



2017 | Benefit Guide

**Hoosier School  
Benefit Trust**

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# Welcome to your benefits!

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Making the right choice is important. This Benefit Summary will help you understand the benefit choices you can make before your enrollment deadline.

We want our team and their families to be happy and healthy. Whether that means keeping fit, eating right, knowing your health risks or changing lifestyle behaviors, your well-being is important to you, your family, your coworkers and the Hoosier School Benefit Trust.



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HSBT is committed to a comprehensive benefit program that helps its plan participants stay healthy, feel secure, and maintain a work/life balance.

Learning more about benefits makes it easier for you to use them. This Benefit Summary will help you understand your benefits as you consider your choices.

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The information in this Benefits Summary is presented for illustrative purposes. The text contained in this Summary 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 any discrepancy between the Benefits Summary 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. If you have any questions about this summary, contact Human Resources.

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HSBT Health & Wellness

For any additional questions,  
please contact your respective  
Human Resource Department.

# Section 1 | About Your Benefits



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# About Your Benefits

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## Enrollment Dates

Beech Grove City Schools	October 24, 2016 - November 11, 2016
Franklin Township Community School Corporation	September 26, 2016 - October 26, 2016
MSD of Decatur Township	October 24, 2016 - November 30, 2016
MSD of Perry Township	October 24, 2016 - November 11, 2016
Central Indiana Educational Service Center	October 15, 2016 - November 30, 2016
Southside Special Services of Marion County	October 31, 2016 - November 11, 2016
Lebanon Community School Corporation	October 15, 2016 - December 1, 2016

## How to Enroll



### STEP 1:

Review this guide and pick the plan that's best for you and your dependents.



### STEP 2:

Gather you & your dependents' Social Security numbers and birth dates.



### STEP 3:

Please follow the enrollment instructions provided by HR.

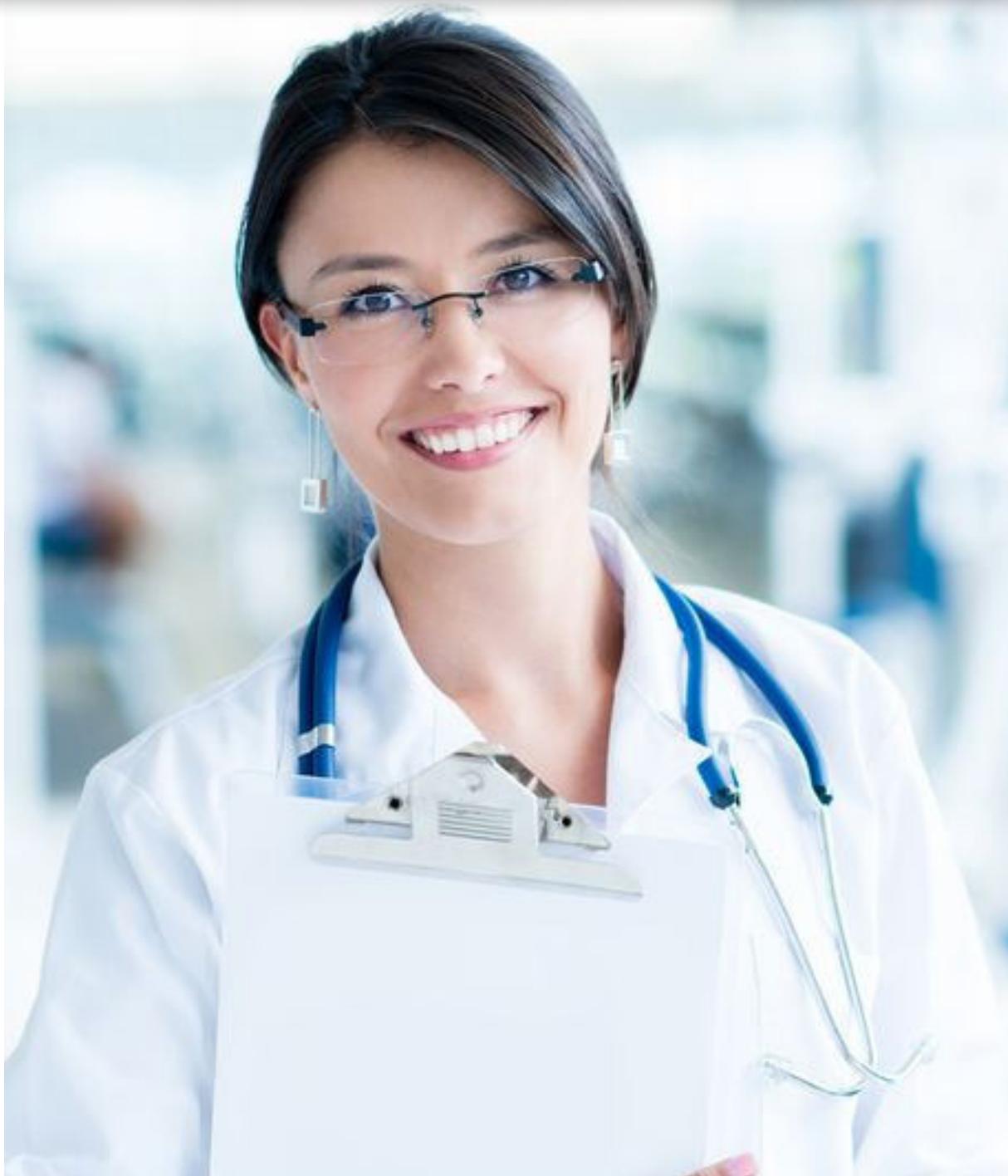


### STEP 4:

Finish any required paperwork you were prompted to complete during your online election process.

*\*If online election process is not applicable, please follow up to Step 3 only.*

## Section 2 | Health Benefits



# Hoosier School Benefit Trust

## Health & Wellness Center

Hoosier School Benefit Trust Health & Wellness Center offers the following services to eligible members at no cost:

### Common illnesses

Cough/colds/ear infections  
Bladder infections  
Allergies (seasonal/environmental)  
Sinus infections  
Cold sores  
Pink eye  
Rashes  
Styes  
Poison ivy  
Minor burns  
Insect bites  
Nail infections  
Tooth infections  
Eczema

### Screenings

Hypertension (high blood pressure)  
Diabetes  
Asthma  
Thyroid conditions  
Cholesterol conditions

### Lab tests

Blood sugar test  
Flu test influenza A and B  
Blood sugar testing  
Mono testing  
Strep testing  
Urine testing

### Prescription Drugs

A limited list of generic prescription drugs are available.

### Minor injuries

Cuts and scrapes  
Animal bites  
Puncture wounds

### Procedures

Ear wax removal  
EKG

### Physicals

Camp physical  
College physical  
Sports physical  
Women's physical (with PAP)  
Adult physical

### Immunizations

DTaP-diphtheria, tetanus, pertussis  
Flu-seasonal  
Hepatitis A-adult or child  
Hepatitis B-adult or child  
IPV-polio  
Meningitis  
MMR-measles, mumps, rubella  
PPSV-pneumonia  
TD tetanus, diphtheria  
Varicella-chicken pox  
Zostavax-shingles

### General conditions

Acne  
Allergies  
Anxiety  
Asthma  
Athlete's foot  
Blisters  
Blood draw  
Body aches  
Bug bites and stings  
Cold sores and canker sores  
Corneal abrasions  
Cough  
Deer tick bites  
Depression  
Ear wax removal  
Earache/ear infection  
EKG  
Flu-like symptoms  
Impetigo  
Laryngitis  
Lice  
Migraines  
Minor burns  
Minor cuts and lacerations  
Minor infections  
Minor rashes  
Minor wounds and abrasions  
Mononucleosis (mono)  
Motion sickness prevention  
Nasal congestion  
Oral/mouth sores  
Pink eye  
Poison ivy/oak  
Ringworm  
Scabies  
Seasonal allergies  
Shingles  
Sore throat/strep throat  
Splinter removal  
Sprains/strains  
Sunburn  
Suture and staple removal  
Swimmer's ear  
Urinary tract/bladder infection  
Wart removal

# Hoosier School Benefit Trust

## Health & Wellness Center

Please learn more about us at any of our locations:

### East Washington

7910 East Washington St.  
Suite 350  
Indianapolis, IN 46219  
P: 317-497-6140  
F: 317-497-6147

### Harding Street

6925 South Harding St.  
Suite B1  
Indianapolis, IN 46217  
P: 317-497-6140  
F: 317-497-6147

### Speedway

1011 Main St.  
Suite 255  
Speedway, IN 46224  
P: 317-497-6140  
F: 317-497-6147

### Hours

Monday 6:30 a.m. - 11:30 a.m.  
Wednesday 2:00 p.m. - 7:00 p.m.  
Friday 11:00 a.m. - 5:00 p.m.

### Hours

Monday 9:00 a.m. - 6:00 p.m.  
Tuesday 8:00 a.m. - 5:00 p.m.  
Wednesday 8:00 a.m. - 5:00 p.m.  
Thursday 8:00 a.m. - 5:00 p.m.  
Friday 6:30 a.m. - 3:30 p.m.

### Hours

Monday 12:30 p.m. - 6:30 p.m.  
Wednesday 7:00 a.m. - 8:00 a.m.  
(LAB DRAW ONLY)  
Wednesday 8:00 a.m. - 1:00 p.m.  
(PROVIDER APPTS)



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# Medical Overview

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HSBT is offering you five plans to choose from. Read through the summary of each plan type, then review the next pages for the specifics.

## **PPO PLAN**

In the PPO Plans, there are first dollar coverage in the form of certain co-pays. There is also a calendar year deductible.

When you meet the calendar year deductible, you and the plan share in expenses with coinsurance. When your total out-of-pocket expenses reach the designated maximum, the plan will pay the rest of your expenses at 100% for remainder of the year.

## **HDHP/ HSA PLAN**

HSA Plans are used in conjunction with a high deductible health plan (HDHP). What's special about this option is the health savings account that you can use to pay for medical expenses. Your school system may contribute to this account on your behalf. Plus, you can contribute your own PRE TAX dollars. When you reach your deductible and out-of-pocket maximum, medical costs are covered at 100%



# PPO Plan I

## Anthem

HSBT is offering medical benefits for its employees through Anthem. Please see the Plan Summary for full details.

Plan Feature	In Network	Out of Network
Annual Deductible	\$600	\$1,200
• Individual	\$1,200	\$2,400
• Family		
Out-of-Pocket Max (OOPM) Including Deductible	\$3,000 \$6,000	\$6,000 \$12,000
Preventive Care Services	No cost share	40%
Physician's Office Visits: PCP, SCP	\$30/\$50 copay; 20%	40%
Urgent Care Services	\$100 copay; 20%	40%
Inpatient Professional & Facility Services	20%	40%
Outpatient Professional, Surgery, Hospital & Therapy Services	20%	40%
Behavioral Health Service: PCP, SCP	\$30/\$30 copay; 20%	40%
Emergency Room Services	\$175 copay; waived if admitted	
Ambulance	20%	
Hospice Care	0%	40%
Prescription Drugs - Retail (30- day supply)		40%
• Tier 1	20%	
• Tier 2	20% with \$25 minimum	
• Tier 3	35% with \$40 minimum	
• Tier 4	30% with \$200 maximum	
Prescription Drugs - Mail Order (90-day supply)		Not Covered
• Tier 1	\$15	
• Tier 2	\$35	
• Tier 3	\$100	
• Tier 4	30% with \$200 maximum	

	Cost per Month*
Employee	\$1,136
Employee + Spouse	\$2,390
Employee + Child(ren)	\$2,263
Family	\$2,805

### \* Employer + Employee Contributions

\*\*All charges applied to the individual deductible and OOPM amount will be applied toward the Family amount. Once a person meets their individual deductible and OOPM, no more out-of-pocket is required for that individual. When the Family OOPM is reached, no further out-of-pocket cost will have to be satisfied for the remainder of that calendar year.

# PPO Plan II

## Anthem

HSBT is offering medical benefits for its employees through Anthem.  
Please see the Plan Summary for full details.

Plan Feature	Network	Out of Network
Annual Deductible		
• Individual	\$750	\$1,500
• Family	\$1,500	\$3,000
Out-of-Pocket Max (OOPM) including deductible	\$3,250 \$6,500	\$6,500 \$13,000
Preventative Care Services	No cost share	40%
Physician's Office Visits: PCP, SCP	\$30/\$50 copay; 20%	40%
Urgent Care Services	\$100 copay; 20%	40%
Inpatient Professional & Facility Services	20%	40%
Outpatient Professional, Surgery, Hospital & Therapy Services	20%	40%
Behavioral Health Service: PCP, SCP	\$30/\$30 copay; 20%	40%
Emergency Room Services	\$175 copay; waived if admitted	
Ambulance Services	20%	
Hospice Care	20%	40%
Prescription Drugs - Retail (30-day supply)		
• Tier 1	20%	40%
• Tier 2	20% with \$25 minimum	
• Tier 3	35% with \$40 minimum	
• Tier 4	30% with \$200 maximum	
Prescription Drugs - Mail Order (90-day supply)		
• Tier 1	\$15	Not Covered
• Tier 2	\$35	
• Tier 3	\$100	
• Tier 4	30% with \$200 maximum	

	Cost per Month*
Employee	\$694
Employee + Spouse	\$1,455
Employee + Child(ren)	\$1,379
Family	\$1,711

### \*Employer + Employee Contributions

\*\*All charges applied to the individual deductible and OOPM amount will be applied towards the Family amount. Once a person meets their individual deductible and OOPM, no more out-of-pocket is required for that individual. When the Family OOPM is reached, no further out-of-pocket cost will have to be satisfied for the remainder of that calendar year.

# PPO Plan III

## Anthem

HSBT is offering medical benefits for its employees through Anthem.  
Please see the Plan Summary for full details.

Plan Feature	Network	Out of Network
Annual Deductible • Individual • Family	\$1,500 \$3,000	\$3,000 \$6,000
Out-of-Pocket Max (OOPM) including deductible	\$6,000 \$10,000	\$12,000 \$20,000
Preventative Care Services	No cost share	50%
Physician's Office Visits: PCP, SCP	\$40/\$60 copay; 20%	50%
Urgent Care Services	\$100 copay; 20%	50%
Inpatient Professional & Facility Services	20%	50%
Outpatient Professional, Surgery, Hospital & Therapy Services	20%	50%
Behavioral Health Service: PCP, SCP	\$40/\$40 copay; 20%	50%
Emergency Room Services	\$175 copay; waived if admitted	
Ambulance Services	20%	
Hospice Care	20%	50%
Prescription Drugs - Retail (30- day supply) • Tier 1 • Tier 2 • Tier 3 • Tier 4	20% 20% with \$25 minimum 35% with \$40 minimum 30% with \$200 maximum	50%
Prescription Drugs - Mail Order (90-day supply) • Tier 1 • Tier 2 • Tier 3 • Tier 4	\$15 \$35 \$100 30% with \$200 maximum	Not Covered

Cost per Month*	
Employee	\$567
Employee + Spouse	\$1,183
Employee + Child(ren)	\$1,120
Family	\$1,393

### \* Employer + Employee Contributions

\*\*All charges applied to the individual deductible and OOPM amount will be applied towards the Family amount. Once a person meets their individual deductible and OOPM, no more out-of-pocket is required for that individual. When the Family OOPM is reached, no further out-of-pocket cost will have to be satisfied for the remainder of that calendar year.

# HDHP\*/HSA Plan IV

## Anthem

HSBT is offering medical benefits for its employees through Anthem.  
Please see the Plan Document for full details.

Plan Feature	Network	Out of Network
Annual Deductible		
• Individual	\$2,000	\$4,000
• Family	\$4,000	\$8,000
Out-of-Pocket Max (OOPM) including deductible	\$4,000 \$6,850	\$8,000 \$12,000
Preventative Care Services	No cost share	40%
Physician's Office Visits	20%	40%
Urgent Care Services	20%	40%
Inpatient Professional & Facility Services	20%	40%
Outpatient Professional, Surgery, Hospital & Therapy Services	20%	40%
Behavioral Health Service	20%	40%
Emergency Room Services		20%
Ambulance Services		20%
Hospice Care	20%	40%
Prescription Drugs - Retail (30-day supply)	20%	40%
Prescription Drugs - Mail Order (90-day supply)	20%	Not Covered

	Cost per Month*
Employee	\$469
Employee + Spouse	\$981
Employee + Child(ren)	\$926
Family	\$1,152

**\* Employer + Employee Contributions**

*\*High Deductible Health Plan (HDHP)*

\*\*Before your insurance helps to pay for any of your medical bills, the entire amount of the deductible must first be met. This deductible can be met by one family member or a combination of family members; however, there are no benefits paid until expenses equaling the deductible amount have been incurred. Afterwards, all eligible claims are then combined to satisfy the OOPM. Once this is satisfied all eligible claims are paid at 100% for the remaining calendar year.

# HDHP\*/HSA Plan V

## Anthem

HSBT is offering medical benefits for its employees through Anthem.  
Please see the Plan Document for full details.

Plan Feature	Network	Out of Network
Annual Deductible		
• Individual	\$5,000	\$10,000
• Family	\$10,000	\$20,000
Out-of-Pocket Max (OOPM) including deductible	\$6,550 \$13,100	\$12,900 \$25,800
Preventative Care Services	No cost share	50%
Physician's Office Visits	30%	50%
Urgent Care Services	30%	50%
Inpatient Professional & Facility Services	30%	50%
Outpatient Professional, Surgery, Hospital & Therapy Services	30%	50%
Behavioral Health Service	30%	50%
Emergency Room Services		30%
Ambulance Services		30%
Hospice Care	30%	50%
Prescription Drugs - Retail (30-day supply)	30%	50%
Prescription Drugs - Mail Order (90-day supply)	30%	Not Covered

	Cost per Month*
Employee	\$419
Employee + Spouse	\$878
Employee + Child(ren)	\$829
Family	\$1,031

### \* Employer + Employee Contributions

\*High Deductible Health Plan (HDHP)

\*\*All charges applied to the individual deductible and OOPM amount will be applied towards the Family amount. Once a person meets their individual deductible and OOPM, no more out-of-pocket is required for that individual. When the Family OOPM is reached, no further out-of-pocket cost will have to be satisfied for the remainder of that calendar year.

# Understanding a Health Savings Account (HSA)

## Is an HSA right for me?

HSAs are a growing trend in health care and offer many advantages, but whether it's the right choice for you depends on several factors.

## Advantages

**Security** – Your HSA can provide a savings buffer for unexpected or high medical bills.

**Affordability** – In most cases, you can lower your monthly health insurance premiums when you switch to health insurance coverage with a qualified high deductible health plan (HDHP), and these HDHPs can be paired with an HSA.

**Flexibility** – You can use your HSA to pay for current medical expenses, including your deductible and expenses that your insurance may not cover.

**Savings** – You can save the money in your HSA for future medical expenses, all while your account grows through tax-deferred investment earnings.

**Tax Savings** – HSAs are designed to offer the user triple tax benefit - you put money in tax-free, it accrues interest tax-free and you can withdraw it tax-free (for qualified medical expenses).

**Portability** – Accounts are completely portable, meaning you can keep your HSA even if you change employers.

**Ownership** – Funds remain in the account from year to year. There are no “use it or lose it” rules for HSAs, making it a great way to save money for future medical expenses.

## A Brief List for what you CAN use your HSA dollars for:

- Crutches
- Drug Addiction Treatment
- Eye Glasses
- Fertility Enhancements
- Lactation Expenses
- Learning Disability Care or Treatment
- Smoking Censation programs
- Physical Therapy
- Chiropractor
- Legal fees associated with medial treatment
- Surgery
- Tuition for special education
- X-rays

## A Brief List for what you CANNOT use your HSA dollars for:

- Childcare or babysitting
- Cosmetic Surgery
- Funeral Expenses
- Teeth whitening
- Health club dues
- Insurance Premiums (with a few exceptions)
- Vet fees

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# Health Savings Account (HSA) Eligibility

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## Do I Qualify?

To start saving with an HSA and make contributions to the account, you must meet several basic qualifications.

## Eligibility

- Have coverage under an HSA-qualified, high deductible health plan (HDHP)
- Have no other health insurance plan besides certain other types of insurance, such as dental, vision, disability or long-term care coverage
- Cannot be enrolled in Medicare
- Cannot be claimed as a dependent on someone else's tax return

## Health Plan

HSAs must be used with an HDHP. To qualify as an HDHP, a health plan must satisfy requirements for the minimum annual deductible and the maximum out-of-pocket expenses.

## Uses

In general, the deductible must apply to all medical expenses (including prescriptions) covered by the plan. However, plans can pay for preventive care services on a first-dollar basis (that is, without a deductible or copay). Preventive care can include care such as routine prenatal and well-child care, child and adult immunizations, annual physicals and mammograms.

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# Importance of Preventive Care

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Get regular checkups and exams can help you stay well and catch problems early. It may even save you life.

## **Preventive versus diagnostic care**

What's the difference? Preventive care helps protect you from getting sick. Diagnostic care is used to find the cause of existing illnesses.

For example, say your doctor suggests you have a colonoscopy because of your age when you have no symptoms. That is preventive care. On the other hand, say you have symptoms and your doctor suggests a colonoscopy to see what's causing your symptoms. That's diagnostic.

## **Child Preventive Care (birth through 18 years old)**

Preventive care physical exams are covered, as well as screenings, tests, and vaccines. Some preventive care services may not be right for you. Ask your doctor.

## **Adult Preventive Care (19 years old and older)**

Preventive care physical exams are covered, as well as screenings, tests and vaccines. Some preventive care services may not be right for you. Ask your doctor.

\*See your benefit plan to learn more.

# Vitals SmartShopper

SmartShopper is an innovative transparency tool that provides access to cost and quality information for common elective medical procedures and tests. Shopping is available 24/7 on the web at [www.vitalssmartshopper.com](http://www.vitalssmartshopper.com) or by calling SmartShopper at 1-800-824-9127, Monday through Thursday from 8:30 a.m. to 8:00 p.m. and Friday from 8:30 a.m. to 5:00 p.m.

When you shop for your medical procedure or test with SmartShopper, you're provided with a list of high-quality, cost-effective locations within a reasonable distance from your home. If you choose to have your procedure or test performed at a location identified by SmartShopper, you automatically earn a cash reward that is paid by your employer.

How SmartShopper works:

1. When your doctor recommends a procedure or test, go online or call to quickly and easily shop inpatient and outpatient health care services in your area.
2. Save hundreds or even thousands of dollars when you choose a lower-cost health care provider.
3. When you select a cost-effective location and help lower health care costs, you earn cash rewards! You will receive a reward check in the mail within 45 days of your claim being paid.
4. To qualify for a financial incentive reward, you must shop for your procedure with SmartShopper at least 24 hours prior to your service.

## How Vitals SmartShopper Works



When your doctor recommends a medical service, there's no additional paperwork.



Simply log in to the website or phone our call service to find lower-cost, high-quality options in your area.



Then the choice is yours. If you go to a cost effective provider, you get a check once SmartShopper verifies the location qualifies.



Your check should arrive in the mail within 30-60 days.

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# Virtual Visits

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## LiveHealth Online

See and talk to a doctor online *any time.*

Less expensive than Urgent Care



- Available 24 hours a day, 7 days a week, 365 days a year
- Available anywhere you have a computer or mobile device with Internet access
- Provides access to in-network, board-certified doctors
- Allows doctors to ePrescribe utilizing local pharmacies (where applicable)
- Takes member payments via Visa, MasterCard and Discover
- Is secure, convenient and easy-to-use

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Give HR a call with questions about LiveHealth Online and why it's often a better option than Urgent Care.

# Dental Enhanced Plan

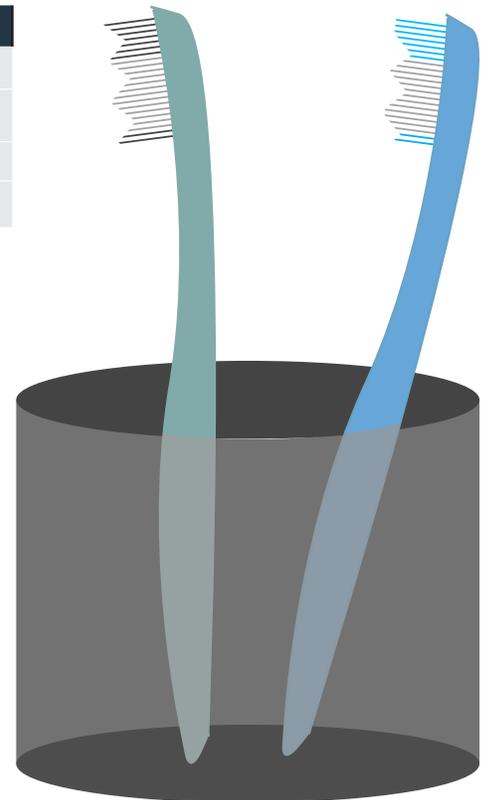
## Anthem

HSBT is offering dental benefits for its employees through Anthem.  
Please see the Plan Summary for full details.

Plan Feature	In and Out-of-Network
Annual Deductible (waived for Diagnostic/Preventive Services) <ul style="list-style-type: none"><li>• Individual</li><li>• Family</li></ul>	\$50 \$150
Annual Plan Max	\$2,500
Diagnostic & Preventive	100%
Basic	80%
Major	50%
Orthodontic Services	50%
Orthodontic Lifetime Max	\$1,500

	Cost per Month*
Employee	\$41
Employee + Spouse	\$90
Employee + Child(ren)	\$75
Family	\$127

**\* Employer + Employee Contributions**



# Dental Core Plan

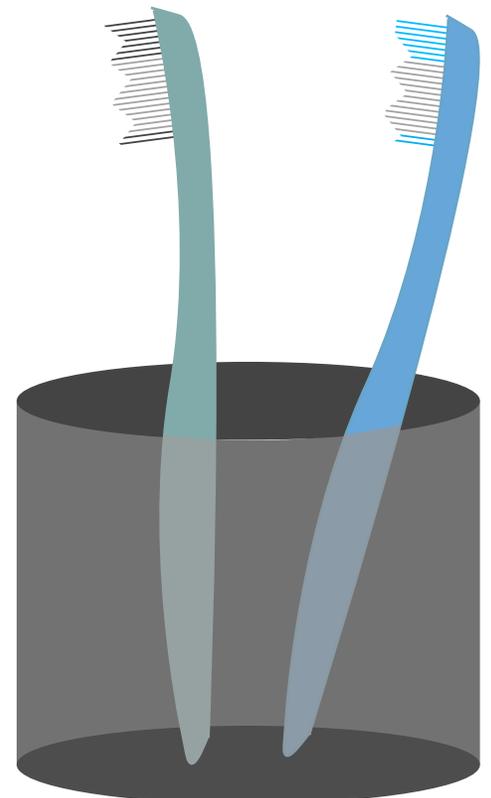
## Anthem

HSBT is offering dental benefits for its employees through Anthem.  
Please see the Plan Summary for full details.

Plan Feature	In and Out-of-Network
Annual Deductible (waived for Diagnostic/Preventive Services) <ul style="list-style-type: none"><li>• Individual</li><li>• Family</li></ul>	\$50 \$150
Annual Plan Max	\$1,000
Diagnostic & Preventive	100%
Basic	80%
Major	50%
Orthodontic Services	50%
Orthodontic Lifetime Max	\$1,000

	Cost per Month*
Employee	\$33
Employee + Spouse	\$72
Employee + Child(ren)	\$60
Family	\$102

**\* Employer + Employee Contributions**



# Vision Plan

## VSP

HSBT is offering vision benefits for its employees through VSP.  
Please see the Plan Summary for full details.

Plan Features	In Network
Well Vision Exam (Every Calendar Year)	\$10 copay
Prescription Glasses	\$10 copay
• Frames	\$130 allowance
• Brand Frames	\$150 allowance
• Lenses	Included in prescription glasses
Contacts (in lieu of glasses)	\$130 allowance; up to \$60 copay
Additional Coverage	Primary Eyecare and Vision Therapy
Extra Savings	See Plan Details

\* Please see Plan Details for Out-of-Network services.

	Cost per Month*
Employee	\$6.73
Employee + Spouse	\$13.45
Employee + Child(ren)	\$14.40
Family	\$23.00

**\* Employer + Employee Contributions**



## Section 3 | Financial Protection Benefits



# Basic Life and AD&D Insurance

## Sun Life

HSBT provides Basic Life and Accidental Death and Dismemberment (AD&D) insurance. Please see the Plan Summary for full details.

Plan Features	
Basic Life / AD&D Benefit	The benefit is based upon your employment classification.
AD&D Coverage	The benefit is the principal sum for loss of life; see loss and benefit schedule for dismemberment benefits.
Conversion Privilege	Life insurance may be converted to an individual policy within 31 days of termination or if you cease to be in an eligible class.
Portable Privilege	Life insurance and AD&D coverage may be ported within 31 days of termination of employment; coverage terminates at age 70.
Extended Life Benefit	Life insurance may continue for Total Disability without further premiums; waiver of premium also available for AD&D.
Benefit Reduction	Reference your Plan Summary.
AD&D Education Benefit	For each qualified child the benefit amount per academic term following the date of death is the lesser of 1 ¼ % of the principal sum of AD&D coverage or \$2,500.
AD&D Seatbelt Benefit	The amount of the lesser of \$25,000 or the Principal Sum of the AD&D benefit.
AD&D Repatriation & Travel Benefit	Included; see Plan Summary for details.

# Voluntary Life Insurance

## Sun Life

Voluntary life provides you the option to purchase additional life insurance beyond the basic life and AD&D coverage. Please see the Plan Summary for full details.

### Plan Features

Amount of Life Insurance	An amount between \$10,000 and \$500,000 not to exceed 5 x basic annual earnings.
Guarantee Issue Amount	*After initial offering, no more than \$200,000 unless Evidence of Insurability is provided.
Spouse & Dependent Coverage	Spouse and dependent coverage may be available; see your HR Department.
Conversion Privilege	Life insurance may be converted to an individual policy within 31 days of termination or if you cease to be in an eligible class.
Portable Privilege	Life insurance may be ported within 31 days of termination of employment; coverage terminates at age 70.
Extended Life Benefit	Life insurance may continue for Total Disability.

### Monthly Cost for Employee per \$1,000 of Life Insurance Coverage

Age	>30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
Price Per Person	\$.04	\$.05	\$.07	\$.10	\$.15	\$.23	\$.43	\$.66	\$1.27	\$2.06

*\*Effective with the January 1, 2017 re-enrollment, Sun Life will offer a guarantee issue amount of \$200,000 for all eligible employees.*

# Employee Assistance Program (EAP)

## Community Employer Health

### What is an Employee Assistance Program?

Community Health Network's Employee Assistance Program (EAP) offers short-term counseling to employees and anyone who lives in their household. Counseling is available for individuals, couples, children, families, and other household members. To manage life's stresses, EAP offers assistance including:

- Family, marital, and significant other relationships
- Child, adolescent and parenting issues
- Grief and loss
- Managing thoughts and feelings
- Alcohol and drug abuse issues
- Communication and problem solving skills
- Coping with change
- Improving well-being and life satisfaction
- Referrals for legal and financial assistance within Indiana

For *confidential* assistance, please call 800-543-4158 or 317-621-7742.

### EAP is confidential.

EAP counselors comply with all state and federal laws, in addition to a professional code of ethics regarding confidentiality. Except in life threatening circumstances, no information about you will be given to anyone, including your employer, without your written permission.

### EAP is free.

EAP services are a benefit provided by your employer at no charge to you. You and anyone living in your household can use this benefit at no cost.

### Short-term counseling helps many people.

Stress and change are a natural part of life. At times, family problems, challenges at work, or other life circumstances can create distress, impacting your usual ability to cope. Even positive changes, such as job promotions, family additions, and major purchases can be stressful. Short-term counseling is often all that is needed to strengthen your ability to identify resources, solve problems, and have a more satisfying home and work life.

EAP counselors are experienced, master's level, state certified therapists who are trained to offer professional support to deal with a wide variety of stressful situations. If your need for services goes beyond what EAP offers, your counselor can help you find the best resource. Your counselor can assist you with a referral through your health insurance or direct you to other community agencies. Your EAP counselor will maintain a system of support and follow-up with you throughout the entire process.

### When and where are EAP services provided?

EAP has numerous locations and can direct you to the office most convenient for you. Appointments are available from the early morning through the evening hours. An EAP counselor can also be reached by phone 24 hours a day.

For confidential assistance with life's stressful situations, for you or your loved ones, please call the Employee Assistance Program.

1-800-543-4158  
317-621-7742

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# Benefit Contacts

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- Medical
- Prescription
- Dental

www.anthem.com  
Medical/Rx: (800) 295-4119  
Dental: (877) 604-2142



- Vision

www.vsp.com  
(800) 877-7195



- Life
- Voluntary Life

www.sunlife.com/us  
(800) 451-2513



- Employee Assistance Program (EAP)

(800)-543-4158  
317-621-7742



- SmartShopper Tool

800-824-9127



- Health and Wellness Centers

**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