



Beloit Schools USD 273

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**USD
273**

2025 - 2026 BENEFIT GUIDE

PICK THE BEST BENEFIT FOR YOU AND YOUR FAMILY

Beloit School District is dedicated to offering a comprehensive and valuable benefits package for you and your family. To ensure you are getting the most out of our benefits, we have created this Open Enrollment Guide. During the Open Enrollment period, you have the opportunity to make changes to your benefits. This guide will provide an overview of the various benefits offered by Beloit School District, allowing you to determine the options that best suit your and your family's needs.

If you have questions about any of the benefits mentioned in this guide, please don't hesitate to reach out to Benefits Direct.

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OUR BENEFITS PARTNER



For over 50 years, Benefits Direct has serviced the insurance needs of public school systems, employees, and retirees. The primary focus of the agency is serving the needs of school system employees. The name “Benefits Direct” has become an icon within public school systems across the state. We have built the respect of our clients and the carriers we represent, as well as our competition in our market.

Our objective at Benefits Direct is to be recognized as the best, in each and every area in which we do business, and to provide our best advice, products, and services. We continue to be sensitive to our clients’ needs and make the satisfaction of those needs our most important job. We inform our clients of developments in our constantly changing marketplace. Service is our main priority each and every day. Our administrative office staff and field professionals are well-trained, experienced, competent, and courteous.

Benefits Direct strives to provide cost-effective programs for a diverse group of businesses, professionals, educators, and individuals. Our mission is to effectively meet each client’s financial and insurance goals through our firm’s relationship with major carriers.

For help or assistance, we are always just a phone call or email away!

Telephone: (833) 810-0681

Email: CustomerSupport@AmerilifeBenefits.com

Website: <https://account.mybenefitsportal.com/usd273beloit/>

The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this guide 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 guide and actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about the guide, please contact us.

ENROLLMENT FAQ



Who is eligible?

If you are a full-time employee at **Beloit School District**, you are eligible to enroll in the benefits outlined in this guide. Full-time employees are those who work 30 or more hours per week. In addition, your legal dependents are eligible for supplemental benefits.

How to Enroll

*This year is an active enrollment which means ALL employees MUST enroll even if they wish to waive all products. You will have two methods of enrollment this year.

Benefit Counselor Enrollment:

- Please visit the benefits portal at <https://account.mybenefitsportal.com/usd273beloit/>
- Explore the portal and its pages to learn more about the benefits offered to you!
- Click the link to book an appointment over the phone with a benefit counselor.

Self-Enroll:

- Please visit the benefits portal at <https://account.mybenefitsportal.com/usd273beloit/>
- Explore the portal and its pages to learn more about the benefits offered to you!
- Click the link to access your self-enroll tool.

Making Changes

Unless you experience a life-changing qualifying event, you cannot make changes to your benefits until the next open enrollment period. Qualifying events include things such as:

- Marriage, divorce, or legal separation
- Birth or adoption of a child
- Change in child's dependent status
- Death of a spouse, child, or other qualified dependent
- Change in employment status or a change in coverage under another employer-sponsored plan

NEW EMPLOYEE BENEFITS ELIGIBILITY

Full-time employees are qualified to register for the benefits outlined in this benefit guide.

New hires and their qualified dependents must complete enrollment within 30 days of their start date.

- Your dependents may be included provided they satisfy the criteria of being an eligible dependent.
- Eligible children are covered until the conclusion of the month in which they reach the age of 26, regardless of their student, marital, or employment condition. However, the spouse and/or children of your dependent children are not eligible.

What is Open Enrollment?

Open Enrollment refers to a designated period during which all employees have the future opportunity to:

- Modify their existing benefits
- Add new benefits
- Choose to enroll or waive benefits as necessary.

Remember, as a new employee, you have 30 days from your hire date to enroll in benefits. If you miss this deadline, you will have to wait for Open Enrollment to make any further decisions regarding your benefits.

Benefits Portal

The benefits portal houses all the necessary information about the benefits we offer, which includes:

- Comprehensive descriptions of the benefits we provide
- Procedures for enrolling in the benefits we offer
- Access to a benefits counselor for inquiries or enrollment support

Remember to bookmark the benefits portal and keep your login credentials secure for future access to your benefits information.

Get Started Today!

Please take some time to review the contents of our Benefits Guide so that you can take full advantage of the fantastic benefits we have made available to you. Should you have any queries or concerns regarding this information, please don't hesitate to contact our support team at **(833) 810-0681**.

CARRIER CONTACT INFORMATION

If you have any questions regarding your benefits, please review your benefit portal here account.mybenefitsportal.com/usd273beloit/ or reach out to the appropriate carrier listed below.

Medical

Blue Cross Blue Shield of KS
Website: www.bcbsks.com
Phone: +1(800) 432-3990

Emergency Transport

MASA
Website: www.masamts.com
Phone: (877) 503-0585

Health Savings Accounts

Flex Made Easy
Website: www.flexmadeeasy.com
Phone: +1(855) 615-3679

Dental

Delta Dental of KS
Website: www.deltadentalks.com
Phone: +1(800) 234-3375

Vision

Reliance Standard
Website: www.rsl.com
Phone: (800) 497-7044

Flexible Spending Account

Flex Made Easy
Website: www.flexmadeeasy.com
Phone: +1(855) 615-3679

Basic Life

SunLife
Website: <https://www.sunlife.com/us/en/>
Phone: (800) 247-6875

IMA Insurance Broker: Lisa Clark
Email: Lisa.Clark@imacorp.com
Phone: (913) 453-1033

Voluntary Life

SunLife
Website: <https://www.sunlife.com/us/en/>
Phone: (800) 247-6875

Short-Term Disability

SunLife
Website: <https://www.sunlife.com/us/en/>
Phone: (800) 247-6875

Cancer

SunLife
Website: <https://www.sunlife.com/us/en/>
Phone: (800) 247-6875

Accident

SunLife
Website: <https://www.sunlife.com/us/en/>
Phone: (800) 247-6875

Critical Illness

SunLife
Website: <https://www.sunlife.com/us/en/>
Phone: (800) 247-6875

Hospital Indemnity

SunLife
Website: <https://www.sunlife.com/us/en/>
Phone: (800) 247-6875

Permanent Life

Trustmark ULE
Website: www.trustmarkbenefits.com
Phone: +1(800) 918-8877

IMA Account Manager: Vanessa Ball
Email: Vanessa.Ball@imacorp.com
Phone: (303) 615-7738

HEALTH INSURANCE



Provider: BCBS of KS

Network: Blue Choice

As an employee of **Beloit School District** you have the choice between four medical plan options through Blue Cross Blue Shield of KS. BCBS works to empower their members and help them live active and rewarding lives. You can cover yourself and eligible dependents with a health plan through your employer. Eligible children can be covered until they turn 26 years old.

Find a Doctor or Hospital

bcbsks.com

With 99% of doctors and 100% of hospitals within our service area in Kansas, you have the flexibility to choose the doctor, hospital and pharmacy you want. Plus, you'll have access to our discounted medical costs with all participating providers.



Questions?

You can call BCBS directly at (800)432-3990.

Stay Informed. maximize your health benefits and help BCBSKS go paperless. **TEXT BCBSKS to 73529**

HEALTH INSURANCE

	\$1,500 Deductible	\$2,500 Deductible	\$3,500 Deductible	\$5,000 QHDHP
Deductible Single/Family	\$1,500 / \$3,000	\$2,500 / \$5,000	\$3,500 / \$7,000	\$5,000 / \$10,000
Coinsurance	80% / 20%	80% / 20%	80% / 20%	100% / 0%
Total Out of Pocket Single/Family	\$7,150 / \$13,500	\$7,150 / \$13,500	\$7,150 / \$13,500	\$6,350 / \$12,700
Network Benefits				
Office Visits Primary / Specialist	\$35 / \$70	\$35 / \$70	\$35 / \$70	Deductible
Telehealth Visit	\$35	\$35	\$35	Deductible
Preventive Care	Covered at 100%	Covered at 100%	Covered at 100%	Covered at 100%
Diagnostic Lab	First \$300 Paid at 100%, then Deductible, Coinsurance	First \$300 Paid at 100%, then Deductible, Coinsurance	First \$300 Paid at 100%, then Deductible, Coinsurance	Deductible
Diagnostic X-Ray				Deductible
Advanced Imaging				Deductible
Emergency Room	\$250 Copay, then Deductible, Coinsurance	\$250 Copay, then Deductible, Coinsurance	\$250 Copay, then Deductible, Coinsurance	Deductible
Inpatient Hospital	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible
Outpatient Facility	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible
Inpatient MH/SUD	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible
Outpatient MH/SUD	\$35	\$35	\$35	Deductible

HEALTH INSURANCE

	\$1,500 Deductible	\$2,500 Deductible	\$3,500 Deductible	\$5,000 QHDHP
Out of Network Deductible Single / Family	\$1,500 / \$3,000	\$2,500 / \$5,000	\$3,500 / \$7,000	\$5,000 / \$10,000
Out of Network Total OOP Single / Family	20% non PPO penalty applies annually up to \$2,000 person / \$4,000 family	20% non PPO penalty applies annually up to \$2,000 person / \$4,000 family	20% non PPO penalty applies annually up to \$2,000 person / \$4,000 family	20% non PPO penalty applies annually up to \$2,000 person / \$4,000 family
Prescription Drugs				
Deductible Single / Family	N/A	N/A	N/A	Medical Deductible first
Tier 1 Retail / Mail Order	\$15 / \$37.50	\$15 / \$37.50	\$15 / \$37.50	\$15 / \$37.50
Tier 2 Retail / Mail Order	\$50 / \$125	\$50 / \$125	\$50 / \$125	\$50 / \$125
Tier 3 Retail / Mail Order	\$75 / \$187.50	\$75 / \$187.50	\$75 / \$187.50	\$75 / \$187.50
Tier 4 Retail / Mail Order	\$150 / \$375	\$150 / \$375	\$150 / \$375	\$150 / \$375
Tier 5	20% up to \$250	20% up to \$250	20% up to \$250	20% up to \$250

Your Monthly Cost in 2025

Employee Share of Monthly Payroll Deduction		
	Employee Only	Employee + Family
\$1,500 Deductible	\$366	\$1,103
\$2,500 Deductible	\$336	\$1,027
\$3,500 Deductible	\$302	\$944
\$5,000 Deductible	\$152	\$791



DID YOU KNOW?

25 MILLION PEOPLE

are sent to the emergency room through ground or air ambulance every year*.

Insurance companies **may not** cover all air and ground ambulance expenses which can result in in-network out-of-pocket costs.**

Ground ambulance **out-of-network transportation costs may be even higher than in-network.**



\$14/MONTH

New Benefit

EMERGENT PLUS MEMBERSHIP BENEFITS

A MASA MTS Membership provides the ultimate peace of mind at an affordable rate for emergency ground and air transportation assistance expenses within the continental United States, Alaska, Hawaii, and while traveling in Canada, regardless of whether the provider is in or out of your group healthcare benefits network. After the group health plan pays its portion, MASA works with providers to make certain our Members have no out-of-pocket expenses- for emergency ambulance transportation assistance and other related services.

Emergency Air Ambulance Coverage¹

MASA MTS covers out-of-pocket expenses associated with emergency air transportation to a medical facility for serious medical emergencies deemed medically necessary for you or your dependent family member.

Emergency Ground Ambulance Coverage¹

MASA MTS covers out-of-pocket expenses associated with emergency ground transportation to a medical facility for serious medical emergencies deemed medically necessary for you or your dependent family member.

Hospital to Hospital Ambulance Coverage¹

MASA MTS covers out-of-pocket expenses that you or a dependent family member may incur for hospital transfers, due to a serious emergency, to the nearest and most appropriate medical facility when the current medical facility cannot provide the required level of specialized care by air ambulance to include medically equipped helicopter or fixed-wing aircraft.

Repatriation to Hospital Near Home Coverage¹

MASA MTS provides services and covers out-of-pocket expenses for the coordination of a Member's non-emergency transportation by a medically equipped, air or ground ambulance in the event of hospitalization more than one hundred (100) miles from the Member's home if the treating physician and MASA MTS' Medical Director says it's medically appropriate and possible to transfer the Member to a hospital nearer to home for continued care and recuperation.

Visit your portal to learn more!

** Deduction amounts may vary based on hire date and number of pay period remaining in the year.

HEALTH SAVINGS ACCOUNT



Provider: Flex Made Easy

Overview:

A Health Savings Account (HSA) is a savings account that offers tax benefits and can be used to pay for medical expenses. It is typically linked to a High Deductible Health Plan (HDHP), which is a type of insurance that has lower monthly premiums but requires you to pay more out of pocket before coverage begins.



QHDHP Enrollees are the only employees eligible for an HSA

A health savings account (HSA) is a tax-advantaged savings account that you can use for medical expenses. It is paired with a qualifying health insurance plan; typically, a high deductible health plan (HDHP). An HDHP is a plan that offers lower monthly premiums in exchange for a higher deductible (the amount you pay out of pocket before insurance kicks in).

More flexibility and control

In a traditional health plan, the insurer sets limits for what is covered under the premium. The HSA, in contrast, can be used for a wide range of expenses, limited only by legislation and IRS guidelines. However, it is your responsibility to:

- Ensure that you use your funds for eligible expenses.
- Retain documentation (receipts, prescriptions, etc) about your purchases. These will be necessary in the event that you are audited by the IRS.

Why an HSA?

There are several benefits of an HSA, including:

- Your payroll contributions are made with pretax dollars, which may help lower your tax bill.
- The funds in your account do not expire at the end of the year. You can keep them as long as you want to.
- The funds in your account are yours to keep even if you change jobs.
- Using the account is easy. Most HSAs will issue a debit card to you. If you use the debit card to immediately pay for your eligible medical expenses, you won't have to go through a reimbursement process.

Health care costs have escalated at a rapid rate over the past decade. The combination of a lower monthly premium payment and an HSA account--designed to help people pay for health care expenses with significant tax savings--is an ideal way to save and pay for health care needs now and in the future.

Contribution Limits

Please keep in mind that the federal government sets limits on how much you can contribute to an HSA in a tax calendar year.

The table below displays the current HSA contribution limits. Current contribution information can be found on the U.S. Department of Treasury website at [treas.gov](https://www.treas.gov).

Tax Year	Individual Coverage Limits	Family Coverage Limits
2025	\$4,300	\$8,550
2026	\$4,400	\$8,750

DENTAL INSURANCE



Provider: Delta Dental

Overview:

Dental insurance not only helps preserve your smile, but also covers the cost of dental treatments and typically includes routine checkups, cleanings, and X-rays.

Research indicates that oral health issues like gum disease can have an impact on other parts of the body, including the heart. By getting regular dental care, you can safeguard your overall well-being.



Eligibility:

All full-time employees, their spouses, and/or children to age 26 are eligible for coverage. ID cards and a benefit brochure will be provided to those who participate in coverage.

The following pages outline some of your dental plan benefits.

Benefit % Paid			Services	
Delta Dental PPO	Delta Dental Premire	Out of Network	Diagnostic & Preventive (Not subject to deductible)	
100%	100%	100%	Diagnostic:	Includes the following procedures necessary to evaluate existing dental conditions and the dental care required: <ul style="list-style-type: none"> • Oral Evaluations – 2 times each contract year • Bitewing x rays – 2 times each contract year for dependents under age 18 and once each 12 months for adults age 18 and over • Fill mouth or panoramic x-rays – once every 5 years
100%	100%	100%	Preventative:	Provides for the following <ul style="list-style-type: none"> • Routine Cleanings – unlimited • Topical Fluoride – 2 times each Contract Year for dependent children under age 19 • Space Maintainers – for Dependent Children under age 14 and only for early loss of baby molars • Sealants – once each tooth per lifetime for dependent children under age 16 when applied only to adult molars with no decay or fillings on the chewing surface and intact
Basic (subject to deductible)				
80%	80%	80%	Ancillary:	Provides for one emergency/limited exam per Contract Year by the Dentist for the relief of pain.
80%	80%	80%	Oral Surgery:	Provides for removal of teeth including pre and post-operative care, preparation of the mouth for dentures, removal of the vertical band of thin tissue that connects the tongue to the bottom of the mouth, removal of the tissue that attaches the lips to the gum above the top front two teeth, removal of tissue that connects the gums to the insides of the cheeks, and removal of a piece of tissue from a lesion and sent to the lab for testing.
80%	80%	80%	Regular Restorative:	Provides silver fillings; resin (white) fillings on all teeth; and stainless-steel crowns for Dependents under age 12.
80%	80%	80%	Endodontics:	Includes root canal treatments. When covered, payment for the initial root canal therapy is limited to one per lifetime, per tooth; payment for the retreatment of a root canal is limited to once per 24 months, per tooth.
80%	80%	80%	Periodontics:	a. Includes procedures for the treatment of diseases of the gums and bones. Periodontal cleaning, including evaluation, is counted toward the frequency limitation for regular cleanings. b. Surgical periodontal procedures/

DENTAL INSURANCE

Benefit % Paid			Services	
Delta Dental PPO	Delta Dental Premire	Out of Network	Major (subject to deductible)	
50%	50%	50%	Special Restorative	When teeth cannot be restored with a filling, provides for individual crowns.
50%	50%	50%	Prosthodontics	a. Includes bridges, partial and complete dentures
50%	50%	50%		b. Repairs and adjustments of bridges and dentures
Orthodontics (subject to deductible)				
0%	0%	0%	Orthodontics (Braces):	Orthodontic appliances and treatment.

Maximum & Deductible Information	
Maximum Benefit per person	The Maximum Benefit for all Covered Services for each Enrollee in any one Contract Year is One Thousand Five Hundred Dollars (\$1,500.00).
Deductible Limitations	Coverage for Diagnostic and Preventive Services are not subject to the Deductible. For all other Covered Services, the Contract Year Deductible is: \$25x3.
Eligible Children	Children are eligible for coverage to age 26.

Please note this is a brief overview of coverage. It does not list all benefits, nor does it list exclusions and limitations. Please refer to your Evidence of Coverage or Summary Plan Description for list of benefit limitations and exclusions.

Your Monthly Cost in 2025

Monthly deductions for Dental are listed below for eligible employees

Employee Share of Monthly Payroll Deduction		
	Employee Only	Employee & Family
Dental Insurance	\$36.49	\$103.96

VISION INSURANCE



Provider: Reliance Standard

OVERVIEW:

Driving to work, reading the news, and watching television are all common daily activities, but your ability to perform them is heavily dependent on the health of your eyes and vision. Vision insurance can assist in preserving your vision and identifying various

VISION INSURANCE

The following chart outlines some of your vision plan benefits.

Eye Care Highlight Sheet	
Deductibles	\$0
Maximum <ul style="list-style-type: none">per benefit period	\$150
Annual Eye Exam	Subject to maximum
Lenses (per pair) <ul style="list-style-type: none">Single VisionBifocalTrifocalLenticularProgressive	All Subject to maximum
Contacts <ul style="list-style-type: none">Elective/Medically Necessary	Subject to maximum
Fram Allowance	Subject to maximum
Frequencies (months) <ul style="list-style-type: none">Exam/Lens/Frames	None Based on date of service*

* Please submit claims within 90 days of the date of service so that the plan can consider benefits (subject to State requirements).

Your Monthly Cost in 2025

Monthly deductions for Vision are listed below for eligible employees

Employee Share of Monthly Payroll Deduction		
	Employee Only	Employee & Family
Vision Insurance	\$6.68	\$18.60

*Please note this is a brief overview of coverage. It does not list all benefits, nor does it list exclusions and limitations. Please refer to your Evidence of Coverage or Summary Plan Description for list of benefit limitations and exclusions.

FLEXIBLE SPENDING ACCOUNTS



Provider: Flex Made Easy

OVERVIEW:

Paying for health care can be stressful. That's why Ottawa offers an employer-sponsored flexible spending account (FSA).

HOW DO I ENROLL?

Fill out the FSA Enrollment Form during Open Enrollment. Even if you signed up last year, you must re-enroll for 2025.



FLEXIBLE SPENDING ACCOUNTS

WHAT ARE THE BENEFITS OF AN FSA?

- It saves you money. The plans allow you to put aside money tax-free that can be used for qualified medical expenses.
- It is a tax-saver. Since your taxable income is decreased by your contributions, you will pay less in taxes.
- It is flexible. You can use your FSA funds at any time, even if it is the beginning of the year.

You cannot stockpile money in your FSA. If you do not use it, you lose it. You should only contribute the amount of money you expect to pay out-of-pocket that year.

FSA savings example: Bob and Jane's combined gross income is \$30,000. They have two children and file their income taxes jointly. Since Bob and Jane expect to spend \$2,000 in adult orthodontia and \$3,300 for day care next plan year, they decide to direct a total of \$5,300 into their FSAs.

	Without FSAs	With FSA
Gross Income	\$30,000	\$30,000
FSA Contributions	0	-5,000
Gross Income	\$30,000	\$25,000
Estimated taxes		
Federal tax	-\$2,550*	-\$1,776*
State tax	-\$900**	-\$750**
FICA tax	-\$2,295	-\$1,913
After-tax earnings	\$24,255	\$20,314
Eligible out-of-pocket expenses		
Medical and dependent care expenses	-\$5,000	\$0
Remaning spendable income	\$19,255	\$20,561
Spendable income increase		\$1,306

BASIC LIFE and AD&D INSURANCE



Provider: SunLife

Overview:

Beloit School District offers Basic Life and AD&D insurance through SunLife to protect your family. Think about your personal circumstances. Are you the sole provider for your household? What other expenses do you expect in the future (for example, college tuition for your child)? Depending on your needs, you may want to consider buying life insurance. You can buy basic life insurance for both you and your dependents.

Basic Life and AD&D	
Employee Benefit	\$25,000
Spouse and Dependent Benefit	\$2,000

VOLUNTARY LIFE INSURANCE



Provider: SunLife

OVERVIEW:

If you are the primary breadwinner for your household, and have future expenses to consider such as your child's college tuition, it may be worth considering purchasing life insurance. This will provide financial security for your loved ones in the event of your unexpected death.



VOLUNTARY LIFE INSURANCE

Beloit School District offers voluntary life insurance through SunLife to protect your family. Think about your personal circumstances. Are you the sole provider for your household? What other expenses do you expect in the future (for example, college tuition for your child)? Depending on your needs, you may want to consider buying life insurance. You can buy voluntary life insurance for both you and your dependents.

Amounts of Coverage Available:

Employee:

Minimum of \$10,000 to maximum of \$500,000 (not to exceed 5x earnings)

Spouse:

Minimum of \$5,000 to maximum of \$250,000 (not to exceed 100% of employee amount)

Child:

6 month – 26 years, if full time student: \$10,000 (up to 26 years if full time student)

Life Insurance amounts in excess of the Guarantee Issue amount for yourself and/or your spouse will require Evidence of Insurability (EOI). You can complete the EOI application online. If approved, your coverage in excess of the Guarantee Issue amount will go into effect the first of the month following the approval date.

Guarantee Issue: (initial eligibility period only)

Employee:

\$200,000

Spouse:

\$50,000

Your Monthly Cost in 2025

The chart below outlines the monthly costs of purchasing life insurance.

Monthly Cost for Every \$10,000 of Employee and Spouse Life Insurance Coverage										
Age	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
Premuim	\$.55	\$.75	\$1.15	\$.95	\$2.30	\$3.65	\$5.18	\$6.08	\$9.68	\$21.74
Dependent Children	\$10,000 in coverage for \$2.43 a month									

**Spouse rate is based on spouse age*

SHORT TERM DISABILITY



Provider: SunLife

OVERVIEW:

It's a fact that bills need to be paid, even when you are unable to work due to an injury, illness or surgery. Disability income benefits are designed to provide a replacement of lost income in the event that you become disabled from a non-work-related injury or sickness. It will help you safeguard your assets and maintain some level of earnings..

SHORT TERM DISABILITY

Sun Life Short-Term Disability Monthly Premium

With a short-term disability plan from SunLife you can elect a benefit amount in increments of \$100 per week, not to exceed 70% of your Covered Weekly Earnings to a maximum benefit of \$1,750. The pre-existing condition is 12/12 which means benefits will not be paid if the person's disability begins in the first 12 months of coverage; and the disability is caused by, contributed to, or the result of a condition, whether or not that condition is diagnosed at all or is misdiagnosed, for which the Person received medical treatment, consultation, care or services, including diagnostic measures, or was prescribed medicines in the 12 months just prior to the Individual's effective date of insurance.

Beloit School District offers three short term disability plans through SunLife.

Age Band	Plan 1 Monthly Rate*	Plan 2 Monthly Rate*	Plan 3 Monthly Rate*
Under Age 25	\$1.04	\$0.78	\$0.48
25-29	\$1.04	\$0.78	\$0.48
30-34	\$1.04	\$0.78	\$0.48
35-39	\$0.82	\$0.61	\$0.41
40-44	\$0.82	\$0.61	\$0.41
45-49	\$0.82	\$0.61	\$0.41
50-54	\$0.82	\$0.61	\$0.52
55-59	\$1.17	\$1.03	\$0.52
60-64	\$1.17	\$1.03	\$0.52
65-69	\$1.17	\$1.03	\$0.52
70 and Over	\$1.17	\$1.03	\$0.52
Rate Basis: Per \$10 of weekly benefit			

* Attained age rating applies - premiums will increase due to age increase

Plan Name	Elimination Period	Duration
Plan 1	0 days for injury / 7 days for sickness	26 Weeks
Plan 2	14 days for injury / 14 days for sickness	24 Weeks
Plan 3	30 days for injury / 30 days for sickness	22 Weeks

**Please note this is a brief overview of coverage. It does not list all benefits, nor does it list exclusions and limitations. Please refer to your Evidence of Coverage or Summary Plan Description for list of benefit limitations and exclusions.*

CANCER INSURANCE



Provider: SunLife

OVERVIEW:

Our cancer voluntary coverage provides cash benefits when it is most needed! When you enroll in the plan, you will be eligible for benefits upon a positive diagnosis of an internal cancer during the coverage term. This can bring peace of mind to you and your loved ones, as you will have protection in place to help avoid financial strain from paying for day-to-day living expenses or incurring debt.

CANCER INSURANCE

HERE’S HOW IT WORKS...

In addition to the physical and emotional effects, people who are diagnosed with cancer may see a costly impact on their expenses. You may need additional help to absorb the expense of paying for drugs and other direct and indirect costs associated with cancer.

ACT NOW!

You've probably taken some steps to protect your assets and future financial stability with a health plan, life insurance, savings, etc. Take an additional step to round out your coverage and help you and your loved ones financially in the event of an unexpected cancer occurrence. To see more plan details & compare the plans please visit your benefit portal <https://account.mybenefitsportal.com/usd273beloit/>

The chart below outlines the monthly costs of purchasing accidental coverage.

Your Monthly Cost in 2025

Employee Share of Monthly Payroll Deduction				
	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
Low Plan	\$21.24	\$33.05	\$23.86	\$35.56
High Plan	\$27.89	\$43.50	\$31.20	\$46.66



Wellness Benefit!

This plan includes a Health Screening Benefit, meaning you can receive a once per year benefit, by taking a covered screening or test.

Low Plan: **\$100**

High Plan: **\$150**

ACCIDENT INSURANCE



Provider: SunLife

OVERVIEW:

Accidents can happen unexpectedly, and the cost of medical expenses and other indirect costs can be overwhelming. That's why Beloit Public Schools offers a voluntary accident insurance plan that can be chosen for an individual or a family.

The plan provides financial assistance by giving cash benefits for initial care, specific injuries, treatment, facility care, and follow-up care visits. These benefits are paid directly to you, which can help cover deductibles, co-insurance, or other expenses incurred.



ACCIDENT INSURANCE

Accident insurance helps you pay for those unexpected costs by providing you cash benefits for things such as:

- broken bones
 - dislocated joints
 - burns
 - bandages, stitches and cuts
 - surgery and anesthesia
- Emergency room visits, X-rays and imaging
 - Emergency dental work
 - Ambulance rides
 - Wheelchairs, crutches and other medical supplies

Additionally, the accident coverage includes accidental death and dismemberment benefits.

Any of the benefits you receive from the policy are paid directly to you and can help you cover deductibles, co-insurance, or whatever expenses you may choose to spend it on. Best of all, your benefits will be paid to you regardless of any other insurance coverage you may have. To see more plan details & compare the plans please visit your benefit portal <https://account.mybenefitsportal.com/usd273beloit/>

The chart below outlines the monthly costs of purchasing accidental coverage.

Your Monthly Cost in 2025

Employee Share of Monthly Payroll Deduction				
	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
Low Plan	\$15.95	\$25.26	\$27.27	\$36.58
High Plan	\$23.22	\$32.29	\$36.90	\$45.97

Wellness Benefit!

This plan includes a Health Screening Benefit, meaning you can receive a once per year benefit, by taking a covered screening or test.

Low: **\$100**

High: **\$150**

CRITICAL ILLNESS INSURANCE



Provider: SunLife

OVERVIEW:

With a critical illness plan, you'll receive a benefit after a serious illness or a condition such as a heart attack, stroke, or coronary artery bypass graft.

HOW IT WORKS?

In most cases, benefits payments are made directly to you, giving you more control during a difficult time when options may feel limited. Some or all of the benefits are available to you after your initial diagnosis, so you have access to them when you need it most. Additionally, obtaining coverage through your employer is typically more cost-effective than purchasing it individually, which can help you save on premiums.



CRITICAL ILLNESS INSURANCE

WHY DO I NEED CRITICAL ILLNESS COVERAGE?

A critical illness plan can assist you with a variety of expenses so you can focus on getting better.

You can spend the benefits however you want, on direct or indirect costs associated with the illness:

- Make your mortgage payments
- Hire extra help for around the house, such as in-home caregivers
- Help cover medical bills as well as therapy and training not covered by your primary health insurance
- Pay for travel to treatment facilities away from home - and for family visits

In addition to the physical and emotional effects, people who are diagnosed with a serious condition may see a costly impact on their expenses.

You elect an initial benefit amount between \$5,000 - \$50,000 and Prosperity will pay the initial benefit amount when a covered person is diagnosed with a covered Critical Illness while the coverage is in force. To see more details please visit your benefit portal.

Base Coverage Benefit	
Covered Critical Illness / Benefit Amount Percentage	
Heart Attack - 100% Stroke - 100% Coronary Artery Bypass Graft - 100% Major Organ Transplant - 100% Kidney Failure - 100% Paralysis - 100%	Coma - 100% Severe Burns - 100% Motor Neuron Disease/ALS - 100% Advanced Alzheimer's Disease - 100%
Named Insurance: Initial Benefit Amount	\$10,000 - \$40,000
Spouse:	100% of the Named Insured Amount
Children:	50% of the Named Insured Amount

Please note this is a brief overview of coverage. It does not list all benefits, nor does it list exclusions and limitations. Please refer to your Evidence of Coverage or Summary Plan Description for list of benefit limitations and exclusions.

CRITICAL ILLNESS INSURANCE

Monthly Premium Rates per \$1,000 of Coverage

Employee and Spouse Benefit Rates	
Issue Age	Monthly Rate
Under 30	\$0.30
30-39	\$0.50
40-49	\$1.00
50-59	\$1.70
60-69	\$2.85
70 and over	\$2.85

Child Benefit Rates	
	Monthly Rate
All Age Bands	\$0.01

Wellness Benefit!

This plan includes a Health Screening Benefit, meaning you can receive **\$50** once per year, by taking a covered screening or test.

HOSPITAL INDEMNITY



Provider: SunLife

OVERVIEW:

Voluntary hospital indemnity insurance offers a set of fixed, lump-sum daily benefits to help cover expenses related to a hospital stay, such as room and board. Once the policyholder meets the criteria for benefit payment and is hospitalized, the benefits are paid directly to them.

HOSPITAL INDEMNITY

Benefit Details	
Hospital Room & Board Benefits	
Room & Board Benefit per Day (180 Daily Benefits per Coverage Year)	Low Plan: \$100 per day
	High Plan: \$200 per day
Hospital Critical Care Unit Benefits (Paid in addition to Room & Board Benefit)	
Critical Care Unit Benefits per Day (30 Daily Benefits per coverage year)	Low Plan: \$100 per day
	High Plan: \$200 per day
Hospital Admission Benefit	
One Daily Benefits per Coverage Year	Low Plan: \$500
	High Plan: \$1,500

Your Monthly Cost in 2025

Employee Share of Monthly Payroll Deduction				
	Employee Only	Employee & Spouse	Employee & Children	Employee & Family
Low Plan	\$13.00	\$28.56	\$28.00	\$38.80
High Plan	\$26.50	\$51.10	\$48.82	\$76.01

PERMANENT LIFE WITH LTC



Provider: Trustmark ULE

OVERVIEW:

Protection for finances and loved ones can bring peace of mind and allow you to focus on spending time with those you care about. Permanent life insurance can provide financial support for families in the event of an emergency or unexpected death, helping them maintain their standard of living. The death benefit can secure a family's future, and the cash value can be borrowed against in case of emergencies during the policyholder's lifetime.

Eligibility:

Employee must work 20 hours of more per week to qualify for enrollment.



PERMANENT LIFE WITH LTC

Trustmark ULE Insurance provides two important coverage's when you need them most.

1. Financial Security After a loss

Protecting your loved ones is one of life's greatest responsibilities. When a family loses someone, in addition to grief survivors may suddenly be faced with costly expenses and debts, and even a loss of income. Universal LifeEvents can help.

Universal LifeEvents provides a higher death benefit when your needs and responsibilities are the greatest. You can choose a plan and benefit amount that provides the right protection for you.

Universal LifeEvents insurance can mean those left behind are still able to pursue their own dreams, and help ensure that the ending of one story won't stop the beginning of another.

2. Long Term Care

At any point in your life you may need to long-term care services which could cost hundreds of dollars per day.

Universal LifeEvents includes a long-term care (LTC) benefit that can help pay for these services at any age. This benefit remains at the same level throughout your life, so the full amount is always available when you most need it. (See flyer below for more details on how it works)

Universal LifeEvents sample rates:

Sample ranges of weekly rates for employee-only, non-smoker coverage with long-term care benefit. Your exact rate may depend on additional features selected by you and/or by your employer.

Age at purchase	\$25,000 Universal LifeEvents policy
30	From: \$3.49 - \$4.59
40	From: \$5.05 - \$6.71
50	From: \$7.84 - \$10.71

Sample rates are shown for illustrative purposes only. Rates may vary by age, smoking status, state, employer and features selected by you and/or by your employer. An application for insurance must be completed to obtain coverage.

Long-Term Care, Here's how it works:

4%

You can **collect 4% of your Universal LifeEvents death benefit per month** for up to 25 months to help pay for long-term care services.

Flexible features available:

2x

PLUS: if you collect a benefit for LTC, your **full death benefit** is still available for your beneficiaries, as much as **doubling** your benefit.