



# Saint Louis Public Schools Enrollment Information

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This brochure summarizes the benefit plans that are available to St. Louis Public Schools eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. These documents are available upon request through the Human Resources Department. Information provided in this brochure is not a guarantee of benefits.

# A Message from St. Louis Public Schools

Welcome to your 2024 employee benefits guide. In these pages, you'll learn about the St. Louis Public Schools benefits program, which is designed to help you stay healthy, secure, and maintain a work/life balance. Offering a competitive benefits package is just one way we strive to provide our employees with a rewarding workplace. Please read the information in this guide carefully, and for full details about our plans, refer to each plan's summary plan description.



## 2024 Benefit Plan Highlights

- St. Louis Public Schools will continue to offer 3 medical plans from United Healthcare
- There will be no carrier changes for the 2024 plan year

## Who is Eligible?

You can participate in the SLPS Benefits Plan if you are an eligible employee. Employees working at least 30 hours or more a week and eligible dependents may participate in the benefit program.

Generally, for the St. Louis Public Schools benefits program, dependents are defined as:

- Legal Spouse (unless legally separated)
- Dependent children until the end of the month in which he or she reaches 26
- The term child includes any of the following: A natural child, stepchild, legally adopted child, child placed for adoption

## When and How Can I Enroll?

Myslpsbenefits.com is the enrollment website. New users must register for a username and password.

All eligible employees are required to complete the enrollment process.

## When is Coverage Effective?

For existing employees, the effective date for your benefits is January 1, 2024.

New employees will be effective on the first of the month following your start date.

## Changing Coverage During the Year

You can change coverage during the year only when you experience a qualifying life event, such as marriage, divorce, birth, adoption, placement for adoption, or loss of coverage. The change must be reported to the Human Resources Department within 30 days of the event. The change must be consistent with the event.

*For questions about your benefits or enrollment options, contact the SLPS Benefits Call Center at 1-888-715-1914. Their hours of operation are Monday-Friday 7 am to 7 pm central time.*



## Medical Insurance

St. Louis Public Schools will continue to offer medical coverage through UnitedHealthcare. Below is a brief outline of the plan. Please refer to the summary plan description for complete plan details.

	UnitedHealthcare Insurance Company Base Plan Group # 909205		UnitedHealthcare Insurance Company Buy up 1 Plan Group # 909205		UnitedHealthcare Insurance Company Buy up 2 Plan Group # 909205	
	In-Network Benefits	Out-of-Network Benefits	In-Network Benefits	Out-of-Network Benefits	In-Network Benefits	Out-of-Network Benefits
<b>Annual Deductible</b>						
Individual	\$1,500	\$2,000	\$500	\$1,000	\$200	\$400
Family	\$3,000	\$4,000	\$1,000	\$2,000	\$400	\$800
Coinsurance	30%	40%	20%	30%	10%	30%
<b>Maximum Out-of-Pocket</b>						
Individual	\$4,000	\$7,000	\$3,500	\$7,000	\$1,400	\$2,800
Family	\$8,000	\$14,000	\$7,000	\$14,000	\$2,800	\$5,600
<b>Physician Office Visit</b>						
Primary Care	\$25 copay	40% after deductible	\$25 copay	30% after deductible	\$15 copay	30% after deductible
Specialty Care	\$35 copay	40% after deductible	\$35 copay	30% after deductible	\$30 copay	30% after deductible
<b>Preventive Care</b>						
Adult Periodic Exams	100%	40% after deductible	100%	30% after deductible	100%	30% after deductible
Well-Child Care	100%	40% after deductible	100%	30% after deductible	100%	30% after deductible
<b>Diagnostic Services</b>						
X-ray and Lab Tests	Lab testing: designated network: No Charge Network: 30% XRray/Diagnostic: no charge	40% after deductible	Lab testing: designated network: No Charge Network: 20% XRray/Diagnostic: no charge	30% after deductible	Lab testing: designated network: No Charge Network: 10% XRray/Diagnostic: no charge	30% after deductible
Complex Radiology	30% after deductible	40% after deductible	20% after deductible	30% after deductible	10% after deductible	30% after deductible
Urgent Care Facility	\$40 copay per visit	40% after deductible	\$40 copay per visit	30% after deductible	\$40 copay per visit	30% after deductible
Emergency Room Facility Charges	\$250 copay per visit	\$250 copay per visit	\$250 copay per visit	\$250 copay per visit	\$150 copay per visit	\$150 copay per visit
Inpatient Facility Charges	30% after deductible	40% after deductible	20% after deductible	30% after deductible	10% after deductible	30% after deductible
Outpatient Facility and Surgical Charges	\$25 copay per visit	40% after deductible	\$25 copay per visit	30% after deductible	\$15 copay per visit	30% after deductible
<b>Mental Health</b>						
Inpatient	30% after deductible	40% after deductible	20% after deductible	30% after deductible	10% after deductible	30% after deductible
Outpatient	\$25 copay per visit	40% after deductible	\$25 copay per visit	30% after deductible	\$15 copay per visit	30% after deductible
<b>Substance Abuse</b>						
Inpatient	30% after deductible	40% after deductible	20% after deductible	30% after deductible	10% after deductible	30% after deductible
Outpatient	\$25 copay per visit	40% after deductible	\$25 copay per visit	30% after deductible	\$15 copay per visit	30% after deductible

# Prescription Drug Benefits

The cost of prescription drugs is increasing rapidly - resulting in higher expenses for the district. Using your prescription drug benefit effectively by requesting generic drugs will help both you and the district manage expenses. The prescription drug program is self-funded by the district and currently administered by Express Scripts.

Prescription drugs are available to you for a co-payment that is dependent on the retail cost to the plan. This allows you and your physician to research the cost of various drugs that may be of benefit to you and determine the cost of the various drug options available to you.

The chart below compares your prescription drug benefits under the UnitedHealthcare Base and Buy Up plan options.

	Base Plan	Buy Up Plan 1	Buy Up Plan 2
<b>Prescription Drugs</b>			
Copay at Participating Pharmacies			
Tier 1*	\$10 copay for a 30-day supply that cost up to \$40	\$10 copay for a 30-day supply that cost up to \$40	\$10 copay for a 30-day supply that cost up to \$40
Tier 2	\$25 copay for 30-day supply that cost between \$40-\$80	\$25 copay for a 30-day supply that cost between \$40-\$80	\$20 copay for a 30-day supply that cost between \$40-\$80
Tier 3	\$40 copay for 30-day supply that cost more than \$80	\$40 copay for the 30-day supply that cost more than \$80	\$40 copay for the 30-day supply that cost more than \$80
<b>*If the cost is less than the \$10 copay, then you pay the lesser amount</b>			
Copay for 83 days (3 months)			
Tier 1	Medication that costs up to \$80 will have a \$20 copay	Medication that costs up to \$80 will have a \$20 copay	Medication that costs up to \$80 will have a \$20 copay
Tier 2	Medication that cost between \$80-\$160 will have a \$50 copay	Medication that cost between \$80-\$160 will have a \$50 copay	Medication that cost between \$80-\$160 will have a \$40 copay
Tier 3	Medication that costs more than \$160 will have a \$80 copay	Medication that costs more than \$160 will have a \$80 copay	Medication that costs more than \$160 will have a \$80 copay

## Added Benefits:

The prescription drug plan will provide for a voluntary prescription drug savings program that allows members the option of replacing high cost brand drugs with over the counter (OTC) and generic alternatives.

The OTC program will cover over-the-counter equivalents of high cost and highly utilized drugs in the following three drug classes: PPIs (acid reducers, e.g., "Nexium"); NSAIDs (non-steroidal anti-inflammatory drugs, e.g., "Celebrex"); and Antihistamines (e.g., brand drug Clarinex; OTC drug Claritin). The program will feature a zero (\$0) co-pay for members able to use an OTC alternative with a physician's prescription.

# MY UHC



## A health plan that's always with you

Digital tools to keep you connected

### Get the most out of your benefits

Register for your personalized website on [myuhc.com](http://myuhc.com)® and download the UnitedHealthcare® app. These digital tools are designed to help you understand your benefits and make informed decisions about your care.

- Find care and compare costs for providers and services in your network
- Check your plan balances, view your claims and access your health plan ID card
- Access wellness programs and view clinical recommendations
- 24/7 Virtual Visits – Connect with providers by phone or video\* to discuss common medical conditions and get prescriptions,\*\* if needed
- View your health care financial account(s) such as HSA, FSA or HRA
- Compare prescription costs and order refills



#### Download the app

Available for iPhone and Android

### Register today



Scan the QR code or go to [myuhc.com](http://myuhc.com) and click **Register Now**  
See next page for registration steps

## How to register

- 1 Go to [myuhc.com](http://myuhc.com) or download the UnitedHealthcare app and click **Register Now**
- 2 Complete the required fields and create your username/password
- 3 Enter your contact information and security questions
- 4 Agree to the terms and conditions and select your email preferences
- 5 Go paperless—from your account settings, choose paperless in your communication preferences



### Go paperless

- Less paper, less clutter
- Get your required communications online

# Dental Insurance

St. Louis Public Schools will continue to offer dental insurance through Delta Dental of MO.



	Delta Dental Insurance Company Delta Dental Plan Group # 9186-0000		
	PPO	Premier	Out Of Network
<b>Annual Deductible</b>			
Individual	\$0	\$100	\$100
Family	\$0	\$300	\$300
Waived for Preventive Care?	Yes	Yes	Yes
<b>Annual Maximum</b>			
Per Person / Family	\$2,500	\$1,500	\$1,000
Preventive	100%	90%	70%
Basic	80%	60%	50%
Major	50%	40%	20%
<b>Orthodontia</b>			
Benefit Percentage	50%	50%	50%
Adults (and Covered Full-Time Students, if Eligible)	Covered	Covered	Covered
Dependent Child(ren)	Covered Up to age 26	Covered Up to age 26	Covered Up to age 26
Lifetime Maximum	\$1,000	\$1,000	\$1,000
Benefit Waiting Periods	None	None	None

## PPO Network Dentists

Accept lower fee allowances and do not bill the patient for amounts over the PPO fee allowance - your out-of-pocket  
 Will not bill patients for certain services that are considered a component of a standard procedure- saving you money.  
 Under contract to file claims for Delta Dental patients - saving you time.  
 Will only charge for deductibles, coinsurance, and any non-covered services.  
 Benefit payments are made directly to PPO network dentists.

## Premier Network Dentists

Accept the Premier network contracted allowance and do not bill the patient for amounts over the contracted allowance - your out-of-pocket costs may be less.  
 Will not bill patients for certain services that are considered a component of a standard procedure- saving you money.  
 Under contract to file claims for Delta Dental patients- saving you time.  
 Will only charge for deductibles, coinsurance, and any non-covered services.  
 Benefit payments are made directly to Premier network dentists.

## Dentists not in a Delta Dental Network

Are reimbursed up to the allowed amount of what dentist's charge in the same geographic area and with the same  
 Bill the patient for ALL amounts not covered by the plan.  
 Are not under contract to file claims for the patient.  
 Benefit payments for non-network dentists are made to the member.

## Delta Dental Portal

### 24/7 Online access to benefits and service

#### Register today

Visit [DeltaDentalMO.com/Members/Register](http://DeltaDentalMO.com/Members/Register) to receive electronic delivery of your benefit information. Once registered, log into your account online or with the Delta Dental mobile app.



#### You have access to important plan information

- Review and print your dental plan's coverage levels, deductibles, maximums, age limits and limitations
- Verify your eligibility
- Request or download a claim form
- Order or print an ID card
- View your Explanation of Benefits (EOB)
- Get answers to frequently asked questions



#### Log in to view your benefits

Visit [www.DeltaDentalMO.com](http://www.DeltaDentalMO.com), and click on one of the **Member** or **Sign In** links. To register, follow the steps under **Member Sign In**.



#### Customer service

We are here to help every Monday through Friday from 7 am to 5 pm CT.

- **800-335-8266**
- **[Service@DeltaDentalMO.com](mailto:Service@DeltaDentalMO.com)**

## We make finding a dentist easy

Finding a dentist is easy using any of the methods below.



#### Online

Visit [DeltaDentalMO.com](http://DeltaDentalMO.com) and click on "Find a Dentist"



#### Mobile app

To download, visit the App Store (Apple) or Google Play (Android) and search for Delta Dental.



#### Customer service

Our customer care team can assist via phone at 800-335-8266 or via email at [service@deltadentalmo.com](mailto:service@deltadentalmo.com).





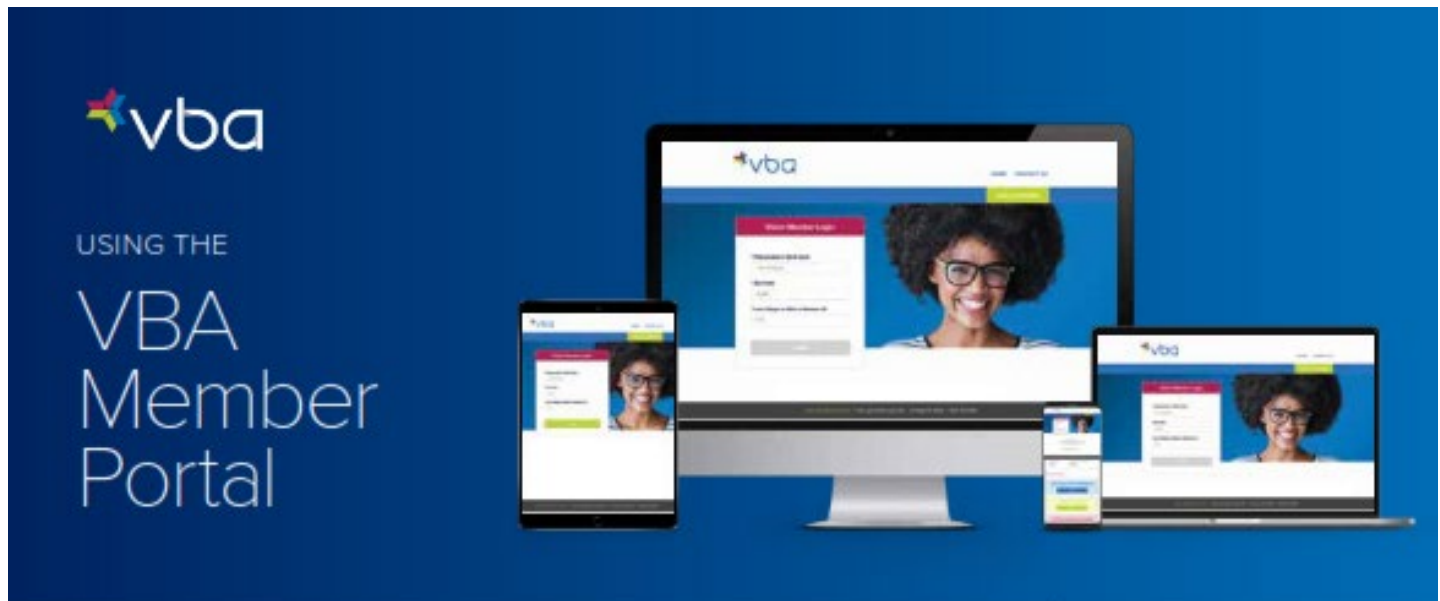
## Vision Insurance

St. Louis Public Schools provides vision insurance through Vision Benefits of America.

	Base Plan In Network Group #670	Base Plan Out of Network	Buy Up In Network Group #3485	Buy Up Out of Network
<b>Copay</b>				
Routine Exams (Annual)	\$10 copay	Up to \$36	\$10 copay	Up to \$36
<b>Vision Materials</b>				
Materials Copay	\$10 copay	See Below	\$10 copay	See Below
<b>Lenses</b> <ul style="list-style-type: none"> <li>• Single</li> <li>• Bifocal</li> <li>• Trifocal</li> <li>• Basic Progressives</li> <li>• Lenticular</li> <li>• Polycarbonate (only 100% covered to age 19)</li> </ul>	Covered 100% every 24 months	Upto \$28 Up to \$45 Up to \$56 Up to \$56 Up to \$80 N/A	Covered 100% every 12 months	Up to \$28 Up to \$45 Up to \$56 Up to \$56 Up to \$80 N/A
<b>Contacts</b> Covered in lieu of frames	Elective contacts covered up to \$105 every 24 months Medically necessary 100%	Elective contacts up to \$105 every 24 months Medically necessary up to \$210	Elective contacts covered up to \$130 every 12 months Medically necessary 100%	Elective contacts covered up to \$130 every 12 months Medically necessary up to \$210
<b>Frames</b>	Up to \$40 wholesale Approximately \$100-\$120 retail	Up to \$45	Up to \$50 wholesale Approximately \$125-\$150 retail	Up to \$45

\*\*ID cards are not mailed automatically. They can be printed online or from the app.

# Vision Benefits of America Portal



## VBA's Easy-to-Use Member Portal

At VBA, we strive to make things as simple as possible for our members. Our focus is always on you, which you'll see in every aspect of our mobile-friendly member portal. You can:

- Find in-network providers
- Chat online with customer service representatives
- Print ID cards
- Download Explanation of Benefits statements
- Submit out-of-network claims

## Accessing the VBA Member Portal

- 1 Go to [VBAplans.com](http://VBAplans.com) and click Login from the menu.
- 2 Select Vision and Member options and click Sign In.
- 3 Enter the policyholder's birth date, zip code and last 4 digits of SSN or Member ID and click Login.
- 4 Access your and your covered dependents' benefits and claims information, chat with us, find a provider, print an ID card, access Explanation of Benefits (EOBs) and upload out-of-network claim forms.

## We're here to answer your questions.

Our customer care representatives are available by phone Monday through Friday 8:30 AM - 6:00 PM ET by calling 1-800-432-4966.

## Did You Know?



A member card is not necessary to access your benefits. You can print your VBA member card so that you have all of your plan information handy whenever you visit your doctor's office.



You can use our online Provider Finder to search for doctors in the VBA Network.



Always confirm eligibility through the Member Portal before receiving services or purchasing materials.

## Basic and Voluntary Life

St. Louis Public Schools provides Basic Life and A&D benefits to eligible employees through New York Life. Be sure to designate a beneficiary for your life insurance benefit.

Employee Basic Life	Eligibility	All Active Full-Time Employees
	Life and AD&D Benefit	\$40,000
	Guarantee Issue during initial enrollment	\$40,000
Employee Supplemental Life	Eligibility - Supplemental Life Employee and Dependent	All Active Full-Time Employees
	Life Benefit	\$5,000; \$10,000; \$20,000; \$50,000; \$75,000; \$100,000; \$125,000; \$150,000; or \$200,000
	Guarantee Issue during initial enrollment	\$200,000
Employee Coverage Provisions	Benefit Reduction	No age reductions Coverage ceases at retirement
	Accelerated Death Benefit	Up to 75% of life benefit not to exceed \$225,000 is payable if life expectancy is 12 months or less
	Waiver of Premium	After premiums have been waived for 12 months, they will be waived for future periods of 12 months if you remain disabled.
	Portability	If you are separated from the district, you can continue your life insurance with the carrier on a direct-bill basis.
Dependent	Spouse Life Benefit	\$10,000 to \$100,000 in increments of \$10,000 not to exceed 50% of employee's supplemental life amount. (Example: If employee elects \$20,000, the Spouse cannot elect more than \$10,000). <b>Your spouse is only eligible for this benefit until they attain age 70.</b>
	Child Life Benefit (14 days of age to age 26)	\$5,000; \$7,500; or up \$10,000
	Guarantee Issue during initial enrollment	Spouse: \$20,000 Child(ren): up to \$10,000
	Portability	If you are separated from the district, you can continue your life insurance with the carrier on a direct-bill basis.

## Long and Short Term Disability

Saint Louis Public Schools offers both Long and Short Term disability with New York Life at no cost to you. Disability insurance can pay you benefits if you suffer a covered disability. Think of it as insurance for a portion of your paycheck. Payments may come directly to you or someone you designate and can help pay for things like groceries, mortgage payments, utilities, and medical bills.

Long Term Disability	
Benefit Waiting Period	180 days
Maximum Benefit Period	Social Security Normal Retirement Age
Maximum Weekly Benefit	\$10,000

Short Term Disability	
Benefit Waiting Period	For accident – 30 days For Sickness – 30 days
Maximum Benefit Period	25 Weeks
Maximum Weekly Benefit	\$2,308

## How to file your disability claim.

### 1 BEFORE YOU FILE YOUR CLAIM

1. Notify your employer if you need to be out of work because of an illness, injury or pregnancy.
2. Have the following on hand:
  - Your Social Security number, birth date, home address, phone number and email address.
  - Dates and contact information for any health care providers or hospital/clinic visits.
  - Applicable workers' compensation claims.

### 2 FILE YOUR CLAIM

Choose **one** of the following:

**Online\*:** [Newyorklife.com/group-benefit-solutions/forms](http://Newyorklife.com/group-benefit-solutions/forms) – complete the form and submit online.

**By phone:** (888) 842-4462 or (866) 562-8421 (español), 7:00 am – 7:00 pm CST and a representative will help you.

**By mail or fax:** Visit [Newyorklife.com/group-benefit-solutions/forms](http://Newyorklife.com/group-benefit-solutions/forms) (to complete form, sign and send to New York Life Group Benefit Solutions (NYL GBS).

**To quickly stay informed, sign up for text notifications when submitting your claim online or telling your your NYL GBS claim manager.**

### 3 GIVE PERMISSION

Give NYL GBS permission to contact your health care provider or employer for claim-related information by:

- Answering "yes" during your claim call.

### 4 CLAIM STATUS

- Login or register on [myNYLGBS.com](http://myNYLGBS.com).
- If you signed up for text notifications, you'll automatically get updates by text.
- Contact your claim manager or call (888) 842-4462 or (866) 562-8421 (español), 7:00 am – 7:00 pm CST.

### 5 ADDITIONAL RESOURCES

- Chat live with a NYL GBS representative on [myNYLGBS.com](http://myNYLGBS.com).
- [Click here](#) for answers to frequently asked leave questions.



If you haven't visited [myNYLGBS.com](http://myNYLGBS.com), register today to easily manage all your claims in one place.



While you're out on disability, keep your employer informed of your return-to-work plans. This is especially important if you need workplace accommodations, as some take time to put in place.

## Flexible Spending Accounts

Under the Flexible Spending Account (FSA) Plan. You may elect to set aside pre-tax dollars to pay for certain benefit expenses – Healthcare Reimbursement (Healthcare FSA) and/or Dependent Care Reimbursement (Dependent Care FSA). This plan helps you because the benefits expenses you elect are nontaxable, which means that:

- Pre-tax contributions are withheld from your gross income before any applicable federal, state, and local taxes have been deducted.
- You save social security and income taxes on the amount of your salary that you contribute to the plan. As a participant in the FSA plan, pre-tax contributions are deducted from each paycheck (24 deductions for 12 month employees and 20 deductions for non – 12 month employees) for the upcoming plan year. These deductions will appear as a credit to your FSA. As you incur eligible expenses, you will submit a claim form to be reimbursed from your account.

### Healthcare FSA

The Healthcare FSA is a way for you to pay with tax-free dollars for many of your health-related out-of-pocket expenses that are not covered or fully reimbursable under your medical plan. Examples of expenses for which you may be reimbursed are those that incurred for physician office copays, prescription copays, vision care expenses, and even over the counter drugs and medicine.

However, federal regulations do not allow any insurance premiums, warranties, service contracts, or long-term care expenses under this plan.

Debit cards are issues, and direct deposit is available for paper and online claims.

### Dependent Care FSA

The dependent care FSA allows you to pay for qualifying dependent care expenses with tax-free dollars for eligible reimbursable dependent care expenses. Qualifying dependent care expenses are those expenses that you incur in order for you and your spouse to work or look for work during your period of coverage.

Direct deposit is available for paper claims.

#### **Dependent care expenses are limited to:**

- Care for dependent children under age 13, who have the same principal place of abode as you and who do not provide over half of their own support.
- A spouse or a dependent who is physically or mentally incapable of caring for themselves, for whom the participant provides over one-half of the individual's support for the year, and whose gross income is less than the federal income tax exemption amount (currently \$3,200)

**Note:** there is a special rule for children of divorces parents. Dependent care expenses are limited to those of the parent with whom the child resides with the longest during the year.

**You may contribute up to \$3,200 annually to your healthcare FSA and \$5,000 for the dependent care FSA (or \$2,500 if married filing separately) per calendar year.**

**Your FSA and DCFSA are administered through Benefits Solver.**

## Employee Assistance Program (EAP)

Saint Louis Public Schools provides two different EAP options for Employees to utilize. One through Optum and another through New York Life. Employees are eligible to use both EAP Programs.

### Optum EAP

- Face- to Face & Virtual Counseling Visits
- Financial Coaching from experts
- Legal Counseling
- Online EAP clinician visit
- Digital self-care tools
- Talkspace

### New York Life EAP

- Employee assistance and wellness support
  - Three face-to-face counseling sessions for a broad range of issues including stress, anxiety, depression, dealing with grief and loss, assistance with child or elder care concerns, substance abuse
- Financial, legal, and estate planning
  - Unlimited financial guidance for customers and their household members from qualified experts
  - Interactive tools, calculators, and in-depth financial assistance online
  - Referrals to local attorneys for a free 30-minute consultation and a 25% reduction in fees later
- Legal counseling and mediation support
- Health care support
- Secure travel
  - Medical evacuation services
  - 24-hour multi-lingual assistance
  - Pre-departure services
  - Assistance with loss or stolen items
  - Prescription drug refills
- Survivor assistance
  - A welcome kit and a free, interest-bearing account for their proceeds
  - NYL Life Assistance Program for grief counseling
  - My secure advantage financial wellness programs

## Optum EAP

### Calm, cool and collected on the outside. Inside is another story.

No matter how you're feeling, you put on a good face for others. But oftentimes there are other emotions behind that facade. For those times, your Employee Assistance Program is available to help. It's a personal support service that can assist you with a range of needs. With a little relief, the self you show can be a lot closer to how you really feel.

**Connect with your Employee Assistance Program.**

**24/7. Confidential. No cost to you.**



### When life is throwing a lot at you, connect with someone who can help.

Experienced consultants are available 24/7 for support, guidance and resources to help you navigate small questions and big problems related to a range of issues, including:

- ▶ Relationship problems
- ▶ Workplace conflicts
- ▶ Parenting and family issues
- ▶ Stress, anxiety and depression
- ▶ Elder care support
- ▶ Legal and financial concerns

EAP provides up to 3 sessions with an experienced consultant for each issue or problem at no cost to you, and the benefit renews each calendar year. We're here to help you and your family get the most out of life.

**Connect with your Employee Assistance Program.**

**24/7. Confidential. No cost to you.**

#### Call

800-622-7276

**Visit [Liveandworkwell.com](https://liveandworkwell.com)**

Enter company access code: SAINTLOUIS

# New York Life EAP

Putting Benefits To Work For People<sup>SM</sup>

## Counseling and wellbeing support.

Help for everyday challenges.



Personal setbacks, emotional conflicts, or just the demands of daily life can affect your work, health, and family. When life's challenges become overwhelming or you need additional support, you and your family members have someone to talk to.

### Counseling sessions – caring guidance for personal concerns

- › Three face-to-face, confidential counseling sessions per issue per year
- › Solution-focused therapy across full spectrum of emotional health issues – anxiety, depression, grief, stress, relationships, etc
- › Highly experienced and qualified providers; master's-level and Ph.D.-level degrees
- › Referrals to comprehensive legal, financial, and work-life support and resources

### Well-being coaching sessions – preventative and holistic support

Five coaching sessions by phone or virtually, with one of our behavioral change specialists to provide support with life stressors, transitions, and everyday challenges such as:

- › Burnout
- › Developing self-compassion
- › Dealing with competing priorities by phone or virtually
- › Time management

#### Contact Info



Phone: (800) 344-9752



Website: [guidanceresources.com](https://guidanceresources.com)  
Registration Web ID: NYLGBS

These programs are NOT insurance and do not provide reimbursement for financial losses. Some restrictions may apply. Customers are required to pay the entire discounted charge for any discounted products or services available through these programs. Some services are available at the option of the employer for an additional cost. Programs are provided through third party vendors who are solely responsible for their products and services. Full terms, conditions and exclusions are contained in the applicable client program description and are subject to change. Program availability may vary by plan type and location and are not available where prohibited by law. These programs are not available under policies issued by New York Life Group Insurance Company of NY. Services are provided exclusively by ComPsych<sup>®</sup> effective January 1, 2023. ComPsych is solely responsible for its services and is not affiliated with New York Life Insurance Company or any of its affiliates.

GuidanceResources is a registered trademark of ComPsych Corporation.

All programs are effective for the member/participant on the first day of coverage

New York Life Group Benefit Solutions products and services are provided by Life Insurance Company of North America or New York Life Group Insurance Company of NY, subsidiaries of New York Life Insurance Company. Life Insurance Company of North America is not authorized in NY and does not conduct business in NY.

New York Life Insurance Company, 51 Madison Avenue, New York, NY 10010

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GROUP BENEFIT  
SOLUTIONS



## 2024 Employee Benefits Plan Year - Cost of Coverage

2024 Employee Benefit Plan Year			
	Monthly Premium	12 Month	Non 12 Month
		24 pay periods	20 pay periods
<b>United Healthcare Base Plan (\$1,500 Deductible)</b>			
<b>Employee Only</b>	<b>\$864.79 (Paid by SLPS)</b>	<b>\$432.40 (Paid by SLPS)</b>	<b>\$518.87 (Paid by SLPS)</b>
Spouse	\$735.07	\$367.54	\$441.04
Child (ren)	\$423.75	\$211.88	\$254.25
Spouse & Child(ren)	\$981.67	\$490.84	\$589.00
<b>United Healthcare Buy Up Plan 1 * (\$500 Deductible)</b>			
<b>Paid by SLPS (same as Base)</b>	<b>\$864.79 (Paid by SLPS)</b>	<b>\$432.40 (Paid by SLPS)</b>	<b>\$518.87 (Paid by SLPS)</b>
Employee	\$57.38	\$28.69	\$34.43
Spouse	\$841.22	\$420.61	\$504.73
Child(ren)	\$509.25	\$254.63	\$305.55
Spouse & Child(ren)	\$1,103.88	\$551.94	\$662.33
<b>United Healthcare Buy Up Plan 2 * (\$200 Deductible)</b>			
<b>Paid by SLPS (same as Base)</b>	<b>\$864.79 (Paid by SLPS)</b>	<b>\$432.40 (Paid by SLPS)</b>	<b>\$518.87 (Paid by SLPS)</b>
Employee	\$176.88	\$88.44	\$106.13
Spouse	\$1062.30	\$531.15	\$637.38
Child(ren)	\$687.29	\$343.65	\$412.37
Spouse & Child(ren)	\$1,358.44	\$679.22	\$815.06

	Monthly Premium	12 Month	Non 12 Month
		24 pay periods	20 pay periods
<b>Delta Dental</b>			
<b>Employee Only</b>	<b>\$24.73 (Paid by SLPS)</b>	<b>\$12.37 (Paid by SLPS)</b>	<b>\$ 14.84 (Paid by SLPS)</b>
Spouse	\$25.94	\$12.97	\$15.56
Child(ren)	\$38.25	\$19.13	\$22.95
Spouse & Child(ren)	\$60.30	\$30.15	\$36.18

	Monthly Premium	12 Month	Non 12 Month
		24 pay periods	20 pay periods
<b>Vision Benefits of America</b>			
<b>Employee Only</b>	<b>\$1.38 (Paid by SLPS)</b>	<b>\$0.69 (Paid by SLPS)</b>	<b>\$0.83 (Paid by SLPS)</b>
Employee + 1	\$2.10	\$1.05	\$1.26
Employee + 2 or more	\$3.57	\$1.79	\$2.14
<b>Vision Benefits of America Buy Up Plan **</b>			
<b>Paid by SLPS</b>	<b>\$1.38 (Paid by SLPS)</b>	<b>\$0.69 (Paid by SLPS)</b>	<b>\$0.83 (Paid by SLPS)</b>
Employee Only	\$2.34	\$1.17	\$1.40
Employee +1	\$7.70	\$3.85	\$4.62
Employee + 2 or more	\$11.51	\$5.76	\$6.91

\*\*SLPS will pay the Base plan amount for employee only. The cost for the Vision Buy Up plan represents the additional costs only.

	Monthly Premium	12 Month	Non 12 Month
		24 pay periods	20 pay periods
<b>New York Life (EMPLOYEE ONLY – Basic life and AD&amp;D)</b>			
\$40,000 Basic Life			
\$40,000 AD&D	(\$8.40) Paid by SLPS	(\$4.20) Paid by SLPS	(\$5.04) Paid by SLPS

	Monthly Premium	12 Month	Non 12 Month
		24 pay periods	20 pay periods
<b>New York Life (EMPLOYEE – Voluntary Supplemental Life)</b>			
\$5,000	\$1.70	\$0.85	\$1.02
\$10,000	\$3.40	\$1.70	\$2.04
\$20,000	\$6.80	\$3.40	\$4.08
\$50,000	\$17.00	\$8.50	\$10.20
\$75,000	\$25.50	\$12.75	\$15.30
\$100,000	\$34.00	\$17.00	\$20.40
\$125,000	\$42.50	\$21.25	\$25.50
\$150,000	\$51.00	\$25.50	\$30.60
\$200,000	\$68.00	\$34.00	\$40.80

	Monthly Premium	12 Month	Non 12 Month
		24 pay periods	20 pay periods
<b>New York Life (SPOUSE – Voluntary Supplemental Life)</b>			
\$10,000	\$3.40	\$1.70	\$2.04
\$20,000	\$6.80	\$3.40	\$4.08
\$30,000	\$10.20	\$5.10	\$6.12
\$40,000	\$13.60	\$6.80	\$8.16
\$50,000	\$17.00	\$8.50	\$10.20
\$60,000	\$20.40	\$10.20	\$12.24
\$70,000	\$23.80	\$11.90	\$14.28
\$80,000	\$27.20	\$13.60	\$16.32
\$90,000	\$30.60	\$15.30	\$18.36
\$100,000	\$34.00	\$17.00	\$20.40

	Monthly Premium	12 Month	Non 12 Month
		24 pay periods	20 pay periods
<b>New York Life (Dependent Child(ren) – Voluntary Supplemental Life (DEPENDENT CHILD)</b>			
\$5,000	\$0.75	\$0.38	\$0.45
\$7,500	\$1.13	\$0.56	\$0.68
\$10,000	\$1.50	\$0.75	\$0.90

## Contacts

Please contact Human Resources to complete any changes to your benefits that are not related to your initial or annual enrollment.

### Carrier Customer Service

Benefits Plan	Carrier	Phone Number	Website
Medical PPO	UnitedHealthcare	1-844-298-8930	myuhc.com
Dental	Delta Dental of MO	1-800-335-8266	deltadentalmo.com
Vision	Vision Benefits of America	1-800-432-4966	VBAplans.com
Life and AD&D	New York Life	1-800-885-5695	NewYorkLife.com
Voluntary Life	New York Life	1-800-885-5695	NewYorkLife.com
Short Term Disability (STD)	New York Life	1-800-362-4462	NewYorkLife.com
Long Term Disability (LTD)	New York Life	1-800-362-4462	NewYorkLife.com
EAP	Optum	1-800-622-7276	liveandworkwell.com, Company Access code: SAINTLOUIS
EAP	New York Life	1-800-344-9752	guidanceresources.com Web ID: NYLGBS
FSA	Benefit Solver		

## **SLPS Benefits Call Center**

[Myslpsbenefits.com](http://Myslpsbenefits.com)

1-888-715-1914

Hours: Monday-Friday 7:00 AM – 7:00 PM Central Time

