2026-2027

Employee Benefits Guide

Burnet Consolidated ISD

BURNET Consolidated ISD





Let Burnet Consolidated ISD help protect what is most important to you.

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Looking for Plan Details?

Visit our benefits microsite:
https://www.benefitsdetails.com/burnetcisd

Hey There!

Welcome.

Burnet Consolidated ISD has worked hard to put together a benefits package that will help you thrive and will support your financial stability.

Each year, Burnet Consolidated ISD strives to offer comprehensive and competitive benefit plans to our employees. In the employee benefit guide you will learn more about the benefits offered for the 2026-2027 plan year and how to use them to your benefit.

This Benefits Guidebook describes the highlights of Burnet Consolidated ISD benefits program in non-technical language. Your specific rights to benefits under the plan are governed solely, and in every respect, by the official plan documents, and not the information in this Guidebook. If there is any discrepancy between the description of the program elements as contained in this benefits guidebook and the official plan documents, the language in the official plan documents shall prevail as accurate. Please refer to the plan-specific documents published by each of the respective carriers for detailed plan information. You should be aware that any and all elements of Burnet Consolidated ISD benefits program may be modified in the future, at any time, to meet Internal Revenue Service rules, or otherwise as decided by Burnet Consolidated ISD.

This year's Open Enrollment will run from July 9th – August 7th . The benefits you elect during this period will be effective September 1, 2026 - August 31, 2027. Please review your Open Enrollment materials thoroughly before making your elections.

Choose an enrollment method:

Enroll In-Person

Scan or click the QR code below to sign up to enroll in-person with a Licensed Benefits Counselor at Burnet CISD locations on **July 30th**, **August 3rd**, or **August 4th**.

Enroll Over the Phone

Call our Benefits Service Center and enroll with a Licensed Benefits Counselor over the phone, Monday through Friday, 8am to 5pm CST.

1-877-271-5968

Self-Enroll Online

We also provide a self-enrollment option online through bCEnroll by WEX.

enroll.benefitsconnect.net/burnetcisd

Important! Have your dependents' and/or beneficiary social security numbers available prior to beginning enrollment. This information will be required in order to complete your enrollment.

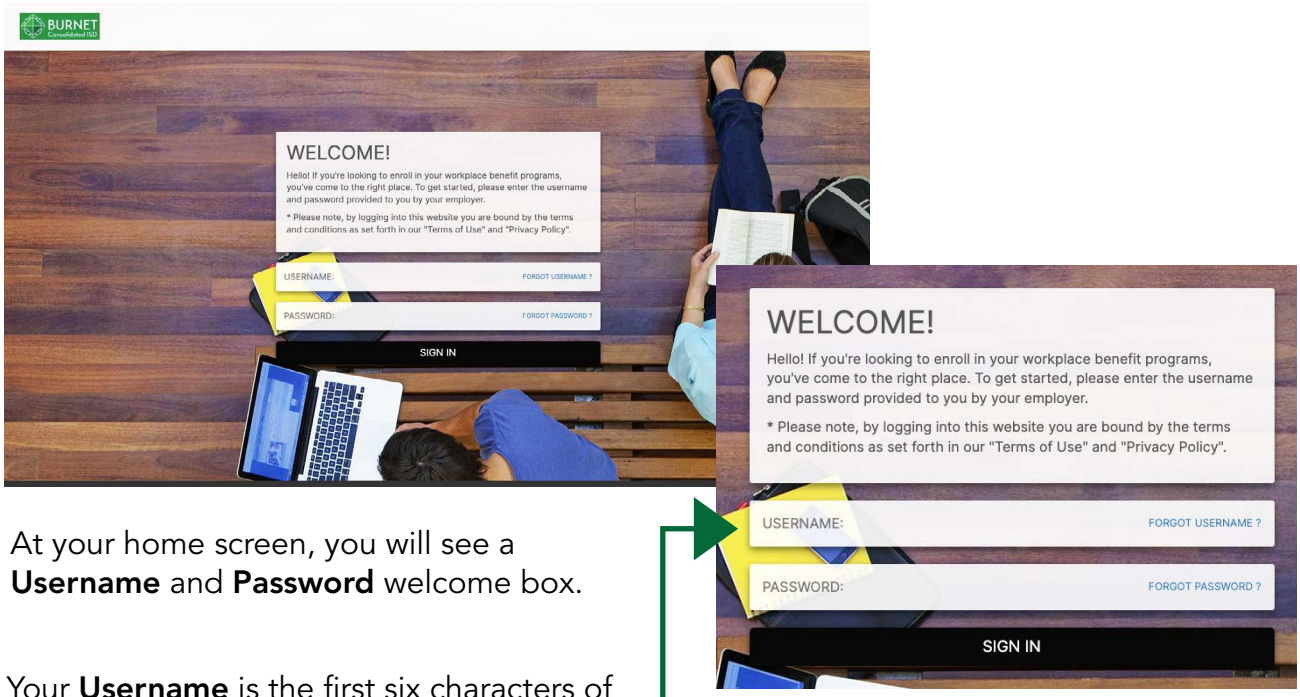
Have a Question?

Contact Information

Benefit	Administrator/Group ID	Phone	Website
Medical	BCBSTX - TRS Medical (385003 / D044)	1-866-355-5999	www.trs.texas.gov bcbstx.com/trsactivecare
Telehealth	1800MD (1800MD244)	1.800.530.8666	www.1800md.com
HSA	HSA Bank (BUR459)	1-800-357-6246	www.hsabank.com
FSA & Dependent Care	NBS (NBS468432)	1-855-399-3035 service@nbsbenefits.com	https://www.nbsbenefits.com/
Dental	MetLife (5782607)	1-800-438-6388	www.metlife.com/mybenefits
Vision	MetLife | VSP Choice Network (5782607)	1-855-638-3931	www.metlife.com/mybenefits
Life & AD&D (Basic & Voluntary)	One America (00625149-0000-000)	1-800-553-5318	www.oneamerica.com/ oneamerica.com/file-a-claim/employee-benefits-disability
Employee Assistance Program	ComPsych - One America (WEB ID: ONEAMERICA3)	Call: 1-855-387-9727 TDD: 1-800-697-0353	Online: guidanceresources.com APP: GuidanceResources® Now
Disability (Short-Term & Long-Term)	One America (G 00625149-0000-000)	1-855-517-6365	www.oneamerica.com
Term Life Insurance	Aflac (AGC0002923813)	1-800-433-3036	www.aflacgroupinsurance.com
Accident	MetLife (5782607)	1-800-438-6388	www.metlife.com/mybenefits
Hospital Indemnity	MetLife (5782607)		
Critical Illness	MetLife (5782607)		
Cancer	American Public Life (7896)	1-800-256-8606	www.ampublic.com
Medical Transport	MASA (B2BBURCISD)	1-800-643-9023	www.masamts.com
Identity Theft Protection	ID Watchdog (3580)	1-800-774-3772	www.idwatchdog.com
403B	Omni	1-877-544-6664	https://www.omni403b.com/
COBRA Dental & Vision	WEX (#50870)	1-866-451-3399	www.wexinc.com Email: cobraadmin@wexhealth.com

How to Self-Enroll

1. To log into bCEnroll, open your web browser and type enroll.benefitsconnect.net/burnetcisd in the top URL address bar.



2. At your home screen, you will see a **Username** and **Password** welcome box.

3. Your **Username** is the first six characters of your last name (if applicable), followed by the first letter of your first name, which is then followed by the last four digits of your Social Security Number.

4. Your initial **Password** is your Social Security Number (SSN) without dashes. Once logged in, you will change your password. Your NEW password MUST meet the following requirements:
   - Be at least 10 characters in length
   - Contain at least one letter
   - Contain at least one special character
   - May NOT contain: &?#=+\ /
   - May NOT contain spaces
   - Passwords are case sensitive

5. **Click Sign In** to enter **bCEnroll**

Example

Joe Smithson

SSN: 123456789

Username: smithsj6789

Password: 123456789

Important! Have your dependents' and/or beneficiary social security numbers available prior to beginning enrollment. This information will be required in order to complete your enrollment.

Eligibility

Burnet Consolidated ISD encourages the health and financial well-being of its employees by providing access to quality and affordable healthcare. The group insurance coverage described in this guidebook is available to all full-time employees who work a minimum of 15 hours or more per week and are at least 18 years of age are eligible to participate in the benefits program. The coverage effective date will begin on the 1st day of the month following employee date of hire. All benefit elections must be made within 30 days from your date of hire. The insurance plan year is from September 1st - August 31st. Once your enrollment window has closed, you may not make any changes to your elections unless you experience a Qualified Life Event (QLE).

Dependent Eligibility

If you apply for coverage for yourself, you may also elect coverage for any of your eligible dependents. Eligible Dependents include one or more of the following:

- Your legal spouse
- A child through the age of 26. You can only make changes to the specific plans where dependents will be affected
- A child is defined as your natural child, legally adopted child, stepchild, and any child for whom you are the court-appointed guardian
- A child of any age who is medically certified as disabled and dependent on the parent for support and maintenance

Getting Started:

Scan this QR code to save the Burnet CISD Benefits Service Center number to your contacts!

- iPhone Users: When contact info comes up, press "Create New Contact".
- Android Users: When contact info comes up, press "Add To Contacts".



Need assistance? Call 1-877-271-5968.

Qualifying Life Event

Generally, benefit changes are limited to open enrollment.

If you experience a Qualifying Life Event (for instance: getting married or having a baby), please contact the Benefits Coordinator; proof of the Qualifying Life Event must be submitted to the Benefits Coordinator within 30 days in order to change current benefit election.

- Benefit Elections must be consistent with the event
- You can only make changes to the specific plans where dependents will be affected
- Benefits and new rates become effective the date of the event for birth, adoptions, marriage, divorce, and death; or the day after benefits end, when the event is loss of coverage
- The event date must be consistent with the information in the Supporting Documentation

Qualifying Event	Supporting Documentation	Dependent Documentation
Marriage	Marriage Certificate	Birth Certificates are required if adding spouse's children
Death	Death Certificate	No additional documentation required
Divorce	Certified copy of Divorce Decree	Birth Certificates are required if adding children not currently enrolled in benefits
Adoption	Placement for adoption paperwork Legal documentation of adoption	No additional documentation required
Birth	Birth Certificate Verification of Birth Facts issued by hospital	No additional documentation required
Loss or Gain of Coverage	Proof of enrollment or termination of benefit coverage from spouse's employer. Proof must contain effective or termination dates of coverage, type of coverage (medical, dental, vision, etc.) and the names of dependents affected	Adding Spouse - Marriage Certificate Adding Children - Birth Certificate
Gain of Medicare or Medicaid	Proof of enrollment of benefit coverage. Proof must contain effective or termination dates of coverage, type of coverage (medical, dental, vision, etc.), and the names of the dependents affected (has 60-day window)	Adding Spouse - Marriage Certificate Adding Children - Birth Certificate

Key Terms

Deductible

The amount you pay for covered health care services before your insurance plan starts to pay. For example, with a $2,000 deductible, you pay the first $2,000 of covered services yourself. After you pay your deductible, you usually pay only a co-payment or co-insurance for covered services. Your insurance company pays the rest.

Co-pay

The set amount you pay for a covered service at the time you receive it. The amount can vary based on the type of service.

Coinsurance

The percentage of costs of a covered health care service you pay after you've paid your deductible.

Out-of-Pocket Maximum/Limit

The maximum dollar amount you have to pay for covered services in a plan year. After you spend this amount on deductibles, Co-payments, and coinsurance for in-network care and services, your health plan pays 100% of the costs of covered benefits.

Medical

Teacher Retirement System of Texas

Plan Name	TRS - Active-Care Primary	TRS - Active-Care Primary +	TRS - ActiveCare HD		TRS - ActiveCare 2 (closed to new enrollees/current enrollees may choose to stay in plan)	
	In-Network Coverage Only	In-Network Coverage Only	In-Network	Out-of-Network	In-Network	Out-of-Network
Plan Year Deductible						
Individual	$2,500	$1,200	$3,400	$6,800	$1,000	$2,000
Family	$5,000	$2,400	$6,800	$13,600	$3,000	$6,000
Coinsurance	30% after deductible	20% after deductible	30% after deductible	50% after deductible	20% after deductible	40% after deductible
Out-of-Pocket Limit						
Individual	$8,050	$6,900	$8,300	$20,500	$7,900	$23,700
Family	$16,100	$13,800	$16,600	$41,000	$15,800	$47,400
Physician Office Visits						
Primary Care Physician Office Visit	$30 copay	$15 copay	30% after deductible	50% after deductible	Tier 1: $20 copay Tier 2: $40 copay	40% after deductible
Specialist Office Visit	$70 copay	$70 copay			Tier 1: $55 copay Tier 2: $85 copay	
Urgent Care Services	$50 copay	$50 copay			$50 copay	
Diagnostic Procedures						
Diagnostic Labs (Independent/Office)	$0	$0	30% after deductible	50% after deductible	$0	40% after deductible
Diagnostic Labs (Outpatient)	30% after deductible	20% after deductible			20% after deductible	
High-Tech Radiology	30% after deductible	20% after deductible			20% after deductible + $100 copay per procedure	40% after deductible + $100 copay per procedure
Emergency Medical Care						
Stand-Alone Emergency Room Visit	$500 copay + 30% after deductible	$500 copay + 20% after deductible	$500 copay + 30% after deductible	$500 copay + 50% after deductible	$250 copay + 20% after deductible	
Hospital Care						
Hospital Inpatient	30% after deductible	20% after deductible	30% after deductible	50% after deductible ($500 facility per day maximum)	20% after deductible ($150 facility copay per day)	40% after deductible ($500 facility copay per incident)
Hospital Outpatient	30% after deductible	20% after deductible	30% after deductible	50% after deductible	20% after deductible ($250 facility copay per incident)	40% after deductible ($500 facility copay per incident)
Preventive Services						
ACA Required Preventive Care	$0	$0	$0	$0	$0	$0

Plan Name	TRS - Active-Care Primary	TRS - Active-Care Primary +	TRS - ActiveCare HD		TRS - ActiveCare 2 (closed to new enrollees/current enrollees may choose to stay in plan)	
	In-Network Coverage Only	In-Network Coverage Only	In-Network	Out-of-Network	In-Network	Out-of-Network
Prescription Drugs						
Drug Deductible	Integrated with medical	$200 deductible per participant (brand drugs only)	Integrated with medical		$200 brand deductible	
Generics (31-Day Supply/90-Day Supply)	$15/$45 copay; $0 copay for certain generics	$15/$45 copay	20% after deductible; $0 coinsurance for certain generics		$20/$45 copay	
Preferred Brand	30% after deductible	25% after deductible	25% after deductible		25% after deductible ($40 min/$80 max)/ 25% after deductible ($105 min/$210 max)	
Non-Preferred Brand	50% after deductible	50% after deductible	50% after deductible		50% after deductible ($100 min/$200 max)/ 50% after deductible ($215 min/$430 max)	
Specialty (31-day max)	$0 if SaveOnSP eligible; You pay 30% after deductible	$0 if SaveOnSP eligible; You pay 20% after deductible	20% after deductible		$0 if SaveOnSP eligible; 30% after deductible ($200 min/$900 max)/ No 90-day supply of specialty medications	
Insulin Out-of-Pocket Costs	$25 copay for 31-day supply; $75 for 61-90 day supply	$25 copay for 31-day supply; $75 for 61-90 day supply	25% after deductible		$25 copay for 31-day supply; $75 for 61-90 day supply	

Plan Name	TRS - Active-Care Primary	TRS - Active-Care Primary +	TRS - ActiveCare HD	TRS - ActiveCare 2 (closed to new enrollees/current enrollees may choose to stay in plan)
Monthly Premiums				
Employee Only	$0.00	$93.00	$19.00	$492.00
Employee + Spouse	$886.00	$1,076.00	$937.00	$1,881.00
Employee + Children	$365.00	$523.00	$397.00	$986.00
Employee + Family	$1,251.00	$1,506.00	$1,315.00	$2,320.00

Want more info? Scan or click.

Telemedicine

1.800MD

1.800MD is a national telehealth company specializing in convenient, quality medical care. With board-certified physicians, those in need can obtain diagnosis, treatment and a prescription, when necessary, through the convenience of a telephone and digital communications.

1.800MD provides access to quality care even if you have pre-existing conditions. They are available 24 hours a day, seven days a week and 365 days a year. These services are provided at no cost to you! To begin using 1.800 MD, simply activate your account, request a consult on the app, and receive care.

Talk to a doctor any time day or night for FREE.

1 Activate

Activate your account online or by calling member services. Once activated, you will need to setup your member profile and complete your electronic health record.

2 Request a Consult

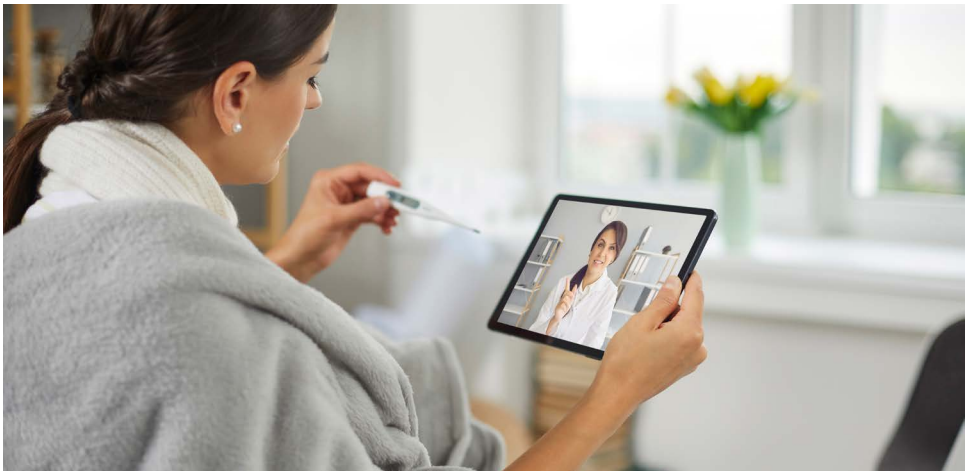
Log in to your account online or call member services at 1.800.530.8666 to request a consult anytime, 24/7.

3 Receive Care

Receive diagnosis and treatment, giving you quality care and peace of mine wherever you are.

Want more info?

Scan or click.



Let's Compare:

HSA vs FSA vs DCFSA

Medical expenses can be unexpected and expensive. Going to the doctor and paying for medication if you have a chronic condition can get expensive quick, and accidents that require medical attention can happen when you least expect it. Health Savings Accounts (HSA), and Flex Spending accounts (FSA) give you the opportunity to put money aside pre-tax to use to cover you and your dependent's qualified medical expenses. These two options come with different qualifications and different incentives, but the goal is the same: to provide you with peace of mind.

The FSA also has a Dependent Care option. This allows you to put money aside pre-tax for dependent care so that you can get reimbursed for that care. The Dependent Care FSA is ***not*** for your dependent's medical expenses.



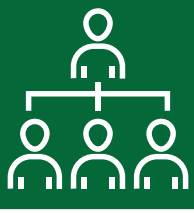
Health Savings Account (HSA)

If you are enrolled in the High Deductible Health Plan (HDHP) you can enroll in the HSA. Your HSA can be used for qualified expenses for you, your spouse, and/or tax dependents, even if they are not covered by your medical plan. A HSA is like a 401(k) for healthcare. It's yours for life, regardless of your employment or health plan. Unlike a FSA, there is no "use it or lose it" rule. With more tax advantages than any other savings vehicle, an HSA is one of the most efficient ways to manage healthcare costs.



Healthcare Flex Spending Account (FSA)

An FSA is a great way to pay for medical expenses with pre-tax dollars. You will be able to enjoy significant tax savings with pre-tax contributions and tax-free reimbursements for qualified plan expenses. **Burnet CISD has a 75-day grace period that ends on 11/14/2027 and 90-day runout period that ends on 11/29/2027.** This gives you more flexibility to spend your FSA money when you need it.



Dependent Care Flex Spending Account (DCFSA)

In addition to the healthcare FSA, you may opt to participate in the Dependent Care FSA. Set aside pre-tax funds into a DCFSA for expenses associated with caring for elderly or child dependents. The dependent care FSA is not for medical expenses for your dependents. Unlike the healthcare FSA, reimbursement from your DCFSA is limited to the total amount that is currently deposited in your account. You can set aside up to $7,500 to pay for child or elder care expenses.

Flex Spending Account

National Benefit Services

Burnet Consolidated Independent School District has established a "Flexible Benefits Plan" to help you pay for your out-of-pocket medical expenses. The benefits you elect are paid for with a portion of your pay before Federal income or Social Security taxes are withheld. This means that you will save money by paying less taxes and have more money to spend. However, if you receive a reimbursement for an expense under the Plan, you cannot claim a Federal income tax credit or deduction on your return.



Maximum Annual Election for 2026

Healthcare FSA - $3,400

Dependent Care FSA - $7,500

(or $3,750 if married and filing separate income tax returns)

Qualified Medical Expenses Include:

- Co-pays, deductibles, co-insurance
- Dental expenses
- Eyeglasses, laser surgery, contact lenses
- Prescription drugs
- Over-the-counter medicine and supplies
- Chiropractic care

Burnet CISD has a 75-day grace period that ends on 11/14/2027 and 90-day runout period that ends on 11/29/2027.

Qualified Dependent Care Expenses Include:

- Daycare
- Babysitting
- Before & after school care
- Pre-K
- Summer day camps
- Care for older dependents in need of assistance

Want more info?

Scan or click.

Health Savings Account

HSABank

A Health Savings Account (HSA) lets you put money away for future healthcare costs while saving on taxes. ***You must be enrolled in the high deductible health plan to be eligible.***

HSA's are never taxed at a federal income tax level when used for qualified medical expenses. Contributions can come straight out of your paycheck, and your HSA can grow tax -free too!

Important features include:

- No 'use-it-or-lose-it' , keep your HSA forever!
- Create a healthcare emergency safety net
- Invest your HSA tax-free, like a 401(k)

HSA 2026	Individual	Family
Annual Max Contribution	$4,400	$8,750

Additional $1,000 catch-up contribution if age 55 or older.

Qualified Medical Expenses Include:

- Pain relievers
- Eyeglasses/contacts
- Doctor visits
- Cold/cough medicine
- Dental cleaning
- Chiropractic care
- Sleep aids
- Insulin testing supplies

Want more info? Scan or click.

Dental

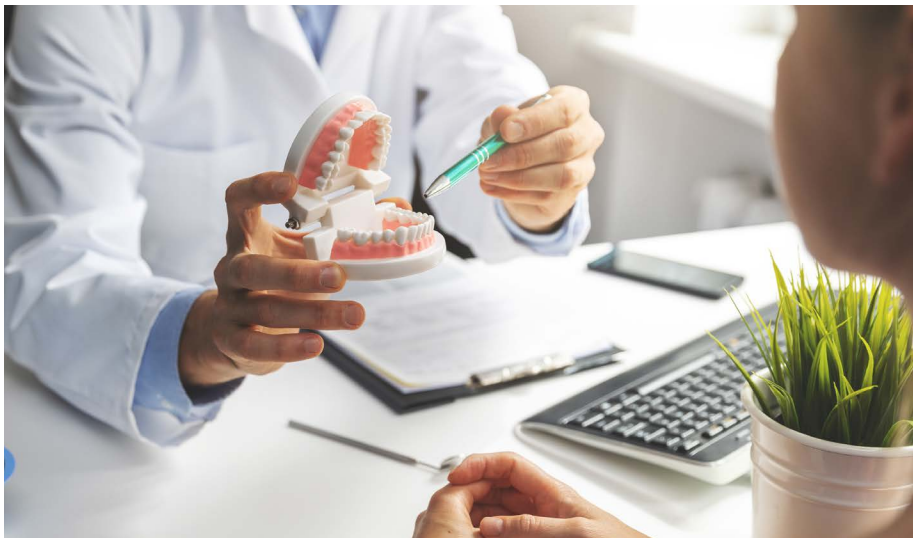
MetLife

Summary of Benefits	Low Plan		High Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible				
Deductible	$50 ($150 for family)		$50 ($150 for family)	
Benefit Year Maximum	$750		$1,500	
Calendar Year Deductible applies to the following Coverage benefits:	A, B, & C Services		A, B, & C Services	
Coverage for Dental Services				
Coverage A: Preventative	100%		100%	
Coverage B: Basic	60%		80%	
Coverage C: Major	40%		50%	
Coverage D: Orthodontics (applies to child only up to age 19)	N/A		25%	
Orthodontics Lifetime Max	N/A		$1,000 per person	

Dental Coverage	Low Plan	High Plan
Monthly Cost		
Employee	$0.00	$16.25
Employee + Spouse	$21.76	$74.20
Employee + Children	$28.17	$81.61
Family	$54.14	$121.94

Want more info?

Scan or click.



Vision

VSP

Summary of Vision Benefits

Vision Care Services	In-Network Member Cost	Out-of-Network Reimbursements
Annual Eye Exam	$10 copay	Up to $45
Retinal Imaging Benefit	Up to $39	Not covered
Standard Plastic Lenses		
Single Vision Lenses	No Additional Cost After $25 copay	Up to $30
Bifocal Lenses		Up to $50
Trifocal Lenses		Up to $65
Lenticular Lenses		Up to $100
Frames	$130 allowance after $25 copay	Up to $70
Contact Lens Fitting & Evaluation	Maximum copay of $60	Not covered
Contacts (Elective)	$130 allowance	Up to $105
Contacts (Medically Necessary)	Covered in Full after $25 copay	Up to $210

Monthly Cost	
Employee	$0.00
Employee + Spouse	$5.19
Employee + Children	$5.41
Family	$10.71



Want more info? Scan or click.

Disability

OneAmerica



You and your loved ones depend on your regular income. That's why Burnet Consolidated ISD offers disability coverage to protect you financially in the event you cannot work as a result of a debilitating injury or illness.

Short-Term Disability

After you are out of work for 14 or 30 days after a non-occupational injury or 14 or 30 days after an illness, you will be paid 60% of your weekly earnings (to a maximum benefit of $1,400, then reduced by other income benefits as outlined in the certificate) for up to 22 weeks (30 day) or 24 weeks (14 day).

Weekly Maximum Benefit	$1,400
Weekly Minimum Benefit	$25
Elimination Period	14 days for injury/14 days for sickness or 30 days for injury/30 days for sickness
Pre-Existing Condition	3/12
Maximum Benefit Period	22 Weeks (30 day) or 24 weeks (14 day)

Long-Term Disability

Long Term Disability benefits are available to you. This insurance replaces 60% of your income if you become partially or totally disabled for an extended time. See your plan document for additional details.

Monthly Maximum Benefit	$6,000
Monthly Minimum Benefit	The greater of 10% of the gross monthly benefit or $100
Elimination Period	90 days or 180 days
Pre-Existing Condition	3/12
Maximum Benefit Period	Social Security Normal Retirement Age

Want more info?

Scan or click.

Employee Assistance Program

OneAmerica

Burnet Consolidated ISD offers you no-cost, confidential support for when you face life's challenges. Your ComPsych® GuidanceResources® program offers someone to talk to and resources to consult whenever and wherever you need them.

Contact a GuidanceConsultant to get help with life's challenges, including:

Confidential Emotional Support

- Anxiety, depression, stress
- Grief, loss and life adjustments
- Relationship/marital conflicts

Work-Life Solutions

- Finding child and elder care
- Hiring movers or home repair contractors
- Planning events, locating pet care

Legal Guidance

- Divorce, adoption, family law, wills, trusts and more
- Need representation? Get a free 30-minute consultation and a 25% reduction in fees.

Financial Resources

- Retirement planning, taxes
- Relocation, mortgages, insurance
- Budgeting, debt, bankruptcy and more

Free Online Will Preparation

- Specify your wishes for your property
- Provide funeral and burial instructions
- Choose a guardian for your children

Contact Your GuidanceResources® Program

- Call: 855.387.9727
- TDD: 800.697.0353
- Online: guidanceresources.com
- App: GuidanceResources® Now
- Web ID: ONEAMERICA3

Want more info?

Scan or click.

Basic Life and AD&D

OneAmerica

This Benefit is Paid for by Your Employer!

Basic Life and AD&D

Burnet Consolidated ISD provides ***$30,000*** of Basic Life and Accidental Death and Dismemberment (AD&D) insurance through OneAmerica ***at no cost to you***.

The AD&D insurance provides a monetary benefit to an employee or beneficiary when the employee experiences certain bodily injuries or death resulting from a covered accident while insured. The company provides a guaranteed issue amount equal to the basic life insurance amount.

Employee Benefit: $30,000

Employee AD&D: $30,000

Age Reduction: Reduces to 65% of the amount shown above when the Employee reaches age 65. See Certificate for further benefit reductions due to age.

Your Contribution: 0%

Voluntary Life and AD&D

Burnet Consolidated ISD gives you the opportunity to elect additional life insurance through OneAmerica. Voluntary Life and AD&D coverage is portable/convertible upon separation of service from the district. ***This benefit is paid for by you.***

Voluntary Life Benefit Summary	
Employee Life Amount	Flat amount in $10,000 increments (minimum $10,000 and maximum $500,000 not to exceed 7 times your annual base salary rounded to the next higher $10,000)
Guaranteed Issue Employee	$200,000
Employee AD&D Amount	Same as life amount.
Spouse Amount	A flat amount in $5,000 increments (minimum of $5,000 and maximum of $500,000 not to exceed 100% of employee Life amount). The spouse Guaranteed Issue amount is $50,000.
Dependent Child Benefit	$10,000

Age Reduction: The Life Amount and AD&D Principal Sum will reduce to 65% of the amount shown above when the Employee reaches age 65. See Certificate for further benefit reductions due to age.

Want more info?

Scan or click.

Term Life Insurance

AFLAC

Burnet Consolidated ISD offers term life insurance through AFLAC, providing a life coverage option that is simple and affordable. This benefit is available to help keep your loved ones financially secure, even if you can no longer provide for them. While we all know that life insurance helps protect our loved ones for the long term, sometimes we don't consider that there are other benefits of a whole life insurance plan as well.

Aflac Group Life Term to 120 offers guaranteed-issue living and death benefits, with the predictability of a whole-life plan, at rates that won't increase, allowing you to help prepare your family for a financially secure future.



AFLAC Group Life Term to 120

Benefit Details	
Employee	Up to $150,000
Spouse	Eligible for 50% of Employee benefit election up to $50,000
Children	$25,000
Guaranteed Issue	Yes
What riders are attached?	Child Term Life Insurance Rider, Accidental Death Benefit Rider, Waiver of Premium Benefit Rider, Accelerated Benefit Rider
Age Reductions (Employee and Spouse)	• If issued prior to age 60, benefits reduce 50% at age 70 • If issued at or after age 60, benefits reduce by 50% at 10 years after coverage effective date
Do employees have to have policy in order for dependents to take one?	Yes

Plan Cost	
EE Monthly Rate for $50,000 Benefit	
Age 25	$23.38
Age 35	$32.13
Age 45	$51.96
Age 55	$93.71

Want more info?

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Accident

MetLife

Nobody plans to have an accident - and most people don't budget for one, either. Accident insurance pays benefits directly to you for treatment you receive due to an accident. It helps cover your out-of-pocket costs like medical deductibles and co-pays.

Plan Type	Option 1
Health Screening Benefit	$100
Organized Sports Activity Injury Benefit	Increases the amount payable under the Certificate for certain benefits by 25% for injuries resulting from an accident that occurred while participating as a player in an organized sports activity
Accident Injury	
Fracture	Schedule up to $10,000
Dislocation	Schedule up to $10,000
2nd or 3rd Degree Burn	Schedule up to $15,000
Concussion	$500
Coma	$10,000
Laceration	Schedule up to $700
Broken Tooth	Schedule up to $350
Eye Injury	$400
Accident - Medical Services & Treatment	
Ambulance - Ground	$400
Ambulance - Air	$1,250
Emergency Care	$75 - $100
Non-Emergency Initial Care	$75
Physician Follow-Up Visit	$100
Therapy Services	$75
Medical Testing	$200
Medical Appliance	Up to $1,000
Transportation	$400
Pain Management	$100
Prosthetic Device	1 device: $1,000 More than 1 device: $2,000
Modification	$1,500
Blood/Plasma/Platelets	$500
Surgical Repair	Up to $2,000
Exploratory Surgery	$200
Other Outpatient Surgery	$400
Lodging	$200/day



Plan Type	Option 1
Hospital Benefits	
Admission	$1,500
ICU Supplemental Admission	$1,500
Confinement	$300/day
ICU Supplemental Confinement	$300/day
Inpatient Rehabilitation	$200/day
Accidental Death & Dismemberment (AD&D)	
Accidental Death	$25,000
Accidental Death Common-Carrier	$150,000
Dismemberment/Functional Loss	Schedule up to $40,000
Paralysis	Up to $40,000

Plan Type	Option 1
Plan Cost	
Monthly Premium	
Employee	$9.32
Employee + Spouse	$17.10
Employee + Child(ren)	$23.60
Family	$31.38

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Hospital Indemnity

MetLife

Hospital Indemnity coverage pays you cash benefits directly if you are admitted to the Hospital or an Intensive Care Unit (ICU) for a covered stay. You can use the benefits to help pay for your medical expenses such as deductible and Co-pays, travel costs, food and lodging, or everyday expenses such as groceries and utilities.

Benefit Type	Low Plan	High Plan
Health Screening Benefit	$50	$50
Hospital Admission	$1,000	$2,000
ICU Supplemental Admission	$1,000	$2,000
Hospital Confinement	$100/day	$200/day
ICU Supplemental Confinement	$100/day	$200/day
Confinement Benefit for Newborn Nursery Care	$100/day	$200/day
Inpatient Rehabilitation	$100/day	$200/day
Plan Cost - Monthly Rates	**Low Plan**	**High Plan**
Employee	$15.75	$29.87
Employee + Spouse	$29.28	$55.65
Employee + Child(ren)	$22.46	$45.02
Family	$35.99	$70.80



Want more info?

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Critical Illness

MetLife

A major illness can blindside anyone, even an employee with medical insurance. Co-pays, deductibles, alternative treatments and other out-of-pocket expenses can add up quickly. Critical Illness insurance pays cash benefits directly to you to help reduce the financial burden that can come with a serious illness.

Benefit Amounts		
Employee	$10,000, $20,000, or $30,000	
Spouse	Up to 50% of Employee Benefit	
Child	50% of Employee Benefit	
Benefit Type		
	Initial Benefit	Recurrence Benefit
Autism Spectrum Disorder	25%	None
Benign Brain Tumor	100%	100% of initial benefit
Invasive Cancer	100%	100% of initial benefit
Non-Invasive Cancer	25%	100% of initial benefit
Skin Cancer	5% (min. $250)	100% of initial benefit
Coronary Artery Bypass Graft w/ surgery involving a median sternotomy	50%	100% of initial benefit
Coronary Artery Bypass Graft w/ minimally-invasive surgical procedure	10%	100% of initial benefit
Childhood Disease (see plan summary for covered diseases)	100%	None
Coma	100%	100% of initial benefit
Loss of Ability to Speak, Hearing, or Sight	100%	None
Paralysis of 2 or More Limbs	100%	100% of initial benefit
Heart Attack	100%	100% of initial benefit
Sudden Cardiac Arrest	100%	None
Infectious Disease (see plan summary for specific covered diseases)	25%	100% of initial benefit*
Kidney Failure	100%	100% of initial benefit
Major Organ Transplant (Heart, Lung, Pancreas, and Liver)	100%	100% of initial benefit
Occupational Hepatitis or Occupational HIV	100%	None
Progressive Diseases (see plan summary for covered diseases)	100%	None
Severe Burn	100%	100% of initial benefit
Stroke	100%	100% of initial benefit
Transient Ischemic Attack	25%	100% of initial benefit
Pulmonary Embolism	25%	100% of initial benefit

*Lyme Disease, MRSA, Rabies, & Sepsis have no recurrence benefit.



Want more info?

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Health Screening Benefits

MetLife

Prioritize your health and enjoy the benefits



Stay well. Start here.

Enrollment in MetLife supplemental health insurance includes the **MetLife Health Screening Benefit**,[1] an incentive that provides a cash benefit payment when you (and any covered dependents) get one of over 50 tests and screenings that give insight into your health.

1. Get a covered test or screening, such as:

- **Physical Exams**
- **Cholesterol Tests**
- **Dental Cleanings**
- **Diabetes Screenings**
- **Vision Checks**
- **Flu Shots**

2. Easily file your claim

Scan the QR code to get started at **mybenefits.metlife.com**

Prefer to talk? You can also file a claim by calling MetLife at **1 800 GET MET-8 (1-800-438-6388).**

Cancer Insurance

American Public Life

Cancer insurance provides financial support in the event of a cancer diagnosis, helping to cover the costs of treatment and associated expenses that regular health insurance might not fully address. This coverage can offer peace of mind by assisting with medical bills, travel for treatment, and more during recovery.

Benefit Type	Low Option	High Option
Radiation Therapy/ Chemotherapy/Immunotherapy	$500 per calendar month of treatment	$1,500 per calendar month of treatment
Hormone Therapy	$50 per treatment, up to 12 per calendar year	$50 per treatment, up to 12 per calendar year
Surgical	$1,600 max per operation; $15 per surgical unit	$4,800 max per operation; $45 per surgical unit
Outpatient Hospital or Ambulatory Surgical Center	$200 per day of surgery	$600 per day of surgery
Hospital Confinement	$100 per day, 1-90 days; $100 per day, 91+ days, in lieu of all other benefits	$300 per day, 1-90 days; $300 per day, 91+ days, in lieu of all other benefits
U.S. Government/ Charity Hospital/ HMO	$100 per day in lieu of most other benefits	$300 per day in lieu of most other benefits
Drugs and Medicine	Inpatient: $150 per confinement Outpatient: $50 per prescription, up to $50 per calendar month	Inpatient: $150 per confinement Outpatient: $50 per prescription, up to $150 per calendar month
Blood, Plasma, and Platelets	$150 per day, up to $7,500 per calender year	$250 per day, up to $12,500 per calender year
Bone Marrow/Stem Cell Transplant	Autologous - $500 per calendar year Non-Autologous - $1,500 per calendar year	Autologous - $1,500 per calendar year Non-Autologous - $4,500 per calendar year
Attending Physician	$30 per day of confinement	$50 per day of confinement
Extended Care Facility	$100 per day	$300 per day
Home Health	$100 per day	$300 per day
Hospice Care	$50 per day, $9,000 lifetime max	$100 per day, $18,000 lifetime max
Dread Disease	$100 per day, 1-90 days of hospital confinement	$300 per day, 1-90 days of hospital confinement
OPTIONAL: Hospital Intensive Care Unit Rider	Pays $600 per day up to 30 days per confinement in an ICU. Pays $100 in ambulance expenses per admission in an ICU.	

Plan Type	Low Option	Low Option + ICU Rider	High Option	High Option + ICU Rider
Monthly Premium				
Individual	$14.80	$17.80	$29.40	$32.40
1-Parent Family	$20.60	$24.80	$40.40	$44.60
2-Parent Family	$26.40	$32.70	$51.50	$57.80

Want more info?

Scan or click.

Medical Transportation

MASA

Burnet Consolidated ISD offers comprehensive coverage and care for emergency transport through MASA. MASA protects families against uncovered costs for emergency transportation and provides connections with care services. Your out-of-pocket expenses for your emergency ground or air transportation to a medical facility are covered with MASA.

Plan Type	Emergent Plus Membership Plan	Platinum Membership Plan
Emergency Ground Ambulance	Covered	Covered
Emergency Air Ambulance	Covered	Covered
Hospital to Hospital Ambulance	Covered	Covered
Repatriation to Hospital Near Home	Covered	Covered
Patient Return Transportation	Not Covered	Covered
Plan Cost		
Monthly Premium	**Emergent Plus Membership Plan**	**Platinum Membership Plan**
	$14.00	$39.00

How to Use MASA

When to access:

During or immediately following your emergency care treatment.

How to access:

Call 800-643-9023.
The MASA Transport Team is available 24/7/365 to assist you and will begin making the necessary arrangements, including working with your medical team.



Want more info?

Scan or click.

Identity Theft Protection

ID Watchdog

Burnet Consolidated ISD knows that identity theft can affect anyone—from infants to seniors. With ID Watchdog as an employee benefit, you have a more convenient and affordable way to help better protect and monitor your identity. You'll be alerted to potentially suspicious activity and enjoy greater peace of mind knowing you don't have to face identity theft alone.

Special Employee Pricing

Employee: $7.95 per month
Employee + Family: $14.95 per month

ID Watchdog scours billions of data point including public records, transaction records, social media, and more to search for signs of potential identity theft.

ID Watchdog has you covered with lock features for added control over your credit report(s) to help keep identity thieves from opening new accounts in your name.

If you become a victim, you don't have to face it alone. One of ID Watchdog's certified resolution specialists will personally manage the case for you until your identity is restored.



Want more info?

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403(b) Retirement Plan

The Omni Group

Burnet Consolidated ISD offers a supplemental retirement plan administrated by The Omni Group. A 403(b) or 457(b) plan allows you to save for retirement on a tax-deferred basis. Your contributions are voluntary, and you can choose the amount
based on your retirement goals. For more specific information on the plan design, please reference the Universal Availability notice, which can be accessed by searching for your employer forms and information at https://www.omni403b.com. To learn more about financial wellness and retirement, visit https://www.usrbpfinancialwellness.com/

OMNI's services include the review and approval of all 403(b) & 457(b) transactions along with the implementation of Salary Reduction Agreement (SRA) forms.

Transactions may include:

- Distributions (including distributions due to age, death, disability, separation from service, and domestic relations orders.
- Exchanges/Transfers/Rollovers of 403(b) funds between vendors or 403(b) plans
- Hardship Withdrawals
- Loans
- Purchase of Service Credits
- Qualified Domestic Relations Orders (QDRO)

Learn More

Specific Plan Information

Visit OMNI's website at www.omni403b.com.

Have a Question?

OMNI is available from 7:30am to 8:00pm Monday - Friday EST to assist with any questions you may have. Speak to a call center representative by calling 1-877-544-OMNI (6664).

Financial Wellness

Planning for your financial wellness involves many long-term decisions and should be done in consideration of your current and future financial needs. Financial wellness is influenced by several factors, including an individual's personal characteristics, their knowledge of financial concepts, spending and saving habits, and unexpected financial events.

Visit usrbpfinancialwellness.com a site that serves as an educational resource providing tools and unbiased information to help you in your financial wellness journey. Learn more about retirement savings plans, managing personal finances, college funding options, and how to navigate Social Security when the time comes. You will find calculators, videos, and informative content on various topics to help guide you in your planning process.

Want more info?

Scan or click.

Notes

Scan or Click to visit our benefits website.

www.benefitsdetails.com/burnetcisd

Contact Us

If you have any questions about your benefits, please reach out to speak to a dedicated benefits counselor

1-877-271-5968

Monday - Friday
8:00am-5:00pm CST

BURNET
Consolidated ISD