



2023 Public School Employee Open Enrollment Guide

FOR ACTIVE EMPLOYEES

Table of Contents

2023 Open Enrollment	2
Eligibility	3
Enrollment	4
Health Insurance Terminology	5
Plan Options & Benefits	6
Summary of Benefits	7
Voluntary Products	8



2023 Open Enrollment

Open Enrollment is the annual period when Public School Employees [can enroll or make changes to their health insurance plan or add voluntary products](#) without a qualifying event. During Open Enrollment, employees may make changes for the 2024 plan year, such as:

- Enroll/cancel in coverage
- Add/drop your spouse or dependent
- Change from pre-tax to post-tax deduction
- Change your Plan level (Basic, Classic, Premium)
- Enroll in vision and/or dental coverage
- Sign up for voluntary products
- Elect or update HSAs (check with your district Health Insurance Representative (HIR) regarding HSAs.)

The easiest and fastest way to enroll is online through your [ARBenefits Member Portal](#). If your health insurance plan will not change for plan year 2024, you do not need to re-enroll online.

The coverage selected during Open Enrollment will be effective January 1, 2024 (premium rates may change from plan year to plan year.)

Employees who plan on retiring in plan year 2024 [must have participated in the program for at least 5 cumulative years before retirement to be eligible](#) for retiree coverage.

Note: Any Open Enrollment changes, excluding qualifying events, received prior to the first date of Open Enrollment or after the deadline, will not be processed. [All initial submissions to EBD are final.](#)

Eligibility

Employees

Public school employees are eligible for insurance if they qualify as full-time employees in a position that requires, on average, at least 30 hours per week of the actual performance of duty during the annual school year. Bus drivers are also eligible for coverage if they are considered full-time. Click [here](#) to view specific eligibility requirements for bus drivers.



Dependents

If your dependent is your legal spouse, he or she may join; however, spouses who are eligible for coverage through their employer are NOT eligible for coverage through ARBenefits.

Former spouses are not eligible to join the Plan even if there is a court order to include them in a Plan.

To add a child as a dependent to your health plan they must be:

- Your birth child, adopted child, stepchild, or have legal guardianship of the child.
- Under the age of 26.
- If you have a Qualified Medical Child Support Order (QMCSO) under the age of 26 and have a judgement, decree, or order issued under state law.



NON-ELIGIBLE: The following are not eligible to be enrolled as a dependent on the PSE plan: (1) former spouse, the day following the final divorce date; (2) common-law spouse (not recognized in Arkansas); (3) parent; (4) grandparent; (5) step-parent; (6) niece or nephew, etc.; (7) foster child (unless legally adopted); and (8) dependent children over the age of 26, unless they have been deemed physically or mentally incapacitated.

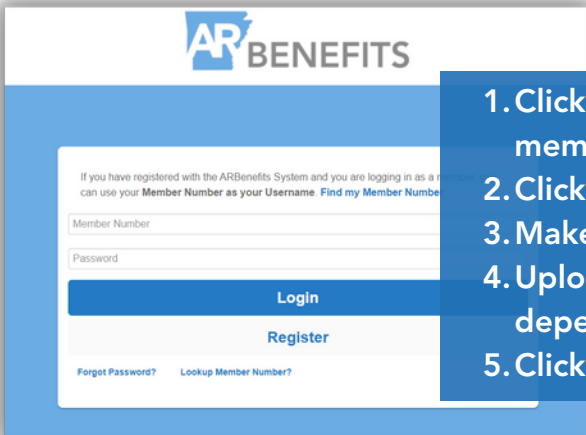
Enrollment

The easiest way to enroll or make changes to your Plan during designated enrollment periods is online through your ARBenefits member portal.

Enrolling through the portal allows you to:

- Obtain instant confirmation that your enrollment elections have been received by the TSS Employee Benefits Division
- Send supporting documentation directly through the portal
- Receive an alert via email from EBD when your forms have been approved or if there is an issue that requires action.

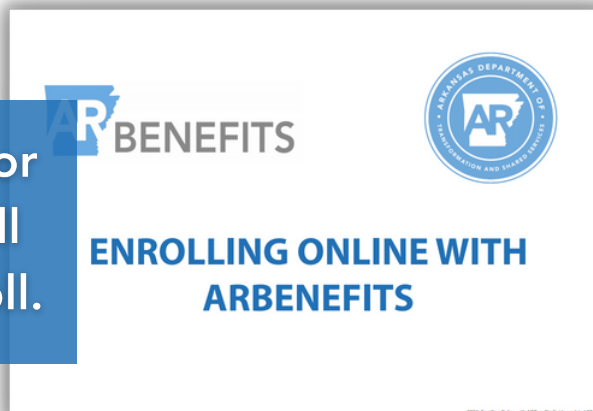
How to Enroll



1. Click on the picture to access the member portal.
2. Click on the "Plan Enroll" tab.
3. Make your selections and click "Next."
4. Upload documents if you are adding dependents.
5. Click "Approve."

If you do not have access to a computer to register for the Online Member Portal, you may access one at the State Library or at any Public Library within the State. To find one near you, go to library.arkansas.gov.

Click on the picture or [HERE](#) to access a full guide on how to enroll.



**ENROLLING ONLINE WITH
ARBENEFITS**

2021, Enrolling Online with ARBenefits Guide, updated 08/21

Health Insurance Terminology

A more extensive list of terms and definitions can be accessed in the Glossary section of the [ARBenefits Summary Plan Description \(SPD\)](#).

Coinsurance: The amount you pay after you meet your deductible. For ARBenefits, once you meet your deductible, ARBenefits will pay 80% and you will pay 20% for covered services.

Copay: The fixed amount you pay for medical services such as a doctors' office visit, prescription, or an ER visit.

Deductible: The amount you pay before coinsurance begins for covered services.

Out-of-Pocket Maximum: The maximum amount you pay towards covered services for a Plan year. Once reached, ARBenefits will pay 100% for covered services for the remainder of the Plan year.

Premium: The monthly amount you pay for health coverage.

Plan Year: The period of time from January 1 - December 31. Amounts contributed to your deductible and out-of-pocket maximums will reset after this period for the next Plan Year.

Preventive Care: Services covered by the Plan even if you have not met your deductible.

Third Party Administrator (TPA): Health Advantage is the TPA that processes claims for ARBenefits. ARBenefits follows the coverage policies of Health Advantage.

Voluntary Products: Optional benefits such as life insurance, vision insurance, cancer, short or long-term disability, etc.

ARBenefits Plan Options and Benefits

Benefits Available Under All Plans

Coverage for care including doctors, hospital stays, prescriptions, rehabilitation

In-network providers nationwide through BCBS provider network.

Access to specialists without a referral. Some services may require pre-certification.

\$160 towards a breast pump

24 hour care for emergencies in or out-of-network.

Eligible Preventive Care covered 100% with no deductible requirement.

\$1,400 paid towards each ear every three years, towards the cost of hearing aids.

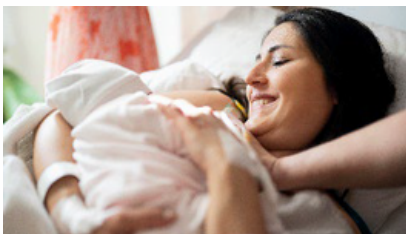
Employee Assistance Program

The Employee Assistance Program offers short term counseling, work-life support, legal, and financial guidance to help you and your family handle various issues that may arise.



Nurse24

Nurse24 is available 24 hours a day, 7 days a week. When you call, you will speak directly with a nurse, who can answer health questions or help you decide if you need to see a doctor or go to the emergency room. Call 1-866-458-0408 to get started.



Special Delivery

If you or your dependent is pregnant, you can earn \$250 for going through the program. By focusing on prenatal care earlier, you improve the long-term health of your baby. You can register up to 20 weeks of gestation. To enroll call 1-800-225-1891, ext. 20225

Chronic Condition Management

If you have certain conditions such as asthma, diabetes, high cholesterol, then you are eligible for the Nurse Coaching Program. Call 1-800-482-8416 to get started.

Summary of Benefits

Premium Plan

Deductible

Individual – \$750

Family – \$1,500

Out of Pocket (medical)

Individual – \$3,250

Family – \$6,500

Out of Pocket (pharmacy)

Individual – \$3,100

Family – \$6,200

Plan Type

Premium

Employee only: \$201.96

Employee and Spouse: \$706.92

Employee and Children: \$457.28

Employee and Family: \$779.68

Classic Plan

Deductible

Individual – \$1,750

Family – \$3,200/\$3,300

Out of Pocket (medical & pharmacy)

Individual – \$3,000

Family – \$6,000

Plan Type

Premium

Employee only: \$88.38

Employee and Spouse: \$347.76

Employee and Children: \$209.30

Employee and Family: \$391.88

Basic Plan

Deductible

Individual – \$4,000

Family – \$8,000

Out of Pocket (medical & pharmacy)

Individual – \$6,450

Family – \$12,900

Plan Type

Premium

Employee only: \$43.24

Employee and Spouse: \$241.58

Employee and Children: \$140.02

Employee and Family: \$262.12

Voluntary Products

Health Savings Account

Health Savings Accounts (HSA) allow you to contribute pre-tax funds to help cover eligible medical expenses. Optum Financial is the Third Party Administrator for the Public School HSAs.

Please Note: Not every district utilizes Optum Financial for HSAs. Please talk your district for further information.

Eligibility: Must be enrolled in the Classic or Basic Plan.

Contributions: Can be adjusted at any time.

Enrollment: Do not need to re-enroll each year.

Rollover of Funds: Unused funds rollover year to year.

Connection to Employer: Continued account access, even if you change jobs.



[Click here for more information on HSAs](#)

Colonial Life Insurance

How secure is your family's financial future without you? If something happened to you, would your family be able to maintain their way of life? How would they cover ongoing living expenses? Colonial Life's group term life insurance can help provide financial security for your family.

[Colonial Life Plan and Enrollment Options](#)





Questions? Contact us:

Department of Transformation and Shared Services
Employee Benefits Division
501 Woodlane Street, Suite 500 | Little Rock, Arkansas 72201

Mailing Address:
P.O. Box 15610 | Little Rock, AR 72231

877-815-1017
Ask.EBD@arkansas.gov | www.transform.ar.gov

