



Saint Francis
A HOLY CROSS HIGH SCHOOL

SUMMARY OF BENEFITS

July 1st, 2024 - June 30th, 2025

At Saint Francis High School, we recognize that our employees are at the core of our success. We review our benefits annually to ensure that our benefit offerings continue to meet the needs of our employees. Benefit eligible employees have the opportunity to enroll in our benefit plans on the first of the month following date of hire, during our annual Open Enrollment or subsequent to a Qualifying Life Event change. Please review the benefits highlighted in this booklet when making your benefits decisions.

Medical Insurance



- Cigna Plan with a Health Reimbursement Arrangement (HRA)**

A High Deductible Health Plan (HDHP) with a Health Reimbursement Arrangement (HRA) provides traditional medical coverage and a tax-free way to pay for out of pocket medical expenses such as deductibles. Being an Cigna member, members have flexibility to choose from both In-Network and Out-of-Network providers. However, medical benefits are paid at a higher level by choosing providers within the Cigna Open Access Plus (OAP) Network.

Saint Francis High School funds up to \$3,000 per person / \$6,000 per family. HRA funding is based on the plan year, 07-01 through 06-30.



- Kaiser Deductible HMO Plan with a Health Reimbursement Arrangement (HRA)**

For services other than Preventive, such as hospitalization and outpatient surgery, a member and their family (if applicable) must meet the individual or family annual deductible. Once a member has met the deductible, he or she pays a portion of the charges for covered medical services (coinsurance or copayment).

Saint Francis High School funds the plan deductible up to \$3,000 per person / \$6,000 per family. HRA funding is based on the plan year, 07-01 through 06-30.

Cigna Group # 00654384; Customer Service # 800.997.1654 ; <https://hcpdirectory.cigna.com/>

Kaiser Group # 7818; Customer Service # 800.464.4000; www.kp.org

Medical Plan Features	Cigna Open Access Plus (OAP)		Kaiser	
	In-Network	Out-of-Network	In-Network	(NEW) In-Network
Calendar Year Deductible: Per Person Per Family	\$3,000 \$6,000	\$6,000 \$12,000	\$3,000 \$6,000	\$5,500 \$11,000
Annual Out-of-Pocket Max: Per Person Per Family	\$5,600 \$12,000	\$8,000 \$16,000	\$6,000 \$12,000	\$7,000 \$14,000
Preventive Care: Physicals/Screenings/Labs	\$0	30% (after deductible)	\$0	\$0
Office Visits/Specialists:	10% (after deductible)	30% (after deductible)	20% (after deductible)	\$50 (after deductible)
Acupuncture (20 visit limit)	10% (after deductible)	30% (after deductible)	Plan provider referred	Plan provider referred
Chiropractic (20 visit limit)	10% (after deductible)	30% (after deductible)	\$10 (American Specialty Health)	
Labs and X-rays:	10% (after deductible)	30% (after deductible)	20% (after deductible)	40% (after deductible)
Hospital Medical Services: Inpatient Outpatient	10% (after deductible) 10% (after deductible)	30% (after deductible) 30% (after deductible)	20% (after deductible) 20% (after deductible)	40% (after deductible) 40% (after deductible)
Emergency:	10% (after in-network deductible is met)		20% (after deductible)	40% (after deductible)
Urgent Care:	10% (after deductible)	30% (after deductible)	20% (after deductible)	40% (after deductible)
Prescription Drugs: Tier 1 (Generic) Tier 2 (Brand Name) Tier 3 (Non-Formulary) Tier 4	(mail-order = 2 times copay) \$10 (after deductible) \$30 (after deductible) \$50 (after deductible) 30%, up to \$250 maximum (after deductible)	not covered not covered not covered	(deductible does not apply) 20% up to \$50 (100-day) 20% up to \$100 (100-day) 20% up to \$100 (100-day) 20% up to \$200 (30-day)	(deductible does apply) \$15 up to \$30 (100-day) 40% up to \$100 (100-day) 40% up to \$100 (100-day) 40% up to \$250 (30-day)

Health Reimbursement Account (HRA) Administrator

2024-2025 HRA Plan Year: July 1st through June 30th



Saint Francis High School has established an HRA plan for Kaiser enrollees through The Advantage Group (TAG). You will be issued a debit card that you can use to pay for your eligible expenses, limiting the need to submit a manual claim for reimbursement. If you have also enrolled in a Flexible Spending Account (FSA), both amounts will be loaded onto the same debit card. In the case of an eligible expense, funds will come out of your HRA account first. If you have exhausted your HRA funding, additional medical expenses would then come out of your FSA account.

Eligible expenses: Claims applying towards the plan **deductible associated with the medical plan** are eligible for reimbursement under Kaiser HRA Plans. Dental & Vision expenses are **not** eligible.

Kaiser: You may use the debit card to pay for eligible Kaiser deductible and prescription drug expenses, up to the allotted maximum of \$3,000 single / \$6,000 family (2+ enrolled). Keep in mind, if you use the debit card to pay for prescription copays, the HRA funds that you use will not be available for use for deductible expenses.

For those enrolled on the Cigna plan, Cigna will administer the HRA internally, no card will be issued.

Cigna: Medical and prescription expenses fall under the \$3,000 single / \$6,000 family (2+ enrolled) plan deductible. Saint Francis High School will fund \$3,000 single / \$6,000 family in the HRA.

Flexible Spending Account (FSA)

2024 FSA Plan Year: July 1st to June 30th

Customer Service # 877.506.1660

support@enrollwithtag.com

Website: www.enrollwithtag.wealthcareportal.com

You are eligible to participate in a Flexible Spending Account administered through The Advantage Group (TAG). Money deducted from your paycheck into an FSA is **not** subject to payroll taxes, resulting in substantial payroll tax savings.

Health Care Flexible Spending Account - \$640 Carryover Provision

2024 Contribution Limit - **\$3,200**

A health care FSA can reimburse you or help you pay for eligible health care expenses not covered by your health plan such as deductibles and copays, prescriptions, medical supplies, dental and orthodontia expenses, eyeglasses and contacts, etc.

Day Care Flexible Spending Account - No Carryover Provision for Dependent Care FSA

2024 Contribution Limit for Singles or Married Filing Jointly - \$5,000

2024 Contribution Limit for Married Filing Separate - \$2,500

A dependent care FSA helps reimburse you for the work-related cost of care for a qualifying dependent. A qualifying dependent is:

- A tax dependent of yours who is under age 13
- Any other tax dependent of yours, such as an elderly parent, who is physically or mentally incapable of self-care and has the same principle residence as you
- A spouse who is physically or mentally incapable of self-care and has the same principle residence as you

For both types of these accounts, you must submit claims no later than 90 days after the end of the Plan Year.

Commuter Benefits

Saint Francis High School also offers Commuter Benefits as part of the Flexible Spending benefits program through The Advantage Group (TAG). This Plan allows you to use pre-tax dollars to pay for eligible transportation expenses.

The Plan includes the following transportation benefits:

- Transit Pass Benefits - permits you to pay for your share of the cost of qualifying Transit Pass Expenses for mass transit passes, vouchers, etc. for commuting to work
- Commuter Highway Vehicle (Vanpool) Benefits - permits you to pay for your qualifying Commuter Highway Vehicle Expenses for commuting to work
- Qualified Parking Benefits - permits you to pay for your share of the cost of Qualified Parking Expenses

Maximum you can elect, per month:

- Qualified Parking Expenses: **\$315**
- Transit Passes and Commuter Highway Vehicle Expenses (combined total): **\$315**

Dental Insurance

Guardian Dental Group # 00051756
 Customer Service # 888-600-1600
www.guardianlife.com



Saint Francis High School Benefits Program also offers a Dental PPO plan through Guardian Dental. With the dental PPO network (DentalGuard Preferred), members may seek care from any dentist; however, benefits are optimized when obtained through a participating dentist. Non-network dental services are subject to Reasonable and Customary (R&C) fees, which may mean additional costs to you.

Your Dental Plan

	PPO	
	Tier 1	Tier 2
Your Network is DentalGuard Preferred Network	In-Network	Out-of-Network
Calendar year deductible	<i>Tier 1</i>	<i>Tier 2</i>
Individual	\$0	\$0
Family limit	Not Applicable (applies to all levels)	
Waived for	Not applicable	Not applicable
Charges covered for you (co-insurance)	<i>Tier 1</i>	<i>Tier 2</i>
Preventive Care	100%	100%
Basic Care	80%	80%
Major Care	50%	50%
Orthodontia	50%	50%
Annual Maximum Benefit	\$2000 (applies to all levels)	
Lifetime Orthodontia Maximum	\$1000 (applies to all levels)	
Dependent Age Limits	26 (applies to all levels)	

Vision Insurance

Saint Francis High School also offers the vision care benefit through Guardian/Vision Services Plan (VSP). VSP has a comprehensive network of vision providers throughout the nation and members can access In-network retail chains to purchase eyewear.

Vision Service Plan (VSP)
 Customer Service # 800.877.7195
www.vsp.com

Vision Plan Features	In-Network	Non-Network
Exam (every 12 months):	\$0	Maximum allowance \$39
Prescription Glasses: Lenses (every 12 months)	100% covered	Maximum allowance Single = \$23 Bifocal = \$37 Trifocal = \$49
Frames (every 24 months): Glasses or Contacts (not both)	Maximum allowance \$130 + 20% discount	Maximum allowance \$46
Costco / Walmart / Sam's Club:	Amount over \$70	
Contacts Lenses (every 12 months) : Glasses or Contacts (not both)	Maximum allowance \$130	Maximum Allowance \$100
Evaluation & Fitting:	15% off Usual & Customary	No Discounts
Cosmetic Extras	Average 20% - 25% off retail price	No Discounts
Glasses (additional pair of frames/lenses)	20% off retail price	No Discounts
Laser Correction Surgery Discount	Up to 15% off the usual charge or 5% off promotional price	No Discounts



Life/AD&D and Disability Insurance

Group # G000AVTC
 Customer Service #: 800.228.7104
www.mutualofomaha.com



Group Term Life, Accidental Death and Dismemberment (AD&D), Short Term Disability (STD) & Long Term Disability (LTD) is offered to all eligible employees through Mutual of Omaha (MOO). The Basic Life and Disability, STD & LTD insurance benefit is **100% employer-paid**. Please note that Life premiums in excess of \$50,000 of benefit are subject to imputed income taxation in accordance with IRS regulations. Also, STD and LTD benefits, if received, are considered income and subject to all applicable taxes. **NOTE:** STD benefits integrate with State Disability Insurance (SDI) benefits offered through the State of California Employment Development Department (EDD).

Basic Term Life/AD&D	Short Term Disability	Long Term Disability
Benefit = 1 x salary up to \$200,000 Guarantee Issue = \$200,000	Benefit is based on 66 2/3% of before-tax weekly earnings	Benefit is based on 66 2/3% of before-tax monthly earnings
Benefit will reduce to 65% at age 65 Benefit will reduce to 50% at age 70	Maximum weekly benefit = up to \$2,100	Maximum monthly benefit = up to \$9,000
In case of death through accident, an additional amount is paid out equal to the amount of the Life insurance benefit.	Benefits Begin = 8 th day of the disabling injury or illness	Benefits Begin = 90 th day of the disabling injury or illness
	Maximum Duration = 12 weeks	Maximum Duration = Social Security Normal Retirement Age

Employee Assistance Program/Travel Assistance

As part of your 100% Employer-Paid Life and Disability benefits, you are automatically enrolled for an Employee Assistance and Travel Assistance Program through Mutual of Omaha. These programs are at **no** cost to you and can help you prepare for the unpredictable and keep small struggles from turning into major issues.

Customer Service # 800.316.2796

www.mutualofomaha.com/eap

Employees have access to the following resources and reference services through EAP:

- 24/7 toll-free access to assistance with your life challenges, financial planning, estate guidance and legal services.
- Up to 3 face-to-face visits with a counselor
- Personal and family counseling, grief counseling and assistance with mental health clinical issues.
- Child care, elder care and college planning.
- Free 30-minute office or telephone consultation with a local attorney.

Group ID: 9900MOO2

Customer Service # U.S. - 800.316.2796

Outside the U.S. - 312.935.3658

www.mutualofomaha.com



Toll-free travel assistance is also available, which includes 24/7 emergency assistance when employees and their families are traveling 100 miles or more from home.

- Assistance with hospital admission outside the U.S. and necessary medical evacuations to another facility.
- Medical care monitoring and supervised repatriation if required.
- Language Translation Services
- Arrangement for medications, vaccines or blood
- Passport, visa assistance for foreign travel

403 (b) Retirement Plan

Saint Francis High School sponsors a 403(b) Retirement Plan as part of their Benefits Program as well. As a supplement to other retirement benefits or savings that you may have, this voluntary plan allows you to save and invest your savings for your retirement with tax-deferred dollars.



Customer Service #: 800.343.3548

Website: www.fidelity.com

Saint Francis High School **contributes between 5% to 7%** of your annual salary based on your tenure with the school, as long as employee contributes minimum of 2%.

Employer Contribution	
Years of Service	Percent Contributed
0 - 5 years	5%
6 - 10 years	6%
11+ years	7%

2024 IRS Contribution Limit - \$23,000**

**If you are over 50 years of age, you may contribute an additional amount, up to a maximum of \$7,500

Contacts/Resources

A benefits website has been created for Saint Francis High School employees with direct links to all the carrier websites, plan summaries, and contact information. You can search for in-network doctors and dentists by following the links to directories for each carrier. Many of your general questions can be answered by contacting the carrier directly, or reviewing the plan information located at:

<https://mybenefits.cc/saintfrancis/>

If you have eligibility questions or unresolved claim issues and need assistance or to make changes to your Saint Francis High School benefits coverage, please contact your HR representative or your Acrisure Account Management Team below.

Your Acrisure Account Management Team:

Ana Fisher (English)

925.592.5139

afisher2@acrisure.com



Marilyn Cosmi (Spanish)

925.592.5143

mcosmi@acrisure.com

This entire document is intended to serve as an overview of benefits offered by Saint Francis High School. If there is any difference between this document and the details contained in the legal plan documents, the plan documents are the final authority. This document should not be construed to reflect an employment contract. Saint Francis High School reserves the right to modify any content of this document at anytime.