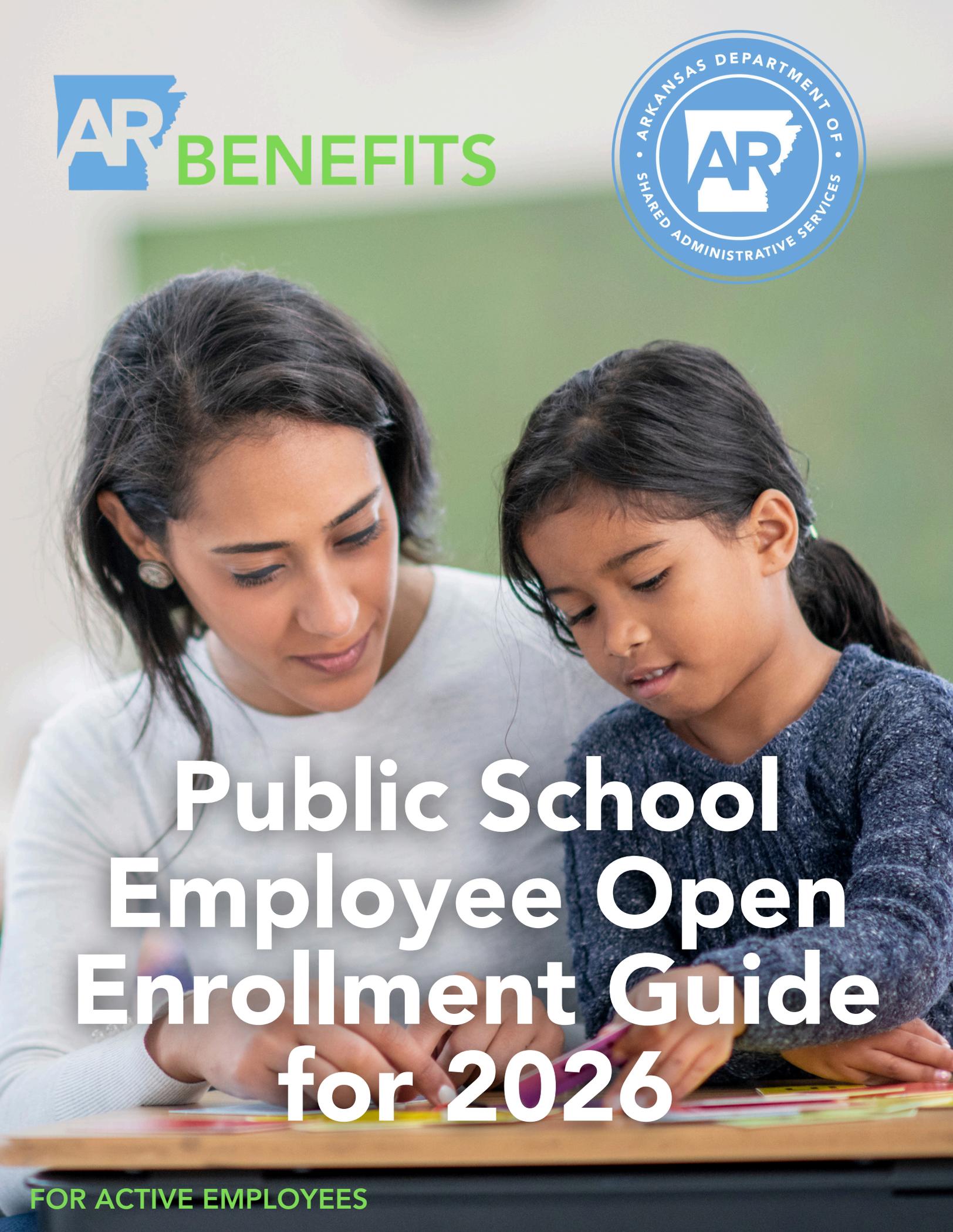


**AR** BENEFITS

A photograph of a woman with dark hair and a young girl with dark hair, both looking down at a book or document on a table. The woman is on the left, and the girl is on the right. They are both smiling slightly. The background is a soft, out-of-focus green.

# Public School Employee Open Enrollment Guide for 2026

FOR ACTIVE EMPLOYEES

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# 2026 Open Enrollment

Open Enrollment is the annual period when Public School Employees (PSE) can enroll or make changes to their health insurance plan or add voluntary products without a qualifying event. During Open Enrollment, employees can make changes for the 2026 plan year, such as:

- Enroll in/cancel coverage
- Add/drop your spouse or dependent
- Change from pre-tax to post-tax deduction
- Change your Plan level (Basic, Classic, Premium)
- Enroll in vision and/or dental coverage
- Sign up for voluntary products
- Elect or update Health Savings Accounts (check with your district Health Insurance Representative (HIR) regarding HSAs)

The easiest and fastest way to enroll is online through the [ARBenefits Member Portal](#). If your health insurance plan will not change for plan year 2026, you do not need to re-enroll online.

The coverage selected during Open Enrollment will be effective January 1, 2026 (premium rates may change from plan year to plan year.)

**Note: Any Open Enrollment changes, excluding qualifying events, received prior to the first date of Open Enrollment or after the deadline, will not be processed. All initial submissions to EBD are final.**

# Eligibility

## Employees

PSEs are eligible for insurance if they qualify as full-time employees in a position that requires, on average, at least 30 hours per week of the actual performance of duty during the annual school year. Bus drivers are also eligible for coverage if they are considered full-time. Click [here](#) to view specific eligibility requirements for bus drivers.



## Dependents

If a dependent is your legal spouse, he or she may join the plan. A dependent spouse, who is eligible for group-sponsored coverage under their employer is NOT eligible for coverage through ARBenefits.

Former spouses are not eligible to join the plan even if there is a court order to include them in a plan.

To add a child as a dependent to your health plan they must be:

- Your birth child, adopted child, stepchild, or have legal guardianship of the child
- Under the age of 26
- If you have a Qualified Medical Child Support Order (QMCSO) under the age of 26 and have a judgement, decree, or order issued under state law



**NOT ELIGIBLE:** The following are not eligible to be enrolled as a dependent on the PSE plan: (1) former spouse, the day following the final divorce date; (2) common-law spouse (not recognized in Arkansas); (3) parent; (4) grandparent; (5) step-parent; (6) niece or nephew, etc.; (7) foster child (unless legally adopted); (8) dependent children over the age of 26, unless they have been deemed physically or mentally incapacitated; (9) spouse who is offered group-sponsored coverage through their employer.

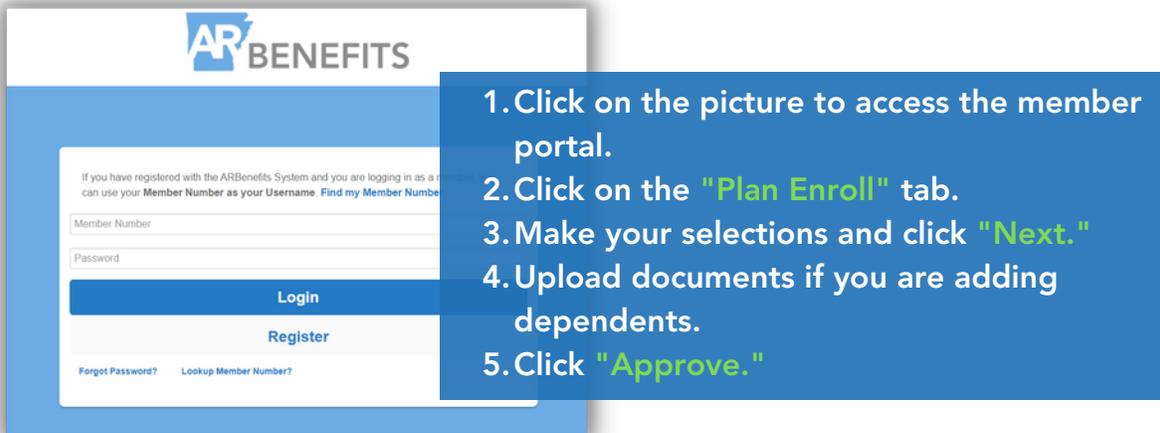
# Enrollment

The easiest way to enroll or make changes to your plan during designated enrollment periods is online through the ARBenefits member portal.

Enrolling through the portal allows you to:

- Obtain instant confirmation that your enrollment elections have been received by the SAS Employee Benefits Division;
- Send supporting documentation directly through the portal;
- Receive an email alert from EBD when your forms have been approved or if an issue requires action.

## How to Enroll



The screenshot shows the ARBenefits member portal login page. It features the ARBenefits logo at the top, a login form with fields for Member Number and Password, and buttons for Login and Register. Below the form are links for 'Forgot Password?' and 'Lookup Member Number?'. A blue box on the right side of the screenshot contains the following five steps:

1. Click on the picture to access the member portal.
2. Click on the "Plan Enroll" tab.
3. Make your selections and click "Next."
4. Upload documents if you are adding dependents.
5. Click "Approve."

If you do not have access to a computer to register for the Online Member Portal, you can access one at the State Library or at any public library within the state. To find a public library near you, go to [library.arkansas.gov](http://library.arkansas.gov).

Click on the picture or [HERE](#) to access a full guide on how to enroll.



# Health Insurance Terminology

A more extensive list of terms and definitions can be accessed in the Glossary section of the [ARBenefits Summary Plan Document \(SPD\)](#).

**Coinsurance:** The amount you pay after you meet your deductible. Once you meet your deductible, ARBenefits will pay 80% and you will pay 20% for covered services.

**Copay:** The fixed amount you pay for medical services such as a doctor's office visit, prescription, or an ER visit.

**Deductible:** The amount you pay before coinsurance begins for covered services.

**Out-of-Pocket Maximum:** The maximum amount you pay towards covered services for a plan year. Once reached, ARBenefits will pay 100% for covered services for the remainder of the plan year.

**Premium:** The monthly amount you pay for health coverage.

**Plan Year:** The period of time from January 1 - December 31. Amounts contributed to your deductible and out-of-pocket maximums will reset after this period for the next plan year.

**Preventive Care:** Services covered by the plan even if you have not met your deductible.

**Third Party Administrator (TPA):** Health Advantage is the TPA that processes claims for ARBenefits. ARBenefits follows the coverage policies of Health Advantage.

**Voluntary Products:** Optional benefits such as life insurance, vision insurance, cancer, short or long-term disability, etc.

# ARBenefits Plan Options and Benefits

## Benefits Available Under All Plans

Coverage for care including doctors, hospital stays, prescriptions, rehabilitation

In-network providers nationwide through BCBS provider network

Access to specialists without a referral. Some services may require pre-certification

\$160 towards a breast pump

24 hour care for emergencies in or out-of-network

Eligible preventive care covered 100% with no deductible requirement

\$1,400 paid towards each ear every three years, towards the cost of hearing aids

### Employee Assistance Program

The Employee Assistance Program offers short term counseling, work-life support, legal, and financial guidance to help you and your family handle various issues that may arise.



### Nurse24

Nurse24 is a nurse hotline which is available 24 hours a day, 7 days a week. When you call, you will speak directly with a nurse who can answer health questions or help you decide if you need to see a doctor or go to the emergency room. Call 1-866-458-0408 to get started. If you are on the Premium Plan and are referred to the ER, then the copay is waived.

### Case Management

You can work with a case manager to manage a long term illness or injury to help understand treatment options and your benefit plan. Call 1-800-225-1891 to enroll.



### Special Delivery

If you or your dependent are pregnant, you can earn \$250 for going through the program. By focusing on prenatal care earlier, you improve the long-term health of your baby. You can register up to 20 weeks of gestation. To enroll, call 1-800-225-1891, ext. 20225

### Chronic Condition Management

If you have certain conditions such as asthma, diabetes, or high cholesterol, then you are eligible for the Nurse Coaching Program. Call 1-800-482-8416 to get started.

# Summary of Benefits

## Premium Plan

<u>Deductible</u>	<u>Plan Type</u>	<u>Premium</u>
Individual – \$750	Employee only:	\$201.96
Family – \$1,500	Employee and Spouse:	\$706.92
<u>Out of Pocket (medical)</u>	Employee and Children:	\$457.28
Individual – \$3,250	Employee and Family:	\$779.68
Family – \$6,500		
<u>Out of Pocket (pharmacy)</u>		
Individual – \$3,100		
Family – \$6,200		

## Classic Plan

<u>Deductible</u>	<u>Plan Type</u>	<u>Premium</u>
Individual – \$1,750	Employee only:	\$88.38
Family – \$3,400/\$3,500	Employee and Spouse:	\$347.76
<u>Out of Pocket (medical &amp; pharmacy)</u>	Employee and Children:	\$209.30
Individual – \$6,450	Employee and Family:	\$391.88
Family – \$9,675		

## Basic Plan

<u>Deductible</u>	<u>Plan Type</u>	<u>Premium</u>
Individual – \$4,000	Employee only:	\$43.24
Family – \$8,000	Employee and Spouse:	\$241.58
<u>Out of Pocket (medical &amp; pharmacy)</u>	Employee and Children:	\$140.02
Individual – \$6,450	Employee and Family:	\$262.12
Family – \$12,900		

# Voluntary Products

## Health Savings Account

Health Savings Accounts (HSA) allow you to contribute pre-tax funds to help cover eligible medical expenses. Optum Financial is the Third Party Administrator for the Public School HSAs.

**Please Note:** Not every district utilizes Optum Financial for HSAs. Please talk your district for further information.

**Eligibility:** Must be enrolled in the Classic or Basic Plan.

**Contributions:** Can be adjusted at any time.

**Enrollment:** Do not need to re-enroll each year.

**Rollover of Funds:** Unused funds rollover year to year.

**Connection to Employer:** Continued account access, even if you change jobs.



[Click here for more information on HSAs](#)

## Colonial Life Insurance

How secure is your family's financial future without you? If something happened to you, would your family be able to maintain their way of life? How would they cover ongoing living expenses? Colonial Life's group term life insurance can help provide financial security for your family.

[Colonial Life Plan and Enrollment Options](#)





## Questions? Contact us:

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Employee Benefits Division  
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P.O. Box 15610 | Little Rock, AR 72231

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Ask.EBD@arkansas.gov | [sas.arkansas.gov/employee-benefits/](https://sas.arkansas.gov/employee-benefits/)

