



2027 Open Enrollment

Presented to Eastpointe Community Schools

November 5, 2026



Gallagher

Insurance | Risk Management | Consulting

Open Enrollment

Open Enrollment will be held from:

October 27 – November 10, 2026

- **IMPORTANT NOTE:** This is an active open enrollment process, meaning that employees **must** complete an enrollment form to confirm or change your elections. An active process ensures that employees annually examine their benefits and make appropriate decisions about the benefits that best suit them and their families' needs.
- Employees must complete an open enrollment form for 2027 benefits elections.
- Enrollment elections are locked in until December 31, 2027, unless you have a qualified status change as determined in Section 125
- **Mandatory: Members must keep a valid, up-to-date beneficiary form on file for company-provided life insurance and any additional life insurance they purchase.**
- Virtual Open Enrollment Meetings:

November 5th from 4 pm – 5 pm

2027 Medical/Rx



Medical Plan Overview

No Changes!

Benefit	BCBS Community Blue - \$100 ER copay In-Network EFE, ECSAA, Non-Affiliates	BCBS Community Blue - \$250 ER copay In-Network Local 120, EDESA
Please see benefit summary for out-of-network coverage		
Deductible per calendar year		
Individual	\$250	\$250
Family	\$500	\$500
Copays		
Medical fixed dollar copay	<ul style="list-style-type: none"> • \$20 copay for office visits and office consultations • \$20 copay for online visits • \$20 copay for chiropractic services and osteopathic manipulative therapy • Emergency Room copay \$100 • \$20 copay for urgent care visits 	<ul style="list-style-type: none"> • \$20 copay for office visits and office consultations • \$20 copay for online visits • \$20 copay for chiropractic services and osteopathic manipulative therapy • Emergency Room copay \$250 • \$20 copay for urgent care visits
Preventive care services	<ul style="list-style-type: none"> • 100% (no deductible or copay/coinsurance) • As long as it's billed as preventive and services are on the approved BCBSM preventive care listing 	<ul style="list-style-type: none"> • 100% (no deductible or copay/coinsurance) • As long as it's billed as preventive and services are on the approved BCBSM preventive care listing

Medical Plan Overview

Benefit	BCBS Community Blue - \$100 ER copay In-Network EFE, ECSAA, Non-Affiliates	BCBS Community Blue - \$250 ER copay In-Network Local 120, EDESA
Please see benefit summary for out-of-network coverage		
Coinsurance	<ul style="list-style-type: none"> • 50% of approved amount for private duty nursing care • 20% of approved amount for mental health care and substance use disorder treatment • 20% of approved amount for most other covered services (coinsurance waived for covered services performed in an in-network physician's office) 	<ul style="list-style-type: none"> • 50% of approved amount for private duty nursing care • 20% of approved amount for mental health care and substance use disorder treatment • 20% of approved amount for most other covered services (coinsurance waived for covered services performed in an in-network physician's office)
Annual Coinsurance maximums	<ul style="list-style-type: none"> • \$1,000 for one member • \$2,000 for the family (includes 2-person contract) 	<ul style="list-style-type: none"> • \$1,000 for one member • \$2,000 for the family (includes 2-person contract)
Annual Dollar Maximum		
Annual Out of Pocket Maximum - applies to deductibles, copays and coinsurance amounts for all covered services—including cost sharing amounts for prescription drugs (if applicable)	<ul style="list-style-type: none"> • \$6,350 for one member • \$12,700 for the family (includes 2-person contract) 	<ul style="list-style-type: none"> • \$6,350 for one member • \$12,700 for the family (includes 2-person contract)
RX Copays		
30-day supply Mail Order/Retail Network Pharmacy: 1 copay for a 90-day supply	<ul style="list-style-type: none"> • Generic: \$7 • Preferred Brand: \$35 • Non-Preferred Brand: \$70 	<ul style="list-style-type: none"> • Generic: \$7 • Preferred Brand: \$35 • Non-Preferred Brand: \$70

Virtual Health by Teladoc

You can rest assured knowing you or your covered family members can see and talk to:

- A doctor for a minor illness such as a cold, flu or sore throat when their primary care doctor isn't available.
- A behavioral health clinician or psychiatrist to help work through different challenges such as anxiety, depression and grief.
- Cost is the same as your office visit copay!
- Online physicians may even be able to write you a prescription!
- First step: **Register** through the BCBSM Virtual Care Portal (or mobile app)
- No appointments necessary for “urgent care” / behavioral health requires an appointment

Fast and convenient

Sign-up via:

- Mobile: go to www.bcbsm.com/virtualcare to access a link to the Virtual Care by Teladoc mobile app
- Web: Visit www.bcbsm.com/virtualcare
- Phone: Call 1-800-835-2362

Examples to utilize Telemedicine:

- Sinus infections
- Respiratory infections
- Colds and flu
- Seasonal Allergies
- Urinary Tract Infections
- Strains and Sprains
- Vomiting
- Diarrhea
- Headache
- Pink-eye
- Rashes
- Anxiety
- Depression
- Grief
- Insomnia
- Therapy

Pillar Rx

BCBSM Prescription Savings Program

Eastpointe's BCBSM medical plans include PillarRx, which connects you with drug manufacturer assistance to help you save money on your copayments for certain high-cost medications

If you (or any of your covered dependents) are eligible, you will be contacted by PillarRx (either by phone or mailing) to provide details about the plan, answer any questions you might have and steps to follow in order to take advantage of this cost savings

After you enroll in the program, you will save money by using manufacturers assistance to reduce or eliminate your costs to CERTAIN high-cost medications (including brand and specialty medications). If participating, members will never pay more than the standard applicable copay

If your medication is part of the program, participation is mandatory. If you have been selected by PillarRx to enroll in the program and you do not participate, you will pay a 30% coinsurance for the prescription (rather than the standard applicable copay)

Please note: PillarRx does not apply to all medications – only certain high-cost medications, as well as some diabetic medications. If you are trying to fill a prescription and the cost is above the normal copay structure – it may be due to the medication being a part of PillarRx. Please reach out to BCBSM's customer service (the number on the back of your card) prior to filling the medication to inquire why the cost is different. They will be able to tell you if the medication is a part of PillarRx.

BCBSM Member Account

How to activate your online member account

Activate Your Account in One of THREE Ways:

Go online.

1. Go to www.bcbsm.com/register and select **Register Now**.
2. Once your account is activated, you can set up one for each of your dependents.

Use our app.

1. Download the app from the App Store® or Google Play™ (search **BCBSM**)
2. Tap the **BCBSM app** and then Register

Text us.

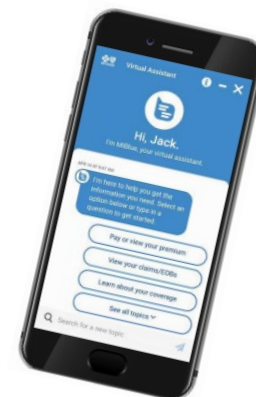
Text **REGISTER** to 222764 to start setting up your account

Get Answers Fast with 24/7 Personal Support:

Ask MIBlue Virtual AssistantSM, an interactive, automated chat feature, to direct you, on finding care, getting balances, choosing a doctor and more!

Enjoy the convenience – and freedom – you get with your account:

- Check your out-of-pocket balance and plan's benefits
- Track your claims and explanation of benefits statements
- Find care and look up costs
- Get answers fast to questions about your plan with MIBlue Virtual AssistantSM
- Show your virtual member ID card, and order more plastic cards for adult members on your plan
- Plus, get your member discounts, health and well-being resources and more



Blues Added Value Resources

Members Save on a variety of health-related products and services

Blue365.

Members can save with Blue365 on items such as:

- **Fitness and well-being:** Fitness gear and gym memberships
- **Health eating:** Meal delivery kits and weight-loss programs
- **Lifestyle:** Travel and recreation
- **Personal care:** Lasik and eye care services, dental care and hearing aids

- Log in or register at www.bcbsm.com or the Blue Cross mobile app
- Once you are logged in at www.bcbsm.com , select Blue365 member discounts from the Health & Well-Being tab
- If you're on the Blue Cross Mobile app, tab the menu icon (=), then Discounts



Blues Added Value Resources

Members enrolled in BCBSM medical plan will automatically be eligible for the below value-added programs/services. Members can access all of the below programs by logging into their portal (online or via mobile app)

Online well-being platform: An interactive online resource, including a health assessment, Digital Health Assistant, Integrated apps, a Personal Health Record, Health Trackers, Videos, Interactives and more

Tobacco Coaching: A 12-week, telephone-based tobacco coaching program that includes coaching on all tobacco products (including electronic cigarettes and vaping devices)

Blue Cross Virtual Well-Being: Unique, live 30-minute webinars each week – with authentic, science-based discussions engaging people to help improve their overall well-being

24/7 Nurse Line: Talk to a registered nurse at no cost, anytime day or night, from the comfort of your home or anywhere else in the U.S. They can help recommend treatment options or help you decide where to go for additional care. 800.775.2583

BCBSM Cost Estimator Tool: A convenient and easy way to obtain estimates on how much you'll pay out-of-pocket for health care services. Members can also compare costs by location as well as compare doctors and review quality and safety ratings

Drug Adherence Discount Program Through Sempre Health: A discount program for members who take medications to treat chronic conditions (such as Diabetes, Cardiovascular Conditions and Respiratory Conditions). Not all medications qualify. If you are taking a medication that qualifies, you will be contacted by Sempre Health. When you refill and pick up your prescriptions on time, you earn a discount on the copay; monthly discounts grow bigger as you continue to refill prescriptions on time

2027 Contributions

Medical/Rx

EFE, ECSAA, Non-Affiliates

Tier	Employer Monthly cost	Employee Monthly Cost
Single	\$766.51	\$191.63
Two Person	\$1,823.04	\$455.77
Family	\$2,280.84	\$570.22

Local 120, EDESA

Tier	Employer Monthly cost	Employee Monthly Cost
Single	\$761.96	\$190.49
Two Person	\$1,812.24	\$453.07
Family	\$2,267.24	\$566.81

Local 120 PT

Tier	Employer Monthly cost	Employee Monthly Cost
Single	\$761.96	\$190.49
Two Person	\$761.96	\$1,503.35
Family	\$761.96	\$2,072.09

Flexible Savings Accounts



Flexible Spending Accounts

We will continue to offer two types of Flexible Spending Accounts via HealthEquity.

Two account types:

Health Care FSA

Used to reimburse for qualified medical expenses not covered by the health plan

Annual contribution maximum for 2027 is \$3,400

Dependent Care FSA

Used to reimburse for qualified dependent care expenses

Annual contribution maximum for 2027 is \$7,500

If you wish to participate in the FSA for 2027 you must select the coverage on the enrollment form. Enrollment in the FSA does not carryover from year to year.

Flexible Spending Accounts

What's a Health Care Reimbursement Account (HCRA)?

Health Care Reimbursement Accounts let you pay for medical, dental and vision expenses that are not covered by insurance with tax-free dollars. They help you stretch your money and reduce your federal, state and Social Security taxes. How much you save depends on how much you pay in income tax.

When you enroll in the HCRA, you will receive a debit card—with one swipe, you can pay eligible expenses at the point-of-service. Just use the card like you would a credit card.

You can put up to \$3,400 into the HCRA in 2027.
The full amount will be available January 1, 2027.

Common FSA Eligible Expenses

• Acne treatments (OTC)	• Diabetic monitors, test kits, strips and supplies	• Blood pressure monitor
• Diaper rash ointments and creams	• Eyeglasses/Contact lenses (prescription)	• First aid kits (OTC)
• Sunscreen with SPF 15+ and "broad spectrum", sunburn creams and ointments (OTC)	• Lactation Supplies: creams/ointment, pad/shields, storage bags/bottles & breast pump	• Crutches, canes, walkers or like equipment (purchase or rental)
• Medical, Dental & Vision (coinsurance, copay & deductible)	• Aspirin or other pain reliever (OTC)	• CPAP and Supplies
• Allergy & sinus medicine (OTC)	• Cold & flu medicine (OTC)	• Flu shots
• Ambulance and emergency health services	• Counseling for treatment of a medical condition (marriage counseling is not eligible)	• Hand Sanitizer
• Fertility & infertility treatment (for employee, spouse or dependent)	• Hearing aids and batteries	• COVID testing
• Orthodontia	• Teeth grinding prevention devices	• Lasik

Note: The IRS determines which expenses can be reimbursed by an HCRA. For a complete list of federal eligible expenses go to <https://www.fsafeds.com/explore/hcfsa/expenses>

Flexible Spending Accounts

What's a Dependent Care Reimbursement Account (DCRA)?

Dependent Care Reimbursement Accounts let you pay for eligible dependent care expenses with tax-free dollars. Most child and elder care and companion services are eligible expenses too. They help you stretch your money and reduce your federal, state and Social Security taxes. How much you save depends on how much you pay in income tax.

Your dependents must be:

- **Under age 13 or mentally or physically unable to care for themselves.**

- Spending at least 8 hours a day in your home.
- Eligible to be claimed as a dependent on your federal income tax.
- Receiving care when you are at work and your spouse (if you are married) is at work or searching for work, is in school full-time, or is mentally or physically disabled and unable to provide the care.

You can put up to \$7,500 into the Dependent Care FSA in 2027. You can be reimbursed up to the amount that you have in your account.

In 2027, the most you can put into the DCRA is \$7,500. But if both you and your spouse work, the IRS limits your maximum contribution to a DCRA.

- If you file separate income tax returns, the annual contribution amount is limited to \$3,750 each for you and your spouse.
- If you file a joint tax return and your spouse also contributes to a DCRA, your family's combined limit is \$7,000.
- If your spouse is disabled or a full-time student, special limits apply.

Note: Eligible dependent care expenses can either be reimbursed through the DCRA or used to obtain the federal tax credit. You can't use both options to pay for the same expenses. Usually the DCRA will save more money than the tax credit. But to find out what is best for you and your family, talk to your tax advisor or take a look at IRS publication 503 at <http://www.irs.gov/publications/p503/index.html>. If you contribute to a DCRA, you must file an IRS Form 2441 with your Federal Income Tax Return. Form 2441 is simply an informational form on which you report the amount you pay and who you paid for day care.

Other Benefits



ADN Dental

Core Plan	Admin	Local 120, Non-Affiliated, Para, Teachers Non COB	Clerical	Teachers with Coordinated Benefits (Buy-Down)
Deductible (Individual / Family)	\$25 / \$50	None	None	None
Class I Preventive	80% covered	80% covered	100% covered	50% covered
Class II Basic	80% covered	80% covered	100% covered	50% covered
Class III Major	80% covered	80% covered	80% covered	50% covered
Annual Benefit Maximum (Individual basis)	\$1,500	\$1,500	\$1,500	\$1,500
Class IV Orthodontia	Not covered	Not covered	Not covered	Not covered

Buy-Up Plan	Admin	Local 120, Non-Affiliated, Para, Teachers Non COB	Clerical	Teachers with Coordinated Benefits (Buy-Down)
Deductible (Individual / Family)	None	None	None	No Benefit Option
Class I Preventive	100% covered	100% covered	100% covered	
Class II Basic	100% covered	100% covered	100% covered	
Class III Major	80% covered	80% covered	80% covered	
Annual Benefit Maximum (Individual basis)	\$1,500	\$1,500	\$2,000	
Class IV Orthodontia	50% to Lifetime Maximum of \$1,000	50% to Lifetime Maximum of \$1,000	50% to Lifetime Maximum of \$1,000	

2027 Contributions

Dental All Classes are offered the Core Dental Benefit at no cost. If employees would like to elect the Buy-Up plan – below are the monthly contributions:

Administrators		
Tier	Employer Monthly cost	Employee Monthly Cost
Single	\$32.99	\$14.60
Two Person	\$70.74	\$30.04
Family	\$96.51	\$53.15
Teachers (no COB), ParaPros, Local 120, Non-Affiliated		
Tier	Employer Monthly cost	Employee Monthly Cost
Single	\$29.40	\$22.04
Two Person	\$63.75	\$47.81
Family	\$82.64	\$66.11
Clerical		
Tier	Employer Monthly cost	Employee Monthly Cost
Single	\$42.56	\$8.51
Two Person	\$91.42	\$18.28
Family	\$129.41	\$25.88

Note: EFE & ECSAA: If you choose to decline dental coverage, \$350 will be deposited into your Health Care Reimbursement Account. Note: EFE: If your spouse is an employee of the district, you will be enrolled in the Buy-Down plan and \$150 will be deposited in your Health Care Reimbursement Account.

NVA

	NVA (National Vision Administrators)	
	NVA Vision Core	NVA Vision Buy-Up
	In-Network Coverage ONLY	In-Network Coverage ONLY
Eye Exam	\$0 copay Once every 12 months	\$0 copay Once every 12 months
Standard Lenses <i>* See benefit summary for lens options and upgrade costs</i>	\$0 copay* Once every 24 months	\$0 copay* Once every 12 months
Frames	Frame Allowance: \$68 Once every 24 months	Frame Allowance: \$125 Once every 24 months
Elective Contact Lenses (in-lieu of eye glasses)	\$150 Retail allowance (includes a 15% discount on any overage) Once every 24 months	\$150 Retail allowance (includes a 15% discount on any overage) Once every 12 months

To find an NVA in-network provider, go to www.e-nva.com and click on “find a provider” in the upper right hand corner.

2027 Contributions

Vision

All Classes are offered the Core Vision Benefit at no cost – with the exception of Local 120 & EDESA. See below for Local 120 & EDESA Core Plan Rates. If employees would like to elect the Buy-Up plan – below are the monthly contributions:

Local 120, EDESA – Core Vision

Tier	Employer Monthly cost	Employee Monthly Cost
Single	\$1.73	\$1.78
Two Person	\$3.91	\$1.78
Family	\$6.39	\$1.78

EFE, ECSAA, Non-Affiliates – Buy-Up Vision

Tier	Employer Monthly cost	Employee Monthly Cost
Single	\$3.51	\$2.12
Two Person	\$5.69	\$4.01
Family	\$8.17	\$6.16

Local 120, EDESA – Buy-Up Vision

Tier	Employer Monthly cost	Employee Monthly Cost
Single	\$1.73	\$3.90
Two Person	\$3.91	\$5.79
Family	\$6.39	\$7.94

Life/AD&D and Long-Term Disability

Mutual of Omaha

Company-paid and optional coverage

ECS pays 100% of Basic Life/AD&D and Long-Term Disability coverage.

Employees pay 100% of Optional Life/AD&D for themselves and eligible dependents through monthly payroll deductions.

Optional life insurance amounts

Employee	\$10,000 increments, up to five times annual salary, with a \$150,000 maximum.
Spouse	\$5,000 increments, up to 100% of the employee's elected benefit. Coverage ends at age 70.
Child(ren)	\$1,000 increments, starting at \$2,000, up to \$10,000.

Dependent coverage is available only when the employee enrolls.

Mandatory: Members must keep a valid, up-to-date beneficiary form on file for company-provided life insurance and any additional life insurance they purchase.

Optional Life/AD&D Enrollment

Mutual of Omaha

2027 annual increase option

Employees with at least \$10,000 of current Optional Life/AD&D coverage may add \$10,000 during 2027 open enrollment, up to the \$150,000 guaranteed-issue limit.

Evidence of Insurability (EOI)

Spouse increases require an EOI form. Dependent child(ren) increases do not.

New enrollments effective January 1, 2027 require an EOI form with enrollment elections.

EOI is required if you previously waived coverage when first eligible and enroll later.

Enrollment and coverage changes

Contact Human Resources to enroll or increase coverage for 2027.

General requirement: EOI is required for any increase. Confirm with HR how this applies to the annual increase option above.

Voluntary Benefits

Aflac

Eastpointe Community Schools provides an option to employees to enroll in supplemental insurance coverage.

Critical Care - Critical care protection provides covered members a lump sum benefit upon diagnosis of a covered health event, with additional benefits paid such as hospital stays and continuing care. The cash benefits can help with expenses major medical may not cover.

Cancer Care - Cancer care provides covered members financial benefits to help with the unexpected expenses associated upon initial diagnosis of a covered cancer with other benefits provided throughout cancer treatment.

Accident - Accident coverage protects covered members in the event of the unexpected. Accident protection provides cash benefits to use for any expenses from groceries to bills when an accident occurs such as a fall or sports injury.

Whole Life Insurance - Employees can purchase up to \$500,000 of whole life insurance, up to \$50,000 without answering eligibility or underwriting questions. Employees can also purchase life insurance for their spouse or dependent children. Whole life insurance helps members and their families with financial resources that are needed to help with funeral expenses, bills and debt, education plans and future retirement.

Employee Assistance Program

Mutual of Omaha

Access to EAP professionals 24 hours a day, seven days a week! As an employee of Eastpointe Community Schools (or eligible dependent) your EAP benefits include:

- Information and Referral Services by phone on topics such as:
 - Relationship Support
 - Stress Management
 - Work/life Balance
 - Family Issues
 - Grief and Loss
 - Depression
 - Anxiety
 - Substance Misuse
 - Self-Esteem and Personal Development
- Members can access online resources for the following topics (and so much more):
 - Child care, parenting and adoption
 - Summer programs for kids
 - School and financial aid research
 - Care for older adults
 - Caregiver support
 - Special needs
 - Substance Misuse
 - Pet care
 - Home repair and improvement
 - Household services and more
 - Identity theft
 - Legal Services
 - Financial Services

Mutual of Omaha's Employee Assistance Program provides professional, confidential quality consultation, 24 hours a day.

**Website: mutualofomaha.com/eap
Telephone: 800.316.2796**

Next Steps



Next Steps

Refer to your 2027 Benefit Guide for detailed plan information and for your 2027 payroll contributions.

All benefit eligible employees are required to make an active plan selection during this year's Open Enrollment for 2027 coverage. Employees will **not** automatically default into their current plan if no action is taken (this will include FSA elections).

Employees must complete open enrollment forms by **November 10th** for 2027 benefits.

Mandatory: Members must keep a valid, up-to-date beneficiary form on file for company-provided life insurance and any additional life insurance they purchase.

REMINDER!

A Virtual Meeting will be held on
November 5th
from 4 pm – 5 pm

If you have questions, please email or call Dean Niforos at
dean.niforos@eastpointeschools.org
or call 586.596.1282



Confidentiality Statement & Disclaimers

At Gallagher Benefit Services we pride ourselves on the skills, experience and integrity of our employees, our intellectual capital, and the results we achieve for our clients and their enrollees. We work diligently to ensure the work we do meets and exceeds your objectives as our client.

As such, all information provided in this report and associated materials is proprietary and confidential. It is intended solely for use by Eastpointe Community Schools.

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The intent of this presentation 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.

This analysis is for illustrative purposes only, and is not a guarantee of future expenses, claims costs, managed care savings, etc. There are many variables that can affect future health care costs including utilization patterns, catastrophic claims, changes in plan design, health care trend increases, etc. This analysis does not amend, extend, or alter the coverage provided by the actual insurance policies and contracts. Please see your policy or contact us for specific information or further details in this regard.