

2019 Certificated Retiree Health Plan

Retiree Benefits Guide



METRO
NASHVILLE
PUBLIC
SCHOOLS



 Be smart
Live well

2019



Table of contents

Medical

Options for enrollees age 65 and older with Medicare A & B2-5

Options for enrollees under age 65 without Medicare..... 6-9

Dental10

Vision/Hearing 11

Your cost.....12

Important contactsback cover



"I just decided to do it."

Scott Davis has lost 50 pounds and a few clothing sizes. But what you *don't* see may be even more important.

Since he started using MNPS Employee Wellness Center services, he's off cholesterol medication and has reduced his blood pressure medicine — a significant move, since he's had hypertension that started in his teens.

Scott tried the Center for a couple of weeks and was hooked.

"I just decided to do it," he says. "Now I go five times a week. If I miss a day, they want to know where I was."

Health coach Bobbi Nickel encouraged Scott and helped him stay motivated along the way. So when his weight-loss efforts stalled, he didn't give up; instead, he downloaded an app that tracked what he was eating. He learned his sugar intake was a little high.

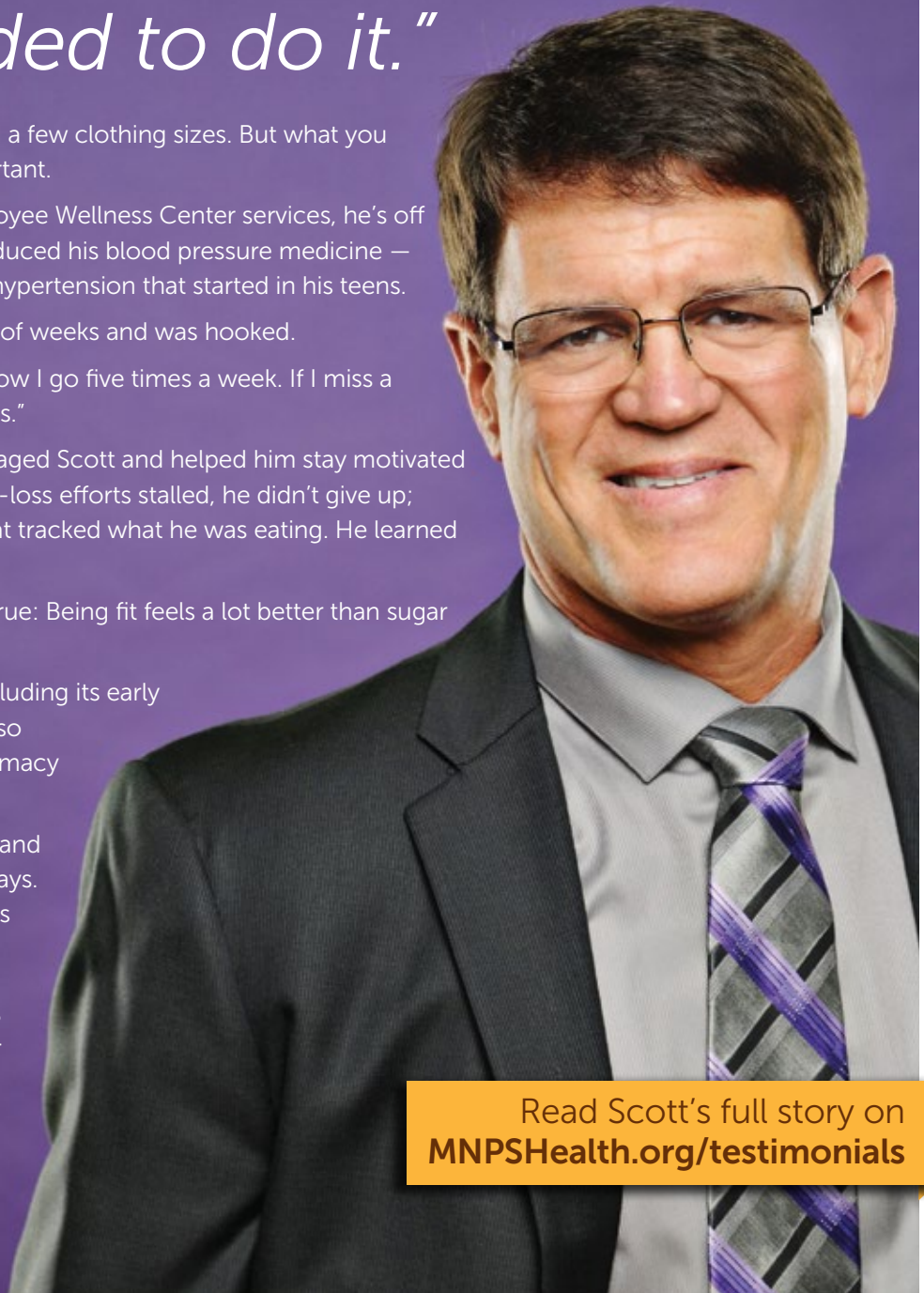
"Someone said this to me and it's true: Being fit feels a lot better than sugar tastes!" he says.

Scott appreciates Center perks, including its early morning hours and showers. He also frequents the Center's Kroger pharmacy and the Daily Grind café.

"Every morning I check my weight and blood pressure at the Center," he says. "It's been amazing to see the results over the last nine or 10 months."

Dr. Scott Davis
MNPS Administrator

Turn to page 7 for more on the MNPS Employee Wellness Center.



Read Scott's full story on
MNPSHealth.org/testimonials

START HERE

Coverage options for enrollees WITH Medicare differ from coverage options for enrollees WITHOUT Medicare. Follow the path that describes your situation. **Retirees and their eligible dependents may follow different paths.**

Retirees and dependents **with Medicare A & B**

Follow the orange path for your benefits.
You have two options for retiree coverage:

Cigna Medicare Surround Plan

with Cigna-HealthSpring
Rx (PDP)

Cigna-HealthSpring Medicare Advantage Plan

with Medicare Part D
Prescription Drug Coverage

See pages 2-5 for details.

Both plans include MNPS dental, vision and hearing coverage

See pages 10-11.

During annual transfer:
Read your enrollment materials to learn what's changing for 2019

Do nothing

If you're happy with your current plan, you don't have to do anything; your coverage will continue in 2019.

Elect a different option

If you want to switch from the Surround to the Medicare Advantage plan or vice versa, follow the steps on page 13 by November 30, 2018.

Retirees and dependents **under age 65 without Medicare**

Follow the green path for your benefits.
You have coverage under:

Cigna Medical Plan

You will remain covered under this plan until you become eligible for Medicare.

Learn more on pages 6-9.

Your plan includes MNPS dental, vision and hearing coverage

See pages 10-11.

During annual transfer:
Read your enrollment materials to learn what's changing for 2019

Do nothing until you become eligible for Medicare

Then you must enroll for Medicare Parts A & B and send a copy of your Medicare card to Employee Benefit Services.* This allows you to move to the Cigna Medicare Surround Plan (as discussed on page 2) and for your premium to be reduced.

* Provided you're not covered under any other active employee medical plan such as a spouse's employer plan.

Cigna Medicare Surround Plan

with Cigna-HealthSpring Rx (PDP)

The Cigna Medicare Surround Plan, administered by Cigna, helps pay some of the health care costs that your Medicare Part A or Part B does not cover.

How the plan works

The Medicare Surround plan pays half of what Medicare does not pay, and you pay the other half. For example, if Medicare pays 80% for a covered service, leaving 20%, you will pay 10% and the plan will pay 10%. See the chart on page 4.

Choosing a provider

The Medicare Surround does not require you to use network providers. You can visit any health care provider who accepts Medicare. You don't need to select a primary care physician, and you don't need a referral to see a specialist.

To find doctors who accept Medicare, visit medicare.gov or call **1-800-MEDICARE (1-800-633-4227)**, 24 hours a day, 7 days a week. TTY/TDD users call **1-877-486-2048**.

ID cards

There are two ID cards: one for medical/hospital expenses from Cigna with the word INDEMNITY printed on the front; the other for prescription expenses from Cigna-HealthSpring Medicare Rx PDP. You will not receive new cards for 2019.

Prescription drugs

Under the Medicare Surround, coverage for prescription drugs is provided through the Cigna-HealthSpring Rx (PDP). This plan is an approved Medicare Part D plan. The plan has been deemed creditable and is equal to or better than the Medicare Part D plan. Therefore, MNPS retirees in the Cigna Medicare Surround do not need to enroll in an independent Medicare Part D plan; doing so would result in the cancellation of your MNPS coverage.

Benefits for covered prescription drugs are based on a drug list, called a formulary. You can view the drug list and see how your current medications are classified in the booklet included in your Cigna renewal packet.

See the chart on page 5 for prescription drug copay amounts. If you use an out-of-network pharmacy, you will pay more out of pocket.

Finding network pharmacies

To locate network pharmacies, call the number listed below or visit cigna.com.

Questions?

If you have questions about the Medicare Surround, call Cigna Customer Service at **1-800-Cigna24 (1-800-244-6224)**, 24 hours a day, 7 days a week. For prescription drug questions, call **1-800-558-9562 (TTY 711)**.

After you enroll in the Medicare Surround, visit myCigna.com. Once you create a user ID and password, you can access a secure members-only website and:

- » View details about your plan
- » Search for providers
- » Find wellness discounts
- » And more!

Extra benefits

NEW FOR 2019!

Discounted fitness center membership

As a Surround plan enrollee, you now have access to Cigna's Active&Fit Direct™ program, which offers fitness center memberships at 8,000+ fitness centers nationwide for \$25/month (plus a \$25 enrollment fee). To learn more and get started, visit ActiveandFitDirect.com/fitness/Cigna.

Chronic condition management

If you live with a chronic condition like diabetes, high cholesterol or asthma, the MNPS Health Care Centers can help you manage it. You also qualify for certain free medications through the Cigna-HealthSpring Rx (PDP) plan to manage your condition(s). Visit MNPSHealth.org/healthcoaching for more information.



Cigna-HealthSpring Medicare Advantage Plan

with Medicare Part D Prescription Drug Coverage

The Cigna-HealthSpring Medicare Advantage* Plan (MAPD) covers everything Original Medicare (Parts A and B) covers, plus many extras, including Part D prescription drug and other value-added benefits. The Cigna-HealthSpring plan is designed for retirees who want a lower-cost option.

How the plan works

When you enroll in the plan, you will choose a primary care physician, or PCP, from Cigna-HealthSpring's network of contracted doctors. Your PCP is the team leader for all your health care needs. He or she will refer you to and communicate with specialists in Cigna-HealthSpring's network to ensure you get quality care when and where you need it.

With the Cigna-HealthSpring plan, there are no deductibles. You simply pay an affordable copay or coinsurance amount for covered services. This enhanced level of coverage helps keep your out-of-pocket costs low and is possible because all of your care is provided through Cigna-HealthSpring's network. There are no benefits for out-of-network non-emergency care. However, in an emergency, you should seek care at the nearest emergency facility and your care will be covered at the in-network level. See the chart on page 4.

Choosing a provider

For the most current list of Cigna-HealthSpring providers, or to choose a PCP, visit cignahealthspring.com; click Find a Doctor. Or call Customer Service at **1-888-281-7867 (TTY 711)**.

Extra benefits

- Cigna-HealthSpring members also enjoy extras like:
- » Home meal delivery after a hospital stay at no cost to you **NEW FOR 2019!**
 - » The Silver&Fit® Fitness Program, which includes free membership at a participating fitness center like the YMCA; visit silverandfit.com.

See your Cigna-HealthSpring packet for more details on these extras.

ID cards

The Cigna-HealthSpring MAPD has only one ID card for both medical and prescription coverage. All MAPD enrollees will receive a new ID card for 2019.

Prescription drugs

The Cigna-HealthSpring plan includes Medicare Part D prescription drug coverage. Therefore, MNPS retirees in this plan do not need to enroll in an independent Medicare Part D plan; doing so would result in the cancellation of your MNPS coverage.

Benefits for covered prescription drugs are based on a drug list, called a formulary. You can view the drug list and see how your current medications are classified in the booklet included in your Cigna-HealthSpring packet.

See the chart on page 5 for prescription drug copay amounts.

Finding network pharmacies

To locate network pharmacies, see the Provider Directory included in your Cigna-HealthSpring packet, or visit cignahealthspring.com. Click Find a Pharmacy/Drug.

Questions?

If you have questions about the plan, call Cigna-HealthSpring Customer Service at **1-888-281-7867 (TTY 711)**. Hours are 8 a.m.-8 p.m., 7 days a week.

* Medicare Advantage plans are health plans approved by Medicare and provided by private companies like Cigna-HealthSpring. Medicare sets the rules for these plans and regulates the private companies that operate them.



Medical benefits ... at a glance

MEDICAL	Cigna Medicare Surround		Cigna-HealthSpring MAPD
Lifetime maximum benefit	None		None
Annual deductible (applies to Part B services only)	Cigna pays 50% of your Part B deductible; you pay 50%		\$0
Annual out-of-pocket maximum	\$2,000		\$1,500
	After Part B deductible, Medicare pays¹...	After Part B deductible...	You pay...
Wellness			
Preventive care/immunizations	100% (no deductible)	You pay \$0	\$0
Office/routine care			
MNPS Employee & Family Health Care Center visits	N/A	You pay \$0	\$5
Primary care visits	80%	Cigna pays 10%; you pay 10%	\$5
Specialist visits	80%	Cigna pays 10%; you pay 10%	\$10
In-office lab, radiology, surgery, injections, second opinions	80%	Cigna pays 10%; you pay 10%	Included in office visit copay
Urgent care	80%	Cigna pays 10%; you pay 10%	\$10
Office/routine care			
Lab services (diagnostic)	100% (no deductible)	You pay \$0	\$0
Lab/x-ray services, dialysis, chemotherapy, radiation therapy	80%	Cigna pays 10%; you pay 10%	10%
Short-term rehabilitation visits	80%	Cigna pays 10%; you pay 10%	\$10
Durable medical equipment	80%	Cigna pays 10%; you pay 10%	10%
Part B drugs ²	80%	Cigna pays 10%; you pay 10%	10%
Hospital care			
Inpatient - facility services	Day 1-60: 100% after \$1,340/ confinement deductible; Day 61+: see benefit summary	Day 1-60: Cigna pays half of deductible; you pay other half Day 61+: see benefit summary	\$0 (unlimited days)
Inpatient - professional services	80%	Cigna pays 10%; you pay 10%	\$0
Emergency (waived if admitted)	80%	Cigna pays 10%; you pay 10%	\$120
Ambulance	Up to 80%	Cigna pays rest; you pay \$0	\$0
Outpatient surgery - facility services	80%	Cigna pays 10%; you pay 10%	\$0
Outpatient non-surgical - facility services	80%	Cigna pays 10%; you pay 10%	\$10
Advanced imaging/radiation therapy	80%	Cigna pays 10%; you pay 10%	10%
Skilled nursing facility (see benefit summary for days 101+)	Day 1-20: 100% Day 21-100: Cigna pays all but \$167.50/day	Day 1-20: You pay \$0 Day 21-100: Cigna pays half of day rate; you pay other half	\$0
Home health care	100% (no deductible)	\$0	\$0
Mental health and substance abuse			
Inpatient	See inpatient above	See inpatient above	See inpatient above
Outpatient visit (individual)	80%	Cigna pays 10%; you pay 10%	\$10
Outpatient visit (group)	80%	Cigna pays 10%; you pay 10%	\$5

¹ The amount Medicare pays for covered services is subject to change annually. Medicare payment amounts for 2019 had not been announced at the time this guide was printed. For the most current information, see [Medicare.gov](https://www.medicare.gov).

² Includes but is not limited to inhaled nebulizer medications, injectable drugs/IV drugs, antigens, osteoporosis drugs, erythropoiesis, blood clotting factors, immunosuppressive drugs, oral cancer drugs, oral anti-nausea drugs; follows Medicare standard guidelines

Prescription drug benefits ... at a glance

PRESCRIPTION DRUGS	Cigna Medicare Surround with Cigna-HealthSpring Rx (PDP)		Cigna-HealthSpring MAPD with Medicare Part D Prescription Drug Coverage
	During Initial Coverage and Coverage Gap ¹ (until you have spent \$5,000 in true out-of-pocket Rx costs)		
You pay... (unless otherwise noted)	Kroger	Other pharmacies	
Certain preventive drugs			
Generic and brand	\$0		See retail copays below
Network retail (30-day supply)			
Tier 1: generic	\$2	\$5	\$5
Tier 2: preferred brand	\$20	\$25	\$10
Tier 3: non-preferred brand	\$75	\$80	\$25
Tier 4: high-cost specialty ²	\$75	\$80	\$25
Out-of-network	N/A	40%	See note below ³
Network retail (60-day or 90-day supply)			
Tier 1: generic	\$4	\$10	\$10
Tier 2: preferred brand	\$40	\$50	\$20
Tier 3: non-preferred brand	\$150	\$160	\$50
Tier 4: high-cost specialty ²	N/A	N/A	N/A
Out-of-network	N/A	40%	N/A
Mail order (30-day supply)			
Tier 1: generic	N/A	\$5	\$5
Tier 2: preferred brand	N/A	\$25	\$10
Tier 3: non-preferred brand	N/A	\$80	\$25
Tier 4: high-cost specialty ²	N/A	\$80	\$25
Out-of-network	N/A	N/A	See note below ³
Mail order (60-day or 90-day supply)			
Tier 1: generic	N/A	\$10	\$10
Tier 2: preferred brand	N/A	\$50	\$20
Tier 3: non-preferred brand	N/A	\$160	\$50
Tier 4: high-cost specialty ²	N/A	N/A	N/A
Out-of-network	N/A	N/A	N/A
PRESCRIPTION DRUGS (retail and mail order)	Catastrophic Coverage (once you have paid \$5,100 in true out-of-pocket Rx costs)		
Generic	Greater than 5% of cost or \$3.40		
Brand	Greater than 5% of cost or \$8.50		

¹ Although some Medicare prescription drug plans do not provide coverage during the coverage gap, also known as the donut hole, the Medicare Surround and Cigna-HealthSpring Rx (PDP) and Cigna-HealthSpring MAPD plans do, so there is no gap in coverage.

² Specialty drugs are limited to a 30-day supply per fill.

³ Prescriptions purchased out-of-network are paid at the in-network level, but you're responsible for any difference between the out-of-network pharmacy billed charge and the actual in-network allowable amount. Limited to 30-day supply.

Cigna medical plan

The medical plan for retirees under age 65 without Medicare is administered by Cigna and covers a wide range of services, including preventive care, office visits, surgery, hospitalization and prescription drugs. See the chart on pages 8-9 for details.

How the plan works

The medical plan centers around Cigna's Open Access Plus (OAP) network of health care providers. When you use OAP network providers and facilities, you receive in-network benefits and generally pay less out of your own pocket. You also have the flexibility to use providers outside the OAP network and still receive benefits; however, you will receive lower out-of-network benefits and likely pay more out of your pocket. Out-of-network benefits are also subject to Cigna's maximum reimbursable charge; if your out-of-network provider's charges exceed this limit, you will be responsible for paying the difference.

The amount you pay depends on the service or product you receive. Office visits and prescription drugs are covered with a copay, no deductible required. Other services require you to meet a deductible first, then pay a percentage of the cost (coinsurance). See the chart on pages 8-9.

Amounts paid toward the deductible and medical copays **do** apply toward the medical out-of-pocket maximum.

Choosing a provider

You don't need to select a primary care physician, and you don't need a referral to see a specialist. However, your out-of-pocket costs will be lower if you use in-network providers.

To find network providers, call **1-800-244-6224** or:

- » If currently enrolled in an MNPS Cigna plan, visit **myCigna.com**.
- » If not yet enrolled, visit **cigna.com** and search for a provider under Open Access Plus.

ID card

You will not receive a new Cigna ID card for 2019; you should continue to use your current card.

Prescription drugs

The medical plan covers prescription drugs for a flat copay. The amount you pay depends on the drug's tier. See the chart on page 9 for copay amounts. Prescription drug copays **do** apply to your pharmacy out-of-pocket maximum, which is separate from the medical out-of-pocket maximum.

If you choose a brand name drug when a generic is available, you will pay the brand name copay, plus the cost difference between the brand name and the generic. There is one exception: If your doctor specifies that the brand name drug is medically necessary and gets required authorization from Cigna, you will pay only the brand name copay.

Questions?

If you have questions about the medical plan, call Cigna Customer Service at **1-800-Cigna24 (1-800-244-6224)** 24 hours a day, 7 days a week. TTY/TDD users should call **711**.

After you enroll, visit **myCigna.com**. Once you register for a user ID and password, you can access a secure members-only website and:

- » View details about your plan, including claims information
- » Search for providers
- » Find wellness discounts
- » And more!

Continued on page 8

MNPS Employee & Family Health Care Centers

The Vanderbilt Health at MNPS Employee & Family Health Care Centers offer certificated retirees and their covered family members many benefits*, including:

- » Office visits for minor illnesses and injuries, lab work, annual physicals, immunizations, preventive care and more
- » Care provided by highly qualified, Board-certified Vanderbilt family nurse practitioners who can treat you as needed or serve as your primary care provider
- » Help managing chronic health conditions such as diabetes, heart disease, obesity, asthma and COPD
- » Health coaching when you want to make health improvements; you choose in-person visits with our onsite health coach or by phone with Cigna health advocates
- » Additional services at the MNPS Employee Wellness Center at Berry Hill:
 - Physical therapy (unlimited visits)
 - Chiropractic care
 - Behavioral health care (unlimited visits for stress, anxiety, depression, etc.)
 - Full-service Kroger pharmacy
 - Full-service fitness center
 - The Daily Grind café, featuring a healthy menu and proudly serving Starbucks®

* Clinical services provided at no out-of-pocket cost when covered by an MNPS Cigna medical plan (Exception: Medicare rules required that Cigna-HealthSpring members pay their regular copay amounts).

Visit us at one of our five Davidson County locations:

CENTRAL

MNPS Employee Wellness Center at Berry Hill
2694 Fessey Court, Nashville
Clinic: M-F 7 a.m.-7 p.m., Sat. 8 a.m.-2 p.m.

NORTHEAST

Two Rivers Middle
2995 McGavock Pike, Nashville
M-F 8 a.m.-6 p.m.

NORTH

Taylor Stratton Elementary
306 Old Hickory Blvd. West, Madison
M-F 7 a.m.-6 p.m.

SOUTHEAST

Mt. View Elementary
3812 Murfreesboro Road, Antioch
M-F 7 a.m.-5 p.m.

WEST NEW LOCATION!

Bellevue Middle
655 Colice Jeanne Road, Nashville
M-F 8 a.m.-6 p.m.

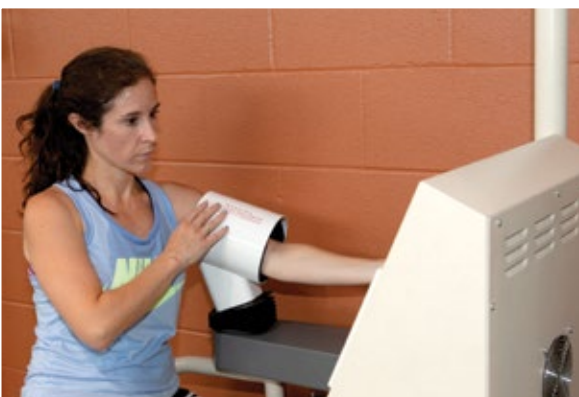
615-259-8755 • MNPSHealth.org



Vanderbilt Health

at Metro Nashville Public Schools
Employee & Family Health Care Centers

Visit MNPSHealth.org for more details



Medical/prescription drug benefits ... at a glance

MEDICAL	In-network	Out-of-network
Lifetime maximum medical benefits	Unlimited	Unlimited
You pay...		
Annual deductible ¹	\$300/person \$900/family	\$800/person \$2,050/family
Annual medical out-of-pocket maximum ¹	\$2,500/person \$7,500/family	\$5,000 person
Wellness		
Preventive care/immunizations	\$0	40% after deductible
Office/routine care		
MNPS Employee & Family Health Care Center visits ²	\$0	N/A
Primary care/convenient care clinics	\$30	40% after deductible
Specialist visits	\$40	40% after deductible
Lab/x-ray in physician's office	\$0	40% after deductible
Urgent care facility	\$30	\$30
Chiropractic (up to 24 visits/year)	\$40	Not covered
Physical, occupational and speech therapy	10% after deductible	40% after deductible
Durable medical equipment	10% after deductible	40% after deductible
Hospital care/outpatient facility		
Outpatient surgery	10% after deductible	40% after deductible
Outpatient/diagnostic facility	10% after deductible	40% after deductible
Emergency (copay waived if admitted)	\$150, then 10% after deductible	
Ambulance	10% after deductible	
Skilled nursing facility	10% after deductible	40% after deductible
Home health care	10% after deductible	40% after deductible
Mental health and substance abuse treatment		
Inpatient treatment	10% after deductible	40% after deductible
Outpatient visit (individual and group)	\$30	40% after deductible

¹ Copays do not count toward the deductible, but copays and deductible do count toward your out-of-pocket maximum. Office visits are covered with a copay and not subject to the deductible.

² Includes care provided at the Employee Wellness Center at Berry Hill: physical therapy, chiropractic and behavioral health (see page 7)

Continued on page 9

Summary of Benefits and Coverage

In accordance with the Patient Protection and Affordable Care Act, MNPS and Cigna have created a Summary of Benefits and Coverage (SBC), which provides additional information about your MNPS medical plan. You can find the SBC online at MNPSBenefits.org. Or request a free, printed copy by contacting Employee Benefit Services at **615-259-8463** or benefits@mnps.org.

PRESCRIPTION DRUGS³	Kroger pharmacies	Other pharmacies	Out-of-network
Annual pharmacy out-of-pocket maximum	\$1,500/person \$3,000/family		
Certain preventive drugs			
Generic and brand	\$0		\$0
Network retail (30-day supply)			
Generic	\$2	\$5	\$5
Preferred brand	\$20	\$25	\$25
Non-preferred brand	\$75	\$80	\$80
Network retail (90-day supply)			
Generic	\$4	Not covered	Not covered
Preferred brand	\$40	Not covered	Not covered
Non-preferred brand	\$150	Not covered	Not covered
Mail order (90-day supply)		Cigna home delivery	Other pharmacies
Generic	\$10		Not covered
Preferred brand	\$50		Not covered
Non-preferred brand	\$160		Not covered

³ If you choose a brand name drug when a generic is available, you will pay the brand name copay, plus the cost difference between the brand name and the generic. There is one exception: If your doctor specifies that the brand name drug is medically necessary and gets required authorization from Cigna, you will pay only the brand name copay.



Dental

With your medical coverage, you automatically receive coverage for dental care through Delta Dental of Tennessee.

How the plan works

You can see any dentist you choose, but dental benefits are highest when you choose a provider in the Delta Dental Premier or PPO networks. For a list of providers, call **1-800-223-3104** or visit deltadentaltn.com/mnps.

On the website, you'll find a consumer toolkit where you can order ID cards, view claims and find dental health information.

If you go to a non-Delta provider and charges exceed the Maximum Plan Allowance (MPA), you must pay the difference.

You will not receive an ID card for dental coverage. Simply identify yourself as a member when seeking care/services.

Dental benefits ... at a glance

DENTAL	In-network (Delta Premier/PPO dentists)	Out-of-network ¹ (Non-Delta dentists)
Annual deductible (does not apply to preventive/diagnostic services)	\$50/person \$150/family	\$50/person \$150/family
Plan pays...		
Preventive/diagnostic ² (exams/cleanings up to 2 per year, x-rays, fluoride treatments)	100%; no deductible	100%; no deductible
Basic restorative (fillings, extractions, oral surgery, root canals, periodontics)	80% after deductible	80% after deductible
Major restorative (crowns, bridges, dentures, implants)	50% after deductible	50% after deductible
Orthodontia (for children under age 19)	50%; no deductible	50%; no deductible
Annual benefit maximum (not including preventive/diagnostic care or orthodontia)	\$1,000/person	\$1,000/person
Lifetime orthodontia maximum	\$1,000/person	\$1,000/person

¹ Delta Premier and PPO dentists have agreed to a lower contracted fee for services; if you use a non-Delta provider, you'll be responsible for charges exceeding the Maximum Plan Allowance (MPA).

² Preventive/diagnostic benefits do not count toward your annual benefit maximum.



Prevention is the key to a healthy smile! Preventive dental care is covered at 100% when you use network providers, with no deductibles or copays. Each covered family member can receive x-rays and up to two exams/cleanings a year.


Vision

Vision coverage, offered through EyeMed, is provided with your medical coverage at no additional cost to you. The plan covers eye exams, frames, lenses and contacts, and provides discounts on many other products and services.

How the plan works

You can see any provider you choose, but you receive the highest benefits when you use EyeMed network providers. For a list of providers, visit eyemed.com (select Find a Provider, then select the Insight network from the dropdown menu).

If you have questions about your vision coverage, call EyeMed Customer Service at **1-866-800-5457**.



In addition to great coverage, EyeMed also gives you 40% off additional pairs of glasses, 20% off non-prescription sunglasses and 15% off Lasik. And you can order contact lenses from **ContactsDirect.com**, our online network provider. Shipping is free once your prescription is verified. Visit eyemed.com or download the EyeMed Members app.

Vision benefits ... at a glance

VISION	In-network (EyeMed provider)	Out-of-network (Non-EyeMed provider)
Annual deductible	\$0	\$0
Eye exams (every 12 months)	You pay \$10 copay	Plan pays up to \$45
Frames (every 24 months)	You pay \$0 copay (up to \$120 retail, then 20% off)	Plan pays up to \$50
Lenses (every 12 months) - Single vision - Bifocals - Trifocals - Standard progressive	You pay \$10 copay You pay \$10 copay You pay \$10 copay You pay \$65 copay	Plan pays up to \$40 Plan pays up to \$55 Plan pays up to \$70 Plan pays up to \$55
Contact lenses (materials only) - Conventional - Disposable - Medically necessary	Plan pays up to \$120 (15% off balance over \$120) Plan pays up to \$120 Plan pays 100%	Plan pays up to \$120 Plan pays up to \$120 Plan pays up to \$210
Additional pairs	Once above benefits used, receive 40% off eyeglasses and 15% off conventional contacts	N/A

Hearing

A hearing benefit, offered through Epic Hearing Health Care, is provided with your medical coverage at no additional cost to you.

How the plan works

The plan covers a hearing exam at 100%, no copay required, and pays a hearing aid benefit of up to \$700 per ear when you use Epic's network of providers. Plan features include:

- » Brand name hearing aids and professional care at 30%-60% below retail
- » Largest network of audiologists and ENTs in the country
- » Out-of-network coverage available
- » Extended product warranty
- » Money-back guarantee trial period

Visit epichearing.com/mnps for more information. Call **1-866-956-5400** to speak with a hearing counselor and get started. Hours are 8 a.m.-8 p.m. Central Time.

Your cost

Per member per month, effective July 1, 2018

PLAN ¹	With or without Medicare	Monthly cost
Cigna Medicare Surround Plan with Cigna-HealthSpring Rx (PDP)	Retiree and/or spouse with Medicare	\$123.69/member
Cigna-HealthSpring Medicare Advantage Plan with Part D drug coverage	Retiree and/or spouse with Medicare	\$51.00/member
Cigna Medical Plan	Retiree and/or spouse without Medicare	\$196.48/member
	Dependent child without Medicare	\$83.84/dependent child

¹ All plans include dental coverage through Delta Dental, vision coverage through EyeMed and hearing coverage through Epic Hearing Health Care.

Cost examples

Example 1

Retiree with Medicare chooses the Surround plan
 Dependent child not covered by Medicare enrolls in the Cigna medical plan

\$123.69 (retiree)
 + \$ 83.84 (child)

 \$207.53/month

Example 2

Retiree and spouse, both with Medicare, choose the Medicare Advantage plan

\$ 51 (retiree)
 + \$ 51 (spouse)

 \$102/month

Example 3

Retiree and spouse, neither covered by Medicare, enroll in the Cigna medical plan

\$196.48 (retiree)
 + \$196.48 (spouse)

 \$392.96/month

Example 4

Retiree not covered by Medicare enrolls in the Cigna medical plan
 Spouse with Medicare chooses the Surround plan

\$196.48 (retiree)
 + \$123.69 (spouse)

 \$320.17/month

Example 5

Retiree with Medicare chooses the Medicare Advantage plan
 Spouse without Medicare enrolls in the Cigna medical plan

\$ 51.00 (retiree)
 + \$196.48 (spouse)

 \$247.48/month



If you want to change your coverage for 2019

Follow these steps to enroll online:

1. Log on.

- » Go to MNPSBenefits.org.
- » Click Certificated Retiree > Annual Transfer.
- » At the Benefit Express login page, follow the login instructions.
- » At the Welcome page, click Enroll (right side of page) and answer a few questions.

2. Update dependent information.

- » Follow the prompts to update dependent information (you can only add dependents following a qualifying event)

3. Choose your benefits.

- » Follow the prompts to select your coverage.
- » If you choose the Cigna-HealthSpring Medicare Advantage Plan, you must select a primary care physician.
- » Choose the guided walk-through if you need help.

4. Confirm your elections.

- » View your Confirmation Statement. If you're satisfied with your elections, you may print a copy of the statement for your records.
- » Log out.

If you submit a paper enrollment form, you do NOT need to go online to enroll.

Follow these steps to enroll on paper:

1. Complete the enrollment form included in this packet.

- » Remember, each enrollee must make an individual election on the form.

2. Return the form to:

Employee Benefit Services
Metro Nashville Public Schools
2601 Bransford Avenue
Nashville, TN 37204
Fax: 615-214-8665
Email: benefits@mnps.org

If you enroll online, you do NOT need to submit a paper enrollment form.

Deadlines

For retirees enrolling or changing plans during annual transfer: November 30, 2018.

For retirees enrolling as the result of a special enrollment or qualifying event: within 60 days of the event.

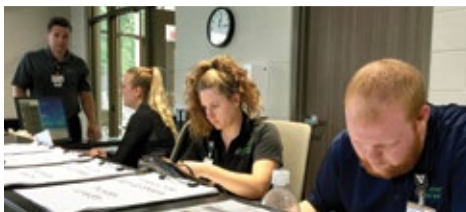
Questions?

Contact Employee Benefit Services at **615-259-8464** or **615-259-8648** or benefits@mnps.org.

This brochure provides highlights of Metro Nashville Public Schools' certificated benefits program. It is not intended to include all benefit plan details. Complete details about how the plans work are included in the plan documents, which are available upon request. If there are any differences between the information in this brochure and the plan documents, the plan documents will govern the employee's or retiree's rights to benefits in all cases. This document does not constitute a contract or offer of employment. MNPS reserves the right to change or end any of the plans or programs described in this brochure at any time. If you have any questions about MNPS's benefits program, contact Employee Benefit Services.

Important Contacts

Plan	Administrator	Website/Email	Phone
General retiree benefits	Employee Benefit Services	MNPSBenefits.org benefits@mnps.org	615-259-8464 or 615-259-8648
MNPS Employee & Family Health Care Centers	Vanderbilt Health	MNPSHealth.org Locations/hours: see page 7	615-259-8755
Medical	Cigna Medicare Surround Plan with Cigna-HealthSpring Rx (PDP)	If currently enrolled, log onto myCigna.com If not yet enrolled, visit cigna.com	1-800-Cigna24 (1-800-244-6224) For prescription drugs: 1-800-558-9562 TTY: 711
	Cigna-HealthSpring Medicare Advantage Plan (Preferred HMO) with Medicare Part D Prescription Drug Coverage	cignahealthspring.com	1-888-281-7867 TTY: 711
	Cigna Medical Plan for retirees under 65 without Medicare (Open Access Plus)	If currently enrolled, log onto myCigna.com If not yet enrolled, visit cigna.com	1-800-Cigna24 (1-800-244-6224) TTY/TDD: 1-800-987-8816 24-Hour Health Information Line: 1-800-244-6224
Dental	Delta Dental	deltadentaltn.com/mnps	1-800-223-3104
Vision	EyeMed	eyemed.com	1-866-800-5457
Hearing	Epic Hearing Health Care	epichearing.com/mnps	1-866-956-5400



 **Be smart**
Live well