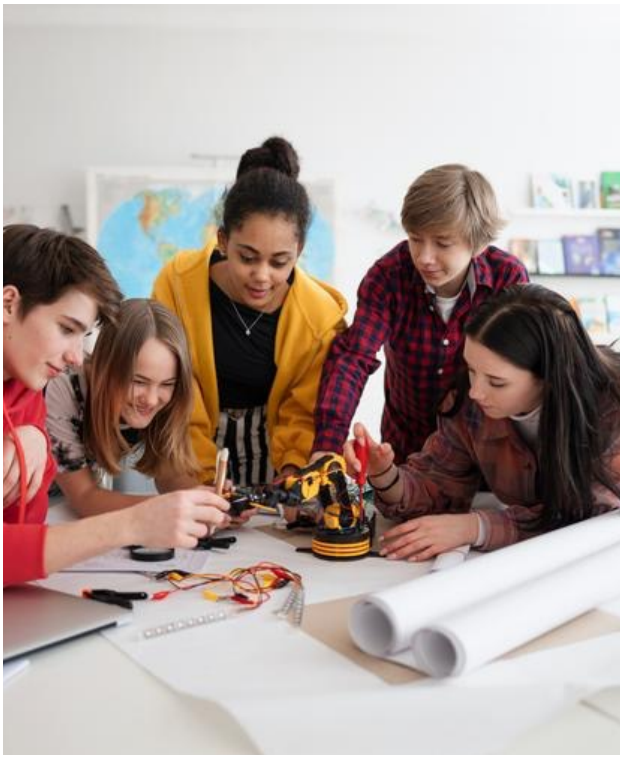
Greatness Grows Here

2026 Active Benefit Guide

MEMPHIS
SHELBY COUNTY SCHOOLS

2026 Benefits & You



Who can enroll?

- Full-time, permanent employees (30+ hrs./week)
- Variable-hourly employees
- Eligible dependents

Spousal Coverage

If you wish to enroll your spouse in one of the MSCS medical insurance plans, you must complete a Spousal Affidavit Form to confirm if your spouse has access to employer-sponsored insurance elsewhere.

You may NOT cover your spouse for medical coverage if his or her employer provides medical coverage. The spouse-opt-out requirement does NOT apply to spouses who:

- are also employed or retired from MSCS and whose employer does not provide medical coverage; or
- are required to pay more than 50% of the cost of coverage for their employer's lowest cost individual plan option

Important Reminders:

1. MSCS Benefits will host a Benefit Fair on **Wednesday, November 5, 2025**, at the **Memphis-Shelby County Schools Teacher Learning Academy** (2485 Union Ave) from **3-5 p.m.** Vendors will be present to answer questions, provide benefit information, giveaways, etc.

2. The 2026 Open Enrollment Period is scheduled for **November 3 - November 14, 2025**. All elections will be effective as of **January 1, 2026**.

3. If you do not make changes to your coverage within the open enrollment period, your current coverage will continue. However, the following benefits will require you to actively enroll or disenroll in them during open enrollment:

   - Health Care Flexible Spending Account (FSA)
   - Dependent Care Flexible Spending Account (FSA)
   - Short-Term & Long-Term Disability

4. After open enrollment, you will not have another opportunity to make changes to your benefits until the next annual open enrollment.

5. Our plan designs will remain the same for 2026. This includes medical, dental, vision, life insurance, and disability plans. You can access your current benefits elections by visiting our online enrollment system, Bentek, at https://app.mybentek.com/mscs/

6. Your current benefit deduction costs will remain the same for 2026 with the exception of the following (if applicable):

   - Your STD/LTD Disability coverage (if you move to a higher age band)
   - Your life insurance coverage (if you move to a higher age band)

Need help with your benefits?

You can book a 1:1 consultation with a Benefits Specialist—available daily from 8 a.m. to 8 p.m. during Open Enrollment. Get personalized support with enrolling in your benefits or answers to any questions you have.

Tobacco Surcharge

When enrolling for medical benefits,you will be asked to confirm whether you have used tobacco on a regular basis(five or more times)since **January 1,2025.** *Ex. cigarettes, ecigarettes, cigars, pipes, or smokeless tobacco, such as chew, dip, or snuff.*

The surcharge is $25 per paycheck for 24 pay periods $30 for 20 pay periods.

Note: Any employee who intentionally falsifies their tobacco status will lose their non-tobacco discount and may be subject to disciplinary action based on MSCS District guidelines.

Effective date of coverage

For new employees, the effective date of coverage for most plans is the first of the month following 30 days of employment. For existing employees enrolling during Open Enrollment, the effective date of coverage for most plans is **January 1, 2026.**

How do I report a life event?

As a new employee – If you don't enroll in benefits within 30 days of your hire date, you will not have benefits coverage and will have to wait until the next benefits open enrollment period.

If you experience a qualified life event (birth/adoption, marriage/divorce, loss of coverage, etc.) You must access Bentek within 30 days of the life event date.

Need help with your benefits?

You can book a 1:1 consultation with a Benefits Specialist. Get personalized support with enrolling in your benefits or answers to any questions you have.

How to enroll and access the online enrollment system, BenTek

Memphis-Shelby County Schools utilizes Bentek, an online benefits enrollment system, which is available 24 hours a day, 7 days a week.

Employees may:

- View benefit elections and payroll deductions
- Make new elections, changes, add or remove dependents during open a n d new hire enrollment, or a qualifying event
- View plan summaries and links to carrier websites
- Designate and view life insurance beneficiaries

Accessing Bentek:

1. Log on to www.mybentek.com/mscs
2. Enter username and password or click on "Create an account"
3. Follow directions to create your username and password. Password must contain three (3) of the following:
   - Lower Case
   - Upper Case
   - Special Character
   - Number
4. Please use the links below to assist in navigating the Bentek system.
   - Create an Account | Video Library
   - Open Enrollment | Video Library
   - New Hire Enrollment | Video Library

For questions regarding accessing the Bentek system, please call Bentek customer service at 888-523-6835.

Things to note for 2026

- Medical, dental, and vision plan options will remain the same, and your contributions for these plans will remain the same for 2026.
- Disability plan options (short-term and long-term) will remain the same. The amounts you contribute will remain the same unless you become eligible for a different age bracket. To view your information, please visit Bentek.
- Your disability benefits could be reduced if you are enrolled with multiple disability vendors. Please contact the disability vendors for additional details.
- If you no longer wish to participate in Metlife STD and or LTD, you must opt out of the benefits during open enrollment.

Medical Plan Highlights

For 2026, you have a choice of three medical plans with a range of coverage levels and costs. This gives you the flexibility to choose what's best for your needs and budget.

MSCS Open Access Plus (OAP) In- NETWORK

A preferred provider organization, network only, plan that has the lowest deductible, giving you the most protection from out-of-pocket expenses when you need care but has higher premium contributions.

MSCS Open Access Plus (OAP) Basic Preferred Provider Organization (PPO),

A preferred provider organization plan that reduces your out-of-pocket responsibility when you need care by offering a lower deductible and higher premium contributions.

MSCS Choice Fund Health Reimbursement Account (HRA), an employer-funded health benefit plan that reimburses you for out-of-pocket medical expenses offering a higher deductible and out-of-pocket maximums but has the least premium contributions. The HRA plan is the only MSCS plan that will cover weight-loss (bariatric) surgery (if medically necessary). This plan also covers eligible, medically necessary, fertility treatment services.

A Closer Look at the Choice Fund HRA Plan

The Choice Fund Health Reimbursement Account (HRA) Plan costs you less from your paycheck, so you keep more of your money. This plan rewards you for taking an active role as a health care consumer and making smart decisions about your health care spending.

As a result, you could pay less for your annual medical costs.

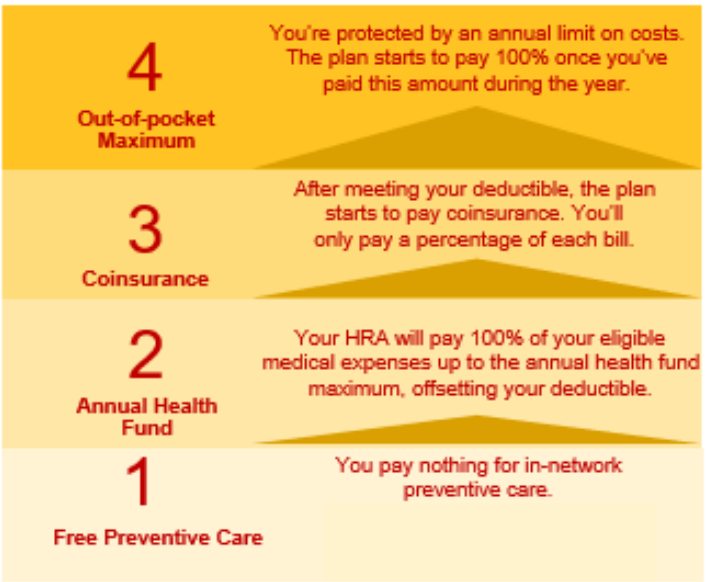
How does the HRA Plan work?

If you enroll in the Choice Fund HRA medical plan option, it will include a health reimbursement account (HRA), funded by Memphis-Shelby County Schools (MSCS), to help you pay for some of the costs of eligible health care expenses.

At the start of the plan year, **MSCS will deposit a specific dollar amount in an HRA**. (See the MSCS medical plan summary for 2026 HRA contribution amounts). Cigna manages the claims process for you and applies your HRA funds to pay 100% of your eligible health care expenses until the HRA money is used up. Here's how it works:

- When you go to most in-network providers, the provider does not collect any money from you at the point of service. Instead, the provider sends the claim directly to Cigna.
- Cigna processes the claim and identifies the amount due to the provider, including any discounts.
- Claims are deducted from your HRA account up to the balance of your account. Once the HRA fund balance has been exhausted, then ongoing claims are paid by the employee as part of the deductible. When those two parts have been exhausted, then the plan acts like a traditional major medical plan where the employer pays 70% and the employee picks up the remaining 30%, up to the out-of-pocket maximum.
- If you leave the plan or MSCS, your HRA account stays behind.
- You may rollover unused funds from one year to the next.
- Cigna will send out quarterly statements to those employees who participate in the Choice Fund HRA plan.

Using the HRA Plan



HRA Advantages

1. Lower paycheck plan deductions

Your per-paycheck deductions are lower compared to other MSCS health plans. Also, the annual HRA fund, provided as part of the plan, is used to offset your annual deductible.

2. Free in-network preventive care

As with all MSCS health plans, preventive care is fully covered under the HRA plan option — you pay nothing toward your deductible and no copays as long as you receive care from in-network providers. Preventive care includes annual physicals, well-child and well- woman exams, immunizations, flu shots, and cancer screenings.

3. Extensive provider network

The plan uses Cigna's large network of doctors and other health care providers.

Compare Medical Plans

The chart below provides a comparison of key coverage features and costs

	OAP IN-NETWORK PLUS	OAP BASIC OPTION		CHOICE FUND HRA	
	In-network	In-network	Out-of-network	In-network	Out-of-network
	You Pay	You Pay		You Pay	
Annual deductible					
Employee	$500	$1,000	$2,000	$1,500	$3,000
Employee + 1	$1,000	$2,000	$4,000	$3,000	$6,000
Family	$1,000	$2,000	$4,000	$3,000	$6,000
Annual Out-of-pocket maximum*					
Employee	$3,000	$4,000	$8,000	$7,150	$14,300
Employee + 1	$9,000	$12,000	$24,000	$14,300	$28,600
Family	$9,000	$12,000	$24,000	$14,300	$28,600
Coinsurance	20%	20%	50%	30%	50%
Annual Health Fund (HRA)					
Annual Health Fund provided to offset your deductible Employee Employee + 1 Family	N/A	N/A	N/A	$500 $1,000 $1,000	
Medical coverage					
Doctor's office visits	$25 copay	20%*	50%*	30%*	50%*
Preventive care (mammograms, PAP test, physicals, immunizations)	0%	0%	Not Covered	0%	Not Covered
Specialist visits	$40 copay	20%*	50%*	30%*	50%*
Telemedicine visits (PCP/SP)	$25/$40 copay	20%*	N/A	30%*	N/A
Outpatient surgery	$250 copay	20%*	50%*	30%*	50%*
Inpatient hospital (per stay)	$500 copay	20%*	50%*	30%*	50%*
Emergency room	$250 copay	$400 copay; then 0%*	$400 copay; then 0%*	30%*	50%*
Labs and X-rays	20%*	20%*	50%*	30%*	50%*
Urgent Care	$75 copay	20%*	50%*	30%*	50%*
Prescription drugs					
Deductible	N/A	N/A	$100 per person	N/A	$100 per person
Generic (30-day supply)	$10 copay	$10 copay	50%*	$10 copay	50%*
Preferred Brand Formulary (30-day supply)	20% ($25 min/$60 max)	20% ($25 min/$60 max)	50%*	20% ($25 min/$60 max)	50%*
Non-Preferred Brand (Non-formulary) (30-day supply)	30% ($50 min/$80 max)	30% ($50 min/$80 max)	50%*	30% ($50 min/$80 max)	50%*
Mail Order (90-day supply)	3 x retail copay	3 x retail copay	Not covered	3 x retail copay	Not covered

* after deductible

All plans have an unlimited lifetime plan maximum

Medical Plan Rates

MSCS and its employees share the cost of the medical benefits.
MSCS pays a generous portion of the total cost and you pay the remaining amount.

2026 paycheck deductions per pay period (before-tax)
24 pay periods

Applies to employees who receive paychecks throughout the year and will continue coverage during this time.

Non-Tobacco Rates	OAP-IN	BASIC	HRA
Employee Only	$95.49	$63.87	$36.90
Employee + 1	$216.10	$161.93	$105.38
Employee + Family	$301.45	$225.89	$147.01

Tobacco Rates	OAP-IN	BASIC	HRA
Employee Only	$120.49	$88.87	$61.90
Employee + 1	$241.10	$186.93	$130.38
Employee + Family	$326.45	$250.89	$172.01

2026 paycheck deductions per pay period (before-tax)
20 pay periods

Applies to employees who do not receive a paycheck during the Summer months,
but will continue coverage during this time.

Non-Tobacco Rates	OAP-IN	BASIC	HRA
Employee Only	$114.59	$76.65	$44.28
Employee + 1	$259.32	$194.32	$126.46
Employee + Family	$361.74	$271.06	$176.41

Tobacco Rates	OAP-IN	BASIC	HRA
Employee Only	$144.59	$106.65	$74.28
Employee + 1	$289.32	$224.32	$156.46
Employee + Family	$391.74	$301.06	$206.41

Compare Dental Plan

Healthy teeth and gums are important to your overall wellness.
That's why it's important to have regular dental checkups and maintain good oral hygiene.
Learn about the dental plans available to help you maintain your oral health.

	Cigna DPPO $2,000 Plan		Cigna DPPO $1,500 Plan		Cigna DPPO Advantage Plan
	Network	Out-of-Network	Network	Out-of-Network	In-Network
	You Pay		You Pay		You Pay
Annual deductible (employee only/family)	$25 / $75	$50 / $150	$50 / $150	$100 / $300	None
Calendar-year maximum	$2,000	$2,000	$1,500	$1,500	Unlimited
Preventive/diagnostic services (annual cleanings, exams, etc.)	0%	0%	0%	0%	0%
Basic services (fillings, extractions, etc.)	20%*	20%*	20%*	20%*	20%*
Major services (crowns, implants, etc.)	40%*	40%*	50%*	50%*	50%*
Orthodontia • Deductible • Dependent Children • Adults • Lifetime max for orthodontia	50% None Up to age 26 Not covered $2,000	50% None Up to age 26 Not covered $2,000	50% None Up to age 26 Not covered $1,500	50% None Up to age 26 Not covered $1,500	100%* $2,300 Up to age 26 Covered N/A

* after deductible

Since the DPPO Advantage Plan network is smaller, please make sure your dentist is a participating provider prior to receiving services.

2026 paycheck deductions per pay period (before-tax)

Dental Plan	DPPO $2,000 Plan		DPPO $1,500 Plan		DPPO Advantage Plan	
	24 Pay	20 Pay	24 Pay	20 Pay	24 Pay	20 Pay
Employee Only	$21.35	$25.62	$12.90	$15.48	$9.51	$11.41
Employee + 1	$44.84	$53.80	$27.09	$32.50	$19.96	$23.95
Family	$64.05	$76.86	$38.69	$46.43	$28.52	$34.22

Vision Plan

Having vision coverage allows you to save money on eligible eye care expenses, such as periodic eye exams, eyeglasses, contact lenses, and more for you and your covered dependents.

Cigna Vision	Network	Out-of-Network
Exam (once every 12 months)	$10 copay	Up to $30 allowance
Lenses (once every 12 months)	$20 copay	Up to $25-$60 allowance
Frames (once every 24 months)	$130 allowance plus 20% discount on amount exceeding frame allowance	Up to $30 allowance
Contact lenses (once every 12 months)	Covered at 100% (medically necessary) $150 allowance (elective)	Up to $225 allowance (medically necessary) Up to $75 allowance (elective)

2026 paycheck deductions per pay period (before-tax)

Vision Plan	24 Pay	20 Pay
Employee Only	$2.55	$3.06
Employee + 1	$4.89	$5.86
Family	$7.92	$9.50

Vision Plan Continued

Welcome to Cigna Vision
Schedule of Vision Coverage
Effective Date: January 1, 2026

Vision Services and Frequency	In-Network Plan Coverage**	In-Network Member Cost***	Out-of-Network Reimbursement
Exam and Professional Services: Frequency* : once per **12 month**			
Eye Exam	100% after $10 Copay	100% after $10 Copay	Up to $30 Allowance
Retinal Screening	$0	Up to $39	Not Covered
Standard Eyeglass Lenses Allowances: Frequency* : one pair per **12 month**			
Lenses:	Copay: $20		
Single Vision	100%	$20 Copay	Up to $25 Allowance
Lined Bifocal	100%	$20 Copay	Up to $35 Allowance
Lined Trifocal	100%	$20 Copay	Up to $45 Allowance
Lenticular	100%	$20 Copay	Up to $60 Allowance
Lens Enhancements / Options:			
Oversize lenses	100%	$0	Not Covered
Rose #1 and #2 Solid Tints	100%	$0	Not Covered
Polycarbonate Lenses <19 years of age	100%	$0	Not Covered
Standard Polycarbonate Lenses	$0	$40	Not Covered
Standard Progressives	$0	$65	Not Covered
Plastic Dye Tints	$0	$15	Not Covered
Photochromic – Glass or Plastic	$0	$75	Not Covered
Standard Scratch Coating	$0	$15	Not Covered
Standard Ultraviolet (UV) Coating	$0	$15	Not Covered
Standard Anti-Reflective (AR) Coating	$0	$45	Not Covered
Hi-Index Lenses	$0	20% off retail	Not Covered
All other lens options, including Premium Tiers	$0	20% off retail	
Contact Lenses Retail Allowance: Frequency* : one pair or single purchase per **12 month**			
Elective	100% up to $150 Retail Allowance	Balance over $150 Allowance	Up to $75 Allowance
Therapeutic	100%	$0	Up to $225 Allowance
Frame Retail Allowance Frequency* : one per **24 month**	100% up to $130 Retail Allowance	20% off balance over $130 Allowance	Up to $30 Allowance

* Your Frequency Period begins on January 1 (Calendar year basis)

Definitions:
Copay: the amount you pay towards your exam and/or materials, lenses and/or frames
Coinsurance: the percentage of charges Cigna will pay. Customer is financially responsible for the balance.
Allowance: the maximum amount Cigna will pay. Customer is financially responsible for any amount over the allowance.

Wellness Resources

Visana

LIVE WELL. SERVE WELL.
MEMPHIS-SHELBY COUNTY SCHOOLS

Women's Health

Memphis-Shelby County Schools employees have access to **Visana Health**, a virtual women's health clinic. Whether you're looking for preventive care, symptom management, or treatment for a specific condition, **Visana** offers personalized, expert care.

Visana is available to Memphis-Shelby County Schools employees, as well as spouses, partners, and 18+ dependents enrolled in an eligible Cigna Healthcare medical plan.

If you have an OB/GYN, PCP or specialist, Visana will work with them to ensure you are receiving seamless medical care.

To learn more or book an appointment, visit **go.visanahealth.com/mscs** or scan the QR code

How does Visana's virtual clinic work?

- Book a virtual appointment in days, not months
- Meet with a clinician for up to 45 minutes
- Get medical care including prescriptions, labs, and imaging

Take Charge of Your Wellness Journey

Whether you're motivated by reducing stress, having more energy or getting more involved in your community, you can customize your goals and find the best path to get there. It's all included with your Cigna Healthcare plan – at no extra charge to you.

- **Reward yourself for making healthy decisions.** Earn Wellness Rewards for healthy activities, such as completing a health assessment or digital coaching journey.
- **Take a digital coaching journey.** Choose a goal that's meaningful to you. Journeys® personalized digital coaching encourages you to take small, achievable steps, so that you can "try on" and build lasting healthy habits.
- **Challenge yourself — and others.** Add a friendly dose of competition to your well-being journey when you challenge friends and colleagues to create new healthy habits, like taking the most steps or burning the most calories.
- **Track your progress.** Integrate with your Apple Watch®, Fitbit® and many other fitness tracking apps and devices, so you get credit for all your activity.
- **Spread the motivation.** Share in the fun — and offer free account access to up to 10 friends and family members — to encourage and motivate each other.

Check out this video and get a preview of what you can expect.

Visit the **Wellness tab** on mycigna.com to learn more.

Flexible Spending Account (FSA)

How does an FSA work?

Have you ever looked at your paycheck and thought how great it would be if less income went to taxes? Participating in flexible spending accounts (FSAs) is one relatively easy way to get more out of your pay. An FSA plan provides you the option of electing pre-tax payroll deductions for certain eligible health care and/or child/dependent care expenses for children under age 13. Because the expenses are paid with pre-tax dollars, the result is immediate tax savings. MSCS offers you the following FSAs:

Health Care FSA

- Pay for eligible health care expenses, such as plan deductibles, copays, and coinsurance.
- Contribute a minimum of $300 and a maximum of up to a projected amount of $3,400*.

* This amount may change as the 2026 limit hasn't been announced.

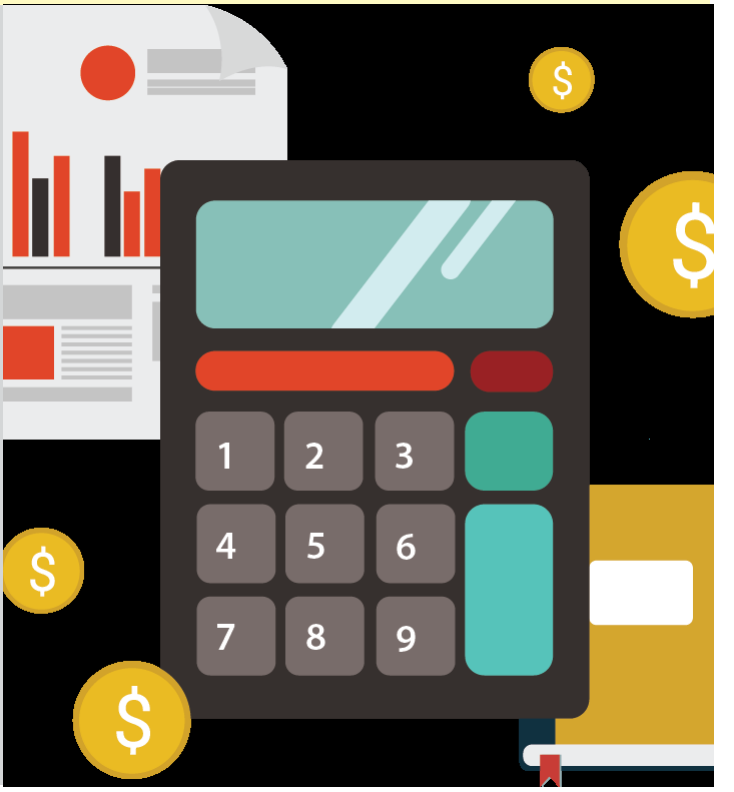
Dependent Care FSA

- Pay for eligible dependent care expenses, such as day care for a child so you and/or your spouse can work, look for work, or attend school full time.
- Contribute a minimum of $600 and a maximum of up to $7,500 or $3,750 if you are married and filing separately.

Please note: When you enroll in a Health Care FSA, Optum Financial will send you a debit card, which you can use to pay for eligible expenses. Depending on the transaction, you may need to submit receipts or other documentation to Optum Financial.

What's an eligible expense?

- **Health Care FSA –** Plan deductibles, copays, coinsurance, and other health Care expenses. To learn more, see IRS Publication 502 at www.irs.gov.
- **Dependent Care FSA –** Child day care, babysitters, home care for dependent elders, and related expenses. To learn more, see IRS Publication 503 at www.irs.gov.
- A complete list of qualified expenses can be found by registering at www.optumfinancial.com.



* These values reflect the projected limits for 2026.
These values will be updated once the IRS releases the limits for 2026.

Employee Assistance Program & MSCS Family Health Clinic

The MSCS Employee Assistance Program (EAP**)** is available throughout the year to assist with your everyday needs, at no cost to you and members of your household. It's all part of our commitment to supporting your total well-being. Get support with work-life issues, referrals for clinical, legal, and financial services, and more.
To begin taking advantage of this valuable benefit, **call 901-683-5658 or toll free 800-880-5658.**

MSCS Family Health Clinic - Memphis-Shelby County Schools and Methodist LeBonheur Healthcare have partnered to provide a convenient health care clinic at **no cost for those that are eligible**.

Eligibility: The MSCS Family Health clinic is open to all active MSCS employees with a valid MSCS employee ID. Family members covered by the employee's MSCS health insurance plan are also Eligible with the co-pay of $25.00.

Cost: FREE for active MSCS employees with a valid MSCS ID badge. Family members covered under an MSCS health insurance plan may be subject to the insurance plan copay.

Labs and Prescriptions: In-house labs and an prescribed in-stock generic medications are included in the cost-free services for eligible MSCS employees. No billing will occur to the employee at the clinic.

Treatment also available: Most minor medical Conditions such as colds, flu, sore throat, sinus infection, sprains, cuts, etc. are covered. Work-related injuries, physicals, immunizations, lab work, drug screens, and more are also covered.

Appointments: Required for **ALL** medical services, which limits wait times. No walk-ins are allowed.
To schedule an appointment, call 901-416-6079.

Location and Hours:
Flicker Clinic
(Behind Central Office)
130 Flicker St.
Memphis, TN 38104
Second Clinic Location
8071 Winchester Rd., Ste 2
Memphis, TN 38125

8 a.m. – 6 p.m. (school days)
8 a.m. – 5 p.m. (summer and school holidays)

The MSCS Family Health Clinic is not intended to substitute for visits to your regular primary care physician. More information can be found on the MSCS website.

Additional Services and Resources:

On-site Behavioral Health Consultant
901-416-6079

On-site Health Coach
901-381-6582

Life Insurance

MSCS offers various programs to help ensure financial security for you and your family. We also provide access to voluntary benefits designed to help you save money on valuable supplemental life insurance coverage.

What You Need to Know

You must participate in basic life to be eligible to enroll in supplemental life insurance

Dual Enrollment

MSCS employees whose spouses are also employed with MSCS can not have dual coverage	Both parties can not have dual supplemental dependent life coverage

Evidence of Insurability (EOI)

If you decline to enroll in basic life insurance as a new hire and choose to enroll later, evidence of insurability will be required

Beneficiary Information

Be sure to designate a beneficiary for your life and accident insurance policies	The beneficiary will receive the payout of the policy in the event of the policyholder's death.	Visit Bentek to update your beneficiary information

Life Insurance

MSCS offers various programs to help ensure financial security for you and your family. We also provide access to voluntary benefits designed to help you save money on valuable supplemental life insurance coverage.

MSCS offers basic life and accidental death and dismemberment (AD&D) insurances to protect you and your loved ones from the unexpected.

The District covers majority of the cost for this coverage. Your benefit coverage amount is 2x your base annual salary (up to $300,000)

For added protection, you have the option to purchase supplemental life insurance for yourself at up to 6x your base pay multiplied then rounded to the next higher $10,000.

You may also purchase spouse supplemental life insurance up to $250,000 (not to exceed 50% of your basic life coverage).

We also offer voluntary child life insurance for children ages 15 days to 25 years old up to $20,000 regardless of the number of children covered

securian FINANCIAL

Permanent Life with Long-Term Care

Now available for the first time!

Trustmark Life + Care helps you prepare for life's what-ifs—providing money for care if you ever need it, while keeping a life insurance benefit for the people who matter most. Enroll with **no medical questions** and protect your health, your independence, and your family's financial security.

Trustmark
benefits beyond benefits

Policy Features
▪ **Fully portable** - You can keep this policy should you leave the district for any reason.
▪ Rate stability and benefit stability - **your rate will never increase due to age**
▪ Employees up to 70 years of age can apply
▪ **Long Term Care Benefit -** Pays monthly benefit equal to 4% of your death benefit for up to 50 months (2% for at home family care).
▪ **Benefit Restoration -** Restores the death benefit that is reduced to pay Long Term Care, so your family receives the **full death benefit amount when they need it most.**
▪ **Accelerated Death Benefit for Terminal Illness.** Pays 75% of death benefit when life expectancy is 24 months or less
▪ Spouse and dependent coverage available with the purchase of employee policy.

Benefit Amounts	
Employee	
Guaranteed Issue *(No medical questions during Open Enrollment)*	**$150,000**
Minimum Benefit	$10,000
Maximum Benefit	$300,000
Spouse *Employee must elect coverage*	
Guaranteed Issue *(No medical questions)*	**$25,000**
Minimum Benefit	$10,000
Maximum Benefit	$300,000
Child *Employee must elect coverage*	
Guaranteed Issue *(No medical questions)*	**$10,000**

Benefit Example			
Death Benefit Amount	**Monthly Family/Friend Care Benefit**	**Monthly Licensed Care Benefit**	**Maximum Care Benefit**
$100,000	$2,000 (2% of death benefit)	$4,000 (4% of death benefit)	$200,000
Death benefit amount does not decrease due to utilization of care benefit	Pays monthly benefit up to 50 months		The condition causing a need for care does not have to be permanent in order to receive benefits

Disability Insurance
Short-Term & Long-Term Disability

For 2026, you will have options for short-term disability (STD) and long-term disability (LTD) insurance coverage through MetLife, offering lower rates than traditional individual disability plans. The loss of income due to illness or disability can cause serious financial hardship for your family MSCS's group disability insurance program replaces a portion of your income when you're unable to work The disability benefits you receive allow you to continue paying your bills and meeting your financial obligations during this difficult time. Protect yourself, your family, and your savings from the impact of your lost income by replacing a portion of it during the initial weeks of a disability and for an extended period of time.

MetLife Important Information

- **All benefit-eligible employees are automatically enrolled in the short-term (30-day wait period option) and long-term disability benefits. If you wish to make any changes, you will have an opportunity again during this open enrollment period to enroll and/or opt-out of these benefits.** In the case of the short-term disability plan, employees will also have the option of electing a higher coverage level (7-day wait option).

- If you have disability coverage through another carrier, it is highly recommended that you determine if your existing coverage will affect your ability to maintain other individual disability plans you may have purchased.

  - If you decide to decline the coverage now, and want to enroll in it later, you'll have to submit a statement of health. This means that if at the time you apply, you have a medical issue, you may not be allowed to enroll. Enrolling now guarantees your access to the benefit when you need it.

  - If you wish to disenroll in an individual disability plan, you will need to contact your vendor directly (please see vendor contact information for AFLAC, American Fidelity or Colonial). If you are unsure of your enrollment in an individual disability plan, please check your MSCS paystub for deduction information.

Short-Term & Long-Term Disability Benefit Summary		
	STD	**LTD**
Who pays	**Employee-paid**	**Employee-paid**
Benefit provided	**60% of base weekly earnings**	**Up to 60% of base annual earnings**
Maximum benefit payable	**$1,500 per week**	**$6,500**
Maximum benefit duration	**26 weeks**	**To age 65 or 5 years, whichever comes first**
Waiting period	**30-day option or 7-day option**	**180 days**

Please note that STD & LTD rates are based on your age and salary. Your benefit could be reduced if you are enrolled with multiple disability vendors. Please contact your disability vendor for additional details.

Cancer Insurance

New this year!

Sun Life Cancer Insurance pays cash directly to you to help with expenses like treatment, travel, and recovery—so you can focus on what matters most. **Enroll this year with no medical questions** and protect yourself and your loved ones.

Sun Life Financial

Benefit Amounts		
Employee	**Base Plan**	**Enhanced Plan**
Initial Diagnosis	**$2,000**	**$5,000**
Cancer Screening *(pays for each insured per year)*	**$150**	**$150**
Treatment Benefits		
Radiation and Chemotherapy *(per 12 months)*	up to $10,000	up to $20,000
Bone Marrow or Stem Cell Transplant	up to $10,000	up to $10,000
Mammography Benefit	$50	$75
Experimental Treatment	up to $1,050	up to $2,100
Surgery Benefits		
Inpatient	up to $5,500	up to $5,500
Outpatient	$150	$750
Anesthesia	up to $1,815	up to $1,815
Skin Cancer	up to $600	up to $600
Prosthesis	up to $2,000	up to $3,000
Hospital Benefits		
Hospital Confinement *(up to 90 days)*	$200	$400
Ambulance	$250	Ground - $250 Air - $2,000
Extended-Care Facility *(per day up to 30 days)*	$200	$200
Hospice *(per day up to 100 days)*	$100	$100
In-hospital Doctor Visits *(per visit up to 75 visits)*	$25	$25

Per Pay Period Rates (20)		
Coverage Tier	**Base Plan**	**Enhanced Plan**
Employee Only	$10.81	$20.89
Employee + Spouse	$18.74	$35.52
Employee + Child(ren)	$11.66	$22.50
Family	$19.59	$37.13

Disclaimer: The benefits outlined here are for illustrative purposes only and do not represent the full scope of coverage provided by your cancer insurance policy. For a complete list of benefits, exclusions, and limitations, please refer to your policy certificate or contact your benefits administrator.

Accident Insurance

Accident plan provides **cash benefits directly to you** that help with out-of-pocket expenses - medical and nonmedical - associated with treatment in the event of a covered accident.

Initial Accident Treatment	Benefits
Initial Treatment *(once per accident)*	**$150**
ER/Urgent Care	$200
Wellness Benefit *(pays for each insured per year)*	**$25 (year 1)** **$50 (year 2-4)** **$75 (year 5+)**
Ambulance *(within 90 days of accident)*	$300/Ground $900/Air
Concussion *(once per accident)*	$350
Coma	$7,500
Dislocation Benefits	
Hip	Up to $4,500
Knee	Up to $2,925
Shoulder	Up to $2,250
Foot/Ankle	Up to $1,800
Hand	Up to $1,575
Fracture Benefits	
Hip/Thigh	Up to $6,000
Vertebrae/Sternum	Up to $5,400
Pelvis	Up to $4,800
Leg	Up to $3,600
Foot/Ankle/Kneecap	Up to $3,000
Hospital Benefits	
Hospital Admission	$900
Hospital Confinement *(up to 365 days)*	$225/day
Life Changing Event Benefits	
Dismemberment	Up to $17,500
Paralysis	Up to $7,500
Accidental Death Benefits	
Accidental Death	$50,000 (employee), $25,000 (spouse), $10,000 (child)
Accidental Common-Carrier Death	$100,000 (employee), $50,000 (spouse), $20,000 (child)

Per Pay Period Rates (20)	
Coverage Tier	
Employee Only	$8.63
Employee + Spouse	$14.65
Employee + Child(ren)	$19.27
Family	$25.28

Disclaimer: The benefits outlined here are for illustrative purposes only and do not represent the full scope of coverage provided by your accident insurance policy. For a complete list of benefits, exclusions, and limitations, please refer to your policy certificate or contact your benefits administrator.

Critical Illness Insurance

Critical Illness Insurance provides cash benefits when an insured person is diagnosed with a covered critical illness-and **these benefits are paid directly to you**. The plan provides a lump-sum benefit to help with out-of-pocket medical expenses and the living expenses that can accompany a covered critical illness.

Lump Sum Benefit Amount	**Benefits**
Benefit Amount	$5,000 - $30,000
Guaranteed Issue Amounts (no medical questions)	**Employee: Up to $30,000** **Spouse: Up to $30,000**
Wellness Benefit *(pays for each insured per year)*	**$50**
Base Benefits	
Heart Attack	100%
Sudden Cardiac Arrest	100%
Coronary Artery Bypass Surgery	25%
Major Organ Transplant	100%
Bone Marrow Transplant	100%
Kidney Failure (End State Renal Failure)	100%
Stroke	100%
Cancer Benefits	
Cancer (Internal or Invasive)	100%
Non-Invasive Cancer	25%
Skin Cancer *(per calendar year)*	$250
Additional Benefits	
Coma	100%
Severe Burns	100%
Paralysis	100%
Loss of Sight	100%
Loss of Speech	100%
Loss of Hearing	100%

Disclaimer: The benefits outlined here are for illustrative purposes only and do not represent the full scope of coverage provided by your critical illness insurance policy. For a complete list of benefits, exclusions, and limitations, please refer to your policy certificate or contact your benefits administrator.

Hospital Indemnity Insurance

Hospital Indemnity Insurance provides **cash benefits directly to you** that help pay for some of the costs - medical and nonmedical - associated with a covered hospital stay due to a sickness or accidental injury.

Hospitalization Benefits	Benefits
Hospital Admission *(per confinement)*	**$1,000**
Hospital Confinement *(per day, up to 31 days)*	$150
Hospital Intensive Care *(per day, up to 10 days)*	$150
Intermediate Intensive Care Step-Down Unit *(per day up to 10 days)*	$75

Per Pay Period Rates (20)	
Coverage Tier	
Employee Only	$10.11
Employee + Spouse	$20.44
Employee + Child(ren)	$16.26
Family	$26.57

Disclaimer: The benefits outlined here are for illustrative purposes only and do not represent the full scope of coverage provided by your accident insurance policy. For a complete list of benefits, exclusions, and limitations, please refer to your policy certificate or contact your benefits administrator.

Student Loan Wellness

Paying off student loans can be difficult, but Tuition.io can help. Tuition.io can assist with strategies to optimize your repayment plan, provide information on refinancing options, and help you navigate the Process through educational and student loan wellness tools.

Tuition.io can also help you plan for your child's future. Learn about the different types of student aid available and the application process. There is also a college cost calculator to help you estimate how much you will need for your child's education. You even have access to a student loan coach to answer your most difficult questions. For more information, visit www.scs.tuitionio/register or call 855-353-9395.

Tennessee Consolidated Retirement System (TCRS)

Eligible employees participate in the Tennessee Consolidated Retirement System pension plan. TCRS provides a defined benefit plan providing life-time retirement, survivor, and disability benefits for employees and their beneficiaries.
Please note a 5% mandatory contribution is effective for all active, full-time employees.

- Please visit **www.mytcrs.tn.gov** to access your personal account
- View your account details and update your TCRS account information
- Assign/Update TCRS Beneficiary information
- Review service time and contributions
- Request a benefits estimate
- Apply for retirement
- Call 1-800-922-7772 for details

Pet Insurance

Take comfort in knowing your pet can get the care they need if they are hurt or sick, without worrying about the cost, through ASPCA Pet health insurance. You can choose the care you want for your pet and get reimbursed for eligible expenses. For more information, visit www.aspcapetinsurance.com/SCSK12

401(k) - Empower

This voluntary retirement savings plan allows eligible employees to complement any existing retirement and pension benefits.

The plan allows you to save and invest before taxes and defers tax on contributions and earnings on contributions until money is withdrawn.

For details, please contact:

- Great West (EMPOWER)
  545 Mainstream Dr., Suite 407
  Nashville, TN 37228
  800-922-7772

- Sherri Thomas
  615-564-7014
  Sherri.Thomas@empower.com

- Charlton Gutierrez
  901-623-6917
  Charlton.Guitierrez@empower.com

- Enroll online at: www.RetireReadyTN.gov

VOLUNTARY DISABILITY INSURANCE VENDOR

Voluntary disability insurance provides financial protection for employees. There are three approved MSCS voluntary disability carriers to choose from. Please contact the following carriers for more information on accident, critical illness, or hospital indemnity insurance if you are interested:

- **American Fidelity**
  Candice Chambers
  901-458-9252 or www.americanfidelity.com
- **Colonial Life**
  Jesse Sward
  980-229-9124
  jesssesward@coloniallifesaless.com

The MSCS 403(b)/TSA program allows eligible participants to make before tax contributions to an investment account through convenient payroll deductions. Please see the chart below for eligible vendors.

403(b)/Tax Sheltered Annuity (TSA)

403(b) Vendor	Vendor Address/Phone
AIG / VALIC	278 Franklin Rd., Suite 151 Brentwood, TN 37027 (615) 221-2541
American Fidelity Insurance	126 South Flicker Memphis, TN 38104 (901) 458-9252
Ameriprise Financial	6750 Poplar Ave., Ste 114 Memphis, TN 38138 (901) 312-7806
AXA Equitable	494 Williamsburg Lane Memphis, TN 38117 (800) 628-6673
College Life Group/Americo	5545 Murray Rd., Suite 205 Memphis, TN 38119 (901) 761-4822
Great American Life Insurance	301 East Fourth St, 11th Floor Cincinnati, OH 45202 (800)-438-3398
Horace Mann Insurance	1899 Camberley Circle Memphis, TN 38119 (800) 999-1030
ING ReliaStar - VOYA	5050 Poplar Avenue, Ste. 2400 Memphis, TN 38157 (901) 496-2741
Metlife Resources	7715 Highway 70, Suite 103A Bartlett, TN 38133 (901) 767-5951
Midland National	3721 Riverdale Rd, Ste. 102B Memphis, TN 38115 (901) 552-3042
NEA/Valuebuilders/Security Benefits & The Legend Group/Legend Equities	P.O. Box 862 Savannah, TN 38372 (800) 635-8258
Plan Members Services	1278 Salem Rd Gadsden, TN 38337 (731) 784-6702
Primerica Financial Services PFS Investment Inc.	5118 Park Ave., Suite 308 Memphis, TN 38117 (901) 398-5239

CONTACT INFORMATION

Please contact the appropriate provider listed below to learn more about a specific benefit plan.

Plan	Who to Call	Web Address	Phone Number
Medical	Cigna	www.mycigna.com	**Annual Enrollment Questions:** (800) 401-4041 **On-going Customer Service:** (800) 736-7568 **EyeMed** 1-888-353-2653
Dental	Cigna	www.mycigna.com	
Vision	EyeMed	www.mycigna.com	
Flexible Spending Accounts	Optum Financial (formerly known as ConnectYourCare)	www.optumfinancial.com	**Customer Service:** (833) 799-1778
Life Insurance	Minnesota Life / Securian	www.securian.com	**Customer Service:** (866) 293-6047
Group Short and Long-term Disability	MetLife	www.metlife.com/mybenefits	**Customer Service:** (800) GET-MET8 (800) 438-6388
Employee Assistance Program (EAP)	Methodist Healthcare	www.methodisteaphelp.org	**Schedule Appointment:** (901) 683-5658 or (800) 880-5658
Pet Insurance	ASPCA	www.aspcapetinsurance.com/scsk12 Priority code: SCSL12	**Customer Service:** (844) 592-4879
MSCS Healthcare Clinic	MSCS Family Care Clinic	ww.scsk12org/health/employee?PID=15	**Customer Service:** (901) 416-6079
Student Loan Wellness & College Prep Supports	Tuition IO	www.scs.tuitionio/register	**Customer Service:** (855) 353-9395
Online Benefit Enrollment	Bentek	www.mybentek.com/mscs	**Customer Service:** (888) 523-6835
MSCS Benefit Office		www.scsk12.org	(901) 416-5344 (901) 416-6463 (fax)

Common Insurance Terms & Definitions

Coinsurance – A form of medical cost sharing in a health insurance plan that requires an insured person to pay a stated percentage of medical expenses after the deductible amount, if any, was paid. Once any deductible amount and coinsurance are paid, the insurer is responsible for the rest of the reimbursement forcovered benefits up to allowed ch arges: the individual could also be responsible for any charges in excess ofwhat the insurer determines to be "usual, custo mary and reasonable." Coinsurance ates may differ if servicesare received from an approved provider (i.e., a provider wit h whom the insurer has a contract or an agreement
specifying payment levels and other contract requirements) or if received by providers not on the approved list. In addition to overall coinsurance rates, rates may also differ for different types of services.

Copayment – A form of medical cost sharing in a health insurance plan that requires an insured person to pay a fixed dollar amount when a medical service is received. The insurer is responsible for the rest of the reimbursement. There may be separate copayments for different services. Some plans require that a deductible first be met for some specific services before a copayment applies.

Deductible – A fixed dollar amount during the benefit period - usually a year - that an insured person pays before the insurer starts to make payments for covered medical services. Plans may have both per individual and family deductibles. Some plans may have separate deductibles for specific services. For example, a plan may have a hospitalization deductible per admission. Deductibles may differ if services are received from an approved provider or if received from providers not on the approved list.

Flexible spending accounts or arrangements (FSA) – Accounts offered and administered by employers that provide a way for employees to set aside, out of their paycheck, pretax dollars to pay for the employee's share of insurance premiums or medical expenses not covered by the employer's health plan. The employer may also make contributions to an FSA. Typically, benefits or cash must be used within the given benefit year, or the employee loses the money. Flexible spending accounts can also be provided to cover childcare expenses, but those accounts must be established separately from medical FSAs.

Preferred provider organization (PPO) plan – An indemnity plan where coverage is provided to participants through a network of selected health care providers (such as hospitals and physicians). The enrollees may go outside the network but would incur larger costs in the form of higher deductibles, higher coinsurance rates, or non-discounted charges from the providers.

Pre-Tax Benefit Information – a pretax basis means that the money you pay towards the cost of coverage comes out your salary before you pay any taxes on it. By choosing this option, you reduce your taxable income, therefore reducing the taxes you owe.

Maximum out-of-pocket expense – Themaximumdollaramountagroupmemberisrequiredtopayoutof pocketduringayear.Untilthismaximumismet,theplanandgroupmembersharesinthecostofcoveredexpenses.Afterthemaximumisreached,theinsurancecarrierpaysallcoveredexpenses, often up to a lifetime maximum.

Primary care physician (PCP) – A physician who serves as a group member's primary contact within the health plan. In a managed care plan, the primary care physician provides basic medical services, coordinates and, if required by the plan, authorizes referrals to specialists and hospitals.

Self-insured plan –Aplanofferedbyemployerswhodirectlyassumethemajorcostofhealthinsurancefor theiremployees.Someself-insuredplansbeartheentirerisk.Otherself-insuredemployersinsureagainst largeclaimsbypurchasingstop-losscoverage. Some self-insured employers contract with insurance carriers or third-party administrators for claims processing and other administrative services; other self-insured plans are self-administered.

MSCS Benefits Contact Information

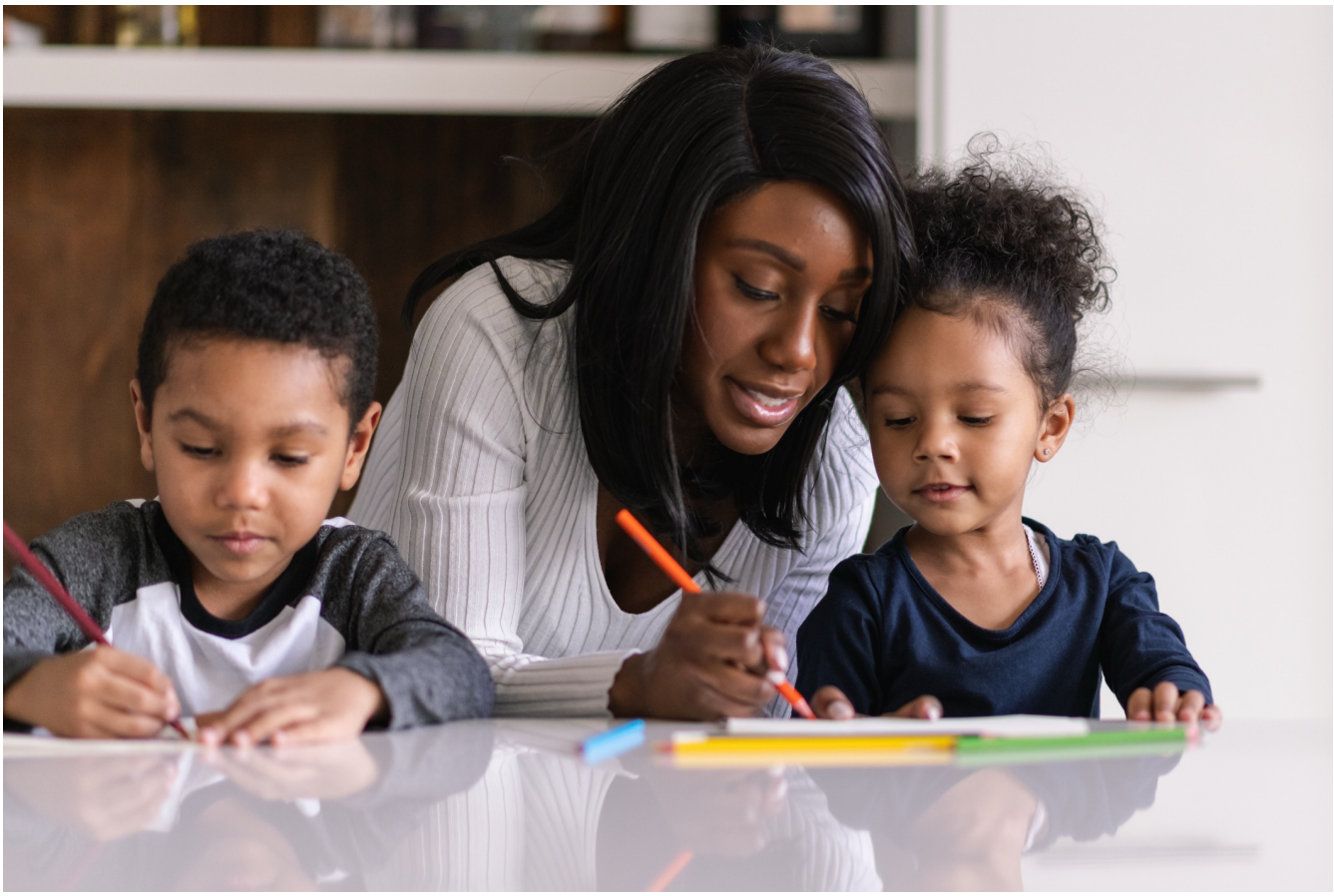
BENEFITS – Room 108 (Barnes Building)
160 Glenn Rogers Sr. St., Memphis, TN 38112
benefits@scsk12.org
Benefits Main Phone: (901) 416-5344
Benefits Fax: (901) 416-6463

Talent Management Main Phone: 416-5304

Need help enrolling in your benefits?

You can book a 1:1 consultation with a Benefits Specialist. Get personalized support with enrolling in your benefits or answers to any questions you have.

Schedule an appointment



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The annual enrollment guide is intended to be a summary of the benefits programs offered by Memphis-Shelby County Board of Education, If you would like further details about any of the benefit offerings described herein, refer to each plan's official policy relating to that benefit.

The information in this booklet constitutes a Summary of Material Modifications (SMM) of the MSCS Benefits Handbook for the noted plan changes. Effective January 1, 2026, this benefits guide, along with a copy of the Summary Plan Description (SPD) will comprise the SPD. Please retain this guide for reference.

These documents, along with all the required annual legal notices, are accessible on www.scsk12.org. If you have any questions, please contact MSCS Benefits at 901-416-5344.

Memphis- Shelby County Board of Education always works to ensure information provided to employees is accurate. However, if for some reason the information in this annual enrollment guide conflicts with any information in the plan or benefits policy, the plan or policy document will govern. Memphis-Shelby County Board of Education reserves the right to amend, suspend or terminate these plans at anytime.

Memphis-Shelby County Schools offers educational and employment opportunities without regard to race, color, religion, sex, creed, age, disability, national origin or genetic information.