



# Clear eyes. Bright smiles. Healthy lives.















#### **TABLE OF CONTENTS**

Enrollment Information	4
Qualifying Life Event	5
COBRA	5
Medical Plan Information	6
Medical Coverage Examples	8
Health Savings Account (H.S.A.)	9
Telehealth	10
Dental Plans	12
Vision Dlan	17

Disability information	14
Life / AD&D Insurance	14
Flexible Spending Account	15
Employee Assistance Program	15
AFLAC	16
Employee Rate Worksheet	17
Login Instructions For Employees	18
Important Phone Numbers	19

#### INTRODUCTION

Whether you are a new employee enrolling into your benefits for the first time or considering your benefits during open enrollment, this guide is designed to help you through the process.

Casa Grande Union High School District is proud to offer you a broad range of benefit options. You can choose from a number of plans including medical, dental, vision, life insurance and voluntary supplement programs. In addition, we provide health care and dependent care reimbursement accounts to assist employees in managing their out-of-pocket expenses with before-tax dollars.

Please take the time to read this information and ask questions so you can make the best benefits decisions for both you and your family.

#### If you should have any questions:

- 1. Contact the carrier directly. Phone number and website information is on page 19.
- 2. Contact your Human Resources team at **520.316.3360**:

#### **Marie Paredes Ramirez**

mparedes-ramirez@cguhsd.org (ext 1118)

Liz Maldonado

emaldonado@cguhsd.org (ext 1111)

**Damaris Ybarra** 

dybarra@cguhsd.org (ext 1108)

This booklet highlights important features of Casa Grande Union High School District's benefits for its benefit eligible employees. While efforts have been made to ensure the accuracy of the information presented, in the event of any discrepancies your actual coverage and benefits will be determined by the legal plan documents and the contracts that govern these plans.

### **Enrollment Information**

#### **OPEN ENROLLMENT**

**Open Enrollment** is from April 28th through May 16th, 2025. This is your one time per year to make changes.

If you do not login and make changes during Open Enrollment, your current benefit elections will carry over to the new plan year (with the exception of the FSA).

You are required to re-elect medical/dependent FSA amounts for the new plan year.

#### **NEW EMPLOYEES**

**New Employees** have 31 days from your hire date to complete enrollment in the group insurance program. If you have moved from a non-benefits eligible status to a benefits eligible status, you will have 31 days from the new benefits eligible status to complete your enrollment. All insurance coverage starts at the first of the month.

Remember, if elections are not made within the 31-day initial period of eligibility, you will be required to wait until the **Annual Open Enrollment** or until a **Qualifying Life Event** takes place. Late Enrollees will be required to complete an evidence of insurability form for voluntary life insurance. You may be turned down for these benefits if you do not enroll within your first 31 days as a new hire.

#### PRE-TAX VS POST-TAX DEDUCTIONS

**Pre-Tax Dollars**: Your insurance premiums are paid with money removed from your gross wages prior to any tax calculations. This reduces your tax liability and is a more efficient way to pay for premiums. Remember, you must choose pre-tax deductions for all your benefits to participate in a flexible spending account. You may elect to optout of this method of paying.

**Post-Tax Dollars**: Some insurance premiums may be paid after taxes. Please contact the Human Resources team for more information related to the specific premiums that are deducted post-tax.







## **Qualifying Life Event**

The elections you make during Open Enrollment or at your initial benefits eligibility will remain in effect for the plan year (July 1, 2025 – June 30, 2026). During that time, if your life or family status changes according to the recognized events listed below, you are permitted to revise your benefits coverage to accommodate your new status. You may make benefits changes by contacting Human Resources and providing the proper documentation.

IRS regulations govern under what circumstances you may make changes to your benefits, which benefits you can change and what kinds of changes are permitted.

- All changes must be consistent with the qualifying life event.
- In some cases, you can change your benefit plan and modify the level of coverage (such as add or delete dependent).

Any changes in benefit levels must be completed within 31 days of the qualifying life event.

### **QUALIFYING LIFE EVENTS LIST**

#### Marital Status Changes

- Marriage
- Death of spouse
- Divorce
- Spouse gains or loses coverage from another source
- Spouse employer's Open Enrollment

## Covered Dependent Changes

- Birth or adoption of a child
- Death of dependent child
- Dependent becomes ineligible for coverage

### **COBRA**

In most cases, if your employment ends, benefits will terminate on the last day of the month in which you worked. Benefits will end on the day of termination in cases of employee fraud.

Through federal legislation known as the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), you may choose to continue coverage by paying the full monthly premium cost plus an administrative charge of 2% (if applicable).

Each individual who is covered by a Casa Grande Union High School District benefit plan immediately preceding the employee's COBRA event has the right to continue his or her medical, dental, vision, or Flexible Spending Accounts (FSA) plan.

The right to continuation of coverage ends at the earliest of the date:

- you, your spouse or dependents become covered under another group health plan; or,
- you become entitled to Medicare; or,
- you fail to pay the cost of coverage; or
- your COBRA Continuation Period expires



### **Medical Plan Information**

#### **SUMMARY**

Medical benefits provide you and your family access to quality health care. Casa Grande Union High School District offers 2 medical plans with different coverage levels provided through KAIROS Health Arizona, Inc. in cooperation with the Trust. Kairos contracts with UMR (United-Healthcare) for claims processing and use of their provider network. Employees and dependents who are insured under the District medical plan will also have access to the Mayo Clinic network of providers in Arizona.

To search for a UnitedHealthcare Choice Plus or Mayo Clinic provider, go to <a href="mailto:member.umr.com">member.umr.com</a> and scroll down and type in UnitedHealthcare Choice Plus Network in the Provider Network search box.

For benefit related questions, contact UMR (United-Healthcare) at 844.212.6811.

After you receive your ID card, register at <u>member.umr.com</u> to review your claims information.

#### CONTACT

844.212.6811

member.umr.com







### **Medical Plans**

HDHP* with Health Savings Account	Copay Plan
In Network	In Network

Lifetime Maximum Unlimited Unlimited
Calendar Year Unlimited Unlimited

#### Deductibles

 Individual
 \$2,500
 \$750

 Family
 \$5,000\*\*
 Up to 3 max (\$2,250)

 Coinsurance
 20%

#### Out-of-Pocket Maximum

 Individual
 \$5,500
 \$5,500

 Family
 \$11,000
 \$11,000

#### **Hospital Services**

Inpatient Hospital Deductible, then 20% Deductible, then 20%
Outpatient Hospital Deductible, then 20% Deductible, then 20%
Emergency Room Deductible, then 20% Deductible, then 20%
Urgent Care Deductible, then 20% \$100 Copay

#### Routine Services

Office Visit Deductible, then 20% \$25 Copay

Specialist Visit Deductible, then 20% \$50 Copay

Preventive Care Covered in Full Covered in Full

Lab & X-Ray Deductible, then 20% Deductible, then 20%

Chiropractic Deductible, then 20% \$25 Copay (12 visits)

#### **Prescription Drugs**

Tier 1	Deductible, then \$10 Copay	\$10 Copay
Tier 2	Deductible, then 30% to max \$80 copay	30% to max \$80 copay
Tier 3	Deductible, then 30% to max \$110 copay	30% to max \$200 copay
Mail-Order	Deductible, then 30% to max \$200/\$500	\$30 / 30% to max \$200/\$500 copay
Preventive Medications	Covered in Full	Covered in Full

<sup>\*\*</sup>If you have Family coverage under the HDHP, the Family Deductible must be satisfied before the Plan will pay any benefits.

## **Medical Coverage Examples**

The following examples show how each plan might cover medical care in given situations. Use these examples to see, in general, how much financial protection a sample patient might get if they are covered under the different plans available at Casa Grande Union High School District.

Example 1 - Managing a Well-Controlled Condition	<b>Total Charges</b>	\$5,600
D .:		

Routine maintenance of Type 2 Diabetes.

	HDHP	Copay Plan
Deductibles	\$2,500	\$750
Copays	\$0	\$600
Coinsurance	\$900	\$120
Limits or Exclusions	\$20	\$20
Patient Pays	\$3,420	\$1,490

Example 2 – Having a Baby	Total Charges	\$12,700

The cost of a normal delivery including services for the obstetrician, hospital or birthing center, anesthesiologist and pediatrician.

	HDHP	Copay Plan
Deductibles	\$2,500	\$750
Copays	\$0	\$0
Coinsurance	\$2,000	\$2,100
Limits or Exclusions	\$70	\$70
Patient Pays	\$4,570	\$2,920

The information above should be used as an estimate and it is not a price guarantee. Coverage examples are not cost estimators. They are for comparative purposes only. Your own costs will be different depending on the care you receive, the prices your providers charge, and the reimbursement your health plan allows. Before seeking treatment we recommend that you call the provider to verify they are currently in your network and confirm their in-network price for healthcare services you need.

## **Health Savings Account (H.S.A.)**

If you choose to enroll in the High Deductible Health Plan (HDHP), you will have the option of opening an H.S.A. provided by HealthEquity. An H.S.A. is a tax advantaged savings and spending account that can be used to pay for qualified health care expenses.



#### THERE ARE TWO COMPONENTS TO AN H.S.A.-BASED COVERAGE PLAN:

- 1. A qualified health plan is the insurance component that provides medical coverage to you and your family. This health plan includes a deductible of \$2,500 if you enroll under single coverage or \$5,000 if you enroll yourself with a dependent.
- 2. An H.S.A. with HealthEquity which can be funded by pre-tax payroll contributions from you, the District, or both.

The District will contribute \$2,244 annually to your Health Savings Account if you enroll under the HDHP 2,500.

**Questions?** Visit <u>www.healthequity.com</u> or contact HealthEquity at 866.346.5800.

The money contributed to the

will roll over year after year - no

account is yours to keep and

'use it or lose it' rule!

#### **HOW AN H.S.A. WORKS:**

- 1. Enroll in the HDHP 2500 offered by the District
- Contribute to your H.S.A. by payroll deductions on a pre-tax basis:
  - Up to \$4,300 for single coverage
  - Up to \$8,550 if you enroll a dependent
  - An additional \$1,000 if you are age 55 or older
- 3. With your HSA debit card, use your HSA funds to pay for qualified expenses such as:
  - copays
  - deductibles
  - chiropractor
  - dental treatment



- glasses/ contacts
- prescriptions

hearing aids

over the counter drugs and medications

### H.S.A. ELIGIBILITY

To make tax-free contributions to an H.S.A., the IRS requires that:

- You are covered by an H.S.A qualified plan (such as the HDHP 2500)
- You are not enrolled in any other plan that is not considered a High Deductible Health Plan.
- You are not enrolled in Medicare, Medicaid, medical FSA, or have other military health benefits.



### **Telehealth**

**HealthiestYou is our telemedicine vendor.** Please be sure to download the HealthiestYou mobile app to set up your account. The following services and consultations are free to you, your spouse, and your dependent children up to age 26.

#### **TALK TO A DOCTOR 24/7 UNDER \$0 COPAY**

Speak to a licensed physician who can diagnose, treat and prescribe. HealthiestYou is 24/7/365 access to a physician, anytime, anywhere. If you have an issue, schedule a consultation with a HealthiestYou board-certified physician by phone, video or chat. HealthiestYou physicians can diagnose, treat and prescribe medications for a wide variety of common medical conditions, helping you avoid costly and time consuming trips to the doctor or urgent care center.

#### **DERMATOLOGY UNDER \$0 COPAY**

Upload photos of your condition to the mobile app and receive a treatment plan from a dermatologist within two business days.

#### **EXPERT MEDICAL SERVICES UNDER \$0 COPAY**

Receive a second opinion on an existing diagnosis for any condition. Whether you are questioning the accuracy of a diagnosis, trying to decide if surgery is the right treatment, or seeking answers to medical questions, Expert Medical Services will provide personalized medical advice and recommendations from leading experts in their specialties.

The Expert Medical Services care team will gather medical records and select the most-qualified experts to conduct in-depth reviews of your case. **45%** of the time a diagnosis is corrected or modified and **75%** of the time, your treatment is corrected or modified. Contact Expert Medical Services through your HealthiestYou mobile app or at 866.904.0910.







#### **BEHAVIORAL HEALTH UNDER \$0 COPAY**

Schedule an appointment with a therapist over the phone any day of the week. HealthiestYou's licensed therapists are available to schedule a consultation any day of the week. Choose your psychiatrist, psychologist or therapist and pick a time that is convenient for you. You can talk to a therapist from the privacy of your home and they can assist with a variety of conditions and issues. HealthiestYou therapists can treat:

- Anxiety
- Depression
- Stress/PTSD
- Panic disorder
- Family and marriage issues
- And more

HealthiestYou has added a benefit called **myStrength** which can provide you with a personalized plan that is designed just for you based on your responses to a series of questions.

#### **BACK CARE UNDER \$0 COPAY**

Relieve back pain through guided videos with a certified health coach. Here's how it works:

- Member completes a 5 minute back health assessment
- Members are provided a customized back care video program
- Health coach consultations are scheduled via chat or phone
- Program lasts 4 to 8 weeks with access to healthy back training sessions for one year

**Download the HealthiestYou mobile app** for easy access to these services, or go to: <a href="https://member.healthiestyou.com/user/sign-in">https://member.healthiestyou.com/user/sign-in</a>

You can also contact HealthiestYou at 1.866.703.1259.



### **Dental Plans**

#### **DELTA DENTAL PPO BUY-UP OPTION**

#### In Network

#### **Annual Deductibles**

Individual \$50 Family \$150 Annual Plan Maximum \$2,000

#### **Benefits**

Type I - Diagnostic & 100% In / 100% Out
Preventive

Type II - Basic Service 80% In / 80% Out

Type III - Major Services 50% In / 50% Out

#### Orthodontic Benefits

Orthodontia Age
Limitation

Lifetime Maximum

Lifetime Deductible

Adult Orthodontia

19; Banded prior to Age 17

50% to \$1,500

N/A

#### Other Benefits

Periodontic Coverage 80% In / 80% Out Endodontic Coverage 80% In / 80% Out

#### **DELTA DENTAL PPO BASE OPTION\***

In Network

#### **Annual Deductibles**

Individual \$50
Family \$150
Annual Plan Maximum \$1,000

#### Benefits

Type I - Diagnostic & Preventive

Type II - Basic Service 80% In

Type III - Major Services 50% In

#### Orthodontic Benefits

Orthodontia Age Limitation
Lifetime Maximum
Lifetime Deductible
Adult Orthodontia
N/A

#### Other Benefits

Periodontic 80% In (Non-Surgical)

Endodontic (Root Canal) 80% In

\*Stay in Network. If you see a PPO Dentist under the Base Plan, the charges are based on the PPO Dentist's allowable fee (or the actual fee charged) whichever is less. If you see a Premier Dentist while being enrolled under the Base plan, the charges would be based on the Premier Dentist's filed fee so members would pay the difference between the PPO allowable fee and the Premier Dentist's filed fees.



The dental plan includes preventive services and office visits.

<sup>\*</sup> In and out-of-network coverage available

## **Vision Plan**

Standard lenses are covered.



### **AVESIS VISION OPTION**

	In Network	Out of Network	
Exam	\$10 Copay	Reimbursed to \$45	
Frequency	Every 12 Months	Every 12 Months	
Lenses	Covered 100%	Reimbursed to \$30 to \$100	
Single/Bifocal/Trifocal/	after \$10 copay	depending on lens	
Lenticular			
Frequency	Every 12 Months	Every 12 Months	
Frames	\$50 Wholesale or up to \$150 Retail	Reimbursed to \$70	
Frequency	Every 12 Months	Every 12 Months	
Contact Lenses	Medically Necessary	Medically Necessary	
(In lieu of frames)	Covered in Full	Reimbursed to \$250	
	Elective	Elective	
	\$130 Allowance	Reimbursed to \$130	
Frequency	Every 12 Months	Every 12 Months	



## **Disability Information**

Disability coverage can be one of the most important benefits you have. It provides you and your family with financial protection if you are ever unable to work due to an illness or non-work related injury.

#### SHORT TERM DISABILITY

Casa Grande Union High School District pays the entire cost of the Equitable Short Term Disability policy.

Elimination Period: 30 Days

Benefit Amount: 50% of pre-disability weekly

earnings up to \$750

Benefit Duration: 22 Weeks

#### LONG TERM DISABILITY

All employees who work 20 or more hours per week for 20 weeks per year will pay premiums through mandatory contributions to Arizona State Retirement System (ASRS) for Long Term Disability (LTD).

Elimination period: 180 Days

Benefit Amount: 66 2/3% of monthly base salary as

determined by ASRS

### Life / AD&D Insurance

#### **BASIC LIFE INSURANCE AND AD&D**

Casa Grande Union High School District pays 100% of the cost of the Equitable Term Life Insurance Plan. Coverage for each benefit eligible employee is \$50,000 Life and AD&D Benefit.

Life insurance provides protection for those who depend on you financially. Your need varies greatly due to age, number of dependents, dependent ages and your financial situation. Accidental Death and Dismemberment (AD&D) benefits provide a benefit to you or your beneficiary if you are seriously injured or die in an accident.

#### **VOLUNTARY LIFE INSURANCE AND AD&D**

#### **Special Offer During Open Enrollment**

If you are currently enrolled in Voluntary Life, you may increase your coverage by \$20,000 during Open Enrollment without evidence of insurability as long as you do not exceed the guarantee issue limit of \$200,000. Employees may also apply for the first time or increase their coverage beyond \$20,000 if they submit medical evidence of insurability and are approved. If you would like to apply for additional life or increase your coverage during Open Enrollment, please contact your Human Resources team (contact information on page 3).

**New Hires** may purchase Voluntary Life & AD&D up to the following amounts without evidence of insurability:

- \$200,000 Employee Life
- \$30,000 Spouse Life
- \$10,000 Child Life
- Dependent Life (\$5,000 spouse and/or \$2,000 dependent children)

## **Flexible Spending Account**

Employees have the option to enroll in a **Flexible Spending Account** if they enroll under the Copay Plan. A Health FSA is an employer sponsored account that employees use to reimburse their qualified medical expenses as well as their spouse and tax dependents' qualified medical expenses on a tax-free basis. Employees may contribute up to \$3,300 in 2025 toward the Health FSA.

Employees may also contribute to a **Dependent Care** Flexible Spending Account. This is a separate account from the Health FSA. The funds in this account can be used to pay for the care of dependent children under the age of 13, a day care provider, or before or after school pro-

grams. It may also be used to care for a disabled spouse, parent or child over the age of 12. The annual contribution limit for a dependent care FSA is \$5,000.

Under health or dependent care FSAs, there is a "Use it or Lose it' rule. Participants may roll over unused Health FSA dollars to the next plan year but will forfeit any excess over \$660 at the end of the plan year. Employees have 90 days to submit receipts following the plan year end for expenses incurred prior to 6/30/2026.

The FSA is administered by iSolved.

## **Employee Assistance Program**

KAIROS Health Arizona, Inc. in cooperation with the Trust has contracted with ComPsych to provide employees up to 6 face to face sessions per issue per year. Short-term counseling, legal/financial consultations and work-life services are are provided to employees and their families at no cost. You can speak to a master's level counselor who can help with almost any issue ranging from medical and family matters to personal, emotional, legal or financial needs. ComPsych Preferred also provides access to a wide range of national and community resources.

After 6 sessions, if additional face to face visits are needed, an ComPsych representative will assist in referring you to a professional in the UnitedHealthcare Choice Plus network.

Contact **ComPsych** at **833.955.3386**. This toll-free number gives you 24/7 access to a GuidanceConsultant who will answer your questions and refer you to a counselor or provide additional resources. You may also access services online as follows:

Online: guidanceresources.com

Mobile App: GuidanceNow

Web ID: KAIROSEAP

Login and connect directly with a GuidanceConsultant about your issue, or you can access articles, podcasts, videos and other helpful tools.

### **AFLAC**

American Family Life Assurance Company (AFLAC) is pleased to offer Casa Grande Union High School District employees and qualified dependents the opportunity to elect coverage into different Aflac policies. A few things to remember about these policies:

- An AFLAC policy is separate from the other policies listed in this book. Aflac does not replace your medical insurance coverage.
- AFLAC pays you directly, no matter what other insurance you may have.
- You can enroll in one or all of the policies and are eligible to participate in these policies the first of the month following date of hire.

To enroll in these policies, you must meet with an AFLAC representative. **Contact Alison Guidi at 480.656.5268 or alison\_guidi@us.aflac.com for more information.** 

#### **ACCIDENT INSURANCE**

This plan pays cash benefits in the event of an accidental injury that needs emergency treatment. Click here to learn more: <a href="https://www.aflac.com/individuals/products/accident-insurance.aspx">https://www.aflac.com/individuals/products/accident-insurance.aspx</a>

#### **CANCER INSURANCE**

This plan pays cash benefits for an individual diagnosed with internal cancer. Click here to learn more: <a href="https://www.aflac.com/individuals/products/cancer-insurance.aspx">https://www.aflac.com/individuals/products/cancer-insurance.aspx</a>

#### **SHORT TERM DISABILITY**

This plan pays a percentage of your weekly income for a covered illness or injury if you are unable to work. Click here to learn more: <a href="https://www.aflac.com/individuals/products/short-term-disability-insurance.aspx">https://www.aflac.com/individuals/products/short-term-disability-insurance.aspx</a>

#### **HOSPITAL INSURANCE**

This plan helps with deductibles and out of pocket expenses. Click here to learn more: <a href="https://www.aflac.com/individuals/products/hospital-insurance.aspx">https://www.aflac.com/individuals/products/hospital-insurance.aspx</a>

#### **CRITICAL ILLNESS INSURANCE**

This plan pays a cash benefit to an individual for a specific diagnosis. Click here to learn more: <a href="https://www.aflac.com/individuals/products/critical-illness-insurance.aspx">https://www.aflac.com/individuals/products/critical-illness-insurance.aspx</a>







## **Employee Rate Worksheet**

Use this worksheet to provide a general estimate of your benefits costs for the upcoming plan year. This is a great place to start planning for you and your family's health and wellness for next year.

	MEDICAL PLANS			
	HDHP		COPAY PLAN	
	26 PAYS	22 PAYS	26 PAYS	22 PAYS
EMPLOYEE ONLY	\$0.00	\$0.00	\$0.00	\$0.00
EMPLOYEE + SPOUSE	\$269.54	\$318.55	\$358.62	\$423.82
DUAL SPOUSE*	\$15.23	\$18.00	\$18.00	\$21.27
EMPLOYEE + CHILD(REN)	\$204.92	\$242.18	\$272.77	\$322.36
FAMILY	\$449.08	\$530.73	\$598.15	\$706.91
DUAL SPOUSE* + CHILD(REN)	\$194.77	\$230.18	\$257.54	\$304.36

	DENTAL PLANS			VISION PLAN		
	BASE		BUY UP			
	26 PAYS	22 PAYS	26 PAYS	22 PAYS	26 PAYS	22 PAYS
EMPLOYEE ONLY	\$0.00	\$0.00	\$7.90	\$9.34	\$0.00	\$0.00
EMPLOYEE + SPOUSE	\$11.20	\$13.24	\$27.00	\$31.91	\$2.29	\$2.71
DUAL SPOUSE*	\$0.00	\$0.00	\$15.78	\$18.64	\$0.00	\$0.00
EMPLOYEE + CHILD(REN)	\$11.42	\$13.49	\$31.47	\$37.19	\$3.37	\$3.98
FAMILY	\$22.78	\$26.92	\$54.97	\$64.97	\$4.89	\$5.78
DUAL SPOUSE* + CHILD(REN)	\$11.55	\$13.65	\$43.74	\$51.70	\$1.83	\$2.17

<sup>\*</sup>Dual spouse refers to two employees, married to each other, both working for the district

## **Login Instructions For Employees**

The annual Open Enrollment Period for making benefit changes is April 28th through May 16th. During this period, you may review and update your benefit elections online. To ensure accuracy of your enrollment, please review your personal and enrollment information by logging into Common Benefits per the instructions below.

Beginning April 28th, you may submit changes for the 2025-2026 plan year in Common Benefits. Scroll down and click "Continue" at the bottom of each page, update your elections, and continue through the screens until you reach the end where you will Accept and Sign, then click the blue ribbon titled Finish and Logout.

- Go to: <u>www.commonbenefits.com</u>
- Type "Casa Grande Union High School District"
- Click "Individual"
- Enter "User name" and "Password"
- Click "Login"

For account name and password help, please contact one of the HR team.

#### **BENEFIT FAIRS & ONLINE ASSISTANCE**

#### **Casa Grande Union High School**

Tuesday, April 29th 2:30-4:30pm Location: Library

#### **Vista Grande High School**

Wednesday, April 30th 2:30 pm – 4:30 pm Location: Agora

#### **KAIROS BENEFITS E-GUIDE**

Casa Grande Benefits eGuide



#### MEDICAL PLAN COMPARISON TOOL

Click here to use a medical plan comparison tool.



### **Important Phone Numbers**

#### **UMR (UnitedHealthcare)**

Medical 844.212.6811

www.umr.com

Employee Portal: member.umr.com

#### HealthEquity Medical

866.346.5800

www.healthequity.com

#### Delta Dental Dental PPO

602.938.3131, option 1 www.deltadentalaz.com

#### **Avesis Vision**

800-522-0258 www.avesis.com

#### ComPsych

833.955.3386

guidanceresources.com

Web ID: KAIROSEAP

Mobile App: GuidanceNow

#### **Equitable**

1.866.274.9887

ebcustomerservice@equitable.com

## Arizona State Retirement System Long Term Disability

520.239.3100

800.621.3778 www.azasrs.gov

#### **Glenda Cole**

Director, Human Resources 520.316.3360 x 1104 gcole@cguhsd.org

#### Elizabeth Maldonado, HR Coordinator

emaldonado@cguhsd.org

520.316.3360 x1111

#### Marie Paredes Ramirez, HR Specialist

Mparedes-ramirez@cguhsd.org

520.316.3360 x1118

#### **Damaris Ybarra**

dybarra@cguhsd.org 520.316.3360 x1108

#### **FSA Inquiries**

iSolved

866-370-3040

#### **Mary Jane Radel**

Payroll Technician 520.316.3360 x 1114

mjradel@cguhsd.org

#### **AFLAC**

#### Alison Guidi

480.656.5268

alison\_quidi@us.aflac.com

#### LegalShield

#### **Brenda Anderson**

602.617.3209

brendaanderson@legalshieldassociate.com

#### **TSA Consulting**

(888) 796-3786

tsacg.com

#### **CapFi Consulting**

Allison Sparks 480.719.3528





#### **ABOUT THIS BOOKLET**

This booklet highlights important features of Casa Grande Union School District's benefits for its benefit eligible employees. While efforts have been made to ensure the accuracy of the information presented, in the event of any discrepancies your actual coverage and benefits will be determined by the legal plan documents and the contracts that govern these plans.

