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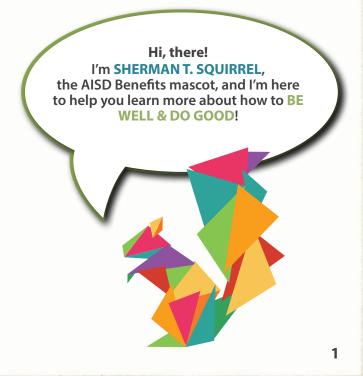
- Customized Benefits
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- ...and more!



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HOW DO I ENROLL?

- 1 Open enrollment is Oct. 1 to Oct 31; If you are a new hire, you must enroll within 30 days of your date of hire.
- 2 If adding dependents, have your dependent documentation on hand and ready to upload.
- Sign in to the Benefits Portal at www.austinisdbenefits.com from any computer or smart device and Login with your User Name and Password.
- 4 New users must Register and answer security questions. Our case-sensitive company key is Austin ISD.
- 5 Need to reset your password?
 - a. Click Forgot your user name or password?
 - b. Enter your Social Security number, birth date and our company key, Austin ISD.
 - c. Answer your security phrase.
 - d. Enter and confirm your new password, then click Continue and Login with your new credentials.

Having trouble logging in? Call the AISD Benefits Information Line at 512-414-2297 from 7:45am - 4:45pm Monday through Friday.

- 6 View plan details, carrier specifics and resources in the Reference Center.
- Get Started: Click Start Here and follow the instructions to make your benefit choices by the deadline on the calendar. If you miss the deadline you will have to wait until next annual enrollment period to enroll or make changes.
- Making Your Elections: Using Previous and Next to navigate, review our options as you move through the enrollment process. Select plan(s) and who you would like to cover. Track your choices and costs along the left side.
- 9 Review and Confirm: Make sure your personal information, elections, dependents and beneficiaries are accurate and Approve your enrollment. **FAILURE TO COMPLETE THIS STEP WILL RESULT IN NO BENEFITS COVERAGE.**
- 10 To finalize your enrollment, click Agree.
- Finalize: When your enrollment is complete, you will receive a confirmation number and you can also Print Benefits Summary.
- 12 Your To Do list will notify you if you have any additional actions needed to complete your enrollment.
- Review Your Benefits: You have year- round access to benefits summary that shows your personal selections. Click Benefit Summary on the homepage to review your current benefits at any time.

MEET SOFIASM

YOUR PERSONAL BENEFITS ASSISTANT IS STANDING BY TO ANSWER YOUR BENEFITS **QUESTIONS.**

Sofia uses machine learning to assist you in your needs which means she learns from every interaction and grows her knowledge over time!

HOW CAN I USE SOFIA?

Simply click on the 'Live Chat' icon in the top banner and ask your question. You can type your question in the chat box or hit the microphone and ask your question out loud! In order to help her answer your question accurately please follow these simple guidelines:

- Ask one question at a time
- Keep the question to one sentence if possible
- Avoid abbreviations

Sofia is available to you 24/7, every day of the week. She also speaks Spanish and French, just select

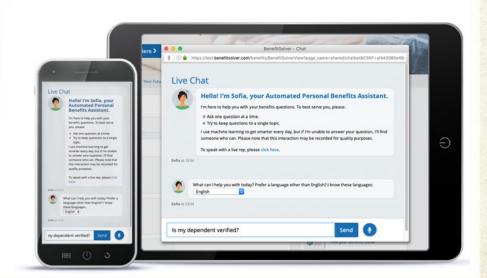
that option right at the start.

WHAT CAN SOFIA ANSWER?

- Plan details
- Verification status
- **COBRA** details
- Information about benefits
- **HSA/FSA** balances
- And much more!







QUALIFYING LIFE EVENT

GENERALLY, BENEFIT CHANGES ARE LIMITED TO OPEN ENROLLMENT.

There are few exceptions to this rule. Change in family status rules allow you to make some related benefit changes during the plan year due to a qualifying life event, such as marriage, birth, etc.

QUALIFYING EVENT	SUPPORTING DOCUMENTATION	DEPENDENT DOCUMENTATION
Marriage	Marriage License	Birth Certificates are required if adding spouse's children as dependents.
Death	Death Certificate	No additional documentation required.
Divorce	Certified copy of Divorce Decree	Birth Certificates are required if adding children not currently enrolled in benefits.
Adoption	Placement for adoption paperwork, orLegal documentation of the adoption	No additional documentation required
Birth	Birth Certificate, orVerification of birth facts issued by hospital	No additional documentation required
Flexible spending account • Medical FSA • Dependent care FSA	 Medical FSA – proof of gain or loss of dependent Dependent Care – proof of enrollment or termination of child care services 	No additional documentation required
Change of spouse employment	Proof of enrollment or termination of benefit coverage from spouse's employer. Proof must contain effective or termination dates of coverage, type of coverage (medical, dental, vision) and the names of the dependents affected	 Adding Spouse – Marriage License and a bill under spouse's name or 1st page of current year's tax return Adding Children – Birth Certificate or 1st page of current year's tax return
Loss or gain of coverage Other than employment change Voluntary cancellation of Cobra is not an event.	Proof of enrollment or termination of benefit coverage, e.g., Medicare or Medicaid. Proof must contain effective or termination dates of coverage, type of coverage (medical, dental, vision), and the names of the dependents affected.	 Adding Spouse – Marriage License and a bill under spouse's name or 1st page of current year's tax return Adding Children – Birth Certificate or 1st page of current year's tax return
Leave of absence or Return from inactive Status	HR Status updates – internal documentation	

QUALIFYING LIFE EVENT

WHEN ADDING OR DROPPING DEPENDENTS:

- Mid-year benefit changes are only permitted in the event of a qualifying life event.
- Changes must be added 31 days from date of qualifying life event.
- · Benefit election changes must be consistent with the event.
- Switching plans during the calendar year is not permitted.
- You can only make changes to the specific plans where dependents will be affected.
- Benefits and new rates become effective the date of the event for birth, adoption, marriage, divorce, and death; or the day after benefits end, when the event is loss of coverage.
- The event date must be consistent with the information in the Supporting Documentation.

If you need assistance with your enrollment, contact the benefits office or make an appointment for enrollment with one of our benefit technicians. We schedule appointments on Tuesdays and Thursdays.

IMPORTANT:

If you miss your qualifying life event enrollment deadline, you or your dependents may not have insurance for the current calendar year. The next opportunity to enroll will be during the annual open enrollment held in October.

Email supporting documentation to **benefits@austinisd.org**.

HOW TO CHANGE YOUR BENEFITS

Once approved, your benefit elections will remain in effect until the end of the plan year, unless you have a qualifying life event such as marriage, divorce, or having a baby. Find detailed information in the Reference Center.

- · Click on Change My Benefits.
- Select Life Event and the event type.
- Review your options and follow the election steps outlined above to complete your changes.
- ***IMPORTANT: You must make changes within 31 days of the event, and provide required documentation.

Change your Beneficiaries: Beneficiary changes can be made at any time of the year.

- · Click Change My Benefits
- Select Basic Info and Change of Beneficiary:
- Follow the prompts to complete your change.

TIPS! WAYS TO SAVE

STAY IN NETWORK

The Aetna Whole Health Seton Health Alliance
Network works for all AISD Plans. If you enroll in the
Open Access plan, you also have available the Choice
POS II Network. Out of network is NOT covered on
AISD plans, so it is important to stay in network.

AVOID EMERGENCY ROOMS

AISD offers many alternatives for care outside of your Primary Care Provider. Do not use an emergency room unless it is TRULY an emergency. Free Standing ER's are not urgent cares and should never be accessed for care. If an employee does seek treatment at a freestanding ER, it will cost significant out of pocket dollars.

DIABETES ENGAGEMENT PROGRAM

Whether you are newly diagnosed, or you have been dealing with diabetes for years, managing the disease can be stressful. AISD offers all eligible medical plan members the opportunity to participate in diabetes engagement resources and receive their diabetes management medications at a \$0 copay.

CVS MINUTE CLINICS

Minute Clinics are located in select CVS pharmacies, open 7 days a week, with no appointments necessary, and are in network with all AISD medical plans. Offering exceptional services for adults and children 18 months and over, the clinics offer a wide range of services to keep you and your family healthy. In addition to diagnosing and treating minor illnesses, injuries and skin conditions, they provide various wellness services including (but not limited to) vaccinations, physicals and screenings.

CHOOSE GENERIC DRUGS

The only significant difference is the cost, which averages about 45% less than the brand-name drug. When you choose generics, your copayment is lower. Your health plan also saves, which is a plus as healthcare costs continue to rise. Generic drugs can save a prescription-drug plan and its members an average of \$30 per prescription.

REDIMD

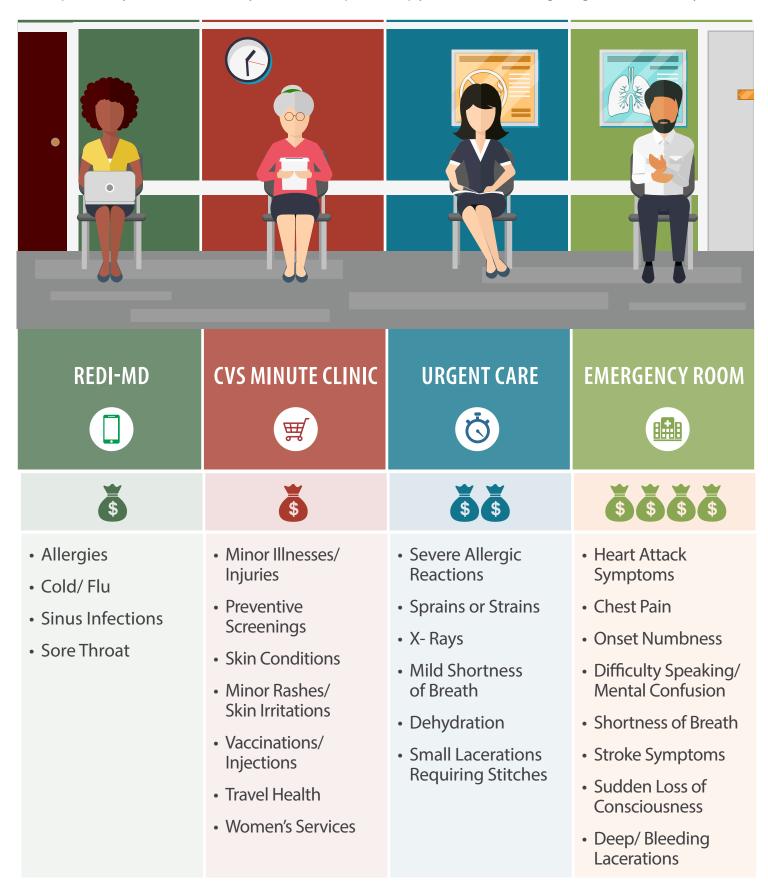
RediMD makes it easy for you to see a medical professional for the majority of your primary care needs without having to leave the comfort of your home with medical services via internet or phone, or live, face to face diagnosis and treatments. Saving you time and money, you can speak interactively with a medical professional in minutes, not hours. See more on the RediMD page.

HEB REDI CLINICS

Located in select H-E-B and H-E-B plus stores throughout Austin, RediClinics are high quality, affordable healthcare, and are in network with all AISD medical plans. Providing walk in or same day appointment availability for routine treatments and preventive care services, the clinics provide care for various health conditions ranging from strep throat to ear infections, as well as health screenings, immunizations and routine physicals.

When minor injuries and illnesses strike, where should you go?

Austin ISD wants you to be able to find the right place to solve your healthcare needs – one that is both easy on your wallet and respectful of your time. Below are just a few examples to help you decide where to go to get the treatment you need.



NEW & DIFFERENT

MEDICAL PLANS:

All three health plans will have the same deductibles, coinsurance, and copays for medical services as 2020.

Approximately 7600 employee will receive NO rate increase to their health premiums. If you elect employee only coverage for the Seton Only plan or the HSA Seton plan, your rates remain unchanged for 2021.

\$125 EMPLOYEE ONLY HSA district contributions continue!

PHARMACY PLAN:

AISD is moving away from Express Scripts in 2021 and moving to CVS. This move was made to allow employees more convenience and flexibility with their medication adherence.

- Employees will only have one ID card, integrated with their health plan
- All employees will receive a 20% discount on anything purchased at CVS outside of pharmacy
- Prescriptions can be scheduled so that they can all be filled and picked up at the same time without having prescriptions refilled at varying dates.
- Prescriptions can be color coated to help assist employees with compliance.
- Employees taking more than 4 medications per month can have all of their prescriptions packaged together by date.

The pharmacy copays for the Seton Only and the Open Access plan have had small increases. The new copays are \$10, \$55, \$75, \$200 by tier. (see page 11 for benefit design) However, if you take a generic medication for a chronic condition, and are enrolled in the Seton Only plan, your copay could be ZERO! The list of qualifying chronic conditions is found on page 13..

HEALTH SAVINGS ACCOUNT:

We heard you. AISD now has 43% of employees enrolled in the HSA health plan. The current company charged a monthly bank account fee of \$2.25. Effective January 1, 2021, AISD will now work with HSA Bank, the largest HSA provider in the country to offer employees improved customer service as well as ZERO monthly fees! This saves you \$27/year!

WELLNESS RESOURCES:

BE WELL DO GOOD CONTINUES & IMPROVES!

Free programs for our staff to Stay Healthy, Wealthy, Wise & Well:

- Diabetes Engagement Program
- · Naturally Slim Weight Loss Program
- Smoking Cessation Program
- · AISD YOUTUBE channel with on demand videos
- Pregnancy Resource Toolkits
- Onsite Mental Health Resource
- Financial Assistance Services
- AND MUCH MUCH MORE!!!

MEDICAL PLANS

WHAT'S THE DIFFERENCE?

THINGS TO CONSIDER WHEN CHOOSING A PLAN:

- Preventative Services are covered at 100% on all 3 plans.
- Is my provider in-network?
- Which plan best suits my healthcare needs?

HSA SETON PLAN

The HSA Seton Plan lets you set aside money on a pre-tax basis in a dedicated health savings bank account to pay for qualified medical expenses. The deductible must be met before the coinsurance pays. AISD contributes \$125 per month to the health savings account for Employee Only participants. This plan only has coverage within the Seton Health Alliance network. However, it also has access to Aetna urgent care facilities nationwide.

SETON ONLY PLAN

The Seton Only Plan has the lowest copays and deductibles. This plan only has coverage within the Seton Health Alliance network. The Seton Only Service area is located in the following counties: Bastrop, Bell, Caldwell, Hays, Travis, and Williamson. Outside of the service area, access to Aetna urgent care facilities is provided nationwide.

OPEN ACCESS PLAN

The Open Access Plan has higher copays and deductibles and employee premiums. This plan has nationwide coverage for providers and facilities under the Aetna Choice POS II network.

MEDICAL PLANS

AISD AETNA 2021 BENEFITS COMPARISONS				
BENEFITS	HSA SETON	SETON ONLY	OPEN	N ACCESS
	In-Network Only	In-Network Only	Preferred Seton Network	In-Network
Calendar Year Deductible Per Member/Per Family *HSA Deductible is aggregate for family coverage	\$1,500/Employee Only; \$3,000/Employee + Dependent	\$1,000/Employee Only; \$3,000/Employee + Dependent	\$750/Employee Only; \$2,250/Employee + Dependent	\$2,000/Employee Only; \$6,000/Employee + Dependent
Annual Out-of-Pocket Maximum Per Member/Per Family	\$4,500/Emp Only; \$9,000/Emp + Dep	\$6,000/Emp Only; \$12,000/Emp + Dep	\$7,500, \$15,000	/Emp Only; //Emp + Dep
Preventive Care	100%; deductible waived	100%; deductible waived	100%; deductible waived	100%; deductible waived
Coinsurance	20%	20%	10%	30%
Office Visits—PCP	20%; after deductible	\$35 copay; deductible waived	\$35 copay; deductible waived	\$40 copay; deductible waived
Office Visits—Specialist	20%; after deductible	\$50 copay; deductible waived	\$50 copay; deductible waived	\$60 copay; deductible waived
Inpatient Hospital Services and IP Maternity (including surgery)	20%; after deductible	20% after \$500 copay; after deductible	10% after \$500 copay; after deductible	30% after \$500 copay; after deductible
Outpatient Hospital Services (including surgery)	20%; after deductible	20%; after deductible	10%; after deductible	30%; after deductible
Urgent Care	20%; after deductible	\$50 copay; deductible waived	\$50 copay; deductible waived	\$60 copay; deductible waived
Emergency Room	20%; after deductible	\$500 copay; deductible waived	\$500 copay; deductible waived	\$500 copay; deductible waived
Ambulance	20%; after deductible	20%; after deductible	20%; after deductible	20%; after deductible
X-Ray / Lab	20%; after deductible	20%; after deductible	10%; after deductible	30%; after deductible
Complex Lab/X-Ray (MRI/CTScan/PET/etc)	20%; after deductible	20%; after deductible	10%; after deductible	30%; after deductible
Durable Medical Equipment	20%; after deductible	20%; after deductible	20%; after deductible	30%; after deductible
Mental Health/ Substance Abuse Inpatient	20%; after deductible	20% after \$500 copay; after deductible	10% after \$500 copay; after deductible	30% after \$500 co-pay; after deductible
Outpatient	20%; after deductible	\$50 copay;	\$50 copay	\$60 copay;
σαιραιιστι	deductible wai	deductible waived	deductible waived	deductible waived



MEDICAL PLANS

AISD AETNA 2021 BENEFITS COMPARISONS				
BENEFITS	HSA SETON	SETON ONLY	OPEN ACCESS	
	In-Network Only	In-Network Only	Preferred Seton Network	In-Network
Chiropractic, Physical, Occupational Therapies (Short-Term Rehab)—limited to 35 visits per calendar year (office setting)	20%; after deductible	\$50 copay; deductible waived	\$50 copay; deductible waived	\$60 copay; deductible waived
Speech Therapy (office setting)	20%; after deductible	\$50 copay; deductible waived	\$50 copay; deductible waived	\$60 copay; deductible waived
Prescription Drugs	20%; after deductible	\$50 combined Retail/ MOD per calendar year RX deductible; \$150 family combined retail / MOD	\$50 COMBINED RETAIL/MORX DEDUCTIBLE; \$150 FAI MOD PER CALEN	MILY COMBINED RETAIL/
	Re	etail (30-day supply)		
Generic	20%; after deductible	\$10	\$10	\$10
Brand Name Formulary	20%; after deductible	\$55	\$55	\$55
Brand Name Non-Formulary	20%; after deductible	\$75	\$75	\$75
4th tier - Specialty	20%; after deductible	20% with a minimum of \$100 or maximum of \$200	20% with a minimum of \$100 or maximum of \$200	20% with a minimum of \$100 or maximum of \$200
	Mail	Order (90-day supply)		
Generic	20%; after deductible	\$25	\$25	\$25
Brand Name Formulary	20%; after deductible	\$137.50	\$137.50	\$137.50
Brand Name Non-Formulary	20%; after deductible	\$187.50	\$187.50	\$187.50
** Routine eye exams are covered under all Aetna plans		20% with a minimum of \$100 or maximum of \$200		

PHARMACY

Austin ISD has selected Aetna, a CVS Health company, as our pharmacy vendor for 2021. This means that your prescription drug access is no longer a part of Express Scripts. This also means that there are some changes to your pharmacy plan. Be sure to show your new Aetna ID card at the pharmacy beginning 1/1/21.

We are excited to provide you the ability to manage your full healthcare benefit experience, access all your medications at one location, receive additional discounts on CVS brand, health-related items; in addition to, receiving additional tools to help you stay adherent to your medications. Please see some highlights of our new offering below.

IMPROVED WAYS TO GET YOUR MEDICATIONS:

One-Time & Standard Prescriptions

Use a participating retail pharmacy when filling short-term prescriptions for medications such as antibiotics.
Our network includes more than 68,000 pharmacies nationwide, including chain pharmacies, 20,000 independent pharmacies and 9,800 CVS Pharmacy® stores. Please go to Aetna.com to find an in-network pharmacy near you.

Maintenance Prescriptions

Use CVS Pharmacy® stores or Aetna Mail Service Pharmacy to fill your long-term (maintenance) prescriptions for the same 90 day copay. Please go to Aetna.com to begin using mail service.

Specialty Medications

Used to treat chronic, complex or rare conditions and may require special handling or refrigeration.
Employees have the choice to pick up their specialty medications at CVS Pharmacy® stores or have them delivered to their home, workplace or doctor's office.

BE CAREFUL!

If you, or your physician, request a brand-name drug when a generic is available, you pay the brand copay, PLUS the difference in cost between the two drugs, along with any remaining prescription deductible.



PHARMACY

PRIOR AUTHORIZATION FOR CERTAIN MEDICATIONS

The prescription drug plan doesn't cover certain medicines without prior authorization for medical necessity. If you don't get authorization from your doctor, you may have to pay the full cost of your medication. If you choose a generic or brand formulary alternative from the CVS formulary list, you don't have to get prior authorization.

IMPROVED ASSISTANCE TO HELP YOU STAY ADHERENT TO YOUR MEDICATIONS:

Taking and filling multiple prescriptions each month?

You can pick up multiple, eligible 30-day or 90-day maintenance prescriptions and Specialty medications in a single visit to your preferred CVS Pharmacy.

- We'll work together to identify the eligible prescriptions* you'd like to pick up together whether you're picking up for yourself or you're a caregiver picking up for someone else.
- Your refills will be coordinated for pickup on one designated date each month, saving you trips to the pharmacy.
- Before each pickup date, you'll receive a reminder call or text message letting you know your prescriptions are ready.

Having a hard time remembering when to take which medicine at which time of day?

CVS will provide a color coded label on prescriptions with time of day that you should take a medication; in addition to, a prescription schedule that consolidates all of your CVS Pharmacy prescriptions into a simplified dosage schedule. The schedule also accounts for medications prescribed to be taken on an 'as needed' basis.

BONUS!!!

Great news! Austin ISD partnered with Aetna to offer you 20% off eligible CVS Health Brand health-related items as part of your Health Benefit.

In an ongoing effort to provide employees with tools for improved health, AISD is providing FREE generic meds* for preventative or chronic conditions. *Custom drug list only, Applies to SETON ONLY members

- Anticoagulant
- Asthma
- Auto-immune
- Benign prostatic hyperplasia
- Cancer
- Cardiovascular
- Contraception
- Depression

- Eye disorders- glaucoma
- · High cholesterol
- HIV-Truvada for PREP
- Immunosuppressant therapy
- Osteoporosis
- Parkinsons
- Psychiatric disorders
- Thyroid disorders

PHARMACY SPELLED OUT

Maintenance medications:

Maintenance medications are prescription drugs that you need to take regularly. Drugs that treat ongoing conditions or needs like asthma, diabetes, birth control, high cholesterol, high blood pressure and arthritis are usually considered maintenance medications. A maintenance medication can also be a drug that you take for three to six months and then discontinue. For example, an allergy medication that you take throughout the spring and summer could be considered a maintenance medication. To fill your maintenance medications, here are your steps:

CVS PHARMACY®

If you're filling your prescription at a local CVS Pharmacy®, your pharmacist can automatically change your prescription to 90-day refills.

NOT CVS PHARMACY®

If you're not filling your prescription at a CVS Pharmacy and would like to switch to mail order:

- Call the Customer Care number at 1-888-Rx-Aetna (1-888-792-3862) (TTY: 711).
- We'll contact your doctor for a new prescription and handle all the details.
- Order online. Visit the website that's listed on your member ID card, and then sign in to your account to submit your order.

PERKS OF MAIL ORDER:

CVS Caremark® Mail Service Pharmacy: Subscribe for mail-order service and your prescription will arrive every 90 days.

CVS Pharmacy on-demand delivery: 4-hour delivery offered within 10 miles of any CVS Pharmacy store, for a small fee.

CVS Pharmacy one- to two-day delivery: Free delivery by the United States Postal Service within one to two days.

Specialty medications:

Some prescription drugs are called specialty medications as they are used to treat complex, chronic health conditions such as multiple sclerosis or rheumatoid arthritis. These medications usually have to be stored or handled in certain ways.

Generic medications:

A brand-name drug is protected by a 17-year patent that limits production to one manufacturer. When the patent expires, other companies may manufacture a "generic" version of the drug. The generic is just like the brand name drug and follows the same FDA safety rules. The generic is essentially a chemical copy of the brand name drug. The name, color or shape may be different, but the active ingredients are the same.

Step Therapy:

Managed medical care step therapy is an approach to prescription intended to control the costs and risks posed by prescription drugs. The practice begins medication for a medical condition with the most cost-effective drug therapy and progresses to other more costly or risky therapies only if necessary.

Prior Authorization:

A process in which you must get prior approval before certain drugs are covered.

WHAT IS YOUR HEALTHCARE REALLY COSTING YOU?

The chart below shows a year in the life of Maria, an Austin ISD employee, and offers an example of how expenses within the three health plans available work.

Expenses listed include insurance premiums for the plans.

SCENARIO		HSA SET	ON	SETON O	NLY	OPEN AC	CESS
		Premium + District Contribution	Expenses	Premiums	Expenses	Premiums	Expenses
Maria goes to the doctor for her annual physical. On all Plans, preventative visits are covered at 100%.	January	\$125	\$0	(\$55)	\$0	(\$225)	\$0
	February	\$125		(\$55)		(\$225)	
Maria gets the flu. She goes to the doctor.	March	\$125	(\$125)	(\$55)	(\$45)	(\$225)	(\$45)
	April	\$125		(\$55)		(\$225)	
	May	\$125		(\$55)		(\$225)	
Maria breaks her arm. The total bill is \$4000.	June	\$125	(\$1900)	(\$55)	(\$1,600)	(\$225)	(\$2,600)
	July	\$125		(\$55)		(\$225)	
	August	\$125		(\$55)			
	September	\$125		(\$55)		(\$225)	
	October	\$125		(\$55)		(\$225)	
Maria has an asthma attack and has to go to the ER. The total ER bill is \$5000.	November	\$125	(\$1,000)	(\$55)	(\$500)	(\$225)	(\$500)
	December	\$125		(\$55)		(\$225)	
		\$1500	(\$3,025)	(\$660)	(\$2,145)	(\$2,700)	(\$3,145)
Maria's total out of pocket for year (premiums & expenses)		(\$1,52	25)	(\$2,80	05)	(\$5,84	45)

HOW DO MEDICAL PLAN CHOICES COMPARE?

	HSA SETON	SETON ONLY	OPEN ACCESS
Plan Type	ACO	ACO	Hybrid ACO/Aetna PPO
Network	Aetna Whole Health Alliance	Aetna Whole Health Alliance	Whole Health Alliance /Open Access
Your Annual Employee Only Premium Contribution	\$0	\$660	\$2,940
Employee Only Annual Out of Pocket Expense	\$4,500	\$6,000	\$7,500
Subtotal Employee Cost (Premiums + Out of Pocket Expenses)	\$4,500	\$5,660	\$10,440
Your Annual District Cash Contribution for Employee Only	\$1,500	\$0	\$0
Net Amount YOU pay annually	\$3,000	\$6,660	\$10,440



HEALTH SAVINGS ACCOUNT

HOW DOES IT WORK?

Money goes IN

You can make pre-tax contributions through payroll deductions.



AISD contributes \$1500 annually for employee only plans.



Pre-tax contributions from you and AISD, up to a combined total of total of:

\$3,600 for employee only coverage

\$7,200 for other coverage tiers

Add an extra **\$1,000** if you are age 55 or older

You can elect, stop or change the amount of pay you defer into your HSA at any time, not just during annual enrollment.

Money goes **OUT**

You can use your HSA to pay the full cost of non preventive medical care (including prescription drugs) until you meet the deductible. Health savings account funds can also be used for out of-pocket dental and vision expenses.

You pay less when you use in-network providers.

When you have an eligible expense, you decide whether to use money in your health savings account or pay with other money

Have money left? IT ROLLS OVER

Unlike flexible spending accounts, the money in your health savings account rolls over from year to year for you to use. Plus, if you leave AISD you can take it with you.

You decide how YOUR MONEY GROWS

Keep your funds in interest bearing accounts, or invest them in stocks, bonds, or mutual funds



GETTING STARTED WITH YOUR HSA

Access your account online to view current balance information, set up or update your profile, designate a beneficiary, view online statements, or manage your healthcare expenses. To register your online account, go to myaccounts.hsabank. com, click on "Create your new username and password," and follow the prompts.

You can designate an authorized signer and request a Visa® Health Benefits Debit Card for them at any time on the Member Website by simply navigating to the Profile tab, then clicking on "Add Authorized Signer2." Once added, under the Banking/Cards sub-tab, you can request a Visa® Health Benefits Debit Card by clicking on the authorized signer "Issue Card" link. There is no charge for your first two debit cards. Please see your HSA Bank Fee and Interest Rate Schedule for fees associated with additional debit cards. By designating an authorized signer on your account, you authorize the designee as "Authorized Signer" to transact business with and give instructions to HSA Bank regarding your HSA.

Your HSA Bank Visa® Health Benefits Debit Card will arrive in a separate mailing. To pay for IRS-qualified medical expenses with your debit card, use your card at point-of-sale with signature or PIN and at ATMs for withdrawals. Transaction fees 1 may apply when used with a PIN. You can also order checks (fees 1 may apply) to pay for IRS-qualified medical expenses, or you can pay for part or all of them out-of-pocket and reimburse yourself via check or online transfer of funds.

Go Paperless! We encourage you to elect to receive statements, notifications, and alerts electronically and to input a valid email address. The Statements & Notifications page on the Member Website outlines all the documents and notifications available. It is your responsibility to regularly review your account, and to contact us immediately if you notice any discrepancies in your account activity.

FOUR EASY WAYS TO CONTRIBUTE TO YOUR HSA



Payroll Deduction:

If your employer offers this option, you may be able to contribute a portion of your paycheck directly to your HSA – tax-free. Please contact your human resources department for more information.



Online Transfer:

To contribute to your HSA from an external bank account, click on "Make HSA Transaction" under the "I Want To ..." section. Click on the "Add Bank Account" link to add your personal savings and/or checking account(s).To activate the account and make it available for use, you will need to confirm the amount of a small deposit that will be made into your bank account. Once your account is activated, you can setup a one time or repetitive contribution into your HSA.



Personal Check or Money Order:

Mail your personal check or money order with a completed Contribution Form to HSA Bank directly at PO Box 939, Sheboygan, WI 53082. To obtain a Contribution Form, please contact our Client Assistance Center at 800-357-6246.



Transfer from HSA, MSA, or IRA3:

IRS regulations permit the transfer or rollover of funds to an HSA from another existing HSA or MSA. For more information on transfers, rollovers, and qualified HSA funding distributions, please visit hsabank.com/transfer.

SPECIAL RULES REGARDING MEDICARE AND YOUR HSA

There are special rules about Medicare coverage and HSA contributions. If you're age 65 or older, you'll want to consider the following:

Neither an employer nor the employee can make pre-tax contributions to an HSA if the employee has Medicare Part A or B.

If you receive Social Security benefits, you are automatically enrolled in Medicare Part A, so you are not eligible to make or receive pre-tax HSA contributions.

If you begin Social Security benefits during 2020, Social Security will automatically award you Medicare benefits retroactively. Your Medicare start date will be the month of your 65th birthday, or six months prior to when your Social Security benefits begin, whichever is latest.

If you do not draw Social Security benefits, you are not required to start Medicare Part A or B at age 65.

If you are not receiving Social Security and have declined Medicare, but your spouse is covered under Medicare, you can still use your HSA funds to pay for your spouse's expenses. As the account owner, your participation in Medicare is what determines eligibility, not your spouse's participation.

If you have Medicare, you can still elect HSA Seton Only Plan, but you are not eligible to make or receive pre-tax contributions to an HSA. You can, however, make pre-tax contributions to an FSA.



FLEXIBLE SPENDING ACCOUNT

Flexible spending accounts are administered by National Benefit Services, whose services include:

- Online account access and claim submissions: https://myweathcareonline.com/nbsbenefits/
- Automatic direct deposit into your checking or savings account
- Help center at 800-274-0503 from 8 a.m. to 5 p.m. MST
- Download claim forms from: https://www.nbsbenefits.com/health-forms/

PLEASE NOTE: You must enroll in your FSA each year. Enrollments do not roll over!

HEALTH CARE FSA

- You can set aside up to \$2,800, pre-tax, to pay for eligible health care expenses, including dental and vision.
- You can use your FSA for all eligible health care costs for you and your dependents, even if your dependents are not covered under an Austin ISD medical plan.
- You may use your 2021 health care FSA for expenses incurred through March 15, 2022 as long as you submit documentation for those expenses by March 31, 2022.
- The full amount of your election is available to you on January 1, 2021, even though your contributions are spread over the calendar year.

DEPENDENT DAY CARE FSA

- You and your spouse can set up a combined annual contribution up to \$5,000, pre-tax, to pay for day care expenses for qualified dependents while you work or look for work.
- Unlike the health care FSA, you can only be reimbursed funds that have already been withheld from your paycheck.
- Eligible expenses include day care, nursery school, after-school care and summer day camp.
- IRS "use it or lose it" rule applies, and you cannot be reimbursed for any expense that is also covered by a tax credit on your federal tax return.

For more information, visit the IRS website at **irs.gov/publications** for a full list of eligible expenses.

HEALTH CARE FLEXIBLE SPENDING ACCOUNT (FSA)			
Minimum Contribution	\$250 per year (\$20.83 per month)		
Maximum Contribution	\$2800 per year (\$233.33 per month)		
DEPENDENT CARE SPENDING ACCOUNT			
Maximum Contribution	\$2500 per year (\$208.33 per month)		
Maximum Contribution if married filing jointly	\$5000 per year (\$416.66 per month)		

DENTAL PPO

ELIGIBILITY	Primary enrollee, spouse and eligible dependent children to the end of the month dependent turns age 26		to the end	
Deductibles Deductibles waived for	Core Plan: \$50 per person / \$150 per family each calendar year Plus Plan: \$50 per person / \$100 per family each calendar year			
Diagnostic & Preventive (D & P)		Y	es	
Maximums	\$1,500 per person each calendar year			
D & P counts toward maximum		N	lo	
Waiting Period(s)	Basic Benefits None	Major Benefits None	Orthodontics None	Prosthodontics None

	Core Plan		Plus	Plan
BENEFITS AND COVERED SERVICES*	Delta Dental PPO dentists**	Non-Delta Dental PPO dentists**	Delta Dental PPO dentists**	Non-Delta Dental PPO dentists**
Diagnostic & Preventive Services (D & P) Exams, cleanings and x-rays	100 %	100 %	100 %	100 %
Basic Services Fillings, simple tooth extractions and sealants	80 %	80 %	90 %	90 %
Endodontics (Root Canals) Covered under Basic Services	80 %	80%	90 %	90%
Periodontics (gum treatment) Covered under Basic Services	80 %	80 %	90 %	90 %
Oral Surgery Covered under Basic Services	80 %	80 %	90 %	90 %
Major Services Crowns, inlays, onlays and cast restorations	50 %	50 %	60 %	60 %
Prosthodontics Bridges and dentures	50 %	50 %	60 %	60 %
Orthodontic Benefits Adults and dependent children	0 %	0 %	50 %	50 %
Orthodontic Maximums	Not Applicable	Not Applicable	\$1,500 Lifetime	\$1,500 Lifetime

^{*} Limitations or waiting periods may apply for some benefits; some services may be excluded from your plan.

Reimbursement is based on Delta Dental contract allowances and not necessarily each dentist's actual fees.*



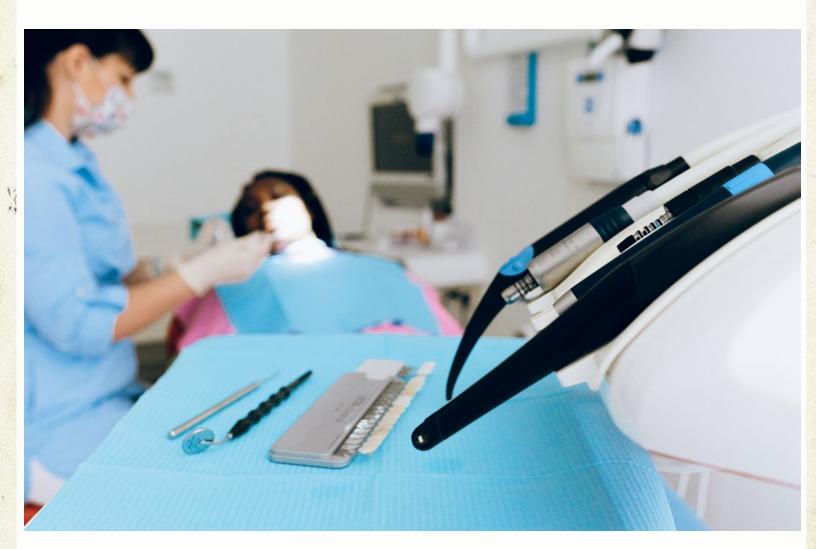
DHMO-HOW IT WORKS

The DHMO plan doesn't have any deductibles or maximums.

Instead, when you receive a dental service, you pay a fixed dollar amount for the treatment (a "copayment").

- Enrollees select a primary care dentist from whom they will receive all treatments (traditional HMO).
- If the enrollee does not designate a provider, Delta will assign one within the enrollee's home zip code.
- To change the primary care dentist, the enrollee must contact Delta at 800-422-4234. Changes take effect the following month.
- If specialized services are required, the primary care provider will issue a referral. Delta must review and approve all referrals.
- Pay a fixed dollar amount (copay) when you receive service at your assigned primary care dentist.

To change your primary care dentist, call Delta at 800-422-4234.



VISION

Many consider vision to be their most valued sense. We learn primarily through vision; in fact, 80% of our brain is devoted to processing visual information – more than all the other senses combined.

We need to take care of our eyes like we take care of our bodies and teeth; care should be preventive, not reactive. Many simple vision problems go undiagnosed – problems that could be detected by an eye exam – so there is no need to live with vision challenges, such as seeing objects in the distance or up close, general eye strain, blurry vision, headaches, etc.

Did you know that your eyes are the windows to your health? It's true! By looking into your eyes during a comprehensive eye exam, your eye care provider can not only identify vision issues, including cataracts, glaucoma, and macular degeneration, but they can also identify systemic diseases such as diabetes, hypertension, and high cholesterol. Early detection can help lessen some of the long-term effects and help preserve vision.

BENEFIT	IN-NETWORK PROVIDER	OUT OF-NETWORK PROVIDER	FREQUENCY OF BENEFIT
Routine Exams	\$10 Exam, then 100% paid in full	Up to \$52 retail value	Once every 12 months
Lenses Single vision Bifocal Trifocal Polycarbonate Lenticular	\$10 copay \$10 copay \$10 copay \$10 copay/kids; varies/adults	Up to \$55 Retail Value Up to \$75 Retail Value Up to \$95 Retail Value N/A Up to \$125 Retail Value	Once every 12 months
Contact Lenses Elective Medically Required	\$60 copay, up to \$130 Retail Value, etc. \$10 copay	Up to \$210 Retail Value	Once every 12 months (in lieu of glasses)
Frames	Up to \$130 Retail Value	Up to \$57 Retail Value	Once every 12 months
Laser Vision Correction	15% off regular price 5% off discount prices Contracted facilities only		In Lieu of eyewear benefit



DISABILITY

SHORT TERM DISABILITY INSURANCE

Did you know that 1 in 4 workers will miss up to 3 months of work due to illness, injury, or pregnancy during their career?

AISD WILL NOW
BE PAYING A PORTION
OF THIS PREMIUM



THE NEW COST TO YOU
WILL BE REDUCED TO
\$5.85 PER MONTH!

HOW IT WORKS

- YOU Decide if you want to elect this benefit.
- If you become disabled due to Illness (including pregnancy) or Injury, you may be eligible to receive **66 2/3%** of your total weekly earnings (up to \$2,000.00 per week).
- Benefits can last up to 26 weeks as long as your are still unable to work due to injury or illness.
- Benefits are paid weekly.
- **6/12 pre-existing condition provisions apply.** New or increased disability coverage is subject to a 6/12 pre-existing condition exclusion. This means that if you have a condition that was treated or medically advised in the six months before your coverage effective date, you are not covered for that condition for the first 12 months.

IMPORTANT NOTICE:

Partial pay for District Leave is no longer available

DISABILITY

LONG TERM DISABILITY INSURANCE

- Employees can choose their Monthly Benefit Amount in \$100 increments, from \$200 to \$8,000 (not to exceed **66 2/3%** of monthly earnings).
- Employees can choose from among six accident/sickness Benefit Waiting Periods. A benefit waiting period is the period of time in which an employee must be continuously disabled before you are eligible for benefits.

Accident	Sickness
0 Days	3 Days
14 Days	14 Days
30 Days	30 Days
60 Days	60 Days
90 Days	90 Days
180 Days	180 Days

- 3/12 pre-existing condition provisions apply. New or increased disability coverage is subject to a 3/12 pre-existing condition exclusion. This means that if you have a condition that was treated or medically advised in the three months before your coverage effective date, you are not covered for that condition for the first 12 months.
- Benefits for Mental/Nervous/Substance Abuse/Self-Reported Illnesses are limited to 24 months lifetime combined.
- Any specific limitations are described in the Certificate of Insurance/Summary Plan Description provided by your Employer upon request.





ACCIDENT INSURANCE

ACCIDENTS HAPPEN

FORTUNATELY, WE CAN HELP WITH UNEXPECTED EXPENSES

Guardian Accident Insurance helps offset the cost associated with both minor and major accidents:

- For every covered accident, Guardian can pay a benefit based on the injury you sustain and the various treatments and/or services received, regardless of what is covered by medical insurance.
- Special Feature: Guardian Accident Insurance will increase covered benefits by 20% for a child who has an accident while playing organized sports.*

GUNSHOT WOUNDS

For Employees & Covered Family Members

Gunshot wounds are a covered accident under this policy. They are treated as any other accident and all applicable benefits would apply: Ambulance, ER, Hospital, ICU, Injury Sustained, Surgery to repair, Diagnostic Tests, Follow Up visits, Physical Therapy, and any other applicable benefits

A Benefit When You Need It

Consider some of the unexpected costs that may result from an accident such as travel to treatment centers, child care while recovering, household expenses while you can't work, or even modifications to a home or automobile. Payments are made directly to the employee and can be used for any purpose — even everyday expenses like groceries, rent and mortgage.

Actively at work—If you are not actively at work when coverage is scheduled to become effective, your coverage does not take effect until you complete your first day at work.

PRIMARY BENEFITS	VALUE PLAN	ADVANTAGE PLAN	PREMIER PLAN
Portability	Included without evidence	Included without evidence	Included without evidence
Child(ren) Age Limits	Birth to 26 years (26 if full time student), subject to state limitations	Birth to 26 years (26 if full time student), subject to state limitations	Birth to 26 years (26 if full time student), subject to state limitations
Accident Coverage Type	On and Off Job	On and Off Job	On and Off Job
ACCIDENTAL DEATH AND DISMEMBERMENT			

Child(ren) Age Limits	Birth to 26 years (26 if full time student), subject to state limitations	Birth to 26 years (26 if full time student), subject to state limitations	Birth to 26 years (26 if full time student), subject to state limitations
Accident Coverage Type	On and Off Job	On and Off Job	On and Off Job
ACCIDENTAL DEATH AND DISMEMBERMENT			
Death Benefit	Employee: \$10,000 Spouse: \$5,000 Child: \$5,000	Employee: \$25,000 Spouse: \$12,500 Child: \$5,000	Employee: \$50,000 Spouse: \$25,000 Child: \$5,000
Catastrophic Loss	Quadriplegia: 100% of AD&D Loss of speech and hearing (both ears): 100% of AD&D Loss of cognitive function: 100% of AD&D Hemiplegia: 50% of AD&D Paraplegia: 50% of AD&D	Quadriplegia: 100% of AD&D Loss of speech and hearing (both ears): 100% of AD&D Loss of cognitive function: 100% of AD&D Hemiplegia: 50% of AD&D Paraplegia: 50% of AD&D	Quadriplegia: 100% of AD&D Loss of speech and hearing (both ears): 100% of AD&D Loss of cognitive function: 100% of AD&D Hemiplegia: 50% of AD&D Paraplegia: 50% of AD&D

FEATURES	VALUE PLAN	ADVANTAGE PLAN	PREMIER PLAN
Accident Emergency Treatment	\$150	\$175	\$200
Accident Follow-Up Visit - Doctor	\$25 up to 6 treatments	\$50 up to 6 treatments	\$75 up to 6 treatments
Air Ambulance	\$500	\$1,000	\$1,500
Appliance	\$100	\$125	\$125
Burns (2nd Degree/3rd Degree)	9 sq inches to 18 sq inches: \$0/\$2,000 18 sq inches to 35 sq inches: \$1,000/\$4,000 Over 35 sq inches: \$3,000/\$12,000	9 sq inches to 18 sq inches: \$0/\$2,000 18 sq inches to 35 sq inches: \$1,000/\$4,000 Over 35 sq inches: \$3,000/\$12,000	9 sq inches to 18 sq inches: \$0/\$2,000 18 sq inches to 35 sq inches: \$1,000/\$4,000 Over 35 sq inches: \$3,000/\$12,000
Burn - Skin Graft	50% of burn benefit	50% of burn benefit	50% of burn benefit
Child Organized Sport	20% increase to child benefits	20% increase to child benefits	20% increase to child benefits
Chiropractic Visits	No benefit	\$25 per visit up to 6 visits	\$50 per visit up to 6 visits
FEATURES	VALUE PLAN	ADVANTAGE PLAN	PREMIER PLAN
Dislocations	Schedule up to \$3,600	Schedule up to \$4,400	Schedule up to \$4,800
Diagnostic Exam (Major)	\$100	\$150	\$200
Emergency Dental Work	\$200/Crown \$50/Extraction	\$300/Crown \$75/Extraction	\$400/Crown \$100/Extraction
Epidural pain management	\$100, 2 times per accident	\$100, 2 times per accident	\$100, 2 times per accident
Eye Injury	\$200	\$300	\$300
Family Care	\$20/day up to 30 days	\$20/day up to 30 days	\$20/day up to 30 days
Fracture	Schedule up to \$4,500	Schedule up to \$5,500	Schedule up to \$6,000
Hospital Admission	\$750	\$1,000	\$1,250
Hospital Confinement	\$175/day - up to 1 year	\$225/day - up to 1 year	\$250/day - up to 1 year
Hospital ICU Admission	\$1,500	\$2,000	\$2,500
Hospital ICU Confinement	\$350/day - up to 15 days	\$450/day - up to 15 days	\$500/day - up to 15 days
Initial Physician's office /Urgent Care Facility Treatment	\$50	\$75	\$100
Knee Cartilage	\$500	\$500	\$750
Joint Replacement (hip/knee/shoulder)	\$1,500/\$750/\$750	\$2,500/\$1,250/\$1,250	\$3,500/\$1,750/\$1,750
Laceration	Schedule up to \$300	Schedule up to \$400	Schedule up to \$500
Lodging	\$100/day, up to 30 days for companion hotel stay	\$125/day, up to 30 days for companion hotel stay	\$150/day, up to 30 days for companion hotel stay
Occupational or Physical Therapy	\$25/day up to 10 days	\$25/day up to 10 days	\$35/day up to 10 days
Prosthetic Device/Artificial Limb	1: \$500 2 or more: \$1,000	1: \$500 2 or more: \$1,000	1: \$750 2 or more: \$1,500
Rehabilitation Unit Confinement	\$150/day up to 15 days	\$150/day up to 15 days	\$150/day up to 15 days
Ruptured Disc With Surgical Repair	\$500	\$500	\$750
Surgery (Cranial, Open Abdominal, Thoracic)	\$1,000 Hernia: \$125	\$1,250 Hernia: \$150	\$1,500 Hernia: \$200
Surgery - Exploratory or Arthroscopic	\$150	\$250	\$350
Tendon/Ligament/ Rotator Cuff	1: \$250 2 or more: \$500	1: \$500 2 or more: \$1,000	1: \$750 2 or more: \$1,500
Transportation	\$400, 3 times per accident	\$500, 3 times per accident	\$600, 3 times per accident
X - Ray	\$20	\$30	\$40

CANCER

EASE THE FINANCIAL BURDEN WHILE HEALING

Every year, more and more people are being diagnosed with cancer. Treatment of cancer can lead to unexpected expenses that create an additional financial burden. Cancer insurance helps fill in the gaps that medical insurance doesn't cover. Benefits are paid directly to the employee and may be used for any purpose—such as travel to treatment centers, medical co-pays, deductibles and experimental treatment, as well as expenses like groceries, rent and ongoing household bills.

Enroll today! During this enrollment, you can elect coverage for you and your family:

- Convenient payroll deductions
- Portable
- Guarantee Issue: no health question asked at enrollment
- Pre-existing Condition Limitation 3 month look back period, 12 month exclusion period, 6 months treatment-free
- · Continuity of Coverage for those currently enrolled
- Waiver of Premium if you become disabled due to cancer for 90 days, premiums will be waived thereinafter so long as you continue to be disabled
- Actively at work If you are not actively at work when coverage is scheduled to become effective, your coverage does
 not take effect until you complete your first day at work.

PRIMARY BENEFITS	Option 1	Option 2
Portability	Included without evidence	Included without evidence
Child(ren) Age Limits	Birth to 26 yrs (26 if full-time), subject to state limitations	Birth to 26 yrs (26 if full-time), subject to state limitations
Internal Cancer Initial Diagnosis Benefit Amount (1 per covered person per lifetime)	\$5,000 Employee & Spouse \$7,500 Child(ren)	\$10,000 Employee & Spouse \$15,000 Child(ren)
Heart Attack/Stroke Initial Diagnosis Benefit Amount (1 per covered person per lifetime)	\$5,000 Employee & Spouse \$7,500 Child(ren)	\$10,000 Employee & Spouse \$15,000 Child(ren)
Benefit Waiting period for Initial Diagnosis benefits	30 days, continuity of coverage	30 days, continuity of coverage
Radiation Therapy/Chemotherapy	Schedule amounts up to a \$15,000 benefit year maximum	Schedule amounts up to a \$20,000 benefit year maximum
Hormone Therapy	\$50/Treatment up to 12 treatments per year	\$50/Treatment up to 12 treatments per year
Experimental Treatment	\$100/day up to \$1,000/month	
Pre-existing condition limitation	3 month look back period, 6 months treatment free, 12 month exclusion period	
Waiver of Premium		Included

CRITICAL ILLNESS

ADDED PROTECTION FOR MORE PEACE OF MIND

With the rising cost of healthcare, getting seriously ill could have a big impact on your finances. With supplemental health insurance that has critical illness coverage, you are paid cash benefits that can help pay for bills and expenses that your existing health insurance plan doesn't cover.

CRITICAL ILLNESS INSURANCE OFFERS MORE COVERAGE

If you are diagnosed with a critical illness, critical illness insurance can help you pay for expenses that aren't covered by your existing health insurance plan. Critical illness coverage pays you a lump- sum cash benefit to help pay for treatment or bills, and you can add a wellness benefit option to help cover the cost of health screening tests.

GUARDIAN[®]

CRITICAL ILLNESS BENEFITS	\$10,000	\$20,000	\$30,000
Heart Attack (100%)	\$10,000	\$20,000	\$30,000
Stroke (100%)	\$10,000	\$20,000	\$30,000
Arteriosclerosis	\$3,000	\$6,000	\$9,000
Major Organ Transplant (100%)	\$10,000	\$20,000	\$30,000
Kidney Failure	\$10,000	\$20,000	\$30,000
Waiver of Premium (100%)	\$10,000	\$20,000	\$30,000
Wellness Benefit (per year)	\$50	\$50	\$50

Spouse receives 50% of the employee benefit amount, if coverage is elected Children receive 25% of the employee benefit amount, if coverage is elected



LIFE INSURANCE

BASIC LIFE INSURANCE, EMPLOYEE ONLY

Austin ISD pays for your basic life insurance with a benefit payout equal to \$10,000. While this coverage is automatic, you MUST designate a beneficiary for this benefit. Always check each year at open enrollment to make sure your beneficiary is still accurate.

SUPPLEMENTAL LIFE & AD&D INSURANCE, EMPLOYEE, SPOUSE, DEPENDENTS

EMPLOYEE SITUATION	COVERAGE OPTION
New Hire within 30 days of hire date	Can enroll in up to 5 x annual earnings, not to exceed \$500,000 guarantee issue, no Evidence of Insurability required
Currently have some additional life insurance and wish to increase	Can increase coverage level by 5, \$10,000 increments, from where currently insured without Evidence of Insurability, not to exceed \$500,000, more than 5, \$10,000 levels, would require EOI
Current employee with no additional life, wish to add coverage	Can add up to \$50,000 without Evidence of Insurability. More than \$50,000 would require EOI

Eligibility: All eligible full-time employee who are actively at work and working a minimum

of 20 hours each week

Benefits: Eligible Employees: \$10,000 increments to a maximum of the lesser of

5.00 times pay or \$500,000

Spouse Benefits: \$5,000 increments to a maximum of \$250,000, not to exceed 50% of employee's

Optional Life Benefit. More than \$50,000 would require Evidence of Insurability

Life Financial

Child Benefit: Child 15 days to 6 months old: \$250

Child more than 6 months, but less than 1 year old: \$10,000
Child more than 1 year old: \$10,000
Child limiting age: 26

Portability: Option to continue term insurance under a different policy when coverage terminates.

Minimums, maximums, and other conditions apply

Reduction Schedule: Reduces to: 65% at Age 65, 40% at Age 70, 25% at Age 75

Accelerated Benefit Option: 24 months or less to live, up to 80% of coverage

Emergency Travel Assistance: If you have a medical emergency while you are more than 100 miles away from home, you can be connected to Assist America's staff of medically trained, multilingual professionals who can advise you in a medical emergency, 24x7.

Identity Theft Protection: You have the support of a comprehensive Identity Theft Protection program through Assist America's SecurAssist Identity Protection program.

Note: active duty military are not eligible for Life Insurance through this program.

DOCTORS ON DEMAND

WITH REDIMD

REDIMD IS CONVENIENT FOR YOU TO TALK TO A DOCTOR ANYTIME!

RediMD provides you and your eligible dependents access to an affordable, convenient option for treating a vast number of medical conditions. You can schedule a virtual doctor's visit online, via a computer, smart phone, or phone call.

This service is FREE with NO COPAY for Austin ISD employees and their dependents enrolled in the Seton Only and Open Access Health Insurance Plans. Employees enrolled in the HSA Plan will be billed (\$50) and can pay with their Health Savings Account Card.

This service is available for use during the day, night, and weekend hours. Telemedicine available Monday-Saturday • 8:00 a.m. – 6:00 p.m. central

Phone Consults available by calling 281-633-0148

How to Use RediMD: Go to www.REDIMD.com

Register* (First Time) or Log-In

- · Click "register"
- Select "register" or "First time user"
- Enter our code (see below) and click "next"
- Follow registration directions, enter your email and create a password, complete your profile

To Schedule an Appointment

- Click "Make appointment"
- Select a provider from the list, date, and time
- When it is time for your appointment, log-in to your account 5 minutes before

Consult

- If you are able to, please take your temperature and blood pressure. If you do not have a way to take that information put a "1" in those sections
- After you click for permission for your webcam to be accessed, the Dr. will appear at your scheduled time

Registration Codes:

Seton Only & Open Access: austinisd

Common Treatable Conditions:

- Cold
- Flu
- Cough

- Flu
- Sore Throat
- Allergies
- Skin Issues

HSA Plan: COPAY50

- · Blood Pressure
- Headaches
- Sinus Infection
- Stomach Problems

EMPLOYEE WELLBEING





STAY HEALTHY

- On Demand Learn and Be Well Videos on AISD's Wellness YouTube channel
- Calendar of Events
- Nutritional Seminars
- Wellness Challenges
- Camp Gladiator and other Wellbeing Partners

STAY WELL

- Diabetes Engagement Program
- Tobacco Cessation Program
- Weight Loss Program: Naturally Slim
- Pregnancy Resource Kit
- Immunization Offerings

STAY WISE

- Revive EAP Program
- Onsite Mental Health Resource
- Mental Health Resource Toolkit in AISD Portal

STAY WEALTHY

FINPATH; Retirement Savings



Sherman's 2020-2021 Roadmap

AUGUST



Welcome Back!

Insurance Cards: Which To Use & Where

SEPTEMBER



Immunization Awareness

Where to get your Flu Shot

OCTOBER



Open Enrollment

Highlighting Upcoming Plan Changes

NOVEMBER



Giving Back

HSA vs. FSA: Know the Difference

DECEMBER



Health and the Holidays

Rx Transition: How will this affect you?

JANUARY



Goal Setting for the New Year

Get Naturally Slim!

FEBRUARY



Heart Health Month

AISD Disease Management Programs

MARCH



Focus on Nutrition

Virtual Healthcare Options

APRIL



Financial Health Month

Navigating Your Retirement Plan

MAY



Mental Health Awareness

Your Employee Assistance Program

JUNE



Beat the Heat!

Know Where to Go

JULY



Prevention is Key

What Exams are Covered?

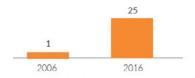
NATURALLY SLIM

AISD is continually looking for new resources to help our employees be their healthiest. **Naturally Slim** is a company backed by science with over 10 years of proven results with large companies including the University of Texas! Naturally Slim is a digital behavioral counseling program focused on metabolic syndrom reversal, diabetes prevention and weight management. This program is completely free to employees and their dependents over the age of 18 that are on the AISD health plan.

The "Weight" of Obesity

More than 70% of American adults are overweight or obese, and obesity rates continue to surge. Half of the states in the U.S. now have obesity rates above 30% compared to just one state 10 years ago. Unfortunately, obesity is highly correlated with MetS. heart disease, diabetes, stroke, at least 13 types of cancers and more. Consequently, MetS is an accurate predictor of both current and future high-cost medical claims.

Number of states with obesity rate above 30%²



of Naturally Slim participants lose weight?



10.6 lbs

average weight loss in first 10 weeks¹⁰

83%

of Naturally Slim participants maintain weight loss after one year⁷

CONTACT:

Austin ISD Enrollment Website: www.naturallyslim.com/AustinISD Naturally Slim Email: coaches@naturallyslim.com
Naturally Slim Phone: 1-855-999-7549

DIABETES ENGAGEMENT PROGRAM

LIVING WITH DIABETES IS NOT EASY, BUT WITH THE PROPER EDUCATION, RESOURCES AND SUPPORT, IT CAN BE MANAGED!

YOUR AISD BENEFITS TEAM IS OFFERING YOU AN EXCLUSIVE PROGRAM TO RECEIVE YOUR DIABETES MANAGEMENT MEDICATIONS AT A \$0 COPAY!

Who is Eligible?

All AISD Medical Plan members with a Type 1 or Type 2 diabetes diagnosis.

Program Requirements

Attendance of initial 1:1 appointment

Regular compliance with HbA1C checkups

How Do I Register?

Contact your Aetna Onsite Wellness Coordinator Leigh Ennis | 512-414-2287 | EnnisL@Aetna.com

No matter where you are in your diabetes journey, this program will provide the resources and education to help you effectively manage your diabetes.



PREVENTATIVE CARE

Early prevention and detection are key elements to living a long and healthy life. By visiting your physician for routine immunizations and recommended exams, you are making the important decision to take responsibility for your health and overall quality of life.

All Austin ISD medical plans cover the following preventative services with no deductible, copayment, or coinsurance at the time of service.

Immi	unizations	
Diptheria, Tetanus, Pertussis (DTaP)	Dose given at 2, 4, 6, 15-18 months and 4-6 years of age	
Influenza (Flu)	1 dose per year	
Haemophilus Influenza B (Hib)	Dose given at 2, 4, 6, 12-15 months	
Herpes Zoster (Shingles)	Dose given to adults 60 years of age and older	
Hepatitis A (HepA)	2 doses given between 1-2 years of age	
Hepatitis B (HepB)	Dose given at birth, 1-2 months and 6-18 months	
Human Papillomavirus (HPV)	3 doses given between 9-26 years of age	
Inactivated Polovirus (IPEV)	Dose given at 2 and 4 months, 6-18 months, and 4-6 years of age	
Measles, Mumps & Rubella (MMR)	Dose given between 12-15 months, 4-6 years of age and to adults lacking immunity	
Meningococcal (Meningitis/ MCV4)	Dose given between 11-12 years of age or at start of high school or college	
Pneumococcal (Pneumonia)	Dose given at 2, 4, 6, 12-15 months, annually at 65 years of age and up, or high risk individuals	
Rotavirus (Rota)	Dose given at 2, 4, 6 months	
Tetanus, Diptheria, Pertussis (Td/Tdap)	(Tdap) 11-12 years of age (Td) Booster every 10 years	
Varicella (Chickenpox)	Dose given between 12-15 months, 4-6 years and 2 doses for at risk adults	

Routine Screeni	ngs and Checkups
Noutine Screenii	
Adult Well Person Exam	1x Per Year
Well Baby Exam/ Well Child Exam	1x Per Year Birth to 2 years of age/ up to 21
Annual Gynecological Exam	1x Per Year
Preventative Mammogram	1x Per Year beginning at 40 years of age
Preventative Colonoscopy	1x every 10 years, beginning at 50 years of age
Preventative Prostate Cancer Screenings	1x Per Year
All Routine Prenatal Visits/ All Preventive Prenatal Screenings	Member pays normal cost share for delivery, postpartum care, ultrasounds, specialty visits and certain labs.
Newborn Blood Screenings	All recommended newborn labs post birth
Human Immunodeficiency Virus (HIV)	At Risk Adults and Children
Cholesterol Screening/ Lipid Panel	1x Per Year Adults and at risk children
Diabetes Screening/ Glucose	1x Per Year Adults and at risk children



HERE FOR YOU!

REVIVE EMPLOYEE ASSISTANCE PROGRAM

AUSTIN ISD PROVIDES ALL EMPLOYEES AND THEIR HOUSEHOLD MEMBERS ACCESS TO THIS NO COST PROGRAM THROUGH REVIVE EMPLOYEE ASSISTANCE (EAP).

This confidential program and services are paid by Austin ISD and includes counseling sessions, on-line resources, phone consultations for legal and financial topics.

Available 24 hours a day, 365 days a year

- No-Cost Counseling Sessions
 - o 4 Sessions /Issue/Year
 - Counseling Sessions are available face to face, by phone, or tele-video.
- Additional Services
 - Legal Guidance
 - Work-Life Solutions
 - Financial Resources
 - Estate Guidance

For more information about Revive EAP, contact us:

Email: eap.wellness@austinsid.org • Phone: 512.414.2282



TO ACCESS SERVICES:

Phone: 1-800-962-9480

Website: www.reviveeap.com

Username: AustinISD • Password: EAP

RETIREMENT

AUSTIN ISD EMPLOYEES CONTRIBUTE EVERY PAYCHECK TO TEACHER RETIREMENT SYSTEMS (TRS).

The TRS administers a pension trust fund that has been serving the needs of Texas public education employees for over 75 years.

The plan is administered as a qualified governmental retirement plan. The TRS retirement plan is a defined benefit plan. This designation means that the amount of the benefit you are paid is determined under a formula established by law. Once you begin service retirement under the rules of the plan, you are eligible to receive a monthly benefit for life. Your monthly benefit is "defined" by the formula; it is not limited by the amount of your member contributions to your retirement account.

Employees are encouraged to explore individual retirement options outside of TRS, as the monthly benefit they are entitled to is not always enough. AISD offers 403B and 457b retirement options to help employees start saving. Plans are administered by TCG Services.

It is NEVER the wrong time to SAVE!

Here is a comparison between the two investment choices. There are several TRS approved 403B vendors. AISD's exclusive 457b provider is TCG Services.

403(b)	457(b)
Less stringent withdrawal restrictions while you are employed, but a 10% federal early withdrawal penalty might apply.	More stringent withdrawal restrictions while you are employed, but no 10% federal early withdrawal penalty after severance from employment [except in the case of rollovers from non-457(b) plans, including IRAs].
Generally withdrawals made prior to severance from employment or the year you attain age 59 $\frac{1}{2}$ can only be made due to financial hardship.	Generally withdrawals made prior to severance from employment or the year in which you reach age 70 $\%$ can only be made for an unforeseeable emergency.
A financial hardship withdrawal is considered less restrictive – while you are employed – than a 457(b) unforeseeable emergency. Examples of financial hardship include: o Unreimbursed medical expenses o Payments to purchase a principal residence o Higher education expenses o Payments to prevent eviction or foreclosure of a mortgage	An unforeseeable emergency is more restrictive – while you are employed – than a 403(b) hardship. Some examples: o A sudden and unexpected illness or accident for you or a dependent o Loss of your property due to casualty o Other similar extraordinary circumstances arising as a result of events beyond your control. Sending a child to college or purchasing a home, two common reasons for 403(b) hardship withdrawals, generally are not considered unforeseeable emergencies.
Withdrawals can be subject to a 10% federal early withdrawal penalty prior to age 59 ½.	The 10% federal early withdrawal penalty, generally applicable to distributions prior to age 59 ½ from a 403(b) plan, does not apply to distributions from 457(b) plans except on amounts rolled into the plan from non-457(b) plans (including IRAs).

FINPATH

APPROACH YOUR FINANCES WITH CONFIDENCE.

What is FinPath?

7 in 10 Americans report high levels of financial stress, but you shouldn't be part of that statistic. FinPath is a financial literacy program paid by your employer to help you take control of your money and help decrease your stress.

If you've ever felt like you're living paycheck to paycheck or like your dollar can go farther, we have just the tools to make a difference. FinPath can help you with topics like:

- · Creating an emergency savings fund
- Managing and lowering your debt
- · Improving your credit score
- Saving for big purchases like a home or a car
- · Planning for retirement with savings plans
- Protecting your paycheck from insurance overcharges
- Exploring student loan forgiveness
- ...and more

WHAT YOU GET



FinPath University

Courses

Participate in financial

professional investment

courses taught by

advisors.

Wellness Score

Tracker

Your personalized score helps you plan and track your improvement progress.



Budgeting Tools & Calculators

Ditch your old spreadsheet!
Use FinPath to create
budgets and track spending.



Unbiased & Confidential Personal Advice

Get access to a coach who will answer questions about managing your money.

READY TO FIGHT FINANCIAL STRESS?

Get started for free at finpathwellness.com today!

LEAVE INFORMATION

FAMILY MEDICAL LEAVE

(MUST BE APPROVED/DESIGNATED BY THE LEAVE OFFICE)

In order to have your absence considered for approval Employees MUST submit request and medical certification **30 DAYS PRIOR TO SCHEDULED LEAVE AND WITHIN 15 DAYS OF UNFORESEEN** events.

Absences exceeding 3 work days require the approval from the Leave Office.

The diagram below provides a summary of the leave process.



LIFE HAPPENS...

To assist employees, AISD offers a comprehensive leave program that provides both paid and unpaid leave.

The State of Texas provides five (5) days of personal leave each school year. In addition, AISD provides sick leave according to the following schedule:

WORK CALENDAR	PERSONAL	SICK	TOTAL
Accrual Maximum	(Days)	(Days)	(Days)
10 Month Employee:	5	4	9
11 Month Employee:	5	5	10
12 Month Employee	5	6	11

LEAVE INFORMATION

WHAT LEAVE IS AVAILABLE TO ME?

In addition to the personal and sick leave listed below. AISD offers leave in accordance with Family Medical Leave Act (FMLA), Extended Leave, Parenting Leave, Extended Parenting Leave, Temporary Disability Leave and Professional Leave.

Personal (State)

- To care for pesonal matters
- Religious Observance
- Cannot be used any day scheduled for a district-wide test or before/after a holiday
- Request must be submitted 2 days in advance (except in extenuating circumstances)
- Restricted to no more than 3 consecutive work days
- Transferrable between public school districts in TX, via service record

Sick Leave (Local)

- Employee's own illness
- · Family Illness
- Funeral
- Natural Catastrophe

Both accumulate and do not expire while employee is active.

Both are available at the beginning of each school year.

Neither are eligible for compensation upon resignation/retirement.

Both are pro-rated upon separation of employment based on actual days worked.

Am I eligible for Vacation?

Only Year-round employees earn vacation. Earned one day per month for a maximum of ten (10) days.

How do I know what leave I am eligible for?

A leave request form and supporting documentation are required to be submitted to the leave office. Leave Office will designate any leave available to you.

Do I get paid while I am on leave?

We are excited to announce that AISD will be contributing towards the employee's cost of Short Term Disability. Employees who enroll are eligible for up to 66 2/3% of their pay, if medically eligible for up to 26 weeks.

2021 RATE CHART: 12 MONTH





MEDICAL					
HSA Seton	Salary band 1 (Under \$40K)	Salary band 2 (\$40k - \$54999k)	Salary band 3 (\$55k - \$74999k)	Salary band 4 (\$75k+)	
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	
Employee + Spouse	\$403.03	\$403.03	\$403.03	\$403.03	
Employee + Child(ren)	\$121.89	\$121.89	\$121.89	\$121.89	
Employee + Family	\$559.35	\$559.35	\$559.35	\$559.35	
Seton Only					
Employee Only	\$35.00	\$55.00	\$80.00	\$115.00	
Employee + Spouse	\$726.05	\$726.05	\$726.05	\$726.05	
Employee + Child(ren)	\$444.20	\$444.20	\$444.20	\$444.20	
Employee + Family	\$952.62	\$952.62	\$952.62	\$952.62	
Open Access					
Employee Only	\$225.00	\$245.00	\$275.00	\$290.00	
Employee + Spouse	\$1,229.77	\$1,229.77	\$1,229.77	\$1,229.77	
Employee + Child(ren)	\$809.74	\$809.74	\$809.74	\$809.74	
Employee + Family	\$1,502.66	\$1,502.66	\$1,502.66	\$1,502.66	













DENTAL	Employee Only	Employee + child(ren)	Employee + Spouse	Family
Delta DHMO	\$16.51	\$28.34	\$29.62	\$41.48
Delta Core Option	\$25.82	\$73.57	\$71.48	\$122.04
Delta Plus Option	\$31.81	\$88.09	\$85.62	\$145.21
VISION	Employee only	Employee + child(ren)	Employee + Spouse	Family
VSP Network	\$4.87	\$10.10	\$9.73	\$16.66
CANCER	Employee only	Employee + child(ren)	Employee + Spouse	Family
Option 1	\$13.66	\$15.70	\$29.48	\$31.52
Option 2	\$23.00	\$26.50	\$49.94	\$53.44
ACCIDENT	Employee only	Employee + child(ren)	Employee + Spouse	Family
Value Plan	\$11.18	\$18.79	\$18.33	\$25.94
Advantage Plan	\$15.31	\$25.22	\$25.03	\$34.94
Premier Plan	\$19.53	\$31.49	\$31.84	\$43.80
CRITICAL ILLNESS				
Benefit Amount	Employee only	Employee + child(ren)	Employee + Spouse	Family
\$10,000	\$7.65	\$7.65	\$12.16	\$12.16

LONG TERM DISABILITY	

\$20,000

\$30,000

Elimination Period	Premium per \$100
0/3 DAYS	\$4.38
14/14 DAYS	\$3.21
30/30 DAYS	\$2.78
60/60 DAYS	\$1.83
90/90 DAYS	\$1.30
180/180 DAYS	\$0.95

\$13.92



\$13.92

SHORT TERM DISABILITY	
66.67%	\$5.85

\$21.57

\$21.57

2021 RATE CHART: 9 MONTH





MEDICAL					
HSA Seton	Salary band 1 (Under \$40K)	Salary band 2 (\$40k - \$54999k)	Salary band 3 (\$55k - \$74999k)	Salary band 4 (\$75k+)	
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	
Employee + Spouse	\$537.37	\$537.37	\$537.37	\$537.37	
Employee + Child(ren)	\$162.52	\$162.52	\$162.52	\$162.52	
Employee + Family	\$419.51	\$419.51	\$419.51	\$419.51	
Seton Only					
Employee Only	\$46.67	\$73.33	\$106.67	\$153.33	
Employee + Spouse	\$968.07	\$968.07	\$968.07	\$968.07	
Employee + Child(ren)	\$592.27	\$592.27	\$592.27	\$592.27	
Employee + Family	\$1,270.16	\$1,270.16	\$1,270.16	\$1,270.16	
Open Access					
Employee Only	\$300.00	\$326.67	\$366.67	\$386.67	
Employee + Spouse	\$1,639.69	\$1,639.69	\$1,639.69	\$1,639.69	
Employee + Child(ren)	\$1,079.65	\$1,079.65	\$1,079.65	\$1,079.65	
Employee + Family	\$2,003.55	\$2,003.55	\$2,003.55	\$2,003.55	













Elimination Period

0/3 DAYS

14/14 DAYS

30/30 DAYS

60/60 DAYS

90/90 DAYS 180/180 DAYS Premium per \$100

\$5.84

\$4.28

\$3.71

\$2.44

Employee + Child(ren)	\$1,079.65	\$1,079.65	\$1,079.65	\$1,079.65
Employee + Family	\$2,003.55	\$2,003.55	\$2,003.55	\$2,003.55
DENTAL	Employee Only	Employee + child(ren)	Employee + Spouse	Family
Delta DHMO	\$22.01	\$37.79	\$39.49	\$55.31
Delta Core Option	\$34.43	\$98.09	\$95.31	\$162.72
Delta Plus Option	\$42.41	\$117.45	\$114.16	\$193.61
VISION	Employee only	Employee + child(ren)	Employee + Spouse	Family
VSP Network	\$6.49	\$13.47	\$12.97	\$22.21
CANCER	Employee only	Employee + child(ren)	Employee + Spouse	Family
Option 1	\$18.21	\$20.93	\$39.31	\$42.03
Option 2	\$30.67	\$35.33	\$66.59	\$71.25
ACCIDENT	Employee only	Employee + child(ren)	Employee + Spouse	Family
Value Plan	\$14.91	\$25.05	\$24.44	\$34.59
Advantage Plan	\$20.41	\$33.63	\$33.37	\$46.59
Premier Plan	\$26.04	\$41.99	\$42.45	\$58.40
CRITICAL ILLNESS				
Benefit Amount	Employee only	Employee + child(ren)	Employee + Spouse	Family
\$10,000	\$10.20	\$10.20	\$16.21	\$16.21
\$20,000	\$18.56	\$18.56	\$28.76	\$28.76
\$30,000	\$26.92	\$26.92	\$41.31	\$41.31
LONG TERM DISABILITY			SHORT TERM DISABILITY	

66.67%

\$7.80

Can I get healthcare on the weekend? You bet.

Check these out these options.



GROUP/FACILITY	LOCATION(S)	PHONE NUMBER(S)	WEEKEND HOURS
RediMD Schedule a telemedi- cine appointment	Virtual connection with a doctor, even when traveling out of Austin or Texas	(281) 633-0148 First-time users must enroll online at www.redimd.com. (Code for Seton Only or Open Access plans is austinisd; code for HSA Plan is COPAY50)	Monday - Saturday: 8am - 6pm
CVS Minute Clinic	11 locations in Greater Austin. For convenience when traveling, there are 1,100+ locations nationwide.	www.cvs.com/ minuteclinic/ clinic-locator/tx/austin	Monday - Friday: 8:30am - 1:30pm 2:30pm - 7:30pm Saturday - Sunday: 9am - 1pm
			1:30pm - 5:30pm
RediClinic	Located in 10 HEB grocery stores throughout Greater	Find locations online at rediclinic.com/clinics/	Monday - Friday: 8am - 8pm
	Austin	texas/austin	Saturday - Sunday: 8am - 5pm
Seton Express Care	Westlake	(512) 324-6970	Saturday: 10am - 4pm
Clinic	Davis Lane	(512) 324-8980	Sunday: 1pm - 7pm
	Round Rock	(512) 324-4780	
		seton.net/express-care	• • • • •
Austin Regional Clinic	Austin/Far West	(512) 346-6611	Saturday: 8am - 5pm
	Round Rock	(512) 244-9024	Sunday: 8am - 5pm
	Austin/Southwest	(512) 282-8967 austinregionalclinic.com	
Premier Family	Bee Cave	(512) 358-8180	Bee Cave:
Physicians	Southwest Med Village	(512) 892-7076	Saturday: 8am - 1pm
,		pfpdocs.com	Southwest Med Village:
			Saturday: 8am – Noon
Victory Medical	Austin	(512) 462-DOCS; option 6	Austin:
	Westlake	victorymed.com	Saturday: 9am - 5pm Sunday: Noon - 5pm
			Westlake: Saturday: 9am - 5pm

If you are in doubt about the severity of your injury or illness, you should ALWAYS go to a hospital-based emergency room.





CONTACT US:

WE'RE HERE TO HELP

If you have any questions, start with the Benefits Department. We are happy to assist. Additionally, feel free to contact any of our providers directly.

AISD Benefits Department 512-414-2297 | benefits@austinisd.org | leaveoffice@austinisd.org

BENEFIT	VENDOR	PHONE NUMBER	WEBSITE
Medical #737540	aetna	888-592-3862	www.aetna.com
Prescription drugs #737540	aetna	888-592-3862	www.aetna.com
Dental DHMO #00951-001 Core #03595-001 Plus #03595-001	△ DELTA DENTAL	800-422-4234	www.deltadentalca.com
Vision #911764	VSO.	800-877-7195	www.vsp.com
Life & AD&D #151369	Sun Life Financial*	800-247-6875	www.sunlife.com/us
Short Term Disability #911763 Long Term Disability	Sun Sun Life Financial*	800-247-6875 Claims: 877-932-7287	www.sunlife.com/us
#911763 Flexible Savings Accounts	nbs	800-274-0503	https://mywealthcareonline.com/nbsbenefits/
Health Savings Accounts	hsabank own your health.	833-223-5604	myaccounts.hsabank.com
403B	TCG THESTIC CAPITAL GROUP	800-943-9179	www.tcgservices.com/enroll
457 Plans	TCG	800-943-9179	www.tcgservices.com/enroll
Cancer #530206 Accident Plans #530206 Critical Illness #530206	GUARDIAN'	800-541-7846	www.glic.com
Employee Assistance Program (EAP)	revive Autin to D SAP Parant by Calaborithmann	833-515-0762	www.reviveeap.com
Teacher Retirement System	TRS TEADURE DETERMENT CONTENT OF TREAS	800-223-8778	www.trs.texas.gov
Austin ISD Wellbeing Portal	Be Well Do Good	888.282.0822	austinis dwell being .org

