A photograph of a young couple in a kitchen. The woman, with curly hair, is holding a tablet and looking at it with a smile. The man, wearing a blue sweater, is standing next to her, also smiling and looking at the tablet. They are surrounded by various food items on a counter, including a bowl of salad, a bowl of fruit, and some small containers. The background is a bright, modern kitchen with a window and shelves.

By your side

2018 Open Enrollment Resource Guide

The School Board of Broward County, Florida

aetna[®]

What's inside

- 2 Introducing the new Premier Choice HSA plan
- 4 2018 SBBC plan options at a glance
- 6 Aetna provider networks
- 6 ID Cards: changes and updates
- 7 Plan information at your fingertips
- 8 Prescription drug benefits
- 10 Resources to keep you healthy
- 11 Vision benefits
- 12 Contact information



Open Enrollment is October 3 – 27, 2017

Open Enrollment is your time to make benefit choices and changes. It's a great time to evaluate your personal and family health, think about your current benefit elections, and consider whether they will continue to meet your needs in the year ahead. Get to know your plan options — how they work, what they cost and what they cover.

What's new for 2018?

- A new plan option, Premier Choice HSA plan
- A new pharmacy savings program, Maintenance Choice®

Dear Broward County Public Schools employee:

The District is pleased to offer you a new plan option for 2018. The Premier Choice HSA plan is a High-Deductible Health Plan (HDHP) that features the lowest premium of all plan options in exchange for a higher deductible. The plan comes with a Health Savings Account (HSA) that is a tax-advantaged fund that helps you save and pay for health care expenses. **This plan replaces the Consumer-Driven Health Plan.**

We're also happy to offer a new pharmacy program that will help you save on your long-term prescriptions. The Maintenance Choice program allows you to obtain a 90-day supply of maintenance medicines through mail order or by picking it up at a CVS/pharmacy™ near you. This program is for maintenance medicines, which are those used on a regular basis to manage conditions such as asthma, diabetes, high blood pressure or high cholesterol. You'll pay the same cost share for a 90-day supply as you would for a 60-day supply. It's like getting a month free!

Your Aetna health plan provides more than just medical and prescription drug coverage. The plan includes resources you need to be a smart health care consumer and the programs to help you be your healthiest. The real value of a health plan is how it works for you and your family. Your Aetna plan will help you make the most of your health and wellness benefits.



Introducing the new Premier Choice HSA plan

The District is pleased to announce a new plan option will replace the Consumer-Driven Health Plan (CDHP) for 2018. Premier Choice is a High-Deductible Health Plan (HDHP) that has in- and out-of-network benefits and uses the same Aetna Choice® POS II network as the CDHP. The higher deductible is offset with the lowest premium of all your plan options. Premier Choice also comes with a Health Savings Account (HSA).

The HSA is your money

A Health Savings Account is a tax-advantaged fund that you can use to help pay your share of eligible health care expenses — like your deductible. You control when to use the money in your account. You can even make it part of your future financial strategy.

SBBC sets up the account and contributes to it each year, but you may add to it through payroll deductions, up to the IRS maximum. Then, you decide whether to use your HSA balance toward current eligible expenses, or to let it grow and save it for future expenses — even into retirement.

Use your HSA dollars to pay for medical, dental, vision and other qualified health care services that are not covered under your medical and dental plans. See IRS Publication 502 for a complete list of qualified expenses.

2018 HSA contribution limits

The chart below illustrates the contributions SBBC will make, based on your elected health plan coverage, along with the amount you can contribute, up to the IRS maximum. If you're age 55 or older, you can make an extra \$1,000 "catch-up" contribution.

Premier Choice enrollment level	SBBC's annual contribution	Your maximum annual contribution	2018 IRS calendar-year maximum
Individual	\$500	\$2,950	\$3,450
Family	\$1,000	\$5,900	\$6,900

An HSA has triple tax advantages:

1. **Your contributions** — When you make contributions to an HSA, those dollars are deducted from your pay before taxes. This reduces your taxable income, thus saving you money.
2. **Your withdrawals** — You can use the money you've contributed to reimburse yourself — tax free — for eligible health care expenses that you normally incur.
3. **Interest earned** — Your HSA is an interest-bearing account with investment options available once the balance reaches \$1,000. You pay no taxes on your earnings.





Manage your HSA account with PayFlex®

You can manage your Health Savings Account securely online with PayFlex. You'll be able to check your balance, submit a reimbursement claim and more. You can use your PayFlex Card® to pay for eligible expenses on the spot — like at the pharmacy or dentist's office. After you enroll, PayFlex will send you a welcome kit to explain the details.

Take your account with you

There's no "use it or lose it" rule with your HSA. It is your bank account, and any unused dollars remain yours — even if you leave the plan or SBBC. Your HSA dollars will be available to pay for qualified health care expenses in the future for you and your eligible dependents.

Eligibility for an HSA

By law, you cannot contribute to an HSA if you are:

- Not covered by a qualified high-deductible health plan
- Covered by a second health plan, such as a spouse's health care plan
- Eligible to be claimed as a dependent on another person's tax return
- Enrolled in TRICARE®
- Enrolled in Medicare

Compare an HSA with a Health Care Flexible Spending Account (FSA)

If you're already familiar with the tax advantages of an FSA, here's a comparison for the HSA.

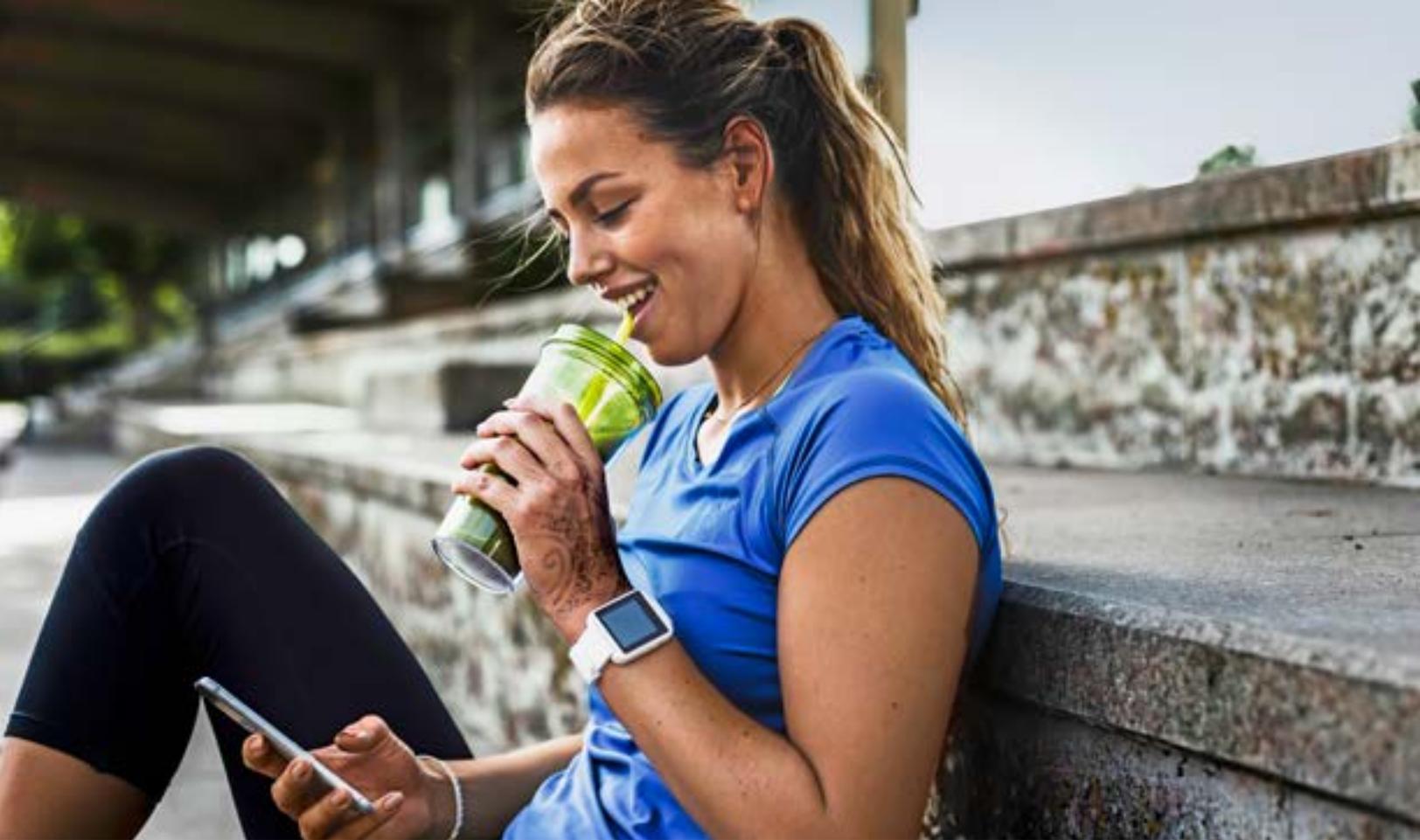
	HSA	Health Care FSA
Is a health plan required?	Yes	No
Use it or lose it?	No	Yes
Take it with you?	Yes	No
Are contributions taxed?	No	No
Is earned interest taxed?	No	An FSA doesn't earn interest
Are withdrawals for qualified expenses taxed?	No	No
Who can contribute?	You, your family and your employer	You and your employer

2018 SBBC plan options at a glance

Plan	Premier Plus (Open Access Aetna Select)	Premier (Open Access Aetna Select)	Premier Choice (Choice POS II) <i>This plan replaces the Consumer-Driven plan</i>		Kids Enhanced (Open Access Aetna Select)	Kids Basic (Open Access Aetna Select)
	In Network	In Network	In Network	Out of Network	In Network	In Network
HSA Contribution	N/A	N/A	\$500 Individual \$1,000 Family		N/A	N/A
Deductible						
Individual	\$250	\$500	\$2,500	\$5,000	None	\$300
Family	\$500	\$1,000	\$5,000	\$10,000	None	All plan members must meet the individual deductible
Coinsurance	10%	20%	30%	50%	None	20%
Out-of-Pocket Maximum						
Individual	\$2,000 Medical \$4,500 Pharmacy	\$2,500 Medical \$4,500 Pharmacy	\$6,600	\$13,200	\$1,264 Medical \$5,000 Pharmacy	\$1,500 Medical \$5,000 Pharmacy
Family	\$4,000 Medical \$9,000 Pharmacy	\$5,000 Medical \$9,000 Pharmacy	\$13,200	\$26,400	\$2,528 Medical \$10,000 Pharmacy	\$3,000 Medical \$10,000 Pharmacy
Preventive Care						
	Covered 100%	Covered 100%	Covered 100%; deductible waived	50% after deductible	Covered 100%	Covered \$100; deductible waived
Office Visit	\$25 copay	\$25 copay	30% coinsurance after deductible	50% after deductible	\$15 copay	\$15 copay; deductible waived
Specialist Visit	\$45 copay	\$45 copay	30% coinsurance after deductible	50% after deductible	\$15 copay	\$30 copay; deductible waived
Teladoc®	\$25 copay	\$25 copay	30% coinsurance after deductible	Not covered	\$15 copay	\$15 copay; deductible waived
Urgent Care	\$40 copay	\$45 copay	30% coinsurance after deductible	50% after deductible	\$15 copay	\$30 copay; deductible waived
Emergency Room	\$300 copay	\$350 copay	30% coinsurance after deductible	Same as in-network care	\$250 copay	\$250 copay; deductible waived
Outpatient Medical Care						
Diagnostic Services (e.g., MRI, CT Scan, PET Scan)	At hospital, \$150 copay, At freestanding facility; \$45 copay	At hospital, 20% coinsurance after deductible; at freestanding facility, 20% coinsurance after deductible	30% coinsurance after deductible	50% after deductible	\$20 copay	At hospital, 20% coinsurance after deductible; at freestanding facility, \$30 copay, deductible waived
Outpatient Surgery	At hospital, \$250 copay; at ambulatory surgical center, \$50 copay	At hospital, 20% coinsurance after deductible; at freestanding facility, 20% coinsurance after deductible	30% coinsurance after deductible	50% after deductible	\$50 copay	At hospital, 20% coinsurance after deductible;w at ambulatory surgical center, \$100 copay, deductible waived
Outpatient PT/ST/ OT (visit limits apply)	\$25 copay	\$25 copay	30% coinsurance after deductible	50% per visit after deductible	\$5 copay	At hospital, 20% coinsurance after deductible; at freestanding facility, \$30 copay, deductible waived

2018 SBBC plan options at a glance

Plan	Premier Plus (Open Access Aetna Select)	Premier (Open Access Aetna Select)	Premier Choice (Choice POS II) <i>This plan replaces the Consumer-Driven plan</i>	Kids Enhanced (Open Access Aetna Select)	Kids Basic (Open Access Aetna Select)	
Hospital						
Inpatient	\$250 copay per admission	20% coinsurance after deductible; maternity \$200 copay (no deductible or coinsurance for maternity inpatient benefits)	30% coinsurance after deductible	50% after deductible	\$100 copay per day for the first 5 days, per confinement; thereafter 100%	20% coinsurance after deductible
Mental Health/Alcohol & Substance Abuse						
Mental Health Care	At hospital, \$250 copay; outpatient, \$25 copay	At hospital, 20% coinsurance after deductible; outpatient, \$25 copay	30% coinsurance after deductible	50% after deductible	At a hospital, \$100 copay for the first 5 days, per confinement; outpatient, \$15 copay	At hospital, 20% coinsurance after deductible; outpatient, \$30 copay, deductible waived
Alcohol & Substance Abuse	At hospital, \$250 copay; outpatient, \$25 copay	At hospital, 20% coinsurance after deductible; outpatient, \$25 copay	30% coinsurance after deductible	50% after deductible	At a hospital, \$100 copay for the first 5 days, per confinement; outpatient, \$15 copay	At hospital, 20% coinsurance after deductible; outpatient, \$30 copay, deductible waived
Durable Medical Equipment	10% coinsurance after deductible	20% coinsurance after deductible	30% coinsurance after deductible	50% after deductible	\$15 copay	No copay
Insulin/Diabetic Supplies	No copay	No copay	Applicable Pharmacy Tier copay	50% after deductible plus \$10/\$45/\$75 copay	No copay	No copay
Infertility (Comprehensive Infertility & ART)	40% coinsurance (maximum of 3 cycles per member, per lifetime)	20% coinsurance, after deductible (maximum of \$6,000 per member, per lifetime)	Not covered	Not covered	Not covered	Not covered
Pharmacy (Value Open Formulary)						
Retail	\$6/10/50/75 copay	\$10/50/75 copay	\$10/45/75, after deductible	50% after deductible plus \$10/45/75 copay	\$10/50/75 copay	\$10/50/75 copay
Mail	\$6/10/100/150 copay	\$10/100/150 copay	\$20/90/150, after deductible	Not covered	\$10/50/75 copay	\$10/50/75 copay
CVS Maintenance Choice (90-day supply at retail)	\$6/10/100/150 copay	\$10/100/150 copay	\$20/90/150, after deductible	N/A	\$10/50/75 copay	\$10/50/75 copay



Aetna provider networks

Your 2018 health plan options will be supported by the following provider networks:

Premier Plus, Premier, Kids Enhanced and Kids Basic plans

These plans use the Open Access Aetna SelectSM network.

You can visit any doctor in the network without ever needing a referral. You don't have to choose a primary care physician (PCP) either, but you may want to because a PCP can help direct your care. Plus, you may pay less out of pocket when you see a PCP. You must see network providers for the plan to cover and help pay for care.

Premier Choice plan

This plan uses the Aetna Choice POS II network.

When it comes to doctors, you want options; this health plan gives you plenty. You may want to pick a PCP from the Aetna network because a PCP can help guide your care.

You may visit any doctor from Aetna's network — no referral is needed. You can also go to a doctor outside the network without a referral. If the doctor isn't a part of the Aetna network, you may have to obtain approval from Aetna before receiving certain services, file your own claims and pay more out of pocket.



ID cards: changes and updates

Aetna plan members will receive one ID Card listing up to five family members, if applicable. Aetna ID Cards are mailed in December, so you should have yours in hand before the plan year begins. After January 1, 2018, you'll be able to register with Aetna Navigator, your secure member website, at aetna.com, and log in to print a temporary ID Card, and request additional or replacement ID Cards. Use the "Contact Us" link on any Navigator page.

Plan information at your fingertips

As an Aetna health plan member, you'll get smart tools and resources at no extra cost.

Aetna Navigator



Your secure member website — after you enroll, register at [aetna.com](https://www.aetna.com). Then log in anytime to:

- Confirm who's covered under your plan
- Check the status of claims and view Explanation of Benefits (EOB) statements
- Use DocFind to locate network providers
- Estimate costs of care before you go
- Access the health assessment and wellness programs that are part of your plan

Aetna Mobile app



Use your smartphone to access a modified version of Aetna Navigator. You can:

- Use fingerprint log-in to make signing in a breeze
- Pull up a digital copy of your Aetna ID Card
- Search for network doctors and facilities
- View your Personal Health Record
- Send a text or click to call Aetna

DocFind®



DocFind, Aetna's online directory, lets you search for all providers, including specialists, walk-in and urgent care centers, and hospitals. You can even find network labs — it's important to know Quest Diagnostics® is the preferred laboratory. To see if your doctor is in the Aetna network:

1. Visit [aetna.com/docfind](https://www.aetna.com/docfind).
2. Choose a provider type from the list and enter your ZIP code to see if your doctor is listed.
3. Or use the open-text search box to enter a specific doctor name, such as "Dr. Gordon in Ft. Lauderdale."
4. When asked to "Select a Plan," scroll to Aetna Select® (Open Access) or Aetna Choice® POS II (Open Access) and click on the desired network.
5. Click "Continue." You'll get a list of doctors who match your search criteria. You can narrow your search with options on the left. You can also learn more about specific doctors when you click on their names.

Member Payment Estimator*



Get actual costs of procedures and treatments using providers and facilities in your area. This tool factors in your plan details like your remaining deductible and your copay or coinsurance.

You can review and compare average cost ranges for over 30 common medical procedures at specific facilities.

You can also compare costs for up to 10 doctors or hospitals at a time.

*Estimated costs not available in all markets or for all procedures. Actual costs may differ for a number of reasons, including if additional or different services are performed by the doctor or facility at the time of your visit, and/or if additional claims/member payments are processed before the actual claim before the estimated service is received.

Prescription drug benefits

Prescription drug coverage is included with the health plans.
See the chart on pages 4 and 5 for benefit details.

How to get your prescriptions filled:

Short-term prescriptions (up to 30-day supply)

You will be able to fill short-term prescriptions (up to a 30-day supply) at participating retail pharmacies. These include both chain (CVS, Publix®, Target®, Walgreens®) and local pharmacies. Visit [aetna.com/docfind](https://www.aetna.com/docfind) to look up participating pharmacies near you.

Long-term prescriptions (up to 90-day supply)

Getting 90-day refills for the drugs you take regularly is easier than ever with the Maintenance Choice program. You have two ways to get your refills and either choice is the same low price.

1. Choose delivery or pickup

- Aetna Rx Home Delivery® pharmacy can deliver your 90-day supply to your home. It will arrive in private, secure packaging, and it's easy to track your order online.
- You can pick it up at your local CVS/Pharmacy (including those inside Target stores).

2. Choose from two easy ways to order your 90-day refills

- Call the Customer Care number on your Member ID Card. We'll contact your doctor for a new prescription and handle all the details.
- Order online by logging in to [aetna.com](https://www.aetna.com) and select "Manage Prescriptions."





Resources to keep you healthy

Tobacco Cessation Program

Do you need help quitting tobacco? Starting in January, and once you're enrolled in an Aetna medical plan, you'll have two ways to help you be tobacco free:

1. **Enroll in an online health coaching program.** We recommend taking your health assessment first, so you can get a better understanding of your health risks. Through Aetna Navigator, you can then complete the self-paced "Be Tobacco Free" coaching program.
2. **Use your Aetna prescription drug benefit.** You can get tobacco-cessation medications at no extra cost. You will need a prescription from your doctor to obtain over-the-counter generic or brand-name smoking-cessation medication.

24-hour nurseline

You can speak with a registered nurse about health issues — anytime, day or night. A nurse can also help you decide if you should go to urgent care or if your situation can wait for a doctor's appointment. While only your doctor can diagnose, prescribe or give medical advice, the nurses can provide information on more than 5,000 health topics.





Vision benefits

The District will continue to offer employees the option to enroll in the Aetna VisionSM Preferred plan. This plan offers coverage for eye exams, glasses, contact lenses and more. You'll also get discounts on eyeglasses, LASIK surgery, contact lenses, nonprescription sunglasses, contact lens solutions and other eye care accessories.

Go almost anywhere you want for eye care

You can see any provider you want in or out of the network. Remember, network providers will cost you less. The Aetna network is extensive, so you will easily find a provider in your area. Visit aetnavision.com to find one.

Convenience and flexibility

Many of our providers are independent eye doctors. For added convenience, you can also get eye exams and eyewear at top retail providers: LenCrafters[®], People Vision[®], Target[®], Sears[®] and JCPenney Optical[®]. You can also shop online to order your glasses at Glasses.com[®] and contacts at ContactsDirect[®]. It's up to you. You can get your exam at one provider and eyewear at another.

Questions?

We're here to help.

Aetna Member Services

1-800-562-7822
8 a.m. to 6 p.m.
aetna.com

**Aetna Pharmacy and
Mail-Order Program
Customer Service**

1-888-792-3862
24/7

**SBBC Onsite
Representatives**

954-858-3262
8:30 a.m. to 4:30 p.m.

**Broward County Public
Schools Benefits Office**

754-321-3100
8:30 a.m. to 5 p.m.



TTY: 711

For language assistance in your language call 1-877-706-8776 at no cost. (English)

Para obtener asistencia lingüística en español, llame sin cargo al 1-877-706-8776. (Spanish)

欲取得繁體中文語言協助，請撥打1-877-706-8776，無需付費。(Chinese)

Pour une assistance linguistique en français appeler le 1-877-858-6507 sans frais. (French)

Para sa tulong sa wika na nasa Tagalog, tawagan ang 1-877-858-6507 nang walang bayad. (Tagalog)

Benötigen Sie Hilfe oder Informationen in deutscher Sprache? Rufen Sie uns kostenlos unter der Nummer 1-877-858-6507 an. (German)

للمساعدة في (اللغة العربية)، الرجاء الاتصال على الرقم المجاني 1-877-858-6507. (Arabic)

Pou jwenn asistans nan lang Kreyòl Ayisyen, rele nimewo 1-877-858-6507 gratis. (French Creole)

Per ricevere assistenza linguistica in italiano, può chiamare gratuitamente 1-877-858-6507. (Italian)

日本語で援助をご希望の方は、1-877-858-6507 まで無料でお電話ください。(Japanese)

한국어로 언어 지원을 받고 싶으시면 무료 통화번호인 1-877-858-6507 번으로 전화해 주십시오.
(Korean)

برای راهنمایی به زبان فارسی با شماره 1-877-858-6507 بدون هیچ هزینه ای تماس بگیرید. انگلیسی (Persian)

Aby uzyskać pomoc w języku polskim, zadzwoń bezpłatnie pod numer 1-877-858-6507. (Polish)

Para obter assistência linguística em português ligue para o 1-877-858-6507 gratuitamente.
(Portuguese)

Чтобы получить помощь русскоязычного переводчика, позвоните по бесплатному номеру 1-877-858-6507. (Russian)

Để được hỗ trợ ngôn ngữ bằng (ngôn ngữ), hãy gọi miễn phí đến số 1-877-858-6507. (Vietnamese)

If you require language assistance, please call the Member Services number on your Aetna ID Card, and an Aetna representative will connect you with an interpreter. If you're deaf or hard of hearing, use your TTY and dial 711 for the Telecommunications Relay Service. Once connected, please enter or provide the Aetna telephone number you're calling.

Si usted necesita asistencia linguistica, por favor llame al numero de Servicios al Miembro que figura en su tarjeta de identificacion de Aetna, y un representante de Aetna le conectara con un interprete. Si usted es sordo o tiene problemas de audicion, use su TTY y marcar 711 para el Servicio de Retransmision de Telecomunicaciones (TRS). Una vez conectago, por favor entrar o proporcionar el numero de telefono de Aetna que esta llamando.

Health benefits plans contain exclusions and limitations. Not all health services are covered. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to health services. Aetna receives rebates from drug manufacturers that may be taken into account in determining the Aetna Pharmacy Drug List. Rebates do not reduce the amount a member pays the pharmacy for covered prescriptions. Aetna Rx Home Delivery refers to Aetna Rx Home Delivery, LLC, a subsidiary of Aetna Inc., which is a licensed pharmacy providing prescription services by mail. Health information programs provide general health information and are not a substitute for diagnosis or treatment by a physician or other health care professional. Discount programs provide access to discounted prices and are not insured benefits. The member is responsible for the full cost of the discounted services. Aetna may receive a percentage of the fee you pay to the discount vendor. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to aetna.com.

FSC

aetna[®]