



2024-25 Employee Benefits Guide

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This brochure summarizes the benefit plans that are available to ESC 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.

A Message to Our Employees

The Benefits Enrollment Period Is Here!

The Educational Service Center of Lorain County (ESC) is pleased to announce our 2024-25 benefits program, which is designed to help you stay healthy, feel secure, and maintain a work/life balance. Offering a competitive benefits package is just one way we strive to provide our employees with a rewarding workplace. Please read the information provided in this guide carefully. For full details about our plans, please refer to the summary plan descriptions.

2024-25 Benefit Plan Highlights

As you are aware, the ESC is part of the Lake Erie Regional Council (LERC). And while LERC has taken steps to mitigate as much of the increase as possible, our 2024-25 medical plan costs are increasing over prior years. We have maintained our plan designs, however, your contribution levels for 2024-25 have increased slightly. Please closely review the contribution amounts that will be effective for the 2024-25 plan year.



Benefits for You & Your Family

Who is Eligible?

Full-time employees working at least 30 hours per week and their eligible dependents may participate in the ESC benefits program.

Generally, for the ESC benefits program, dependents are defined as:

- Your non-working spouse *
- Dependent “child” up to age 26. (Child means the employee’s natural child or adopted child and any other child as defined in the certificate of coverage)
- Dependent children aged 26 or over, unmarried, and primarily supported by you and incapable of self-sustaining employment by reason of mental or physical disability (periodic certification may be required)

Verification of dependent eligibility is required upon enrollment. Spouse Eligibility Certification must be completed annually.

* Please see Working Spouse policy

When is My Coverage Effective?

Coverages elected during Open Enrollment are effective July 1, 2024.

For newly hired employees, your benefits are effective:

First of the month following first full-time work day.

Changing Coverage During the Year

You can change your coverage during the year when you experience a qualified change in status, such as marriage, divorce, birth, adoption, placement for adoption, or loss of coverage. The change must be reported to Angela Dotson within 30 days of the event. The change must be consistent with the event.

How Do I Enroll During Open Enrollment?

- If there are **no changes** to your health & prescription drug, dental or vision insurance, elections **email the completed Health Insurance Continuation form to January Torres (torres@escl.org).**
- If you are eligible and want to enroll in the district’s health & prescription drug, dental or vision insurance, you’ll need to complete the *Health Enrollment Form ESC*.
- If you and/or a dependents(s)/spouse want to come onto the district’s health & prescription drug, dental or vision insurance, you’ll need to complete the *Health Enrollment Form ESC or Health Census Change Form, Verification of Dependent Eligibility, or Spouse Eligibility Form (if enrolling a spouse).*
- If you want to cancel coverage, you’ll need to complete the *Health Census Change Form and the Insurance Waiver Form.*

All forms are located at: (password is esclc)
<https://www.loraincountyesc.org/protected/SecureAccess.aspx?redirect=StaffResources.aspx>

All forms need to be returned to Angela Dotson by May 31, 2024.

You will not be able to change your elections until the next open enrollment period unless you experience a qualified life event.



Medical Insurance – Medical Mutual of Ohio

ESC offers 2 medical plan options administered through Medical Mutual of Ohio as part of the LERC consortium.

To access a list of providers; login to www.medmutual.com and click on Find a Doctor; Choose Provider Type, Enter Zip Code and Search the SuperMed Plus PPO Network.

Medical Mutual offers an online comparison tool, My Care Compare, to help members find the best price, provider, and location for health care services. We encourage you to log in to your My Health Plan with Medical Mutual of Ohio.

The below chart is a brief outline of the plan options. Please refer to the summary plan description for complete plan details.



Medical Benefits Overview

Benefit Coverage	PPO PLAN 1	VALUE PLAN
	Schedule of Benefits	Schedule of Benefits
Annual Deductible		
Individual	\$500	\$3,750
Family	\$1,000	\$7,500
Coinsurance	10%	30%
Maximum Out-of-Pocket (Includes Ded, Coins, Copays)		
Individual	\$6,600	\$6,600
Family	\$13,200	\$13,200
Copays/Coinsurance		
Preventive Care	Covered at 100% - no deductible	Covered at 100% - no deductible
PCP / SCP	\$25 / \$40 copay	\$50 / \$100 copay
Urgent Care	\$40 copay	\$100 copay
Diagnostic Care	10% after deductible	30% after deductible
Emergency Room Care	\$100 Emergency copay / \$200 Non-Emergency copay	\$300 copay
Inpatient Hospital Services	10% coinsurance	30% coinsurance
Outpatient Surgery	10% coinsurance	30% coinsurance

Prescription Benefits Overview - CVS

ESC offers prescription coverage administered through CVS. You'll receive a separate ID card from CVS.

For information on your prescription coverage and to find a network pharmacy, please visit www.cvs.com or call 888-111-2222.

Your cost is determined by the tier assigned to the prescription. The below chart is an outline of the cost by tier level.

Click to watch & learn more!



Benefit Coverage	PPO PLAN 1 RX	VALUE RX PLAN
	Schedule of Benefits	Schedule of Benefits
Retail Pharmacy (30 Day Supply)	COPAYS AFTER DEDUCTIBLE	
Generic (Tier 1)	\$10 copay	\$10 copay
Preferred (Tier 2)	\$25 copay	\$50 copay
Non-Preferred (Tier 3)	\$50 copay	\$100 copay
Specialty (Tier 4)	\$60 copay	\$200 copay
Mail Order Pharmacy (90 Day Supply)		
Generic (Tier 1)	\$20 copay	\$20 copay
Preferred (Tier 2)	\$50 copay	\$100 copay
Non-Preferred (Tier 3)	\$100 copay	\$200 copay

For additional tips to save on your prescription costs, please review the video below.

Click to watch & learn more!



SmartShopper

Medical care costs can range from one place to another. For the same service you can pay one price at one Medical Center/Office and pay a completely different cost for the same service down the street at a different location. And most times, you don't know the cost of the services before you go.

SmartShopper is an integrated benefit tool that compares costs of providers so you'll know what you'll pay for your medical care before you go. You can compare costs of over 70 different medical procedures either online or over the phone with a SmartShopper Personal Assistant. And have the potential to earn up to \$500 in cash back rewards.

The Care Concierge Team is ready to support you. From selecting to scheduling to prior authorizations, they make next steps = no sweat. Call today!

Turn on SmartShopper!



Compare providers at
MedMutual.SmartShopper.com
or call the Personal Assistant
Team at **877-292-1541**.



Schedule your appointment or
let the Personal Assistant
Team do it for you.



Earn cash back by having your
appointment within the year.

Location A: \$1200
Reward: \$150

Location B: \$1500
Reward: \$50

Location C: \$2000
Reward: \$0

Stop overpaying for medical care

Did you know that the same MRI can range from \$200 to \$2,000? It's possible that you're overpaying for care, even at in-network locations. SmartShopper is now part of your benefits plan and has already done all the legwork so you'll know what your costs will be upfront.

Scan the QR code or contact us to register your email today.



Employee Premium Contributions

Employee premium contributions for Medical/Rx coverage are deducted from your paycheck on a pre-tax basis. Your plan choice, level of coverage and wellness participation determine your monthly contribution.

Monthly Employee Contributions PPO PLAN 1			
	Full Wellness	Partial Wellness	No Wellness
Single	\$143.94	\$153.53	\$191.92
Family	\$359.84	\$383.83	\$479.79
Monthly Employee Contributions VALUE PLAN			
	Full Wellness	Partial Wellness	No Wellness
Single	\$105.05	\$112.05	\$140.07
Family	\$262.62	\$280.13	\$350.17



Wellness Program

By participating in the LERC Wellness Program, employees enrolled in the medical plan can earn incentives. LERC partners with Medical mutual to offer this program. If you participate, you can earn financial rewards for taking steps toward a healthier you!

Complete the following by **April 30, 2025**:



- Online Health Assessment
- Biometric Health Screening (onsite or return provider screening form)
- Earn a minimum of 200 Wellness Points (see table for available points)

To get started, sign into your My Health Plan account at www.medmutual.com/member and select Wellness Portal from the Healthy Living drop-down menu.

Be sure to review your full program guide for more information.

Activities	How Activities Are Tracked	Estimated Time for Credit or Points to awarded on Wellness Portal	Number of Activities	Possible Points
Health Assessment (Required)	Complete online via Wellness Portal between 6/1/24 and 4/30/25.	Immediately after online completion.	1	Complete
Biometric Health Screening (Required)	Complete an onsite health screening or Provider Biometric Screening Form, downloaded from the Wellness Portal by 4/30/25.	<ul style="list-style-type: none"> • 3-4 weeks after onsite event • 2 weeks after form submission 	1	
The below wellness points will not be awarded until BOTH required activities are completed				
Annual Physical	Claim with applicable CPT code with a date of service between 5/1/24 and 4/30/25 or Preventive Care Submissions form by 5/31/25.	<ul style="list-style-type: none"> • 3-6 weeks after claim processing • 2 weeks after form submission 	1	100
Preventive Care Services (Cervical Cancer Screening, Colonoscopy, Mammogram, Prostate Cancer Screening, Skin Cancer Screening* or Dental Cleaning)	Claim with applicable CPT code with a date of service between 5/1/24 and 4/30/25 or Preventive Care Submissions form by 5/31/25.	<ul style="list-style-type: none"> • 3-6 weeks after claim processing • 2 weeks after form submission 	Up to 6	240 (40 each)
Vaccinations (Flu, COVID-19, or Booster Vaccination)	Self-report activity with a date of service between 5/1/24 and 4/30/25.	Immediately after reporting completion online.	Up to 2	60 (30 each)
Smart Shopper Tool	Utilize the Smart Shopper tool between 5/1/24 – 4/30/25.	Points are awarded monthly via a vendor activity file.	1	30
District-Specific Wellness Activity	LERC District to provide Activity File: Complete through your district, by 4/30/25.	3 weeks after completing through your District	Up to 3	120 (40 each)
Physical Activity or Step Tracking: 5,000 Active Minutes or 1,000,000 steps	Device Sync, App features, or Self-Report on Wellness Portal by 4/30/25.	24/48 hours after activity goal is achieved	1	75
Microlearning Courses	Complete three courses of your choice on the Wellness Portal by 4/30/25.	Immediately after online completion.	3	60
Wellness Challenges	Complete on Wellness Portal by 4/30/25.	24/48 hours after online completion.	Up to 2	60 (30 each)
Medical Mutual Chronic Condition Management (Lark) or Maternal Health Program (App)	Enroll by 1/30/25 to complete the program requirements by 4/30/2025. Credit will be awarded quarterly (beginning September 2024) via activity files.	Quarterly	1	50
<i>*A skin cancer screening is diagnostic, and members may incur a cost.</i>				
Total Available Points				745
Silver Level: Complete Health Assessment and Health Screening (Required Activities)				
Gold Level: Earn a Minimum of 200 Points				

Dental Insurance – Delta Dental

ESC offers a dental plan administered by Delta Dental. To find a network dentist, please visit www.deltadental.com, click on Find a Dentist and select the **PPO or Premier** network, along with your location. If you use a non-participating dentist, your out-of-pocket costs will be higher, and you are subject to balance billing on charges over Reasonable and Customary (R&C).

The chart below is a brief outline of the plan. Please refer to the summary plan description for complete plan details.



	PPO DENTIST	PREMIER DENTIST	Nonpart DENTIST
Benefit Coverage			
Deductible Individual	\$25	\$25	\$25
Deductible Family	\$50	\$50	\$50
Waived for Preventive Care?	Yes	Yes	Yes
Maximum Benefit per person	\$1,500	\$1,500	\$1,500
Preventive and Diagnostic	100%	100%	100%
Basic	80%	80%	80%
Major	60%	60%	60%
Ortho Dep Children (to age 23)	50%	50%	50%
Lifetime Maximum	\$1,000	\$1,000	\$1,000

Once enrolled, register at deltadental.com to access your electronic ID card and other information.

Employee premium contributions for dental are deducted from your paycheck on a pre-tax basis. Your level of coverage and wellness participation determine monthly contribution.

Monthly Employee Contributions			
	Full Wellness	Partial Wellness	No Wellness
Single	\$5.94	\$6.33	\$7.92
Family	\$15.75	\$16.80	\$20.99

Vision Insurance – EyeMed Vision Care

ESC offers a vision allowance plan administered by EyeMed Vision Care.

The chart below is a brief outline of the plan. Please refer to the summary plan description for complete plan details.



EyeMed Network Coverage	
Exams (Annual)	
Routine Exams	\$15 copay
Lenses (Annual)	
Single Vision	\$15 copay
Bifocal	\$15 copay
Trifocal	\$15 copay
Lenticular (Single, Bifocal, Trifocal)	\$15 copay
Contacts (Covered in lieu of lenses and frames)	\$15 copay (up to \$100) +15% off amount over \$100
Frames (Annual)	
Frames (every 12 months)	\$100 allowance + 20% off amount over \$100

Employee premium contributions for vision are deducted from your paycheck on a pre-tax basis. Your level of coverage will determine your bi-weekly contribution.

Monthly Employee Contributions			
	Full Wellness	Partial Wellness	No Wellness
Single	\$0.46	\$0.49	\$0.61
Family	\$1.27	\$1.35	\$1.69

Flexible Spending Account – Medical Mutual of Ohio

Health Care FSA

Health Care FSAs allow you to fund your out-of-pocket medical, dental and vision expenses, such as copays and deductibles, with pre-tax dollars. The plan year runs January – December. Enrollment is in November for existing employees.

Reimbursement Account Program	Annual Minimum & Maximum Contribution	Eligible Expenses
Health Care FSA	Annual min = \$100 Annual max = \$3,200	Examples: copays, deductibles, coinsurance, select dental and vision expenses for you and your eligible dependents

Life and AD&D Insurance – OneAmerica

Employer Paid Basic Life and AD&D

ESC provides Basic Life and AD&D benefits to eligible employees. The life insurance benefit will be paid to your designated beneficiary in the event of death while covered under the plan. The AD&D benefit will be paid in the event of a loss of life or limb by accident while covered under the plan.

If you are a full-time employee, you will automatically receive Life and AD&D insurance. Open Enrollment is in October and is the ideal time to review and update your beneficiaries.

Your Basic Life and AD&D Insurance benefit is 1.5 times your annual salary.

Employee Assistance Plan (EAP) – Impact Solutions

Life does not always go smoothly. All of us experience times when a personal problem or crisis affects the way we function at work or home. Your Employee Assistance Program (EAP) is a problem-solving resource available to you and your household members. A professional counselor will assist you in assessing your situation, finding options, making choices, or locating further help.

It's free...LERC covers the cost of initial assessment, additional problem-solving sessions, and referral services. If there is a need for further counseling or treatment, your counselor will help you explore various options. You have 24-hour access to resources by phone, online, and includes up to three face-to-face visits per issue with a licensed professional.

It's confidential...Your EAP has been set up with Impact Solutions / AllOne Health, an outside counseling resource to assure confidentiality. No one at work will know you have chosen to seek help unless you choose to tell them. Nothing concerning your use of EAP will appear in your personnel file.



The current LERC provider is Impact Solutions / AllOne Health. They provide information, benefits, and referrals related to:

- Emotional health and wellbeing
- Alcohol or drug dependence
- Relationship problems
- Job pressures
- Stress, anxiety, and depression
- Grief and loss
- Financial or legal advice

It's easy to connect with Impact Solutions:

Telephone: 800-227-6007

Online: allonehealthmemberportal.mylifeexpert.com/login

Group Name: Lorain County

Click to watch & learn more!



Ways to Help Understand and Maximize your Healthcare Plan

Education is important to us and it is important to help educate on your healthcare plan and ways to understand and maximize! Please take a few minutes to review the below helpful videos.

Click to watch & learn more!

Preventive Care



How to Read an EOB



How to Stretch your Healthcare Dollars



Contacts

Additional information regarding benefit plans can be found on the resources page. Please contact your local Human Resources team with additional questions to complete any changes to your benefits that are not related to your initial or annual enrollment.



Carrier Customer Service

BENEFITS PLAN	CARRIER	PHONE NUMBER	WEBSITE
Medical	Medical Mutual	(800) 382-5729	www.medmutual.com
Medical Smart Shopper	Medical Mutual	(877) 292-1541	MedMutual.SmartShopper.com
Pharmacy	CVS	(800) 552-8159	www.cvs.com
Dental PPO	Delta Dental	(800) 524-0149	www.deltadental.com
Vision	EyeMed Vision Care	(866) 939-3633	www.eyemedvisioncare.com
Life and AD&D	One America	(800) 553-5318	www.oneamerica.com
Employee Assistance Program (EAP)	Impact Solutions	(800) 227-6007	https://allonehealth.com
Wellness Program	Medical Mutual	(855)-553-1006	www.medmutual.com

