

FRISCO ISD EMPLOYEE HEALTH BENEFIT PLAN

Plan Year: October 1, 2010 – September 30, 2011

Frisco ISD is pleased to offer you and your family a comprehensive health care program with a choice of four PPO medical plan options designed to meet your needs. The *Medical Benefit Summary* on the following page provides details on each plan to help you decide which option is best for you. Please note that the *Medical Benefit Summary* is only a general overview and not a legal document. After enrolling in the medical plan, you will receive a Summary Plan Description (SPD) with a complete description of plan coverage, limitations, and exclusions. The language of the SPD will prevail over the language of the *Medical Benefit Summary*.

The Frisco ISD Employee Health Benefit Plan is partially self-funded and claims are administered by **Group Resources**, a third party administrator. Other service providers of importance are:

- PPO Provider Network: **Texas True Choice** (www.texastruechoice.com)
- Pharmacy Benefits Administrator: **Express Scripts** (www.express-scripts.com)

You can maximize your Medical Benefits by seeking care from a PPO (Texas True Choice) physician or hospital. You have the freedom of visiting any physician or hospital you choose, but you will receive a higher level of benefits (lower deductibles, lower out-of-pocket costs) when you use an in-network provider.

Highlights of Medical Plan Changes Effective October 1, 2010:

- **Plan A: Added a \$30 Specialty Care Physician Copay**
- **Plan B: Added a \$50 Specialty Care Physician Copay; Lowered the Annual Deductibles and Out-of-Pocket Maximums**
- **Plan C: Increased the Annual Deductibles and Lowered the Out-of-Pocket Maximums**
- **Plan D: Increased the Annual Deductibles and Lowered the Out-of-Pocket Maximums**
- **All Plans:**
 - Added a separate Prescription Drug Deductible that must be satisfied before Drug Copays are applied
 - Removed lifetime maximum benefit limit and added a \$5,000,000 calendar year maximum benefit limit
 - Added Quest/LabCard that pays 100% of lab charges at the doctor's office
 - Mental Health/Substance-Related Disorder expenses are now paid the same as any other medical expense (same copays/coinsurance, same limits)
 - No pre-existing exclusion for children under age 19
 - Dependent children up to age 26 are eligible for coverage without regard to student or marital status (applies to medical only – not dental or vision). Adult children who are eligible for coverage through their own employer's plan are not eligible for coverage under the FIRD health plan.

REMEMBER:

- ✧ *If you change from one benefit plan to another effective October 1st, you may have an additional deductible amount to satisfy.*
- ✧ *All medical deductibles start over in January and are based on a calendar year – January 1st through December 31st. The Medical Plan does have a 4th quarter deductible carry-over provision. This means that charges applied toward your deductible for services received during the last 3 months of the calendar year (October through December) will be applied toward the following calendar year's deductible as well.*