

2025 BENEFITS ENROLLMENT GUIDE!

OPEN ENROLLMENT NOTE:

- **LOGIN** if you want a Flexible Spending Account (FSA) or to make any changes to your current benefits.
- **DO NOT LOGIN** if you want to roll over your current Medical, Vision, and Dental benefits.

**EXPLORE
YOUR
BENEFITS**



OUR EMPLOYEES ARE OUR MOST

VALUABLE ASSET

That's why at Roanoke City Public Schools (RCPS), we are committed to a comprehensive employee benefit program that helps our employees stay healthy, feel secure and maintain a work/life balance. As always, every effort has been made to minimize any increase in costs. The district continues to fund, on average, 90% of the cost for the medical plan. Benefits include:

- Medical Plans
- Health and Limited Flexible Spending Accounts
- 403(b), Non-VRS 457(b) and Roth Retirement Account Options
- Vision Plans
- Dependent Care Flexible Spending Account
- Cancer and Accident Plans
- Dental Plans

To enroll in your benefits, go to KeyNet at <https://keynet.rcps.info/keynet/index.asp>.

Proof of Dependent Eligibility: If adding new dependents during Open Enrollment, employees are required to submit proof of eligibility (see page 6) by the last day of the **Open Enrollment** period. As a **New Hire** or due to a **Qualifying Event**, proof of eligibility is also required for new dependents within 31 calendar days of the date of hire or a Qualifying Event. If ineligible dependents are found, they will be removed from the plan.

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WHAT'S NEW?

- We are pleased to continue the **automatic benefits roll over** for Open Enrollment. This means...**if you are not making any changes** to your current 2024 medical, vision or dental benefits, they will roll to 2025 – **you do not need to make elections**. Your current benefits will automatically roll over at the 2025 rates and wellness status. **However, if you wish to have a Flexible Spending Account (FSA), make coverage changes, elect/waive benefits or add/drop dependents, you MUST login to KeyNet during Open Enrollment.**
- There is no increase in Dental and Vision rates for 2025!
- RCPS makes every effort to provide affordable insurance rates for our employees. Medical rates have increased for 2025. We're excited to announce two new programs to covered services under our medical plans – Maven, a maternal health support program designed to help improve pregnancy outcomes; and Calm Health, a well-being app offering resources to help with sleep, lower stress, and much more.
- For 2025, the High Deductible Health Plan (HDHP) with Health Savings Account (HSA) minimum deductible will increase to \$3,300/Individual (from \$3,200 in 2024) and \$6,600/Family (from \$6,400 in 2024) due to the IRS increase to minimum embedded deductibles. **New ID cards will be issued for anyone enrolled in the HDHP with HSA.** A deductible is the amount of money that the insured person must pay before their insurance policy starts paying for covered expenses. However, Preventive Care services are covered at 100%, no deductible to satisfy.

Wellbeing Programs

Wellness Programs

Our employees' health is very important to us. In an effort to motivate our employees to be more aware of their health and ways that it can be improved, RCPS provides an incentive to those employees who elected to be "Wellness Compliant". It is anticipated that if employees exhibit healthful behaviors, the result will be both a healthier workforce and reduce overall health care costs.

Wellness Compliant Incentive

RCPS' wellness program for 2025 is offered through UnitedHealth Personal Rewards[®] program. **Here's the only requirement for 2025:**

- Complete a preventive physical examination between January 1, 2025 and September 30, 2025. No paperwork is required. Instead, UnitedHealthcare (UHC) will receive the physical code submitted by your provider's office when billing UHC.

UnitedHealthcare allows one physical anytime in the calendar

year. Accordingly, you can schedule your physical earlier in 2025 if need be, to meet the September 30, 2025 deadline. You must have a Preventive Care/Wellness Physical for the appropriate code to be submitted when billing. Periodic office visits to check medications or health status will not count as a Preventive Care/Wellness Physical. You may view if your physical was received, go to myuhc.com and sign in. Look on the right side of your home page, in the **My coverage** box. Click on **My rewards**, "**View your rewards and learn how to earn**". You will see 100% if your physical has been received.

Consider having your wellness physical early. While the deadline is September 30, Human Resources is finding that waiting until close to the deadline is causing issues and delays for employees. In some cases, employees are put in non-compliant status. These delays are often caused when billing codes are not sent by a doctor's office promptly. To avoid this issue, it is *recommended* that you have your wellness physical no later than August 31.

Compliant employees are eligible for the following incentive:

- **Employees:** \$50 per month incentive, a reduction in premium or increased HSA credit.
- **Two-Employee coverage:** Each employee receives a \$50 per month incentive, reduction in premium or increased HSA credit. Both employees must be compliant.

Kaia's Virtual Physical Therapy

Virtual Physical Therapy provided by Kaia delivers:

- Physical therapy exercises, education, and relaxation modules
- 1:1 coaching via chat or phone with licensed physical therapists
- A virtual motion coach that gives real-time feedback

HOW IT WORKS...

- Kaia's Virtual Physical Therapy program uses artificial intelligence (AI) to track your movements. An AI coach will support you through workouts, counting reps and providing immediate feedback. Each day, your therapy is adapted to your needs to help target your specific pain areas.
- Go to startkaia.com/uhc and click on **Get started today** to enroll in Kaia's at-home therapy program.



Wellbeing Programs continued

2nd.MD Second Opinion

2nd.MD is a virtual expert medical consultation and navigation service. 2nd.MD specializes in medical certainty by providing access to elite specialists for questions about:

- Diseases, cancer or chronic conditions
- Surgeries or procedures
- Medications and treatment plans

2nd.MD is confidential, fast and no additional cost to you and your covered dependents enrolled in the UHC medical plan.

To get started, call **866-269-3534**, visit **2nd.MD/RCPS** or download the 2nd.MD app from the Apple Store or Google Play.

Optional UnitedHealth Personal Rewards® Program Through Rally

The UnitedHealth Personal Rewards program is an innovative incentive program designed to help RCPS' employees covered under the RCPS medical plans meet their health goals. The desired outcome is better health for you and cost savings for both you and RCPS.

Enrollment in the UnitedHealth Personal Rewards program is not required. However, if enrolled, simply sign in and you can see that your physical exam was received.

REGISTER WITH UNITEDHEALTH PERSONAL REWARDS® PROGRAM AND TRACK YOUR PROGRESS

To help you keep track of your progress, you will be able to access a personalized scorecard via the website at werally.com/client/rcps/register/. If you still have questions once you've gone online, call Optum Wellbeing at **877-818-5826**.

IT'S EASY TO GET STARTED...

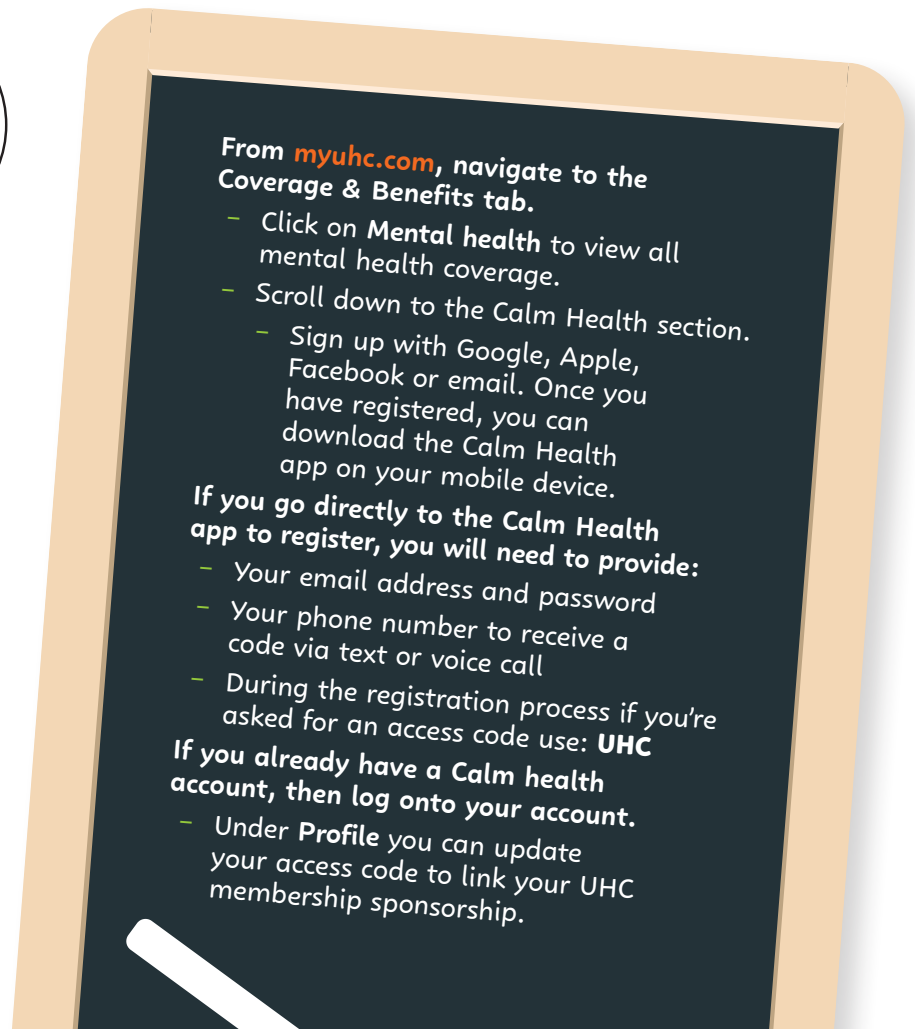
When you register, take the health survey located at werally.com/client/rcps/register/ or register for Rally on **myuhc.com**. The survey will provide information to help you assess your current health status, and learn about any potential health risk factors that you need to address.

You can create your personal action plan and participate in other activities designed to help you stay healthy, get healthy or live with a health condition.

Calm Health

Need help sleeping or meditating? Experience lower stress, less anxiety, improved focus and more restful sleep with the Calm Health app. Calm is a wellbeing app providing 24/7 access to digital resources for sleep, meditation and mindfulness. It also includes mental health screenings as well as self-guided learning modules. Whether you have 30 seconds or 30 minutes, Calm content is made to suit your schedule and needs.

Calm Health is available to all employees and eligible dependents covered by UnitedHealthcare (16 years or older) at no additional cost as part of your health benefits through RCPS. To access Calm Health, go to myuhc.com to the Calm Health landing page and register for a Calm Health account. Once registered, you can use the Calm Health website or download the Calm Health app and sign in.



Wellbeing Programs continued

Real Appeal[®], a comprehensive online Weight Loss Program for employees enrolled in our medical plan

Real
Appeal

Real Appeal can help you reach your personal weight loss goals and help reduce your risk of developing diabetes and cardiovascular diseases. It's an easy digital program offered at no cost to you as part of our medical benefits plan through RCPS.

When you enroll, you'll receive:

- **A personalized transformation coach for an entire year**
 - » Your transformation coach who will guide you through the program and develop a simple, customized plan that fits your needs, preferences, goals and medical history.
- **24/7 online support and mobile app**, helping to stay accountable to goals even easier
 - » Weekly analysis, feedback and goal reporting
- **A Success Kit** that includes a digital food scale, "perfect portion" plate and much more – delivered to your door!

Real Appeal is a fun and engaging plan that helps you learn simple steps for a healthier life, so you can spark your transformation. Enrollment in this program is online – go to realappeal.com to sign up. For questions or technical issues, call the Rally Coach Support Line Answer Center at **844-924-7325**, Monday through Friday from 7 am to 11 pm ET.

Smoking Cessation Reimbursement for Employees

If you want to take steps to stop using tobacco products:

- Enter a provider-recommended Smoking (and/or other tobacco product) Cessation program, RCPS will cover the professional costs of that program up to \$500 per year. **If you terminate employment, reimbursement will end on your last day worked.**

Maven

Maven is a maternal health support program designed to help improve pregnancy outcomes. A digital platform, Maven helps deliver inclusive benefits for individuals and families, including:

- Support through three (3) months postpartum
- Partner access and support
- Pregnancy, miscarriage and loss, postpartum and return-to-work support

Dedicated care advocacy, referrals to in-person care, and care plans for all maternal risk levels are offered through Maven.

In addition, Maven provides:

- Around-the-clock access to 30+ specialties, including OB-GYNs, doulas, lactation consultants, midwives and sleep coaches
- Live classes
- Thousands of articles and videos
- Community groups with peers in similar journeys

Beginning January 1, 2025, Maven will be available to all employees and eligible dependents covered by UnitedHealthcare at no additional cost as part of your health benefits through RCPS.



Enrollment FAQs

How do I enroll in benefits?

To enroll in your benefits, go to KeyNet at <https://keynet.rcps.info/keynet/index.asp>.

What happens if I make a mistake or I am not sure what benefits I elected?

- **Open Enrollment:** Print your confirmation statement when you have completed online enrollment and compare it to your choices. If you discover a mistake during the Open Enrollment period, you can go back into **KeyNet** and make a change.
 - » After the Open Enrollment period closes, review your January 15, 2025 paycheck (direct deposit receipt) to see that all your elected benefit deductions/credits are correct. Contact Human Resources no later than January 31, 2025 if there is a concern.
- **The last day corrections can be made to your 2025 Open Enrollment elections is January 31, 2025.**
- **New Hire Enrollment:** Print your confirmation statement when you have completed online enrollment and compare it to your choices. If you discover a mistake you can log back into **KeyNet** during the Enrollment period and make a change.

When can I make changes after Benefit Enrollment?

- You must have a Qualifying Event to make a mid-year change to your benefits. Qualifying events include: marriage, divorce, legal separation, status change, birth or adoption of a child, change in child's dependent status, death of spouse, child or other qualified dependent, or change in spouse's benefits or employment status.
- A Qualifying Event allows you to make a change in benefits based on the Qualifying Event.
- Changes in benefits must be made within **31 calendar days** of a Qualifying Event by contacting Human Resources. Provide the following to Human Resources:
 - » **Proof of the Qualifying Event** is required within 31 calendar days of the event, e.g. letter from a spouse's employer, birth certificate, marriage license, etc.
 - » **A completed benefit change form** for each benefit. These forms may be found on the RCPS Human Resources Intranet page. Click the **Qualifying Event** tab and contact Human Resources at **540-853-2502**.
 - » **Proof of eligibility is required** if adding dependents to your medical, vision or dental plans. You are required to submit a copy of a marriage license, birth certificate or copy of the first page of your most recent tax return listing your dependents (with Social Security numbers and income blocked out) to Human Resources within 31 calendar days of the date of a Qualifying Event.



BRAINSHARKS!

Scan the QR codes below for more details on the great benefits available to you!

UNITEDHEALTHCARE
TOOLS & RESOURCES



2025 OPEN
ENROLLMENT

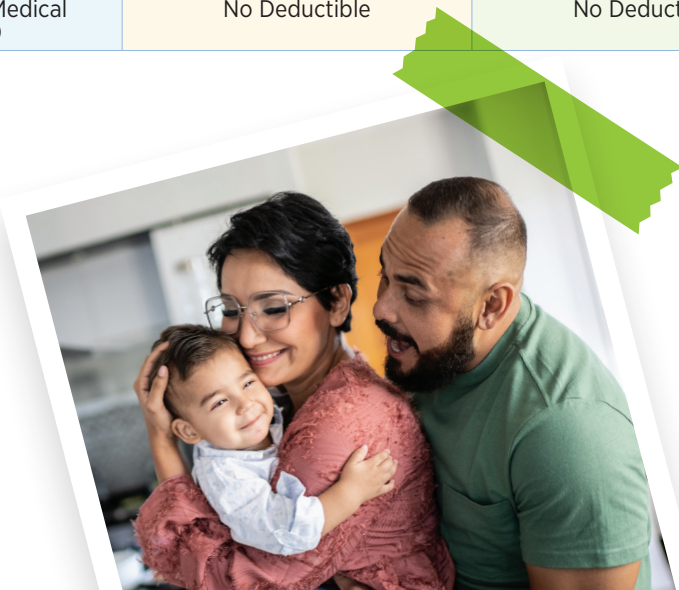


Medical and Prescription Drug Overview

This is a summary of what you pay in-network for RCPS' UnitedHealthcare medical and Express Scripts prescription drug plans for the upcoming plan year — January 1, 2025 to December 31, 2025. UnitedHealthcare plans allow you the freedom to use providers in- and out-of-network; however, benefits are paid at a lower percentage for out-of-network providers. For example, prior authorization is required for prescription drugs, certain services, tests and procedures. For in-network medical services, tests and procedures, your provider will coordinate any necessary prior authorization. Additional information about UnitedHealthcare and Express Scripts is available on the RCPS Human Resources Intranet page. You may also call the phone number on your UnitedHealthcare medical card or Express Scripts ID card.

Services	High Deductible Health Plan (HDHP) with Health Savings Account (HSA)	Health Reimbursement Account (HRA)	Traditional
Deductible			
Individual	\$3,300	\$2,000	\$500
Family	\$6,600	\$4,000	\$1,000
Out-of-Pocket Max			
Individual	\$5,000	\$4,000	\$2,000
Family	\$10,000	\$8,000	\$4,000
Preventive Care	0%	0%	0%
Virtual Visit			
Medical	\$49 Before Deductible	\$25	\$20
Behavioral Health	20% After Deductible		
Office Visit			
Primary Care	20% After Deductible	\$25	\$20
Specialist	20% After Deductible	\$50	\$40
In-office Lab & X-ray	20% After Deductible	20% After Deductible	20% After Deductible
Outpatient Facility (surgery, etc.)	20% After Deductible	20% After Deductible	20% After Deductible
Inpatient Hospitalization	20% After Deductible	20% After Deductible	20% After Deductible
Emergency Room	20% After Deductible	20% After Deductible	20% After Deductible
Prescription Drugs - Express Scripts			
Retail (31-day supply)	20% After Deductible	\$10 / \$30 / \$60 / \$80*	\$10 / \$20 / \$40 / \$60*
Mail Order (90-day supply)	20% After Deductible	\$20 / \$60 / \$120	\$20 / \$40 / \$80
Deductible	(Combined with Medical Deductible)	No Deductible	No Deductible

* The 4th tier is for Specialty Drugs (prior authorization may apply).



Medical Insurance

RCPS offers three (3) medical plan options, the High Deductible Health Plan with Health Savings Account, the Health Reimbursement Account Plan, and the Traditional Plan.

High Deductible Health Plan (HDHP) with Health Savings Account (HSA)

WHAT DO YOU NEED TO DO?

If you are enrolled in the High Deductible Health Plan, you must open a Health Savings Account.

WHAT IS A HEALTH SAVINGS ACCOUNT (HSA)?

A Health Savings Account is an account that allows you to accumulate funds deposited by RCPS on your behalf, with the option of adding your own pre-tax contributions, to cover health care expenses toward your deductible and co-insurance. You must be enrolled in UnitedHealthcare's High Deductible Health Plan (HDHP) to have an HSA.

HOW TO OPEN A HEALTH SAVINGS ACCOUNT (HSA)

1. Go to optumbank.com to open your HSA bank account. Click on **Open an HSA** on the top bar, and click **Next**.
2. Enter your demographic information.
3. **Group Number or Financial Advisor Number**, enter our group number: **717709**.
4. **Effective date:**
 - » **Open Enrollment effective January 1, 2025:** Please open your HSA bank account by December 3, 2024 to assure that you receive HSA funds in January.
 - » **New Hire or Qualifying Event (QE):** Enter **first of the month following** your date of hire or the first of the month following the date of the QE. Example: Hired/QE March 15, 2025, effective date is April 1, 2025.

Enrollees will receive a letter from Optum Bank with your card or a letter requesting additional information, if needed. If asked for additional information, please respond to Optum Bank as soon as possible.

HSA ADVANTAGES

- **If you wish to contribute additional dollars to your HSA account pre-tax, you must complete a new HSA Deduction/Contribution form each year and submit it to Payroll.** Go to the RCPS Human Resources Intranet page, **Forms - Benefits** link, and print the 2025 HSA contribution form. Complete and submit this form to Payroll. You can change the per pay period contribution to your account anytime throughout the year. **You must not exceed the IRS maximum contribution each year which includes both employee and employer contributions** made on your behalf. The 2025 IRS maximum contribution is **\$4,300 for an individual** and **\$8,550 for a family**. HSA catch-up (for age 55 and older) is \$1,000.
- You can use the money in your HSA to pay for eligible medical and prescription expenses to satisfy your plan's annual deductible.
- Unused account dollars are yours to keep, even if you retire or leave the company.
- Health care dollars can grow over time. You can also invest your HSA dollars in select funds.
- HSA dollars can be used for future eligible medical, vision or dental expenses.

2025 IRS ANNUAL HSA CONTRIBUTION LIMITS

INDIVIDUAL: \$4,300

FAMILY: \$8,550

CATCH-UP: \$1,000

A new HSA Deduction/Contribution form must be completed each year if you wish to contribute your own dollars.

Medical Insurance continued

HDHP with HSA

HSA-ELIGIBLE EXPENSES

The products and services listed to the right are examples of eligible expenses for payment under your HSA, to the extent that such services are not covered by your medical, vision and dental insurance plans. This list is not all-inclusive; additional expenses may qualify, and the items listed are subject to change in accordance with IRS regulations. Please refer to IRS Publication 502 to verify that your expense is eligible.

HSA TAX PROVISIONS AND ELIGIBILITY REQUIREMENTS

- **HSA account holder must not be covered by any other health plan (i.e. Medicare Part A or Part A and B, Medicaid, TRICARE, Group, and Individual non-HDHP medical plan, or obtain care at the VA) unless it is a HDHP plan.**
- Contributions to your HSA are made pre-tax and withdrawals from your account for eligible medical expenses are tax free. Earnings on the account are not taxed and there is no lifetime maximum accumulation of your HSA.
- Withdrawals for reasons other than eligible medical expenses taken before age 65 are subject to an additional 20% penalty but there is no distribution age requirement.
- HSA account holder cannot be covered by a spousal medical FSA and cannot be claimed as a dependent on another person's tax return.

HDHP UPDATE

For 2025, the High Deductible Health Plan (HDHP) with Health Savings Account (HSA) minimum deductible will increase to \$3,300/Individual (from \$3,200 in 2024) and \$6,600/Family (from \$6,400 in 2024) due to the IRS increase to minimum embedded deductibles. A deductible is the amount of money that the insured person must pay before their insurance policy starts paying for covered expenses. However, Preventive Care services, according to ACA guidelines, are covered at 100% with no deductible.

LIMITED PURPOSE HEALTH FLEXIBLE SPENDING ACCOUNT (FSA)

- You may only enroll in a Limited Purpose Health FSA. **This account may be used for eligible vision and dental expenses only.** Medical expenses are not eligible for reimbursement. See FSA information on [pages 18 and 19](#).



HSA-Eligible Expenses

- Abdominal Supports
- Acupuncture
- Alcoholism treatment
- Artificial limbs & teeth
- Asthma treatments/nebulizer
- Bariatric Surgery
- Blood pressure monitoring devices
- Body scans (MRI, CAT scan)
- Breast reconstruction surgery following mastectomy
- Co-insurance amounts and deductibles
- Contact lenses – also materials & equipment
- Dental procedures, non-cosmetic
- Dentures and denture adhesives
- Diabetic supplies
- Diagnostic items/services
- Drug addiction treatment
- Eye Exams
- Eyeglasses – prescription sunglasses/safety glasses
- Flu Shots
- Fluoridation device or services
- Gambling problem treatment
- Hearing aids
- Home Health Care
- Hospital services
- Hot/cold packs
- Inclinator
- Individual counseling (to alleviate or prevent a physical or mental defect or illness)
- Insulin
- Laboratory tests
- Long Term Care Premiums
- Laser eye surgery/Lasik
- Medical Alert necklace or bracelet
- Medical Records charges
- Mental health treatment facility
- Nursing services provided by a nurse or attendant
- Obstetrical expenses
- Occlusal guard to prevent teeth grinding
- Operations
- Optometrist
- Organ donors/transplants
- Orthodontia
- Osteopath fees
- Ovulation monitor
- Oxygen
- Patterning exercise
- Personal trainer fees
- Physical exams
- Physical therapy
- Prenatal/Postnatal exams
- Prescription drugs (prescription drugs imported from another country are not covered)
- Preventive care screenings
- Prostheses
- Psychiatric care
- Psychoanalysis
- Psychologist
- Screening tests
- Sleep deprivation treatment
- Smoking cessation programs and medications
- Speech Therapy
- Sterilization procedures
- Support braces/wraps
- Surgical Stockings
- Taxes on medical services and products
- Transplants
- Transportation expenses for person to receive medical care
- Vaccines/Immunizations
- Weight loss program/drugs – if prescribed by a physician

Medical Insurance continued

Health Reimbursement Account (HRA) Plan

WHAT IS THE HEALTH REIMBURSEMENT ACCOUNT (HRA) PLAN?

The HRA Plan is a medical plan with a Health Reimbursement Account funded by RCPS. This account is used on an employee's behalf by UnitedHealthcare (UHC) to pay for eligible expenses after meeting the \$1,000 Access Point.

- An employee in the HRA Medical Plan has a Health Reimbursement Account (HRA) that is a part of the plan. This HRA is a tax-exempt account funded by RCPS, and excluded from the employee's gross income. The disbursements from the HRA are used to pay for qualifying medical expenses.
- HRA dollars can only be used to pay the eligible medical expenses of the employee, the employee's enrolled spouse and the employee's enrolled dependents. RCPS' HRA allowable expenses apply to the deductible, co-insurance, out-of-pocket maximum, and provider office visit copays.

HOW THE HEALTH REIMBURSEMENT ACCOUNT (HRA) WORKS

- **HRA Dollars:** These are dollars provided by RCPS to an employee's HRA. HRA dollars are distributed to providers by UnitedHealthcare only.
- **HRA Dollar Access Point:** The HRA Dollar Access Point is reached when an employee incurs \$1,000 in eligible expenses. UnitedHealthcare will distribute available HRA dollars as they track employee expenses.
- **HRA Dollars Available:**
 - » **Employee Only Coverage:** Each plan year, \$1,000 HRA dollars are available in the HRA. The maximum HRA dollars an employee can accumulate in the HRA in a plan year is \$2,000. This includes the plan year HRA dollars (\$1,000) and unused HRA dollars rolled over from the prior year (maximum of \$1,000). UnitedHealthcare will distribute any or all HRA dollars available for eligible expenses once the Access Point is met. If an employee terminates employment, HRA dollars are not portable.
 - » **Employee + Child, Employee + Spouse, and Employee + Family Levels of Coverage:** Each plan year, \$2,000 HRA dollars are available. The maximum HRA dollars an employee can accumulate in a plan year is \$4,000. This includes the plan year HRA dollars (\$2,000) and unused HRA dollars rolled over from the prior year (maximum of \$2,000). UnitedHealthcare will distribute, on behalf of whichever family member reaches the Access Point, any or all HRA dollars available in the HRA account. If an employee terminates employment, HRA dollars are not portable.

Since the maximum total deductible for the family plan is \$4,000, it is possible that if the first family member reaches the Access Point of \$1,000 and uses all available HRA dollars, and a second family member reaches the Access Point of \$1,000, the second family member will be required to meet the full deductible of \$2,000. Once a family member meets the full individual deductible (\$2,000), then co-insurance begins, e.g. 80% paid by UnitedHealthcare and 20% paid by the member.

Traditional Medical Plan

WHAT IS THE TRADITIONAL PLAN?

The Traditional Plan option offers the lowest employee cost-share, e.g. lowest copays, deductible and out-of-pocket maximum with the highest premium cost for employees. See [page 7](#) to compare to our other plans.

Express Scripts

Who is Express Scripts?

Express Scripts is a pharmacy plan that covers the medicine your doctor prescribes whether you pick it up from your neighborhood pharmacy or have it delivered to your home. It is the largest independent manager of pharmacy benefits in the United States and one of the country's largest pharmacies, serving more than 100 million people. Express Scripts knows healthcare is complicated and they're available 24/7 to give you the information and support you need.

What is the Express Scripts Member Services phone number and what are the hours of operation?

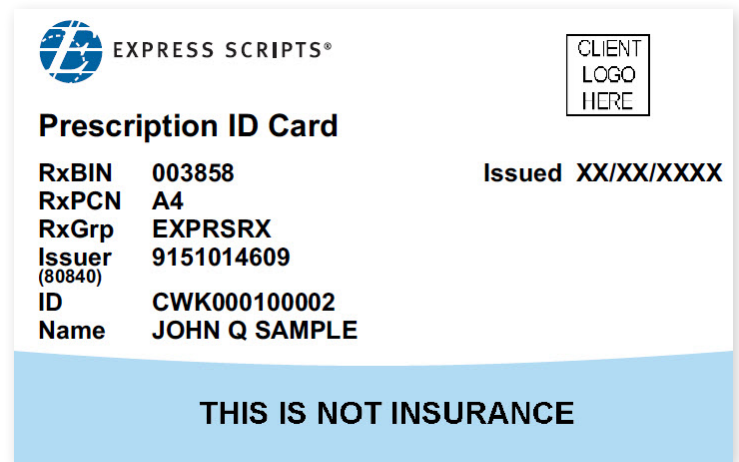
Express Scripts Member Services is available 24 hours per day, 7 days per week and can be reached at **844-803-7603**.

Is there a separate card for prescription drugs?

Yes, Express Scripts provides a separate prescription drug card to be presented when obtaining your medications. See sample card on this page.

Please note that the member ID card will cover all your dependents. Separate ID cards for dependents will not be issued. However, you may request additional cards by calling Member Services.

A convenient feature on **Express-Scripts.com** allows you to print a temporary member ID card for use at a participating retail pharmacy. The temporary card isn't intended to replace your member ID card. If you need to order a permanent replacement card, please contact Member Services toll-free at **844-803-7603**. Or, visit **Express-Scripts.com** and register.



What is Utilization Management?

Utilization management (UM) is a process that is part of our health plan. Utilization management helps to ensure that you are getting the right drugs – all while helping to make medicine more affordable. Prescription drug costs continue to rise, driven primarily by specialty drugs which increased 23% from 2023 to 2024. Cost containment measures include prior authorization, step therapy and quantity limits on certain medications. For more information on these requirements or to research your prescriptions, please visit **Express-Scripts.com**.



DID YOU KNOW...

For a prescription drug benefits overview by medical plan, get a price on a medication, or find a pharmacy in your area, go to www.express-scripts.com/RCPS.



Right Rx Program

Pharmacy Plan Enhancement

The Right Rx program, powered by US-Rx Care, may help reduce your out-of-pocket prescription spending. Right Rx is an innovative program that works with Express Scripts to analyze all of your prescription drugs and communicate with your doctor on quality of care and cost-saving opportunities.

Do all employees who are in a medical plan have this enhancement?

- Yes, Right Rx will review all those on the medical plan to see if there are any cost-saving opportunities available to them.

What do employees do to participate?

- Respond to Right Rx's call. At times, US-Rx Care may call to discuss pharmacy care options. Please answer these calls, as a prompt reply will provide opportunities to save money.
- Employees may also call to request a review to determine if there is a lower cost alternative. For questions regarding this program, please contact US-Rx Care Pharmacy Services at **800-241-8440**.

What do employees do if they don't want to participate?

- This program is voluntary and if Right Rx calls, an employee may elect to participate in the savings opportunity or not.



Virtual Visits: A Convenient Option

24/7 Medical Virtual Care

When you don't feel well, or your child is sick, the last thing you want to do is leave the comfort of your home to sit in a waiting room. Now, you don't have to.

A Medical Virtual Visit lets you see and talk to a doctor from your video-equipped mobile device or computer. Most visits take about 10-15 minutes and doctors can write a prescription, if needed, that you can pick up at your local pharmacy.

WHEN YOU WOULD USE A MEDICAL VIRTUAL VISIT

- When your doctor is not available
- When you become ill while traveling
- When you are considering visiting a hospital emergency room for a non-emergency health condition

CONDITIONS COMMONLY TREATED THROUGH A MEDICAL VIRTUAL VISIT

Doctors can diagnose and treat a wide range of non-emergency medical conditions including:

- Bladder infection/urinary tract infection
- Bronchitis
- Cold/flu/sore throat
- Diarrhea
- Fever
- Migraine/headaches
- Pinkeye
- Rash
- Sinus problems
- Stomach ache

HOW TO ACCESS MEDICAL VIRTUAL VISITS

1. Log in to myuhc.com and click on **Talk To A Doctor Online**.
2. After registering and requesting a visit, you will pay your portion of the service costs according to your medical plan ([see page 7 for costs](#)).
3. Then you will enter a virtual waiting room.
4. During your visit, you will be able to talk to a doctor about your health concerns, symptoms and treatment options.

Behavioral Health Virtual Care

From the privacy of home and the convenience of your mobile device or computer, you can receive caring support from a licensed behavioral health virtual therapist. Virtual therapy offers confidential counseling and includes:

- **Private video sessions**
Get 1-on-1 support —in your home and at a time that's convenient for you.
- **Help with coping — for children, teens and adults**
Your licensed therapist may provide a diagnosis, treatment and medication if needed.
- **Similar standard of care as in-person visits**
You can see the same therapist with each appointment and establish an ongoing relationship.

VIRTUAL THERAPY IS DESIGNED TO HELP TREAT CONDITIONS LIKE:

- ADD / ADHD
- Addiction
- Anxiety
- Depression
- Mental health disorders

TO FIND A PROVIDER AND SCHEDULE A VISIT:

Sign in or register on myuhc.com. Then, go to **Find Care > Virtual Visits Directory > Virtual Behavioral Care > Get Started** and call the provider to set up an appointment. Or call the telephone number listed on the back of your medical ID card.



Diabetes Management Through Livongo By Teladoc Health

Diabetes and pre-diabetes affect over 136 million Americans. If not properly treated, pre-diabetes can lead to diabetes, which can cause serious health complications. Knowing if you have diabetes or pre-diabetes, and getting help to manage these conditions, are the first steps to better health.

Livongo by Teladoc Health is a diabetes management program that supports people with type 1 and type 2 diabetes and helps make living with diabetes easier. This program is part of your benefits that can help you save money because you do not have to pay for diabetes supplies. You will get support for your diabetes with smart devices, expert coaches and easy-to-follow, personalized plans.

Benefits include:

- Easy-to-use, connected devices that provide feedback
- Personalized content, delivered when members are most receptive, to help drive engagement and help them reach their goals
- Coaching with 1:1 live and digital support with remote monitoring for members with diabetes
- Free test strips and monitor
- Lower or no copays for doctor-related visits with potential savings of up to \$500 a year

For more information:

- Visit teladochealth.com/smile/RCPS
- Call **800-835-2362**, code: **UHC-KEY-RCP**

How do members enroll?

- Go to teladochealth.com/smile/RCPS and register for Livongo by Teladoc. Select **Enroll Now** and complete the online questionnaire to get started.
- After Open Enrollment, if you are a New Hire or add medical benefits due to a Qualifying Event: Getting registered for Livongo by Teladoc Health program is easy and only takes a few minutes. You can either download the Livongo app, call **800-945-4355** or visit the website. You will start the process by answering a few questions about your health to see if you qualify for the program. If you do qualify, you will be mailed a Welcome Kit with instructions on how to get started.



Dental Insurance

Delta Dental of Virginia: Dental PPO plus Premier Plan

You are not required to be enrolled in a RCPS Medical Plan. You can elect Dental coverage separately.

Delta Dental Plan Features	Low Plan	High Plan
Annual Deductible	\$25 (limit 3 per family per calendar year)	\$0
Annual Maximum	\$1,500	\$2,000
Diagnostic & Preventive Services	100%	100%
Basic Dental Care	80%	80%
Major Dental Care 12 months waiting period in Low Plan only	50%	80%
Orthodontic Benefits 12 months waiting period Orthodontic Lifetime Maximum=\$1,500	N/A	50%

Refer to Delta Dental Benefit Description for coverage details. Additional information about Delta Dental of VA plans is available on the RCPS Human Resources Intranet page.

Delta Dental - Virtual Visits

Having a dental emergency? If you're a member of Delta Dental of Virginia, you have 24/7/365 access to a dentist through Delta Dental - Virtual Visits, delivered by [Teledentistry.com](https://www.teledentistry.com), a great solution when your dentist is not available!

IT'S SAFE.

Teledentistry is a safe and effective way to receive care when you:

- Have a dental emergency and do not have a dentist,
- Need access to a dentist after hours, or
- Need to consult a dentist without leaving home or while traveling.

The teledentistry service is included in the RCPS Delta Dental plan and counts as an oral examination.

IT'S EASY.

You can access [Teledentistry.com](https://www.teledentistry.com) by smartphone, tablet or computer with audio/visual capabilities. Or if you prefer, call the dedicated phone number at **866-256-2101**.

Teledentistry dentists provide the initial consultation and can write prescriptions, when needed.

After the initial consultation, the Teledentistry dentist will email consultation notes to your Delta Dental dentist for further diagnosis and treatment. If you do not have a Delta Dental dentist, [Teledentistry.com](https://www.teledentistry.com) will refer you to an in-network dentist.

Vision Insurance

UnitedHealthcare Vision

You must be enrolled in a RCPS Medical Plan with the same coverage level as the Medical Plan.

Plan Features	In-Network	Out-of-Network Reimbursement	Limitations
BASIC VISION			
Yearly Eye Exam (no cost in-network)	100%	Up to \$40	Exam every 12 months. Provider must be informed that this is separate from your medical plan and is offered by UnitedHealthcare Vision
BUY-UP OPTION			
Selected vendors materials copay	\$10	\$10	Copay due if member receives glasses/lenses/frames
Lenses:			Every 12 months
Single vision	100%	Up to \$40	
Lined bifocal	100%	Up to \$60	
Lined trifocal	100%	Up to \$80	
Lenticular	100%	Up to \$80	
Polycarbonate lenses:			
Single vision	100%	Up to \$40	
Lined bifocal	100%	Up to \$60	
Lined trifocal	100%	Up to \$80	
Frames:			Every 24 months
Wholesale	Up to \$50	Up to \$45	
Retail	Up to \$130	Up to \$45	
Elective contact lenses:			In lieu of glasses, every 12 months, limit 4 boxes
“Covered in full” selection	100%	Necessary-Up to \$210	
All other contacts	Up to \$105	Elective-Up to \$105	
Retinal Screening Photography*	\$39	N/A	Every 12 months

* For those enrolled in the Buy-up Option Vision Plan, Retinal Screening Photography. Retinal screening photography provides eye doctors a closer look at the inside of your eye. These pictures may be used from year-to-year to record changes in your retina and optic nerve. They can also help your doctor find early signs of chronic conditions such as diabetes, hypertension and glaucoma.

Refer to UnitedHealthcare Vision Summary for coverage details.

SEE MORE WAYS TO SAVE

Keep out-of-pocket costs low by visiting uhcontacts.com or uhcglasses.com where you'll have a variety of brands and frame choices at your fingertips.

Flexible Spending Accounts (FSAs)

Features & Advantages

FEATURES OF THE FSA

WageWorks has more than 20 years' experience in flexible benefit administration and they are the largest provider of these services in the nation.

- Health and Limited FSA – new maximum: \$3,300
- Dependent Care FSA – maximum: \$5,000
- Use of a debit card for eligible Health FSA expenses
- A comprehensive website, wageworks.com, where you can view claim status, FAQs, and access information.
 - » Planning tools, forms and educational materials
 - » Online claim submission with quick turn-around time and tracking of account balances

PROVISIONS OF THE FSA: USE IT OR LOSE IT!

- Deposits to your FSA accounts are only made during the calendar year between January 1, 2025 and December 31, 2025.
- **Use it or lose it!** You have until March 15, 2026 to incur eligible expenses for 2025 monies and until March 31, 2026 to submit eligible expenses for reimbursement for 2025 monies.

ADVANTAGES OF AN FSA

FSAs provide you with an important tax advantage (see chart below) which can help you pay health care and dependent care expenses on a pre-tax basis. By anticipating your family's health care and dependent care costs for the next year, you can actually lower your taxable income. New elections must be made each year to the Flexible Spending Account to continue participation.

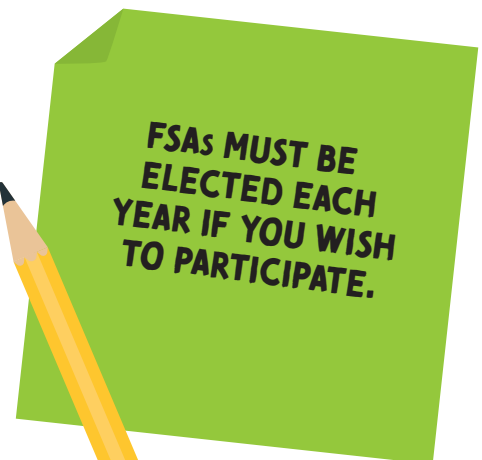
- An account minimum of \$100 per year is required in each FSA.

IMAGINE YOUR TAX RATE IS 25% AND YOU HAVE \$3,050 IN ELIGIBLE HEALTH CARE EXPENSES:

	With FSA	No FSA
Eligible Expenses:	\$3,300	\$3,300
Tax Benefit:	(\$825)	\$0
Final Cost to You:	\$2,475	\$3,300

IMAGINE YOUR TAX RATE IS 25% AND YOU HAVE \$5,000 IN ELIGIBLE DEPENDENT CARE EXPENSES:

	With FSA	No FSA
Eligible Expenses:	\$5,000	\$5,000
Tax Benefit:	(\$1,250)	\$0
Final Cost to You:	\$3,750	\$5,000



Flexible Spending Accounts (FSAs)

continued



Health FSA

This program lets RCPS employees pay with pre-tax dollars for certain IRS-approved medical care expenses not covered by the insurance plan, e.g. copays, deductibles and co-insurance. See IRS publication 502. Examples include:

- Hearing services, including hearing aids and batteries
- Vision services, including contact lenses, contact lens solution, eye examinations and eyeglasses
- Dental services and orthodontia
- Chiropractic services
- Acupuncture
- Prescription contraceptives

The maximum amount you can contribute to your Health Flexible Spending Account is \$3,300.



Dependent Care FSA

The Dependent Care FSA allows employees to use pre-tax dollars toward qualified dependent care such as caring for children under age 13 or caring for elders. See IRS publication 503. Examples include:

- The cost of child or adult dependent care
- The cost for an individual to provide care either in or out of your house
- Nursery schools and preschools (excluding kindergarten)

The maximum amount you can contribute to your Dependent Care Flexible Spending Account is \$5,000.



Limited Purpose Health FSA

(ONLY IF YOU ARE ENROLLED IN THE HDHP WITH HSA PLAN)

If you are in the HDHP with HSA, you may have a Limited Purpose Health FSA. This account allows employees to pay for certain **IRS-approved vision and dental care expenses only**, not covered by the insurance plan, with pre-tax dollars. See IRS publication 502. Examples include:

- Vision services, including contact lenses, contact lens solution, eye examinations and eyeglasses
- Dental services and orthodontia

The maximum amount you can contribute to your Limited Purpose Health Flexible Spending Account is \$3,300.

VRS Benefits

Retirement Benefits

The Virginia Retirement System (VRS), an independent state agency, provides retirement and other benefits to covered Virginia public sector eligible employees. Go to varetire.org for information, forms, publications and access to your retirement information. Sign into “My VRS” to look at your retirement information and run your own retirement estimates. If you need assistance, please call VRS at **888-827-3847**.

Plan 1 and Plan 2 have:

- A Defined Benefit Plan (Pension), and
- The option to apply for Disability Retirement, if applicable
- Update your beneficiaries online. Go to varetire.org > **My VRS**.

Hybrid Plan has:

- A Defined Benefit Plan (Pension), and
- Two Contribution Accounts: 401a and 457. You can go online to varetire.org and view more information about your plan under the “Defined Contribution Plans” tab. For assistance, call VRS-Defined Contribution Plans at **877-327-5261**.
- Short Term and Long Term Disability coverage after a year and one day in the Hybrid Plan. VACORP manages this program and their toll-free number is **844-404-2111**.
- Update your beneficiaries online. Go to varetire.org/hybrid > **DCP Account Access** > **Defined Contribution Log-in**.

Life Insurance Benefits

VRS-eligible employees will be covered for Basic Group Life Insurance at no cost through Securian Financial/VRS.

Group Life Insurance, as noted on VRS’ website:

“Natural death benefit. The natural death benefit is equal to your creditable compensation rounded to the next highest thousand and then doubled. Example: If your compensation is \$41,600, that amount will be rounded to \$42,000 and then doubled for a natural death benefit of \$84,000.

Accidental death benefit. The accidental death benefit is double the natural death benefit. Example: If your natural death benefit is \$84,000, that amount will be doubled for an accidental death benefit of \$168,000.”

- Update your beneficiaries online. Go to varetire.org > **My VRS**.

Optional Life Insurance

You are also eligible to apply to purchase additional life insurance for the yourself, spouse, and dependent children through the **Optional Group Life Insurance Program**. You would pay the premium for this additional coverage through payroll deductions. You’ll find the application under **Enrollment > Forms**. Contact Securian Financial/VRS at **800-441-2258**.

- Apply for Optional Group Life insurance online. Go to varetire.org > **My VRS**.



Voluntary Benefits with AFLAC and Allstate

AFLAC

DISABILITY INCOME PROTECTION, ACCIDENT, CANCER, HOSPITAL CONFINEMENT COVERAGE

Coverage Overview

- **Disability Income Protection Insurance:** Benefits include total disability, partial disability and transitional disability.
- **Accident Indemnity Protection Insurance:** Allows cash benefits to be paid directly to employee.
- **Personal Cancer Indemnity Insurance:** Includes first occurrence benefit, radiation and chemotherapy benefit.
- **Hospital Confinement Indemnity Insurance:** Daily benefit and rehabilitation benefit.

Enrolling

- Sign up anytime directly with our AFLAC representative: Judy McCullough, [434-851-2241](tel:434-851-2241).
- Premiums are paid through payroll deduction, post-tax and coverage is portable.

Allstate

GROUP ACCIDENT AND CANCER COVERAGE

Group Voluntary Accident Insurance Overview

- Benefits for on and off the job accidents.
- Consists of a variety of benefits to help employees with medical and hospital expenses.

Group Voluntary Cancer Insurance Overview

- Consists of a variety of benefits that correspond with hospitalization, radiation/chemotherapy and surgery and has an initial diagnosis benefit.
- A Wellness Benefit paid per insured annually when one of the covered Wellness Tests is performed.

Enrolling

- **Group Accident coverage:** Is guaranteed issue (no evidence of insurability required).
- **Group Cancer coverage:** If not elected within 31 days of hire, evidence of insurability is required.
- You may apply by printing and completing the Allstate application. Go to the RCPS Human Resources Intranet page, Human Resources, click the **Forms – Benefits** link. Submit completed form to Human Resources.
- Premiums are paid through post-tax payroll deduction, and coverage is portable.



Voluntary Non-VRS Retirement Plans

403(b), 457(b), and Roth Plans

In addition to 403(b) accounts, you may select from 457(b) investment options as well as post-tax Roth 403(b) and 457(b) options with our existing vendors.

Pre-Tax Deferrals, 403(b) and 457(b) retirement plans: By saving on a pre-tax basis, you reduce the taxes you pay today and delay paying taxes on the money you save. Taxes are paid when you withdraw the money from the plan. As an employee, you may start participating at any time during your employment. Employees may contribute the maximum in BOTH types of accounts to augment retirement savings.

Roth Deferrals (after tax), Roth Elective Deferral: This a retirement plan that allows a participant to make contributions with post-tax rather than pre-tax dollars. Contributions designated as Roth Elective Deferral contributions are subject to Federal income tax withholding since those amounts will be currently taxed as wages.

WHAT IS THE DIFFERENCE BETWEEN POST-TAX AND PRE-TAX ELECTIVE DEFERRALS IN A RETIREMENT PLAN?

If a distribution from a Roth Elective Deferral account meets certain requirements, earnings are tax-free. However, the deferrals and growth on pre-tax contributions will be taxed at the participant's income tax rate at the time of distribution.



Voluntary Non-VRS Retirement Plans

continued

403(b), 457(b), and Roth Plans

To sign up for a 403(b), 457(b) and Roth Plans administered by PenServ:

1. Review the list of vendors which can be found on the Human Resources Intranet page, **Web Access Guide**. Contact the vendor and open an account. If you have an existing account with one of the vendors on our list but wish to add a Roth or 457(b), you must contact your vendor to do so. Once that account is established, you can then go to PenServ's website to designate your contributions.
2. PenServ's website is penserv.com. Sign up using your vendor account information.
3. For questions, call PenServ at **800-849-4001**.

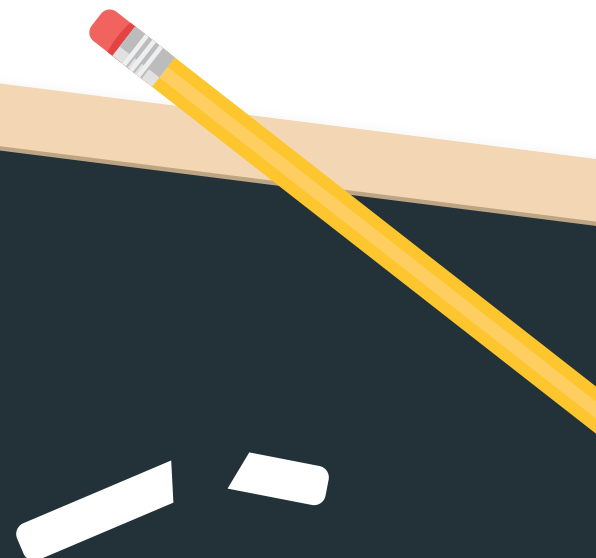
Contributions

- Contributions are deducted from your paycheck for the 403(b) and 457(b) plan on a pre-tax basis. Taxes are deferred until the tax year in which funds are received by you from the plan(s).
- Contributions made into Roth plans are post-tax.
- A participant may make both pre-tax elective deferrals and post-tax Roth elective deferrals at the same time. Participants can elect to have some of their contributions designated as pre-tax elective deferrals and some as post-tax Roth elective deferrals.

	403(b)	457(b)
Maximum annual contribution*	\$23,000	\$23,000
Age 50 "Catch up" (additional contribution amount permitted)	\$7,500	\$7,500

*Important: 457(b) IRS annual maximum includes any additional contributions you make to the VRS Hybrid 457(b) plan and includes auto-escalation.

The 2025 Universal Availability Notice will be posted on the RCPS Human Resources Intranet page when issued.



Employee Assistance Program (EAP)

Balancing the demands of work and life can be challenging. The RCPS-sponsored EAP through Carilion offers you support for personal, work and family problems, including substance use concerns, as well as financial worries. This program is available to you and your family members at no cost. The EAP services include up to five (5) free visits per concern (also available via web or phone). Most importantly, it's completely confidential. Contact the Carilion Employee Assistance Program (EAP) at **540-981-8950** or toll-free at **800-992-1931** and identify yourself as a Roanoke City Public Schools' employee or family member. After hours, and **in case of an emergency**, call the Carilion Clinic Switchboard at **540-981-7000** and request that the EAP Counselor on-call be paged. For more information, visit the Carilion Clinic website at carilionclinic.org/EAP or contact Human Resources at **540-853-2502**.

Employee Hotline

Conducting our business in an ethical manner is the obligation of all employees. By fulfilling this obligation, we not only protect the reputation and image of RCPS, we also honor our responsibility to RCPS' stakeholders and maintain the public's trust. The School Board also feels it is important that every employee have a variety of options in communicating issues to the School Administration.

The RCPS' Employee Hotline, **800-556-3041**, is a 24-hour telephone service line available to all staff for reporting potentially illegal or unethical matters observed, discovered or experienced in the workplace. This resource is operated by a third party agency to ensure confidentiality. The RCPS' Employee Hotline is not meant to replace ongoing communication between employee and supervisor, but it does provide the employee an anonymous alternative. **In addition to the hotline, there is also a reporting option on the Internet at rcps.alertline.com.**

The RCPS' Employee Hotline is available for reporting workplace violations such as:

- Discrimination/harassment
- Conflicts of interest
- Inappropriate gifts or entertainment
- Bribery
- Fraud
- Questionable accounting and auditing matters
- Environmental, health or safety issues
- Improper use of confidential information
- Drug or alcohol abuse
- Stealing or misuse of company property
- Other violations of company policies or criminal conduct



Vendor Contact Information

Benefit	Vendor	Website/Email	Telephone
Dental	Delta Dental	deltadentalva.com	800-237-6060
Diabetes Management Plan	Livongo by Teladoc Health	teladochealth.com/smile/RCPS	800-835-2362 Code: UHC-KEY-RCP
Employee Assistance Program (EAP)	Carilion Clinic	N/A	800-992-1931 540-981-8950
Flexible Spending Accounts (FSAs)	HealthEquity/WageWorks through Horace Mann	wageworks.com	877-924-3967 Fax: 877-353-9236
Health Savings Account (HSA)	Optum Bank	optumbank.com	800-791-9361
Life Insurance	Securian Financial	varetire.org	800-441-2258
Medical	UnitedHealthcare (UHC)	myuhc.com	800-638-4802
	Kaia (Pain Relief Self-Care)	startkaia.com/uhc	800-638-4802
	2nd.MD (Second Opinion)	2nd.MD/RCPS	866-269-3534
Pharmacy Plan	Express Scripts (ESI)	Express-Scripts.com	844-803-7603
Pharmacy Plan Enhancement	Right Rx	N/A	800-241-8440
Vision	UnitedHealthcare (UHC)	myuhc.com	800-638-3120
Voluntary Coverage	AFLAC, Judy McCullough	judy_mccullough@us.aflac.com	434-851-2241
Voluntary Coverage	Allstate	allstateatwork.com/MyBenefits	800-521-3535
Voluntary Non-VRS Retirement	PenServ: 403(b), 457, Roth	penserv.com	800-849-4001
VRS Retirement Benefits	Virginia Retirement System	varetire.org	888-827-3847
Weight Loss Program	Real Appeal/Rally	realappeal.com	844-924-7325
Wellness - Rally	UHC Personal Rewards® Program	werally.com/client/rcps/register	877-818-5826

The information in this Benefits Enrollment summary is presented for illustrative purposes and is based on information provided by the employer. The text contained in this summary was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the Benefits Enrollment Summary and the actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. For questions about this summary, contact Human Resources at **540-853-2502**.

