



Metro Nashville

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Charter School New Employee Orientation

2026 Benefits

Version 11/2/2025

Charter School Employees

- Charter school employees are not employees of Metropolitan Nashville Government. However, eligible charter school employees do have access to Metro Government insurance benefits.
- Charter school benefits are paid for by each individual charter school and some benefits and premiums may vary from school to school.
- Benefits for charter school employees are handled through the Metro Nashville Public Schools (MNPS) Benefit Office.

Benefit Highlights

Core Benefits – Metro and employee share cost or it's free to you

Medical	Metro pays 75% you pay 25% of the premium
Dental	Metro pays full cost of Employee Only coverage; you pay cost for Family coverage
Basic Life and AD&D	Metro provides coverage of \$50,000 (\$32,500 after age 65)

Optional Benefits – You pay premiums at competitive group rates

- Vision
- Short-Term & Long-Term Disability
- Supplemental & Dependent Life Insurance

Enrolling in Coverage

- Coverage is effective the first day of the month following 30 days of employment.
- What if I do not enroll in coverage?
 - If you do not complete and submit an enrollment form by the deadline provided in the email with this presentation, you will automatically be enrolled in single coverage in the PPO medical plan and Flexible dental plan.

Opting Out of Coverage

- If you have other medical insurance coverage – either through a spouse's or parent's plan – you may opt out of Metro's insurance by providing documentation of the other coverage.
- If you are age 65, you may opt out of Metro's medical insurance if you prefer to have Original Medicare Parts A & B, a Medicare Supplement or a Medicare Advantage plan, rather than Metro's medical insurance.
- You may opt into Metro's coverage at a future Annual Enrollment or within 60 days of an eligible change in status.

Who is Eligible to Enroll?

- Employees – regular full-time employees who average 20 or more hours a week for two consecutive quarters
- Dependents are defined as your:
 - Spouse while not divorced or legally separated
 - Domestic partner of the same or opposite sex
 - Dependent Children from birth to age 26, married or unmarried as long as he/she is your child by birth, adoption, legal guardianship or your stepchild (you may cover children when Qualified Medical Child Support Order has been issued)
- If you wish to add a domestic partner to your benefits, visit Human Resources' website at [HR.nashville.gov](https://hr.nashville.gov) for details about eligibility requirements, possible tax implications and a list of *Frequently Asked Questions*.

Dependent Eligibility Verification Program

- You may only add ELIGIBLE dependents to your coverage. You are required to sign an affidavit certifying they are your legal and eligible dependents as defined by Metro's rules.
- While Metro Human Resources is not requiring you provide documentation to substantiate your dependents' eligibility at this time, you will be required by Metro to provide this documentation in the very near future.
- You must contact Metro Human Resources within 60 days of an eligible change in status to add or remove dependents.

Eligible Changes in Status

- You may change your benefit elections during the year only if you have an eligible change in status or during Annual Enrollment.
- Examples of status changes include:
 - Marriage, divorce, or legal separation
 - Birth, adoption, legal guardianship or changes in child's eligibility
 - Change in a dependent's insured status or job
 - Death of a spouse/domestic partner or dependent child
- You **MUST** notify the MNPS Benefit Office and provide documentation **within 60 days** of your eligible change in status; otherwise, you will **NOT** be able to make changes to your coverage or dependents until the next Annual Enrollment.

Medical Plan Options – administered by Cigna

PPO Plan	HRA Plan
<p>PPO plan pays 80% and you pay 20% of claims when you use in-network providers.</p> <p>Copays apply for office visits and pharmacy benefits even after out-of-pocket max has been met.</p> <p>Annual Out-of-Pocket Max: \$1,000 Employee Only \$2,000 Family/Employee + Child(ren)</p>	<p>Health Reimbursement Arrangement (HRA) – Metro provides a Fund to cover medical and pharmacy benefits before you pay deductible. After deductible, plan pays 90% and you pay 10%.</p> <p>Annual Out-of-Pocket Max: \$1,150 Employee Only \$2,300 Family/Employee + Child(ren)</p>

- Both plans share the same network of providers and drug formulary
 - Higher benefit for using in-network healthcare providers
 - No referrals needed to see specialists

PPO Plan

- The PPO plan pays 80% of covered medical services – you pay 20% coinsurance after copays.
 - \$20 copay for primary care physician office visits
 - \$30 copay for specialist office visits
 - \$100 copay for emergency room visits
- Preventive Care Benefit
 - Children age 6 and younger covered at 80%
 - Age 7 and older covered at 100% up to \$750, then at 80%
- Pharmacy Benefits
 - \$10 copay for generic drugs
 - \$30 copay for brand-name drugs
- Copays apply all year long even after out-of-pocket max has been met.

HRA Plan

- Metro puts money into your HRA Fund each year to cover medical and pharmacy expenses before you pay anything out of your pocket.
 - \$1,100 Employee Only
 - \$2,200 Family/Employee + Child(ren)
- Once the HRA Fund is exhausted, you pay a deductible:
 - \$450 Employee Only
 - \$900 Family/Employee + Child(ren)
- After you've met the deductible, you pay:
 - 10% coinsurance for medical expenses and generic drugs
 - 30% of brand-name drug costs
 - Once the annual out-of-pocket max is met, you have 100% coverage
- Preventive Care is covered at 100% by the plan.

HRA Plan

If your insurance is effective April 1 or later, your HRA Fund will be prorated for this plan year as follows:

Insurance Effective Date	Employee Only	Employee + Family Employee + Child(ren)
1st Quarter (January – March)	\$1,100	\$2,200
2 nd Quarter (April – June)	\$825	\$1,650
3 rd Quarter (July – September)	\$550	\$1,100
4 th Quarter (October – December)	\$275	\$550

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Incentive Programs

- Employees and their dependents (who do not have Medicare) may receive care through programs at:
 - General Hospital or Nashville Healthcare Center
 - Without incurring copays or deductibles.
 - Contact General Hospital at 341-4YOU.
 - MNPS Clinics
 - PPO plan waives copay and coinsurance.
 - HRA plan deductible applies; payment may be required.
 - Contact MNPS at 259-8755.

Dental Plan Options – administered by BCBS

Flexible Plan	Limited Plan
<p>\$1,000 annual max benefit per member</p> <p>See any dentist you choose You may be responsible for paying charges above reasonable and customary limits and may need to submit claim forms.</p> <p>Benefit Levels:</p> <ul style="list-style-type: none"> – 100% preventive – 80% basic – 50% major – 50% orthodontics 	<p>No annual max benefit</p> <p>Must use in-network providers No out-of-network treatment is available. No claim forms to file.</p> <ul style="list-style-type: none"> – Scheduled benefits with no deductibles – Higher benefits for orthodontia – Does not cover out-of-network treatment, implants or TMJ treatment
<ul style="list-style-type: none"> • Both plans offer 2 cleanings per year 	

Medical and Dental Premiums

- Premiums may vary from school to school, so check with your specific school for more information about your medical and dental premiums.

Basic Life Insurance

- \$50,000 of basic life insurance provided by Metro at no cost to you.
- Metro provides Accidental Death & Dismemberment (AD&D) benefits if you suffer certain injuries or if you die in an accident – the amount of this benefit depends on the type of injury.
- Basic and AD&D benefits are reduced to 65% (\$32,500) on January 1 following your 65th birthday.
- You will need to complete a beneficiary form.
- The Hartford administers Metro's life insurance program.

Optional Benefits

- Optional Benefits are available to provide you with a measure of financial protection and security.

Vision Plan Options – administered by NVA

- Annual eye exams with a \$10 copay for in-network services and up to a \$45 reimbursement for out-of-network services
- NVA will pay less when you use an out-of-network provider

	Basic Plan	Enhanced Plan
Glasses <u>or</u> Contacts	every 24 months	every 12 months
Copay	\$10	\$25
Lense and Frame Allowance	\$130	\$150 (standard progressives and polycarbonates covered at 100%)
Contact Allowance	\$125	\$140

Coverage without Proof of Good Health

- As a new employee enrolling now, you may enroll in Supplemental Life Insurance, Dependent Life Insurance and Long-Term Disability without providing proof of good health.
 - If you have a known health condition that could possibly preclude you from being approved for coverage, you should strongly consider enrolling now.
 - If you decide to wait and enroll in the future, you will be required to provide proof of good health.
 - If you enroll now and drop coverage later, you must show proof of good health to re-enroll.

Supplemental Life & Dependent Life Insurance

- You may choose to purchase extra life insurance coverage beyond the \$50,000 Metro provides you (or \$32,500 if 65 or older).
- When considering the option, you should consider your:
 - Marital status
 - Dependents' ages
 - Other income sources
 - Debts
 - Savings
 - Retirement benefits
- Supplemental Life & Dependent Life is offered through The Hartford at your cost.

Supplemental Life & Dependent Life Insurance

- Supplemental Life
 - You may purchase coverage in increments of \$10,000 up to a maximum of \$500,000. As a new employee, you may purchase up to \$400,000 without proving your good health.
- Dependent Life
 - You must be enrolled in Supplemental Life to purchase Dependent Life insurance for your spouse/domestic partner or children.
 - Pays you a lump sum benefit of up to \$50,000 in the event of your spouse's/domestic partner's death and \$5,000 for the death of a dependent child.
 - Proof of your spouse's/domestic partner's good health is required for any amount above \$20,000.

2026 Supplemental Life Insurance Premiums

Age	Monthly Rate Per \$10,000	Age	Monthly Rate Per \$10,000
Less than 25	\$.50	50-54	\$2.40
25-29	\$.60	55-59	\$4.30
30-34	\$.80	60-64	\$6.60
35-39	\$.90	65-69	\$12.70
40-44	\$1.10	70 +	\$20.60
45-49	\$1.60		

2026 Dependent Life Insurance Premiums

\$5,000 for each dependent child plus spouse/domestic partner coverage amount of:	Monthly Premium
\$10,000	\$3.76
\$20,000	\$7.12

Short-Term Disability

- Short-term disability benefits replace 60% of your Metro salary if you become disabled and cannot work because of an illness or injury.
- If you do not enroll when first becoming eligible, you will be subject to a late enrollment penalty of 60 days for any condition other than an accidental injury.
 - If you have a physical disease, mental disorder or if you are pregnant and you enroll in STD when first eligible (at this new hire orientation), you will NOT be subject to this late enrollment penalty.
- STD is offered through MetLife.

2026 Short-Term Disability Insurance Premiums

Premiums are based upon your Metro salary. This chart represents sample monthly premiums. To calculate your monthly STD premiums, multiply .0261 times your weekly (not monthly) pay.

Hourly Earnings	Weekly Earnings	Annual Earnings	Sample Monthly Premium
\$18	\$720	\$37,440	\$18.79
\$22	\$880	\$45,760	\$22.97
\$30	\$1,200	\$62,400	\$31.32

Long-Term Disability

- Long-term disability benefits replace 50% of your Metro salary if you become disabled and cannot work because of an illness or injury.
- Benefits begin after 180 days of continuous disability.
- In certain circumstances, pre-existing medical conditions may exclude you from being eligible for benefits for the first 12 months of employment. Contact Metro's carrier, MetLife, before enrolling if you have a pre-existing condition.

2026 Long-Term Disability Insurance Premiums

Premiums are based upon your Metro salary. This chart represents sample monthly premiums. To calculate your monthly LTD premiums, multiply .00264 times your monthly (not weekly) pay.

Hourly Earnings	Monthly Earnings	Annual Earnings	Sample Monthly Premium
\$18	\$3,120	\$37,440	\$8.24
\$22	\$3,813	\$45,760	\$10.07
\$30	\$5,200	\$62,400	\$13.73

Before-Tax Premium Savings Plan

- You are automatically enrolled in Metro's Before-Tax Premium Savings Plan. This means your medical, dental and vision premiums will be deducted out of your paycheck before taxes are calculated saving you money and giving you a higher take home pay.
- You can opt out of this plan, but if you do, you will pay more in payroll taxes and your take home pay will be less.

Retirement Benefits

- Depending upon the charter school in which you work, you may be eligible for future retirement benefits. For more information on eligibility, please contact Metro Human Resources at (615) 862-6700.

HIPAA Privacy Regulations

- HIPAA (Health Insurance Portability and Accountability Act) requires that your health insurance plan limit the release of your health information to the minimum necessary required for your care, or as outlined in their Privacy Notice. You may review Metro Human Resource's Notice of Privacy Practice on HR's home page at HR.nashville.gov.
- For more information, contact your insurance carrier or Metro Human Resources' Plan Privacy Administrator at (615) 862-6700.

Metro Nashville Public Schools

Benefits Office: (615) 259-4636

or visit Metro Human Resources

on the web: HR.nashville.gov