

Schenectady City School District

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Benefits Enrollment Guide



Welcome to your 2025-2026 Benefits!

As a benefit eligible employee of the Schenectady City School District, this guide provides information on available benefits and instructions for online enrollment. You are eligible for benefits within 30 days of hire, so please review the benefit options carefully. Feel free to ask any questions to ensure you make the best decisions for you and your family members. Keep in mind that unless you have a qualifying life status event (i.e. marriage, birth of a child, loss of coverage elsewhere, etc.) you will not be able to make changes to these benefits until the next Open Enrollment period. Annual Open Enrollment takes place in May and all new elections take effect on July 1st each year. This guide offers a high-level overview of your options. For detailed information please visit the SCSD Website or the Employee Navigator benefit portal to review the summary of Benefit Coverages.

Enrollment

You will elect or maintain your benefits in our online benefits portal, Employee Navigator. For new hires, the first time you visit the site, you will be required to register for an account. At Open Enrollment, employees can access the portal using their prior log in and password.

Access the website using the following link: <https://www.employee navigator.com>. This link can also be found on the Schenectady Schools website under Menu > Dept > Human Resources > Employee Benefits > Health Care Benefit Portal.

To create your account, select "Register as a new user" and enter the following information: first name, last name, the Company Identifier: **Schenectady Schools**, the last 4 digits of your SSN and your date of birth. You will then be asked to enter a username and password of your choosing. We recommend using your email address as a username, however that is not required. After agreeing to the Electronic Signature and Consent, you will see your home page. Select "Start Benefits" and follow the easy steps to electing your medical and dental benefits.

Important Notes

- **Medical** – You have the choice of two medical plan options available through Highmark Northeastern New York. This guide outlines the benefit designs of each plan. For information regarding employee payroll contributions or for a more detailed plan description, please visit the District Website or the Employee Navigator Portal.
- **Dental** – The dental coverage is directly tied to the medical plan that you select. As part of your decision-making process, you will want to consider the associated dental plan that corresponds with each medical plan. Dental plan options are offered through Delta Dental. Dental coverage is not available without enrollment in a medical plan.
- **Flexible Spending Accounts** – The annual limit is \$3,300 for the healthcare FSA and \$5,000 for the dependent care FSA for the 2025-2026 plan year. Although you are enrolling mid-year, you may elect the full amount for the remainder of the plan year.

Medical

Below is a summary of the two plans available to you. More detailed information regarding plan designs and your payroll contributions are available on the Employee Navigator Benefit Portal or via the SCSD website.

Coverage	Patriot Blue	Patriot Red
Deductible	\$0	\$0
Coinsurance	\$0	\$0
Out of Pocket Maximum	None	None
Annual Physical	Covered in Full (up to \$500 maximum)	Covered in Full
Telemedicine Consultation	\$15	\$15
Office Visit	\$15	\$15
Outpatient Surgery	\$0	\$15
Inpatient Hospitalization	\$0	\$0
Emergency Room	\$50	\$50
Emergency Transportation	\$0	\$50
Urgent Care	\$25	\$25
Prescription Drug	20% at Retail 16% at Mail	\$5/\$20/\$35 at Retail \$12.50/\$50.00/\$87.50 Mail
Out of Network	Deductible: Single \$200 Family \$400 20% coinsurance after deductible	No Coverage Out of Network

SCSD believes that these Plans are “grandfathered health plans” under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your [plan or policy] may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Medical Plan Network:

In order to avoid unexpected costs, it is important to know if the providers and facilities that you and your family members frequent are participating with Highmark of Northeastern NY:

- The Patriot Blue plan has both in and out of network benefits (only in network benefits are referenced in the chart above). While you will pay less if you stay in network for all services, you will have coverage should you select a provider who does not participate in the Highmark network.
- The Patriot Red plan is an Exclusive Provider Organization (EPO) plan which means that **you will only have coverage when you utilize in-network providers or facilities.**
- To review the network of providers, please refer to the following website to check if your providers are participating:
<https://www.highmarkblueshield.com/login/#/find-a-doctor>

Telemedicine:

Telemedicine offers members 24/7/365 access to telehealth consults via phone or online video, whenever you need it and from wherever you are, at the cost of your office visit copay. By using telemedicine instead of more expensive Urgent Care and ER visits, you can save time and money. To get started, download the My Highmark app, or visit www.MyHighmark.com to schedule an appointment for urgent care, therapy or psychiatry.

Prescription Drug Coverage

Your prescription drug coverage is with Express Scripts. It is easy to access and manage your prescription plan anytime anywhere by visiting their website at www.express-scripts.com or downloading their free Express Scripts mobile app.

Vision

Vision coverage is included in your medical plan election. The premiums for the two medical plans include the cost of the vision benefit. There is not a separate ID card for vision, members can use their Highmark ID card.

<i>Medical Plan</i>	<i>Patriot Blue</i>	<i>Patriot Red</i>
Carrier	Davis Vision	Davis Vision
In Network Eye Exam	\$15 Every 12 Months	\$15 Every 24 Months
In Network Frames, Lenses, Contact Lenses	Frames \$20 Copay, Contact Lenses \$45 Copay	Frames \$100 Limit 20% Discount on overage, Contact Lenses \$125 Limit Lenses limited to basic plastic lenses Every 24 Months
Out of Network Eye Exam	\$35 Allowance After Medical Deductible	Not covered out of network
Out of Network Frames, Lenses, Contact Lenses	Frames \$35 Allowance After Deductible, Contacts \$90 Allowance After Deductible	Not covered out of network

Dental

The dental plans available are offered through Delta Dental and are paired with your medical coverage for most employees*. This means that if you select the Patriot Red Medical Plan, you will automatically be enrolled in the Patriot Red Dental Plan. The same applies to the Patriot Blue Plan. Below are the highlights of each dental plan.

Patriot Blue Dental			Patriot Red Dental	
Carrier	Delta Dental		Delta Dental	
	In Network	Out of Network	In Network	Out of Network
Preventive Care	20%		100%	100%
Basic Care	20%		20%	50%
Major Care	20%		50%	25%
Deductible	None	Single \$200 Family \$400	None	None
Annual Maximum	None		\$2,000 per member	
Out of network claims are based on Delta Dental's allowed amount for each covered service. Orthodontia is not covered on the dental plans.				

*Unless specified otherwise in your bargaining unit contract.

Wellness Programs

Highmark provides a selection of opportunities to help facilitate a healthier lifestyle at no cost to you as a health plan member. Please review and take advantage of the options highlighted below:

- Wellness coaching on a variety of topics such as stress reduction, family planning, nutrition and weight management, tobacco cessation, and supplemental dental hygiene. Call 1-800-650-8442 Monday-Friday 830a-730p EST to speak with a trained wellness professional.
- Diabetes Prevention Program is a CDC certified coaching program for prevention of type 2 diabetes. You can see if you qualify by visiting www.MyHighmark.com.
- Blue365 program offers members savings on a variety of health and wellness related products and services like gym memberships, vision services, and hearing aids. Register online using your Highmark member ID at www.Blue365deals.com.
- Baby BluePrints is a free online program that provides educational information and individualized support with a medical specialist to help you in all aspects of your pregnancy journey. Register online.
- MyHighmark App is free to download and obtain more detailed information about all of the above programs and more at no cost to you. You can find specific information about your personal wellbeing right at your fingertips.
- **Mental Wellness** by *Spring Health* and **Well360 Diabetes Management** by *Onduo*: the district has partnered with these two platforms to take your healthcare to the next level! Contact HR to register.

Health Care and Dependent Care Flexible Spending Accounts

You have the opportunity to set aside pre-tax funds through a Flexible Spending Account (FSA). Your FSA lets you save a portion of your income each year without paying tax on it (that's the same as earning an extra 30% on that money!) to pay for qualified healthcare and/or dependent care expenses. Flexible Spending Accounts are solely funded by your contributions. There are two distinct types of accounts, and the funds cannot be moved from one account to the other. Below is a description of the two accounts.

The plan year for the FSA program runs from July 1 to June 30. Any elections made midyear will be for the remainder of the current plan year. You must re-enroll each year to receive this benefit. Keep in mind the timing of this renewal when making your elections as the FSA is a "use it or lose it" benefit meaning that if you have elected more than you have eligible expenses to use the funds for, you will lose any remainder at the end of the plan year.

Healthcare Flexible Spending Account

Eligible expenses are those that are not fully paid by your medical, dental or prescription drug plan including copays, prescriptions, glasses, etc. You may set aside up to \$3,300 pre-tax dollars per year for both you and your eligible dependents for these out-of-pocket expenses. You and your dependents do not need to be enrolled in the health insurance to participate in the FSA.

<i>Flexible Spending Account (FSA) Savings Example</i>		
Pre-Tax Income	\$38,000	\$38,000
FSA Contribution	\$0	-\$500
Taxable Income	\$38,000	\$37,500
Federal, State & FICA Taxes (26.65%)	-\$10,127	-\$9,994
Out of Pocket Medical Expenses	-\$500	\$0
Take-Home Income	\$27,373	\$27,506
<i>*Illustration is just an example. Incomes, contributions, and taxes will vary by individual and state.</i>		

Another plus of the SCSD FSA is the availability of a debit card through our vendor, *Flexible Benefit Administrators, Inc.* This card may be used to access your account funds, making it convenient to fill prescriptions and pay copays at physician offices. In addition, the debit card is “front loaded,” which means that you choose the amount you will save each year, and that total amount is available to you at the start of the year, but your payroll deductions will be spread out equally over the course of the entire plan year.

Dependent Care Flexible Spending Account

Eligible expenses include dependent care expenses for any dependent children (as defined by the IRS) less than 13 years of age, or an adult dependent who is disabled, or unable to care for themselves and spends at least 8 hours per day in your home. You may set aside up to \$5,000 pre-tax dollars per year for any eligible child or adult care expenses. Dependent Care Accounts are not front loaded, and the funds are available to you only once they accumulate in your account.

Employee Assistance Program

The Schenectady City School District is pleased to offer all employees and dependents access to an Employee Assistance Program (EAP) through Educators' EAP. The Educators' Employee Assistance Program is a benefit provided not only to you but also to your spouse/domestic partner and children (up to age 26). With a single call and at no cost to you, Educators' EAP can offer you support, counseling, advice and assistance managing the events that affect your health and happiness at both work and in the home.

Here are some of the reasons individuals call Educators' EAP:

<i>Counseling</i>	<i>Work –Life Balance</i>	<i>Family Support</i>
Stress Management	Interpersonal Skills	Financial Advice
Depression	Professional Development	Legal Advice
Substance Abuse	Work-place Stress	Marriage Counseling
Emotional Support	Workshops and Training	Aging Parents
Health and Wellness	Work Relationship Issues	Births, Deaths, and Accidents
Fear and Anxiety	Manager Issues	Grief and Loss

The easiest way to get started and view all the Educators' EAP benefits available to you is by going online to www.EducatorsEAP.com or by calling 1-800-252-4555. To schedule an in person or telephonic visit you can either call the number above or go on the website, but you will need to register. To register online, you will click on the Member Log in tab; this will take you to the section to register. You will fill in all the prompts to register and continue.

This benefit is completely confidential. No information regarding sessions or even who is using the benefit is provided to the School District. We encourage you to take advantage of this no cost confidential benefit!

Benefit Questions

For assistance with any benefit questions, please reach out to our consultants at USI Insurance Services:

<i>Questions</i>	<i>Email</i>	<i>Phone</i>
Benefit Resource Center	brceast@usi.com	1-855-874-6699
Dawn Sylofski, USI Team Leader	scsdbenefits@usi.com	1-518-514-3624