

# Employee Benefits Guide



Shaker  
Heights  
Schools

2026

# About Your Benefits

At Shaker Heights City School District, we are committed to providing a comprehensive and affordable benefits package to you and your family. Review this guide to learn about your options so you can make the most of your Shaker Heights School benefits. If you have any questions, feel free to reach out to Nellie Brown, **216.295.6218** or **[brown\\_c@shaker.org](mailto:brown_c@shaker.org)**.



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## Eligibility and Enrollment

Full-time and part-time employees are eligible for Shaker’s benefits. Employees must work a minimum number of hours per week, which varies by employee classification. Contact Human Resources for further information. If you enroll for benefits, you may also cover your:

- Legal spouse (subject to Spouse COB Requirement)
- Children up to age 26
- Unmarried children of any age who are mentally or physically disabled

## How to Enroll

You have 30 days from your hire date to enroll for benefits. On or after your hire date, call the Enrollment Call Center at 877-282-0808 to complete your enrollment over the phone. The call center is open Monday - Friday 8:00 a.m. - 6:00 p.m. Your benefits will begin on the first of the month following your hire date.

Not planning on enrolling in benefits? You are still required to contact the Enrollment Call Center to waive your benefits.

## Making Changes to Your Benefits

Each year, you have the opportunity to make changes to your benefits during open enrollment. You may make mid-year changes to your benefits only if you have a qualifying life event. Examples of qualifying life events include:

- Marriage or divorce
- Birth or adoption of a child
- Change in a dependent’s eligibility status
- Change in employment status for you or your dependents resulting in the loss/gain of coverage
- A significant change in the cost or coverage of your dependent’s benefits
- Change in the cost of dependent care (for dependent care flexible spending accounts only)
- Death of a dependent

You have 30 days from the date of the life event to make a change in benefits. Keep in mind, the changes you make must be directly related to and consistent with the event. Contact Human Resources for instructions on how to make a change and what documentation is required.

# Medical Coverage

Medical coverage is provided through Medical Mutual of Ohio. Review the chart below for the amount you will pay for the medical service listed.

	PPO Plan <sup>1</sup>	
	In Network	Out of Network
<b>Annual Deductible</b> (Individual/Family)	\$250/\$500	\$500/\$1,000
<b>Coinsurance</b>	10%	30%
<b>Annual Out-of-pocket Maximum</b> (Individual/Family)	\$500/\$1,000	\$1,000/\$2,000
<b>Preventive Care</b>	0%	30% after deductible
<b>Office Visits</b>		
Primary Care	\$20 copay per visit	30% after deductible
Urgent Care	\$35 copay per visit	\$35 copay per visit
Specialist	\$20 copay per visit	30% after deductible
<b>Emergency Room<sup>2</sup></b>	\$100 copay per visit	

<sup>1</sup> For complete benefit details, please refer to the Summary of Benefits & Coverage (SBC) and benefit booklet available on the See My Benefits Online Website or by contacting Human Resources .

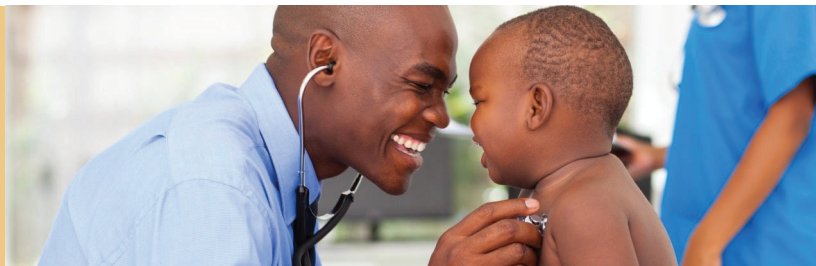
<sup>2</sup> Non-Emergency Use of the Emergency Room is Not Covered.

## Terms to Know

- **Copay** - A set dollar amount you pay for a covered health care service, usually when you receive the service.
- **Deductible** - What you pay out of pocket for health care services before the plan begins to pay a portion.
- **Coinsurance** - Your share of the costs of covered health care services after you reach the deductible. You pay the percentage noted in the table above, and the medical plan pays the rest.
- **Out-of-pocket Maximum** - What you have to pay before the plan pays 100% of your covered costs. The Out-of-Pocket Maximum for In-Network services includes deductible, coinsurance, and medical copays
- **Network** - The facilities and providers the medical plan has contracted with to provide health care services. In-network providers typically provide services at a lower negotiated rate.

## Finding In-network Providers

You save the most money when you choose in-network doctors, facilities and pharmacies. Log on to [www.medmutual.com](http://www.medmutual.com) or call **800.315.3137** to find providers in the Medical Mutual of Ohio network.



**IMPORTANT:** Medical and prescription drug coverage is required to be a bundled election. This means you must enroll in both medical and prescription drug, or waive both medical and prescription drug. Also, your election tier must either be single medical and prescription drug, or family medical and prescription drug, with all covered dependents enrolled in both plans.



# Prescription Drug Coverage

Prescription Drug Coverage is provided through Medical Mutual of Ohio in conjunction with Express Scripts. Review the chart below for the amount you will pay for the prescription drug service listed.

	Drug Plan
	In Network
<b>RX-Out-of-pocket limit</b> (Individual/Family)	\$10,600/\$21,200
<b>Retail (30-day Supply)</b> Generic Copay—Tier 1 Preferred Brand Copay—Tier 2 Non-Preferred Brand Copay—Tier 3	\$7 copay \$25 copay \$50 copay
<b>Specialty Drugs (30-day Supply)</b> Use of MMO's Specialty Pharmacy is required	Applicable drug tier copay applies or the max of any available manufacturer-funded copay assistance
<b>Mail-order (90-day Supply)</b> Generic Copay—Tier 1 Preferred Brand Copay—Tier 2 Non-Preferred Brand Copay—Tier 3	\$17.50 copay \$62.50 copay \$125 copay

## Generic Drugs

Generic drugs are FDA-approved, and shown to be just as safe and effective as their more expensive brand-name counterparts. If you choose a brand-name drug when a generic drug is available, you will pay the brand-name copay plus the cost difference between the generic equivalent and the brand-name drug. Generic Drugs are typically Tier 1.

## Preferred Drugs

Medical Mutual of Ohio regularly reviews the latest prescription drugs on the market and maintains a list of preferred drugs that are clinically effective and not cost-restrictive. These drugs are available at a lower price than those not included on the list, which are called non-preferred drugs. Preferred Drugs are Tier 2.

## Specialty Drugs

Specialty drugs are typically used to treat chronic conditions like cancer or multiple sclerosis. These drugs tend to be more expensive and usually require special handling and monitoring. If you take a specialty medication, you must use MMO's Specialty Pharmacy which includes Accredo, Gentry, and University Hospitals. Specialty Drugs could be Tier 1, 2, or 3.



	Medical	Prescription Drug	Medical + Prescription Drug
Coverage Tier	Per Pay	Per Pay	Total Per Pay
<b>Employee Only</b>	\$66.000	\$16.24	\$82.24
<b>Employee + Family</b>	\$173.58	\$43.10	\$216.67

# Spousal COB Coverage Requirement

If you would like to cover your spouse on Shaker's medical and prescription plan, your spouse is subject to the Spousal Coordination of Benefits Rule.

In summary, if your spouse is eligible for group health and prescription drug coverage through their own employer or retirement system, your spouse is required to be enrolled in that plan for primary coverage and can be on the Shaker plan for secondary coverage.

If your spouse is eligible for other coverage, but is not enrolled in such other coverage, he/she is not eligible for the Shaker medical and prescription drug plan. Some exceptions apply.

You and your spouse will be required to complete a Spouse COB certification form initially when first requesting enrollment, and during periodic re-certification audits.

If your spouse's employment and/or other coverage status changes, it is your responsibility to notify Human Resources and complete a new certification form within 30 days of such change so that the appropriate determination can be made.

The Spouse COB Certification Form is located on PowerSchool Employee Records under available forms.

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## What is Coordination of Benefits (COB)?

When an individual is covered by more than one group health insurance plan, the two plans work together to pay claims for that individual. The process is called coordination of benefits (COB).

Insurance companies coordinate benefits to:

- Establish which plan is primary and which plan is secondary – the plan that pays first and the plan that pays some or all of the remaining balance after your share of costs is deducted
- Avoid duplicate payments by making sure the two plans don't pay more than the total amount of the claim
- Help reduce costs of insurance premiums

The objective of Shaker's Spousal COB rule is to require the spouse's employer plan to be the primary payer of their own employee's health and drug claims.



# Dental Coverage

Shaker Heights City School District offers a dental plan through Delta Dental of Ohio. Review the chart below for the amount you will pay for the dental service listed.

	Delta Dental PPO		
	In Network (Delta PPO)	In Network (Delta Premier)	Out of Network
<b>Deductible</b> (Single/Family)	\$50/\$150	\$50/\$150	\$50/\$150
<b>Annual Maximum</b> (Per Person)	\$1,500	\$1,500	\$1,500
<b>Preventive Care</b> (Oral Evaluations, X-rays, Cleanings, Space Maintainers, Other Selected Diagnostic and Preventive Services, X-ray (full mouth))	0%	0%	0%
<b>Basic Services</b> (Amalgam and Composite Restorations, Pin Retention Procedures, Root Canal Therapy, Apexification, Therapeutic Pulpotomy, Other Selected Endodontic Services, Simple and Surgical Tooth Extractions, Other Selected Oral Surgery Services, Gingivectomy, Osseous Surgery, Other Selected Periodontal Services, Palliative Treatment)	15%	15%	15%
<b>Major Services</b> (Crowns/Inlays/Onlays, Partial and Full Dentures, Other Selected Prosthodontics Services, Removable Prosthodontics (Partials or Dentures) Fixed Prosthodontics (Bridges) for the Replacement of Teeth (or Tooth)), Implants	20% after deductible	20% after deductible	20% after deductible
<b>Orthodontia</b> (all eligible employees, spouses, and children are eligible for ortho (children up to age 26))	50% after deductible	50% after deductible	50% after deductible
<b>Orthodontia Lifetime Maximum</b> (Per Person)	\$1,500	\$1,500	\$1,500

Coverage Tier	Per Pay
Employee Only	\$2.77
Employee + Family	\$7.83

## Finding In-network Dentists

You pay less for services when you use a dentist in the Delta Dental PPO and Premier networks. You can find an in-network dentist by visiting [www.deltadentaloh.com/findadentist](http://www.deltadentaloh.com/findadentist) or calling 800.524.0149.

Delta Dental does not mail out ID cards. Members can access their ID cards by registering on Delta Dental's Member Portal at [www.memberportal.com/mp/delta/](http://www.memberportal.com/mp/delta/).

# Vision Coverage

Shaker Heights Schools offers a vision plan through EyeMed's Insight network. Review the chart below for the amount you will pay for the vision services listed.

	EyeMed	
	In Network	Out of Network (Reimbursement Total)
<b>Exam (including eyewear exam)</b> Frequency	\$0 to PLUS Provider; \$10 to other 12 Months (Calendar Year)	Up to \$40 12 Months (Calendar Year)
<b>Lenses</b> Frequency Single Bifocal Trifocal Standard Progressive	12 Months (Calendar Year) \$25 \$25 \$25 \$80	12 Months (Calendar Year) Up to \$30 Up to \$50 Up to \$70 Up to \$50
<b>Frames</b> Frequency Allowance	12 Months (Calendar Year) \$0 copay; 20% off balance over \$190 Allowance (PLUS Provider) \$0 copay; 20% off balance over \$140 allowance (network providers)	12 Months (Calendar Year) Up to \$70
<b>Contact Lenses</b> Frequency Allowance	12 Months (Calendar Year) \$0 copay; 15% off balance over \$190 Allowance (PLUS Providers) \$0 copay; 15% off balance over \$140 allowance (network providers)	12 Months (Calendar Year) Up to \$70

Coverage Tier	Per Pay
Employee Only	\$3.47
Employee + Family	\$8.85



## Finding In-network Providers

Find plenty of in-network eye doctors — including PLUS Providers — on EyeMed's Provider Locator by visiting [eyemed.com](https://www.eyemed.com) or calling **1.866.939.3633**.

# Spending Accounts

## Paying for Health Care

Shaker Heights School offers several ways to set aside pre-tax dollars to pay for medical, prescription drug, dental and vision expenses. The FSA plan is administered by Medical Mutual.

Health Care Flexible Spending Account (FSA)	
What medical plan can I choose?	PPO plan
What expenses are eligible?	Medical, prescription drug and dental (See IRS publication 502 for a full list of eligible expenses)
When can I use the funds?	All of the funds you elect for the year are available January 1
Can I roll over funds each year?	Yes, you may carry over up to \$680 if you have funds remaining at the end of the year.
How do I pay for eligible expenses?	With your Medical Mutual of Ohio debit card (you can also submit claims for reimbursement online at <a href="http://www.medmutual.com">www.medmutual.com</a> )
How much can I contribute each year?	The maximum contribution is \$3,400
Can I change my contributions throughout the year?	No, unless you have a qualifying life event, you choose an annual election amount during open enrollment and that amount is taken out of each paycheck in equal increments throughout the year

## Paying for Dependent Care

You can contribute pre-tax dollars into a dependent care FSA to pay for eligible child or elderly care expenses.

Dependent Care FSA	
What is it?	An account that allows you to set aside pre-tax dollars from each paycheck to pay for eligible child or elderly care expenses while you and your spouse work full time
Why should I consider it?	You can lower your taxable income to save some money while you take care of your daycare expenses
What expenses are eligible?	Daycare expenses for your children under age 13 or dependents who are mentally or physically incapable of caring for themselves (including elderly dependents)
When can I use the funds?	Funds are available as you contribute to the account with each paycheck
Can I roll over funds each year?	No, you will lose any funds remaining in your account at the end of the year. However, there is a 2 ½ month grace period in which to use remaining funds from the prior year.
How do I pay for eligible expenses?	With your Medical Mutual of Ohio debit card (you can also submit claims for reimbursement online at <a href="http://www.medmutual.com">www.medmutual.com</a> )
How much can I contribute each year?	The maximum contribution is \$7,500



### Important Note

If you have questions about your FSA account, you may contact Medical Mutual's customer service at 800.525.9252.

**Note:** Due to IRS regulations, it's important to keep all receipts and paperwork in case a claim needs to be verified as an eligible expense.



# Life and AD&D Insurance

Shaker Heights School provides basic life and accidental death and dismemberment (AD&D) insurance through Dearborn at no cost to eligible employees. Insurance amounts depends on your collective bargaining agreement.

Employees working 20 hours or more per week are eligible to purchase additional coverage for themselves, spouse, or children at our group rates. Please refer to the charts below for additional information.

Coverage Tier	Coverage Amounts
Employee	Increments of \$10,000 up to \$300,000, not to exceed 5 times annual earnings. Guarantee Issue Amount: \$50,000, not to exceed 3 times salary.
Spouse	Increments of \$5,000 up to \$150,000, not to exceed 50% of the employee amount. Guarantee Issue Amount: \$25,000.
Child(ren)	Live birth to 15 days - \$0; 15 days to 6 months - \$5,000; 6 months to 19 years (or 26 years if full-time student) - Increments of \$5,000 up to \$10,000

## Note:

For Supplemental Life and AD&D, if you do not elect coverage when you are first eligible and wish to apply later, you will be required to provide evidence of insurability (EOI) and are subject to approval by Dearborn. There is no annual open enrollment for Supplemental Life and AD&D. You can obtain an EOI form on the See My Benefits Online website or by contacting HR. Completed forms must be submitted to Dearborn for consideration.

\*For part-time staff, there will be a cost for the employer provided Basic Life and AD&D coverage.



## Keep Your Beneficiaries Up to Date

It is important to make sure that your designated beneficiary (the person who will receive the benefit) is up-to-date with accurate information so that your benefit is paid according to your wishes. You can check your beneficiary information and make updates by calling See My Benefits Online at 877.282.0808.

# Voluntary Insurance Benefits

## Voluntary Insurance Benefits

Shaker Heights City School District also offers several voluntary insurance products. Voluntary means that it is optional to enroll, you choose which product(s) is right for you, and you pay for the entire premium cost through payroll deduction. It's important to enroll when you are first eligible for benefits (within 30 days of hire date). If you wish to enroll at a later date, you will be required to provide Evidence of Insurability (EOI) and subject to the insurance company's approval.

Coverage	Insurance Company	Eligibility	Benefit Provided
<b>Short-Term Disability</b>	Allstate	Employee must work a minimum of 15 hours per week.  Available for employees only.	Protection for loss of income due to a short-term disability. Employees can choose a maximum monthly benefit ranging from \$400 to \$5,000, not to exceed 60% of monthly earnings. <ul style="list-style-type: none"> <li>Plan 1 Option: 7-day elimination period and 3-month maximum benefit.</li> <li>Plan 2 Option 14-day elimination period, with a 6-month benefit period maximum.</li> </ul> There is a 12/12 pre-existing condition limitation. Coverage is portable if you leave employment.
<b>Long-Term Disability</b>	Lincoln Financial	Employee must work a minimum of 25 hours per week.  Available for employees only.	Protection for loss of income due to a long-term disability. Provides 60% of earnings to a maximum of \$5,000 per month. There is a 180-day elimination period. The maximum benefit period depends upon your age at disability and the Social Security Normal Retirement Age. There is a 3/12 pre-existing condition limitation.
<b>Universal Life Insurance</b>	Allstate	Employee must work a minimum of 15 hours per week.  Coverage for employee, spouse or children under 24.	Permanent whole life insurance that provides coverage for the duration of lifetime as long as premiums are paid and other policy requirements are fulfilled. Policy also grows cash value you can draw on while still alive. <ul style="list-style-type: none"> <li>Employee: Max benefit of \$150,000</li> <li>Spouse: Max benefit of \$100,000</li> <li>Child(ren): Max benefits of \$50,000</li> </ul> Coverage is portable if you leave employment.
<b>Critical Illness</b>	Allstate	Employee must work a minimum of 15 hours per week.  Coverage for employee, spouse or children under 26.	If you're diagnosed with a covered critical illness, you may receive a lump-sum cash benefit. Employees may choose a benefit maximum of \$10,000 or \$20,000. Coverage also provides a cash benefit for completing routine wellness screenings  Employees must enroll for coverage in order for spouses and/or children to obtain coverage. Coverage is portable if you leave employment.
<b>Identity Theft</b>	Legal Shield	All benefit eligible employees.  Coverage for employee, spouse or children under 19.	A service to help protect you against identity theft by monitoring your identity (SSN, credit cards, bank accounts, social media), provides counsel when you need it, helps restore your identity, and more. <ul style="list-style-type: none"> <li>Employee Only Plan: \$4.48 per pay</li> <li>Family Plan: \$9.48 per pay</li> </ul>

The cost for coverage is calculated at the time of enrollment through the See My Benefits Online Call Center

# Wellbeing Resources

**Employee Assistance Program:** AllOneHealth is a free, confidential and voluntary employee assistance program available to all District employees and their household members. AllOneHealth provides mental health support, life coaching, work-life resources, legal referrals, financial consultation, personal assistance, medical advocacy and more.

Website: [ease.mylifeexpert.com](http://ease.mylifeexpert.com)

Company Code: shaker

Phone: (800) 521-3273 - available 24/7/365

**Health Advocate:** Health Advocate is a free resource to help employees and their household members navigate the complexity of the healthcare system. They offer a full range of services including finding in-network doctors and making appointments, answering questions about diagnoses and treatments, coordinating pre-authorizations, resolving billing and claims issues and more.

Website: [HealthAdvocate.com/shakerheightsschools](http://HealthAdvocate.com/shakerheightsschools)

Registration Code: KTCLE5J

Email: [answers@HealthAdvocate.com](mailto:answers@HealthAdvocate.com)

Phone: (866) 695-8622

**Fitness Center Discounts:** The Shaker Heights City School District has a corporate partnership with the Mandel JCC Fitness Center. All employees have access to a discounted monthly membership rate. For more information, please contact JCC Membership Services at 216.831.0700.

Employees covered under Medical Mutual also have access to Husk Wellness. Husk Wellness offers discounts to gym and fitness centers, nutrition programs, home equipment and tech, on-demand fitness classes and mental health services. Covered members can access these services by visiting [Husk Wellness](#).

**Weight Management:** Medical Mutual members have access to a discounted Weight Watchers membership, almost 50% off the regular cost. Interested staff can contact Medical Mutual by email at [WW@MedMutual.com](mailto:WW@MedMutual.com) or by phone at 1-800-251-2583 and provide the following information: first and last name, date of birth, Medical Mutual ID number, email address and phone number.

**Disease Management:** Total Health is a free disease management program provided to all Medical Mutual members. Members can receive additional free resources and services if they are diagnosed with diabetes, heart failure, asthma, hypertension, COPD, CAD musculoskeletal issues or having a baby. To learn more, employees can call 1-800-590-2583.

**Tobacco Cessation:** Medical Mutual offers Pivot Breathe, a free program for anyone who wants to kick their tobacco or vaping habit. The program features 12 weeks of free nicotine replacement therapy (NRT), an easy-to-use mobile app, a personal health coach, access to Pivot's supportive community, and so much more. Interested staff can view more information by visiting [pivot.co/medmutual](http://pivot.co/medmutual).

**Public Service Student Loan Forgiveness:** If you're employed by a government or not-for-profit organization, you might be eligible for the PSLF Program. The PSLF Program forgives the remaining balance on your Direct Loans after you've made the equivalent of 120 qualifying monthly payments under an accepted repayment plan, and while working full-time for an eligible employer. Shaker Heights City School District is a local government entity and a qualified employer. Visit [studentaid.gov](http://studentaid.gov) to learn more.

More resources are available and can be found on the [Staff Intranet](#) or by contacting the Human Resources Department.

# Saving for Retirement

**Pension Plans:** All Shaker Heights City School Employees contribute to either the School Employees Retirement System (SERS) or the State Teachers Retirement System (STRS). Generally speaking, all non-teaching employees of Shaker Schools contribute to SERS, while teaching staff and administrators contribute to STRS.

For SERS, employees contribute 10% and the District contributes 14% of their salary each year to their pension plan.

For STRS, employees contribute 14% and the District contributes 14% of their salary each year to their pension plan.

Additional information on STRS and SERS can be found at <https://www.strsoh.org/> or <https://www.ohsers.org/>.

**Retirement Plans:** The Shaker Heights City School District partners with many 403(b) and 457(b) retirement plans to offer employees additional chances to save for their retirement. While STRS and SERS provide a considerable monthly income during retirement, the amount they pay will be significantly lower than your current monthly income. If you are interested in supplementing the income you'll miss during retirement, and diversifying your retirement sources, a great option is contributing to a 403(b) or 457(b) plan.

**What is a 403(b)?** A 403(b) is a retirement plan that is offered to employees of public schools and certain not-for-profit organizations. Employees can save for retirement by contributing through payroll deductions. Employees of Shaker Heights City School District can contribute a set dollar amount on a pre-tax basis.

**What is a 457(b)?** A 457(b) is a retirement plan that is only offered to state and local government employees. As an employee of a public school district, you are eligible to participate. Just like with a 403(b) plan, employees can save for retirement by contributing through payroll deductions. Employees of Shaker Heights City School District can contribute a set dollar amount on a pre-tax basis.

**Annual Contribution Limits:** For 2025, the maximum annual contribution for a 403(b) or 457(b) plan is \$23,500. For employees age 50 or older, you may also contribute an additional \$7,500, bringing your annual contribution maximum to \$31,000.

**How To Start Contributing:** Interested employees can contribute to a 403(b), 457(b) or both plans by following these steps:

1. Review the list of [current providers](#) that partner with the Shaker Heights City School District.
2. Contact your provider of choice and open a new account.
3. Once you have created your new account, you must submit a Salary Reduction Agreement form to the Treasury Department in order to begin payroll deductions. The 403(b)/457(b) Salary Reduction Agreement form can be located on [PowerSchool Employee Records](#) under Available Forms.

Interested staff can view more information on available vendors by visiting the [Staff Intranet](#).



# Contact Information

Benefit	Vendor	Phone	Website or Email
<b>Shaker Heights School Benefit Advocate Center</b>	Health Advocate	866.695.8622	HealthAdvocate.com/shakerheightsschools
<b>Medical and Prescription Drug</b>	Medical Mutual of Ohio	800.315.3137	www.medmutual.com
<b>Dental</b>	Delta Dental of Ohio	800.524.0149	www.deltadentaloh.com
<b>Vision</b>	EyeMed	866.559.5252	www.eyemed.com
<b>Flexible Spending Account</b>	Medical Mutual of Ohio	800.525.9252	www.medmutual.com
<b>Life and AD&amp;D</b>	Dearborn	800.721.7987	www.mydearborngroup.com
<b>Supplemental Life and AD&amp;D</b>	Dearborn	800.721.7987	www.mydearborngroup.com
<b>Voluntary Short-Term Disability, Universal Life and Critical Illness</b>	Allstate	800.521.3535	www.allstatebenefits.com
<b>Voluntary Long-Term Disability</b>	Lincoln National	877.275.5462	www.lincolnfinancial.com
<b>Identity Theft</b>	Legal Shield	888.494.8519	https://www.idshield.com/
<b>Employee Assistance Program</b>	AllOne Health	800.521.3273	https://ease.mylifeexpert.com/
<b>See My Benefits Online</b>	Enrollment Call Center	877.282.0808	https://seemybenefitsonline.com
<b>Shaker Heights Human Resources</b>	Nellie Brown, HR Specialist	216.295.6218	brown_c@shaker.org

Shaker Heights Schools Benefit Advocacy Service is offered at no cost to you through Health Advocate.

Health Advocate is an employee resource for your company-sponsored health, welfare and insurance benefits. Talk to a representative about your eligibility, enrollment or your current benefits.

- Phone: **866.695.8622**
- Email: [answers@HealthAdvocate.com](mailto:answers@HealthAdvocate.com)
- See page 15 for additional details



# Life comes with challenges. **Your Assistance Program is here to help.**

Your Assistance Program can help you reduce stress, improve mental health, and make life easier by connecting you to the right information, resources, and referrals.

All services are free, confidential, and available to you and your family members. This includes access to short-term counseling and the wide range of services listed below:

**Mental Health** - 3 sessions per issue

Manage stress, anxiety, and depression, resolve conflict, improve relationships, and address any personal issues. Choose from in-person sessions, video counseling, or telephonic counseling.

**Life Coaching** - 3 sessions

Reach personal and professional goals, manage life transitions, overcome obstacles, strengthen relationships, and achieve greater balance.

**Wellness Coaching** - 3 sessions

Build holistic well-being with wellness coaching, wellness courses, fitness videos, mindfulness exercises, and a variety of fun, engaging tools, challenges, and activities.

**Financial Consultation** - 3 sessions

Build financial wellness related to budgeting, buying a home, paying off debt, resolving general tax questions, preventing identity theft, and saving for retirement or tuition.

**Legal Referrals**

Receive referrals for personal legal matters including estate planning, wills, real estate, bankruptcy, divorce, custody, and more.

**Work-Life Resources and Referrals**

Obtain information and referrals when seeking childcare, adoption, special needs support, eldercare, housing, transportation, education, and pet care.

**Personal Assistant**

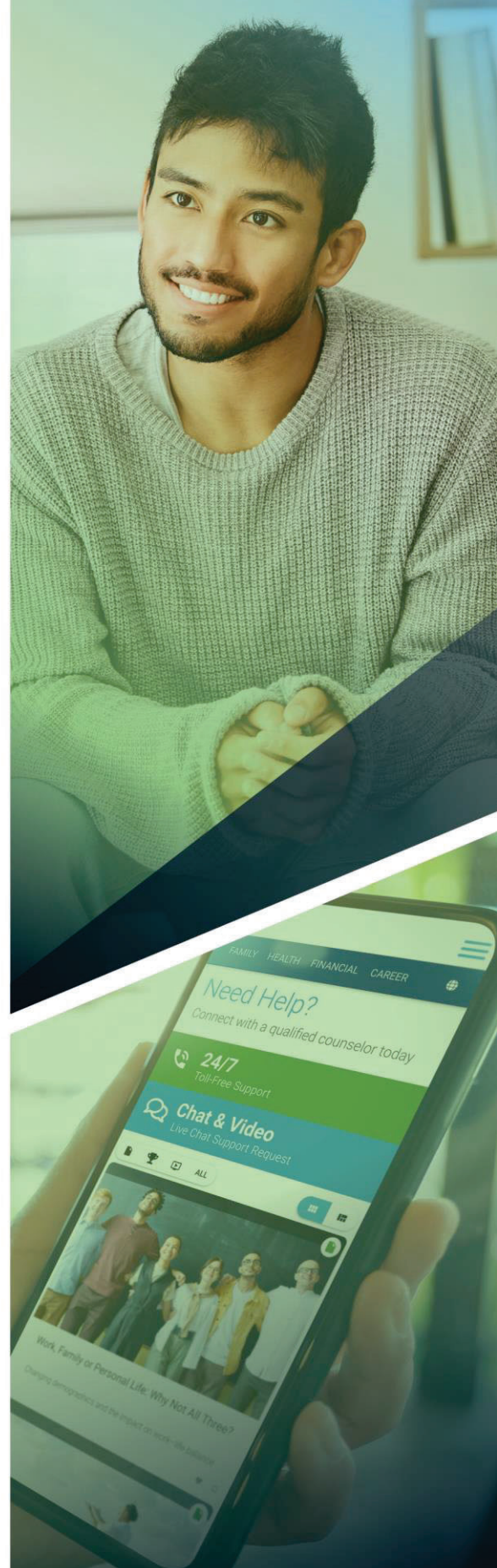
Save time with referrals for travel and entertainment, seeking professional services, cleaning services, home food delivery, and managing everyday tasks.

**Medical Advocacy**

Get help navigating insurance, obtaining doctor referrals, securing medical equipment, and planning for transitional care and discharge.

**Member Portal**

Access your benefits 24/7/365 through your member portal with online requests and chat options. Explore thousands of self-help tools and resources including articles, assessments, podcasts, and resource locators.



# The AllOne Health App— Instant Access to Your Assistance Program



Taking care of your mental health should be simple, supportive, and always within reach. That's why we created the AllOne Health App—to make it easier than ever for you to access the care you need, when you need it.

Whether you're navigating life's challenges, looking for resources, or just need someone to talk to, we're here to help.

## WHAT YOU'LL FIND INSIDE THE APP

### Virtual Counseling Made Easy

Self-schedule virtual counseling sessions directly through the app.

### Izzy, Your AI Mental Health Navigator

Receive guidance and personalized support in real time.

### On-Demand Self-Help Resources

Explore self-guided therapy (iCBT), articles, videos, assessments, and tools.

### Real Human Support

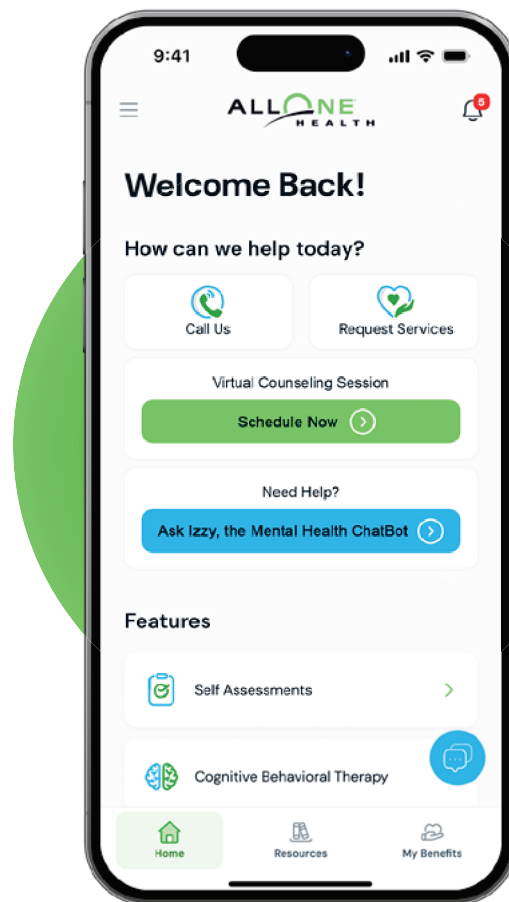
24/7 live assistance is always just a tap away when you want to speak to someone.

## HOW IT WORKS

1. **Download the AllOne Health App** from the [Apple App Store](#) or [Google Play Store](#).
2. **Sign Up** using your existing member portal access code. You'll still have access to the member portal. However, the new AllOne Health App makes accessing care and requesting support easier and more convenient.
3. **Start Exploring** – Book sessions, chat with Izzy, and discover resources that support your whole health.

### Download the App and Take the First Step

No matter where you are in your journey, support is here—because your mental health deserves care that's easy to access, always available, and built around you.



Contact AllOne Health

**Call:** (800) 521-3273

**Visit:** [easeatwork.com](https://easeatwork.com)

**Code:** shaker





# Caring for you in all ways. Always.<sup>SM</sup>

Health Advocate is here to help you and your family with any health or well-being issues. You get access to experts who will do the work to ensure that you get the right information and assistance at the right time. We're here for you no matter what, to help with anything you need anytime you need it, in the language and communication channel you're most comfortable using.



## Save time, money, and worry

- Understand your coverage for medical, dental and vision services; know your deductibles, and copays
- Get help resolving claims and billing issues, check that your out-of-pocket costs are correct

## Expert healthcare support when you need it most

- Understand health conditions, diagnoses, and treatments; explore the latest treatment options
- Get connected to the right in-network doctors and specialists; get help with appointments and transferring records

## Feel confident that your medical care and treatment is on track

- Get answers to your questions so you can make the right choices for your care
- Connect with leading specialists for second opinions; get support for pre-authorizations and transferring records

## Get help anytime, anywhere online or through our mobile app

- Quickly connect with an advocate in real time through chat
- Learn all about your Health Advocate services and the many ways we can help you and your family



**866-695-8622**

[answers@HealthAdvocate.com](mailto:answers@HealthAdvocate.com)

[HealthAdvocate.com/shakerheightsschools](https://HealthAdvocate.com/shakerheightsschools) Client Code: KTCLE5J

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 **HealthAdvocate<sup>SM</sup>**





This document is an outline of the coverage proposed by the carrier(s), based on information provided by your company. It does not include all of the terms, coverage, exclusions, limitations, and conditions of the actual contract language. The policies and contracts themselves must be read for those details. Policy forms for your reference will be made available upon request.

The intent of this document is to provide you with general information regarding the status of, and/or potential concerns related to, your current employee benefits environment. It does not necessarily fully address all of your specific issues. It should not be construed as, nor is it intended to provide, legal advice. Questions regarding specific issues should be addressed by your general counsel or an attorney who specializes in this practice area.

#### The Fine Print

The information contained in this summary should in no way be construed as a promise or guarantee of employment. The company reserves the right to modify, amend, suspend, or terminate any plan at any time for any reason. If there is a conflict between the information in this brochure and the actual plan documents or policies, the documents or policies will always govern. Complete details about the benefits can be obtained by reviewing current plan descriptions, contracts, certificates, policies and plan documents available from your Human Resources Office. This benefits enrollment guide highlights recent plan design changes and is intended to fully comply with the requirements under the Employee Retirement Income Security Act ("ERISA") as a Summary of Material Modifications and should be kept with your most recent summary plan description.