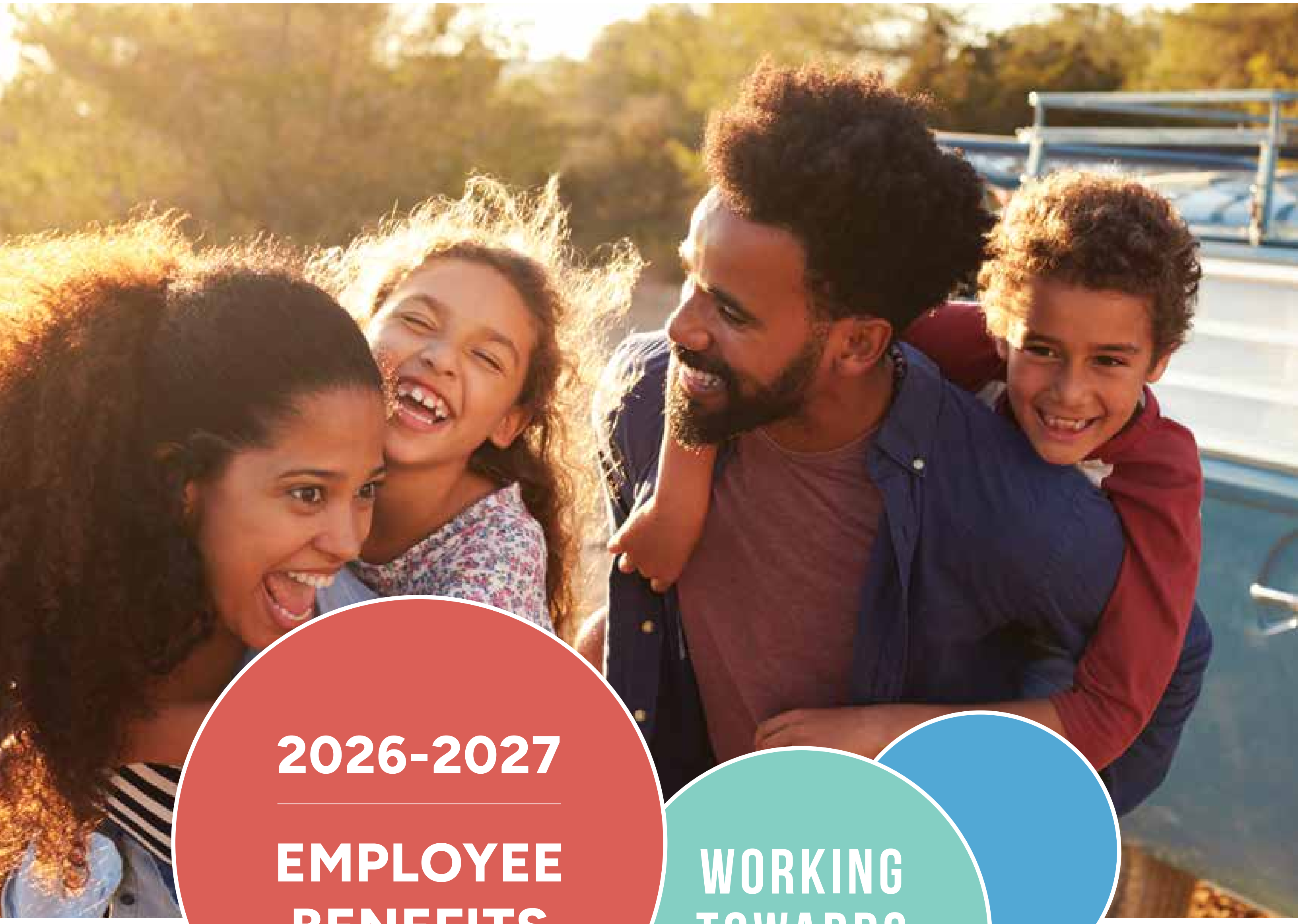

2026-2027 EMPLOYEE BENEFITS

WORKING TOWARDS WELLNESS

A comprehensive guide to understanding your employee benefits program

Contacts

Program	Vendor	Policy Number	Phone	Website/Email
Medical PPO	Apta Cash/BowTie Medical	1726	720-704-3300	www.aptahealth.com/ texasleadership
Dental	Delta Dental	22457	800-521-2651	www.deltadentalins.com
Vision	VSP	40164654	800-216-6248	www.vsp.com
Telemedicine	Teladoc (if elected)	176471	800-TELADOC (835-2362)	www.teladoc.com/mobile
Health Savings Account	WEX	33571	866-451-3399	www.wexinc.com/contact/health customerservice@wexhealth.com
Flexible Spending Accounts	WEX	33571	866-451-3399	www.wexinc.com/contact/health customerservice@wexhealth.com
Life and AD&D	Symetra Customer Service	01-020961-00	877-377-6773	ladcla@symetra.com
Disability Insurance	Symetra Customer Service	01-020961-00	877-377-6773	ladcla@symetra.com
Accident and Critical Illness	Symetra Select Benefits	1292300	800-497-3699	symsba@symetra.com
Employee Assistance Program	Symetra	N/A	888-327-9573	www.guidanceresources.com
Support Services	Symetra	N/A	In the U.S. or Canada: 978-651-9223 Other locations: 833-808-0253	N/A
EstateGuidance	Symetra	N/A	N/A	www.estateguidance.com (promotional code: SymetraLife)
Human Resources	Texas Leadership	N/A	325-653-3200 x 7030	kirby.zett@texasleadership.net

Contents

Welcome

It is almost time for you to enroll in or make changes to your 2026-2027 benefits. **Texas Leadership Public Schools (Texas Leadership)** is proud to offer an ample benefits package that gives you peace of mind, coverage when you need it, and the opportunity to live happy and well.

Read this guide to know what choices you have and decide what is best for you and your family. You can only enroll for, or make changes to your benefits during Open Enrollment (OE). After OE, you may only make changes if you have a Qualifying Life Event (QLE).

These benefits start **October 1, 2026**, and end **September 30, 2027**.

Enrolling

Need Health Plan Details?

Texas Leadership offers **medical plan coverage**. Ask Human Resources for a Summary of Benefits and Coverage to look at all of the plan details.

How to Enroll

Use Employee Navigator to enroll for, or make changes to your coverage.

You may enroll for benefits if you are a regular, full-time employee and **work 30 or more hours per week. Your benefits will start on the first of the month following 30 days of hire.** You may also enroll your family if they are eligible for coverage. Your cost for benefits is based on the coverage you pick and who you enroll. If you cover your spouse or child(ren), you must select and be on the same plans.

Eligible Dependents

- Your legal spouse
- Children under the age of 26 no matter if a student, dependent, or married
- Children over the age of 26 who fully depend on you for support due to a mental or physical disability, and who you report as such on your tax return

Qualifying Life Events

Once you pick your benefits, they will not change during the plan year. You may only change benefits if you have a QLE (e.g., you marry, divorce, have a baby, lose coverage, etc.). You must tell Human Resources right away if any of these events occur. If you miss the deadline, you will not be able to make changes. Ask Human Resources for a list of QLEs and the date you must report a change.

Health Care Concierge

Your **Apta Cash program** brings together virtual primary care and a dedicated healthcare concierge to help you find quality care, save money and make healthcare easier to navigate.

Need to see a doctor for a cold, health concern, referral or other routine care? **BowTie Medical provides virtual primary care at no cost to you—with no deductible or out-of-pocket expense.**

Connect with a primary care physician from home, the office or while traveling. Your doctor can diagnose conditions, answer health questions and even prescribe medication when appropriate.

Your **Apta Cash Concierge Team** is your personal healthcare advocate. They can help you find providers, compare cost and quality, coordinate precertification, negotiate cash prices and guide you through more complex healthcare needs.

Reach out when you need help with:

- Surgeries
- Specialty care
- Imaging and X-rays
- Labs
- Other medical procedures

Once your Concierge negotiates a discounted cash price, you'll pay with your **pre-loaded Cash Pay Card** at the time of service and won't receive additional billing for that negotiated service.

Get Started

Your Apta Cash Team is here to help you find the right care at the best price possible.

- **For virtual primary care:** Watch for a welcome email or text from **BowTie Medical** with instructions for scheduling your first visit.
- **For other healthcare needs:** Contact your **Apta Cash Concierge Team** before scheduling care so they can help you find a provider and negotiate the best available

Important: Using Your Cash Pay Card

For in-person appointments through the Apta Cash program:

1. Don't bring or provide your insurance card. Tell the provider you're a **self-pay patient**.

2. Bring your Cash Pay Card and use it to pay for your visit.

3. Save your itemized receipt and submit it by texting a photo to **720-704-3300** or emailing **cashpay@apta-health.com**.

Apta Cash FAQ

1. What is Apta Cash?

Apta Cash is a cash based patient advocacy program that helps you save on medical care by using vetted providers who offer discounted cash prices. Paying cash reduces administrative delays and speeds up provider payment.

2. What does the program include?

Two parts:

- BowTie Guardians for virtual primary care
- Apta Cash Concierge for scheduling, negotiating prices, and loading your Cash Pay Card

3. Can I use Apta Cash with Medicare or Medicaid?

No. Federal rules require providers to bill Medicare/Medicaid directly. You'll follow a traditional insurance process instead.

4. What is the Cash Pay Card?

A pre loaded debit card (issued by Akimbo) used only for approved medical expenses. It is not an HSA or FSA card. Always submit an itemized receipt after each use.

5. How do I use the Cash Pay Card?

Start with BowTie. If referred out, your Apta Cash team will load your card. Swipe at your appointment and send the itemized receipt within 24 hours. Swipe separately for each dependent.

6. How does the program work?

You schedule care, tell the provider you are self pay, get the price, and contact Apta Cash so they can load your card. Submit receipts immediately after your visit.

7. What do I say at the doctor's office?

Leave your insurance card at home. Do not fill out insurance forms. Tell everyone you are a self pay patient. If you accidentally provide insurance info, ask to remove it.

8. Can I use an FSA or HSA?

FSAs may be allowed depending on your employer. Existing HSAs can be used for eligible expenses, but you cannot contribute new funds under this program.

9. How do I submit receipts?

Text a photo to (720) 704 3300 or email cashpay@apta-health.com within 24 hours. You need separate receipts for each person seen.

10. How do prescriptions work?

Use your PBM card at the pharmacy. You'll pay your plan's prescription copay. The Cash Pay Card cannot be used for prescriptions.

11. What if I need surgery or a procedure?

Get a BowTie referral, then contact Apta Cash immediately. They will negotiate pricing and load your card. Negotiations may take up to three weeks.

12. What about urgent or emergency care?

- Use BowTie first for 24/7 virtual urgent care
- For in person urgent care, call Apta Cash so they can load your card
- For emergencies, go to the ER and register as self pay; submit the invoice promptly

13. What if I need proof of insurance?

Only provide insurance info when required for school/college forms – not at medical offices.

14. When would I use my insurance card?

Rarely. Apta Cash may direct you to use insurance only if a provider refuses cash pay.

15. How do lab tests or imaging work?

BowTie will order and coordinate labs/imaging at no out of pocket cost. If referred outside BowTie, contact Apta Cash to coordinate payment.

Telemedicine

When it comes to telemedicine, **Teladoc** provides 24/7 support from board-certified providers via your phone or computer. Telemedicine is a convenient option when you need non-emergency care.

Teladoc

(an option you may purchase)

You may enroll for virtual health care by **Teladoc** — even if you enroll in a BCBSTX medical plan. If you enroll for this coverage, you will pay a small premium per month. Telemedicine copays are as follows:

- **General Medical** – $0
- **Mental Health** – therapist visit: $85; first psychiatrist visit: $200; ongoing psychiatrist visit: $95
- **Dermatology** – $75 per visit

Contact Teladoc

- Visit **www.teladoc.com**.
- Call **800-TELADOC** (835-2362).
- Download the **Teladoc Health app**.

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healthiestyou™ By Teladoc

Take control of your health.

The monthly fee is the cost to enroll in the plan, but there is no additional fee charged when the service is used.

Talk to a Doctor 24/7

- Speak to a licensed doctor by phone or video 24/7 from anywhere

Expert Medical Services

- Receive a second opinion on an existing diagnosis and treatment for any condition

Mental Health – "myStrength Complete"

- Connect with a licensed therapist by phone/video. Explore skill building tools and resources based on your ongoing needs and preferences
- Specialized licensed therapist in supporting teens who need help (ages 13-17)

Joint/Back Care

- Relieve your back pain through guided videos with a certified health coach

Dermatology

- Upload photos of your condition to the app and get a treatment plan from a dermatologist within two business days

Nutrition

- Connect with a certified dietitian and start meeting your nutritional goals today

Get started with HealthiestYou

- Visit **https://member.healthiestyou.com**.
- Call **866-703-1259**.
- Download the **HealthiestYou app**.

This is an employee elected benefit with a cost of $16.50 per month.

Medical

Your medical plan coverage is through **Apta Cash with Bowtie Medical**.

Plan Type	How the Plan Works
Preferred Provider Organization Plan (PPO)	• See any doctor or specialist when you need care • Get the most benefits and pay less for care when you see in-network doctors • Pay a copay for office visits, urgent care, and prescriptions

	PPO Plan
	In-Network Only
Calendar Year Deductible • Individual • Family	 N/A N/A
Calendar Year Out-of-Pocket Maximum Includes deductible • Individual • Family	 N.A N/A
	You Pay
Virtual Visits Through Bowtie Medical	
Preventive Care	$0
Telemedicine	
Primary Care Physician	
Onsite Visit	
Preventive Care	Out-of-pocket + deductible (Contact your Cash Concierge at **720-704-3300** for loading of funds before setting appointment)
Primary Care Physician	
Specialist	
Diagnostic X-ray and Lab	
Complex Imaging (CT/PET scan, MRI)	
Inpatient Hospital Services	
Outpatient Services	
Urgent Care	Out-of-pocket + deductible[1]
Emergency Room	Out-of-pocket + deductible[2]
Prescription Drugs	
Retail (up to a 30-day supply) • Tier 1 • Tier 2 • Tier 3 • Tier 4	 $20 $40 $60 $250
Mail Order • Tier 1 • Tier 2 • Tier 3 • Tier 4	 $60 $120 $180 N/A

[1] When you arrive at your local urgent care center, tell the front desk you are a self-pay patient. Call your Apta Cash team at **720-704-3300** to get the appropriated funds for your urgent care visit. If you do not send in your receipt within 24 hours of an unplanned visit, your cash pay card may be deactivated.

[2] When you arrive at your local emergency care center, tell the front desk you are a self-pay patient. After you receive care, call your Apta Cash team at **720-704-3300** to discuss your emergency room visit. If you do not send in your receipt within 24 hours of an unplanned visit, your cash pay card may be deactivated.

Dental

Our dental plan helps you maintain good oral health through affordable options for preventive care, including regular checkups and other dental work. Coverage is provided through **Delta Dental**.

DPO from Delta Dental

- Save with a DPO.
- Visit a dentist in the DPO network to maximize your savings.

Set up an Online Account

Get information about your plan, check benefits and eligibility information, find an in-network dentist, and more.

Coordinate Dual Coverage

If you are covered under two plans, ask your dental office to include information about both plans with your claim — we will take care of the rest.

Find an In-Network Dentist and/or register for an online account

Visit **www.deltadentalins.com**.

Call **800-521-2651**.

Delta Dental			
	Delta Dental DPO Dentist	Delta Dental Premier Dentist	Non-Delta Dental Dentist
	DPO Contracted Fees	Premier Contracted Fees	90th Percentile
Calendar Year Deductible • Individual • Family	$50 $150	$50 $150	$50 $150
Calendar Year Benefit Maximum Per Individual	$1,000	$1,000	$1,000
Orthodontia Lifetime Maximum	$1,000	$1,000	$1,000
Orthodontia Lifetime Deductible	$0	$0	$0
	You Pay	You Pay	You Pay
Preventive and Diagnostic Care Sealants, space maintainers	$0	$0	$0
Basic Restorative Care Simple extractions, endodontics, periodontics, oral surgery	20%	20%	20%
Major Restorative Care Prosthodontics – fixed and removed, denture repair, reline, rebase	50%	50%	50%
Orthodontia Adults and Child(ren)	50%	50%	50%
Implants	Not covered	Not covered	Not covered
TMJ	Not covered	Not covered	Not covered

Vision

Going to an eye doctor for regular exams can spot other health issues (like diabetes and high blood pressure) and avoid permanent harm to your eyes. Go to any **VSP** network provider for the highest level of benefits and least cost.

	Base Plan VSP		Enhanced Plan VSP	
	In-Network	Out-of-Network	In-Network	Out-of-Network
	You Pay	Reimbursement	You Pay	Reimbursement
Exam	$10 copay	Up to $45	$20 copay	Up to $45
Standard Lenses • Single vision • Lined bifocals • Lined trifocals • Progressive	 $25 copay $25 copay $25 copay $0	 Up to $30 Up to $50 Up to $65 Up to $50	 $25 copay $20 copay $20 copay $20 copay	 Up to $30 Up to $50 Up to $65 Up to $50
Frames	20% off balance over $130 allowance	Up to $70	20% off balance over $200 allowance	Up to $70
Contact Lenses (in lieu of eyeglasses) • Fitting and evaluation • Elective • Medically necessary	 $10 copay $130 allowance $25 copay	 Up to $45 Up to $100 Up to $210	 $60 allowance $200 allowance $20 copay	 Up to $105 Up to $150 Up to $210
Exam	Once every 12 months		Once every 12 months	
Lenses	Once every 12 months		Once every 12 months	
Frames	Once every 24 months		Once every 12 months	
Contacts	Once every 12 months		Once every 12 months	

Find an In-Network Vision Provider

Visit **www.vsp.com**.

Call **800-216-6248**.

Flexible Spending Accounts

An FSA allows you to **set aside pretax dollars** from each paycheck to pay for certain health and dependent care costs. And, it lowers your taxable income! We offer two FSAs: one for health care and one for dependent care. Texas Leadership's FSAs are managed by **WEX**. Our FSAs run on a calendar year, from January 1, 2027, to December 31, 2027, and the 2027 contribution limits set by the IRS apply.

Health Care FSA

The Health Care FSA helps pay for qualified medical, dental, and vision costs for you or your eligible dependents. You may add up to the 2027 IRS limits to a Health Care FSA. All of this money is available for you to spend on the first day of your plan year.

Use your FSA funds to pay for thousands of eligible items, such as:

- Copays and coinsurance
- Doctor visits
- Prescriptions and other medicine (e.g., allergy, cold, asthma)
- Dental services and braces
- Surgery
- Hearing aids
- Glasses and contacts

Go to **www.discoverybenefits.com/eligibleexpenses** to see all eligible items.

Note: You must use all funds you contribute to this FSA by the end of the 2.5 month grace period.

You may enroll for a Health Care FSA if you or your spouse are not enrolled in and funding an HSA.

Important FSA Rules

The IRS sets annual contribution limits for Health Care and Dependent Care FSAs. Your maximum contribution depends on the type of FSA and, for Dependent Care FSAs, your tax filing status.

You can only change your FSA election during the year if you have a QLE.

You must use your Health Care FSA debit card on health care costs only.

The IRS changed the "use it or lose it" rule to allow you to carry over the 2027 IRS maximum in your Health Care FSA into the next plan year. The carry-over rule does not apply to the Dependent Care FSA.

Questions? Contact WEX

Visit **www.wexinc.com**.

Dependent Care FSA

The Dependent Care FSA helps pay for costs to care for elder or child dependents so you or your spouse can work or attend school full-time. It also gives you a little tax savings.

You can use the funds to pay for day care or babysitter costs for your children under age 13 and qualifying older dependents, such as dependent parents. You are reimbursed based on the total amount of funds that are in your Dependent FSA account. To be eligible, you must be a single parent, or you and your spouse must be employed, disabled, or a full-time student.

Dependent Care FSA Guidelines

- Only summer day camps — not overnight camps — can be reimbursed.
- If your child turns 13 midyear, you may only be reimbursed for the time the child was under 13.
- You may be reimbursed for the care of a spouse or dependent of any age who spends at least eight hours a day in your home and is mentally or physically incapable of self-care.
- The dependent care provider cannot be your child under age 19 or anyone claimed as a dependent on your income taxes.

Flexible Spending Accounts

Account	What is Eligible	Contribution Limits	Benefits
Health Care FSA	Most medical, dental, and vision care costs not covered by your health plan (e.g., your cost to see a doctor, glasses, prescriptions, medical devices, etc.)	2027 IRS maximum	Saves on eligible costs not covered by insurance Lowers your taxable income
Dependent Care FSA	Dependent care costs (e.g., day care, before- or after-school, or eldercare programs, etc.) so you and your spouse can work or attend school full-time	2027 IRS maximums	Helps pay for costs to care for elder or child dependents Lowers your taxable income

Life and AD&D Insurance

Life and Accidental Death and Dismemberment (AD&D) insurance are vital to have if others depend on you for support. Life insurance through **Symetra** can help pay off debts (e.g., car, home, bills, etc.) and protect savings. AD&D insurance offers more coverage if an accident causes bodily harm or loss (e.g., hand, foot, or eye). You or your beneficiary(ies) get 100% of the AD&D benefit if death occurs by accident.

Basic Life and AD&D

Basic Life and AD&D insurance are provided at **no cost to you**. You are automatically covered at $20,000 for each benefit.

	Basic Life	AD&D
Benefit	$20,000	$20,000
Paid for you by the company	Yes	Yes
Can convert to a life policy	Yes	No
Proof of good health needed	No	No
Can keep coverage	Yes	Yes
Benefit reduces	Yes, starting at age 70 Benefit ends at retirement	Yes, starting at age 70 Benefit ends at retirement

Name a Beneficiary

A beneficiary is the person or entity you choose to get the funds of your Life and AD&D policies. You can have more than one beneficiary and you can change beneficiaries at anytime. If you name more than one beneficiary, you must state how much each beneficiary will get (e.g., 50% or 25%).

Voluntary Life and AD&D

You **may buy more** Life insurance for you and your family. You may need to show proof of good health if:

- You do not buy Voluntary Life insurance when it is first offered to you.
- You want to add to your coverage at a later date.
- You must have coverage before you may cover your spouse or children.
- Spouse rate is based on employee's age.

Voluntary Life and AD&D Available Coverage	
Employee	• Increments of $20,000, up to the lesser of five times annual earnings, or $500,000 • Guaranteed Issue: $200,000
Spouse	• Increments of $10,000, up to $250,000, not to exceed 50% of the employee's amount Guaranteed Issue: $50,000
Child(ren)	• 14 days to six months: $100 • Six months to 26 years: $20,000

Monthly Voluntary Life and AD&D Rates per $1,000	
Attained Age	Rate
<25	$0.050
25-29	$0.060
30-34	$0.080
35-39	$0.100
40-44	$0.150
45-49	$0.250
50-54	$0.410
55-59	$0.670
60-64	$0.840
65+	$1.460
Children	$0.103 (does not include an AD&D benefit)

Disability Insurance

Disability insurance gives you some income if you can not work due to an accident or illness for a short or long time. You **may purchase** Voluntary Short Term Disability (STD) and Voluntary Long Term Disability (LTD) insurance from **Symetra**.

Voluntary Short Term Disability

STD pays part of your weekly salary if you can not work due to a short-term illness, non-work-related injury, or pregnancy.

Voluntary Short Term Disability	
Benefits Begin	15th day
Percentage of Earnings You Receive	60%
Maximum Weekly Benefit	$1,000
Maximum Benefit Period	11 weeks
Pre-existing Condition Exclusion	3/12*

* Were you treated for any condition within three months of your hire date? If so, benefits will not be paid until you are covered under this plan for 12 months.

Voluntary Short Term Disability Rates	
Monthly Rate per $10 weekly benefit:	$0.418

Calculate Your Rate

Multiply your weekly salary* (up to $1,667) by the rate of 0.02640.

$ ____________ Weekly Salary

x

____________ (0.02640)

=

$ ____________ Monthly cost)

*If your weekly salary is more than $1,667, multiply $1,667 by 0.02640.

Voluntary Long Term Disability

LTD pays part of your monthly salary for an illness or injury that keeps you from working for more than 90 days.

Voluntary Long Term Disability	
Benefits Begin	91st day
Percentage of Earnings You Receive	60%
Maximum Monthly Benefit	$5,000
Maximum Benefit Period	To age 65 or SSNRA*
Pre-existing Condition Exclusion	3/12**

* Social Security Normal Retirement Age.
** Were you treated for any condition within three months of your hire date? If so, benefits will not be paid until you are covered under this plan for 12 months.

Monthly Voluntary Long Term Disability Rates per $100

Attained Age	Rate
Under 25	$0.102
25-29	$0.102
30-34	$0.136
35-39	$0.238
40-44	$0.340
45-49	$0.468
50-54	$0.638
55-59	$0.697
60-64	$0.510
65-69	$0.425
70-74	$0.425
75+	$0.425

Calculate Your Rate

Multiply your monthly salary by the age-based rate listed in the table above.

$ ____________ Rate

x

____________ (Your monthly gross earnings up to a maximum of $8,333.33)/100

=

$ ____________ Your monthly Voluntary Long Term Disability Cost

Supplemental Benefits

You may purchase more Accident and Critical Illness coverage through **Symetra**. These help cover the unplanned costs that you face if you have an emergency or critical illness. If you leave your job at **Texas Leadership**, you can take these policies with you.

Accident Insurance

Accident insurance provides cash benefits if you or your enrolled family member has an accident. The Accident plan helps offset the direct and indirect expenses resulting from an accident such as copayments, deductible, ambulance, physical therapy, and other costs not covered by traditional health plans.

See the summary plan for a full list of covered benefits.

Critical Illness

If you or a loved one has a critical illness or event, you will likely have many extra costs that are not covered by your medical plan. Critical Illness insurance from **Symetra** helps pay for these costs, such as special diets, travel, daily living, etc. Your get a lump sum if you are diagnosed with a covered critical illness or cancer.

You do not need to show proof of good health if you buy this coverage when it is first offered to you. However, you may need to show proof of good health if:

- You want to get more than the guaranteed issue amount
- You want to enroll for coverage at a later date

For a full list, please see the plan summary.

Accident Insurance Monthly Rates	
Employee Only	$12.84
Employee + Spouse	$21.41
Employee + Child(ren)	$23.81
Employee + Family	$32.16

Critical Illness Monthly Premium for $1,000 of Coverage		
Attained Age	Employee Only	Employee + Spouse
<25	$0.29	$0.43
25-29	$0.40	$0.59
30-34	$0.50	$0.74
35-39	$0.68	$1.01
40-44	$1.05	$1.58
45-49	$1.67	$2.51
50-54	$2.42	$3.63
55-59	$3.29	$4.94
60-64	$4.72	$7.07
65-99	$6.70	$10.04
Children	Included at no additional cost	

Critical Illness Available Coverage	
Benefit Amounts Available	• **Employee** – $10,000, $15,000 or $20,000 • **Spouse** – 50% of your benefit • **Child** – 50% of your benefit
Condition	First Occurrence Benefit
Invasive cancer, heart attack, stroke, major organ failure, end-stage renal failure, loss of sight, loss of speech, loss of hearing, paralysis, severe burns, ALS, advanced Alzheimer's, Parkinson's, advanced multiple sclerosis, coma, major congenital structural anomaly, congenital metabolic disorder, congenital chromosomal abnormality, chronic medical condition commonly diagnosed in childhood	100% of benefit amount
Minor Cancer	30% of benefit amount
Infectious Disease (Minimum Hospital stay: three days)	25% of benefit amount
Health Screening Benefit – One per covered person per calendar year	$50
Pre-existing Condition Limitation	None
Age-based Benefit Reduction	None
Lifetime Maximum Benefit Payout	No lifetime maximum

Symetra Support Services

Travel Assistance

Travel Assistance offers a variety of 24-hour-a-day services in more than 180 countries and territories worldwide. You, your spouse or domestic partner, and your dependents up to age 26 are eligible for all services.

- 24/7 medical and emergency travel assistance
- Transport services
- Emergency travel assistance
- Pre-trip travel information
- Lost or stolen item location and replacement
- Legal services
- Translation assistance

You can receive trip information at anytime. All other services take effect when you are on a trip 100 miles or more from home lasting 90 days or less.

Identity Theft Assistance

Identity Theft Assistance offers you peace of mind by providing you with step-by-step coaching and assistance to help you resolve the situation.

- Three-bureau fraud alert placement
- Lost wallet assistance
- Lost passport replacement
- Emergency cash advance assistance

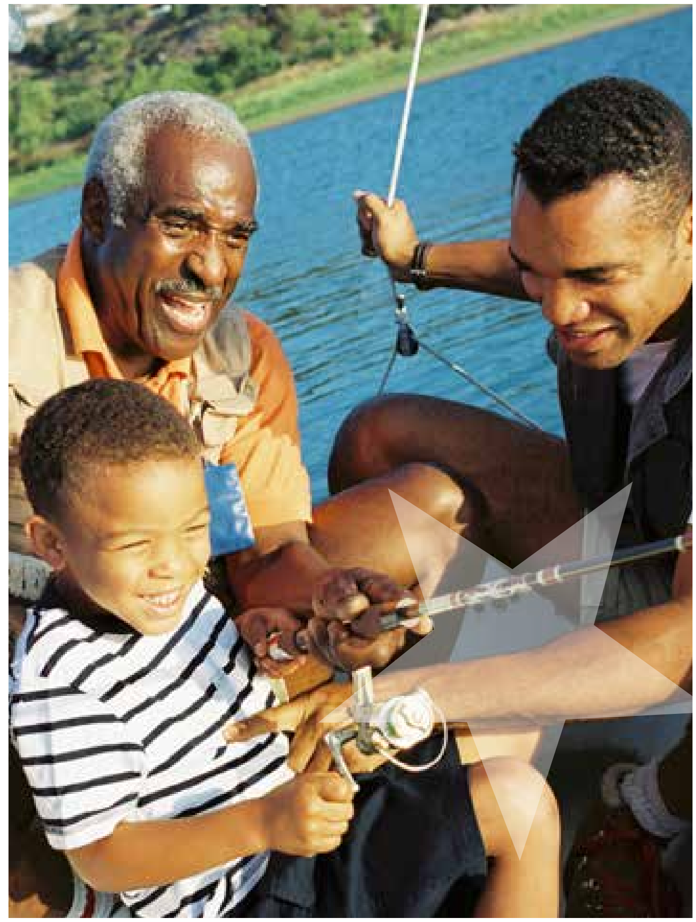
Beneficiary Assistance

Beneficiary Assistance offers relief and provides compassionate guidance to help with paperwork, notifications, and the time-consuming details of managing a loved one's final affairs. You, your spouse, and your dependents up to age 26 (regardless of student status), as well as any beneficiaries named under your group life insurance policy with Symetra, are eligible for all services.

- 24/7 professional guidance
- Fraud resolution
- Funeral home referrals

Learn More

For Travel Assistance, Identity Theft Assistance, and Beneficiary Assistance services, call **978-651-9223**.



EstateGuidance

EstateGuidance eliminates the hassle and high costs with a simple, secure, and affordable online tool for a minimal additional cost.

- Last will and testament
- Living will
- Health care/financial power of attorney
- Final arrangement documents

For the EstateGuidance program, visit **www.estateguidance.com** or scan the QR code.

Get Help Now

Call Symetra at **877-377-6773** for a beneficiary checklist and resource guide for additional support after the death of a loved one.

Employee Contributions

			Your 2026-2027 Monthly Costs
Medical	PPO Contributions		
Employee Only	$148.05		$
Employee + Spouse	$656.34		
Employee + Child(ren)	$593.83		
Employee + Family	$781.37		
Dental			
Employee Only	$36.42		$
Employee + Spouse	$69.05		
Employee + Child(ren)	$87.65		
Employee + Family	$119.83		
Vision	Base Plan	Enhanced Plan	
Employee Only	$6.56	$12.26	$
Employee + Spouse	$10.50	$19.62	
Employee + Child(ren)	$10.72	$20.03	
Employee + Family	$17.28	$32.29	
Other			
Basic Life and AD&D	Paid by Texas Leadership.		**$0**
Voluntary Life and AD&D	See page 11 for rates.		**$**
Voluntary Short Term Disability	See page 12 for rates.		**$**
Voluntary Long Term Disability	See page 12 for rates.		**$**
Voluntary Supplemental Benefits • Accident • Critical illness	See page 13 for rates.		**$**
Your Total 2026-2027 Monthly Benefit Cost			**$**

This brochure highlights the main features of the Texas Leadership Public Schools employee benefits program. It does not include all plan rules, details, limitations, and exclusions. The terms of your benefit plans are governed by legal documents, including insurance contracts. Should there be an inconsistency between this brochure and the legal plan documents, the plan documents are the final authority. Texas Leadership Public Schools reserves the right to change or discontinue its employee benefits plans anytime.

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