

Employee Benefits New Hire Guide



Coffee
COUNTY SCHOOLS

**Benefits for the
2026 Plan Year**


**benefits
service center**



For information and enrollment, access <https://coffeebenefits.org/> or
call the Coffee County Schools Benefits Service Center at (833) 763-3335.

Benefits Service Center - Your Benefits Resource

WE'RE THERE WHEN YOU NEED US MOST.

Coffee County Schools is pleased to partner with the Benefits Service Center as an extension of your Payroll and Benefits Department.

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

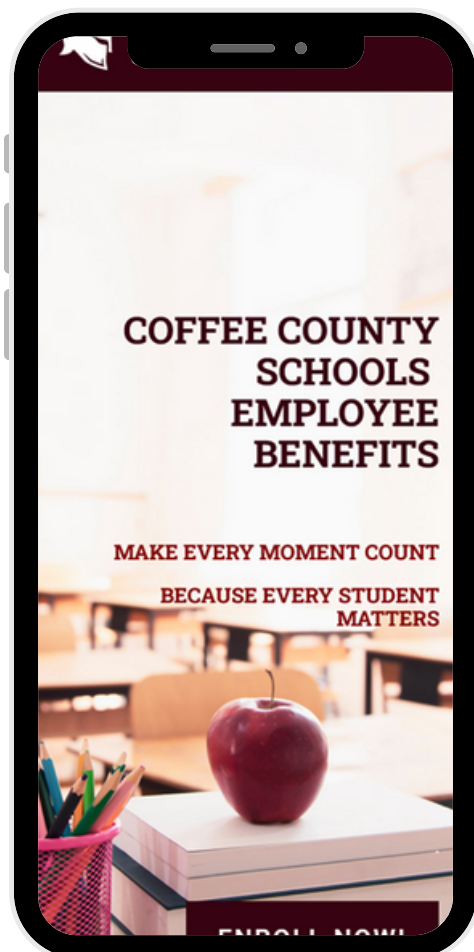
Connect with the Benefits Service Center

Phone: (833) 763-3335

Email: support@coffeebenefits.org

Monday - Thursday: 8am - 6pm EST

Friday: 8am - 5pm EST



Assistance with:

- Benefits questions, including general SHBP questions
- Enrollment
- Finding a physician
- Qualifying Life Events
- Claims assistance
- And more

Benefits Website: www.coffeebenefits.org

As a Coffee County Schools employee, you have access to a comprehensive benefits package designed to support you and your family. Access www.coffeebenefits.org for details regarding all of your district benefits.

This guide provides a brief overview of your Coffee County Schools benefits and the enrollment process. We encourage you to review this booklet carefully prior to completing your elections. Benefit plan documents contain complete plan details and can be requested through the Benefits Service Center or located on the benefits website: <https://coffeebenefits.org/>.

Our extensive benefits package provides financial protection and peace of mind for you and your family. Coffee County Schools provides a significant financial contribution towards your State Health Benefit Plan (SHBP) premiums. For the plans in which you have a contribution, your contribution will be payroll deducted.

Your benefit elections are valid for the entire 2026 plan year unless you have a qualifying life event, such as marriage, divorce, birth of a child, etc. (supporting documentation required).

Understanding Retirement and Social Security Benefits

As a school system employee, it's important to know that you are contributing to Social Security, and those taxes are being withheld from your paycheck. This means you are earning credits toward federal retirement, disability, or survivor benefits under Title II of the Social Security Act. To qualify for these benefits, most people need 40 credits (roughly 10 years of work). You are also enrolled in a pension/retirement plan: either TRS or PSERS. If you're unsure of your status, review your paycheck or reach out to your Human Resources department for more information. You can find more information about the retirement plans here:

- TRS: <https://www.trsga.com/>
- PSERS: <https://www.ers.ga.gov/public-school-employees-retirement-system>

Details regarding your 2026 benefits are available at www.coffeebenefits.org.

Questions? Email support@coffeebenefits.org or call **(833) 763-3335**.




**benefits
service center**

How to Enroll

Voluntary Benefits - Online or By Phone

Enrollment Online

Step 1: Visit <https://coffeebenefits.org/>, review the plan options, and then click “Enroll Now!”.

Step 2: Click on “Get Started Now” to begin. You will be prompted to enter your email address on file, the last four digits of your Social Security Number, and your Date of Birth. The system will identify you by these credentials and allow you to create a password.

Step 3: Once you have logged in, 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 Coffee County Schools Benefits Service Center at **(833) 763-3335** to complete your voluntary benefits enrollment by phone. The Benefits Specialist will confirm your personal information, review your plan options, and complete your elections for 2026.

For both online and phone enrollment, you will receive a Confirmation Statement via your email address on file 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” for new users. Employees may also enroll by calling **(800) 610-1863**.
2. If you are covering a new dependent(s), ADP will provide instructions for submitting required documentation for the added dependents. Be sure to provide documentation in the format required by the deadline provided by ADP. Your dependents will not have coverage until the documentation is received and approved.

Note: If you have difficulty completing your enrollment, please contact the Coffee County Schools Benefits Service Center at (833) 763-3335, Monday – Thursday from 8am to 6pm and Friday from 8am to 5pm EST. You can also email support@coffeebenefits.org.

How to Reset Your SHBP Password

- **Step 1:** Go to www.myshbpga.adp.com and click “Need help signing in?”.
- **Step 2:** Enter the requested demographic information.
- **Step 3:** Follow the instructions to answer security questions. Please 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 Coffee 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

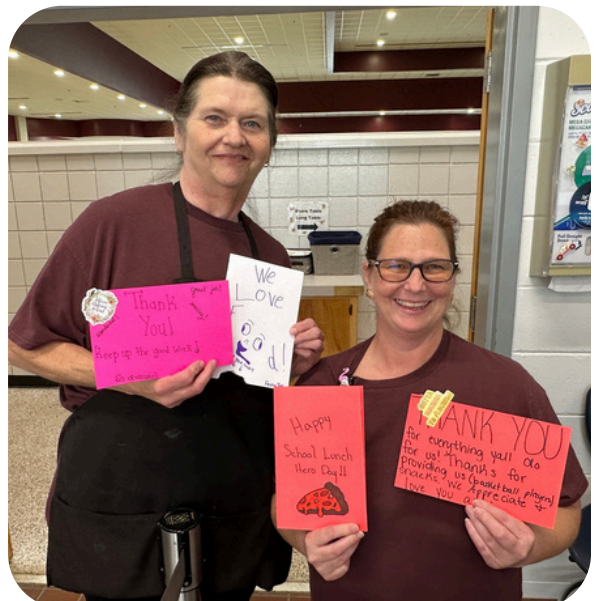
If you have a qualifying life event, please contact the Benefits Service Center and SHBP to complete your new elections and update your life insurance beneficiary(ies). You must also provide the supporting documentation to the Benefits Service Center and SHBP within 31 days of the change. If you do not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

Dependent Children

Children are eligible dependents for voluntary benefits to age 26, regardless of student status.

Dependent Spouses Who Are Also District Employees

Reminder: If you and your spouse are both district employees, duplicate coverage is prohibited. During your enrollment, please update your dependent record if your spouse is also a district employee.



Medical Coverage

State Health Benefit Plan (SHBP)

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

SHBP Employer-Contribution

The district funds a significant portion of your 2026 health insurance premiums: **\$1,885 per month / \$22,620 per year**. This financial contribution allows you to receive quality medical plan coverage at a competitive cost.

Medical Plan Overview

Preventive care is covered at 100% for all plan options.

Anthem	
HRA Gold HRA Silver HRA Bronze	The Gold, Silver, and Bronze HRA plans have different HRA credits, deductibles, coinsurance levels, and out-of-pocket limits. 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 SHBP-funded Health Reimbursement Account (HRA) to provide first-dollar medical and pharmacy expenses. Unused HRA credits roll over to future years.
HMO	This plan has the lowest deductible and provides in-network coverage only. Some services, such as office visits, emergency visits, 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	
HMO	Same benefits as the Anthem HMO, but utilizes the UnitedHealthcare provider network.
High Deductible Health Plan (HDHP)	Lowest premiums, highest deductible and out-of-pocket maximum. All services including pharmacy are subject to deductible and coinsurance. A Health Savings Account (HSA) is available with this plan.

Pharmacy Information

- CVS Caremark administers the pharmacy benefits for HRA, HMO, and HDHP members.
- You are not limited to CVS pharmacies for your retail prescription needs. The CVS Caremark pharmacy network is extensive, and participating pharmacy information is available (<https://info.caremark.com/oe/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 the Coronary Artery Disease (CAD), Diabetes, Asthma Disease Management Programs and/or Medication for Addiction Treatment Programs.

Online Resources

Access the plan websites to locate participating providers, and find health and wellness tools, plan details, and much more.

Anthem

www.anthem.com/shbp

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

United Healthcare

www.whyuhc.com/shbp

Select "Search for network providers" in the Health plans drop down. Then select your plan and follow search instructions.

Telemedicine Virtual Visits

The medical plans include a telemedicine benefit that allows you to speak to a participating doctor from home or work through your mobile device, tablet, or computer. You must use in-network providers for coverage to apply. HMO members pay a copay and HRA members pay coinsurance for virtual visits. 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 Online (Anthem) or the Virtual Visits mobile app (UHC) today!

Dependent Documentation

- If you are covering a new dependent(s), ADP will provide instructions for submitting required documentation for the added dependents. Be sure to provide documentation in the format required by the deadline provided by ADP. Your dependents will not have coverage until the documentation is received and approved.
- 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 & UHC	UHC	
	Gold		Silver		Bronze		HMO	HDHP	
	In	Out	In	Out	In	Out	In-Network Only	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 Out-of-Pocket									
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	Coins after ded		Coins after ded		Coins after ded		\$200 copay	Coins after ded	
Urgent Care	Coins after ded		Coins after ded		Coins after ded		\$35 copay	Coins after ded	
PCP Visit	Coins after ded		Coins after ded		Coins after ded		\$35 copay	Coins after ded	
Specialist Visit	Coins after ded		Coins after ded		Coins after ded		\$45 copay	Coins after ded	
Preventive Care	100%	None	100%	None	100%	None	100%	100%	None
Retail Pharmacy									
Tier 1	15%, Min \$5, Max \$10		15%, Min \$5, Max \$10		15%, Min \$5, Max \$10		\$5 copay	Coinsurance after deductible	
Tier 2	25%, Min \$55, Max \$85		25%, Min \$55, Max \$85		25%, Min \$55, Max \$85		\$55 copay	Coinsurance after deductible	
Tier 3	25%, Min \$85, Max \$130		25%, Min \$85, Max \$130		25%, Min \$85, Max \$130		\$95 copay	Coinsurance after deductible	
Mail Order Pharmacy									
Tier 1	15%, Min \$12.50, Max \$25		15%, Min \$12.50, Max \$25		15%, Min \$12.50, Max \$25		\$12.50 copay	Coinsurance after deductible	
Tier 2	25%, Min \$137.50, Max \$212.50		25%, Min \$137.50, Max \$212.50		25%, Min \$137.50, Max \$212.50		\$137.50 copay	Coinsurance after deductible	
Tier 3	25%, Min \$212.50, Max \$325		25%, Min \$212.50, Max \$325		25%, Min \$212.50, Max \$325		\$237.50 copay	Coinsurance after deductible	

Monthly Premiums	Anthem HRA			Anthem	UHC	UHC
	Gold HRA	Silver HRA	Bronze HRA	HMO	HMO	HDHP
You	\$213.71	\$146.11	\$92.12	\$177.21	\$217.19	\$81.11
You + Child(ren)	\$390.68	\$275.76	\$183.97	\$328.63	\$396.59	\$165.26
You + Spouse	\$531.82	\$389.86	\$276.48	\$455.17	\$539.13	\$253.36
You + Family	\$708.79	\$519.51	\$368.33	\$606.59	\$718.53	\$337.51

Wellness Program



Sharecare, your wellness program vendor, provides comprehensive well-being and incentive programs for SHBP members. As you complete wellness activities, you earn incentive points to help you pay for 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 (a family total of 960) when you complete the activities between January 1 and November 30. Enrolled members choose to redeem well-being incentive points in the Sharecare Redemption Center for either 1) 480 incentive points to apply towards eligible medical / pharmacy expenses or 2) a \$150 Sharecare Rewards Visa Prepaid Card.

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

You	\$60.50
You + Spouse / Child(ren)	\$119.50
You + Family	\$160.50

For information about eligibility and benefits, contact (866) 637-9911 or visit <https://shbp.georgia.gov/tricare-supplement-plan>.



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 information
- Not available through payroll deduction



Dental Plans



Coffee County Schools offers two dental plan options through Unum: The Standard Plan with a lower annual maximum, and the Enhanced Plan with a higher annual maximum benefit and orthodontia coverage. Although we encourage all dental plan members to obtain care from in-network Unum providers to avoid balance billing, it's especially important for Standard Plan members to visit participating in-network dentists to avoid higher out-of-pocket costs.

The **Standard Plan** offers pre-determined fees for dental services with specific in-network providers to help you get quality care at better prices. Out-of-network providers may be used, but they may charge much higher rates for the services than the fees that Unum has negotiated with in-network providers. If you elect the Standard Plan and visit an out-of-network provider, you will be required to pay the difference between the actual charge and the approved in-network fee for that service in addition to any applicable coinsurance.

The **Enhanced Plan** pays out-of-network claims based on reasonable and customary charges. Under this plan, your out-of-pocket expenses are lower for out-of-network providers. This option also has a higher maximum benefit and includes coverage for orthodontia for children.

To locate in-network providers, access www.unum.com/employees/benefits/dental-insurance, click "Find a Dentist" and follow the search instructions.

Dental Monthly Premiums	Standard Plan	Enhanced Plan
Employee Only	\$19.65	\$33.63
Employee + 1	\$36.20	\$117.59
Family	\$55.58	\$129.85

Dental Summary of Benefits	Standard Plan	Enhanced Plan
Calendar Year Deductible	\$50 Individual / \$150 Family	\$50 Individual / \$150 Family
Calendar Year Maximum	\$750	\$1,000
Orthodontia Lifetime Maximum	N/A	\$1,000
Type A Preventive Services (<i>Preventive</i>)	100%	100%
Type B Services (<i>Basic Restorative</i>)	80% after deductible	80% after deductible
Type C Services (<i>Major Restorative</i>)	50% after deductible	50% after deductible
Orthodontia Services (<i>Children below age 19</i>)	Not Covered	50% after deductible

Unum Carryover Benefit *

Plan	Base Annual Maximum	Threshold Limit	Carryover Amount	Carryover Maximum	Total Potential Annual Maximum
Standard Plan	\$750	\$300	\$150	\$500	\$1,250
Enhanced Plan	\$1,000	\$500	\$250	\$1,000	\$2,000

* During each benefit year, if a member receives at least one cleaning plus one regular exam and their total dental claims are below the threshold limit, a portion of the annual maximum will automatically carry over to the next year.



Vision Plans



Coffee County Schools offers two vision plans: The Standard Plan which provides a \$130 contact lens allowance and a \$200 frame allowance, and the Enhanced Plan which provides \$200 allowance for both contact lenses and frames.

With the VSP vision plans, you may visit any vision provider. However, to maximize your vision benefit, it is highly recommended that you access participating providers by visiting www.vsp.com/eye-doctor. When you see a participating VSP vision provider, you will have a higher benefit and lower out-of-pocket costs, and you'll 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, and the benefit is reduced.

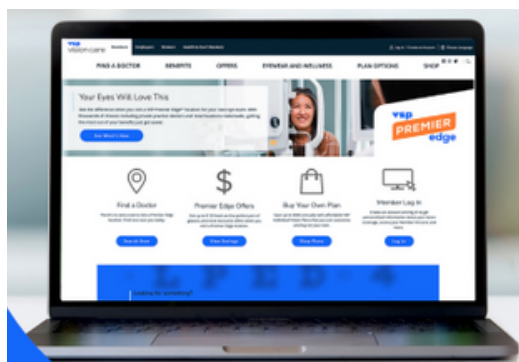
The VSP vision plans provide coverage for exams, frames, and lenses (either eyeglasses or contacts per frequency). If you see an in-network provider, you pay a copay for your eye exam and lenses, and the plan pays an allowance of either \$130 or \$200 for contact lenses and \$200 for frames. Additional copays apply for eyeglass lens options.

VSP Lightcare is a unique benefit that's included with your vision plan. It provides 100% coverage up to the frame allowance for ready-made non-prescription sunglasses or ready-made non-prescription blue light filtering glasses instead of prescription glasses or contacts.

Frequency Limitations: The vision plan has frequency limitations. The exam benefit and contact lens benefit are once every calendar year. Frames are allowed once every other calendar year on the Standard Plan and once every calendar year on the Enhanced Plan.

Vision Summary of Benefits	Standard Plan	Enhanced Plan
Eye Exam	\$10 copay	\$10 copay
Retinal Imaging	\$20 copay	\$20 copay
Lenses (Single, Bifocal, Trifocal, Lenticular)	\$20 copay	\$20 copay
Contacts		
Fit and Follow-up	Up to \$60 copay	Up to \$60 copay
Elective Lenses	\$130 allowance	\$200 allowance
Medically Necessary	Covered in full after copay	Covered in full after copay
Frames	\$200 allowance (every other calendar year)	\$200 allowance (every calendar year)

Vision Monthly Premiums	Standard Plan	Enhanced Plan
Employee Only	\$8.41	\$13.15
Employee + 1	\$12.21	\$19.08
Family	\$21.88	\$34.19



It's Easy to Create an Account:

1. Visit vsp.com.
2. Click on **Create an Account** at the top-right corner of the site.
3. Fill in all of the required fields to create your account.
4. Click on **Create an Account** to submit the form. You will receive a confirmation email.

Not online?
Member services can help create an account. Call **800.877.7195**.

VSP Vision Care App

Scan the QR code below to download the VSP Vision Care App from the **Apple App** or **Google Play Stores**. Get instant access to your benefit coverage, Member ID Card, Exclusive Member Extras, and more.



FLEXIBLE SPENDING ACCOUNTS (FSA)



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 dependent day care expenses. Consolidated Admin Services is the administrator for your 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 can contribute **up to \$3,400** during 2026 into a Healthcare FSA (minimum annual contribution is \$300). Eligible Healthcare FSA expenses include deductibles, copays, coinsurance, prescription drugs, over-the-counter drugs and supplies (no prescription required), dental, and vision expenses.

Dependent Care Flexible Spending Account

The Dependent Care FSA enables you to pay for certain dependent care expenses using pre-tax dollars. Single individuals and married couples filing jointly may contribute **up to \$7,500** in a Dependent Care FSA for 2026. For married individuals filing separate returns, the **limit is \$3,750**. Eligible dependent care expenses include, but are not limited to, day care and before and after-school care for children up to age 13 and certain adult day care expenses for incapacitated adult dependents.

Child Daycare:

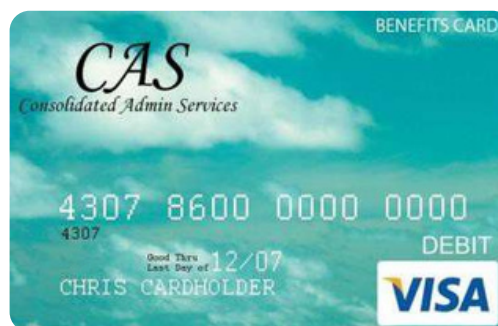
- Includes daycare facilities, babysitters inside or outside the household, before and after-school care, and more
- For children, step-children, and children eligible for a tax exemption on your federal tax return

Adult Daycare:

- Disabled children age 13+
- Spouses physically or mentally unable to care for him/herself
- Any adult you can claim as a dependent on your tax return who is physically or mentally unable to care for him/herself and lives in your home

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. As a reminder, you only receive new debit cards upon card expiration.



Use It or Lose It

Claims must be incurred by December 31, 2026 to be eligible for reimbursement for the 2026 plan year. The IRS requires that any unused money in your account at the end of the plan year be retained by your employer and forfeited by the employee. However, the IRS allows **Healthcare FSA** plan members to roll over up to \$680 of unused funds for future use. The \$680 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.

Plan Year

The FSA plan year for 2026 is January 1 through December 31.

Important Separation Information

Please note if you terminate employment or retire, eligible FSA claims must be incurred prior to your benefits end date, regardless of your FSA balance.



Voluntary Term Life & AD&D Insurance



Voluntary Life and AD&D Insurance

The Unum voluntary life insurance plan includes higher policy options for employee and spouse coverage. You may elect coverage for yourself, your spouse, and your children through convenient payroll deduction. The voluntary life plan also includes AD&D coverage. Please refer to the Certificate of Coverage for complete details.

Voluntary Life and AD&D Insurance Options	
Employee	<ul style="list-style-type: none"> \$10,000 increments up to \$500,000 Not to exceed 5 times your annual earnings
Spouse <i>Premiums based on employee's age</i>	<ul style="list-style-type: none"> \$5,000 increments to \$250,000 Not to exceed 100% of employee amount
Child(ren)	<ul style="list-style-type: none"> \$10,000 or \$20,000 Live birth to 6 months: \$1,000

Beneficiary Information: Your beneficiary is the person(s) who will receive your life insurance benefits in the event of your death. Your beneficiary can be one person or multiple people, charitable institutions, or your estate. Once named, your beneficiary remains on file until you make a change. If your family situation changes, please review your beneficiary on file and make updates if needed. **You are required to designate your beneficiary during your enrollment, but you can change it at any time.**

Special Enrollment Opportunity as a New Employee: Now is your opportunity to elect voluntary life insurance with no health questions. If you waive coverage as a new hire and elect coverage at later, health questions will apply. Even if you elect the minimum amount of coverage as a new hire, you have the opportunity to increase up to the Guarantee Issue amounts at future Open Enrollments with no health questions. The Guarantee Issue amounts are below.

- Employee Guarantee Issue: Up to \$200,000
- Spouse Guarantee Issue: Up to \$50,000
- Child(ren) Guarantee Issue: \$10,000 or \$20,000

Should you elect an amount that exceeds the Guarantee Issue amount, an Evidence of Insurability (EOI) will be required. The EOI Form is available on the benefits website. You will not be deducted for the pending coverage amount unless you are approved by Unum.

Employee and Spouse Voluntary Life and AD&D Monthly Premiums						
Age	\$10,000	\$50,000	\$100,000	\$150,000	\$250,000	\$350,000
25	\$0.95	\$4.75	\$9.50	\$14.25	\$23.75	\$33.25
35	\$1.30	\$6.50	\$13.00	\$19.50	\$32.50	\$45.50
45	\$2.60	\$13.00	\$26.00	\$39.00	\$65.00	\$91.00
55	\$5.62	\$28.10	\$56.20	\$84.30	\$140.50	\$196.70
65	\$13.33	\$66.65	\$133.30	\$199.95	\$333.25	\$466.55

*Spouse rates are based on the age of your spouse.
There are no benefit reductions due to age.*

Child Voluntary Life and AD&D Monthly Premiums		
	\$10,000	\$20,000
To Age 26	\$3.20	\$6.40

Continuation Options at Employment Separation: You have the opportunity to continue your life insurance benefit should you separate employment with Coffee County Schools if certain conditions are met and if application and premium payment are made within 31 days of your coverage end date. You may either port your policy to an individual term life plan or convert your policy to a whole life plan upon separation. The portability and conversion rates are different from the active employee rates.



Whole Life Insurance

Coffee County Schools offers Whole Life insurance plan through Unum. Whole Life insurance addresses varying employee needs for permanent life insurance and peace of mind for a lifetime, since you can keep Whole Life Insurance as long as you want. Once you've bought coverage, your cost won't increase as you age. The benefit amount stays the same as well and doesn't decrease as you get older. That means you get protection during your working years and into retirement. Whole Life Insurance also builds cash value at a guaranteed rate. You can borrow from that cash value, or you can buy a smaller, paid-up policy with no more premiums due.

Policy Features

- Whole life insurance provides valuable protection in addition to any term life insurance you have.
- It's more affordable when you're younger. Once you've bought coverage, your cost doesn't change.
- The premiums are conveniently deducted from your paycheck. If you leave employment, you can keep this coverage and be direct billed.
- Whole life insurance provides valuable protection in addition to any term life insurance you might have.
- The policy includes accelerated death benefit: You may request up to 100% of the death benefit to a maximum of \$150,000 if you're diagnosed with a terminal illness and expected to live for 12 months or less.

Guarantee Issue Amounts

The Guarantee Issue amounts (no health questions) are as follows: \$100,000 for employee coverage and \$30,000 for spouse coverage.

Coverage Options

Employee	You can purchase between \$10,000 and \$250,000 of coverage for yourself in increments of \$10,000.
Spouse (ages 15-75)	You can purchase between \$10,000 and \$50,000 of coverage for spouse in increments of \$10,000.
Children	You can purchase a benefit amount of \$10,000 or \$20,000 of coverage for each child.

Monthly Premiums

Employee Whole Life Monthly Premium Examples - Non-Tobacco			
Age	\$10,000	\$20,000	\$50,000
25	\$6.34	\$12.68	\$31.70
35	\$7.58	\$15.16	\$37.90
45	\$11.25	\$22.50	\$56.25
55	\$19.97	\$39.94	\$99.85

Spouse Whole Life Monthly Premium Examples - Non-Tobacco			
Age	\$10,000	\$20,000	\$50,000
25	\$8.05	\$16.10	\$40.25
35	\$9.21	\$18.42	\$46.05
45	\$13.65	\$27.30	\$68.25
55	\$25.64	\$51.28	\$128.20

Child(ren) Whole Life Monthly Premium Examples - Non-Tobacco		
Age	\$10,000	\$20,000
25	\$5.00	\$10.00



Disability Insurance



Disability coverage provides an income replacement benefit in the event you are unable to work due to an illness or accident. Coffee County Schools offers Short Term Disability (STD) and Long Term Disability (LTD) plans insured by Unum.

You may elect STD, LTD, or both, depending on your specific needs. Short Term Disability provides an income replacement benefit for a relatively short period of time (up to 11 weeks). If you remain disabled and unable to work upon Short Term Disability exhaustion, Long Term Disability would begin on the 91st day of disability and continue to age 65 or Social Security Normal Retirement Age should you remain disabled.

You may elect Short Term Disability and/or Long Term Disability at this time as a new employee with no medical questions. If you waive this coverage as a new hire and elect at future Open Enrollment, health questions apply.

Disability Benefit Summary			
	Short Term Disability		Long Term Disability
Benefit Amount	60% of weekly earnings		60% of monthly earnings
Benefit Start Date	Day 15	Day 31	91st day after accident or illness begins
Benefit Duration	Up to 11 weeks	Up to 9 weeks	Social Security Normal Retirement Age
Maximum Benefit	\$1,700 per week		\$8,000 per month

Sample Monthly Premiums

Short Term Disability Monthly Premium Examples \$40,000 Annual Salary		
Age	14-Day Wait	30-Day Wait
25	\$30.46	\$15.78
35	\$28.57	\$14.77
45	\$15.74	\$8.12
55	\$27.65	\$14.31
65	\$41.63	\$21.51

Short Term Disability Monthly Premium Examples \$60,000 Annual Salary		
Age	14-Day Wait	30-Day Wait
25	\$45.69	\$23.68
35	\$42.85	\$22.15
45	\$23.61	\$12.18
55	\$41.47	\$21.46
65	\$62.45	\$32.26

Long Term Disability Monthly Premium Examples		
Age	\$40,000 Annual Salary	\$60,000 Annual Salary
25	\$3.00	\$4.50
35	\$6.67	\$10.00
45	\$16.00	\$24.00
55	\$23.33	\$35.00
65	\$29.00	\$43.50

Sick Leave & Disability Coverage

If desired, you may elect to use sick leave in addition to your disability benefit, for a total payment up to 100% of pre-disability earnings.

Pre-Existing Conditions Exclusion

The disability plans include a pre-existing conditions exclusion. You have a pre-existing condition if you received medical treatment, consultation, or services including prescription drugs in the 3 months preceding your benefits effective date of coverage. Disabilities caused by pre-existing conditions are excluded, but once you have been insured for at least 12 months, the exclusion no longer applies.

Critical Illness



Coffee County Schools offers voluntary Critical Illness coverage, which provides a lump sum benefit in the event of a diagnosis of a covered illness. The benefit is based on the amount of coverage in force, the illness diagnosed, and all other terms and provisions of the policy. This plan is insured by Unum. You may elect coverage for yourself and your spouse. Children are automatically covered at 50% of the employee coverage amount.

Benefit Options

Employees: \$10,000, \$20,000, or \$30,000

Spouses: 50% of the employee amount

- Employees must be enrolled to elect spouse coverage.

Children: 50% of employee coverage for all children (automatic)

Employees may elect up to the maximum amount of coverage for yourself and your spouse with no health questions. There are no age limits on electing coverage for yourself or your spouse.

Covered Diagnoses and Conditions

- End stage renal (kidney) failure
- Heart attack
- Major Organ Failure Requiring Transplant
- Stroke
- Sudden Cardiac Arrest
- Coronary Artery Disease: Major and Minor (limited benefit)
- Invasive Cancer (including all breast cancer)
 - Includes an additional 10% monthly treatment benefit up to 100%
- Non-invasive Cancer (25% benefit)
- Skin cancer (\$500)
- Benign brain tumor
- Coma
- Loss of hearing, sight, speech
- Occupational PTSD
- Permanent Paralysis
- Benefits covered at 25%
 - Bone marrow/stem cell transplant
 - Infectious Diseases
 - Pulmonary Embolism
 - Transient Ischemic Attack (TIA)
- Progressive Diseases
 - Addison’s Disease, ALS, Dementia, Functional Loss, Huntington’s Disease, Lupus, Multiple Sclerosis, Muscular Dystrophy, Myasthenia Gravis, Parkinson’s Disease, Systemic Sclerosis
- Critical Illnesses for Children
 - Cerebral Palsy, cleft lip or palate, congenital heart disease, Cystic Fibrosis, Down Syndrome, le Cell Anemia, Spina Bifida, Type 1 Diabetes

Wellness Benefit Included

To encourage healthy habits and preventive care, the plan includes a wellness screening benefit in the amount of **\$50** per person per calendar year. Screenings include but are not limited to:

- Cholesterol and diabetes screenings
- Cancer screenings
- Cardiovascular function screenings
- Imaging studies
- Annual examinations by a physician
- Immunizations
- Onsite State Health Benefit Plan screenings

Please refer to the policy for a complete listing of eligible screenings.

Building Benefit

This plan includes a building benefit feature which provides additional benefits as you retain coverage with Unum. For example, you receive an additional 5% benefit once you have had the coverage for 13 months. Please refer to the Benefit Summary for details.

Portability Upon Employment Separation

This plan is portable if you separate employment with the district by remitting premiums directly to Unum.

Employee Critical Illness Monthly Premiums			
Age	\$10,000	\$20,000	\$30,000
25	\$4.20	\$8.40	\$12.60
35	\$6.60	\$13.20	\$19.80
45	\$10.80	\$21.60	\$32.40
55	\$18.00	\$36.00	\$54.00
65	\$37.60	\$75.20	\$112.80

Spouse Critical Illness Monthly Premiums			
Age	\$5,000	\$10,000	\$15,000
25	\$2.65	\$5.30	\$7.95
35	\$3.85	\$7.70	\$11.55
45	\$6.00	\$12.00	\$18.00
55	\$9.60	\$19.20	\$28.80
65	\$19.40	\$38.80	\$58.20

Accident



Accident insurance is designed to help covered employees meet the out-of-pocket expenses and extra bills that can follow an accidental injury, whether minor or catastrophic. Indemnity lump sum benefits are paid directly to the employee based on the amount of coverage listed in the schedule of benefits. The Unum accident plan is guarantee issue, so **no health questions are required**.

Accident Summary of Benefits	
Hospital Care	
Per Admission Benefit	\$1,500
Daily Stay Benefit	\$350 / day up to 365 days
Surgery	\$1,500 (abdominal, thoracic, or cranial)
Medical Care Benefits (Non-hospital)	
Doctor visit	\$250
Emergency Room / Urgent care	\$250
Follow-up treatment	\$125 (max of 6)
Physical / Occupational Therapy	\$75 (max of 15)
Medical equipment	\$50 to \$200
Outpatient Surgery	\$300
Medical Imaging	\$100 to \$300
Ambulance: Air Ground	\$1,500 \$500
Injury-Based Benefits	
Burns	\$750 to \$15,000
Concussions	\$200
Lacerations	\$65 to \$800
Dislocations	\$200 to \$4,125
Fractures	\$275 to \$5,500
Accident Death & Dismemberment (AD&D)	
Employee	\$75,000
Spouse	\$37,500
Child(ren)	\$18,750
<i>See schedule for Dismemberment Details</i>	
Organized Sports Benefit	
Covers accidents as a result of an organized sporting activity	Pays an additional 25% for injury and treatment categories

Portability Upon Employment Separation

This plan is portable if you separate employment with the district by remitting premiums directly to Unum.

Accident Monthly Premiums	
Employee Only	\$9.50
Employee + Spouse	\$16.69
Employee + Child(ren)	\$21.87
Family	\$29.06

Wellness Benefit Included

The accident plan includes a wellness screening benefit in the amount of **\$50** per person per calendar year.

Eligible screenings include preventive tests as well as onsite State Health Benefit Plan biometric screenings. Please refer to the policy document for a complete list of screenings eligible for the wellness benefit.

Hospital Indemnity



Hospital Indemnity insurance is designed to help provide financial protection for covered individuals by paying a benefit due to a covered hospital visit. Employees can use the benefit to pay for out-of-pocket expenses and extra bills that can occur. Lump sum benefits are paid directly to the employee based on the amount of coverage listed in the schedule of benefits. There are no pre-existing conditions, and pregnancy is covered like any other medical condition.

Hospital Indemnity Schedule of Benefits	
Hospital Admission	\$1,000 up to 4 days / year
ICU Admission (in addition to Hospital Admission)	\$1,000 up to 4 days / year
Hospital Daily Stay	\$100 / day up to 30 days
ICU Daily Stay (in addition to Hospital Daily Stay)	\$100 / day up to 15 days

Wellness Benefit Included

To encourage health habits and preventive care, the plan includes a wellness screening benefit in the amount of **\$50** per person per calendar year. Screenings include but are not limited to:

- Annual exams by a physician, including physicals, well child visits, sports physicals, and dental and vision exams
- Screenings for cancer, including colonoscopy, mammogram, and more
- Screenings for cholesterol and diabetes
- Cardiovascular function screenings
- Imaging studies, including chest x-ray and more
- Immunizations including flu, tetanus, MMR, HPV, and more

Please refer to the policy for a complete listing of eligible screenings.



Portability Upon Employment Separation

This plan is portable if you separate employment with the district by remitting premiums directly to Unum.

Hospital Indemnity Monthly Premiums	
Employee Only	\$19.06
Employee + Spouse	\$33.85
Employee + Child(ren)	\$28.43
Family	\$43.22

The Hospital Indemnity benefit is payable for planned and unplanned hospital admissions. It covers scheduled surgeries, deliveries, emergency admissions, and admissions.

Identity Theft



Coffee County Schools is pleased to offer an Identity Theft protection plan through ID Watchdog from Equifax. Every 2 seconds, thieves steal another identity. Your identity includes more than your Social Security Number and bank accounts. Protect yourself and your family with award-winning credit and identity monitoring including up to \$5 million in ID Theft Insurance. ID Theft Insurance helps pay certain out-of-pocket expenses in the event you're a victim of identity theft.

ID Watchdog from Equifax 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.

Trained counselors walk you through the process of remediating any damage. They help you write letters to creditors and debt collectors, place a freeze on your credit report to prevent an identity thief from opening new accounts in your name, and guide you through the restoration process.

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

- 100% Fully Managed Resolution up to \$5M
- Stolen Funds Reimbursement
- 401(k) and HSA Reimbursement
- Deceased Dependent Protection
- Credit Freeze Assistance
- Credit Report Disputes
- Phone, SMS, URL blocking
- Data Breach Notifications
- Subprime Loan Block
- Integrated Fraud Alerts
- Customizable Alert Options
- Monitoring for financial, credit, loan, and social accounts
- Lost Wallet Pprotection
- Digital Identity and Device Protection Tools
- Identity Restoration
- IP Address Monitoring
- And more

Coverage Level	ID Theft Monthly Premiums
Employee Only	\$8.50
Employee + Family	\$14.90

Additional Plan Benefits include:

- Mobile app: Keep a pulse on your personal and financial information by accessing key plan features right from your mobile device
- 24/7/365 Customer Care: Reach an in-house U.S.-based customer care advocate whenever you need help.



Retirement

Teachers 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 21.91% of earnings. Employees are vested after 10 years of service.

Public Schools Employee 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 \$17.00 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 Plans

U.S. Omni & TSACG Compliance Services (OMNI/TSACG) is your Third Party Administrator for the Supplemental Retirement plans, and their service platform is designed to improve employee engagement in the 403(b) and 457(b) plans. In addition to the standard administration services, OMNI/TSACG serves as an educational resource providing a variety of tools to assist in learning more about retirement savings and managing personal finance. Access their website at <https://www.tsacg.com>.



Employee Assistance Program (EAP)



We've all experienced some type of personal problem, concern, or emotional crisis at one time or another. Unum's EAP + Work / Life program gives you access to counselors and services for help with personal, family, and work issues.

With your Employee Assistance Program and Work / Life Balance services, confidential assistance with **up to 3 face-to-face counseling sessions per issue per year** are available. You also have **telephonic and online resources** available for a variety of issues.

Unum's Employee Assistance Program is designed to help employees lead happier and more productive lives at home and at work. When you have issues arise, you can work with Licensed Counselors to define the problem and obtain appropriate assistance. The Licensed Professional Counselor will either address concerns during a few initial sessions or refer you to other appropriate counselors or community resources for long-term help.

Through the Employee Assistance Program, you can get **help with personal, family, and work issues**, such as:

- Stress
- Depression
- Anxiety
- Relationship Issues
- Divorce
- Job stress / work conflicts
- Family and parenting problems
- Anger
- Grief and loss
- Addiction
- Eating Disorders
- Mental Illness

Who is Covered?

Unum's EAP services are available to you, your spouse, your children, and your parents and parents-in-law.

Plan Benefit Features

- Up to **3 in-person face-to-face or telephonic emotional or work-life counseling sessions per issue per year**
- If care beyond 3 visits is needed, the member receives a referral for ongoing service at a discounted rate.
- Telephonic legal and financial counseling
- Work-life support

Always By Your Side

Help is easy to access:

Online / phone support: Unlimited, confidential, 24/7

(800) 854-1446 | www.unum.com/lifebalance

In-person: You can get up to **3 face-to-face visits** with a Licensed Professional Counselor at no cost to you. Your counselor may refer you to resources in your community for ongoing support.



Work / Life Balance Services



Employees may reach out to Unum's Work / Life Specialists for help with balancing the demands of home, family, and the workplace. The Specialists can answer questions, as well as put you in touch with outside resources.

Work / Life Specialists Can Help With:

Childcare Services

- Childcare centers
- Babysitter tips
- Family-run child care homes
- Community resources
- Nanny agencies
- Preschools

Eldercare Services

- Assisted living facilities
- Nursing homes
- Independent living options
- Adult day-care services
- Geriatric care managers
- Services for adults with disabilities

Financial Services

- Debt management solutions
- Budgeting assistance
- Credit report assistance

Legal Services

- Personal / family and elder law
- Real estate
- Identity Theft

Additional Features

- 24/7 access to master's level staff clinicians for information, assessment, short-term problem resolution, and referrals.
- Up to **3 face-to-face counseling sessions**. Sessions are conducted by a network of qualified EAP consultants.
- In lieu of face-to-face sessions, HIPAA compliant video counseling sessions are available for those in rural communities, those with transportation concerns, or those that may prefer the use of technology to receive the service.
- Access to a national network of over 60,000 licensed EAP affiliates. All EAP providers have a master's degree or higher with state licensure.
- Medical Bill Saver service that can help negotiate out-of-pocket medical and dental expenses over \$400.

Always by your side

- Expert support 24/7
- Convenient website
- Short-term help
- Referrals for additional care
- Monthly webinars
- Medical Bill Saver™ — helps you save on medical bills

Help is easy to access

Online and Phone support:
Unlimited, confidential, 24/7

Employee Assistance Program – WorkLife Balance

Toll-free 24/7 access:

- 1-800-854-1446
- www.unum.com/lifebalance

Turn to us when you don't know where to turn.

Commonly Used Healthcare Terms

Carrier - Insurance company insuring 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 typically visit first with health issues; they manage your overall care.

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 \$1,700. Many qualified HDHP plans do not have copays, and all care is subject to the deductible and coinsurance.
- **Health Maintenance Organization (HMO)** – Network plans with coverage for in-network services. There is no out-of-network coverage, and HMOs can 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. However, the IRS allows Healthcare FSA plan members to roll over up to \$680 of unused funds for future use. The \$680 roll over option does not apply to the Dependent Care FSA.



Definition of Dependent

- Legally married spouse
- Naturally or legally adopted child(ren) or stepchild(ren), below 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

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 Plan

(866) 637-9911

<https://shbp.georgia.gov/tricare-supplement-plan>

Peachcare

(877) 427-3224

www.peachcare.org

Dental

Unum

(888) 400-9304

www.unumdentalcare.com

Vision

VSP

(800) 877-7195

www.vsp.com

Flexible Spending Accounts

Consolidated Admin Services (CAS)

(877) 941-5956

www.consolidatedadmin.com

Term Life Insurance

Unum

(800) 445-0402

www.unum.com

Whole Life Insurance

Unum

(800) 445-0402

www.unum.com

Short and Long Term Disability

Unum

(800) 858-6843

www.unum.com

Critical Illness

Unum

(800) 635-5597

www.unum.com

Accident

Unum

(800) 635-5597

www.unum.com

Hospital Indemnity

Unum

(800) 635-5597

www.unum.com

Identity Theft

ID Watchdog from Equifax

(866) 513-1518

www.idwatchdog.com/home

Employee Assistance Program

Unum

(800) 854-1446

www.unum.com/lifebalance

Retirement Plans

Teachers Retirement System of Georgia (TRS)

- www.trsga.com

- (800) 352-0650

Public School Employees Retirement System of Georgia (PSERS)

- www.ers.ga.gov

- (800) 805-4609

Supplemental Retirement Plans

U.S. Omni & TSACG Compliance Services (OMNI/TSACG)

(888) 796-3786

www.tsacg.com

Corebridge (VALIC) - 403(b)

Debbie Smith

(229) 292-1003

debbie.smith3@corebridgefinancial.com

Horace Mann - 457(b)

Kim Sasser | (912) 632-0078

Summer Brigmond | (912) 632-0078

Your OneSource - ROTH 403(b)

Lisa Carter or Jennifer Hayes

(229) 896-3436

Coffee County Schools Benefits Service Center

(833) 763-3335

Monday -Thursday 8am-6pm

Friday 8am - 5pm

support@coffeebenefits.org



This image shows a full page of blank handwriting practice paper. It features 20 evenly spaced, horizontal blue lines running across the entire width of the page. The lines are thin and consistent in color, providing a guide for letter height and placement. There are no margins, text, or other markings on the paper.



This guide is a general summary of your benefit options. For specific details, you may refer to each plan's Certificates or Summary Plan Description (SPD). SPDs for health can be found on the State Health Benefit Plan (SHBP) website at www.dch.georgia.gov/shbp. All other plan documents can be found at www.coffeebenefits.org.

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 of the plan documents, the plan documents will prevail.