# 2025

# George County School District
## Benefits Guide

*Summary for Review Purposes Only*

# IMPORTANT REMINDERS - TAKE ACTION

- Eligibility for benefits enrollment must take place within 30 days of your hire date.
- Remember: Please review and/or update beneficiaries annually for all benefits including, State Life & AD&D, Voluntary Life and Permanent Life policies.
- Important: Review and Understand Guaranteed Issue Options (New Hires).
- Life Events - You are required to submit any life event changes for you and eligible dependents within 30 days of an event.
- This Guide - This guide is presented for illustrative purposes only and is not intended to offer insurance advice. It is important you review each benefit's summary plan description (SPD) and other carrier materials before making any selections.

## There are two separate benefit enrollments:

**1. Campus Benefits Voluntary Benefits**

**2. Blue Cross Blue Shield Medical Insurance**

**Benefits enrollment must take place within 30 days of hire date*

1

## How to Enroll in Campus Benefits Voluntary Benefits

1. Visit https://www.georgecountybenefits.com/
2. Select the "Enroll" tab or the "Campus Connect" tab
3. Follow the on-screen instructions OR
4. **Contact Campus Benefits at 866.433.7661 opt 5**

- Plan year is 1/1 - 12/31
- **Annual open enrollment occurs in the Fall (October 7th - November 1st)**

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## How to Enroll in your Blue Cross Blue Shield Medical Plan

1. Contact Human Resources for necessary enrollment paperwork/requirements.

- Plan year is 1/1 - 12/31
- New Hire: Enrollment must take place within 30 days of hire date.
- **Annual open enrollment occurs in the Fall (October 1st - 31st)**



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*The George County School District offers a comprehensive and valuable benefits programs to all eligible employees. Our benefits package is designed to provide security and assistance during a time of need. Please become familiar with the various options and select the best coverage for the upcoming year.*

## NEED HELP? START HERE:

### Campus Benefits Service Hub

Phone: 866.433.7661 opt 5
Email: **MyBenefits@CampusBenefits.com**

### George County School District

Kimberly Collins
Payroll Specialist
601.947.6993, ext. 2042
kimberly.collins@gcsd.us

## Eligibility

- Generally, full-time employees designated by the Board working 20 or more hours a week
- Generally, full-time bus drivers designated by the Board working 10 or more hours a week
- Specific plan eligibility is listed on the top of each page. Specific employee and dependent eligibility rules are governed by each plan's policy document/certificate, which is available on your employee benefits website, or by contacting Campus Benefits.

## Enrollment

- Open Enrollment: October 7th - November 1st
- New Hire: Benefits enrollment must take place within 30 days of hire date
- Plan Year: January 1, 2025 – December 31, 2025

## When Do Benefits Begin

- The effective date of coverage for benefits depends on your hire date. Typically, benefits will begin the first of the month coinciding with or after date of hire. For all benefits, you must be actively at work on the effective date of coverage.

## Changes

- Employee benefit elections are allowed as a new hire and during the annual open enrollment period.
- The selected benefits will remain in effect throughout the plan year.
- A qualifying life event allows eligible changes to benefit elections throughout the plan year.
- For Campus Benefits all qualifying life events must be submitted within 30 days of the event date.
- For BCBS Medical Plans all qualifying life events must be submitted within 60 days.


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# SERVICE HUB/ SUPPORT CENTER

Campus Benefits is your dedicated advocate for all your voluntary benefits.

## When to contact the Campus Benefits Service Hub?

- Portability/Conversion
- Benefits Education
- Evidence of Insurability
- Qualified Life Event Changes
- Cobra Information
- Card Requests
- Benefit Questions
- Claims

**The Campus Benefits team understands the claims process and leverages the necessary carrier relationships to expedite the paperwork efficiently to ensure claims are not delayed due to improper paperwork completion.**

## How to File a Claim ?

1. Contact Campus Benefits via Phone or Email
2. Work with Campus Benefits' claims specialist to complete the necessary paperwork
   - Employee Portion
   - Physician Portion
   - Employer Portion
3. Submit the Necessary Paperwork to Campus Benefits via the secure upload
   - Secure upload located at: https://www.georgecountybenefits.com/contact-campus

## Frequently Asked Questions (FAQs):

**Q: When must a qualifying life event change be made?**

**A:** For voluntary benefits, please notify Campus Benefits within 30 days of the life event date.

**A:** For BCBS medical plan life events, please contact the George County Schools Benefits Department within 60 days of the life event date.

**Q: Am I required to contact Campus Benefits to file a claim?**

**A:** No. However, in our experience the number one reason for claim denial or delay is due to incomplete or inaccurate paperwork. By working with Campus Benefits' claim specialist, we can advocate on your behalf.

**Q: How can I access the group dental card or vision card quickly?**

**A:** Your group dental and vision plan information is available at: https://www.georgecountybenefits.com/

**Phone:** 866.433.7661, Opt 5
**Email:** mybenefits@campusbenefits.com
**Website:** https://www.georgecountybenefits.com/

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# EMPLOYEE ASSISTANCE PROGRAM

OneAmerica Financial℠

**What is an EAP?** A program offered to eligible George County School District employees to provide guidance with personal issues, planning for life events or simply managing daily life which can affect your work, health and family.

**Eligibility:** All eligible George County School District employees
- Coverage through **One America** for George County School District at no cost to employee
- Provides support, resources, and information for personal and work-life challenges
- CALL 1.855.387.9727 or visit Guidanceresources.com, Web ID: **ONEAMERICA3**

## Confidential Counseling

- Helps employees address stress, relationship and other personal issues for you and your family
- Sessions with highly trained master's and doctoral level clinicians
- **Receive 3 Sessions per issue per year for:**
  - Stress anxiety and depression
  - Relationship/marital conflicts
  - Problems with children
  - Job pressures
  - Grief and loss
  - Substance abuse

## Financial Information and Resources

- Speak by phone with a Certified Public Accountants and Certified Financial Planners on a wide range of financial issues, including:
  - Getting out of debt
  - Credit card or loan problems
  - Tax questions
  - Retirement planning
  - Estate planning
  - Saving for college

## Work-Life Solutions

- Work-Life Specialists will do the research for you, providing qualified referrals and customized resources for:
  - Child and elder care
  - Moving and relocation
  - Making major purchases
  - College planning
  - Pet care
  - Home repair

## GuidanceResources Online

- One stop for expert information on relationships, work, school, children, wellness, financial, and more
- Timely articles, HelpSheets, tutorials, streaming videos and self-assessments
- "Ask the Expert" personal responses to your questions
- Child care, elder care, attorney and financial planner searches

## Free Online Will Preparation

- EstateGuidance lets you quickly and easily write a will on your computer
- Go to GuidanceResources.com and click on EstateGuidance link
- Follow the prompts to create and download your will at no COST
  - Name an executor to manage your estate
  - Choose a guardian for your children
  - Specify your wishes for your property
  - Provide funeral and burial instructions

**Provided at no cost to the employee by George County School District.**

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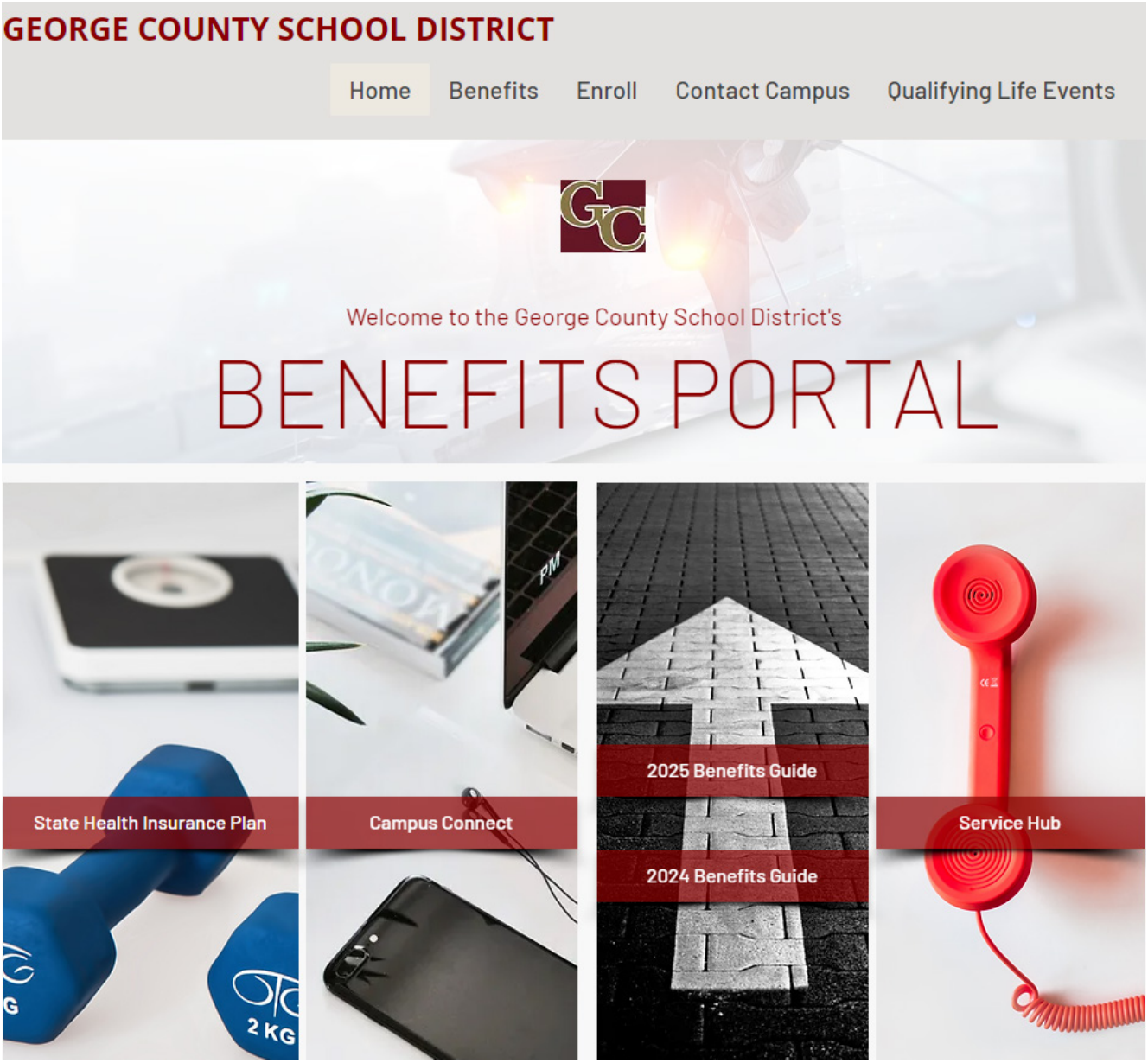
# BENEFITS PORTAL!

www.georgecountybenefits.com




## What can you find on the Benefits Portal?

- Plan Highlight Sheets
- Policy Documents and Certificates
- Claim Forms
- Links to Carrier Websites

## What can the Service Hub assist you with?

- Claims
- Card Requests
- Benefit Questions
- Qualified Life Events

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# CAMPUS BENEFITS ENROLLMENT INSTRUCTIONS

**Website:** https://www.georgecountybenefits.com

**Company Identifier: GCS19**

SCAN ME

## 1 Visit https://www.georgecountybenefits.com/

## 2 Select "Campus Connect" to login

## 3 Existing User Login

1. Enter your username
2. Enter your password
3. Click "LOGIN"
4. Click on the "Start Benefits" button and begin the enrollment process

## Frequently Asked Questions

**What is my username?**

- Work email address **OR**
- Email address you provided to HR when hired **OR**
- Email address you used to previously change your username

**What is my password?**

To create or reset a forgotten password follow the steps on the login page using tips below.

- Password must be at least 6 characters
- It must contain a symbol and a number
- Using uppercase, numbers and symbols greatly improves security

## New User Registration

1. On Login page click on "Register as a new user" and enter information below
   - First Name
   - Last Name
   - Company Identifier: GCS19
   - PIN: Last 4 Digits of SSN
   - Birthdate
2. Click "Next"
3. Username: Work email address or one you have provided to HR when you were hired
4. Password: Must be at least 6 characters and contain a symbol and a number
5. Click on "Register"
6. On the next page, it will show your selected Username. Click on "Login"
7. Enter Username and Password
8. Click "Start Benefits" to begin the enrollment

**Need Help? Start Here:**
mybenefits@campusbenefits.com
866.433.7661 opt 5

### Login Information

Username: _____

Password: _____

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# SHORT-TERM DISABILITY

OneAmerica Financial℠

**What is Short-Term Disability Insurance?** A type of coverage that replaces a portion of your income, for a short period of time, if injury or illness prevents you from working. It provides financial security for you and any loved ones who may depend on your most valuable asset — your ability to earn a paycheck. You may also hear disability insurance referred to as disability income insurance or income protection.

**Eligibility:** Eligible full-time employees as designated by the Board (page 2)

- Coverage through **One America**
- Employee must be actively at work on the effective date
- **Short-Term Disability Benefits pay in addition to sick leave**
- **No health questions EVERY YEAR!** (Pre-existing condition will apply for new participants)

| Short-Term Disability Quick Summary | |
|---|---|
| Elimination Period | Benefits begin after you have been out of work due to an injury or illness for the elimination period<br>Option 1: 7 Days Option 2: 14 Days Option 3: 30 Days |
| Benefit Duration | Covers accidents and sicknesses up to 12 weeks |
| Benefit Percentage (weekly) | 60% of your gross weekly salary |
| Maximum Benefit Amount (weekly) | $1,200 |
| Pre-existing condition | 3/6<br>Illness or injury for which you received treatment the 3 months prior to your effective date will not be covered for the first 6 months.<br>(Applies to new enrollees only) |

| Monthly Rate Calculation | | |
|---|---|---|
| **Step 1** | Divide your Annual Salary by 52. This is your weekly salary. | |
| **Step 2** | Multiply weekly salary in Step 1 by 60%. If 60% of weekly salary exceeds $1,200, then enter $1,200. This is your maximum weekly benefit amount. | |
| **Step 3** | Divide weekly amount in Step 2 by $10 | |
| **Step 4** | Multiply Step 3 by the Monthly Rate in the table to the right. This is your **monthly** premium. | |

| Short-Term Disability Monthly Rates Per $10 of Weekly Benefit | | | |
|---|---|---|---|
| Age | 7 Day | 14 Day | 30 Day |
| <19-29 | $0.623 | $0.537 | $0.354 |
| 30-39 | $0.637 | $0.549 | $0.365 |
| 40-49 | $0.622 | $0.536 | $0.340 |
| 50-59 | $0.670 | $0.578 | $0.320 |
| 60-64 | $0.719 | $0.620 | $0.365 |
| 65-69 | $0.777 | $0.670 | $0.390 |
| 70+ | $0.800 | $0.690 | $0.420 |

**Enrollment system will calculate based on payroll information provided by employer*



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# LONG-TERM DISABILITY

OneAmerica Financial℠

**What is Long-Term Disability Insurance?** A type of coverage that replaces a portion of your income, for a longer period of time, if injury or illness prevents you from working. It provides financial security for you and any loved ones who may depend on your most valuable asset — your ability to earn a paycheck. You may also hear disability insurance referred to as disability income insurance or income protection.

**Eligibility:** Eligible full-time employees as designated by the Board (page 2)

- Coverage through **One America**
- Employee must be actively at work on the effective date
- **Long-Term Disability Benefits do not pay in-addition to sick leave**
- **No health questions EVERY YEAR!** (Pre-existing condition will apply for new participants)

| Long-Term Disability Quick Summary | |
|---|---|
| Elimination Period | Benefits begin after you have been out of work due to an injury or illness for 90 calendar days |
| Benefit Duration | Covers accidents and sicknesses up to Social Security Normal Retirement Age (Please note exclusions or limitations may apply, see plan certificate for details) |
| Benefit Percentage (monthly) | 60% of your gross monthly salary |
| Maximum Benefit Amount (monthly) | $6,000 |
| Pre-existing condition | 3/3/12<br>Illness or injury for which you received treatment the 3 months prior to your effective date will not be covered for the first 12 months, unless you are treatment free for 3 consecutive months<br>(Applies to new enrollees only) |

| Monthly Rate Calculation | | |
|---|---|---|
| **Step 1** | Divide your Annual Salary by 12. This is your monthly salary. | |
| **Step 2** | Divide monthly amount in Step 1 by $100 | |
| **Step 3** | Multiply Step 2 by the Monthly Rate in the table to the right. This is your **monthly** premium. | |

| Long-Term Disability Monthly Rates Per $100 of Covered Monthly Payroll | | | |
|---|---|---|---|
| Age | 90 Day | Age | 90 Day |
| 0-19 | $0.252 | 50-54 | $1.347 |
| 20-24 | $0.252 | 55-59 | $1.539 |
| 25-29 | $0.252 | 60-64 | $1.201 |
| 30-34 | $0.252 | 65-69 | $0.451 |
| 35-39 | $0.540 | 70-74 | $0.451 |
| 40-44 | $0.741 | 75+ | $0.451 |
| 45-49 | $1.006 | | |
| *Enrollment system will calculate based on payroll information provided by employer* | | | |

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# LIFE INSURANCE 101

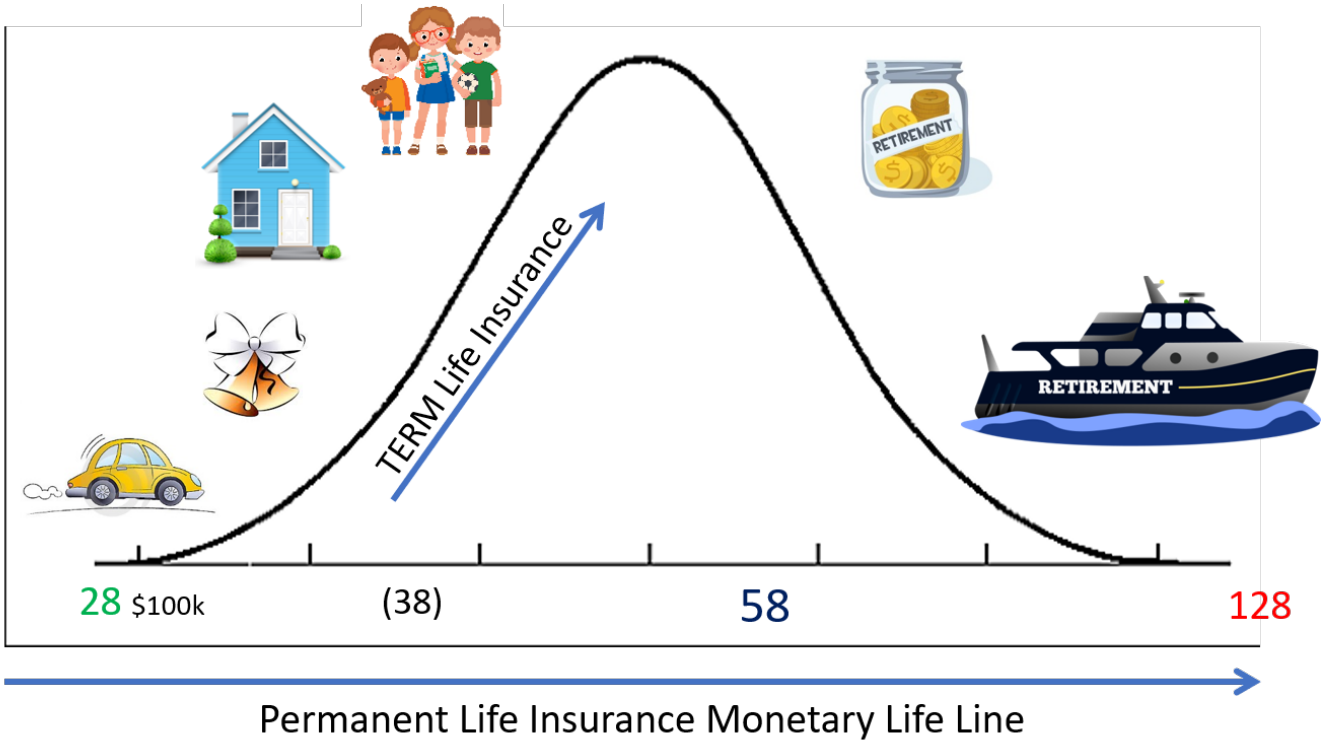
The need for life insurance depends on each individual life situation. If loved ones are financially dependent on you, then buying life insurance coverage can absolutely be worth it. Even if you don't have financial dependents yet, life insurance can be a valuable solution for making death easier on a family (at least financially.) There are two voluntary life insurance options offered through your employer: Term Life Insurance and Permanent Life Insurance. Below is an overview of the differences.

**Term Life and Permanent Life work best used in conjunction with one another. Term Life can protect your family in your younger working years and Permanent Life can protect your family in your retirement years.**

## TERM LIFE INSURANCE

Term Life insurance is illustrated on the bell curve below. The term life offered is a group policy which allows you to get more benefit for less premium.

- Term life insurance is for the unexpected death
- Includes an Accidental Death & Dismemberment Benefit
- Term life insurance is flexible and allows changes to your benefit amount each year depending on life changes. For example, as you get married and have children the need for term insurance often increases. As you near retirement, the need for term life insurance often decreases.
- Coverage is portable at retirement or if you leave the employer (premium will increase)
- Premiums are based on age and increase as you get older




## PERMANENT LIFE INSURANCE

Permanent Life Insurance is illustrated above along the bottom of the graph with a straight blue arrow.

- Permanent life insurance offers a stable premium along the lifetime of the policy
- Permanent life offers a level premium and is meant to take into retirement
- Permanent life is an issue age policy is based on the age when the policy is issued
- This is an individual plan you can take with you regardless of where you work



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# VOLUNTARY TERM LIFE & AD&D

OneAmerica Financial

**What is Voluntary-Term Life and Accidental Death & Dismemberment Insurance?** Proceeds can be used to replace lost potential income during working years and help ensure your family's financial goals will still be met; goals like paying off a mortgage, keeping a business running, and paying for college. AD&D coverage is included as a part of life insurance benefits and will pay out a lump-sum death benefit in the event you or a covered loved one are killed accidentally or die later as the direct result of an accident.

**Eligibility:** Eligible full-time employees as designated by the Board (page 2), spouse, & unmarried children up to age 26

- Coverage through **One America**
- Employee must be actively at work on the effective date
- Benefit amount doubles in the event an accident results in death
- Employee must elect coverage on themselves in order to purchase for dependents
- If electing for the first time outside of the initial open enrollment period or for an amount over the Guaranteed Issue Amount, health questions will be required

| Life and Accidental Death & Dismemberment (AD&D) Quick Summary | |
|---|---|
| **LIFE AND AD&D MAXIMUMS** | |
| **Employee** | Minimum of $10,000 with increments of $1,000 up to the lesser of $500,000 or 5 times annual salary |
| **Spouse** | Minimum of $5,000 with increments of $500 up to $250,000 (100% of Employee Election) |
| **Child(ren)** (up to Age 26) | $10,000 (one premium applies to all children) |
| **GUARANTEED ISSUE MAXIMUMS** *(NO HEALTH QUESTIONS REQUIRED WHEN FIRST ELIGIBLE)* | |
| **Employee** | $250,000 |
| **Spouse** | $50,000 |
| **Child(ren)** | $10,000 |
| **GUARANTEED INCREASE IN BENEFIT** | Employee & Spouse: If currently enrolled, can increase Up to the Guaranteed Issue amount at Open Enrollment. |
| **Age Reduction** | None |
| **Portability & Conversion** | Included (Premium will change/increase) (Portability ends at age 70) |

**Plan Rates**
**Cost of coverage is based on the level of benefit you choose and your age. Spouse rate is based on employee's age. Please consult with a Benefits Counselor or log into the enrollment system for rate details.**

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# PERMANENT LIFE

Colonial Life

**What is Permanent Life Insurance?** Provides lifelong protection and the ability to maintain a level premium.

**Eligibility:** Eligible full-time employees as designated by the Board (page 2), spouse, children & grandchildren (up to age 26)

- Coverage through **Colonial Life**
- Underwriting may be required. Coverage is not guaranteed
- Must be actively at work on the effective date
- Permanent offers the flexibility to meet a variety of personal needs while allowing employees the choice of benefit and premium amounts which fit their paychecks and life styles
- Keep your coverage at the same cost even if you retire or change employers

| Permanent Life Quick Summary | |
|---|---|
| **PLAN MAXIMUMS** | |
| Employee (Ages 18 - 79) | Up to $500,000 |
| Spouse (Ages 19 - 70) | Up to $500,000 |
| Child (15 days - 26 years) | Up to $500,000 |
| **GUARANTEED ISSUE** *(NO HEALTH QUESTIONS FOR FIRST TIME ENROLLEES)* | |
| Employee | Up to $49,999 (Ages 18 - 50)<br>Up to $29,999 (Ages 51 - 60)<br>Up to $14,999 (Ages 61 - 79) |
| Spouse | Up to $49,999 (Ages 18 - 50)<br>Up to $29,999 (Ages 51 - 60)<br>Up to $14,999 (Ages 61 - 79) |
| Juvenile Policy | Ages 0 - 17<br>Full-Time Student/Dependent on Parent 18 - 26 |
| **Additional Plan Options/Riders** | |
| Choose from Paid Up Options: age 70 or age 100, Accidental death rider available | |

**Plan Rates**
**Cost of coverage is based on the level of benefit you choose and your age. Please consult with a Campus Benefits Counselor or log into the enrollment system for rate details.**



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# STATE LIFE AND AD&D INSURANCE

**What is State Life Insurance?** A program offered to eligible George County School District employees through the State of Mississippi. This is a Basic Life Insurance program that can provide a cash benefit in the event the insured passes away.

**Eligibility:** Coverage through **Minnesota Life Insurance Company (Securian Financial)**

- 50% of coverage is paid for by George County School District
- Coverage available: Up to 2 times basic annual earnings up to a max of $100,000
- Retiree Coverage: Coverage up to $20,000 available (based on retiree date)
- Continuation of Coverage: Policy Number: 33683 Access Key: msse Phone: 866.365.2374

## Contacts and Beneficiary Update Information.

Minnesota Life Phone: 888.658.0193

To manage your beneficiary designation online:

1. Log in to bcbsms.com. If you have not previously registered, information will be required from your BCBSMS ID card to complete the registration process.
2. Go to the My Benefits tab.
3. Under the Life Benefits section, click the link to update the beneficiary information. You will see a notification asking you to "Agree" to be transferred to a secure portal provided by Minnesota Life. Click "I Agree."
4. Click "View beneficiary."
5. If you need to make any changes, click "Update Designation," and provide the name(s), relationship(s) and respective benefit shares.
6. After this information has been entered, you will receive an email acknowledgment, as well as a letter in the mail confirming your changes to your beneficiary designation.

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# DENTAL

Guardian

**What is Dental Insurance?** A health and wellness plan designed to pay a portion of dental costs associated with preventive, basic, some major dental care, as well as orthodontia.

**Eligibility:** Eligible full-time employees as designated by the Board (page 2), spouse and children up to age 26

- Coverage through **Guardian**
- Provider directory: https://www.guardianlife.com/find-a-provider (Network: Dental Guard Preferred)
- Orthodontia only available for children up to age 19 (subject to lifetime max)
- Claims must be submitted within 90 days of date of service
- Exams and cleanings are allowed 2 times each calendar year and do not have to be separated by 6 months
- Refer to page 16 for additional details on how to get the most out of your dental plan
- **You can go to any provider on both plans but will receive a higher benefit for going to an In-Network provider**
- *The chart below is a sample of covered in-network services. Please see the Plan Certificate on your Employee Benefits website for a detailed listing of services, as well as out-of-network allowances in their entirety.*

| Coinsurance | High Plan | Low Plan |
|---|---|---|
| Preventive | 100% | 100% |
| Basic | In-Network: 90%<br>Out-of-Network: 80% | In-Network: 100%<br>Out-of-Network: 80% |
| Major | In-Network: 60%<br>Out-of-Network: 50% | Not Covered |
| Orthodontics | 50%<br>(Child up to age 19) | Not Covered |
| Calendar Year Maximum | $1,000 per person | $750 per person |
| Rollover Maximum | $1,000 | Not Covered for Low Plan |
| Orthodontia Maximum | $1,500 per person<br>(Child up to age 19) | Not Applicable |
| Deductible | $25/$75 Max per Family per Calendar Year (Basic & Major) | |
| Allowance | 80th Usual, Customary, & Reasonable | |
| Waiting Period | None | |
| Preventative Advantage | Preventative services do not apply to the annual max | |

| Services Quick Summary |
|---|
| **Type 1 - Preventive** |
| Routine Exam (2 per calendar year) |
| Bitewing X-rays (1 per calendar year) |
| Cleaning (2 per calendar year) |
| Fluoride (2 per calendar year) |
| Full Mouth X-rays (1 in 3 Years) |
| **Type 2 - Basic** |
| Endodontics (Nonsurgical & Surgical) |
| Restorative Amalgams & Composites |
| Periodontics (Nonsurgical) |
| Simple Extractions |
| Complex Extractions (High Plan only) |
| Anesthesia (High Plan only) |
| **Type 3 - Major (High Plan only)** |
| Onlays |
| Crowns & Repairs |
| Prosthodontics |
| Periodontics (Surgical) |
| Implants |

Guardian

Employee Name

Employee ID

George County School District
Group Name

00069894
Policy Number

*For benefit or services information or to express concerns about our services, call Guardian at:*

1.800.541.7846 www.guardianlife.com

| Monthly Rates | High Plan | Low Plan |
|---|---|---|
| Employee | $45.31 | $25.93 |
| Employee + Spouse | $90.38 | $51.85 |
| Employee + Child(ren) | $100.54 | $61.19 |
| Family | $156.11 | $96.56 |

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# GET THE MOST OUT OF YOUR DENTAL PLAN

## DENTAL PLAN

**Your Dental Plan Features Dental Rewards**

### Maximum Rollover (High Plan Only)

If during a benefit year, a covered person has a paid claim (not just a visit) and does not exceed the paid claims Threshold Amount, then the Rollover Amount (or the Rollover Bonus Amount, if included) will be rolled over for use in future years. The Maximum Rollover Account Limit is the most money that can be kept in the Maximum Rollover account. The covered person's personal Maximum Rollover account is used for additional coverage when his or her annual maximum is exhausted.

| High Plan Rollover Quick Summary | | |
|---|---|---|
| Threshold | $500 | Dental benefits received for the year cannot exceed this amount |
| Rollover Amount | $250 | Dental rollover amount is added to the following year's maximum |
| Maximum Carryover | $1,000 | Maximum possible accumulation for Dental Rollover |

### Preventive Advantage

Members have an unlimited preventive care maximum (frequency/age limitations still apply). Members obtain preventive care, including exams, cleanings, x-rays and fluoride treatments, without having the benefit deducted from their annual maximum. The entire annual maximum amount is preserved for basic and major services. Preventive care will continue to be covered even after the annual maximum is met. Preventive Advantage promotes preventive care to help keep members healthy and productive while extending the value of their annual maximum.

## TRAVEL ASSISTANCE

**International Dental Travel Assistance** services are administered by AXA Assistance USA, Inc. AXA Assistance is not affiliated with (The) Guardian Life Insurance (Company of America) ("Guardian"), and the services they provide are separate and apart from the benefits provided by Guardian. While traveling internationally, Guardian members can get a referral to a local dentist for immediate dental care through the International Dental Travel Assistance Program. This service is available 24/7, in over 200 countries. Coverage will be considered under the out-of-network benefits.

### Contact:

1-630-766-7710 (via collect call)
888-647-2701 (from the U.S.)

## TOBACCO CESSATION PROGRAM

The Guardian + Pelago tobacco cessation program, included with all new Guardian dental plans, provides dental members and their families (age 15+) personalized, resources that can help them reduce their usage or quit use of tobacco, including vaping, for good. Visit your www.guardianananytime.com account for more information and to sign up.

### Features:

- Dedicated care team: Access to qualified coaches to help guide members on every step of their recovery journey
- Personalized tracking: Tools to help members track their personal triggers, cigarettes smoked, dollars saved, and health progress
- Helpful cognitive behavioral therapy (CBT) content: Audio sessions and interactive exercises to help members learn new techniques for dealing with craving triggers
- Craving tools: Support for members to manage cravings and reach their goals
- Nicotine replacement therapy: Access to gums and patches to manage and lessen cravings (if your employees need them)

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# VISION

MetLife

**What is Vision Insurance?** A health and wellness plan designed to reduce your costs for routine preventive eye care including eye exams and prescription eyewear (eyeglasses and contact lenses).

**Eligibility:** Eligible full-time employees as designated by the Board (page 2), spouse and dependent* children up to age 26

- Coverage through **MetLife -** Provider directory: www.metlife.com (Network: VSP Choice)
- Refer to the next page for details on how to get the most out of your vision plan
- *The chart below is a sample of covered in-network services. Please see the Plan Certificate on your Employee Benefits website for a detailed listing of services, as well as out-of-network allowances in their entirety.*
  ** Child marital status impacts benefit eligibility*

| Vision Benefits Quick Summary | In-Network |
|---|---|
| Exam | In: $10 Copay Out: Up to $45 allowance |
| Contact Lens Fit and Follow-Up | Member pays up to $60 (Standard) |
| Retinal Imaging | Up to $39 Copay |
| Lasik or PRK | 15% Discount off Retail and 5% off Promotional |
| Frames | In: $15 Copay - $200 Allowance + 20% off Balance<br>$85 Allowance at Walmart, Costco, Sam's Club<br>Out: Up to $70 allowance |
| **Lenses and Lens Options** | |
| Single/Lined Bifocal & Trifocal/Lenticular | In: $15 Copay<br>Out: Up to $30 - $100 allowance |
| Standard Progressive Lens | In: Covered in Full after $15 Copay<br>Out: Up to $50 allowance |
| UV Coating | Covered in Full |
| Standard Polycarbonate | Covered in Full (Under age 19) |
| Tint (Solid & Gradient) | Up to a $17 to $44 Copay |
| Standard Scratch Resistant | Up to $17 - $33 Copay |
| Standard Anti-Reflective Coating | Up to $41 - $85 Copay |
| **Contact Lenses** | |
| Elective Contacts | In: $200 allowance Out: Up to $105 allowance |
| Medically Necessary Contacts | In: Covered in Full after eyewear copay<br>Out: Up to $210 allowance |
| **Frequencies** | |
| Exams/Lenses or<br>Contact Lenses/Frames | Every 12 Months |
| 2nd Pair Benefit<br>*(Advise provider to submit two pair of glasses on separate invoices)* | Each covered person can get one of the options below:<br>2 pairs of prescription eyeglasses **OR**<br>1 pair of prescription eyeglasses and an allowance toward contacts **OR**<br>Double the contact lens allowance |
| *Election frequency based on date of service* | |

| Monthly Rates | |
|---|---|
| Employee | $12.17 |
| Employee + Spouse | $24.39 |
| Employee + Child(ren) | $20.65 |
| Family | $34.05 |

MetLife

George County BOE — Group Name

5965845 — Group Number

Members: 1.800.GET.METS (1.800.438.6388)
Providers: 1.855.638.3931 metlife.com/mybenefits

*This card is not a guarantee of coverage or eligibility.*

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# GET THE MOST OUT OF YOUR VISION PLAN

MetLife

## DID YOU KNOW?

Your vision plan allows you to visit any licensed vision specialist and receive coverage.
**Just remember your benefits go further when you go in-network.**

- You can price shop your lens & frame providers. Take your prescription from your out of network provider to an in-network provider to receive the most benefit from your vision plan.
- Visit www.metlife.com for a listing of in-network providers.
- Your vision care expenditures qualify as an eligible expense under the available Flexible Spending Account Plan. View the FSA pages for more details.
- You can access additional plan information on your benefits website:
- https://www.georgecountybenefits.com/
- Track your claims and plan usage by registering for a MetLife My Benefit Account. Visit metlife.com/mybenefits.com. Enter George County Board of Education as your employer.
- When submitting claims for the 2nd Pair Benefit, advise provider to two submit two pair of glasses on separate invoices.

## WHY IS HAVING A GOOD VISION PLAN SO IMPORTANT?

Because taking good care of your eyes can help you take better care of your body. Regular visits to your eye care professional do more than just protect your eyesight. They can help protect your overall health. Through a routine exam, eye doctors can spot serious health problems like diabetes, high blood pressure, heart disease, certain cancers and other conditions. That's why, even if you have perfect vision, yearly exams are important. Don't let preventable health and vision problems sneak up on you. Vision benefits are there to help you stay on top of your care.

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# CRITICAL ILLNESS

MetLife

**What is Critical Illness Insurance?** A health and wellness plan in which you receive a lump sum cash payment if diagnosed with one of the specific illnesses on the predetermined list of critical illnesses.

**Eligibility:** Eligible full-time employees as designated by the Board (page 2), spouse and dependent children* up to age 26

- Coverage through **MetLife**
- **Issue Age - Rates are locked in and will not increase with age**
- **No health questions - EVERY YEAR!!**
- *The chart below is a sample of covered services. Please view the Plan Certificate for a detailed listing of services in their entirety, available on your Employee Benefits Website.*

  ** Child marital status may impact benefit eligibility*

| Critical Illness Quick Summary | |
|---|---|
| Employee | $15,000 or $30,000 |
| Spouse | 50% of Employee Amount |
| Dependent Children | 50% of Employee Amount |
| **COVERED SPECIFIED CRITICAL ILLNESSES** | **Pays % of Face Amount** |
| Invasive Cancer | 100% |
| Non-Invasive Cancer | 25% |
| Skin Cancer | 5% (not less than $250) |
| Benign Brain Tumor | 100% |
| Coronary Artery Bypass Graft (CABG) | 50% |
| Childhood Diseases (Cerebral Palsy, Cleft Lip or Cleft Palate, Cystic Fibrosis, Diabetes (Type 1), Down Syndrome, Sickle Cell Anemia, Spina Bifida) | 100% of Child Benefit |
| Functional Loss (Coma, Loss of: Ability to Speak; Hearing; or Sight, Paralysis of 2 or more limbs) | 100% |
| Heart Attack | 100% |
| Sudden Cardiac Arrest | 50% |
| Infectious Diseases (Bacterial Cerebrospinal Meningitis, COVID-19, Diphtheria, Encephalitis, Legionnaire's Disease, Malaria, Necrotizing Fasciitis, Osteomyelitis, Rabies, Tetanus, Tuberculosis) | 25% **Hospitalization is required, see policy for details.* |
| Stroke | 100% |
| Major Organ Transplant (Bone marrow, Heart, Lung, Pancreas, and Liver) | 100% |
| Kidney Failure | 100% |
| Progressive Diseases (ALS, Alzheimer's Disease, Multiple Sclerosis, Muscular Dystrophy, Parkinson's Disease (Advanced), Systemic Lupus Erythematosus (SLE)) | 100% |
| Severe Burn | 100% |
| Stroke | 100% |
| **ANNUAL WELLNESS INCENTIVE** | $50 - View the Wellness Incentives page for more details |
| Age Reduction | None |
| Pre-Existing Condition | None |

**Plan Rates**

**Cost of coverage is based on the level of benefit you choose and your age. Please consult with a Campus Benefits Counselor or log into the enrollment system for rate details.**



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# CANCER INSURANCE

Colonial Life

**What is Cancer Insurance?** Cancer insurance is a form of supplemental insurance meant to offset cancer-related expenses so you can focus on recovery.

**Eligibility:** Eligible full-time employees as designated by the Board (page 2), spouse and children up to age 26

- Coverage through **Colonial Life**
- Keep your coverage, at the same cost, even if you retire or change employers
- Payments made directly to you and do not offset with medical insurance
- *The chart below is a sample of covered in-network services. Please see the Plan Certificate on your Employee Benefits website for a detailed listing of services.*

| Cancer Benefits Quick Summary | Level 2 | Level 3 |
|---|---|---|
| **HOSPITAL AND RELATED BENEFITS** | | |
| Initial Cancer Diagnosis | $1,000 - $10,000 in $1,000 Increments | |
| Hospital Confinement (30 days or less) | $150 | $250 |
| Hospital Confinement (31 days or more) | $300 | $500 |
| Air Ambulance (2 per confinement) | $2,000 | $2,000 |
| Hospice, Initial | $1,000 | $1,000 |
| **RADIATION,CHEMOTHERAPY & RELATED BENEFITS** | | |
| Radiation/Chemotherapy for Cancer | $100 - $500 | $150 - $750 |
| Blood, Plasma, Platelets per day (max $10,000 per year) | $150 | $175 |
| Medical Imaging (max per year) | $250 | $350 |
| **SURGERY AND RELATED BENEFITS** | | |
| Surgical Procedures - per unit | $50 | $60 |
| Surgical Procedures max per procedure | $3,000 | $5,000 |
| Anesthesia (% of surgery) | 25% of Surgical Procedures Benefit | |
| Surgery (outpatient) per day | $200 | $300 |
| Surgery (outpatient) annual max | $600 | $900 |
| Bone Marrow or Stem Cell Transplant (2 transplant max) | $4,000 | $7,000 |
| **MISCELLANEOUS BENEFITS** | | |
| Bone Marrow Donor Screening | $50 | $50 |
| Experimental Treatment - Max Lifetime | $12,500 | $15,000 |
| Second Medical Opinion (1) | $200 | $300 |
| Prosthetic Limb - Max Lifetime | $3,000 | $4,000 |
| **ANNUAL WELLNESS INCENTIVE** | $50 - *View the Wellness Incentives page for more details* | |
| **PRE-EXISTING CONDITION** | None (5 Years treatment free from cancer) | |
| **WAITING PERIOD** | 30 Days - Waived for Takeover | |

**Plan Rates**

**Cost of coverage is based on the level of benefit you choose and your age. Please consult with a Campus Benefits Counselor or log into the enrollment system for rate details.**

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# ACCIDENT INSURANCE

**What is Accident Insurance?** A financial and family protection plan designed to help pay for the medical and out-of-pocket costs a covered individual may incur after an accidental injury either on or off the job.

**Eligibility:** Eligible full-time employees as designated by the Board (page 2), spouse and dependent children* up to age 26

- Coverage through **MetLife**
- **No health questions - Every Year!!**
- *The chart below is a sample of covered services. After 1/1/2025, please see the Plan Certificate for a detailed listing of services in their entirety, available on your Employee Benefits Website*

  ** Child marital status may impact benefit eligibility*

| Accident Benefits Quick Summary | Low Plan | High Plan |
|---|---|---|
| **INJURIES** | | |
| Fractures | $200 - $10,000 | $250 - $12,000 |
| Dislocations | $200 - $10,000 | $250 - $12,000 |
| Second and Third Degree Burns | $100 - $15,000 | $150 - $17,500 |
| Concussions | $500 | $750 |
| Cuts/Lacerations | $75 - $700 | $100 - $800 |
| Eye injuries | $400 | $500 |
| **MEDICAL SERVICES & TREATMENT** | | |
| Ambulance (Ground) | $400 | $500 |
| Emergency Room Treatment | $200 | $250 |
| Abdominal or Thoracic Surgery | $2,000 | $2,500 |
| Physician Office Visit | $100 | $125 |
| **ACCIDENTAL DEATH & DISMEMBERMENT** | | |
| Accidental Death *(Basic and Common Carrier)* | $25,000 - $100,000* | $50,000 - $200,000* |
| Dismemberment | $1,000 - $40,000* | $1,250 - $60,000* |
| * Actual benefit amount paid depends on the type of Covered Loss. Child coverage can be found on the plan certificate after 1/1/2025. | | |
| **Hospital Coverage (Accident)** | | |
| Hospital Admission | $1,500 | $2,000 |
| Hospital Stay (per day) | $300 (Max 365 Days) | $400 (Max 365 Days) |
| Intensive Care Unit Stay (per day) | $300 (Max 365 Days) | $400 (Max 365 Days) |
| Age Reduction | None | |
| Pre-existing Condition | None | |
| **ANNUAL WELLNESS INCENTIVE** | $50 - *View the Wellness Incentives page for more details* | |

| High Plan Rates |
|---|
| Employee $18.45 |
| Employee + Spouse $27.74 |
| Employee + Child(ren) $31.40 |
| Employee + Family $40.32 |

| Low Plan Rates |
|---|
| Employee $14.58 |
| Employee + Spouse $22.14 |
| Employee + Child(ren) $24.30 |
| Employee + Family $31.59 |

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# HOSPITAL INDEMNITY

**What is Hospital Indemnity Insurance?** A plan which pays you benefits when you are confined to a hospital, whether for planned or unplanned reasons.

**Eligibility:** Eligible full-time employees as designated by the Board (page 2), spouse and children up to age 26

- Coverage through **MetLife**
- Benefits do not coincide with health insurance; payments made directly to you
- No waiting period and pre-existing condition limitation
- **No Health Questions - EVERY YEAR!**
- *The chart below is a sample of covered in-network services. After 1/1/2025, please see the Plan Certificate on your Employee Benefits website for a detailed listing of services at https://www.georgecountybenefits.com/.*

| Hospital Indemnity Benefits Quick Summary | High Plan | Low Plan |
|---|---|---|
| Hospital Admission | $1,000 | $500 |
| ICU Supplemental Admission | $1,000 | $500 |
| Admission Benefit (4 times per calendar year - separated by 90 days)<br>*If a covered person is readmitted within 90 days for the same or related sickness/injury for which we paid an Admission Benefit, an additional Admission Benefit is not payable.* | | |
| Confinement | $200 | $100 |
| ICU Supplemental Confinement | $200 | $100 |
| Confinement Benefit (365 days per calendar year) | | |
| Confinement Benefit for Newborn Nursery Care<br>(2 days per confinement) | $50 | $25 |
| Health Screening Benefit<br>(1 time per calendar year, per covered person) | $50 | $50 |

| High Plan Rates | |
|---|---|
| Employee | $18.51 |
| Employee + Spouse | $33.53 |
| Employee + Child(ren) | $29.98 |
| Employee + Family | $45.00 |

| Low Plan Rates | |
|---|---|
| Employee | $12.03 |
| Employee + Spouse | $21.71 |
| Employee + Child(ren) | $19.77 |
| Employee + Family | $29.45 |

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# WELLNESS INCENTIVES

**What are Wellness incentives?** An annual reimbursement for covered members who complete one of the eligible screening procedures on an elected Critical Illness, Cancer, Accident or Hospital Indemnity plan.

| Available Wellness Incentives | |
|---|---|
| Critical Illness, Accident & Hospital Indemnity Plans - MetLife | $50/per covered person per year |
| Cancer Plan - Colonial Life | $50/per covered person per year |

| What Qualifies as Wellness? | | |
|---|---|---|
| **MetLife Critical Illness, Accident & Hospital Indemnity Plans** | | **Colonial Life Cancer Plan** |
| **Included, but not limited to:**<br><br>• Annual physical exam<br>• Biopsies for cancer<br>• Blood test to determine total cholesterol/triglycerides<br>• Bone marrow testing<br>• Breast MRI, ultrasound, sonogram<br>• Cancer antigen 15-3 and 125 blood test for breast cancer (CA 15-3)/ovarian cancer (CA 125)<br>• Carcinoembryonic antigen blood test for colon cancer (CEA)<br>• Carotid doppler<br>• Chest x-rays<br>• Clinical testicular exam<br>• Colonoscopy; Digital rectal exam (DRE)<br>• Complete blood count (CBC)<br>• Coronavirus Testing<br>• Dental Exam<br>• Doppler screening for cancer<br>• Doppler screening for peripheral vascular disease<br>• Echo cardiogram; Electrocardiogram (EKG)<br>• Electroencephalogram (EEG)<br>• Endoscopy<br>• Eye exam<br>• Fasting blood glucose/plasma test<br>• Flexible sigmoidoscopy | • Hearing test<br>• Hemoccult stool specimen<br>• Hemoglobin A1C<br>• Human papillomavirus (HPV) vaccination<br>• Lipid panel<br>• Mammogram<br>• Oral cancer screening<br>• Pap smears or thin prep pap test<br>• Prostate-specific antigen (PSA) test<br>• Serum cholesterol test to determine LDL or HDL<br>• Serum protein electrophoresis<br>• Skin Exam; Skin cancer biopsy; screening<br>• Stress test on bicycle or treadmill<br>• Successful completion of smoking cessation program<br>• Tests for sexually transmitted infections (STIs)<br>• Thermography<br>• Ultrasounds for abdominal aortic aneurysms<br>• virtual colonoscopy | • Blood test for triglycerides<br>• Bone marrow testing<br>• Breast ultrasound<br>• CA 15-3 (blood test for breast cancer)<br>• CA 125 (blood test for ovarian cancer)<br>• Carotid Doppler<br>• CEA (blood test for colon cancer)<br>• Chest X-ray<br>• Colonoscopy<br>• Echocardiogram (ECHO)<br>• Electrocardiogram (EKG, ECG)<br>• Fasting blood glucose test<br>• Flexible sigmoidoscopy<br>• Hemoccult stool analysis<br>• Mammography<br>• Pap smear<br>• PSA (blood test for prostate cancer)<br>• Serum cholesterol test for HDL and LDL levels<br>• Serum protein electrophoresis (blood test for myeloma)<br>• Skin cancer biopsy<br>• Stress test on a bicycle or treadmill<br>• Thermography<br>• ThinPrep pap test<br>• Virtual colonoscopy |
| **How to File a Wellness Claim?** | | |
| • Call 1-800-GET-MET8. (800-438-6388)<br>• File your Health Screening Benefit online through the MyBenefits portal at www.metlife.com/mybenefits or by mail with a paper claim form. | | 1. Complete your wellness<br>2. File your claim online at Coloniallife.com and click on "File a Claim" button OR<br>3. Fax your claim form to 1.800.880.9325 OR<br>4. Mail your claim form to Colonial Life Wellness P.O. Box 100195 Columbia, SC 29202<br>• Wellness forms are located on your benefits portal, georgecountybenefits.com |



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# MEDCARECOMPLETE

## THE SMART WAY TO REDUCE YOUR HEALTHCARE COSTS

**What is MedCareComplete?** Provides a bundle of services constructed to save you time and money while simplifying your life.

**Eligibility:** Eligible full-time employees as designated by the Board (page 2), spouse & unmarried children up to age 26

- This is a supplemental benefit and does not replace health insurance
- Register @ MCC: Medcarecomplete.com/members to access the full range of benefits
- Register @ 1800MD: 1800md.com or 800.388.8785 to access telemedicine benefits

## Included with the MedCareComplete Membership:

- Medical Bill Negotiator
- Restoration Expert
- Medication Management
- Identity Loss Expense Reimbursement
- Telemedicine
- Social Media Tracking
- Medical & ID Theft Monitoring
- Sex Offender Alerts

## Medical Bill Negotiator

A medical bill advocate will identify and appeal common billing errors and overcharges on your behalf. Advocates provide continuous support throughout the appeal that typically results in an average savings of 40% on 80% of the bills reviewed.

## Telemedicine

| Individual Monthly Rate | Family Monthly Rate |
|---|---|
| $10.50 Per Month | $12.50 Per Month |
| NO COPAY | |

Get 24/7/365 on-demand telephone access to Board-certified physicians for diagnosis, and prescriptions for common and acute illnesses. **There are no copays and no limit to how many times you can utilize this feature.**

**Acute Illnesses include but are not limited to the following:**

| | | | |
|---|---|---|---|
| Asthma | Rashes | Urinary Tract Infections | Joint Aches |
| Fever | Bacterial Infections | Bronchitis | Pink Eye |
| Headache | Diarrhea | Ear Infection | Sore Throat |
| Infections | Heartburn | Gout | Cold & Flu |
| Migraines | Sinus Conditions | | Nausea & Vomiting |

## Medical & ID Theft Protection

Service monitors the internet for instances of your personal health and financial information to protect you from becoming a victim of identity theft. The security of your personal health information (PHI) can have a large impact on the medical care you receive.

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# LEGAL PLAN

MetLife

**What is a Legal Plan?** A plan which provides valuable legal and financial educational resources for a variety of life events and needs.

**Eligibility:** Eligible full-time employees as designated by the Board (page 2), spouse and dependent children (up to age 26)

- Coverage through **MetLife**
- Elder Care extends to parents and in-laws
- Visit https://www.legalplans.com/why-enroll or call 800.821.6400 for additional information
- Non-Members & Members create an account and select Employer for plan information (creating an account doesn't enroll you in plans)
- *Additional information can be found on your benefits website (https://www.georgecountybenefits.com/)*

| | Low Plan Quick Summary | High Plan Quick Summary | |
|---|---|---|---|
| **Money Matters** | • Identity Theft Defense<br>• Negotiations with Creditors<br>• Promissory Notes<br>• Debt Collection Defense<br>• Tax Collection Defense | • Identity Theft Defense<br>• Negotiations with Creditors<br>• Promissory Notes<br>• Debt Collection Defense<br>• Tax Collection Defense | • Personal Bankruptcy<br>• LifeStages Identity Management<br>• Tax Audit Representation<br>• Financial Education Workshops |
| **Home & Real Estate** | • Deeds<br>• Mortgages<br>• Foreclosure<br>• Tenant Negotiations<br>• Eviction Defense<br>• Security Deposit Assistance | • Deeds<br>• Mortgages<br>• Foreclosure<br>• Tenant Negotiations<br>• Eviction Defense<br>• Security Deposit Assistance | • Sale or Purchase (Primary or Vacation Home)<br>• Refinancing & Home Equity<br>• Property Tax Assessments<br>• Boundary & Title Disputes<br>• Zoning Applications |
| **Estate Planning** | • Simple and Complex Wills<br>• Healthcare Proxies<br>• Living Wills<br>• Codicils<br>• Powers of Attorney (Healthcare, Financial, Childcare, Immigration | • Simple and Complex Wills<br>• Healthcare Proxies<br>• Living Wills<br>• Codicils<br>• Powers of Attorney (Healthcare, Financial, Childcare, Immigration | • Revocable & Irrevocable Trusts |
| **Family & Personal** | • Guardianship<br>• Conservatorship<br>• Name Change<br>• Review of ANY Personal Legal Document<br>• School Hearings<br>• Demand Letters<br>• Affidavits<br>• Personal Property Issues<br>• Garnishment Defense<br>• Domestic Violence Protection | • Guardianship<br>• Conservatorship<br>• Name Change<br>• Review of ANY Personal Legal Document<br>• School Hearings<br>• Demand Letters<br>• Affidavits<br>• Personal Property Issues<br>• Garnishment Defense<br>• Domestic Violence Protection | • Juvenile Court Defense (Including Criminal Matters)<br>• Parental Responsibility Matters<br>• Review of Immigration Documents<br>• Prenuptial Agreement<br>• Adoption |
| **Civil Lawsuits** | • Disputes over Consumer Goods & Services<br>• Administrative Hearings<br>• Incompetency Defense | • Disputes over Consumer Goods & Services<br>• Administrative Hearings<br>• Incompetency Defense | • Civil Litigation Defense & Mediation<br>• Small Claims Assistance<br>• Pet Liabilities |
| **Elder Care Issues** | Consultation & Document review for issues related to your (or spouses) parents:<br>• Medicare<br>• Medicaid<br>• Prescription Plans<br>• Nursing Home Agreements<br>• Leases<br>• Promissory Notes<br>• Deeds<br>• Wills<br>• Power of Attorney | Consultation & Document review for issues related to your (or spouses) parents:<br>• Medicare<br>• Medicaid<br>• Prescription Plans<br>• Nursing Home Agreements<br>• Leases<br>• Promissory Notes<br>• Deeds<br>• Wills<br>• Power of Attorney | |
| **Vehicle & Driving** | • Repossession<br>• Defense of Traffic Tickets<br>• Driving Privileges Restoration<br>• License Suspension due to DUI | • Repossession<br>• Defense of Traffic Tickets<br>• Driving Privileges Restoration<br>• License Suspension due to DUI | |

| Monthly Rate (Includes spouse and children) | |
|---|---|
| **Low Plan** | **High Plan** |
| $8.00 | $16.50 |
| NO COPAY | |



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# UMMC TELEHEALTH PROVIDER

UMMC™ Health Care

**What is UMMC Telehealth?** Provides fast treatment for minor medical issues through a computer, tablet or mobile phone. Monitors patients with chronic illnesses remotely. Specialized care is also available statewide.

- **Reminder:** The University of Mississippi Medical Center (UMMC) is the preferred provider of telehealth services for the State and School Employees' Life and Health Insurance Plan
- To make an appointment, go to UMMC2You.com
- For questions about UMMC 2 You, email Telehealth@umc.edu or call (601) 815-2020
- Visit UMMC.com for more information and resources on telehealth

## Telehealth Dietitian Services:

A registered dietician will help you eat healthier and lower your risk for chronic diseases by managing:

- High blood pressure
- Type 2 diabetes
- Fatty liver
- Weight issues

## Telehealth Mental Care:

- Depression
- Anxiety
- PTSD
- ADHD
- Bipolar disorder
- LGBTQ support
- And more

## Telehealth Mental Care:

- Cold and flu
- COVID-19 symptoms
- Asthma and allergies
- Rashes and bites
- Aches and pains
- Other minor medical issues

| Coverage Costs Quick Summary | | |
|---|---|---|
| | Base Coverage Cost | Select Coverage Cost |
| Telehealth 24/7 Minor Medical | $10 Copay<br>Subject to deductible | $10 Copay<br>Not subject to deductible |
| Telehealth Mental Health | 20% Coinsurance<br>After deductible is met | 20% Coinsurance<br>After deductible is met |
| Telehealth Dietician Services | $10 Copay<br>Subject to deductible | $10 Copay<br>Not subject to deductible |
| Other network providers may offer these services.<br>Check with your provider to see if online doctor visits are available.<br>To be eligible for this benefit, all visits must be "real-time" video chats. | | |

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# FLEXIBLE SPENDING ACCOUNTS

CAS
Consolidated Admin Services

**What are Flexible Spending Accounts?** A pre-tax benefit account used to pay for out-of-pocket healthcare costs such as deductibles, copays, prescribed medications, and doctor visits.

**What are Dependent Care Accounts?** A pre-tax account used to pay for dependent care services such as daycare, before or after school programs, and elder care.

**Eligibility:** Eligible full-time employees as designated by the Board (page 2), spouse and children up to age 26 (Dependent care for children ages 12 and under)

- **Plan year is from January 1, 2025 to December 31, 2025,** employees must re-elect each year
- Only family status changes will allow you to change your annual election. The altered election must be consistent with the status change
- Transfer of funds between Dependent Care and Medical Care are prohibited
- Married and not filing jointly participants limited to $2,500 deferral for Dependent Care
- For a full list of eligible Flexible Spending Account expenses, please go to georgecountybenefits.com

| FSA Quick Summary | |
|---|---|
| **MEDICAL FSA ACCOUNT** | |
| Minimum Contribution | $300 annually |
| Maximum Contribution | $3,200 annually |
| Carryover Maximum*- Maximum participants can carry over if re-electing the plan | $640 |
| Total elected amount is available at the beginning of the plan year<br>**All receipts should be kept to submit if verification is requested**<br>*Carryover funds are only available if re-electing the plan for the next year | |
| **DEPENDENT CARE FSA ACCOUNT** | |
| Minimum Contribution | $300 annually |
| Maximum Contribution | $5,000 annually |
| Carryover Maximum | None |
| Amount is only available as it is payroll deductible | |
| **Plan Rules** | |
| RUNOUT PERIOD - *Time to turn in receipts for services rendered during the plan year.* | 30 days from plan end date |

| Admin Fee | |
|---|---|
| Fee Per Participant Per Month (One fee even if electing both Medical FSA and Dependent Care) | $3.50 |
| Replacement Card Fee | $10.00 |

**IMPORTANT NOTE:**
*Dependent Care FSA is for eligible expenses related to the care of your child, disabled spouse, elderly parent, or other dependent who is physically or mentally unable of or disabled for self-care (i.e. day care, adult day care).* Medical expenses for your dependent are not eligible for reimbursement under the Dependent Care.



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# HELPFUL FSA RESOURCES

## What is covered under Medical FSA Account?

- Medical coinsurance and deductible
- Doctor's office visit copays
- Emergency Room costs
- Dental copays and out-of-pocket costs
- Vision copays and out-of-pocket costs
- Contacts and Glasses
- Prescriptions
- *Please see the full eligibility list for other covered expenses*

**FSA Eligibility List**
https://www.consolidatedadmin.com/fsa-hsa-eligible-expenses/
**FSA Calculator**
(estimates how much you can save with an FSA)
https://fsastore.com/fsa-calculator

## Who is covered under a Dependent Care Account?

- Children ages 12 and under (including stepchildren, grandchildren, adopted or foster children, and children related to you who are eligible for a tax exemption on your federal tax return).
- Tax dependents residing with you and incapable of self-care (this could include your spouse, a child age 13 and over, and elderly parents).

## The CARES Act permanently reinstates over-the counter products, and adds menstrual care products for the first time, as eligible expenses for your FSA funds WITHOUT A PRESCRIPTION!

Eligible items for purchase without a prescription now include, but are not limited to:

- Pain relief medications, e.g., acetaminophen, ibuprofen, naproxen sodium
- Cold & flu medications
- Allergy medications
- Acne treatments
- Eye drops
- Stomach & digestive aids
- Pads, Tampons and Menstrual sponges
- Sleep aids
- Children's pain relievers, allergy medicines, and digestive aids

## Imagine what you could do with CAS' mobile app

**In the App Store go to:** Consolidated Admin Services
**Online Portal and Access to information:**
**https://www.consolidatedadmin.com/**

View account activity and check balance

Update your information

Enter and track expenses

Make a payment from your account

File claims with receipt images

Scan or view eligible expenses, and more!

**IMPORTANT NOTE:**
*Dependent Care FSA is for eligible expenses related to the care of your child, disabled spouse, elderly parent, or other dependent who is physically or mentally unable for self-care (i.e. day care, adult day care) or is disabled.* Medical expenses for your dependent are not eligible for reimbursement under the Dependent Care account.

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# ACTIVE HEALTH MANAGEMENT

**What is ActiveHealth Management?** Promotes health through providing resources to balance body, mind and spirit. Offers personalized recommendations to improve health outcomes and lower health care costs. MyAccessHealth Portal

**Health coaching:**
Ready to do something good for yourself? Now, it's easier than ever. This personalized coaching program can help you reach your health goals. You can learn to eat better, get more active and take charge of your health. You choose how to use the program. You can go at your own pace with online digital coaching. Or you can work with a coach in live, group coaching sessions or one to one over the phone.

**MyActiveHealth website:**
Managing your health can be challenging. But the tools that help you don't have to be. That's why we've made it easy to complete your assessment, track your activity, get wellness advice, find healthy recipes and more. You'll find it online at MyActiveHealth.com/Mississippi.

**ActiveHealth app:**
Always on the go? No problem. The ActiveHealth app is ready for you wherever you are. Just search for "ActiveHealth" in your app store and download the app.

**Digital coaching:**
What's your health goal? Digital coaching tools can help you achieve it. You can work on things like being more active, losing weight, eating better and more. You'll find daily activities, games, quizzes and videos to keep you moving forward.

**Your Health Education:**
Your well-being is more than your physical health. You can explore topics like pain management and heart health. You'll also find topics like stress management and financial wellness.

**Your Health Goals:**
Keeping healthy and staying healthy, it's the goal! Use your digital coach in your personal health website to help you reach your health goals. It can help you focus on setting weekly activities for being active, eating better and managing weight. You can also access activities, such as quizzes, videos and articles.

You can get started today. Call **1-866-939-4721** or log on **MyActiveHealth.com/Mississippi**.

Services are provided by ActiveHealth Management, Inc. Our programs, care team and care managers do not provide diagnostic or direct treatment services. We assist you in getting the care you need, and our program is not a substitute for the medical treatment and/or instructions provided by your health care providers..

Wellness programs are sponsored by Mississippi's State and School Employees' Health Insurance Plan's health initiative, Motivating Mississippi–Keys to Living Healthy, and ActiveHealth Management, the Plan's wellness vendor.

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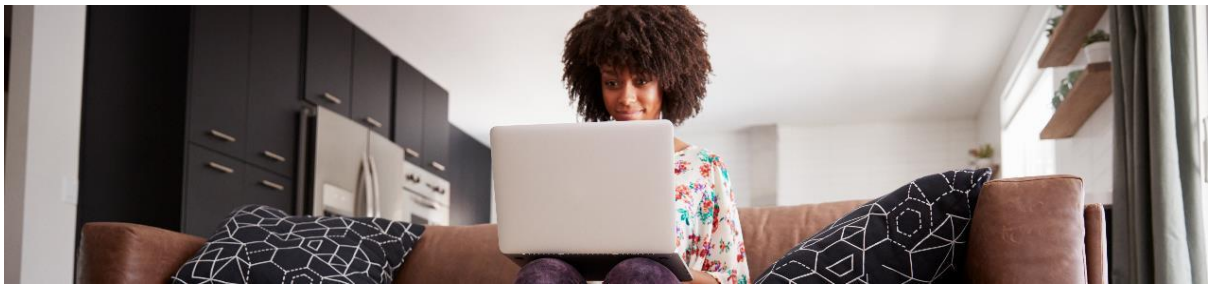
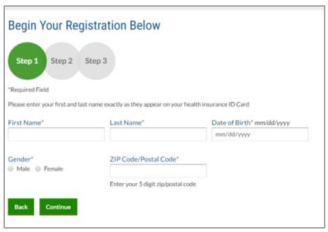
# ACTIVE HEALTH MANAGEMENT ACCOUNT



**It's easy to register for MyActiveHealth.com and start making progress toward your health goals.**

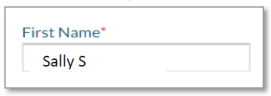
**Step 1:** Go to **www.MyActiveHealth.com**/[clientspecificname] and click **Create an Account**.

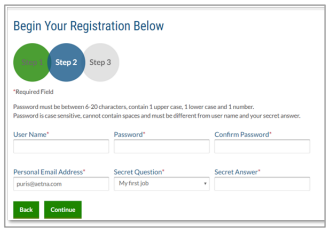
You can call **xxx-xxx-xxxx** if you have problems with your account.



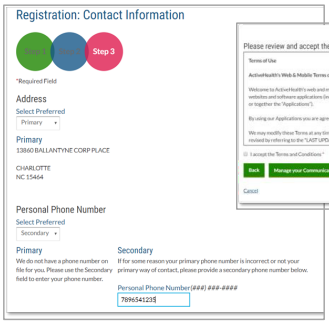

**Step 2:** Enter your information and click **Continue**.

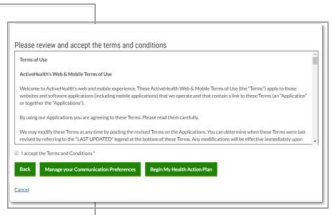
You must enter your name exactly as it appears on your insurance card. If your name on your insurance card includes your middle initial, then type in your first name, add a space, and type in your initial in the first name field (or section, block, etc.)




**Step 3:** Set up a user name, password and secret question. Then click **Continue**.




**Step 4:** Confirm your contact information. Then review and accept the terms and conditions.

Services are provided by ActiveHealth Management, Inc. Our programs, care team and care managers do not diagnose or treat members. We assist you in getting the care you need, and our program is not a substitute for the medical treatment and/or instructions provided by your health care providers.

Client logo

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# MISSISSIPPI STATE HEALTH INSURANCE PLAN

BlueCross BlueShield of Mississippi
It's good to be Blue.

**Notice:** George County School District offers eligible employees health insurance through the Mississippi State Health Insurance Plan. During the annual open enrollment, employees have the opportunity to review all available options and make elections for the 2025 Plan Year.

- **Coverage through BlueCross BlueShield of Mississippi**
- Please visit the Mississippi Health Insurance website for plan eligibility rules
- All qualifying life events must be submitted through the George County School District benefits department
- It is important to review plan options and coverage each year

## BCBS of Mississippi Website:

https://www.bcbsms.com/

## More Questions?

Visit the George County Schools' benefits portal for all links, plan documents, and rates.

georgecountybenefits.com

## NEW WELLNESS INCENTIVES FOR 2025 VISIT:

http://knowyourbenefits.dfa.ms.gov/wellness-preventive-coverage/

## State Employee Provider Directory:

https://www.myaccessblue.com/AHSProviderSearchWeb

## Mississippi State Health Insurance Plan

Email: KnowYourBenefits@dfa.ms.gov

BlueCross BlueShield of Mississippi Phone: 800.709.7881

Office of Insurance Phone: 601.359.3411 or TF 866.586.2781

## Frequently Asked Questions

**1. How do I know what type of coverage I have now?**

If you are not sure what type coverage you currently have, you can call Blue Cross & Blue Shield of Mississippi (BCBSMS) at 800.709.7881, or the Office of Insurance at 601.359.3411 or toll-free 866.586.2781.

**2. How does each type of coverage work?**

**Under Select Coverage**, there is a separate deductible (individual and family) for medical expenses and a separate individual deductible for prescription drugs. Once the appropriate medical deductible is met, you will start paying 20 percent of the allowable charge for covered medical services. Regardless of whether or not you have met your medical deductible, you will have to meet the $75 individual prescription drug deductible before you start paying a co-payment for a covered drug. Under Select Coverage, there is no prescription drug copayment maximum, so you will continue to pay the copayment for your drug each time you have it filled for the remainder of the year.

**Under Base Coverage**, you will have to meet the full deductible ($1,800 for individual coverage, $3,300 for family coverage) before any covered medical or prescription drug charges will be paid by the Plan. This means that you will pay the full allowable charge for both medical and prescription drugs until the deductible is met. Once the deductible is met, you will start paying 20 percent of the allowable charge for covered medical services and a copayment for covered drugs. There is a $75 preventive medications individual deductible. Other medications are subject to the calendar year deductible. Once your coinsurance/co-payment maximum is met, the Plan will pay 100 percent of the allowable charge for both covered prescription drugs and medical services.

**3. What are some of the main differences in Base and Select Coverage?**

The premium rates differ for Base and Select Coverage. Another difference between Base and Select Coverage is how the deductibles work. Under Base Coverage, all charges (medical and prescription drug) apply to the calendar year deductible. Under Select Coverage, there is a separate deductible for medical charges and a separate deductible for prescription drug charges.



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# MISSISSIPPI STATE HEALTH INSURANCE PLAN

BlueCross BlueShield of Mississippi
It's good to be Blue.

**Plan Pricing as of 1.1.2025**

Legacy - Initially Hired before 1/1/2006

Horizon - Initially Hired on or after 1/1/2006

| | LEGACY EMPLOYEES | | | | HORIZON EMPLOYEES | | | |
|---|---|---|---|---|---|---|---|---|
| **ACTIVE EMPLOYEES** | **BASE** | | **SELECT** | | **BASE** | | **SELECT** | |
| | TOTAL PREMIUM | EMPLOYEE PORTION | TOTAL PREMIUM | EMPLOYEE PORTION | TOTAL PREMIUM | EMPLOYEE PORTION | TOTAL PREMIUM | EMPLOYEE PORTION |
| EMPLOYEE* | $482 | $0 | $502 | $20 | $482 | $0 | $532 | $50 |
| EMPLOYEE + SPOUSE | $1,009 | $527 | $1,102 | $620 | $1,009 | $527 | $1,132 | $650 |
| EMPLOYEE + SPOUSE & CHILD(REN) | $1,284 | $802 | $1,378 | $896 | $1,284 | $802 | $1,408 | $926 |
| EMPLOYEE + CHILD | $619 | $137 | $713 | $231 | $619 | $137 | $743 | $261 |
| EMPLOYEE + CHILDREN | $832 | $350 | $924 | $442 | $832 | $350 | $954 | $472 |

* The State pays 100% of the employee's premium for Base Coverage. Active employees enrolling in Select Coverage must pay a portion of the employee premium.

| | LEGACY EMPLOYEES | | HORIZON EMPLOYEES | |
|---|---|---|---|---|
| **RETIRED EMPLOYEE (NON-MEDICARE ELIGIBLE)** | **BASE** | **SELECT** | **BASE** | **SELECT** |
| RETIREE | $554 | $577 | $884 | $916 |
| RETIREE + SPOUSE (NON-MEDICARE) | $1,160 | $1,267 | $1,772 | $1,888 |
| EMPLOYEE + SPOUSE & CHILD(REN) (NON-MEDICARE) | $1,476 | $1,584 | $1,981 | $2,098 |
| RETIREE + CHILD | $712 | $788 | $1,042 | $1,127 |
| RETIREE + CHILDREN | $955 | $999 | $1,285 | $1,338 |
| RETIREE + SPOUSE (MEDICARE) | N/A | $812 | N/A | $1,151 |
| EMPLOYEE + SPOUSE & CHILD(REN) (ONE OR MORE MEDICARE) | N/A | $1,023 | N/A | $1,362 |
| **RETIRED EMPLOYEE MEDICARE ELIGIBLE** | **BASE** | **SELECT** | **BASE** | **SELECT** |
| RETIREE | N/A | $235 | N/A | $235 |
| RETIREE + SPOUSE (NON-MEDICARE) | N/A | $925 | N/A | $1,207 |
| EMPLOYEE + SPOUSE & CHILD(REN) (NON-MEDICARE) | N/A | $1,242 | N/A | $1,417 |
| RETIREE + CHILD | N/A | $446 | N/A | $446 |
| RETIREE + CHILDREN | N/A | $657 | N/A | $657 |
| RETIREE + SPOUSE (MEDICARE) | N/A | $470 | N/A | $470 |
| EMPLOYEE + SPOUSE & CHILD(REN) (ONE OR MORE MEDICARE) | N/A | $681 | N/A | $681 |

| | LEGACY EMPLOYEES | | HORIZON EMPLOYEES | |
|---|---|---|---|---|
| **COBRA** | **BASE** | **SELECT** | **BASE** | **SELECT** |
| PARTICIPANT | $491 | $512 | $491 | $542 |
| PARTICIPANT + SPOUSE | $1,029 | $1,124 | $1,029 | $1,154 |
| PARTICIPANT + SPOUSE & CHILD(REN) | $1,309 | $1,405 | $1,309 | $1,436 |
| PARTICIPANT + CHILD | $631 | $727 | $631 | $757 |
| PARTICIPANT + CHILDREN | $848 | $942 | $848 | $973 |
| **COBRA DISABILITY EXTENSION** | **BASE** | **SELECT** | **BASE** | **SELECT** |
| PARTICIPANT | $723 | $753 | $723 | $798 |
| PARTICIPANT + SPOUSE | $1,513 | $1,653 | $1,513 | $1,698 |
| PARTICIPANT + SPOUSE & CHILD(REN) | $1,926 | $2,067 | $1,926 | $2,112 |
| PARTICIPANT + CHILD | $928 | $1,069 | $928 | $1,114 |
| PARTICIPANT + CHILDREN | $1,248 | $1,386 | $1,248 | $1,431 |

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# MISSISSIPPI DEFERRED COMPENSATION PLAN

mdc
PLAN • SAVE • GROW

## Part of financial health involves knowing how much you need in retirement. Consider supplementing your future savings through the Mississippi Deferred Compensation Plan

### 1. It's automatic and controlled by you
- You choose the amount you want to save.

### 2. It probably costs less than you think
- You can start saving with as little as $25 per month.

### 3. Give yourself some credit
- You may be eligible for an IRS Saver's Credit on the first $2,000 you contribute to MDC, based on your adjusted gross income and tax filing status.

### 4. Starting early makes a difference
- Waiting could impact how much you'll have for retirement.

### 5. Lower expenses
- With MDC, you may have the potential for lower investment management expenses.

### 6. Investment assistance
- MDC provides a variety of investment choices so you can build the right mix for your future.

### 7. Local people for help
- Local MDC representatives are ready to help you plan for your future.

### 8. Resources at your fingertips
- Take advantage of convenient resources and plan educational materials available 24/7 at www.mdcplan.com.

### 9. Stay as long as you like
- Even after you retire or separate from service, you can keep your account right where it is so you have access to all the MDC resources.

### 10. A partner for your future
- PERS oversees MDC on an ongoing basis on your behalf.

### How do I enroll?

- **You can easily enroll online by visiting www.mdcplan.com.**
- **Prior to enrolling, contact your human resources department or your local MDC representative to obtain a Plan Enrollment Code flier, which will include a specific code needed to enroll online.**
- **Once you have the Plan Enrollment Code flier, visit www.mdcplan.com and click on the REGISTER button.**
- **Select I have a plan enrollment code and follow the prompts on the website.**
- **Visit www.mdcplan.com for more information, or to find your local MDC representative.**
- **For more information, please visit https://www.msdbbenefits.com/state-life-add.**



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# MISSISSIPPI DEFERRED COMPENSATION CONTACT

EMPOWER

## Meet your dedicated and local representative for your Mississippi Deferred Compensation

Your Retirement Plan Advisor is available to provide you one-on-one counseling with personalized account services at no cost to you, such as:

- Enrollment
- Contributions
- Retirement readiness
- Investment choices
- Account review
- Comparison of retirement plans
- Rollovers — Consider all your options and their features and fees before moving money between accounts.

Your local Retirement Plan Advisor is a salaried professional with one goal:

to help prepare you for retirement.

Meeting your retirement goals can start with your local Retirement Plan Advisor! To set up a one-on-one appointment or to find out about upcoming retirement planning seminars, contact Craig at **228-355-2129** or **.**

**Craig Finn**
Retirement Plan Advisor

**craig.finn@empower.com**

Mobile: 228-355-2129

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Mississippi Deferred Compensation

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# RETIREMENT INFORMATION

**What is PERS?** PERS is the Public Employees' Retirement System of Mississippi. The Public Employees' Retirement System of Mississippi (PERS) is a governmental defined benefit plan qualified under Section 401(a) of the Internal Revenue Code. PERS was established by the state Legislature in 1952 to provide benefits to eligible Mississippi public employees working for state agencies, universities, community colleges and public schools, as well as counties, cities, and other participating political subdivisions.
The mission of PERS is to provide secure benefits to our members and consistently deliver quality service by meeting our customer's needs, operating efficiently and transparently, investing and managing assets prudently, and acting in the best interest of all members.

## Visit the PERS website for helpful resources - pers.ms.gov

**PERS Contact Information**

Phone: 800.444.7377 / 601.359.3589
Email: customerservice@pers.ms.gov
Hours: Monday - Friday 8:00am - 5:00pm

# 403B CARRIER CONTACTS

**What are 403Bs?** A 403B is a tax-deferred retirement plan that allows you to set aside pre-tax dollars out of your paycheck to save for retirement.

### PenServ Plan Services

Phone: (803) 791-4923
Fax: (803) 791-5925
Hours: 8:00 am - 5:00 pm, Monday through Friday
Email: service@penserv.com
Mailing Express: 102 Trade Zone Drive, West Columbia, SC 29170
Standard Mail: P.O. Box 3109, West Columbia, SC 29171



**Disclaimer:** The *Benefits Guide* is provided for illustrative purposes only and actual benefits and/or premiums may change after printing. Eligibility, benefits, limitations, services, premiums, claims processes and all other features & plan designs are offered and governed exclusively by the insurance provider or vendor contract and associated Summary Plan Description (SPD). All employees should review carrier documents posted on your employer's benefits website or request documents before electing coverage.

# TERMS & DEFINITIONS

*Definitions Disclaimer: The definitions below are for illustrative purposes only. Actual plan definitions are governed exclusively by the provider contract and associated Summary Plan Description (SPD).*
*Please visit www.georgecountybenefits.com/ for each plans policy document/certificates and actual benefit definitions.*

**Age Reduction** - A reduction of the face amount of your group insurance policy when you reach a certain age. Please review the age reductions on the Voluntary Term Life Insurance.

**Beneficiary** - A life insurance beneficiary is the person or entity that will receive the money from your policy's death benefit when you pass away. When you purchase a life insurance policy, you choose the beneficiary of the policy. Please update your beneficiaries as needed for your Voluntary Term Life Insurance and/or Permanent Life Insurance.

**Conversion** - The option on your term life policies to convert your term life insurance policy into a permanent life insurance policy. Please refer to the plan certificate for detail on converting your term life coverage.
Note: converting your term life policy will change the rate.

**Dependents** – The definition of eligible dependents vary by insurance carrier. Eligible dependents may include your spouse and taxable dependent children who are under the age of 26. Child marital status will impact benefit eligibility. Please refer to each plans policy document for verification of dependent eligibility.

**Elimination Period** - A period of consecutive calendar days that you must be out of work before you are eligible to receive benefits. Refer to the Disability page for more details.

**Flexible Spending Accounts** - An employee benefit which allows you to set aside money from your paycheck, pre-tax, to pay for healthcare and dependent care expenses. There are two types of flexible spending accounts:
A Health Care FSA can cover medical, dental or vision expenses that you would otherwise pay for out of pocket.
A Dependent Care FSA, also known as a Dependent Care Assistance Program (DCAP), covers employment-related expenses for child care. Please review the Flexible Spending Account pages for additional details.

**Guaranteed Issue** - A plan's guaranteed issue (GI) is the amount of life insurance available to an employee without having to provide Evidence of Insurability, or EOI/ no health questions. This is particularly helpful if you have health issues which may make you otherwise uninsurable. Many of the benefits offered have GI amounts for new hires. Please review these within your new hire window.

**Portability** – The portability provision allows you to take coverage with you when you leave your place of employment. The portability rate will differ from current plan rates and are determined by the plan carrier at the time of portability. Portability must be completed with a specific time frame. Please refer to the plans policy certificate for details on portability.

**Pre-existing Condition** - An illness or injury experienced before enrollment in an insurance plan may be considered a pre-existing condition. Pre-existing conditions can include health issues such as cancer, diabetes, lupus, depression, acne, pregnancy, or just about any other health condition you can imagine. Refer to each plans document for pre-existing condition limitations.

**Qualifying Life Event Change** - A change in your situation — like getting married, having a baby, or losing benefit coverage — that can make you eligible for a Special Enrollment Period, allowing you to enroll in insurance outside the yearly Open Enrollment Period.

**Mississippi State Health** - It serves as the state's administrator of health insurance coverage for state employees, teachers, public school employees, retirees, and former employees, and covered dependents. Coverage is through Blue Cross Blue Shield.

**Term Insurance VS. Permanent Life Insurance** - There are two basic life insurance options offer through your employer: term and permanent. The term life offered is a group policy which allows you to get more benefit for less premium. Permanent lasts your entire lifetime. Term Life and Permanent Life work best when used in conjunction with one another. Term Life can protect your family in your younger working years and Permanent Life can protect your family in your retirement years. Please review the Life Insurance 101 pages for more details.

**Voluntary Benefits** - Products offered by your employers but paid by employees via payroll deductions. The voluntary benefits within this guide are life insurance, disability insurance, vision insurance, dental insurance, critical illness insurance, cancer insurance, accident insurance, Hospital Indemnity, telemedicine insurance, and legal insurance.

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Service Hub

**Visit** https://www.georgecountybenefits.com/

CampUs BENEFITS

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# The Service Hub Helps With:

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- Benefits Education
- Evidence of Insurability
- Qualified Life Event Changes
- Claims
- Card Requests
- Benefit Questions
- COBRA Information

**Phone:** 866.433.7661, Opt 5
**Email:** mybenefits@campusbenefits.com
**Benefits website address:** https://www.georgecountybenefits.com/

The 2025 Benefits Enrollment Guide is provided for illustrative purposes only. Actual benefits, eligibility, services, premiums, claims processes and all other features and plan designs for coverage offered is governed exclusively by the insurance contract and associated Summary Plan Description (SPD). In case of discrepancies between this document and the insurance contract and SPD, the contract and SPD will prevail.

We reserve the right to change, modify, revise, amend or terminate these plan offerings at any time. Updates, changes and notices are all located at georgecountybenefits.com. These should be reviewed fully prior to electing any benefits.