



Summary of Benefits

July 1, 2022 - June 30, 2023 Plan Year

HARALSON COUNTY SCHOOLS BENEFITS

There are **three ways** to enroll for HARALSON COUNTY SCHOOLS benefits

1. Face to Face: Schedule an appointment with a Benefits Counselor
2. Call Center 800-523-7135 Mon-Fri, 9AM – 4:30PM
3. Self service from houze.org/haralson



LOGIN with your User ID/Password if you have created an account.

OR

REGISTER with the Company Identifier: HaralsonCountySchools

The PIN CODE is the last 4 digits of your Social Security Number

Use the website to find benefits/plan information,

- **Employees should re-enroll and verify benefits every annual enrollment period** to verify the correct beneficiary and dependents, including elected coverage(s).

It is encouraged that all employees review all benefits and plans each year so you are aware and acknowledge updates in rates, plan details and carriers.

- **What happens if you take no action?** Medical and Dependent Day Care Flexible Spending Accounts will not be re-enrolled. All other elected benefits (along with any rate/plan/carrier change) will rollover to the same election for the 2022-23 Plan Year.

This is an outline of employee benefits provided for full-time employees of the Haralson County School System. The summaries shown are for illustration only. Employees should consult the actual certificate/booklets or policies of each plan for the exact specifications and limitations. Employees are offered the opportunity to enroll in these benefits during the first 30 days of employment or to make changes to their current benefits prior to the beginning of each Plan Year. Employees not electing to enroll in a benefit when first eligible, may be required to provide evidence of insurability if they enroll as “late entrants”. For additional information about these benefits refer to houze.org/haralson.

ENROLLMENT AND ADMINISTRATION PROVIDED BY:
800-523-7135



Health and Wellness Plans



State Health Medical Enrollment runs January-December each year through myshbpga.adp.com/shbp/. Employees may enroll in one of several health plans offered by the State Health Benefit Plan (SHBP). Please review your Decision Guide for details of the various plans offered. To review plan design, refer to <https://shbp.georgia.gov/>

Employee Tier	HRA Anthem Gold	HRA Anthem Silver	HRA Anthem Bronze	HMO Anthem	HMO UHC	HMO Kaiser	HDHP UHC
Employee Only	\$175.68	\$114.32	\$76.58	\$143.03	\$174.49	\$154.13	\$61.83
Employee/Spouse	\$436.33	\$307.47	\$228.22	\$367.76	\$433.83	\$391.49	\$197.24
Employee/Children	\$320.11	\$215.80	\$151.64	\$264.61	\$318.09	\$283.60	\$126.57
Family	\$580.76	\$408.95	\$303.28	\$489.34	\$577.43	\$520.96	\$261.98

Anthem = Anthem/BlueCrossBlueShield | UHC = United HealthCare | HDHP = High Deductible Health Plan

PLAN DESCRIPTIONS

myshbpga.adp.com



Tobacco Surcharge: Additional \$80 monthly surcharge will be added to your monthly premium if you or any of your covered dependents have used tobacco products in the previous 60 days.

Qualifying Event Changes – are allowable during the year if completed within 31 days of the event and proper documentation is received within that time period. Qualifying Events include birth/adoption/death, marriage/divorce/legal separation, gaining/losing employment, gaining/losing eligibility for benefits, etc. and must be initiated with State Health for Medical and Haralson County for non-medical benefits.

Dental

MetLife—Employees choose between two Options. The In-Network MAC Plan that pays 100% of preventive services, 100% of basic services, 60% of major services and 50% for Adult/Child Orthodontics. This Plan pays out of network providers at the network discounts, which will result in balance billing if using an out of network provider. The Open Network UCR Plan pays 100% of preventative services, 80% of basic services, 50% major services and 50% for Adult/Child Orthodontics. Out of Network is paid at 90% Usual Customary and Reasonable (UCR), which will likely not cause balance billing when using an out of network provider. Both plans include \$50 Plan Year deductible, Plan Year maximum is \$1,250 per covered participant. Dependent Children can be covered to age 26. There is a \$1,000 life time maximum on orthodontia.

Plan	Monthly Payroll Deduction
Employee Only	\$33.62
Full Family	\$98.92

Vision

Spectera/United Healthcare –The Vision Plan provides vision examinations, lenses and frames (or contact lenses) at participating providers. Participants pay a co-pay and the insurance plan pays the difference up to specified limits. The co-pays are \$0 for the vision examination and \$10 for materials (frames and lenses or contacts in lieu of frames and lenses). Benefits include one exam every 12 months, one pair of lenses every 12 months and one pair of frames every 24 months. Children are covered to age 26. Enhancements included Children’s Eye Program, additional Maternity Benefit, GlassesUSA, Warby Parker, LensCrafters & 1-800-Contacts are in-network as well as Walmart Vision and other retail providers.

Plan	Monthly Payroll Deduction
Employee Only	\$7.90
Employee + Spouse	\$15.21
Employee + Children	\$15.93
Family	\$24.54

Medical & Dependent Care Flexible Spending Account

AmeriComp Benefits— Employees may set aside dollars, on a “pre-tax” basis, into a Flexible Spending Account to pay for certain medical, prescriptions, including over the counter medications, dental, vision, hearing, related expenses that are not covered by insurance. The maximum for Medical FSA is \$2,400/year and the annual amount can be used anytime during the plan year. Daycare flexible spending account limit is \$5,000 for a married couple filing jointly or single parent and \$2,500 for a married person filing separately. For the 2021/2022 Plan Year, amounts in either account will carryover to the 2022/23 Plan Year. Typically there is a one year \$550 rollover for Medical FSA and ‘use-it-or-lose-it’ for Daycare Accounts that are scheduled to begin in the 2023 Plan Year.

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Life and Disability Plans



Basic Group Life

The Hartford—Each full time employee is provided \$10,000 of Group Life Insurance, paid for by Haralson County Schools. The benefit includes an equal amount of accidental death and dismemberment, and an accelerated death benefit option of 80% for terminal illnesses. There is a reduction schedule starting at age 65. This coverage terminates upon retirement or termination of employment.



Short-Term Disability Plan

The Hartford—Employees have two options and can select short-term disability coverage with benefits beginning on the 8th day or the 15th day for both accident and sickness. Benefits continue for 26 weeks as long as continuously disabled. Benefit elected will be equal to 60% of the monthly salary, not to exceed \$1000 weekly benefit. Plan includes a 3/12 Pre-Existing Limitation. Health Statement must be completed to apply after initial enrollment. Employees can choose sick leave or disability payments, but not both.

Employee Group Supplemental Life

The Hartford—Employees may elect to increase their Group Life insurance benefits in increments of \$10,000 up to \$500,000. If applied for when first eligible as a new hire, \$150,000 or maximum of 3X salary is available as guarantee issue. Employees can increase \$10,000 up to Guarantee Issue Limits without providing evidence of insurability at Annual Enrollment. This benefit includes an equal amount of accidental death and dismemberment, an accelerated death benefit option, and waiver of premium with coverage being continued until age 65 or retirement, whichever is earlier.



Dependent Spouse Group Supplemental Life Insurance

The Hartford—Each employee is eligible to select an amount of coverage on their spouse equal to 50% of the amount of employee optional life selected. Selection must be in increments of \$5,000. If applied for when first eligible as a new hire, \$20,000 can be issued on a guarantee issue basis. Increases of \$5,000 can be done to GI limits at Annual Enrollment without EOI.

Dependent Child(ren) Group Supplemental Life Insurance

The Hartford—Employees can elect to purchase this coverage for their dependents. Employees must have elected the Optional Employee Life in order to apply for Dependent Coverage. If both parents are employees, only one parent can cover children and employees cannot be covered as both an employee and a dependent. No Health Statement is required for coverage.

Long-Term Disability Plan

The Hartford— If enrolled for long-term disability benefits begin on the 181st day of disability and continue to age 65 if disability occurs prior to age 60, and continues at least 12 months if over 60 when disability begins. Monthly benefit will be equal to 60% of the monthly salary, not to exceed \$5000. Rates are based on age/earnings as of July 1st of each year. Plan includes a 3/12 Pre-Existing Limitation. Health Statement must be completed to apply after initial enrollment. Employees can choose sick leave or disability payments, but not both.

Short Term and Long Term Disabilities

A Pre-existing Condition is an injury, sickness or pregnancy for which the employee, in the past three (3) months, before the effective date; received medical treatment, consultation, care, services, prescription medications or had medications prescribed. No benefits would be payable under the plan in connection with a disability that is due to a pre-existing condition unless the employee's elimination period started after they were insured under the plan for twelve (12) consecutive months.

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Accident Insurance

Aflac—Employees can elect an Off the Job Accident Plan through Aflac. The Aflac Group Accident plan provides cash benefits directly to employees that help with out-of-pocket expenses - medical and nonmedical - associated with treatment in the event of a covered accident. It also includes a \$50 wellness rider per covered insured, each calendar year. No waiting period.

Hospital Indemnity

Aflac—Employees choose to receive a daily benefit of \$100 or \$300 if hospitalized. There is an initial confinement benefit of five (5) times the daily benefit, and a rehab facility benefit of 50% of the daily benefit. Plans are available on employee, spouse and child(ren). A \$50 Wellness benefit is included (50% for children). There is no pre-existing limitation or waiting period and plans are Guarantee Issue.

Critical Illness

Aflac—The policy provides a lump sum benefit to the policy holder if diagnosed with a covered illness (Heart Attack, Cardiac Arrest, Coronary Artery Bypass Surgery (25%), Organ Transplant, Bone Marrow/Stem Cell Transplant, Kidney Failure/End Stage Renal Failure or Stroke. Additional benefits included are: Coma, Severe Burns, Paralysis, Loss of Sight/Speech or Hearing. Plus Advanced Alzheimer's, Parkinson's, Benign Brain Tumor. An annual wellness benefit is included of \$50 for each adult policyholder. Employee can elect \$10,000 or \$20,000 and spouse coverage cannot exceed 50% of the employee. Children will be covered at 50% of the employee election.



Cancer Insurance -

AllState—There are two levels of the Cancer Plan being offered. The varying levels pay different benefits for cancer diagnosis and associated cancer treatment benefits. The policy covers 29 other diseases. See the policy for exact benefits. Coverage is Guarantee Issue during initial enrollment option as a new hire. Late entrants must complete application for coverage.

Cancer Guardian

Genomic Life—This program empowers employees to identify your genetic risk in advance for certain hereditary cancers, cardiac abnormalities and other conditions. This program provides services that are not typically available through medical insurance. Preventative Hereditary Risk Screening Test, with genetic counselors available to review the results. Post diagnosis Advance DNA testing of the cancer specific to your genetic makeup. The program includes a Medical Records Platform, dedicated cancer support specialists, follow-up testing, and cancer information line for family members.

Individual Life Insurance

Unum—Whole Life Insurance Policies can also be enrolled where the death benefit and premiums are level for the life of the policy, as long as premiums are paid. Coverage is available on the Employee, Spouse, Children and Grandchildren.

Long-term Care Insurance

Unum—Employees can select coverage with monthly benefits from \$2,000 to \$6,000 per month with benefit durations of 3 years or 6 years on themselves and/or family members. Policies are portable and premiums do not increase with age. Enrollment is available only during annual enrollment periods. Guarantee issue is available for employees during their first annual enrollment.

The information in this guide describes the employee benefit plans in general terms. This information is not intended to replace the legal plan documents, summary plan descriptions, group policies or certificates of coverage that describe specific benefits, limitations or exclusions.