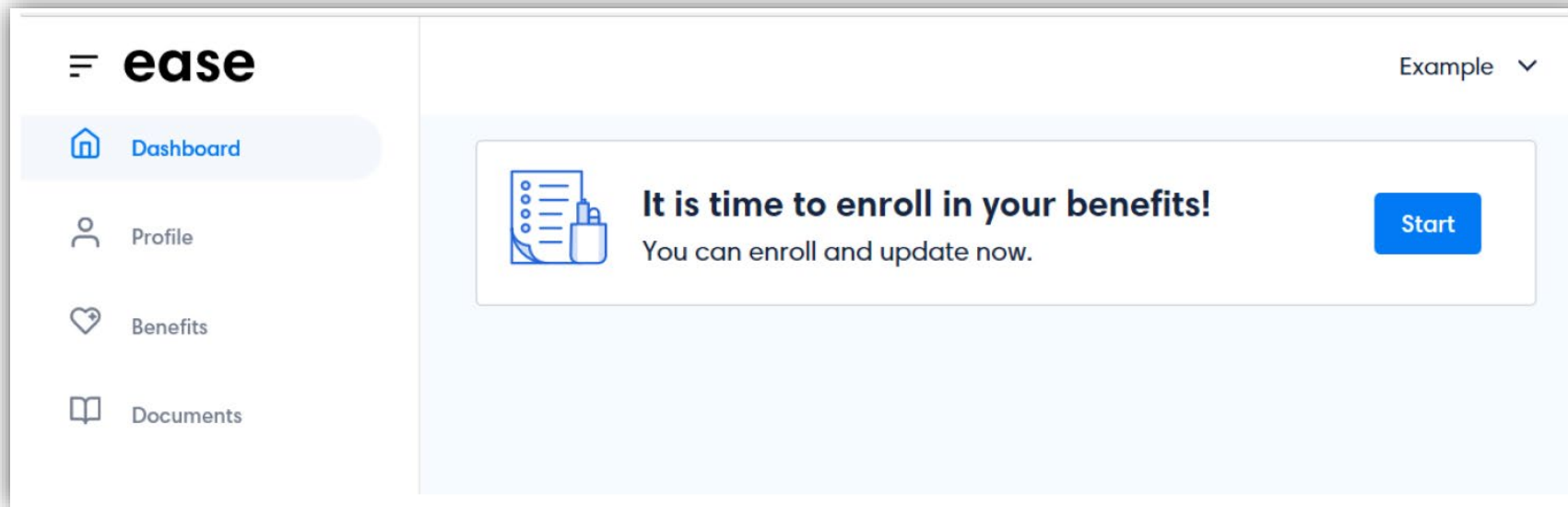
Online Benefits Enrollment

Welcome Email +
Create a Password and Sign In



Online Benefits Enrollment

Getting started



ease

Online Benefits Enrollment

Overview and Profile Information

The screenshot shows the 'Overview' page of the enrollment process. On the left, a vertical sidebar contains seven steps: 1 Overview (highlighted with a green circle), 2 Profile, 3 Dependents, 4 Benefits, 5 Summary, 6 Sign Forms, and 7 Finish. The main content area is titled 'Overview' and contains a welcome message: 'Welcome! Please follow the prompts on each page to complete your benefit enrollment. If you have any questions, please reach out to our HR department.' A blue 'Continue' button is located at the bottom right of the main content area.

- Verify your personal information
- Dependents must be entered in order to enroll in benefits
- SSN will be needed for dependents

The screenshot shows the 'Profile' page. The sidebar on the left has 'Profile' (step 2) highlighted with a green circle. The main content area is titled 'Personal Information' and contains three input fields: 'First Name *' with the value 'Example', 'Middle Name' with the value 'Middle Name', and 'Last Name *' with the value 'New'.

The screenshot shows the 'Dependents' page. The sidebar on the left has 'Dependents' (step 3) highlighted with a green circle. The main content area is titled 'Dependents' and contains the text: 'If you have any dependents (e.g. spouse, domestic partner, children) please add them here. If you do not have any dependents please click 'Continue''. Below this text is a section titled 'Add a Dependent' with an 'Add' button. At the bottom right of the page is a blue 'Continue' button.



Online Benefits Enrollment

Select Benefit Options

- Be sure to enroll or waive coverage for each dependent

1

Overview

2

Profile

3

Dependents

4

Documents

5

Benefits

Medical

Dental

Life/AD&D

Term Life

Legal

Voluntary Life/AD&D

6

Beneficiaries

7

Summary

Cheddar Test

Employee

Enrolled

✓

✕

Papa Cheddar Test

Spouse

Waived

✓

✕

Waive Reason *

Waive Reason (Required)

▼

Baby Cheddar TEST

Child

Enrolled

✓

✕

Select your plan

The cost below is the employee cost deducted on a Per Pay Period (Bi-Weekly) basis.

MetLife

2018-2019 MetLife Dental DHMO

Documents

Find a Provider

Summary of Benefits DHMO

\$0.00

Per Pay Period

Select

MetLife

2018-2019 MetLife Dental PPO

Documents

Summary of Benefits Dental PPO

\$0.00

Per Pay Period

Selected

Online Benefits Enrollment

Specify Beneficiaries

Beneficiaries

Specify your beneficiaries for each plan type below.

Your beneficiary can be the person or persons for whom you wish to provide financial protection in the event of your death.

You can name as many beneficiaries as you want, subject to the policy. The beneficiary to whom the proceeds go first is called the primary beneficiary (required). Secondary beneficiaries (optional) are entitled to the proceeds only if they survive both you and the primary beneficiary.

If you name multiple beneficiaries, you must also specify how much each beneficiary will receive. The totals of which must add up to 100%.

If you do not want to name an individual or entity as your beneficiary, you may prefer to name your estate or a trust as your beneficiary. The proceeds will then be distributed with your other assets according to your will if a valid, legal trust exists at the time of your death.



Online Benefits Enrollment

Review your Benefit Elections and Sign Forms

Benefit Summary

Review your benefit elections. If you need to make changes, click 'Edit'. Otherwise, click 'Continue' and sign your forms. You may also [print your summary](#).

The cost below is the employee cost deducted on a Per Pay Period (Bi-Weekly) basis.

Create your signature

Start typing your full name as it appears below.

Example New

 SHA-256 with RSA Encryption

I understand this is a legal representation of my signature.

Next

0 signatures remaining (1 pages)

Finish Signing

Enrollment Confirmation

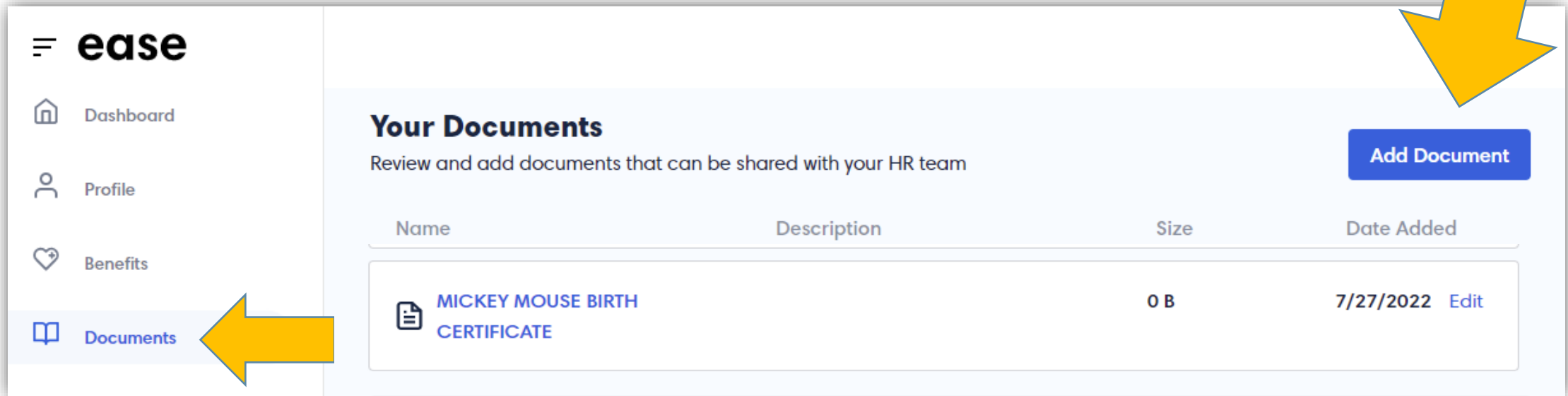
You have completed the enrollment process. You're required to electronically sign to acknowledge your personal details and elections.




Upload Supporting Documents

Go your profile, select -> **“DOCUMENTS”**

Then select -> **“ADD DOCUMENT”**

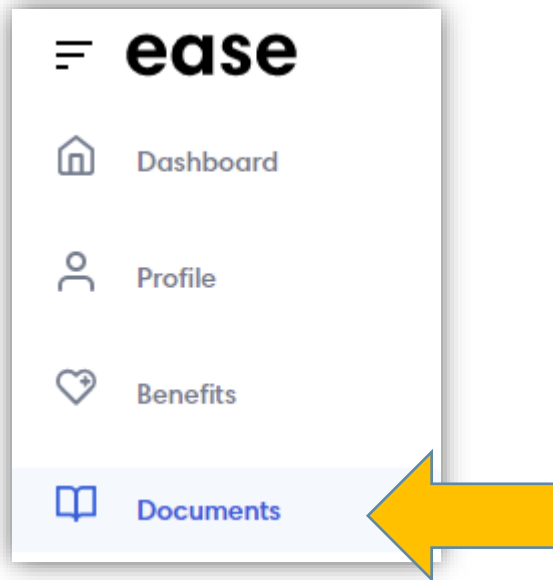


The screenshot shows the 'ease' HR system interface. On the left is a sidebar with a menu icon and the 'ease' logo. The menu items are: Dashboard (house icon), Profile (person icon), Benefits (heart icon), and Documents (book icon). The 'Documents' item is highlighted with a blue background and a yellow arrow pointing to it from the left. The main content area is titled 'Your Documents' with the subtitle 'Review and add documents that can be shared with your HR team'. In the top right corner of this section is a blue 'Add Document' button with a yellow arrow pointing to it from the top right. Below the subtitle is a table with columns: Name, Description, Size, and Date Added. The table contains one document entry: 'MICKEY MOUSE BIRTH CERTIFICATE' (with a document icon), '0 B', and '7/27/2022' with an 'Edit' link.

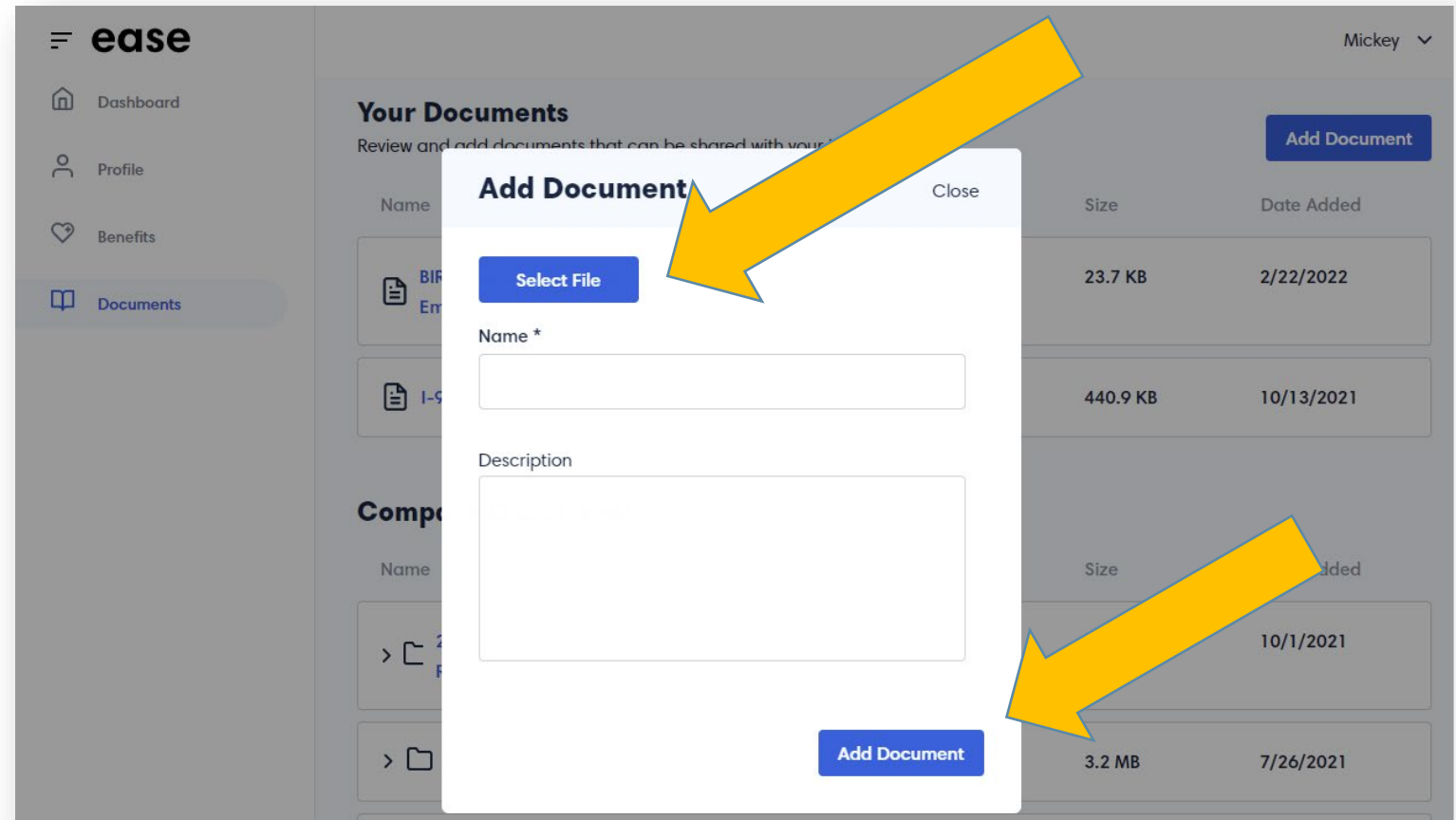
Name	Description	Size	Date Added
 MICKEY MOUSE BIRTH CERTIFICATE		0 B	7/27/2022 Edit

Upload Supporting Documents

Click **“SELECT FILE”** to upload document, then **NAME** document and select **“ADD DOCUMENT”**



ease



Upload Supporting Documents

To review your uploaded documents
go your profile, select -> **“DOCUMENTS”**

The screenshot shows the 'ease' user interface. On the left is a sidebar with a menu icon and the 'ease' logo. The menu items are: Dashboard (house icon), Profile (person icon), Benefits (heart icon), and Documents (book icon). The 'Documents' item is highlighted with a yellow arrow pointing to it from the left. The main content area is titled 'Your Documents' and includes a subtitle 'Review and add documents to be shared with your HR team' and an 'Add Document' button. Below this is a table with columns: Name, Description, Size, and Date Added. A yellow arrow points to the first row of the table, which contains the document 'MICKEY MOUSE BIRTH CERTIFICATE'.

Name	Description	Size	Date Added
MICKEY MOUSE BIRTH CERTIFICATE		0 B	7/27/2022 Edit

Reminders:

- Enrollment completed by **08/08/2025**
- riskmanagement@psusd.us
- 760-883-2715, option 3 for Risk Management



Risk Management

Benefits Orientation



Renée Brunelle
August 1, 2025