

Benefits



Summary

We will review the following:

- Benefit Booklet
- Spousal Eligibility
- Finding In-Network Providers

All this information and much more can be found on our website.

Go to Staff, Additional Resources, Benefits & Supports



Benefits

- Benefit eligible employees will receive an email to their email account listed on the EAF.
- This email will contain all the information needed to enroll in benefits.
- You must log in and either **enroll or waive** benefits within 31 days of your start date.
- If you fail to do so, benefits will be **waived**.

Our plan year for all our plans run
January 1 - December 31



Benefit Booklet

Our Benefit Booklet is a very useful tool to refer to for questions regarding our plans. You'll find a list of contact information for our providers, as well as a brief summary of all our plans. It can also be found on our website under the Benefits tab.

www.escco.org/benefits

Our medical plan is self-insured. We utilize a Third Party Administrator, Allied Benefit Systems, to administer our plan. We utilize the Aetna network to have a list of providers. We are not Aetna customers; claims should be sent to Allied Benefit for processing.

Medical Insurance

We have 2 medical plans to choose from:

1. PPO Plan

- Offers a lower deductible
- Prescription co-pays begin immediately
- Higher monthly premium

2. HDHP Plan

- Has a higher deductible
- You pay 100% of prescription costs until you meet the deductible
- Lower monthly premium

Things to keep in mind:

Benefits begin your first day of active employment.

ID cards take 10-14 business days to be mailed to your home after you complete your enrollment.

Dependent Eligibility

Spouses who meet the criteria and children (up to age 26) are eligible for medical, dental and vision coverage.

Spouses who are eligible for another employer-sponsored medical plan must take that coverage on an individual basis as primary insurance in order to be covered for secondary insurance under the ESC COG medical plan through Ohio Healthcare Plan.

This carveout can be waived if one of the following applies:

1. The spouse is also eligible for the Ohio Healthcare Plan through his/her participating school.
2. The spouse is not eligible for an employer-sponsored medical plan.
3. The spouse would be required to pay more than 50% of the total premium for a single plan.
4. Premium does NOT include spousal incentives or other such additional compensation, etc., forfeited upon enrollment in their own plan.

Dependent Eligibility and Documentation

A Spousal Verification Form may be required depending on how the spousal question is answered while enrolling in benefits. This form is located in the portal, or email the Benefits Department and request a copy. The form is completed by the spouse's employer and then uploaded into the benefit portal.

Required documentation for spouses:

- Page 1 of your most recent federal 1040 tax form. Please black out the financial information and the first 5 of your SSN's. Leave the last 4 showing.
- If you have been married less than a year, your marriage certificate will suffice.
- If you file as head of household, you and your spouse will need to submit affidavits. Contact the Benefits Department for this form; benefits@escco.org.

Required Documentation

Children:

- Birth child: Birth certificates
- Adopted children: Legal adoption paperwork
- Legal Guardianship: Proof of legal guardianship of “Qualified Child Medical Support Order”
- Stepchild: Birth certificate and divorce decree to verify primary coverage

If your child is a disabled dependent, a Certificate of Disability form is required each year.

This form can be found on our website under the Benefits tab, or email the Benefits Department.

ALL required documentation can be uploaded into your file cabinet in the benefit portal.

Medical Providers

Medical providers can be found by going to this link:

https://www.aetna.com/dsepublic/#/contentPage?page=providerSearchLanding&site_id=asa&language=en

Insurance Rates

- All rates are listed in the benefit portal while you are enrolling in benefits.
- Rates are also listed in the Benefit booklet.
- Our medical and dental premium are paid a month ahead of time, so you will see double deductions for a few pays in the beginning.

Tip:

Don't wait to complete your enrollment. The sooner you enroll, the sooner we can start your deductions!





Get a checkup → get a check

Your health is worth a lot.
Earn \$150 just for keeping
it on track!

How it works:

- All employees enrolled in the medical plan may participate.
- Schedule a preventative care checkup with your primary care provider throughout the plan year.
- Approximately 4-6 weeks after you visit, you will receive \$150.*



*The amount will be added to your regular paycheck and is subject to applicable taxes.

Wellness Incentive

If you are enrolled in our medical plan, you are eligible to receive a \$150 stipend for completing a wellness exam.

The payment is automatically added to your paycheck when we receive notification that the claim has been processed by Allied Benefit Systems or Marathon Health.

There are no forms to complete. All you have to do is go to the exam.

You are limited to 1 stipend per year.

Health Benefit Provided by Marathon Health

We have partnered with Marathon Health, one of the leaders in worksite healthcare, to provide you and your family with high-quality, affordable healthcare. Visit the Member Portal to learn more about services provided by Marathon Health, message the care team and schedule an appointment.



Comprehensive Care

- Annual check-ups
- Acute (sick) care needs
- Chronic conditions
- Health coaching
- Medications
- Lab tests

Convenience

- The health center is conveniently located nearby
- Same or next-day appointments available
- Online scheduling and digital check-ins
- In-person, video and phone appointments

Eligibility

Employees, spouses/partners and dependents 3+ covered on the health plan are eligible to use the services provided by Marathon Health.

FREE Healthcare Services

All services are FREE for Ohio Healthcare Plan members.

Confidential

Just like with any other medical provider, your visits are completely confidential. That means no one knows but you and your care team.

Health Centers

Marathon Health @ Easton Town Center
3866 Townsfair Way, Columbus, OH 43219
Mon/Wed: 10am - 7pm
Tue/Thu/Fri: 7am - 4pm

Marathon Health @ Hilliard
2391 Hilliard Rome Rd., Columbus, OH 43206
Mon/Wed/Fri: 7am - 4pm
Tue/Thu: 10am - 7pm
Sat: 8am - Noon

Marathon Health @ Parkway Centre
4152 Buckeye Parkway, Grove City, OH 43123
Mon/Wed: 10am - 7pm
Tue/Thu/Fri: 7am - 4pm



Get Started Today!

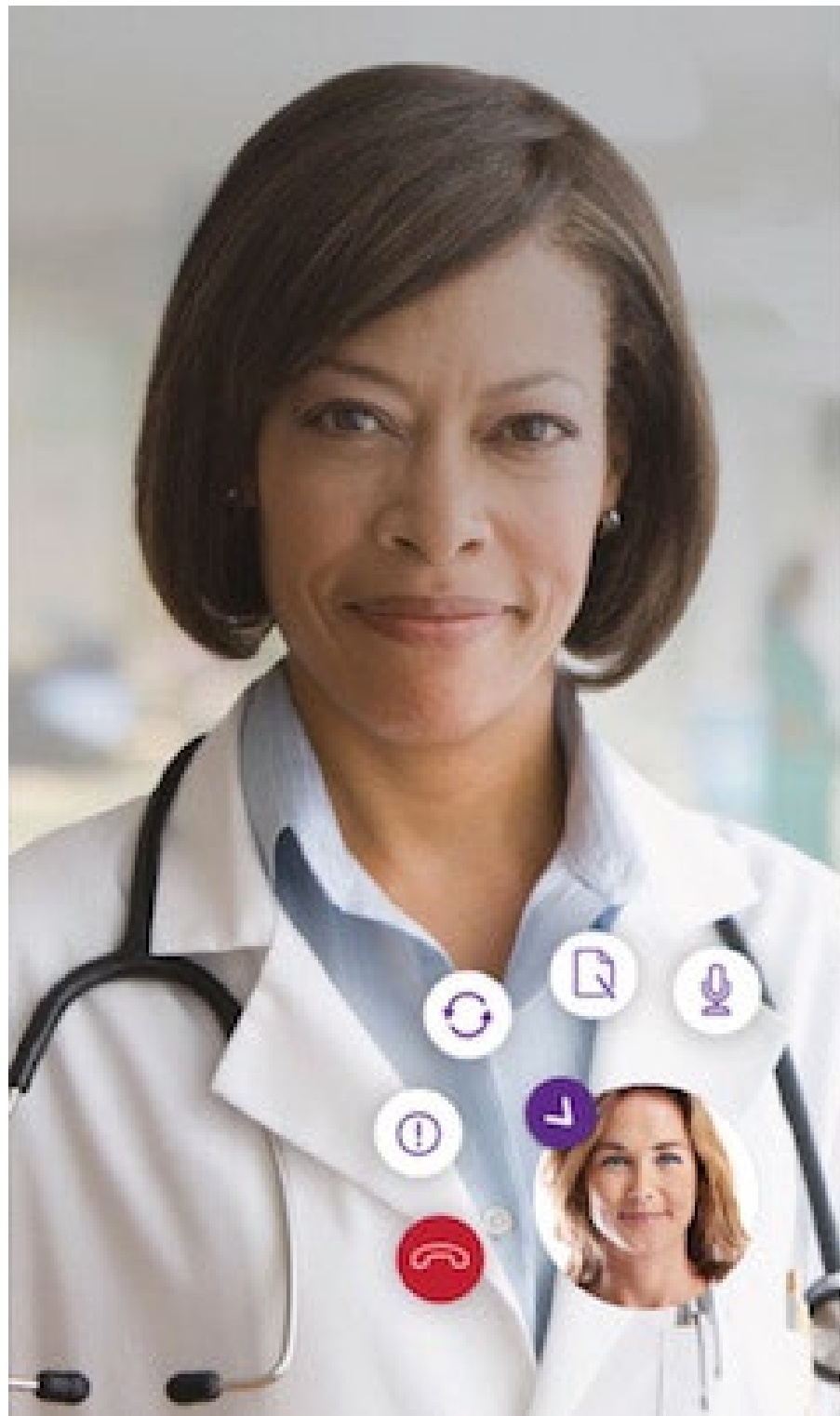
Register or schedule an appointment on the Member Portal at marathon-health.com/join or text **JOIN to 77239**.



Marathon Health

Marathon Health is a health center available to all employees enrolled in the medical plan.

It provides FREE healthcare services for all members.



←

Your medical history.

Height (inches)	Weight (lbs)
65	150

Medication(s) Add new +

TYLENOL ●
One, as needed

Allergies Add new +

POLLEN ●
Congestion

Lifestyle

Do you smoke / use tobacco?

Do you drink alcohol?

Have you traveled overseas in the last 2 months?

Teladoc

A Teledoc doctor is always just a call or click away.

1.800.Teladoc (835.2362) to speak to with a care coordinator.

Access Teledoc online at www.teladoc.com to set up an account.

Download the Teledoc member app at Teladoc.com/mobile

Dental Insurance

Our dental insurance is a self-insured plan administered by Delta Dental.

In-network providers can be found at this link:

<https://deltadentaloh.com/>

Our dental plan has a maximum benefit of \$1,500 per plan year per covered person.

Class A services such as cleanings and x-rays are covered at 100%

Class B services such as cavities and crowns are covered at 80%

Class C services such as bridges, implants and crowns are covered at 70%

Orthodontia services are covered at 50%, up to a lifetime maximum of \$1,000

Vision Insurance

Our vision plan is a VSP plan. It is administered by Ameritas.

You can find providers by going to this link:

<https://www.vsp.com/>



Voluntary Benefits

We offer a variety of voluntary products to our benefit eligible employees.

These are offered to employees as a new hire and also during open enrollment.

Please refer to the benefit booklet for information regarding these offerings.

If you have any questions, please contact the Benefits Department.

Plans include:

- Voluntary Life and AD&D Insurance for employee, spouse and children
- Healthcare Flexible Spending and Dependent Care Flexible Spending accounts to offset out of pocket healthcare and daycare expenses
- Short and Long term disability insurance
- Accident and Critical Illness programs

Employee Assistance Program

The EAP is available to all employees, not just those covered under our insurance plans.

HelpNet is our program provider. They are available 24/7 by calling 1.800.969.6162.

HelpNet is here for you and your family.

Your employer has contracted with HelpNet to provide personal counseling to you and your household members. Our counselors are all master's level professionals with extensive experience in dealing with:

- + Marital and family issues
- + Addictions
- + Emotional problems
- + Legal and financial concerns
- + Careers
- + Relationships
- + Aging parents
- + Stress, anxiety and depression
- + Life enrichment techniques

There is no cost to you or your family at HelpNet and it's confidential.*

*HelpNet strictly adheres to all state and federal guidelines and regulations pertaining to patient confidentiality. If a contracting employer seeks information, we provide only statistics — no name or diagnoses are ever given without written permission from the patient. The only exception is by a court order. If there is a possibility the patient may harm him or herself or be injured by another or when child abuse or neglect is suspected.

WE OFFER:

Assessment

Your counselor will talk to you about your concerns and together you will decide the primary issues that need to be resolved.

Counseling

If caught in the early stages, many problems can be handled right in the HelpNet office in just a few sessions. These 'brief counseling sessions' have been prepaid by your employer as a part of the overall Employee Assistance Program package. There is no cost to you.

A Community Referral

Some problems require more time or are outside of our scope of services. In the event this happens, we will guide you to an affordable community professional with a good reputation for helping other people in your situation. We'll explain your health benefits package provided by your employer and any co-pay or out-of-pocket expenses you may incur.

At HelpNet, we understand that problems don't always wait for regular 9 a.m. to 5 p.m. workday hours. We are on-call 24 hours a day, 7 days a week, 365 days a year.

When you contact us we will offer you an appointment within 72 business hours of your call. If you are in crisis or in an emergency situation, you may request to speak to a counselor right away.

CONTACT US
24 hours a day, 365 days a year

(800) 969-6162

(800) 523-0581
Kalamazoo, Michigan area

HelpNetEAR.com



Review

You will receive an email with enrollment instructions once your new hire paperwork has been approved by the HR department.

You have 31 days from your work start date to enroll or waive benefits.

Open enrollment occurs in October for the next plan year. Please check your ESC email frequently for more information!

You can find all benefit information on our website, esc.co.org under the Benefits tab.

If you have any benefit related questions, please email them to benefits@esc.co.org.

Contact Us

benefits@escoco.org

[**Escoco.org/benefits**](https://Escoco.org/benefits)

