

YOUR 2023–2024

GUIDE

benefits

SEPTEMBER 1, 2023 —AUGUST 31, 2024



Mountain Home School District #193

One Town One Team

Eligibility

You are eligible for benefits if you work 30 or more hours per week. You may also enroll your eligible family members under certain plans you choose for yourself. Eligible family members include:

- Your legally married spouse
- Your children who are your natural children, stepchildren, adopted children or children for whom you have legal custody (age restrictions may apply). Disabled children age 26 or older who meet certain criteria may continue on your health coverage.

When Coverage Begins

- **New Hires:** You must complete the enrollment process within 30 days of your date of hire. **If you enroll on time, coverage is effective on the first of the month following your date of hire.**

If you fail to enroll on time, you will NOT have benefits coverage.

- **Open Enrollment:** Changes made during Open Enrollment are effective September 1, 2023—August 31, 2024.

To enroll online, go to

<http://mountainhomeschooldistrict.ease.com>

Choose Carefully!

Due to IRS regulations, you cannot change your elections until the next annual Open Enrollment period, unless you have a qualified life event during the year. Following are examples of the most common qualified life events:

- Marriage or divorce
- Birth or adoption of a child
- Child reaching the maximum age limit
- Death of a spouse, RDP, or child
- You lose coverage under your spouse's plan
- You gain access to state coverage under Medicaid or CHIP

Making Changes

To make changes to your benefit elections, you must contact Human Resources within 31 days of the qualified life event (including newborns). Be prepared to show documentation of the event such as a marriage license, birth certificate or a divorce decree. If changes are not submitted on time, you must wait until the next Open Enrollment period to make your election changes.

Required Information—When you enroll, you will be required to enter a Social Security number (SSN) for all covered dependents. The Affordable Care Act (ACA), otherwise known as health care reform, requires the company to report this information to the IRS each year to show that you and your dependents have coverage. This information will be securely submitted to the IRS and will remain confidential.

Medical

We're pleased to offer you a choice of 3 medical plans. Below is a brief summary of some of our In-Network Benefits, please refer to plan documents in Ease for full benefit information and Value-Added Services.

Key Medical In-Network Benefits	SelectHealth 350	SelectHealth 1250	SelectHealth HSA 2000
	SLHP—St. Luke's	SLHP—St. Luke's	SLHP—St. Luke's
Deductible (per calendar year)			
Individual / Family	\$350 / \$700	\$1,250 / \$2,500	\$2,000 / \$4,000
Out-of-Pocket Maximum (per calendar year)			
Individual / Family	\$3,000 / \$6,000	\$4,000 / \$8,000	\$4,000 / \$8,000
Covered Services			
Office Visits (physician/specialist)	\$20 / \$30 copay	\$30 / \$45 copay	Deductible then: \$15 / \$25
Chiropractic Visits	\$30 copay	\$30 copay	20% after ded
Virtual Visits	No charge	No charge	No charge after ded
Routine Preventive Care	No charge	No charge	No charge
Outpatient Diagnostic (lab/X-ray)	No charge	No charge	No charge after ded
Complex Imaging	20% after ded	20% after ded	20% after ded
Ambulance	20% after ded	20% after ded	20% after ded
Emergency Room	\$100 after ded	\$100 after ded	\$75 after ded
Urgent Care Facility	\$45 copay	\$45 copay	\$35 copay after ded
Inpatient Hospital Stay	20% after ded	20% after ded	20% after ded
Outpatient Surgery	20% after ded	20% after ded	20% after ded
Prescription Drugs (Tiers)			
Retail Pharmacy (30-day supply) Tier 1 Tier 2 Tier 3 Tier 4	\$10 25% 50% 20%	\$250 RX Ded Applies to Tiers 2-4 \$10 25% 50% 20%	Medical Ded, then: \$7 \$21 \$42 \$100

Coinsurance percentages and copay amounts shown in the above chart represent what the member is responsible for paying. If you use an out-of-network provider, you will be responsible for any charges above the maximum allowed amount.

Medical Rates

Mountain Home School District generously contributes \$813.50 monthly towards your Select Health benefits,
plus employee coverage for dental and vision.

Employees can apply any credits reflected below on purchasing additional benefits such as dependent coverage or voluntary coverage.

Employees who exceed the \$813.50 monthly contribution will be responsible for the remainder of the premium(s).

SelectHealth 350 Rates			
Coverage Tier	Monthly Rate	Employer Contribution	Employee Contribution
Employee Only	\$740.50	\$813.50	(\$73.00)
Employee & Spouse	\$1,623.50	\$813.50	\$810.00
Employee & Child	\$1,137.00	\$813.50	\$323.50
Employee & Children	\$1,318.10	\$813.50	\$504.60
Family	\$1,874.00	\$813.50	\$1,060.50
Dual Employee Family	\$1,874.00	\$1,627.00	\$247.00

SelectHealth 1250 Rates			
Coverage Tier	Monthly Rate	Employer Contribution	Employee Contribution
Employee Only	\$630.00	\$813.50	(\$183.50)
Employee & Spouse	\$1,381.40	\$813.50	\$567.90
Employee & Child	\$967.50	\$813.50	\$154.00
Employee & Children	\$1,121.50	\$813.50	\$308.00
Family	\$1,594.50	\$813.50	\$781.00
Dual Employee Family	\$1,594.50	\$1,627.00	(\$32.50)

SelectHealth HSA 2000 Rates			
Coverage Tier	Monthly Rate	Employer Contribution	Employee Contribution
Employee Only	\$593.80	\$813.50	(\$219.70)
Employee & Spouse	\$1,302.20	\$813.50	\$488.70
Employee & Child	\$912.00	\$813.50	\$98.50
Employee & Children	\$1,057.20	\$813.50	\$243.70
Family	\$1,503.10	\$813.50	\$689.60
Dual Employee Family	\$1,503.10	\$1,627.00	(\$123.90)

Dental

Employees must be enrolled in Medical coverage to enroll in Dental and Vision coverages

Key Dental Benefits	Delta Dental PPO		
	PPO	Premier	Non-Participating
Deductible (per calendar year) - Does not apply to Preventive Services			
Individual / Family	None	None	None
Benefit Maximum (per calendar year; Preventive, Basic and Major services combined)			
Per Individual	\$1,500	\$1,500	\$1,500
Covered Services			
Preventive Services	0-30%*	0-30%*	0-30%*
Basic Services	0-30%*	0-30%*	0-30%*
Major Services	50%	50%	50%

*See benefit booklet for benefits and limitations

Key Dental Benefits	Willamette Dental Blue Connect
Deductible (per calendar year) - Does not apply to Preventive Services	
Individual / Family	None
Benefit Maximum (per calendar year; Preventive, Basic and Major services combined)	
Per Individual	None
Covered Services	
Preventive Services	\$15 copay per visit
Basic Services	Varies*
Major Services	Varies*
Orthodontic Services	\$1,500 copay

*See benefit booklet for benefits and limitations

Delta Dental of Idaho Rates			
Coverage Tier	Monthly Rate	Employer Contribution	Employee Contribution
Employee Only	\$40.21	\$40.21	\$0.00
Employee & Spouse	\$76.40	\$40.21	\$36.19
Employee & Child	\$76.40	\$40.21	\$36.19
Employee & Children	\$112.58	\$40.21	\$72.37
Family	\$112.58	\$40.21	\$72.37
Dual Employee Family	\$112.58	\$80.42	\$32.16

Willamette Dental Blue Connect Rates			
Coverage Tier	Monthly Rate	Employer Contribution	Employee Contribution
Employee Only	\$56.43	\$40.21	\$16.22
Employee & Spouse	\$96.57	\$40.21	\$56.36
Employee & Child	\$96.57	\$40.21	\$56.36
Employee & Children	\$140.44	\$40.21	\$100.23
Family	\$140.44	\$40.21	\$100.23
Dual Employee Family	\$140.44	\$80.42	\$60.02

Vision

Employees must be enrolled in Medical coverage to enroll in Dental and Vision coverages

LifeMap / VSP Vision		
Key Vision Benefits	In-Network	Frequency
Exam	\$10	12 months
Materials Copay	\$25	12 months
Lenses		
Single Vision	No charge after materials copay	12 months
Bifocal		
Trifocal		
Frames	Covered up to \$130	12 months
Contact Lenses (in lieu of glasses)	Covered up to \$130	12 months

LifeMap / VSP Vision Rates			
Coverage Tier	Monthly Rate	Employer Contribution	Employee Contribution
Employee Only	\$6.92	\$6.92	\$0.00
Employee & Spouse	\$13.83	\$6.92	\$6.91
Employee & Child(ren)	\$14.82	\$6.92	\$7.90
Family	\$23.67	\$6.92	\$16.75
Dual Employee Family	\$23.67	\$13.84	\$9.83

Voluntary Life

Supplemental Life (Employee-paid)

If you determine you need more than the basic coverage, you may purchase additional coverage through Anthem for yourself and your eligible family members.

1. During your initial eligibility period only, you can receive coverage up to the Guaranteed Issue amounts without having to provide Evidence of Insurability (EOI, or information about your health). Coverage amounts that require EOI will not be effective unless approved by the insurance carrier.

	Benefit Option	Guaranteed Issue ¹
Employee	\$5,000 increments; to a maximum of \$300,000 or 5x your annual earnings, whichever is less	\$130,000
Spouse	\$5,000 increments; to a maximum of \$300,000	\$50,000
Child(ren)	\$2,000 increments to a maximum of \$10,000	\$10,000

LifeMap Voluntary Life & AD&D Monthly Rates

Age	Rate per \$1,000
24 & Under	\$0.072
25-29	\$0.069
30-34	\$0.078
35-39	\$0.106
40-44	\$0.155
45-49	\$0.240
50-54	\$0.381
55-59	\$0.598
60-64	\$0.839
65-69	\$1.358
70-74	\$2.694
75+	\$5.547
Dependent Child	\$ 0.224 per \$2,000 of benefit

Voluntary Long-Term Disability

	LifeMap Voluntary Long Term Disability
Monthly Benefit Begins	180 days of disability
Benefit Replacement Percentage	60% of monthly pre-disability earnings
Maximum Benefit	\$6,000 per month
Minimum Benefit	The greater of \$100 or 10% of the gross monthly benefit
Maximum Benefit Period	If you become disabled prior to age 61, the maximum benefit period will be social security normal retirement age.

LifeMap Voluntary Long Term Disability Monthly Rates	
Age	Rate per \$100
24 & Under	\$0.09
25-29	\$0.14
30-34	\$0.22
35-39	\$0.25
40-44	\$0.36
45-49	\$0.51
50-54	\$0.66
55-59	\$0.75
60-99	\$0.79

Employee Assistance Program (EAP)

Your Employee Assistance Program is provided to you by BPA Health.

Connect to Free & Confidential Resources with 4 visits per incident:

- Counseling (in person, video, phone or text)
- Legal advice or consultation
- Financial planning
- Online tools

To login, go to: www.bpahealth.com/eap-home

Employer Name: Mountain Home School District 193 Password:8007260003

Toll Free Number: 800-726-0003 or text 208-336-4275

Voluntary Benefits

Our benefit plans are here to help you and your family live well—and stay well. But did you know that you can strengthen your coverage even further? It's true! Our voluntary benefits through Colonial Life are designed to complement your health care coverage and allow you to customize our benefits to you and your family's needs. The best part? Benefits from these plans are paid directly to you! Coverage is also available for your spouse and dependents. You can enroll in these plans during Open Enrollment—they're completely voluntary, which means you are responsible for paying for coverage at affordable group rates.

Accident Insurance

Accident insurance can soften the financial impact of an accidental injury by paying a benefit to you to help cover the unexpected out-of-pocket costs related to treating your injuries. Some accidents, like breaking your leg, may seem straightforward: You visit the doctor, take an X-ray, put on a cast and rest up until you're healed. But in reality, treating a broken leg can cost up to \$7,500¹. And it's not only broken limbs—an average non-fatal injury could cost you \$6,620 in medical bills². When your medical bill arrives, you'll be relieved you have accident insurance on your side..

Disability Insurance

Disability insurance provides benefits that replace part of your lost income when you become unable to work due to a covered injury or illness.

Cancer Insurance

Cancer insurance helps offset the out-of-pocket medical and indirect, non-medical expenses related to cancer that most medical plans don't cover. This coverage also provides a benefit for specified cancer-screening tests.

Hospital Indemnity Insurance

When you or a dependent need to be hospitalized, your family deserves to focus on their well-being, not the stress of the average three-day hospital stay, which can cost you \$30,000¹. Hospital indemnity insurance can help reduce costs by paying you or a covered dependent a benefit to help cover your deductible, coinsurance and other out-of-pocket costs due to a covered hospitalization.

Critical Illness

Most of us don't have an extra \$7,000 ready to spend—and even if we do, we don't want to spend it on medical expenses. Unfortunately, the average cost to treat a critical illness is just that: \$7,000³. But with critical illness insurance, you'll receive a lump-sum benefit if you are diagnosed with a covered condition. You can use this benefit however you like, including to help pay for: treatments, prescriptions, travel, increased living expenses and more.

Life Insurance

Life insurance enables you to tailor your coverage for your individual needs and helps provide financial security for your family members.

Flexible Spending Accounts (FSA)

We provide you with an opportunity to participate in our flexible spending accounts (FSAs) administered by AmeriFlex. FSAs allow you to set aside a portion of your income, before taxes, to pay for qualified health care and/or dependent care expenses. Because that portion of your income is not taxed, you pay less in federal income, Social Security and Medicare taxes.

Health Care FSA

For 2023, you may contribute up to \$3,050 to cover qualified health care expenses incurred by you, your spouse and your child ren up to age 26. Some qualified expenses include:

- ▶ Coinsurance
- ▶ Copayments
- ▶ Deductibles
- ▶ Prescriptions and Over-the-Counter Drugs
- ▶ Dental treatment
- ▶ Orthodontia
- ▶ Eye Exams, Materials, LASIK

For a complete list of eligible expenses, visit www.irs.gov/pub/irs-pdf/p502.pdf.

Limited-Purpose Health Care FSA (for HSA participants)

If you enroll in the HSA medical plan, you may only participate in a limited-purpose Health Care FSA. This type of FSA allows you to be reimbursed for eligible dental, orthodontia and vision expenses while preserving your HSA funds for eligible medical expenses.

Dependent Care FSA

For 2023, you may contribute up to \$5,000 (per family) to cover eligible dependent care expenses (\$2,500 if you and your spouse file separate tax returns). Some qualified expenses include:

- ▶ Care of a dependent child under the age of 13 by babysitters, nursery schools, pre-school or daycare centers
- ▶ Care of a household member who is physically or mentally incapable of caring for him/herself and qualifies as your federal tax dependent

For a complete list of eligible expenses, visit www.irs.gov/pub/irs-pdf/p503.pdf.

Flexible Spending Account

An account for setting aside tax-free money for healthcare expenses

Adding a flexible spending account (FSA) to a benefits program can help employers save on FICA taxes while giving their employees a benefit that helps them pay for everyday healthcare expenses.

How it Works

Employees who enroll in an FSA can experience tax savings on qualified expenses such as copays, deductibles, prescriptions, over-the-counter drugs and medications, and thousands of other everyday items. Employers receive FICA tax savings for every employee who participates.

Employee Savings Example

Annual Gross Pay: \$40,000

Yearly FSA Contribution: \$2,500

Tax Deductions (25%): 9,375

Take-Home Pay without FSA: \$30,000

Take-Home Pay with FSA: \$30,635 (\$635 increase in take-home pay)

Benefits for Employers

- No payroll taxes due on the amounts employees contribute to the FSA
- Helping employees save money on their everyday medical expenses can aid in employee retention and recruitment

Benefits for Employees

- For every dollar an employee contributes to an FSA, that's one less dollar they're being taxed on from their income.
- Employees can prepare for upcoming medical expenses or unexpected emergencies
- User-friendly online account and mobile app makes it easy for employees to manage their benefits

FSA Contribution Limits

- \$3,050

Industry's Only Complimentary FSA Guarantee

If participants spend more than they contribute, resulting in a net aggregate loss in the employer's plan, Ameriflex will refund the difference back to the employer.

MyPlanConnect

MyPlanConnect is an additional feature you can add to your FSA program. It connects your employees' FSA transactions with their insurance Explanation of Benefits (EOB). If the card transaction matches the employee's EOB, MyPlanConnect will prepare the claim and allow the employee to request reimbursement without the need to submit additional documentation. This saves employers time by reducing questions regarding claims and the number of challenges regarding claim eligibility.

How does it work?

Step 1: Your employees connect their insurance plans.

Step 2: Our system pulls data and pre-fills forms.

Step 3: Claims are automatically prepared and evaluated.

Rollover and Grace Period

A rollover allows participants to carry up to \$550 of unused FSA funds to the next plan year. A grace period gives participants an extra 2 ½ months after the close of the plan year to incur expenses using their remaining FSA funds. As part of COVID-19 relief laws, the following options are available to employers:

Rollover: Employers can choose to allow participants to carry over all funds remaining in their FSA for plan years ending in 2023 and 2024. This applies to FSAs and dependent care accounts.

Grace Period: Employers can choose to extend their grace periods to 12 months for plan years ending in 2023 and 2024. This applies to FSAs and dependent care accounts.

Both of these provisions are optional.

Health Savings Account (HSA) Overview

The KeyBank Health Savings Account gives you flexibility while helping you manage rising health care costs.

The KeyBank HSA is an interest-bearing account that gives you the ability to make tax-free withdrawals to pay for trips to the doctor, filling prescriptions, or other healthcare-related expenses. Simply make contributions to your KeyBank HSA through payroll deductions, direct deposit, deposits at any KeyBank branch, or by transferring funds from another account in online banking. When you need to make withdrawals for qualified medical expenses, just use your KeyBank HSA checks or debit card or make payments or transfers using online banking and Key Bill Pay.

Two simple ways to open your KeyBank HSA

- Online – The most convenient way to apply. Just go to key.com/hsa and choose “Apply Online.” The easy-to-follow instructions will guide you through the process.
- KeyBank branch – You can also open an HSA at any KeyBank branch. To find the branch nearest you, go to key.com/branch or call 1-800-KEY2YOU® (539-2968). For clients using a TDD/TTY device, please call 1-800-539-8336.

Contributions to your HSA

When you enroll in a High Deductible Health Plan (HDHP) and open an HSA with KeyBank, your employer may contribute to your HSA. Your contributions along with those of your employer (combined) may add up to the amount of—but cannot exceed—the below figures.

The benefits of a KeyBank HSA

- Your tax-advantaged dollars grow and earn interest while in the account, and that interest earned is also tax-advantaged.
- Your employer may opt to make contributions to your account.
- You can easily manage and track expenses with Key Bill Pay and monitor your account activity through online banking.
- If you leave your job, relocate, or become unemployed, your KeyBank HSA account stays active and goes with you. Your HSA remains active and you may continue to withdraw funds from your account. (To make further contributions, however, you will need to remain enrolled in an HDHP.)
- Unlike Flexible Spending Accounts, the money accrued in your account remains in your account and carries over year after year.
- You control the funds in your HSA.

What are the maximum contributions?

Plan Year	Individual Coverage	Family Coverage	Over 55 Catch Up
2023	\$3,850	\$7,750	\$1,000
2024	\$4,150	\$8,300	\$1,000

Contributing to your KeyBank HSA

Method	Type of Contribution	
Branch	Current or prior year contribution	Prior year contributions must be made by tax filing deadline and require signed deposit form
Online	Current or prior year contribution	Once enrolled in Key's online banking, you can transfer funds to your Key HSA from another KeyBank deposit account or from another financial institution
ACH/Payroll	Current year	Speak to your employer about your options
IRA	Trustee-to-trustee transfer	One-time transfer allowed from existing IRA
HSA	Rollover/Trustee transfer	Allowed one rollover per year; no limits on trustee-to-trustee transfers



See important disclosures on reverse.

Health Savings Account (HSA) Overview

KeyBank's HSA

Key's HSA features a tiered interest-bearing checking account with an optional Key Investment Services® (KIS) brokerage account. Account access is available via check, debit card, and online banking.

Checking Account	<ul style="list-style-type: none">• Interest-bearing• No minimum balance• Check/Debit Card access• Deposit by online banking or visiting a branch• Online banking/Bill Pay
Long-Term Investments Key Investment Services LLC HSA Investment Account ¹	Work independently or with an advisor. With a minimum balance of \$3,500 in your KeyBank HSA, you can independently invest a minimum of \$1,000 in your KIS HSA investment account in mutual funds. With a minimum \$7,000 balance, you can work with a KIS advisor to invest a minimum of \$1,000 in mutual funds, exchange traded funds (ETF) and managed portfolio options. Connect with a Key Investment Services advisor to learn more information.
Debit Card	<ul style="list-style-type: none">• Optional Healthcare Spending Protection• Healthcare Spending Protection prevents accidental use at pizza shops, gas stations, etc. by restricting spending to merchants and services associated with qualified medical distributions.² (Based on Mastercard³ determination)• Additional cards available
Statements	You will receive a monthly statement containing all bank account activity and a summary of your KIS HSA investment account activity, if applicable. Detailed KIS HSA investment account activity is sent in a separate statement.
Fees	Please refer to the disclosure you receive at account opening for details about fees and the many ways to waive them. The monthly \$3.00 paper statement fee is NOT waived unless you sign up for online statements.

Accessing your funds

Branch	With signed withdrawal form
ATM	Free at KeyBank ATM; foreign ATM fees may apply
Debit Card	Free of charge ⁴
Online Transfers	Free to both Key and non-Key financial institutions
Online Bill Pay	Free of charge
Check	Free of charge

You cannot pay for an expense that was incurred prior to the time your account was opened or your High Deductible Health Plan goes into effect, whichever is the later of the two. HSA funds can be used to pay for qualified medical expenses for yourself, spouse, and dependents whether or not they are covered under your health plan.²

Go to key.com/hsa

Call 208-364-8349



¹ Investment products are offered through Key Investment Services LLC (KIS), member FINRA/SIPC and SEC-registered investment advisor. KIS is affiliated with KeyBank National Association (KeyBank). Investment products made available through KIS are:

NOT FDIC INSURED • NOT BANK GUARANTEED • MAY LOSE VALUE • NOT A DEPOSIT • NOT INSURED BY ANY FEDERAL OR STATE GOVERNMENT AGENCY

KIS and KeyBank are separate entities, and when you buy or sell securities you are doing business with KIS, and not KeyBank.

² IRS Publication 502* includes an alphabetized list of qualified medical expenses. (*Available from the IRS or their website <http://www.irs.gov/pub/irs-pdf/p502.pdf>)

³ Mastercard is a registered trademark, and the circles design is a trademark of Mastercard International Incorporated.

⁴ Go to key.com/savings for more details about getting an HSA Debit Card.

Online Enrollment System Steps: Easy as One - Two – Three!

ONE: You will receive an email from the *Ease Enrollment System* prompting you to log in and make your changes.

TWO: Make your **2023** elections. Don't forget to save!

THREE: Don't forget to sign!



Welcome to Ease

Step 4 of 8: Benefits

Test B, Employee
Sara Ramos, CA

Medical Plan (Open Enrollment)
Select Enrolled or Waived for each individual listed below.

Test Employee - Employee ✓ Enrolled

Enrolled

Are you waiving dependents?
You have not entered any children. If you have dependent children and are waiving coverage for them, check the box below. Otherwise, keep the box unchecked.
 Waive Children

Choose your Medical plan Show Comparisons

Plan	Employee Cost Per Pay Period (Semi-Monthly)
<input checked="" type="checkbox"/> AETNA CA HMO Rct • Aetna Provider Search • Carlson, Barbara B-Gibson_2212126_CA_HMO_7_1,2018_Original	\$49.00
<input checked="" type="checkbox"/> AETNA CA PPO OA Managed Choice • Aetna Provider Search • Carlson, Barbara B-Gibson_PPO Benefits Summary_7_1,2018_Original	\$50.00
<input checked="" type="checkbox"/> Kaiser Gold 80 500/30 HMO • Kaiser Facility and Doctor Search	\$31.27

Benefit Summary

Medical

Dental
\$3.71 per pay period

Vision
Not yet specified

YOUR TOTAL COST
\$52.71
PER PAY PERIOD (SEMI-MONTHLY)

Back Next

Enrollment Confirmation

You have completed the online enrollment process. You're required to electronically sign to acknowledge your personal details and elections.

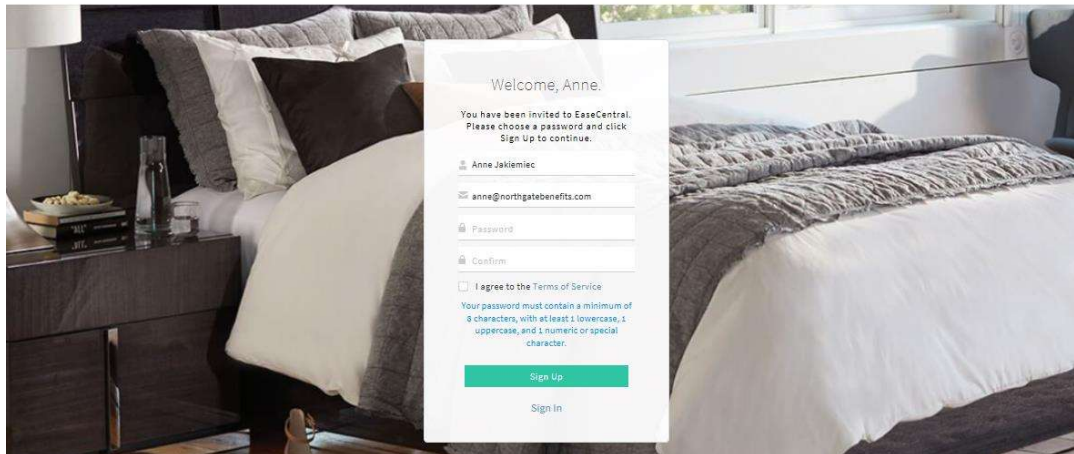
If you have any comments about this process, please leave feedback on the Finish section. Your input will be used to improve the enrollment process.

Thank you.

Sign

Please sign above with your mouse. By signing, you agree the information provided in the forms above is true and accurate to the best of your knowledge.

Continue



Didn't receive an email?

Email Kelly Gilbert or Shelby Jackson in HR

jackson_se@mtnhomesd.org

gilbert_kl@mtnhomesd.org

or call:

208-587-2580

Contact Information

Coverage	Carrier	Phone #	Website
Medical	Select Health	(801) 442-5000	www.selecthealth.org
Dental	Delta Dental of Idaho	(800) 356-7586	www.deltadentalid.com
	Willamette	(855) 433-6825	www.willamettedental.com
Vision	LifeMap	(800) 794-5390	www.lifemapco.com
Voluntary Life			
Voluntary LTD			
HSA Administrator	Key Bank	(208) 452-3823	www.key.com
FSA Administrator	Ameriflex	(844) 423-4636	www.myAmeriFlex.com
Voluntary Benefits	Colonial Life	(800) 325-4368	www.coloniallife.com

Benefits Website

Our benefits website <http://mountainhomeschooldistrict.ease.com> can be accessed anytime you want additional information on our benefit programs.

Questions?

If you have additional questions, you may also contact:

Kelly Gilbert, HR Contact
Mountain Home School District
(208) 587-2580
gilbert_kl@mtnhomesd.org

Brook Pritchett, Consultant
HUB International
(208) 947-1432
brook.pritchett@hubinternational.com

Meghan Brannen, Account Manager
HUB International
(208) 947-1458
meghan.brannen@hubinternational.com

