



2027


**benefits
service center**

EMPLOYEE BENEFITS ENROLLMENT GUIDE

Benefits for the 2027 Plan Year

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



INTRODUCTION

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 at <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 2027 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>

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

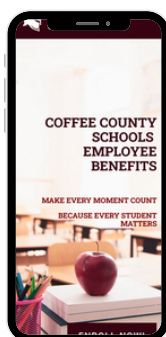
Email: support@coffeebenefits.org

Monday - Thursday: 8am - 6pm EST

Friday: 8am - 5pm EST

Benefits Website

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



Assistance with:

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


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How to Enroll

Voluntary Benefits - Online or By Phone

Enrollment Online

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

Step 2: If you have previously accessed the system, click on “Login” to begin. You will be prompted to enter the email address on file for you and your password. If you cannot remember your password, click on “Forgot your password?” to reset it.

If you have not yet created an account, click on “Click Here to Begin” then “Get Started Now.” You will be prompted to enter your email 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.

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 2027.

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 the SHBP ADP portal at <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 verify identity.
- **Step 4:** Reset password or access system using security code.

Employee Eligibility

Coffee County Schools employees are eligible for benefits on the first of the month following 30 days of employment, and have 30 days to enroll from the date of hire. No enrollment changes to your benefits are allowed during the plan year unless you experience a qualifying life event.

Open Enrollment information will be available in mid-October through early November of each year.

Several of your benefit plan premiums are pre-tax. This means the amount of your taxable income is reduced by your annual cost of these benefits, reducing the net out-of-pocket costs for your benefits.

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
- Spouse loss or gain of other coverage

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 within 31 days, you must wait until the next open enrollment to make any benefit plan changes.

Dependent Spouse Note

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.



State Health Benefit Plan (SHBP) Options



Coffee County Schools participates in the State Health Benefit Plan. Refer to the 2027 Active Member Decision Guide for complete details at <https://coffeebenefits.org>.

Employer Contribution for SHBP Coverage

The district funds **\$1,935 per month / \$23,220 per year** towards medical coverage for all eligible employees. This generous employer contribution helps you and your family access a high-quality health plan while keeping your employee costs competitive.

Locate In-Network Providers

Anthem

Visit <https://www.anthem.com/mcr/shbp>. Select "Care" then "Find Care." Follow search instructions.

UnitedHealthcare

Visit <https://www.whyuhc.com/shbp>. Select "Search for network providers" in the Health plans drop down and follow search instructions.



Health Reimbursement Account (HRA)

Gold, Silver, & Bronze Options

- Offered by Anthem
- Most services subject to deductible and coinsurance
- No copays
- SHBP-funded HRA credits, available immediately, reduce your medical and pharmacy out-of-pocket costs
- Credits are used as you obtain services, with no action required
- You pay nothing until your HRA credits are used
- Unused credits roll over as long as you remain enrolled in SHBP

HMO Option

- Offered by Anthem and UnitedHealthcare (UHC)
- The only difference between the Anthem and UHC options is the provider network.
- Coverage for services from in-network providers only
- You are not required to select a Primary Care Physician, and referrals for specialist care are not required.
- Copays for services such as office visits, emergency room, urgent care, and prescription drugs
- Lowest deductible of all options

High Deductible Health Plan (HDHP) Option

- Offered by UHC
- In-network and out-of-network coverage
- Lowest payroll deduction cost
- Pay less through your paycheck, and pay more at the time you need medical services
- All services except preventive care subject to the deductible first, then coinsurance
- Optional Health Savings Account (HSA), allowing you to set aside money on a tax-advantaged basis for healthcare expenses

Why elect an HRA Plan?

- You're **comfortable without knowing your exact out-of-pocket cost** prior to receiving medical care
- You prefer to **choose the HRA option that works best for you**

Why elect an HMO Plan?

- **You like copays**, and you prefer to know your out-of-pocket cost for services such as office visits and prescription drugs prior to your appointment or purchase
- You prefer to **pay more through payroll deductions in exchange for lower costs at the time you need care**

Why elect the HDHP Plan?

- You prefer to **pay less through your paycheck and pay more at the time you need medical services**
- You value the ability to make **pre-tax contributions** to your HSA
- You understand that **all services are subject to deductible and coinsurance**

In-Network Benefits Summary

	Anthem			Anthem & UHC	UHC
	Gold HRA	Silver HRA	Bronze HRA	HMO	HDHP
Deductible (You Pay)					
You	\$1,500	\$2,000	\$2,500	\$1,300	\$3,500
You + Child(ren)/Spouse	\$2,250	\$3,000	\$3,750	\$1,950	\$7,000
You + Family	\$3,000	\$4,000	\$5,000	\$2,600	\$7,000
Coinsurance (Plan Pays)	85%	80%	75%	80%	70%
Out-of-Pocket Maximum (You Pay)					
You	\$4,000	\$5,000	\$6,000	\$4,000	\$6,450
You + Child(ren)/Spouse	\$6,000	\$7,500	\$9,000	\$6,500	\$12,900
You + Family	\$8,000	\$10,000	\$12,000	\$9,000	\$12,900
HRA Credits					
You	\$400	\$200	\$100	n/a	n/a
You + Child(ren)/Spouse	\$600	\$300	\$150		
You + Family	\$800	\$400	\$200		
Preventive Care	100%	100%	100%	100%	100%
PCP Visit & Urgent Care 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
Emergency Visit	Coins after ded	Coins after ded	Coins after ded	\$200 copay	Coins after ded
Outpatient Surgery (facility)	Coins after ded	Coins after ded	Coins after ded	Coins after ded	Coins after ded
Inpatient Hospitalization	Coins after ded	Coins after ded	Coins after ded	Coins after ded	Coins after ded
Outpatient Testing, Lab, X-Rays	Coins after ded	Coins after ded	Coins after ded	Coins after ded	Coins after ded
Telemedicine/Virtual Visit	Coins (no ded)	Coins (no ded)	Coins (no ded)	\$15 copay	Coins after ded
Routine Eye Exam (1/24 months)	100%	100%	100%	100%	100%
Maternity Care (non-routine, prenatal, delivery, postpartum)	Coins after ded	Coins after ded	Coins after ded	\$35 PCP or \$45 Specialist copay	Coins after ded

Monthly Premiums	Anthem HRA			Anthem	UHC	UHC
Coverage Level	Gold HRA	Silver HRA	Bronze HRA	HMO	HMO	HDHP
You	\$227.19	\$153.17	\$94.16	\$189.29	\$232.70	\$83.76
You + Child(ren)	\$415.51	\$289.67	\$189.35	\$351.08	\$424.87	\$171.67
You + Spouse	\$565.89	\$410.44	\$286.52	\$486.30	\$577.46	\$264.68
You + Family	\$754.21	\$546.94	\$381.71	\$648.09	\$769.63	\$352.59

About Your Employee Premiums and Deductions

- The total monthly employee premiums are noted above.
- Tobacco users are subject to an additional monthly tobacco surcharge in the amount of \$80.

Important Things to Know



Pharmacy Information



- Express Scripts Pharmacy Benefit Services, part of Evernorth Health Services, administers the SHBP pharmacy benefits.
- Retail (up to 31 day supply), mail order (32-62 and 63+ day supply), and specialty pharmacy services are included. Eligible mail order medications have reduced out-of-pocket costs.
- Caremark has an extensive pharmacy network. Access the pharmacy locator at express-scripts.com/shbp.

Pharmacy Tier	Anthem			Anthem & UHC	UHC
	Gold HRA	Silver HRA	Bronze HRA	HMO	HDHP
Retail Tier 1	15% \$5 minimum / \$10 maximum			\$5 copay	Coins after deductible
Retail Tier 2	25% \$55 minimum / \$85 maximum			\$55 copay	Coins after deductible
Retail Tier 3	25% \$85 minimum / \$130 maximum			\$95 copay	Coins after deductible
Mail Order 63+ Days Tier 1	15% \$12.50 minimum / \$25 maximum			\$12.50 copay	Coins after deductible
Mail Order 63+ Days Tier 2	25%, \$137.50 minimum / \$212.50 maximum			\$137.50 copay	Coins after deductible
Mail Order 63+ Days Tier 3	25%, \$212.50 minimum / \$325 maximum			\$237.50 copay	Coins after deductible

Copay/Coinsurance Waiver for Disease Management Participation

- Certain drug costs are waived if SHBP is primary and you enroll and actively participate in one of the Disease Management (DM) Programs for diabetes, asthma, coronary artery disease, or medication for addiction treatment.
- Call Anthem at (866) 901-0746 or UHC at (888) 364-6352 for program information.

PeachCare for Kids

- 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 <https://dch.georgia.gov/peachcare-kids> for more information.
- This benefit is not available through payroll deduction.

Preventive Care

Approved preventive care services obtained from in-network providers are covered at 100% for all plan options.

9amHealth Weight Management Program

- This optional program is available for SHBP members age 18 or older to improve your health and help you achieve your weight loss goals.
- The program includes access to weight health experts through virtual appointments, prescription medications, lab tests, at-home devices, and nutrition and fitness coaching.
- 9amHealth providers include obesity medicine specialists, endocrinologists, pharmacists, dietitians, bariatric specialists, and more.
- To sign up, go to <https://join9am.com/shbp> or call/text: (888) 870-9542.



Newly Adding Dependent Spouse and/or Child(ren) to Your Coverage?

- If you are electing new coverage for a dependent spouse and/or child(ren), ADP will provide instructions for submitting the required documentation.
- Be sure to provide documentation in the format requested by the deadline provided by ADP.
- If you do not receive the documentation request, contact SHBP by phone at (800) 610-1863.
- Your dependents will not be covered unless documentation is received and approved by the deadline.**

TRICARE Supplement Plan for Military Members

- The TRICARE Supplement Plan is an alternative to SHBP for retired military.
- Contact (866) 637-9911 or <https://shbp.georgia.gov/plan-options-programs/tricare> for information.

Wellness Program



Sharecare, your wellness program vendor, provides a comprehensive well-being and incentive program for SHBP members. As you complete wellness activities, you earn **incentive points to help you pay for your medical and pharmacy expenses**.

1 point = 1 dollar



when redeemed
for medical and
pharmacy expenses

Complete activities and
submit documentation
by **November 30**.

2027 Well-Being Incentives				
Plan Option	Anthem HRA	Anthem HMO	UnitedHealthcare HMO	UnitedHealthcare HDHP *
	Up to	Up to	Up to	Up to
Member	480	480	480	480
Covered Spouse	480	480	480	480
UHC Reward Card	n/a	n/a	\$250 for Employee \$250 for Spouse	\$250 for Employee \$250 for Spouse
Potential Total	960	960	1,460	1,460

* HDHP members must meet a portion of the deductible before well-being points may be used.

How to Earn 2027 Well-Being Incentive Points	
If You Complete...	You Will Earn...
The RealAge Test Complete a confidential, online questionnaire	120 points
A Biometric Screening Complete your screening through your physician, at an SHBP-sponsored event, or at a Quest Diagnostics Patient Service Center (PSC)	120 points
Preventive Screening Exams Complete a preventive screening exam (colonoscopy, mammogram, pap smear, or prostate screening)	60 points for each exam, up to two times - Screenings should be completed by August 31, 2027 - For screenings completed in September through November, members can self-attest by November 30, 2027.
January 1 - May 31 Coaching and Challenges	Coaching: 40 points each, 1 call/month Challenges: 30 points each 120 points maximum
June 1 - November 30 Coaching and Challenges	Coaching: 40 points each, 1 call/month Challenges: 30 points each 120 points maximum

All unused well-being incentive credits earned in the current plan year will roll over to the new plan option you choose during Open Enrollment. These points will be deposited in April of the following year. If you remain in the same plan option for next year, the credits will be available immediately.

Access
<https://bewellshbp.com>
for complete details.

Download the
Sharecare app today
to complete activities and
earn incentive points.

Sharecare Redemption Center

SHBP members and covered spouses may choose to redeem incentive credits in the **Sharecare Redemption Center** for either 1) a \$150 Visa Prepaid Card (when redeeming 480 points) or 2) 480 credits towards medical and pharmacy expenses.

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, visit the Unum website at www.unum.com/employees/benefits/dental-insurance, click "Find a Dentist" and follow the search instructions.

Dental Monthly Premiums		
Coverage	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
Out-of-Network Services	This option has the highest member out-of-pocket costs for out-of-network services. It is important to obtain in-network services with this option.	Member pays difference between the total charge and the usual and customary charge for out-of-network services.

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

Dental Carryover Benefit: 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. This provides a higher benefit maximum for all covered dental services except for orthodontia care.

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 a \$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 the VSP website at <https://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)
LightCare Benefit	Non-prescription blue light filtering glasses or sunglasses covered in full up to the frame allowance	

Vision Monthly Premiums		
Coverage	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 <https://www.vsp.com>.
2. Click on **Create an Account** at the top right corner of the site.
3. Fill in all of the required fields and 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 the phone number at **800.877.7195**.



VSP Vision Care Mobile App

Download the VSP Vision Care App from the **Apple App Store** or **Google Play Store**. 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 (FSAs) available: **1) Healthcare FSA** for medical, dental, vision, pharmacy, and other related expenses and **2) Dependent Care FSA** primarily for dependent day care expenses. Consolidated Admin Services (CAS) 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 the current IRS maximum at the time of enrollment into a Healthcare FSA each year (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. You can contribute up to the current IRS maximum at the time of enrollment in a Dependent Care FSA each year. Eligible dependent care expenses include, but are not limited to, day care and before and after-school care for children under age 13 and certain adult day care expenses for incapacitated adult dependents.

Child Daycare:

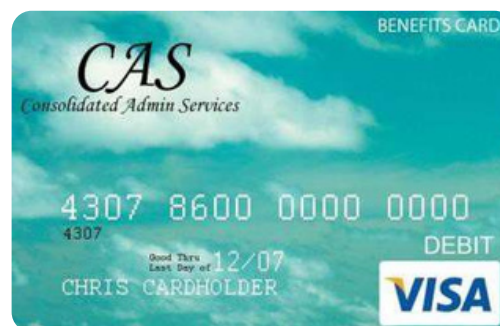
- Includes daycare facilities, babysitters inside or outside the household, before and after-school care, and more
- For children, step-children, and children eligible for a tax exemption on your federal tax return

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, 2027 to be eligible for reimbursement for the 2027 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 a certain amount of unused funds for future use. The rollover 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 2027 is January 1 through December 31.

Plan Maximum and Healthcare Rollover Amount

These amounts may be adjusted annually based on IRS legislation.

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 voluntary life insurance plan is insured by Unum, and 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	
Coverage	Benefits
Employee	\$10,000 increments up to \$500,000 - Not to exceed 5 times your annual earnings
Spouse <i>Premiums based on employee's age</i>	\$5,000 increments to \$250,000 - Not to exceed 100% of employee amount
Child(ren)	\$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. If you don't name a beneficiary, your life insurance benefits will automatically go to your estate. **You are required to designate your beneficiary during your enrollment, but you can change it at any time.**

Special Enrollment Opportunity: *Newly eligible employees* can enroll with no health questions, up to the guarantee issue amounts.

Employees currently enrolled at an amount below the guarantee issue may increase their election up to the guarantee issue amounts during Open Enrollment with no health questions. 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. This does not apply to employees not currently enrolled in voluntary life coverage or previously declined members.

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

Should you elect an amount that exceeds the guarantee issue amounts, 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 Voluntary Life and AD&D Monthly Premiums			
Age	\$10,000	\$50,000	\$150,000
25	\$0.95	\$4.75	\$14.25
35	\$1.30	\$6.50	\$19.50
45	\$2.60	\$13.00	\$39.00
55	\$5.62	\$28.10	\$84.30
65	\$13.33	\$66.65	\$199.95

Spouse Voluntary Life and AD&D Monthly Premiums			
Age	\$10,000	\$50,000	\$150,000
25	\$1.12	\$5.60	\$16.80
35	\$1.56	\$7.80	\$23.40
45	\$3.28	\$16.40	\$49.20
55	\$6.96	\$34.80	\$104.40
65	\$14.32	\$71.60	\$214.80

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

*Spouse rates are based on the employee's age.
There are no benefit reductions due to age.*

Whole Life Insurance

Coffee County Schools offers a 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 purchased 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 remit premiums directly to Unum.
- The policy includes an 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

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
Up to age 26	\$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.

Short Term Disability provides an income replacement benefit for a short period of time (up to 11 weeks). If you remain disabled and unable to work upon Short Term Disability exhaustion, Long Term Disability (LTD) would begin on the 91st day of disability and continue to Social Security Normal Retirement Age (SSNRA). SSNRA is age 67 for employees born in 1960 or later. For employees born prior to 1960, the LTD benefit duration is up to 21 months, depending on your age at the time of disability.

Special Enrollment Opportunity for new employees: You can enroll in Short or Long Term Disability during your initial eligibility window with no health questions. Future elections for either coverage will require health underwriting.

Disability Benefit Summary			
	Short Term Disability		Long Term Disability Employer-Paid for PSERS-Eligible Employees Voluntary for TRS-Eligible Employees
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

Long Term Disability Insurance

This benefit is **district-paid for all PSERS-eligible employees**. TRS-eligible employees can newly elect or continue coverage during your enrollment. Health questions will apply if the coverage has been previously waived.

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.

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 for TRS-Eligible Employees		
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.

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, Sickle 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
Accidental 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	
Coverage	Premium
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 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:

- 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	
Coverage	Premium
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 other hospital confinements.

Identity Theft



Coffee County Schools offers Identity Theft protection 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 Protection
- Digital Identity and Device Protection Tools
- Identity Restoration
- IP Address Monitoring
- And more

Coverage Level	ID Theft Monthly Premiums
Employee Only	\$8.50
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 22.32% 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 \$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 on the SHBP website at <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

Phone: **(800) 854-1446**

Website: <https://www.unum.com/support/employees/life-balance>

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 – Work/Life Balance

Toll-free 24/7 access:

Phone: 1-800-854-1446

Website: <http://www.unum.com/lifebalance>

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

Air Ambulance - AirMedCare Network



Coffee County Schools offers a medical emergency air ambulance plan. Even with medical insurance, air medical transport can result in significant out-of-pocket expenses. This 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. 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

Employees can only enroll in the benefit during Open Enrollment each year. The total cost indicated below will be taken each year in the January payroll. **You must re-elect coverage every year to continue in the plan.**

Coverage Level	Total Cost	One Premium
1 Year	\$60	Taken in January Payroll

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.

This program covers emergency air transportation only.

Paid Parental Leave

Paid Parental Leave

Paid Parental Leave is available for all eligible employees within a year of the birth, adoption, or placement of a minor through foster care, and provides **up to 240 hours** of paid parental leave.

This time is not charged against accrued leave and runs concurrently with any other federal leave, such as FMLA.

Maternal Birth Leave

All eligible employees who give birth can take an additional **120 hours** of paid Maternal Birth Leave.

The 120 hours of additional leave can only be taken by birthing mothers immediately following the birth of their own child, and it is not charged against accrued leave. It also runs concurrently with any federal leave.

Important Notes

Employees must be eligible to be granted the leave(s).

- Full-time salaried employees: 6+ months of continuous employment
- Hourly employees: 700+ hours in the six months immediately preceding the first requested paid parental leave

COMMONLY USED HEALTHCARE TERMS

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 (e.g. 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 \$1,750. 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 no out-of-network coverage.

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 a specified amount of unused funds for future use. The rollover option does not apply to the Dependent Care FSA.
- **Health Savings Account (HSA)** – A tax-advantaged savings account that allows employees to set aside money for qualified medical expenses. Contributions, earnings, and qualified withdrawals are generally tax-free, and unused funds roll over from year to year.

Definition of Dependent

- Legally married spouse
- Natural child(ren) or legally adopted child(ren) or stepchild(ren), below age 26
- Child(ren) due to Legal Guardianship
- Natural child(ren) or legally adopted child(ren) or stepchild(ren), age 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

Phone: (855) 641-4862
Website: www.anthem.com/shbp

UnitedHealthcare

Phone: (888) 364-6352
Website: www.whyuhc.com/shbp

Sharecare

Phone: (888) 616-6411
Website: www.bewellshbp.com

9amHealth

Phone: (888) 870-9542
Website: <https://join9am.com/shbp>

Express Scripts (Part of Evernorth Health)

Phone: (800) 809-8593
Website: <http://express-scripts.com/shbp>

SHBP Eligibility

Phone: (800) 610-1863
Websites: www.dch.georgia.gov/shbp
www.myshbpga.adp.com

TRICARE Supplement Plan

Phone: (866) 637-9911
Website: <https://shbp.georgia.gov/tricare-supplement-plan>

PeachCare

Phone: (877) 427-3224
Website: <https://dch.georgia.gov/peachcare-kids>

Dental

Unum

Phone: (888) 400-9304
Website: www.unumdentalcare.com

Vision

VSP

Phone: (800) 877-7195
Website: www.vsp.com

Flexible Spending Accounts

Consolidated Admin Services (CAS)

Phone: (877) 941-5956
Website: www.consolidatedadmin.com

Term Life Insurance

Unum

Phone: (800) 445-0402
Website: www.unum.com

Whole Life Insurance

Unum

Phone: (800) 445-0402
Website: www.unum.com

Short and Long Term Disability

Unum

Phone: (800) 858-6843
Website: www.unum.com

Critical Illness

Unum

Phone: (800) 635-5597
Website: www.unum.com

Accident

Unum

Phone: (800) 635-5597
Website: www.unum.com

Hospital Indemnity

Unum

Phone: (800) 635-5597
Website: www.unum.com

Identity Theft

ID Watchdog from Equifax

Phone: (866) 513-1518
Website: www.idwatchdog.com/home

Employee Assistance Program

Unum

Phone: (800) 854-1446
Website: www.unum.com/lifebalance

Air Ambulance

Global Medical Response

Phone: (800) 793-0010
Website: airmedcarenetwork.com
Email: membership@airmednetwork.com

Retirement Plans

Teachers Retirement System of Georgia (TRS)

Phone: (800) 352-0650
Website: <http://www.trsga.com>

Public School Employees Retirement System of Georgia (PSERS)

Phone: (800) 805-4609
Website: www.ers.ga.gov

Supplemental Retirement Plans

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

Phone: (888) 796-3786
Website: www.tsacg.com

Corebridge (VALIC) - 403(b)

Contact: Debbie Smith
Phone: (229) 292-1003
Email: debbie.smith3@corebridgefinancial.com

Horace Mann - 457(b)

Kim Sasser | Phone: (912) 632-0078
Summer Brigmond | Phone: (912) 850-4747

Your OneSource - Roth 403(b)

Lisa Carter or Jennifer Hayes
Phone: (229) 896-3436

Coffee County Schools Benefits Service Center

Phone: (833) 763-3335
Monday - Thursday 8am-6pm
Friday 8am - 5pm
Email: support@coffeebenefits.org





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.myshbpga.adp.com. 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.