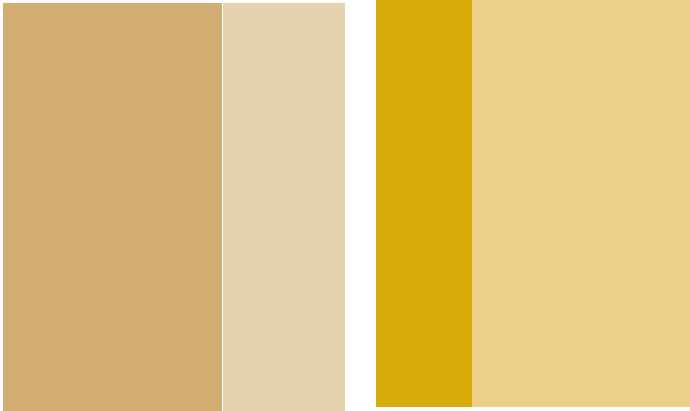
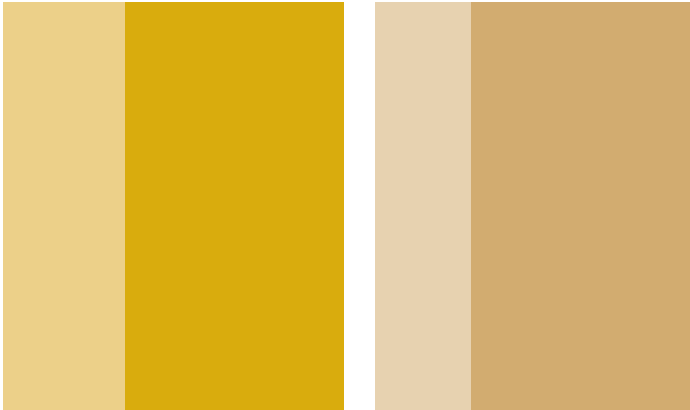


2023 New Employee Benefits Guide

**Benefits for the
2023 Plan Year**



Visit us online to enroll or call the Colquitt County Schools Benefits Service Center.
www.colquittcountyschoolsbenefits.com | (844) 635-0709

INTRODUCTION

This guide provides an overview of your Colquitt County Schools benefits, the enrollment process, and benefits resources. We encourage you to review this guide before completing your elections.

Our extensive benefits package provides financial protection and peace of mind for you and your family. Colquitt County Schools provides a significant financial contribution towards your State Health Benefit Plan (SHBP) premiums. The district also provides basic life insurance coverage and an Employee Assistance Program (EAP) at no cost. For the plans in which you have a contribution, your contribution will be payroll deducted.

Your benefit elections during Open Enrollment are valid for the entire 2023 plan year unless you have a qualifying life event, such as marriage, divorce, birth of a child, etc. (supporting documentation required).

Benefits Service Center

Colquitt County Schools is pleased to partner with the Benefits Service Center as an extension of your Human Resources Department.

The Benefits Service Center manages all aspects of your voluntary (non-medical) benefits; plans such as dental, vision, life insurance, disability, and more. We can help you with benefit questions, claims issues, qualifying life events, ID Cards, and life insurance beneficiary updates. We can also assist with general State Health Benefit Plan questions. We're here to support you all year long, even at times when the district is closed.

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How to Enroll

Voluntary Benefits

Enrollment Online

Step 1: Visit www.colquittcountyschoolsbenefits.com and click “Enroll Now”.

Step 2: Click on “Get Started Now.” You will be prompted to enter your e-mail address, last four digits of your Social Security Number, and date of birth. The system will identify you by these credentials and allow you to create a password. If you have already created an account, click “Login” and enter your credentials to get started.

Step 3: Once you have created your password, you will be able to complete your enrollment. You can complete your benefit elections by clicking “Begin Enrollment” and following the prompts.

Enrollment by Phone

Call the Colquitt County Schools Benefits Service Center at **(844) 635-0709** to complete your voluntary benefits enrollment. The Benefits Specialist will confirm your personal information, review your plan options, and confirm your elections.

For online and phone enrollment, you will receive a Confirmation Statement via email following your enrollment.

State Health Benefit Plan (SHBP) – ADP Portal

1. Access <https://myshbpga.adp.com/shbp> to review your health coverage elections. Your Registration Code is “SHBP-GA”. Employees may also enroll by phone by calling (800) 610-1863.
2. If you wish to cover a new dependent(s), ADP will provide instructions for submitting required documentation for the new dependent(s). Be sure to provide documentation in the format required by the deadline provided by ADP. Your dependent(s) will not have coverage until the documentation is received and approved.

How to Reset Your SHBP Password

- Step 1: Go to www.myshbpga.adp.com and click “Forgot Your Password.”
- Step 2: Enter your User ID.
- Step 3: Follow the instructions to answer security questions. Contact SHBP if you are unable to answer the questions.
- Step 4: Create a new password and click “Continue.”

New Employee Eligibility

As a new Colquitt County Schools employee, you are eligible for benefits on the first of the month following 30 days of employment. No enrollment changes to your benefits are allowed during the plan year unless you experience a qualifying life event.

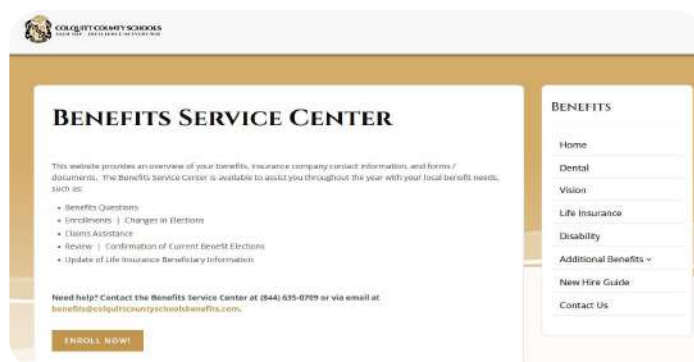
Qualifying Life Events

Qualifying life events that could result in changes to your benefit coverage include, but are not limited to, the following:

- Marriage or divorce
- Birth or adoption of a child
- Loss of a dependent or other group coverage
- Medicare entitlement

If you have a qualifying life event, please contact the Benefits Service Center and SHBP to complete your new elections and update your life insurance beneficiary(ies). You must also provide the supporting documentation to the Benefits Service Center and SHBP within 31 days of the change. If you do not do so, you must wait until the next open enrollment to make any benefit plan changes.

Benefit Resources



Benefits Website

Access plan documents, benefit summaries, forms, premium information, benefits presentations and guides, links to insurance company and vendor websites, and more.

www.colquittcountyschoolsbenefits.com

Benefits Service Center

Contact the Colquitt County Schools Benefits Service Center for benefits questions, claims inquiries, and general SHBP inquiries. The Benefits Service Center can also assist you with your voluntary benefits enrollment.

Medical Coverage

State Health Benefit Plan (SHBP)

Colquitt County Schools participates in State Health Benefit Plan. Refer to the Active Member Decision Guide for details.

SHBP Contribution

The district pays a significant portion of your health insurance premiums. This financial contribution reduces your premium for a quality health plan at a competitive cost.

Certified and Classified Employee District Contribution
\$945 per month \$11,340 per year

State Health Benefit Plan Overview

Preventive care is covered at 100% for all plan options with no deductible.

Anthem Options	
HRA Gold HRA Silver HRA Bronze	Most services are subject to a deductible. Then you pay coinsurance up to the out-of-pocket maximum. For prescription drugs, you pay a percentage of the retail cost. The HRA plans include a plan-funded Health Reimbursement Account (HRA) to reduce your deductible and pharmacy expenses.
HMO	This plan has the lowest deductible and provides in-network coverage only. Some services, such as office visits, ER and prescription drugs, are covered at 100% after a copay. For most other services, you are responsible for a deductible and coinsurance until you meet your out-of-pocket maximum.
UnitedHealthcare Options	
HMO	Same benefits as the Anthem HMO. UnitedHealthcare provider network.
High Deductible Health Plan (HDHP)	Lowest premiums, highest deductible and maximum out-of-pocket. All services including pharmacy are subject to deductible and coinsurance.

Pharmacy Information

CVS Caremark administers the pharmacy benefits for HRA, HMO, and HDHP members. The CVS Caremark pharmacy network is extensive and not limited to CVS pharmacies. Participating pharmacy information is available at info.caremark.com/shbp.

- For your convenience, you may purchase a 90-day supply via retail at participating in-network pharmacies.
- Certain drug costs are waived if SHBP is primary and you actively participate in one of the Disease Management programs for diabetes, asthma, ALS, cystic fibrosis, Parkinson's Disease, or coronary artery disease.

Online Resources

Access the plan websites to access participating providers, health and wellness tools, plan details, and more.

Anthem

www.anthem.com/shbp

Select "Find Care" from the Main Menu and then follow instructions to find a doctor.

UnitedHealthcare

www.whyuhc.com/shbp

Select "Find a Doctor or Facility" under the Benefits drop down. Select "Choice HMO" or "HDHP with HSA" and follow search instructions.



Dependent Documentation

- If you wish to add dependent(s) to your health plan at this time, ADP will contact you to request verification documents. This communication from ADP will include a personalized fax cover sheet with a bar code that must be used when submitting documentation.
- Appropriate documentation must be attached to the fax cover page.
- If you do not receive the request, contact SHBP at (800) 610-1863 to have the request sent to you. Your dependents will not be covered until the documentation is received and approved.



Medical Plan Designs and Premiums

	Anthem HRA						Anthem OR UHC	UHC	
	Gold		Silver		Bronze		HMO	HDHP	
	In	Out	In	Out	In	Out	In	In	Out
Deductible									
You	\$1,500	\$3,000	\$2,000	\$4,000	\$2,500	\$5,000	\$1,300	\$3,500	\$7,000
You + Child(ren)/Spouse	\$2,250	\$4,500	\$3,000	\$6,000	\$3,750	\$7,500	\$1,950	\$7,000	\$14,000
You + Family	\$3,000	\$6,000	\$4,000	\$8,000	\$5,000	\$10,000	\$2,600	\$7,000	\$14,000
Medical OOPM									
You	\$4,000	\$8,000	\$5,000	\$10,000	\$6,000	\$12,000	\$4,000	\$6,450	\$12,900
You + Child(ren)/Spouse	\$6,000	\$12,000	\$7,500	\$15,000	\$9,000	\$18,000	\$6,500	\$12,900	\$25,800
You + Family	\$8,000	\$16,000	\$10,000	\$20,000	\$12,000	\$24,000	\$9,000	\$12,900	\$25,800
Coinsurance (Plan Pays)	85%	60%	80%	60%	75%	60%	80%	70%	50%
HRA									
You	\$400		\$200		\$100		N/A	N/A	
You + Child(ren)/Spouse	\$600		\$300		\$150		N/A	N/A	
You + Family	\$800		\$400		\$200		N/A	N/A	
Medical									
ER	Coinsurance after ded		Coinsurance after ded		Coinsurance after ded		\$150 copay	Coinsurance after ded	
Urgent Care	Coinsurance after ded		Coinsurance after ded		Coinsurance after ded		\$35 copay	Coinsurance after ded	
PCP Visit	Coinsurance after ded		Coinsurance after ded		Coinsurance after ded		\$35 copay	Coinsurance after ded	
Specialist Visit	Coinsurance after ded		Coinsurance after ded		Coinsurance after ded		\$45 copay	Coinsurance after ded	
Preventive Care	100%	None	100%	None	100%	None	100%	100%	None
Retail Pharmacy									
Tier 1	15%, Min \$20, Max \$50		15%, Min \$20, Max \$50		15%, Min \$20, Max \$50		\$20 copay	Coinsurance after ded	
Tier 2	25%, Min \$50, Max \$80		25%, Min \$50, Max \$80		25%, Min \$50, Max \$80		\$50 copay	Coinsurance after ded	
Tier 3	25%, Min \$80, Max \$125		25%, Min \$80, Max \$125		25%, Min \$80, Max \$125		\$90 copay	Coinsurance after ded	
Mail Order Pharmacy									
Tier 1	15%, Min \$50, Max \$125		15%, Min \$50, Max \$125		15%, Min \$50, Max \$125		\$50 copay	Coinsurance after ded	
Tier 2	25%, Min \$125, Max \$200		25%, Min \$125, Max \$200		25%, Min \$125, Max \$200		\$125 copay	Coinsurance after ded	
Tier 3	25%, Min \$200, Max \$312.50		25%, Min \$200, Max \$312.50		25%, Min \$200, Max \$312.50		\$225 copay	Coinsurance after ded	

Monthly Premiums	Anthem HRA			Anthem	UHC	UHC
	Gold	Silver	Bronze	HMO	HMO	HDHP
You	\$175.68	\$114.32	\$76.58	\$143.03	\$174.49	\$61.83
You + Child(ren)	\$320.11	\$215.80	\$151.64	\$264.61	\$318.09	\$126.57
You + Spouse	\$436.33	\$307.47	\$228.22	\$367.76	\$433.83	\$197.24
You + Family	\$580.76	\$408.95	\$303.28	\$489.34	\$577.43	\$261.98

Wellness Program



Sharecare, your wellness program vendor, provides comprehensive well-being and incentive programs for SHBP members. As you complete wellness activities, you will earn incentive points in your Health Incentive Account to help reduce your medical expenses. HDHP members must meet a portion of the deductible before well-being points may be used.

You and your covered spouse are each eligible to receive up to 480 well-being incentive points (960 family total) when you complete the activities between January 1 and November 30. Enrolled members can choose to redeem well-being incentive points for a \$150 Visa gift card or 480 incentive points to be used for eligible medical / pharmacy expenses.

Step 1	Complete the RealAge Test	Earn 120 well-being incentive points
Step 2	Complete a Biometric Screening	Earn 120 well-being incentive points
Step 3	Complete one or a combination of: <ul style="list-style-type: none"> • Telephonic Well-Being Coaching Pathway • Online Pathway 	Earn up to 240 well-being incentive points

Please refer to the State Health Benefit Plan Decision Guide or access www.bewellshbp.com for additional details. Download the Sharecare App today to complete activities or redeem well-being incentive points.

TRICARE

The TRICARE Supplement Plan is an alternative to the State Health Benefit Plan that is offered to members and dependents who are eligible for SHBP coverage and enrolled in TRICARE.



Who is eligible for the TRICARE Supplement Plan?

- Retired military receiving retired, retainer, or equivalent pay
- Retired Reservists between ages 60 and 65
- Retired Reservists under age 60 and enrolled in TRICARE Retired Reserve (TRR)
- Qualified National Guard and Reserve Members enrolled in TRICARE Reserve Select (TRS)
- Spouses/surviving spouses of any of the above

TRICARE Supplement Plan Premiums	
You	\$60.50
You + Child(ren)	\$119.50
You + Spouse	\$119.50
You + Family	\$160.50

For information about eligibility and benefits, contact 866-637-9911 or visit info.selmanco.com/ga_shbp.

Live Health

The medical plans include a telemedicine benefit that allows you to speak to a participating doctor from home or work through your smartphone, tablet, or computer 24 hours a day / 7 days a week. You must use in-network providers for coverage to apply. HMO members pay a copay and HRA members pay coinsurance for telemedicine. High Deductible Health Plan members can access this benefit subject to the health plan deductible. Consider this convenient benefit for non-complex medical conditions. Download the LiveHealth mobile app today!

Attention Families – PeachCare

- Your dependents, up to age 19, may be eligible for PeachCare (instead of SHBP), offered through the state of Georgia
- Income and other qualifications must be met
- Visit www.peachcare.org for more info
- Not available through payroll deduction



Dental Plans



The dental coverage is offered through MetLife. There are two dental PPO plan options: the Low Plan and the High Plan. Both plan options include preventive care at 100% (no deductible) and two cleanings per calendar year. The Low Plan has the lowest premiums and lowest annual maximum benefit, but only includes coverage for preventive and basic restorative services. The High Plan has higher premiums and a higher annual maximum, and includes coverage for major restorative services and orthodontia for children.

To reduce your out-of-pocket costs and prevent balance billing, you are encouraged to use in-network dentists. Visit www.metlife.com/dental to locate participating dentists. Select "PDP Plus" dental network. You can also download the mobile app to view plan information, find a provider, or access your ID card. Please refer to the Benefits Summaries for complete details.

Dental Monthly Premiums	Low Plan	High Plan
Employee Only	\$19.51	\$41.46
Employee + Spouse	\$39.49	\$82.75
Employee + Child(ren)	\$51.92	\$93.36
Family	\$61.97	\$115.27

Dental Summary of Benefits	Low Plan	High Plan
Calendar Year Deductible	\$50 Individual / \$150 Family	\$50 Individual / \$150 Family
Calendar Year Maximum	\$750	\$1,100
Orthodontia Lifetime Maximum	N/A	\$1,000
Type A Services (Preventive)	100%	100%
Type B Services (Basic Restorative)	60% after deductible	80% after deductible
Type C Services (Major Restorative)	Not Covered	50% after deductible
Orthodontia Services	Not Covered	50% after deductible



Vision

With the MetLife vision plan, you may visit any vision provider. However in order to maximize your vision benefit, it is recommended you access participating providers by visiting www.metlife.com. Click “Find a Vision Provider” from the home page, and follow the search instructions. Be sure to select the MetLife Vision PPO Network. When you visit a participating MetLife vision provider, you will have a higher benefit and lower out-of-pocket costs, and you will receive the benefit at the time of service. If you go out-of-network, you will need to pay at the time of service and file a claim for reimbursement.

The MetLife Vision plan provides coverage for exams, frames, and lenses (either contacts or eyeglasses lenses). If you see an in-network provider, you pay a copay for your eye exam and lenses, and the plan pays a benefit of up to \$200 for frames and contact lenses. Additional copays apply for eyeglass lens options.

Frequency Limitations: The vision plan has frequency limitations. The exam benefit, lens benefit, and frame benefit are once per 12 months. Either eyeglass lenses or contact lenses are allowed per 12 month frequency.

Vision Summary of Benefits	In-Network
Eye Exam	\$10 copay
Retinal Imaging	Up to \$39 copay
Lenses	
Single	Covered in full after \$25 copay
Bifocal	
Trifocal	
Lenticular	
Contacts	
Fit and Follow-up	\$25 copay
Electives Lenses	\$200 allowance
Medically Necessary	Covered in full after \$25 copay
Frames	\$200 allowance

Vision Monthly Premiums	
Employee Only	\$9.73
Employee + Spouse	\$16.16
Employee + Child(ren)	\$16.48
Family	\$26.05





Flexible Spending Accounts (FSA)

There are two types of Flexible Spending Accounts (FSA's) available: **1) Healthcare FSA** for medical, dental, vision, pharmacy, and other related expenses and **2) Dependent Care FSA** primarily for dependent day care expenses. Medcom is the administrator for the FSA plans. An FSA allows you to pay for these expenses with pre-tax dollars, saving you money. Your taxable income is reduced by your annual FSA contributions. Plus, the reimbursements are tax-free.

Healthcare Flexible Spending Account

You may contribute up to \$3,050 during 2023 into a Healthcare FSA. Eligible Healthcare FSA expenses include deductibles, copays, coinsurance, prescription drugs, over-the-counter drugs (no prescription required), dental, and vision expenses.

Dependent Care Flexible Spending Account

The Dependent Care FSA allows you to pay for certain dependent care expenses using before-tax dollars. You may contribute up to \$5,000 in a Dependent Care FSA for 2023. Eligible dependent care expenses include day care and after-school care for children up to age 13 and certain adult day care expenses.

Monthly FSA Administrative Fee

FSA plan participants pay a \$3.50 monthly post-tax administrative fee via payroll deduction. Only one fee applies if you are enrolled in both the Dependent Care and the Healthcare FSA.

Other Account Features

Participants in the FSAs receive a debit card so that many expenses can be paid at the time of service, eliminating the reimbursement process. The funds are debited from the account and paid to the doctor's office, pharmacy, or day care facility directly at the time of purchase. When the debit card is not accepted, you are required to pay for the expense and submit a claim for reimbursement.



Use It or Lose It

Claims must be incurred by December 31, 2023 to be eligible for reimbursement for the 2023 plan year. The IRS requires that any unused money in your account at the end of the plan year is retained by your employer and forfeited by the employee. However, the IRS allows **Healthcare FSA** plan members to roll over up to \$610 of unused funds for future use. The \$610 roll over option does not apply to the Dependent Care FSA.

IRS regulations require appropriate documentation to ensure your claims are valid expenses. You will be asked to provide receipts as documentation for most expenses. Retain receipts and provide them promptly upon request.

The FSA plan year for 2023 is January 1 through December 31.



Medcom offers a free mobile app for convenient account access.



Life Insurance

Your Colquitt County Schools life insurance plan is insured by Prudential.

Employer-Paid Basic Life & Accidental Death & Dismemberment (AD&D)

Colquitt County Schools provides all eligible employees a \$10,000 life and AD&D benefit **at no cost to you**. The AD&D benefit provides an additional payment in the event of a death or loss of limb(s), speech, hearing, and more caused by a covered accident.

Employee Term Life and AD&D (employee-paid option)

You may elect life and AD&D insurance in the amount of \$10,000 to \$40,000 in \$10,000 increments to supplement the employer-paid benefit. The monthly cost, regardless of age, is as follows:

Benefit Amount	Monthly Premiums
\$10,000	\$2.20
\$20,000	\$4.40
\$30,000	\$6.60
\$40,000	\$8.80

Spouse Term Life (employee-paid option)

You may elect a \$10,000 life insurance benefit for your spouse, regardless of spouse age. The cost for this coverage is \$1.49 per month.

Child Term Life (employee-paid option)

You may elect life coverage for your children up to age 26 (or disabled children with no limiting age) in the amount of \$15,000 per child. The monthly cost for child life coverage is \$.39, and this deduction covers all of your children.





Life Insurance

Employee & Spouse Voluntary Life (employee-paid option)

In addition to the previously described employee-paid options, you may elect the below term life insurance coverage for yourself and your spouse based on your age.

	Employee	Spouse
Benefit Amount	\$10,000 increments up to the lesser of 5 times earnings or \$500,000	\$10,000 increments to a maximum of \$200,000

Per \$1,000 of Coverage Premiums	
Under 29	\$.035
30-34	\$.037
35- 39	\$.075
40-44	\$.115
45-49	\$.180
50-54	\$.290
55-59	\$.470
60-64	\$.630
65-69	\$1.010
70-74	\$1.820
75+	\$3.220

Sample Monthly Premiums

Employee and Spouse Voluntary Life Monthly Premiums				
Age	\$50,000	\$100,000	\$150,000	\$250,000
25	\$1.75	\$3.50	\$5.25	\$8.75
35	\$3.75	\$7.50	\$11.25	\$18.75
45	\$9.00	\$18.00	\$27.00	\$45.00
55	\$23.50	\$47.00	\$70.50	\$117.50
65	\$50.50	\$101.00	\$151.50	\$252.50

Your age is calculated as of January 1 for purposes of life insurance premiums.

Important Open Enrollment Information

- During the enrollment, you will be required to review your life insurance beneficiary. The beneficiary is the person you designate who will receive your life insurance benefits in the event of your death.
- Guarantee Issue: As a new hire, you may elect the lesser of up to 300% of your annual earnings or \$300,000 with no health questions. You can elect up to \$50,000 on your spouse with no health questions. All other elections for employees and spouses during enrollment require an Evidence of Insurability (EOI) Form. An EOI Form may be obtained from the benefits website or the Benefits Service Center. Any pended elections will be noted on your Benefits Confirmation Statement.

Benefit Reductions Due to Age

All life insurance benefits reduce beginning at age 65. Life insurance reduces to 65% at age 65, to 50% at age 70, and to 30% at age 75.

Life Insurance Continuation of Coverage

In the event of termination of employment, you have the option to continue your life insurance coverage if certain conditions are met. Should you wish to apply for continuation of coverage, you must contact Prudential within 30 days of your date of termination.

Permanent Life Insurance with Long Term Care

CHUBB[®]

Chubb's Lifetime Benefit Term product provides permanent life insurance protection with a long term care benefit.

Life Insurance Protection with Guaranteed Death Benefits

This plan provides term life coverage and the death benefit is guaranteed 100% when it is needed most – during the working years when a family relies most on income. The death benefit is 100% guaranteed for the longer of 25 years or through age 70. After age 70, the death benefit is guaranteed to never be less than 50% of the original death benefit.

Paid Up Death Benefit

After 10 years, paid-up benefits begin to accrue. At any point thereafter, if you stop paying the premium, a reduced paid-up benefit is issued and can never lapse. That means at retirement you can stop paying premiums and have a death benefit for the rest of your life – guaranteed.

Guaranteed Premiums

Life insurance premiums will never increase and are guaranteed through age 100. After age 100, no additional premium is due while the coverage can continue to age 121.

Benefits for Long Term Care (LTC)

Long Term Care is costly and averages \$8,821 per month for a semi-private room in a nursing home. The Chubb Lifetime Benefit Term plan pays death benefits in advance of death for home health care, assisted living, adult day care, and nursing home care. The long term care benefit is 4% of the death benefit for up to 50 months. Long term care benefits could reduce in the event of a life insurance benefit reduction.

Restoration of Your Death Benefit

Ordinarily, using your life insurance coverage for Long Term Care benefits can reduce your death benefit to \$0. While in force, this benefit restores your life coverage to not less than 50% of the death benefit on which your LTC benefits were based. This feature assures a death benefit is available for the insured at time of death.

How It Works

Age 45 employee elects a \$25,000 policy.

- Employee needs Long Term Care at age 57.
- Plan provides \$1,000 / month benefit for up to 50 months.
- Employee uses 13 months of the Long Term care benefit for a total payment of \$13,000.
- Employee passes away at age 67. Death Benefit Amount is \$12,000.

Age 45 employee elects a \$100,000 policy.

- Employee needs Long Term Care at age 57.
- Plan provides \$4,000 / month benefit for up to 50 months.
- Employee uses 13 months of the Long Term care benefit for a total payment of \$52,000.
- Employee passes away at age 67. Death Benefit Amount is \$48,000.

Permanent Life Insurance with Long Term Care

CHUBB®

Monthly Premium Example - \$25,000

Age 45 Non-Tobacco	Benefit
Approximate Monthly Premium	\$30.67
Death Benefit at age 45	\$25,000
Death Benefit at age 70	\$25,000
Long Term Care Benefit	\$1,000 per month for up to 50 months

Eligibility

- Employees up to age 80 eligible to enroll
- Spouses age 19 through 70 eligible to enroll
- Children 15 days through 25 eligible to enroll

Enrollment

- Enrollment is subject to health questions. Following enrollment, Chubb will contact you to confirm any necessary health information and review your election.



Disability Insurance



Disability coverage provides an income replacement benefit in the event you are unable to work due to a non-work-related illness or accident. The ability to work is usually an employee's most important financial asset. The Social Security Administration estimates that just over 1 in 4 of today's 20 year-olds will become disabled before reaching age 67. Once an individual has become disabled for over 90 days, the average length of disability is 4 years.

The Prudential Short Term Disability and Long Term Disability plans provide income while you are unable to work. Keep in mind your premiums are based on your annual earnings (updated as of November 1) and benefit amount.

Sick Leave

Sick leave is accumulated at the rate of 1.25 days per month, and employees may accumulate up to 60 days of sick leave.

Short Term Disability

Short Term Disability coverage provides an income replacement for a limited, or short time period. Short Term Disability pays in addition to your sick leave benefits.

Disability Summary of Benefits	
Weekly Benefit Amount	66 2/3% of weekly earnings
Maximum Weekly Benefit	\$500 per week
Benefit Start Date	Day 1 for accident Day 8 illness
Benefit Duration	13 weeks

Sample Monthly Premiums

Short Term Disability		
Earnings	Monthly Benefit Amount	Monthly Premium
\$30,000	\$384.81	\$21.93
\$50,000	\$500	\$28.50
\$70,000	\$500	\$28.50



Disability Insurance



Long Term Disability

Long Term Disability coverage provides a benefit up to age 65 or Social Security Normal Retirement Age should your disability continue beyond the Short Term Disability period and if you continue to satisfy the definition of disability.

Disability Summary of Benefits	
Monthly Benefit Amount	66 2/3% of weekly earnings
Maximum Monthly Benefit	\$7,000 per month
Elimination Period	90 days
Benefit Duration	To age 65 or Social Security Normal Retirement Age

Sample Monthly Premiums

Long Term Disability		
Earnings	Monthly Benefit Amount	Monthly Premium
\$30,000	\$1,667	\$13.00
\$50,000	\$2,778	\$21.67
\$70,000	\$3,889	\$45.50

The Long Term Disability plan excludes disabilities caused by a pre-existing condition for the first 12 months of coverage. A pre-existing condition is one for which you have been diagnosed or treated within the prior 3 months before newly enrolling in the plan. Once you have been insured with Long Term Disability coverage for 12 months, no coverage restrictions related to pre-existing conditions apply.

Important Enrollment Information

As a new hire, you have the option to elect coverage with no Evidence of Insurability (health questions) required. If you newly elect Short Term Disability or Long Term Disability coverage in the future, medical underwriting is required.





Critical Illness

Colquitt County Schools offers voluntary Critical Illness coverage which provides a lump sum benefit in the event of a diagnosis of a covered illness. The plan is insured by MetLife and employees may elect coverage for yourself, your spouse, and your child(ren) with no health questions.

Covered Diagnoses and Conditions

- Cancer (see certificate definition)
- Heart attack
- Stroke
- Major organ transplant
- Coronary artery bypass surgery
- End stage renal failure
- And more

Benefit Options

Employees: From \$5,000 to \$30,000 in increments of \$5,000

Spouses: 50% of the employee amount

- Employees must be enrolled to elect spouse coverage.

Children: 50% of employee coverage for all children

- Employees must be enrolled to elect child coverage.

Employees may elect up to the maximum amount of coverage for yourself and your spouse with no health questions.

Sample Monthly Premiums Employee \$10,000; Spouse and Child(ren) \$5,000				
Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
25	\$4.80	\$7.80	\$6.80	\$9.80
35	\$6.90	\$10.90	\$8.90	\$12.80
45	\$12.10	\$18.70	\$14.10	\$20.70
55	\$21.90	\$34.90	\$23.80	\$36.80
65	\$40.40	\$65.60	\$42.30	\$67.50

Wellness Benefit

The voluntary Critical Illness plan includes a wellness benefit for covered preventive screenings including but not limited to:

- Annual physical exam, biometric screening, or stress test on bicycle or treadmill
- Blood test for triglycerides, CEA, bone marrow, CA 15-3 (breast cancer), fasting glucose, Hemoglobin A1C
- Chest x-ray, mammograms, breast ultrasound, sonogram, MRI
- Serum testing for cholesterol levels (HDL & LDL) or protein electrophoresis (myeloma)
- Routine dental or vision exam
- Electrocardiogram or ultrasound screening for abdominal aortic aneurysms
- Colonoscopy, prostate-specific antigen testing, or pap smear

Wellness Benefit Amount

- Employee: \$50
- Spouse \$50
- Child(ren): \$50

Maximum of once per year per insured.



Accident



The MetLife Accident Plan provides financial protection in the event of an unexpected accident. A summary of the benefits schedule is below. Please refer to the Summary of Benefits or certificate of coverage for complete details.

Schedule of Benefits	
Hospital Care Benefits	
Surgery	\$1,500
Admission	\$1,000
Confinement	\$200 / day up to 15 days
ICU Confinement	\$200 / day up to 15 days
Inpatient Rehab	\$75 / day up to 15 days
Medical Treatment Benefits	
Initial and follow-up doctor visit	\$75
ER & Urgent care	\$150 / \$75
Surgery	From \$750 to \$1,500
Outpatient Surgery	\$300
Speech, Occupational, and Physical Therapy	\$35
Injury-Based Benefits	
Fractures	From \$100 to \$8,000
Lacerations	From \$50 to \$400
Concussions	\$250
Dislocations	From \$100 to \$8,000
Coma	\$7,500
Additional Benefits	
Sports Accident Benefit	Additional 25%

Accident Monthly Premium	
Employee	\$5.40
Employee + Spouse	\$10.66
Employee + Child(ren)	\$12.86
Family	\$15.16

Includes Accidental Death & Dismemberment (AD&D) benefit of \$25,000 (employee death benefit). Refer to benefit summary for details.





Legal Plan



The ARAG legal plan helps cover the costs of legal expenses associated with a variety of needs, and includes in-office and telephonic advice with an attorney for personal legal issues.

The ARAG legal plan includes coverage for divorce in both contested and uncontested proceedings, and allows members to go directly to a participating attorney for services. Emergency service with an attorney is also available 24 hours a day / 7 days a week.

Legal Plan Monthly Premium
\$18.25

Telephonic and office consultations are available on a variety of matters including:

- Family law
- Real Estate and estate planning
- Financial issues
- Traffic offenses
- And more

We encourage you to evaluate your current needs and learn more about the new ARAG legal plan. Complete plan information is located on the Colquitt County Schools benefits website.

Legal Resources for All Employees

- How-To Resources: caregiving, debt collection, estate planning, hiring / working with a contractor, managing legal / financial responsibilities surrounding the death of a loved one, tenant's guidebook to renting property
- Law guide: collection of articles on legal topics
- LawExpresso Newsletter, Legal Glossary, Legal Links, and Personal Information Organizer

Identity Theft



Colquitt County Schools offers Identity Theft Protection through Equifax ID Watchdog.

1 in 14 people become victims of identity fraud. Your identity includes more than your Social Security Number and bank accounts. The Identity Protection Plan does more than monitor your credit reports and scores. It safeguards your personal information and the data you share.

Identity protection gives you the tools and protection to monitor activity, stop identity theft early, and resolve it quickly. Most victims only discover they have a problem when they are denied credit or receive bills for items never ordered. We encourage you to consider this benefit as a proactive step to help protect your personal information.

The Equifax ID Watchdog protection plan has extensive protection for you and your family. Benefits include, but are not limited to:

- Tri-Bureau Credit Monitoring
- Rapid Credit Alerts
- Monthly Credit Score Tracking
- Credit Report Disputes and Freeze Assistance
- Social Network Alerts
- Registered Sex Offender Reporting
- 100% Fully Managed Resolution up to \$1M

Coverage Level	Monthly Premiums
Employee Only	\$8.90
Family	\$15.90



Air Ambulance - AirMedCare Network



We are pleased to offer a medical emergency air ambulance plan. Even with medical insurance, air medical transport can result in significant out-of-pocket expenses. This new benefit eliminates your out-of-pocket expenses for medically necessary flights if flown by an AirMedCare Network provider. Please note this benefit is for emergency transport only.

AirMedCare Network is America's largest air medical membership network, providing financial coverage for emergency air medical transport. Air Evac Lifeteam, located in Tifton, is the closest provider in your area. The state of Georgia has several additional providers in the network; chances are favorable that you will be transported by an AirMedCare Network provider in the event you need emergency medical transport.

Membership Options

You have four membership options from which to choose. You pay the total cost indicated below over 12 payroll deductions. **This benefit will be available to you during the next Open Enrollment period.**

Membership Duration	Total Cost	Monthly Premium
1 Year	\$50	\$4.17
3 Years	\$145	\$12.08
5 Years	\$230	\$19.17
10 Years	\$435	\$36.25

This program covers emergency air transportation only.

Household and Nationwide Service Area

Membership covers not just yourself, but anyone who resides in your home. Plus membership is valid in all service areas, so you are covered at home and while traveling. The AirMedCare Network includes coverage in 38 states and over 320 locations in the U.S.



EMPLOYEE ASSISTANCE PROGRAMS



Employee Assistance Programs

Employees have access to three Employee Assistance Programs (EAP) which offer free and confidential assessments, short-term counseling, referrals, and follow-up services for personal and / or work-related problems. EAPs address a broad and complex body of issues affecting mental and emotional well-being, such as alcohol and other substance abuse, stress, grief, family problems, and psychological disorders. Some EAP programs also provide resources for legal services, financial planning services, and other support services aimed at helping employees with work/life balance.

Employees are eligible to take part in any or all of the offered Employee Assistance Programs.

Sterling Group	Guidance Resources	GA Public Education EAP
Employee + Household Members	Employee + Dependents	Employee (29+ hours per week) + Household Members (up to age 26)
3 face-to-face free counseling sessions per person per year	Up to 3 free face-to-face sessions per issue per person per year	Up to 6 face-to-face counseling sessions per year
Covered Issues		
Depression	Depression	Depression
Anxiety	Marital / Family Conflicts	Home and Job Stress / Anxiety / Anger
Relationship Problems	Job Pressures	Relationships / Work Conflicts
Parenting Concerns	Stress / Anxiety	Family / Parenting Problems
Eating Disorders	Alcohol / Drugs	Substance Abuse
Abuse	Grief / Loss	Grief / Loss
Alcohol / Drugs	Legal (Free 30-Min Consult w/ 25% Discount)	Legal / Financial Advice (Up to 4 consultations per year)
Grief	• Divorce / Family Law	• Collections / Repossessions / Defaults
ADHD	• Debt Obligations / Bankruptcy	• Debt Management / Credit Report Issues
Behavioral Disorders	• Criminal Actions / Civil Lawsuits	• Family Law / Criminal Actions / Civil Matters
Emotional Issues	Financial	Elder Care Support & Resources
	• Saving for College	Childcare Support & Resources
	• Retirement Planning / Estate Planning	Work / Life Convenience Services
	• Getting Out of Debt / Tax Questions	
Contact Information		
(229) 891-9443 Appointments Available: Monday - Thursday 9:00AM - 5:00PM	(800) 311-4327 guidanceresources.com Web ID: GEN311 Available 24 hours a day / 7 days a week	(866) 279-5177 EAPHelpLink.com Code: GADOE Available 24 hours a day / 7 days a week

Retirement

Teacher's Retirement System (TRS)

The following personnel are required to participate in TRS, a state retirement plan: certified teacher, administrator, clerical staff, paraprofessional, lead custodian, supervisor, and school nutrition manager. Your TRS account is funded by you and the district. Employees contribute 6% of earnings and the district contributes 19.98% of earnings. Employees are vested after 10 years of service.

Public School Employees Retirement System (PSERS)

The following personnel are required to participate in PSERS, a state retirement plan: school nutrition, transportation, maintenance, and custodial staff. The employee contribution for employees hired before July 1, 2012 is \$4 per month for 9 months (\$36 per year). For employees hired on or after July 1, 2012, it is \$10 per month for 9 months (\$90 per year). Your retirement benefit will be \$16.00 per month multiplied by your number of years of service. Employees are vested after 10 years of service.

State Health Benefit Plan (SHBP)

In order to continue your SHBP coverage as a retiree, you and any dependents you wish to cover must be enrolled in the plan at the time you retire. If you are not enrolled in SHBP and wish to elect coverage as a retiree, you will need to enroll during Open Enrollment the year prior to your retirement. Please refer to the Retiree Decision Guide for additional information regarding your SHBP coverage and retiree options. More information is available here: <https://shbp.georgia.gov/>.

Third Party Administrator for Supplemental Retirement Plan

New hires of Colquitt County Board of Education are automatically enrolled in The Colquitt County Schools 457(b) Deferred Compensation Plan serviced by AIG Retirement Services. The Board of Education automatically deducts 3% of your pretax compensation from each biweekly/monthly paycheck and deposit it into your retirement account in a target date fund based on your date of birth. The Board of Education matches your contribution at 100% up to the 6% of your compensation. To increase or change your contribution from the default 3% or move from the 457(b) Plan to the 403(b) Plan, you may use the following listed methods:

- Online: Visit aig.com/RetirementServices, and click on "Enroll." Enter Group Access Code: (in the Login field and click Continue.)
 - * 457(b) Plan
 - 457(b) pre-tax contribution - 07739001
 - 457(b) post-tax (Roth) - 07739101;
 - * 403(b) Plan
 - 403(b) pre-tax contribution - 07739002
 - 403(b) post-tax (Roth) – 07739102
- By Phone: Call the Enrollment Center at (888) 569-7055 between 8:30 a.m. and 8:00 p.m. (ET). If you are a new employee, reference Group ID 07739002.
- In Person: Contact your local AIG financial advisors. Contact information is available on the Important Contact Information page.



IMPORTANT CONTACT INFORMATION

Medical

Anthem

(855) 641-4862

www.anthem.com/shbp

UnitedHealthcare

(888) 364-6352

www.whyuhc.com/shbp

Sharecare

(888) 616-6411

www.bewellshbp.com

CVS Caremark

(844) 345-3241

<http://info.caremark.com/shbp>

SHBP Eligibility

(800) 610-1863

www.dch.georgia.gov/shbp

www.myshbpga.adp.com

TRICARE Supplement

(866) 637-9911

https://info.selmanco.com/ga_shbp

Dental

MetLife

(800) 942-0854

www.metlife.com/dental

Vision

MetLife

(855) 638-3931

www.metlife.com/vision

Flexible Spending Accounts

Medcom

(800) 523-7542

www.medcombenefits.com

Term Life

Prudential

(800) 944-8786

www.prudential.com

Universal Life

Chubb

(855) 241-9891

Email: claims@gotoservice.chubb.com

Short and Long Term Disability

Prudential

(800) 842-1718

www.prudential.com

Critical Illness

MetLife

(800) 438-6388

www.mybenefits.metlife.com

Accident

MetLife

(800) 438-6388

www.mybenefits.metlife.com

Legal Plan

ARAG

(800) 247-4184

www.araglegal.com

ID Theft

Equifax ID Watchdog

(866) 513-1518

www.idwatchdog.com

Employee Assistance Program

Sterling Group Psychiatry

(229) 891-9443

Appts: Monday - Thursday: 9AM - 5PM

Guidance Resources (24/7)

(800) 311-4327

guidanceresources.com (ID: GEN311)

GA Public Education EAP (24/7)

(866) 279-5177

eaphelpink.com (Code: GADOE)

Air Ambulance

Global Medical Response

(800) 793-0010

membership@airmednetwork.com

airmedcarenetwork.com

Retirement Plans

- **Teacher's Retirement (TRS)**

www.trsga.com • (800) 352-0650

- **PSERS**

www.ers.ga.gov • (800) 805-4609

Colquitt County Schools Benefits Office

Penny Kebler

(229) 890-6219

penny.kebler@colquitt.k12.ga.us

Colquitt County Schools Benefits Service Center

(844) 635-0709

Monday - Thursday 8am - 6pm

Friday 8am - 5pm

benefits@colquittcountyschoolsbenefits.com



Commonly Used Healthcare Terms

Carrier – Insurance company providing you with your benefits.

Coinsurance – Percentage of medical bills that patient is responsible for; goes into effect after deductible has been met.

Copay – The per visit charge paid each time you see your doctor.

Deductible – The amount of medical costs you are financially responsible for before coinsurance applies.

Employee Assistance Program (EAP) – Program with services to assist with handling life's problems (stress, mental illness, addiction, workplace issues, etc.)

Explanation of Benefits (EOB) – Received from carrier summarizing charges for care received. It will spell out what was billed, how much your carrier paid, and how much you are responsible for.

In-Network – Providers that have contracted with your carrier. Going in-network will save you money.

Out-of-Network – Providers that have not contracted with your carrier. Going out-of-network will result in reduced coverage, or no coverage at all. Potential balance billing can occur when you go out-of-network.

Out-of-Pocket Maximum – The maximum amount you will pay for medical expenses before your plan will pay 100%.

Primary Care Provider (PCP) – Doctor that you go to first with health issues; they manage your care / keep you healthy.

Participating Dental Provider (PDP) Fee – Amount dentist has agreed to accept as payment for services from carrier.

Premium – Amount deducted from your paycheck to pay your portion of your insurance.

Preventive care – Care obtained to prevent major health issues: annual physicals, mammograms, colonoscopies, etc.

Qualifying Life Event (QLE) – Event (i.e. marriage, birth of child, gain/loss of coverage), that allows you to make changes to coverage during the year within a specific timeframe, typically 31 days from date of event.

Summary Plan Description (SPD) – Overview of provisions of plan, including coverage for specific procedures and applicable legal language.

Plan types

- High Deductible Health Plan (HDHP) – Typically has individual deductible of at least \$1,400. Many qualified HDHP plans do not have copays, and all care is subject to the deductible and coinsurance.
- Health Maintenance Organization (HMO) – Network plans require a PCP to be responsible for care (referrals required for specialist). There is no out-of-network coverage, and HMOs usually have more plan restrictions.
- Health Reimbursement Arrangement (HRA): An employer funded health plan that reimburses employees for qualified medical expenses. Reimbursement dollars received by employees are generally tax free.

Medical Savings Account Types

- Healthcare and Dependent Care Flexible Spending Accounts (FSA) – Accounts in which pre-tax income is put aside to pay for IRS-qualified medical / dependent care expenses. The FSA is “use it or lose it”: funds must be used by end of plan year or be forfeited.



Definition of Dependent

- Legally married spouse
- Natural or legally adopted child(ren) or stepchild(ren), under age 26
- Child(ren) due to Legal Guardianship
- Natural or legally adopted child(ren) or stepchild(ren) 26 or older who are physically or mentally disabled prior to age 26, and who are primarily dependent on the enrolled member for support



This guide is a general summary of your benefit options. For specific details, you may refer to each plan's Certificates Summary Plan Description (SPD). SPDs for health can be found on the State Health Benefit Plan (SHBP) website at www.myshbpga.adp.com. All other SPDs can be found at www.colquittcountyschoolsbenefits.com. Every effort has been made to ensure that this document accurately represents the benefits being offered. However, if there are any discrepancies between the terms in this document and the terms in the SPD, the SPD will prevail.