



SUMMARY OF BENEFITS
JULY 1, 2022 - JUNE 30, 2023

Below is an illustrative summary of benefits provided and available to full-time employees of the Troup County Board of Commissioners. Employees should consult the actual certificate, booklet or policy of each plan for the exact specifications and limitations. The Plan Year is July 1 - June 30. Benefits based on age or salary are as of July 1 each Plan Year. For additional information refer to www.houze.org/TroupCo.

Health Plans



Employees are eligible to enroll in a Troup County sponsored medical plan. Claims are processed by the third-party administrator, EBMS.

You can use any facility or provider at the same benefit level. If you use one of the preferred providers, they have agreed to our discounted payment arrangement.

Current Preferred Facility:

WellStar West Georgia Medical Center

Current Preferred Physician Providers:

WellStar West Georgia Medical Physicians,
PHCS Practitioner Only Network



If you use any other facility or provider, you will have the same benefits but may receive a “balance bill” for the discounted amount. If you do receive a balance bill, you simply need to send it to ELAP and they will handle it from there and work with the provider. After you have met your deductible and paid your coinsurance portion, your remaining responsibility is only to forward any correspondence you receive to ELAP.

You can fill prescriptions at the WeCare Clinic at no cost to you. For prescriptions filled through retail pharmacies, you can reduce your copayment amount by going to one of the preferred pharmacies. A preferred pharmacy is any pharmacy that is **NOT** CVS, Rite Aid, Sams, Target, Walgreens or Walmart. If you take a Tier 4 or specialty medication, you will be contacted by a pharmacy consultant who will help you receive your prescription at the lowest possible cost to you.

Summary Plan Documents and Benefits Coverage are available online. For a paper copy, contact Human Resources or Houze & Associates, Inc.

WeCare Clinic WeCare tlc

The WeCare Clinic offers free benefits to employees and their covered dependents. Office visits, basic laboratory tests and prescription drugs are offered **at no cost**. An initial set-up office visit is required for prescription drugs to be dispensed through the Clinic.

The Clinic is located at 900 Dallis Street, Suite C, LaGrange, GA. Appointments can be made through 706-298-4914 Option 1.

Reminder: To add dependents to the County’s Medical or Dental Plans, employees must provide copies of documentation to verify dependent eligibility.

Spouse verification needs marriage license; Dependent child verification requires birth certificate.

Social Security Numbers are required to add Medical Coverage for Dependents. Due to the Minimum Essential Coverage (MEC) reporting requirements under the Affordable Care Act (ACA), all health plan insurers must provide this information to the Internal Revenue Service (IRS). The data received by the IRS will be used to verify coverage information on your individual income tax return.

Qualifying Event Benefit Changes are allowable during the year if completed with Human Resources within 30 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.

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Dental Insurance



The plan pays 100% of preventative services; 80% for diagnostic, therapeutic, and basic restorative services; and 50% for major and orthodontic services after a deductible. Maximum benefit is \$1,500 per year for all services (\$1,000 lifetime for orthodontic). A \$50 plan year deductible is waived for preventative services. Children are covered to age 26.

Flexible Spending Accounts



Under the Cafeteria Plan employees may set aside dollars, on a “pre-tax” basis into two separate accounts.

Medical FSA is elected to pay for medical, dental, vision and hearing related expenses that are not covered by insurance. The maximum election is \$2,850 with total election available at the beginning of the plan year. Added is a \$550 rollover feature for unused medical FSA elections. Over the counter medications/other items are also eligible.

Dependent Care FSA is to pay for child or dependent daycare expenses. As these expenses are incurred, claims can be filed for reimbursement. Dependent FSA has an IRS mandated maximum of \$5,000 (\$2,500 if married and filing taxes separately). Elections are subject to the IRS “use-it-or-lose-it” rule.

Disability



Short-Term

This Plan provides weekly earnings up to a maximum benefit of \$600 for Sickness/Accident (off the job) when you can't work. Benefits start after 15 days and will continue as long as disabled up to 26 weeks. Maternity benefits are paid the same as for any other illness. Benefits **cannot** be received in addition to any “sick leave” pay (employees are required to substitute accrued sick & vacation leave for unpaid FMLA Leave). Benefit includes 3/12 Pre-existing condition limitation.

Long-Term

Employees can elect 60% of monthly earnings to a monthly maximum of benefit of \$6,000 if an employee becomes disabled and can't work. The benefit is payable after 6 months of disability through age 65 or normal Social Security Retirement Age as long as continually disabled. This benefit will be offset by any other group benefits, workers compensation or social security disability benefits. Benefit includes 3/12 Pre-existing condition limitation.

Group Term Life Insurance



Employees are provided one (1) times earning up to \$50,000 of Group Term Life Insurance by Troup County Government. This benefit also includes Accident Death and Dismemberment, Accelerated Death Benefit and Waiver of Premium.

Supplemental

Employees may elect to increase their Group Term Life insurance benefits an additional \$10,000 up to \$50,000. If application is made when first eligible, employee can receive up to \$50,000 on a guarantee issue basis.

Dependent

Employees can elect Dependent Life Coverage on their Spouse and Dependent Children (unmarried children through age 20 or through age 24 if full-time student). Employees can select \$5,000 or \$10,000 of life insurance coverage on their spouse and each dependent child.

Vision Insurance



Employees can enroll in a vision insurance plan offered through EyeMed. Benefits are provided on a co-pay basis, if in-network providers are used and with scheduled reimbursement level for out-of-network provider benefits. The exam co-pay is \$10 and the material co-pay is \$10. The plan pays for exams and lenses every 12 months and frames every 24 months. Children are covered to age 26.



Annual Enrollment and Benefits Administration provided through



AirEvac

Enrolling for Membership in the AirMedCare Network covers the employee and any family member living in the household. The benefit guarantees if you are flown by any AirMedCare Network participating provider: Med-Trans Air Medical Transport, Air Evac Lifeteam, EagleMed or REACH Air Medical Services, there will be no out of pocket flight expenses for the flight. AirMedEvac works with your benefits provider(s) to take care of everything related to your flight.

Life Insurance

Policies are owned by the employee and are portable, which means when you retire or terminate employment with Troup County Board of Commissioners, you simply pay the same premium rate direct to Unum rather than on payroll deductions.

Whole Life with Long Term Care

Policies are guaranteed to have premiums and death benefit to remain level. Policies over \$10,000 include a Long Term Care Benefit Rider. Employees can choose to add Restoration of the Death Benefit. The Long Term Care Rider is included for employee/spouse under age 70.

Cancer Insurance (Protection Assurance: Option 1 and Option 2)

Employees can choose between two (2) plans. Each plan includes the same treatments but with varying level benefits. Both plans include an Annual Wellness Benefit and Building Benefit Rider. Policy benefits also include initial occurrence, consultation, hospitalization, chemo and radiation, experimental treatment, lodging, transportation, and more. Policies are available on employee, spouse and children. Rates are based on plan and coverage selected.

Accident Insurance (Option 3)

Benefits are paid directly to employees for off the job accidents that occur. Plan includes payments for emergency treatment, physical therapy and rehab benefits, hospital confinement and intensive care, follow-up doctor visits, wellness benefits and more. Employees can choose to add coverage on spouse and children. Rates are based on the coverage selected.

Critical Illness Insurance (Premier Plan)

Benefits pay directly to the employee for diagnosis of one of the 18 covered critical illness, including 21 additional childhood diseases. A \$50 Wellness benefit is included for each insured per calendar year. Subsequent critical illness benefit is included allowing one additional benefit to be paid with diagnosis for an additional covered illness. Children are covered at 25% of the Employee, Spouse coverage can be added up to 50% of the Employee Amount. Rates are based on the benefit amount and original issue age.

Hospital Indemnity Insurance

Employee can choose to elect a Hospital Plan that is Guarantee Issue, No Pre-existing Condition and has no Waiting Period. The benefit pays a \$200 daily rate for hospital confinements, \$1000 for Hospital Admission, \$250 for Critical Care Unit. A \$50 Wellness benefit is payable for each insured per calendar year. Rates are based on coverage chosen.