

2024 OPEN ENROLLMENT

Keystone Learning Services Grant Employees

Important Notice:

The material in this benefits brochure is for informational purposes only and is neither an offer of coverage or medical or legal advice. It contains only a partial description of plan or program benefits and does not constitute a contract. Consult the Summary Plan Descriptions to determine governing contractual provisions, including procedures, exclusions and limitations relating to your plans. In case of a conflict between your plan documents and this information, the plan documents will govern. The availability of a plan or program may vary by geographic service area.

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A Message from HR at Keystone Learning Services

At Keystone Learning Services we recognize our ultimate success depends on our talented and dedicated workforce. We understand the contribution of each employee makes our accomplishments. Our goal is to provide a comprehensive program of competitive benefits to attract and retain the best employees available. Through our benefits programs we strive to support the needs of our employees and their dependents by providing a benefit package that is easy to understand, easy to access and affordable for all our employees. This brochure will help you choose the type of plan and level of coverage that is right for you.

Sincerely,

Mollee Wilkerson

Eligibility

Eligible Employees:

You may enroll in the Keystone Learning Services Employee Benefits Program if you are a Full-Time employee who is actively working 30 or more hours per week.

Eligible Dependents:

If you are eligible for our benefits, then your dependents are too. In general, eligible dependents include your spouse and children up to age 26. If your child is mentally or physically disabled, coverage may continue beyond age 26 once proof of the ongoing disability is provided. Children may include natural, adopted, step-children and children obtained through court-appointed legal guardianship.

When Coverage Begins:

Newly hired employees and dependents will be effective in Keystone Learning Services' benefits programs 1st of the month following 30 days. All elections are in effect for the entire plan year and can only be changed during Open Enrollment unless you experience a family status event.

Family Status Change:

A change in family status is a change in your personal life that may impact your eligibility or dependent's eligibility for benefits.

Examples of family status changes include:

- Change of legal marital status (i.e., marriage, divorce, death of spouse, legal separation)
- Change in number of dependents (i.e., birth, adoption, death of dependent, ineligibility due to age)
- Change in employment or job status (spouse loses job, etc.)

If such a change occurs, you must make the changes to your benefits within 30 days of the event date. Documentation may be required to verify your change of status. Failure to request a change of status within 30 days of the event may result in your having to wait until the next open enrollment period to make your change. Please contact HR to make these changes.

Medical Insurance

Keystone Learning Services is pleased to provide a Medical PPO through Blue Cross and Blue Shield of Kansas. Highlights of the medical plan are listed below.

A PPO medical plan allows you to see any provider without a physician referral. The level of benefits you receive is dependent upon your choice of an in-network PPO provider or an out-of-network provider. Significantly higher benefits will be received when you obtain care from an in-network provider. To find a provider, visit www.bcbsks.com.

	BCBS of KS	BCBSD of KS	BCBS of KS	
	\$1,000 Buy-up PPO	\$3,500 Base PPO	QHDHP	
Benefit Coverage	In-Network Benefits	In-Network Benefits	In-Network Benefits	
Annual Deductible				
Individual	\$1,000	\$3,500	\$3,200	
Family	\$2,000	\$7,000	\$6,400	
Coinsurance	80%	50%	100%	
Maximum Out-of-Pocket*				
Individual	\$5,000	\$6,350	\$6,350	
Family	\$10,000	\$12,700	\$12,700	
Physician Office Visit				
Primary Care	\$35 Copay	\$35 Copay	100% After Deductible	
Specialty Care	\$35 Copay	\$70 Copay	100% After Deductible	
Preventive Care				
Adult Periodic Exams	100%	100%	100%	
Well-Child Care	100%	100%	100%	
Diagnostic Services				
X-ray and Lab Tests	80% After Deductible	50% After Deductible	100% After Deductible	
Complex Radiology	80% After Deductible	50% After Deductible	100% After Deductible	
Urgent Care Facility	80% After Deductible	50% After Deductible	100% After Deductible	
Emergency Room Facility Charges*	\$250 Copay then 80% After Deductible	\$250 Copay then 80% After Deductible	100% After Deductible	
Inpatient Facility Charges	80% After Deductible	50% After Deductible	100% After Deductible	
Outpatient Facility and Surgical Charges	80% After Deductible	50% After Deductible	100% After Deductible	
Mental Health / Substance Abuse				
Inpatient	80% After Deductible	50% After Deductible	100% After Deductible	
Outpatient	\$35 Copay	\$35 Copay per visit	100% After Deductible	
Other Services				
Chiropractic	\$35 Copay	\$70 Copay	100% After Deductible	

Pharmacy				
Retail Pharmacy (30 Day Supply)				
Generic (Tier 1)	\$15 Copay	\$15 Copay	\$15 Copay After Deductible	
Preferred (Tier 2)	\$50 Copay	\$50 Copay	\$50 Copay After Deductible	
Non-Preferred (Tier 3)	\$75 Copay	\$75 Copay	\$75 Copay After Deductible	
Preferred Specialty (Tier 4)	Up to \$250 Copay	Up to \$250 Copay	Up to \$250 Copay After Deductible	
Mail Order Pharmacy (90 Day Suppl	y)			
Generic (Tier 1)	\$37.50 Copay	\$37.50 Copay	\$37.50 Copay After Deductible	
Preferred (Tier 2)	\$125 Copay	\$125 Copay	\$125 Copay After Deductible	
Non-Preferred (Tier 3)	\$187.50 Copay	\$187.50 Copay	\$187.50 Copay After Deductible	
Preferred Specialty (Tier 4)	Not covered	Not covered	Not covered	

\$1,000 Buy-up PPO	Total Premium	Employer Cost	Employee Cost
Employee	\$813.03	\$813.03	\$0.00
Employee & Spouse	\$1,706.15	\$813.03	\$893.12
Employee & Child(ren)	\$1,610.09	\$813.03	\$797.06
Employee & Family	\$2,503.21	\$813.03	\$1,690.18
\$3,500 Base PPO			
Employee	\$713.54	\$813.03	\$0.00
Employee & Spouse	\$1,492.25	\$813.03	\$679.22
Employee & Child(ren)	\$1,408.49	\$813.03	\$595.46
Employee & Family	\$2,187.20	\$813.03	\$1,374.17
QHDHP			
Employee	\$732.19	\$813.03	\$0.00
Employee & Spouse	\$1,532.35	\$813.03	\$719.26
Employee & Child(ren)	\$1,446.28	\$813.03	\$633.19
Employee & Family	\$2,246.43	\$813.03	\$1,433.34

^{*}Keystone Learning Services will contribute \$157.81 monthly into the employee's H.S.A. Account

Health Savings Account (HSA)

When you are enrolled in a Qualified High Deductible Health Plan (QHDHP) and meet the eligibility requirements, the IRS allows you to open and contribute to an HSA Account.

What is a Health Savings Account (HSA)?

An HSA is a tax-sheltered bank account that you own to pay for eligible health care expenses for you and/or your eligible dependents for current or future healthcare expenses. The Health Savings Account (HSA) is yours to keep, even if you change jobs or medical plans. There is no "use it or lose it" rule; your balance carries over year to year.

Plus, you get extra tax advantages with an HSA because:

- Money you deposit into an HSA is exempt from federal income taxes.
- Interest in your account grows tax free; and
- You don't pay income taxes on withdrawals used to pay for eligible health expenses. (If you withdraw funds for non-eligible expenses, taxes and penalties apply).
- You also have a choice of investment options which earn competitive interest rates, so your unused funds grow over time.

Are you eligible to open a Health Savings Account (HSA)?

Although everyone can enroll in the Qualified High Deductible Health Plan, not everyone is eligible to open and contribute to an HSA. If you do not meet these requirements, you cannot open an HSA.

- You must be enrolled in a Qualified High Deductible Health Plan (QHDHP)
- You must not be covered by another non-QHDHP health plan, such as a spouse's PPO plan
- You are not enrolled in Medicare
- You are not in the TRICARE or TRICARE for Life military benefits program
- You have not received Veterans Administration (VA) benefits within the past three months
- You are not claimed as a dependent on another person's tax return
- You are not covered by a traditional health care flexible spending account (FSA). This includes your spouse's FSA. (Enrollment in a limited purpose health care FSA is allowed)

2024 HSA Contributions

You can contribute to your Health Savings Account on a pre-tax basis through payroll deductions up to the IRS statutory maximums. The IRS has established the following maximum HSA contributions:

FOR THE 2023 TAX YEAR:

- \$4,150 Individual
- \$8,300 Family
- If you are age 55 and over, you may contribute an extra \$1,000 catch up contribution.

How do I get reimbursed for my eligible expenses?

The easiest way to use your HSA dollars is by using your HSA Debit Card at the time you incur an eligible expense. Or you can withdraw money from an ATM. But keep your receipts! You must be able to prove that you were reimbursing yourself for an eligible expense in the event that you are audited. If you use your HSA funds for non-eligible expenses, you will be charged a 20% penalty tax (if under age 65) as well as federal income taxes. You can manage your HSA through www.healthequity.com 24 hours a day, seven days a week. Health Equity provides helpful information about your HSA, including online calculators to help you add up your tax savings and see your HSA's possible future growth. For additional guidelines, please go online or call Health Equity at (866) 346-5800

Dental Insurance

Keystone Learning Services offers a Dental PPO plan through MetLife for all employees. With the Dental PPO plan you also have the ability to obtain dental care services from the dentist of your choice (contracted or not). The dental plan provides a higher level of benefit if you choose to use an in-network provider.

	Delta Dental of Kansas Dental PPO In-Network Benefits Out-of-Network Benefits – 99 th UCR		
Benefit Coverage			
Annual Deductible			
Individual	\$50	\$50	
Family	\$150	\$150	
Waived for Preventive Care?	Yes	Yes	
Annual Maximum			
Per Person/Calendar Year	\$1,500	\$1,500	
Preventive	100%	100%	
Basic	90%	80%	
Major	60%	50%	
Orthodontia			
Benefit Percentage	Not Covered	Not Covered	

Employee Contributions (Monthly)			
Dental PPO			
Employee	\$0.00		
Employee & Spouse	\$34.00		
Employee & Child(ren)	\$33.34		
Employee & Family	\$80.82		

Vision Insurance

Lincoln Financial has a large network of Eye Care Providers. By seeing a preferred provider, you have the benefit of a low Copayment for a vision exam and materials. You may also go to out-of-network providers, but you will need to pay for services and then submit a claim form for the reimbursed allowances.

	Lincoln Financial		
	Voluntary Vision		
Benefit Coverage			
Copay			
Routine Exams	\$10 Copay		
Materials	\$10 Copay		
Lenses			
Single Vision Lenses	\$10 Copay		
Bifocal Lenses	\$10 Copay		
Trifocal Lenses	\$10 Copay		
Frames			
Retail Equivalent	\$130 Allowance, 20% off balance		
Contact Lenses			
Necessary / Prescribed	\$0 Copay		
Elective	\$130 Allowance		
Other Services			
Laser Corrective Surgery	Discount available		
Frequency			
Routine Exams	12 months		
Lenses	12 months		
Frames	12 months		
Contact Lenses (Elective)	12 months		

Employee Contributions (Monthly)			
Voluntary Vision			
Employee	\$0.00		
Employee & Spouse	\$7.85		
Employee & Child(ren)	\$8.73		
Employee & Family	\$17.00		

Flexible Spending Accounts (FSA)

You can set aside tax-free dollars each year to cover eligible out-of-pocket health care and daycare expenses. The plan is comprised of a health care spending account and a dependent care account. Each account is separate; you cannot use health care funds to pay for dependent care expenses or vice versa. You can elect to participate in one or more accounts, or you can waive coverage.

How the Plans Work

- You elect a contribution amount to deduct from your pay on a before-tax basis and put into the flexible spending account
- You may not change your contribution amount during the plan year unless it is consistent with a change in family status
- Expenses must be incurred between within the enrollment period
- You may submit claims for expenses incurred within the enrollment period
- Up to \$640 of unused Health Care FSA monies from 2024 will automatically roll over and will be available in 2025.

It is important to plan your contribution amounts carefully. The Internal Revenue Service requires that you forfeit any money for which you have not incurred eligible expenses by the end of the plan year.

Health Care FSA

Funds that you set aside in a Health Care FSA can be used to reimburse yourself for eligible health care expenses not covered under the medical, prescription drug, dental or vision plans. Reimbursements can be made for most expenses that would qualify for a health care deduction on your income tax return.

FSA Debit Card Process

If you enroll in the Health Care FSA, P&A Group will automatically send you an FSA debit card to your home. Many eligible transactions can be auto-substantiated at the point of service. However, there are certain purchases that may be declined and require you to submit receipts to validate the expense. You will be reimbursed by P&A Group for these purchased once the expenses have been approved.

Eligible Health Care Expenses

- Deductibles, Copayments, coinsurance
- Prescription drugs and medicines
- Over-the-counter medications that are medically necessary (Dr. prescription required)
- Hearing aids, batteries and exams
- Prosthetic, orthopedic, and orthotic devices
- Acupuncture, chiropractic, and physical therapy visits
- Vision care (exams, glasses, contacts, Lasik surgery)
- Dental care (including orthodontia)

Ineligible Health Care Expenses

- Over-the-counter medications not medically necessary
- Cosmetic expenses
- Massage therapy
- Health club dues
- Weight loss programs
- Insurance premiums

Substantiation and Submission of Claims

If you incur ineligible Health Care expenses which cannot be auto-substantiated and/or are declined via debit card, you will be required to submit claims forms to WageWorks for processing and reimbursement.

Dependent Care Spending Account

A Dependent Care Account can be used to pay for certain child/day care, or elder care expenses incurred during the plan year. Your dependent care expenses must be necessary for you and your spouse to work or actively look for work or attend school as a full-time student.

Eligible Dependent Care Expenses

- Childcare for a dependent age 13 or less, provided at a day care center or through a private provider
- Childcare for a dependent over age 13 if he/she is physically or mentally incapable of caring for him or herself
- Nanny services in the home associated with the care of a dependent
- Day camps associated with the care of a dependent
- Pre-school tuition that is day care related (price of tuition alone is not eligible)
- After-hours care that results from working odd hours or overtime

Ineligible Dependent Care Expenses

- Tuition cost for pre-school that is not associated with day care services, or for first grade and above
- Housekeeper/nanny services in the home that is not associated with care of a dependent
- Education related fees for classes or camps not associated with care of a dependent
- Entertainment related expenses
- Materials fee (i.e., books, clothing, food, etc.)
- After-hours care not associated with work

Dependent Care claims will be reimbursed only up to your account's current balance. If a dependent care expense exceeds the dependent care balance, you'll be reimbursed the additional amount as contributions are made to your account through your payroll deductions.

Benefit Coverages	Maximum Amount
Health Care FSA	\$3,200
Dependent Care FSA	\$5,000

Voluntary Life Offerings*

In addition to the employer paid Basic Life and AD&D coverage, you have the option to purchase additional voluntary life insurance with Lincoln Financial to cover any gaps in your existing coverage that may be a result of age reduction schedules, cost of living, existing financial obligations, etc. Your contributions will depend on your age and the amount of coverage you elect.

New Hire Voluntary Life Amount

- Employee amount: increments of \$10,000 up to \$500,000, not to exceed 5 X Earnings
- Spouse amount: increments of \$5,000 up to \$250,000; not to exceed 100% of the Employee Amount
- Child amount: \$10,000

New Hire Guarantee Issue

Employee amount: \$150,000Spouse amount: \$30,000Child amount: \$10,000

Disability Insurance

In the event you are unable to work as a result of an illness or injury, Keystone Learning Services provides disability insurance through Lincoln Financial. The plans offer income protection and will replace a portion of your earnings while you are unable to work. If your disability extends beyond 12 weeks, you will be eligible to receive Long Term Disability benefits.

Voluntary Short-Term Disability (STD)

STD			
Benefit Coverages			
Elimination Period	7 days for Accident, 7 days for Illness		
Benefit Percentage	60%		
Maximum Weekly Benefit	\$1,000		
Maximum Period of Payment	12 weeks		
Definition of Earnings	Salary		

^{*}With the carrier change this is a true open enrollment for Voluntary Life. You are allowed to enroll up to the Guarantee Issue Amount with no questions asked. This is a good opportunity to take advantage of additional Life Insurance without having to answer medical questions. If your election exceeds the Guarantee Issue, then you will be required to answer medical questions for the amount above and beyond the Guarantee Issue.

Worksite Products*

You have the option to purchase additional voluntary benefits via post-tax payroll deductions through Lincoln Financial. Benefits you may purchase include:

- Critical Illness
- Group Accident
- Hospital Indemnity

Critical Illness

The Lincoln Financial Critical Illness plan is designed to help employees and their families with the out-of-pocket costs associated with a critical illness. Critical illnesses include: Heart Attack, Stroke, Major Organ Transplant, End-Stage Renal Failure, Full and Partial benefit Cancer, Coronary Artery Bypass Graft, and 22 Listed Conditions.

- Employees select in increments of \$10,000 up to \$30,000. Coverage is available for Spouse and Children.
- No medical questions upon new-hire enrollment if the employee is actively at work.
- Benefits are paid directly to the insured on a post-tax basis.
- This plan is portable, so you may continue coverage if you leave the company for any reason.

Accident Insurance Plan

The Lincoln Financial Accident Insurance plan provides employees payments for covered accidents.

- With over 150 covered events, including hospitalization resulting from an accident as well as accidental death or dismemberment, the Lincoln Financial Accident Insurance plan will pay for covered accidents in addition to any other insurance payments you may receive.
- Coverage is Guaranteed Issue, no medical questions are asked.
- Spouse and Dependent Child(ren) coverage is also available. This plan is portable, so you may continue coverage if you leave the company for any reason.
- Annual health screening benefit of \$100 per calendar year for taking one of the eligible screening/prevention measures.

Hospitalization Indemnity

- This voluntary coverage through Lincoln Financial helps offset the out-of-pocket medical costs due to a hospitalization due for an accident or sickness.
- Coverage is Guaranteed Issue, no medical questions are asked.
- Spouse and Dependent Child(ren) coverage is also available. This plan is portable, so you may continue coverage if you leave the company for any reason.

*If you would like to keep you current Voluntary Products that will no longer be offered you can do so. After September 1st you will receive a letter from the carrier asking if you would like continue your coverage. If you do, return the letter with payment. You will then start paying the carrier directly each month. If you do not, you can simply ignore the letter.

MyBenefits2GO – Mobile App

Benefits Information When You Need It Most

Keystone Learning Services

FIND IT IN THE APP STORE

Search for 'MyBenefits2GO' and download our free app.

Enter this code when prompted:

S75344

HIGHLIGHTS OF THE MyBenefits 2GO APP

- · Access benefits information on the go
- · Convenient contact information for Carriers and HR
- · Organized plan information in one place
- · View the most updated plan information
- Store your ID cards in the app





MyBenefits2GO: FREE MOBILE BENEFITS APP FOR ANDROID AND IPHONE

The MyBenefits2GO app gives you on-the-go access to your benefit and insurance policy details, HR contact information and more!

The app is a quick and simple way for you and your enrolled dependents to access benefit summaries and other important information about our group plans. Store photos of ID cards in the app and easily locate carrier and HR contact information—all in one place. The MyBenefits2GO app is free for iPhone and Android.

Getting In Touch

The app provides employees and their enrolled dependents single-point contact information for benefits resources and insurance carriers.

Keeping Up-to-Date

The app automatically connects you with the most updated plan information and allows for message reminders from your employer.

Lightening Wallets

The app allows you to store and share images of your ID cards, freeing up space and giving you access when you need it.

Staying Organized

The app gives you access to benefit plan information and ID cards—all in one place.



Benefit Resource Center



It doesn't matter if you're a new hire or celebrating your 15th year with the same company, benefits and claims can be tricky to navigate. Our Benefits Specialists can help you: choose the right plan, translate confusing jargon and answer questions about which benefits your employer offers. Plus, they can work directly with insurance carriers to resolve issues related to claims, denial of services – and more!

Benefit Resource Center Toll Free: 855-874-0742 or E-mail: BRCMT@usi.com

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Customer Service Information

Have Questions? Need Help?

Kearney School District is excited to offer access to the USI Benefit Resource Center (BRC), which is designed to provide you with a responsive, consistent, hands-on approach to benefit inquiries. Benefit Specialists are available to research and solve elevated claims, unresolved eligibility problems, and any other benefit issues with which you might need assistance. The Benefit Specialists are experienced professionals, and their primary responsibility is to assist you.

The Specialists in the Benefit Resource Center are available M-F 8am – 5pm CST at (855) 874-0742 or via e-mail at BRCMT@usi.com. If you need assistance outside of regular business hours, please leave a message and one of the Benefit Specialists will promptly return your call or e-mail message by the end of the following business day.

Carrier	Type of Coverage	Group Number	Contact Information
BCBS of Kansas, Inc.	Medical PPO	#09001	(800) 432-3990 <u>www.bcbsks.com</u>
MetLife	Dental PPO	TBD	(800) 942-0854 www.metlife.com/dental
Lincoln Financial	Vision	TBD	(800) 423-2765 <u>www.lfg.com</u>
Health Equity	Health Savings Account		(866) 346-5800 www.healthequity.com
P&A Group	Flexible Spending / Dependent Daycare		(716) 852-2611 www.padmin.com
Lincoln Financial	Group Life / Voluntary Life / Short-Term / Long-Term Disability	TBD	(800) 423-2765 www.lfg.com
Lincoln Financial	Accident, Critical Illness, Hospitalization	TBD	(800) 423-2765 <u>www.lfg.com</u>
Benefit Resource Center	USI	(855) 874-0742	BRCMT@usi.com



500 E Sunflower Boulevard Ozawkie, Kansas 66070 785-876-2214

This brochure summarizes the benefit plans that are available to Keystone Learning Services eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. These documents are available upon request through the Human Resources Department. Information provided in this brochure is not a guarantee of benefits.