

2022 BENEFITS ENROLLMENT GUIDE

PICK THE BEST BENEFITS FOR YOU AND YOUR FAMILY.

The Academy strives to provide you and your family with a comprehensive and valuable benefits package. We want to make sure you are getting the most out of our benefits. Questions can be directed to your personal benefits advocate, Sharla Gonzales at Moody Insurance Agency: 303-393-4007 or sharla.gonzales@moodyins.com

At The Academy, we are committed to offering a benefits program that helps our employees stay healthy, feel secure and maintain a work-life balance.

Elections you make during open enrollment will become effective on January 1, 2022.

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WHO IS ELIGIBLE?

If you are a full-time employee at The Academy, you're 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 immediate family members are eligible for medical, dental and vision coverage.

How to enroll

Are you ready to enroll? The first step is to review your current benefits in BeneTrac. Did you move recently or get married? Verify all of your personal information and make any necessary changes.

Once all your information is up to date, it's time to make your benefit elections. The decisions you make during open enrollment can have a significant impact on your life and finances, so it is important to weigh your options carefully.

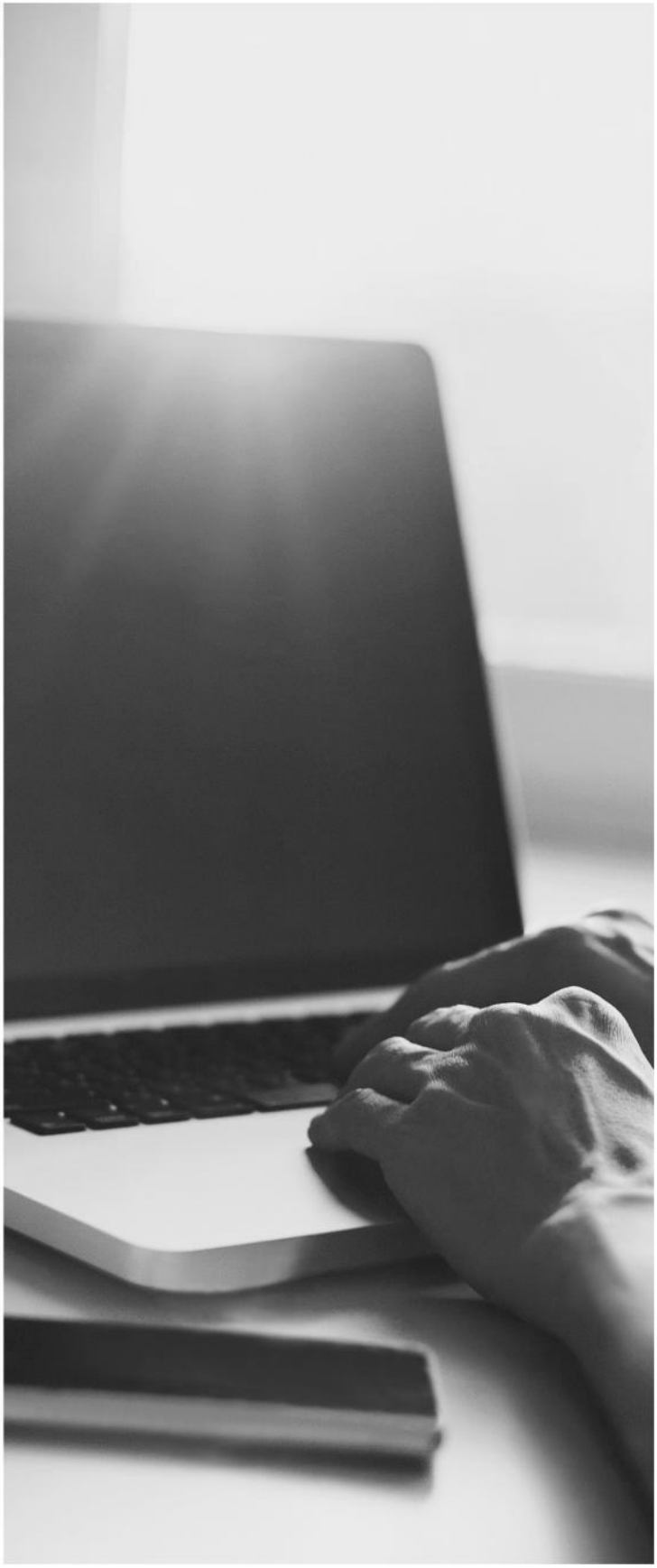
When to enroll

Open enrollment begins November 2, 2021 and runs through November 08, 2021. The benefits you choose during open enrollment will become effective January 1, 2022. New hires are effective first of the month following your date of hire.

How to make 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 like:

- 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



Health Insurance

Please take time to review your options to determine which plan is best for you. Need help? Please call Sharla Gonzales at 303-393-4007.

The Academy will continue to offer two medical options through CIGNA providing flexibility to choose the best plan for your needs. We are proud to continue paying 100% of the Base Plan option for you, our valued employee. Please review carefully, as plan selections are offered during annual enrollment. **Our Cigna Base Plan will continue to use Cigna's large Local Plus provider network while the Buy Up option is the Open Access Plus (OAP) network.** To compare provider status, you can search as a guest at www.cigna.com. Once enrolled, you are strongly encouraged to register and download the myCIGNA mobile app to locate providers, view claims access virtual care and much more!

In today's climate of increasing healthcare cost, it is imperative to understand how to receive care. Be sure to familiarize yourself with how to access on demand doctors via Virtual Visits, DisPatchHealth.com for in-home Urgent Care and convenience care clinics throughout the metro area. **Tip! Visit GoodRX.com for additional prescription drug discounts.** The following pages will help you understand how to access these services to ensure quick, efficient and affordable care.

Services	Local Plus - Base Plan	Open Access Plus - Buy Up Plan
Calendar Year Deductible	$1,500 Individual $3,000 Family	$250 Individual $500 Family
Out-of-pocket Maximum	$5,500 Individual $11,000 Family	$2,500 Individual $5,000 Family
Physician Visit/Specialist Visit	$20/$40	$20/$40
Preventive Care	No charge to you	No charge to you
Virtual Doctor Visits	$20	$20
Urgent Care/ER	$75/$250	$75/$250
Dispatch Health (in home Urgent Care)	$75	$75
Hospitalization	You pay 20% after deductible is met	You pay 10% after deductible is met
Prescription Drugs *If a brand name drug is requested and there is a generic available, you will be charged a higher amount.	*Brand Name Rx Deductible applies before copayment: $150 Individual /$300 Family. Advantage Pharmacy Drug List $15/*$40/*$70	Prescription Deductible does not apply. **Performance Pharmacy Drug List** $15/$40/$70



WELCOME TO CIGNA

Simple ways to make the most of your plan

When you know more about your plan, you can make better choices around health and spending. Let's dive in.

Cigna resources to improve your whole-person health

First, register on myCigna.com[1]

When your plan year begins, register on myCigna.com. That way you're ready to go whenever you need to find in-network health care providers, estimate costs and see your incentives.

Access virtual care

Conveniently connect with board-certified doctors, therapists and psychiatrists via video or phone.[2]

Connect with Cigna One Guide®

Our friendly guides have forward-thinking technology to answer questions on your plan, offer personalized advice and connect you to the right care. They can also proactively reach out.[3]

Ensure in-network care

myCigna and Cigna One Guide can help you stay in-network, maximize savings and avoid any surprises.

Get preventive care

Get preventive care, such as check-ups and biometric screenings at no additional cost to you. It's even available[4] virtually for maximum convenience.

Prioritize behavioral support

214,000 behavioral health and substance use providers[5] can help, either in person or virtually. We also have 24/7 therapy including Talkspace and Ginger for Cigna, and digital tools such as iPrevail and Happify™.[6]

Call our 24/7 Health Information Line

Talk with a clinician who can help you choose the right care, whenever you need it – late nights, holidays and more.

Simplify with mail-order medications

Express Scripts® is one of the largest pharmacies in the United States, and offers convenience, savings and stress-free prescription management.

Bounce back with RecoveryOne™ for Cigna®

Virtual physical therapy from the comfort of home that's convenient and available at no cost to you.

Utilize case management programs

Complex medical conditions can be overwhelming. Our trained teams can help coordinate care, understand benefits and reach goals through online coaching.

Together, all the way.®

Cigna®

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Offered by Cigna Health and Life Insurance Company.

Make sure to get approval from your plan before getting care (known as prior authorization) for routine hospital stays or outpatient procedures.

Learn more at **myCigna.com** or by calling the number on the back of your card.

First, register on myCigna.com or the myCigna® App

Once you've registered, you can:

- Understand what's covered in your plan
- Find in-network doctors, hospitals and facilities and sort them by location, reviews and Cigna's quality rating
- Get cost estimates for appointments, procedures and medications
- Compare costs for 30- and 90-day medications and see if lower-cost alternatives are available
- Find retail pharmacies that offer a 90-day supply
- Manage and track claims
- Get alerts when new plan documents are available
- View or print a copy of your Cigna ID card
- Access a variety of health and wellness resources, including an online health assessment, health tracking tools and My Health Assistant digital coaching

Cigna One Guide

Combining digital technology with our personalized customer service, over the phone or on the myCigna App,[7] the Cigna One Guide support tool can:

- Resolve health care issues
- Save time and money
- Get the most out of your plan
- Find the right hospitals, dentists and other health care providers in your plan's network
- Get cost estimates
- Understand your bills
- Navigate the health care system

Virtual care[2]

Virtual care can be a convenient and affordable option for a wide range of care. For appointments, you can work with an in-network provider or connect with an MDLIVE®[2] provider at **myCigna.com**.

Right from your phone, tablet or computer, you can:

- Connect 24/7 with board-certified doctors and pediatricians for minor medical conditions, such as seasonal allergies, colds and flu, or upper respiratory infections
- Schedule appointments with licensed therapists or psychiatrists for behavioral or mental health conditions, such as stress and depression
- Have a prescription sent directly to your pharmacy, if appropriate

Virtual Wellness Screenings

Virtual wellness screenings are convenient and covered at no cost to you.[8]

Here's how they work:

- Complete your MDLIVE online health assessment
- Choose an in-network lab and schedule an appointment[9]
- Choose an MDLIVE provider and schedule your virtual visit
- Go to your lab appointment and you'll get a notification when the results are available in the MDLIVE customer portal
- Attend your virtual visit; you'll receive a summary of your screening results for your records

24/7 Health Information Line

At no extra cost, you can speak to a clinician to make more informed decisions about your care. Whether it's reviewing home treatment options, following up on a doctor's appointment or finding the nearest urgent care center in your plan's network, you can call the number on your Cigna ID card, day or night.

Specialty medications

We can help you understand, manage and treat complex conditions that require a specialty medication. Our therapy management teams, made up of health advocates with nursing backgrounds as well as pharmacists, are specially trained to help with your specific needs.

- Personalized, 24/7 support
- Condition-specific education on medication therapy and side effects
- Help with the medication approval process
- Financial assistance programs, if needed

For more information, call **800.351.3606**.

Preventive care

It's important to catch any issues while they're still small. That's why we cover eligible preventive care services at no extra cost, including:[4]

- Screenings for blood pressure, cholesterol and diabetes
- Testing for colon cancer
- Clinical breast exams and mammograms
- Pap tests
- Additional covered procedures listed on **myCigna.com**

Since your physical and emotional health are connected, make sure to talk about how you're feeling at your annual check-up.

RecoveryOne for Cigna includes:[6]

- Virtual physical therapy at no additional cost[10]
- A private video consult with a virtual physical therapist
- Customized plans to meet your needs – from the comfort and convenience of wherever you are
- A multimedia app that guides you through your personalized exercises
- Video, voice and chat conversations with your support team

Behavioral care

214,000 in-network behavioral health care providers. 67,000 of those are virtual.[5] Whether you're dealing with a behavioral health condition, going through a rough time or looking for substance use support, you can find the one that fits your needs, either in person or virtually. To find a virtual provider:

- Go to **myCigna.com** > Find Care & Cost
- Search for "Virtual Counselor" under "Doctor by Type"
- Call to make an appointment with your selected provider

Online visits with Cigna Behavioral Health network providers cost the same as in-office visits. Costs vary by plan.[11]

In-network care

Save money when you use doctors, hospitals and health facilities that are part of your plan's network. Chances are there's a network doctor or facility right in your neighborhood. It's easy to find quality, cost-effective care at **myCigna.com**.

Case management programs

Take advantage of our personal services to help you with your personal health needs. A Cigna case manager, trained as a nurse, can work closely with you and your doctor to check on your progress. You can get help with conditions and illnesses such as cancer, end-stage renal disease, neonatal care and pain management.

You also have access to My Health Assistant on **myCigna.com** to help you:

- Control stress
- Lose weight and eat better
- Enjoy exercise
- Quit tobacco
- Manage diabetes, Chronic obstructive pulmonary disease, asthma and other conditions

Enroll online today. Go to **myCigna.com** > Wellness > My Health Assistant – Online Coaching Program.

TIPS TO HELP YOU SAVE MONEY

Find where to get prescription drugs

- Find the complete list of covered medications on **myCigna.com**
- Use cost comparison tools on myCigna to compare prices and purchase mail-order prescriptions
- Use generics when possible
- Know what brand-name drugs are covered in your plan
- Ask your doctor about a 90-day supply for your maintenance medication(s) through our home delivery pharmacy service[11]

Know where to go for care

- Use an emergency room for true emergencies
- Don't wait: Locate an in-network convenience care clinic or urgent care center near you, before you need it
- Don't be fooled: Some emergency rooms look like urgent care centers, so know what type of facilities are in your area

Choose the right provider

- Know which providers are in your network by going to **myCigna.com** > Find Care & Costs
- Opt to connect with a board-certified doctor, therapist or psychiatrist via video or phone[2]
- Use in-network national labs to help save money

Be proactive about your health

- Get information on the cost of medications and treatments to avoid surprises
- Use your preventive care benefits, learn your core health numbers and make use of the health improvement tools at **myCigna.com**

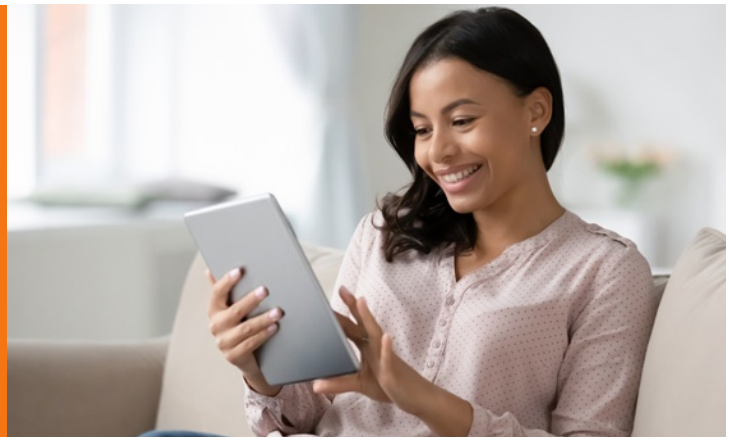
Find your way to better health.

Get more information on all the programs that are available to you.

When your plan year begins, register on myCigna.com.

Call the 24/7 customer service number on the back of your ID card.

Download the myCigna App.[7]



1. Customers under age 13 (and/or their parent/guardian) will not be able to register at myCigna.com. 2. Cigna provides access to virtual care through participating in-network providers. Not all providers have virtual capabilities. Cigna also provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas or under all plans. Referrals are not required. Video may not be available in all areas or with all providers. All health care providers are solely responsible for the treatment provided to their patients; providers are not agents of Cigna. Refer to plan documents for complete description of virtual care services and costs. 3. Not available with all plans. 4. Not all preventive care services are covered and different plans may cover different things. For example, immunizations for travel are usually not covered. See your plan materials for a complete list of covered preventive care services. 5. Cigna unique provider data as of June 2021. Subject to change. 6. The program and services are provided by an independent company and not by Cigna. Program and services are subject to all applicable program terms and conditions. Program availability is subject to change. 7. The downloading and use of any mobile App is subject to the terms and conditions of the App and the online store from which it is downloaded. Standard mobile phone carrier and data usage charges apply. 8. Not applicable to exempt plans. See your plan documents for details. 9. Limited to labs contracted with MDLIVE for virtual wellness screenings. 10. Cost and usage of this program is covered by your plan administrator; no additional out-of-pocket expense applies. 11. Not all plans offer all of these programs and services. Please log into the **myCigna** App or website, or check your plan materials, to learn more about what your plan offers. Product availability may vary by location and plan type and is subject to change. All group health insurance policies and health benefit plans contain exclusions and limitations. For costs and details of coverage, review your plan documents or contact a Cigna representative. The providers in Cigna's pharmacy network don't work for Cigna and are solely responsible for any treatment they provide.

Product availability may vary by location and plan type and is subject to change. All group health insurance policies and health benefit plans contain exclusions and limitations. For costs and details of coverage, contact a Cigna representative.

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ON-DEMAND URGENT CARE

DispatchHealth offers on-demand medical care in the comfort of your home, work or place of need. Mobile medical teams arrive equipped with the latest technology and tools to treat minor to severe injuries and illnesses.

dispatch HEALTH

HOW DISPATCHHEALTH WORKS:



1. REQUEST CARE
Simply use our mobile app, website, or call us directly.



2. EXPLAIN YOUR SYMPTOMS
We will follow up with a phone call to better understand what's wrong and get you the right care.



3. RECEIVE CARE IN YOUR HOME
On average, our medical teams arrive within an hour.



4. REST EASY
We call in your prescriptions, update your doctor and handle yourinsurance, so you can focus on feeling better.

GET THE APP: Download on the App Store | GET IT ON Google Play

DISPATCHHEALTH CAN TREAT ANYTHING AN URGENT CARE FACILITY CAN, PLUS MORE. INCLUDING THE FOLLOWING:



COMMON AILMENTS
Fever, Cough, Cold, Flu, Urinary Tract Infection



EYE
Infection, Pinkeye, Styes



SKIN
Rash, Lesions, Lacerations



RESPIRATORY
Asthma, Bronchitis, Allergies



EAR, NOSE AND THROAT
Sore/Strep Throat, Ear & Sinus Infections, Nose bleeds



DIGESTIVE
Nausea, Vomiting, Diarrhea

ON-DEMAND HEALTHCARE 7 DAYS A WEEK 365 DAYS A YEAR | **8AM-10PM**

REQUEST CARE ONLINE AT DISPATCHHEALTH.COM OR 719-270-0805

NO MEMBERSHIPS NEEDED | ACCEPTED BY YOUR INSURANCE

DENTAL INSURANCE

The Academy offers you a choice in dental coverage.

Beta Health Colorado Alpha Plus Plan: a discount dental plan that provides a low monthly membership cost in exchange for deep discounts for services through participating providers nationwide. Selection of your provider is No Longer required upon enrollment! Be sure and schedule with: https://www.betaplans.com/alphaplus/ The applicable fee schedule is found both via this link and within Benetrac's Resource Library.

MetLife PDP: Traditional dental plan with flexibility in choosing a network or non-network provider. Your highest level of benefits is with a MetLife Preferred Dental Provider (PDP) provider: www.Metlife.com/dental Always ask your provider for a pre- treatment determination prior to receiving services over $300.

In addition to protecting your smile, dental insurance helps pay for dental care and usually includes regular checkups, cleanings and X-rays. Several studies suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body—including your heart. Receiving regular dental care can protect you and your family from the high cost of dental disease and surgery.

The following chart outlines the MetLife PDP Dental Plan:

TYPE OF SERVICE	BENEFIT HIGHLIGHTS
Preventive Services	Exams, cleanings, X-rays 100%
Deductible	$50/$150 calendar year per person deductible Applies to Basic and Major
Basic Services	Fillings, simple extractions 100%
Major Services	Oral surgery, root canal, crowns 50%
Annual Maximum	$2,000 per calendar year
Ortho	Deductible does not apply to ortho $1,000 lifetime benefit Available for dependent children to age 19

VISION INSURANCE

Driving to work, reading a news article and watching TV are all activities you likely perform every day. Your ability to do all of these activities, though, depends on your vision and eye health. Vision insurance can help you maintain your vision as well as detect various health problems.

The Academy's vision insurance entitles you to specific eye care benefits. Our policy covers routine eye exams and other procedures and provides specified dollar amounts or discounts for the purchase of eyeglasses and contact lenses.

If you seek the services of a SELECT EyeMed provider (www.eyemed.com) or 1-866-299-1358) your benefits include the following:

- Routine vision exams for a $10 copay available once every 12 months.
- Preferred pricing on a large selection of designer frames, lenses and lens options.
- Frames available once every 24 months up to $140 allowance.
- Lenses or contact lenses available once every 12 months. Member cost will depend on lens enhancements chosen.

Download the EyeMed Members App to view your ID card, see benefit details and find a provider near you.





DISABILITY INCOME BENEFITS

The Academy provides full-time employees with **short-term disability** income benefits. Without disability coverage, you and your family may struggle to get by if you miss work due to an injury or illness. After a seven (7) day elimination period, wages are paid at 60% of pre-disability weekly earnings. The employee is responsible for initiating and completing all required claim submission forms.

Each benefit-eligible employee has the option to enroll in **voluntary long-term disability**. LTD may begin after the 180 days of absence from work due to a covered accident or illness. Benefits are 60% of your pre-disability monthly earnings to a maximum of $6,000. Coverage is entirely Employee paid and the Employee is responsible for initiating and completing all online claim forms.

In the event that you become disabled from a non-work-related injury or sickness, disability income benefits will provide a partial replacement of lost income. Please note, though, that you are not eligible to receive short-term disability benefits if you are receiving workers' compensation benefits

BASIC LIFE INSURANCE

Life insurance can help provide for your loved ones if something where to happen to you. The Academy provides full-time employees with $50,000 in group life and accidental death and dismemberment (AD&D) insurance.

The Academy pays for the full cost of this benefit—meaning you are not responsible for paying any monthly premiums. Beneficiary designations can be kept current in our benefits portal.

VOLUNTARY LIFE INSURANCE

While The Academy offers basic life insurance, some employees may want to purchase additional coverage. 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 supplemental coverage. 2022 a true open enrollment will be offered. This means, you can elect up to Guarantee Issue (GI) amounts without answering medical questions! Also, GI amounts have increased for the 1/1/22 effective date!

With voluntary life insurance, you are responsible for paying the full cost of coverage through payroll deductions. You can purchase coverage for yourself, your spouse, and your dependent children. New hires can elect up to listed guarantee issue without providing the Evidence of Insurability Health form. All others are required to submit EOI to carrier for review.

	EMPLOYEE	SPOUSE	CHILDREN
Minimum	$10,000	$5,000	$2,500, $7,500 or $10,000
Maximum	5X annual salary, up to $500,000	100% of employee's benefit, up to $100,000	100% of employee's benefit, up to $10,000
Guarantee Issue *only applies to new hires	$150,000	100% of employee's benefit, up to $50,000	100% of employee's benefit, up to $10,000

FLEXIBLE SPENDING ACCOUNTS

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

WHAT ARE THE BENEFITS OF AN FSA?

There are a variety of different benefits of using an FSA, including the following:

It saves you money. Allows you to put aside money tax-free that can be used for qualified medical expenses.

It's a tax-saver. Since your taxable income is decreased by your contributions, you'll pay less in taxes.

It is flexible. You can use your FSA funds at any time, even if it's 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. The Academy allows a 2 ½ month extension to file claims to ensure you do not lose your contributions. **Maximum contribution is $2,750, there is not a minimum.**

WHAT IS A DEPENDENT CARE FSA?

Dependent Care FSAs allow you to contribute pre-tax dollars to qualified dependent care. The maximum amount you may contribute each year is $5,000 (or $2,500 if married and filing separately).

HOW DO I ENROLL?

Complete the FSA Enrollment online during Open Enrollment. Even if you signed up last year, you must re-enroll this year.

FSA CASE STUDY

Because FSAs provide you with an important tax advantage that can help you pay for health care expenses on a pre-tax basis. Due to the personal tax savings you incur, your spendable income will increase. The example that follows illustrates how an FSA can save money.

Bob and Jane live in Texas and have a combined annual gross income of $45,000. They are married and file their income taxes jointly. Since Bob and Jane expect to spend $3,000 in eligible medical expenses in the next plan year, they decide to direct a total of $2,600 (the maximum allowed amount per individual, for that taxable year) into their FSAs. The table demonstrates their sav

	Without FSA	With FSA
Gross income	**$45,000**	**$45,000**
FSA contributions	$0	(-$2,650)
Gross income	$45,000	$42,400
Estimated taxes	(-$5,532)*	(-$4,999)*
After-tax earnings	$39,468	$37,401
Eligible out-of-pocket expenses	(-$3,000)	(-$400)
Remaining spendable income	**$36,468)**	**$37,001**
Spendable income increase	--	**$533**

ADDITIONAL BENEFIT OFFERINGS

EMPLOYEE ASSISTANCE PROGRAM

Guardian · IBH

WorkLifeMatters

Employee Assistance Program

Connect to a counselor for free support services

Email:
eapcounselor@ibhcorp.com

Phone: 1-800-386-7055
Available 24 hours a day, 7 days a week*

Web: ibhworklife.com
User name: **WorkLife**
Password: **70101**

The Guardian Life Insurance Company of America
New York, NY

guardianlife.com

Help for what matters most

WorkLifeMatters Employee Assistance Program offers services to help promote well-being and enhance the quality of life for you and your family.

Support and guidance is available online for assistance with family and personal issues at ibhworklife.com and by phone at 1-800-386-7055.

Health

- Healthy Living
- Stress Management
- Mental Health
- Diet and Fitness
- Overall Wellness

Family

- Parenting Support
- Child and Elder Care
- Learning Programs
- Special Needs Help

Financial

- Legal Issues
- Will Preparation
- Taxes and Debt
- ID Theft Services
- Financial Planning Tools and Assistance

Support and guidance for you online or by phone

- You have unlimited access to support and helpful resources on our website, and you can consult with a professional counselor via telephone.
- Face-to-face counseling sessions with an IBH network provider — and up to three sessions are free of charge as part of WorkLifeMatters.
- Free initial 30-minute consultation with an attorney, with a 25% discount on attorney services thereafter.
- Unlimited telephonic support for financial problems or planning needs, and referral for face-to-face for more complex issues are provided for a fee.

Connect to a counselor for free support services:
1-800-386-7055 (Available 24 hours a day, 7 days a week*)
Visit ibhworklife.com (User name: WorkLife Password: 70101)

[Future written communications may be in English only.]

*Office hours: Monday-Friday 6am-5pm PST. Live answer exchange available after hours. WorkLifeMatters Program services are provided by Integrated Behavioral Health, Inc., and its contractors. Guardian does not provide any part of WorkLifeMatters program services. Guardian is not responsible or liable for care or advice given by any provider or resource under the program. This information is for illustrative purposes only. It is not a contract. Only the Administration Agreement can provide the actual terms, services, limitations and exclusions. Guardian and IBH reserve the right to discontinue the WorkLifeMatters program at any time without notice. Legal services provided through WorkLifeMatters will not be provided in connection with or preparation for any action against Guardian, IBH or your employer. WorkLifeMatters Program services is not an insurance benefit and may not be available in all states. Integrated Behavioral Health Laguna Niguel, CA. File #2020-113067 (12/22) Pub 3525
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Cut here and save this convenient card for WorkLifeMatters

Guardian · IBH

WorkLifeMatters
Your Employee Assistance Program through The Guardian Life Insurance Company of America and Integrated Behavioral Health

Email:
eapcounselor@ibhcorp.com

Phone: 1-800-386-7055
Available 24 hours a day, 7 days a week*

Web: ibhworklife.com
User name: **WorkLife**
Password: **70101**

The Guardian Life Insurance Company of America
New York, NY

guardianlife.com

2022 Monthly Rates

	TOTAL PREMIUM	EMPLOYER CONTRIBUTION	EMPLOYEE PAYS
CIGNA - BASE PLAN			
Employee Only	$620.82	$620.82	$0.00
Employee & Spouse/DP	$1,303.76	$620.82	$682.94
Employee & Child(ren)	$1,179.60	$620.82	$558.78
Employee & Family	$1,862.55	$620.82	$1,241.73
CIGNA - BUY UP PLAN			
Employee Only	$783.60	$620.82	$162.78
Employee & Spouse/DP	$1,645.52	$620.82	$1,024.70
Employee & Child(ren)	$1,488.82	$620.82	$868.00
Employee & Family	$2,350.75	$620.82	$1,729.93
BETA HEALTH/ALPHA 19 DENTAL			
Employee Only	$12.75	$12.75	$0.00
Employee & Spouse/DP	$22.75	$12.75	$10.00
Employee & Child(ren)	$30.75	$12.75	$18.00
Employee & Family	$36.75	$12.75	$24.00
METLIFE DENTAL			
Employee Only	$27.23	$27.23	$0.00
Employee & Spouse/DP	$50.30	$27.23	$23.07
Employee & Child(ren)	$61.49	$27.23	$34.26
Employee & Family	$102.04	$27.23	$74.81
EYE MED VISION			
Employee Only	$6.70	$6.70	$0.00
Employee & Spouse	$12.72	$6.70	$6.02
Employee & Child(ren)	$13.39	$6.70	$6.69
Employee & Family	$19.68	$6.70	$12.98

The Academy – Aflac Program for 2021

⇒ Aflac is different from health insurance. It pays cash benefits directly to you.

⇒ Aflac is financial protection: Income protection, medical expense coverage, expenses for daily living.

⇒ Even if you don't have health insurance you can still participate in Aflac. This is also true for your dependents.

⇒ You have the convenience of payroll deduction at discounted group-rates.

⇒ Aflac benefits are pre-determined and pay cash regardless of any other insurance you have.

⇒ You can take Aflac with you at the same low group rate, you will not have annual rate increases

- **Accident Policy—Injury coverage 24/7 on and off the job:**
  - Initial doctor / ER / Urgent care visits due to an injury $120-$200.00
  - Follow up visits due to an injury $30.00. Physical therapy visits due to an injury $30.00.
  - $1,200.00 first day in the hospital due to an injury. $300.00 each additional night.
  - Up to $5,000.00 fracture benefit.
  - Additional benefits: Fractures, lacerations, ligament damage, torn cartilage, burns, appliances, concussions, coma, teeth injuries, eye injuries, surgeries due to an accident and more.
  - Ambulance and flight-for life benefits due to an injury.
  - Accidental death benefit.
  - $50 wellness benefit per family member per year.

- **Critical Illness with Cancer Policy. Coverage for:** Cancer, Heart Attack, Stroke, By-pass surgery, Renal failure, Carcinoma in situ, and Organ Transplant
  - Guarantee issue regardless of preexisting conditions* 1st year offered only.
  - Lump sum policy pays $10,000.00-$50,000.00 for any of the Critical Illnesses covered.
  - Additional occurrence: Additional occurrence of another qualifying event six months after the first.
  - Re-occurrence benefit: Re-occurrence of the same illness just 12 months after the 1st diagnosis.
  - $50.00 wellness benefit for employee & spouse annually.

- **Hospital Policy: Aflac's most general, broad reaching policy.**
  - Emergency room & doctor visit benefits ($50 per visit, up to six visits per family member per year).
  - Hospitalization admission, hospital confinement, and intensive care benefits.
  - Surgical and anesthesia benefits.

- **Short-term Disability: Protect your paycheck if you are sick or hurt and unable to work.**
  - Coverage starts first day for off-the-job injuries and after a 14-day waiting period can be selected for illness / maternity.
  - 3-month benefit.
  - Simple claims filing process.

Krista Price **303-400-1424**

Claims: 1-800-433-3036 One Day Pay Claims: www.aflacgroupinsurance.com

The above information is for illustration purposes only.

The Academy Short-Term Disability Monthly Rates

CAIC Group Disability Series 5000
Non-Occupational Disability Income
Accident Elimination Period: 7 Days
Sickness Elimination Period: 7 Days
Benefit Period: 6 Months

Annual Salary Range	Monthly Benefit	Age 18-49	Age 50-59	Age 60-69
$10,000 - $36,000	$300	$10.74	$12.15	$16.80
$36,001 - $48,000	$400	$14.32	$16.20	$22.40
$48,001 - $60,000	$500	$17.90	$20.25	$28.00
$60,001 - $72,000	$600	$21.48	$24.30	$33.60
$72,001 - $84,000	$700	$25.06	$28.35	$39.20
$84,001 - $96,000	$800	$28.64	$32.40	$44.80
$96,001 - $108,000	$900	$32.22	$36.45	$50.40
$108,001 to more	$1,000	$35.80	$40.50	$56.00

Aflac Rates for The Academy
(Monthly)

Group Accident 7800 (Ages 18-69)	
Employee	$16.77
Employee & Spouse	$25.23
Employee & Children	$29.36
Family	$37.82

Group Hospital (Ages 18-64)	
Employee	$36.85
Employee & Spouse	$75.55
Employee & Children	$60.58
Family	$99.28

Group Critical Illness (Employee, Non-Tobacco)

Age↓ Face Amount→	$5,000.00	$10,000.00	$15,000.00	$20,000.00	$25,000.00	$30,000.00	$35,000.00	$40,000.00	$45,000.00	$50,000.00
18-29	$3.45	$5.15	$6.85	$8.55	$10.25	$11.95	$13.65	$15.35	$17.05	$18.75
30-39	$4.85	$7.95	$11.05	$14.15	$17.25	$20.35	$23.45	$26.55	$29.65	$32.75
40-49	$8.10	$14.45	$20.80	$27.15	$33.50	$39.85	$46.20	$52.55	$58.90	$65.25
50-59	$13.20	$24.65	$36.10	$47.55	$59.00	$70.45	$81.90	$93.35	$104.80	$116.25
60-69	$20.10	$38.45	$56.80	$75.15	$93.50	$111.85	$130.20	$148.55	$166.90	$185.25

Group Critical Illness (Spouse, Non-Tobacco)

Age↓ Face Amount→	$5,000.00	$7,500.00	$10,000.00	$12,500.00	$15,000.00	$17,500.00	$20,000.00	$22,500.00	$25,000.00
18-29	$3.45	$4.30	$5.15	$6.00	$6.85	$7.70	$8.55	$9.40	$10.25
30-39	$4.85	$6.40	$7.95	$9.50	$11.05	$12.60	$14.15	$15.70	$17.25
40-49	$8.10	$11.28	$14.45	$17.63	$20.80	$23.98	$27.15	$30.33	$33.50
50-59	$13.20	$18.93	$24.65	$30.38	$36.10	$41.83	$47.55	$53.28	$59.00
60-69	$20.10	$29.28	$38.45	$47.63	$56.80	$65.98	$75.15	$84.33	$93.50

Group Critical Illness (Employee, Tobacco)

Age↓ Face Amount→	$5,000.00	$10,000.00	$15,000.00	$20,000.00	$25,000.00	$30,000.00	$35,000.00	$40,000.00	$45,000.00	$50,000.00
18-29	$4.60	$7.45	$10.30	$13.15	$16.00	$18.85	$21.70	$24.55	$27.40	$30.25
30-39	$7.10	$12.45	$17.80	$23.15	$28.50	$33.85	$39.20	$44.55	$49.90	$55.25
40-49	$15.05	$28.35	$41.65	$54.95	$68.25	$81.55	$94.85	$108.15	$121.45	$134.75
50-59	$24.65	$47.55	$70.45	$93.35	$116.25	$139.15	$162.05	$184.95	$207.85	$230.75
60-69	$38.40	$75.05	$111.70	$148.35	$185.00	$221.65	$258.30	$294.95	$331.60	$368.25

Group Critical Illness (Spouse, Tobacco)

Age↓ Face Amount→	$5,000.00	$7,500.00	$10,000.00	$12,500.00	$15,000.00	$17,500.00	$20,000.00	$22,500.00	$25,000.00
18-29	$4.60	$6.03	$7.45	$8.88	$10.30	$11.73	$13.15	$14.58	$16.00
30-39	$7.10	$9.78	$12.45	$15.13	$17.80	$20.48	$23.15	$25.83	$28.50
40-49	$15.05	$21.70	$28.35	$35.00	$41.65	$48.30	$54.95	$61.60	$68.25
50-59	$24.65	$36.10	$47.55	$59.00	$70.45	$81.90	$93.35	$104.80	$116.25
60-69	$38.40	$56.73	$75.05	$93.38	$111.70	$130.03	$148.35	$166.68	$185.00

Aflac's claims process:
Peace of mind when you need it most

If you're sick or hurt, the last thing you need is an insurer that drags its feet when it's time to pay your claims. Aflac prides itself on being an insurer with a difference: Our goal is to process and pay, not deny and delay. That's why we make it easy to file your claims online. Here's how:

1

Visit Aflacgroupinsurance.com and click on "Customer Service" and then "File a claim."



2

Choose from accident, hospital, critical illness or wellness and follow the instructions.



3

Complete and upload your HIPAA authorization, claim details and documents, and direct deposit information.



4

Feel secure in the knowledge that claims on group coverage like yours are processed in an average of two days.[1]



Aflac helps pay expenses health insurance doesn't cover – and because your medical bills won't wait, we do so promptly and fairly. In fact, we paid 7.1 million claims last year to people just like you: people who trusted us to keep our promises.[2] For all other plans, download the proper forms and follow the instructions for filing by fax or email.



1 second
We pay a claim every second between Aflac Individual and Aflac Group*



7.1 million
Aflac Individual and Aflac Group Claims paid in 2018[2]



2 days
Average processing of Aflac Group Claims.

Get to know Aflac.
Visit aflacgroupinsurance.com to learn more.

Aflac®

Toll Free 1(800) 433-3036
Denver Office (303) 400-1424

[1] Aflac proprietary data, 2019.
[2] Aflac proprietary data, 2018.
*Based on a 40-hour work week, 52 weeks a year.

Continental American Insurance Company (CAIC), a proud member of the Aflac family of insurers, is a wholly-owned subsidiary of Aflac Incorporated and underwrites group coverage. CAIC is not licensed to solicit business in New York, Guam, Puerto Rico, or the Virgin Islands. For groups situsted in California, group coverage is underwritten by Continental American Life Insurance Company. For groups situsted in New York, coverage is underwritten by American Family Life Assurance Company of New York. This service available only to Aflac Group customers. Continental American Insurance Company - Columbia, South Carolina

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The Academy Benefits and Taxes

The Academy offers benefits to all full-time employees (those who are employed to work 30 or more hours per week). Benefits begin the 1st of the following month after the hire or benefit eligibility date.

Employees are responsible to pay for any voluntary benefit elections. Premiums due are paid through monthly payroll deductions.

The Academy deducts **employee paid premiums pre-tax** so your taxable income is lower which saves you money. The following **employee paid premiums are pre-tax**: medical, dental, vision, Aflac Accident, Aflac Hospital, 401(k), 403(b), 457, and both types of Flexible Spending.

For all PERA members who begin their PERA membership on or after July 1, 2019, contributions to Section 125 plans will be considered PERA-includable salary, regardless of whether these are paid on a pre-tax or post-tax basis. Please contact PERA for more details.

However, these pre-tax deductions do lower your PERA highest annual salary. If you are within 3-years of retiring, you **may not want** to pay these pre-tax because it will lower your PERA retirement benefits. **If you do not wish your medical, dental and/or vision premiums pre-tax, you must inform Human Resources in writing either during your initial enrollment or during the open enrollment period.**

All other employee paid voluntary benefits must remain as they are, Pre-Tax or Post-tax.

If an employee receives Short Term Disability payments, they are responsible to pay taxes on that income. They should receive an end of year tax document from the carrier.

Employees are responsible to elect or decline all benefits annually during our open enrollment.

If there is ever any conflict between the benefit information and any documents issued by one of the school's insurance carriers, the carrier's guideline regulations will be regarded as authoritative.



Question & Answers

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Rocky Mountain Reserve FSA- AM Jennifer Findlay
Flexible Spending Account (FSA)
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Aflac- Price and Associates
Aflac Questions and Claims
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admin@priceassociates.net

All Summary Benefits Coverage Forms (SBC's) and Employer Annual Notices are located online in our benefits portal.

If you suddenly find yourself without group coverage and would like to compare COBRA pricing to individual coverage, or you would like to compare pricing for your dependent coverage, please contact GoHealth at 866-349-0806 or gohealth.com

MOODY INSURANCE AGENCY

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 HR