

2024 - 2025

Chattahoochee-Flint RESA Benefits Guide





CHATTAHOOCHEE-FLINT RESA CONTACT

Christi Griffin
Financial Officer
229.937.5341
cgriffin@chattflint.org

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

INSIDE THIS GUIDE

Eligibility.....	1
Take Action Reminders.....	2
Campus Service Hub & Support.....	3
Campus Enrollment Instructions.....	4
Short-Term Disability.....	5
Long-Term Disability.....	6
Employee Assistance Program.....	7
Life Insurance 101.....	8
Permanent Life Insurance.....	9
Voluntary Term Life & AD&D Insurance.....	10
Dental Insurance.....	11
Vision Insurance.....	12
Critical Illness Insurance.....	13
Legal Plan.....	14
Flexible Spending Accounts.....	15-16
MedCareComplete.....	17-18
State Health Benefit Plan.....	19-20
Notes.....	21-22

Eligibility

- Generally, full-time employees working 20 or more hours per week are eligible to enroll in the benefits described in this guide
- 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.

How to Enroll

- Verify and update all personal information
- Review your current benefit elections
- Make your benefit elections and list and/or update your beneficiaries

When to Enroll

- New Hire: Enroll within 30 days of your date of hire
- Current Employee: During the Annual Open Enrollment Window (May)
- The annual SHBP enrollment period is held in the Fall (October-November)

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 following 30 days of employment.
- Employees must be actively at work on the effective date of coverage

How to Make Changes

- Only Qualifying Life Events allow you to make eligible changes to your current benefit elections during the plan year outside of the Open Enrollment Window
- To submit a qualifying life event, please email mybenefits@campusbenefits.com or call 866.433.7661 opt 5

Welcome to Chattahoochee-Flint RESA!

Chattahoochee-Flint RESA offers a comprehensive and valuable benefits program to 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 plan year.

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 Voluntary Term Life & AD&D 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. State Health Benefit Plan Medical Insurance

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

1

2

How to Enroll in Campus Benefits Voluntary Benefits

1. Visit <https://www.chattflintbenefits.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 7/1 - 6/30
 - **Annual open enrollment occurs in the Spring (May)**

How to Enroll in your State Health Benefit Medical Plan

1. Visit <https://www.chattflintbenefits.com/>
2. Select the "State Health" tab
3. Select "SHBP Enrollment Link" (Refer to the SHBP section of this guide for additional details) OR
4. **Contact SHBP at 800.610.1863**
 - Plan year is 1/1 - 12/31
 - **Annual open enrollment occurs in the Fall (October/November)**

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.



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
- Claims
- Card Requests
- Benefit Questions
- COBRA Information

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.chattflintbenefits.com/contact-campus>

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

Frequently Asked Questions (FAQs):

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

A: Please notify Campus Benefits within 30 days of the life event date. All SHBP life events must be made directly through the SHBP website.

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 my dental card or vision card quickly?

A: Your group dental and vision plan information is available at: <https://www.chattflintbenefits.com/>

You can also register online at [metlife.com/mybenefits](https://www.metlife.com/mybenefits) (Chattahoochee Flint Regional Educational Service Agency)



Phone: 866.433.7661, Opt 5

Email: mybenefits@campusbenefits.com

Website: <https://www.chattflintbenefits.com/>

CAMPUS BENEFITS ENROLLMENT

Chattahoochee-Flint RESA



1 Visit <https://www.chattflintbenefits.com/>

2 Select "Campus Connect" to log in

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

Company Identifier: CFR18

New User Registration

1. On Login page click on "Register as a new user" and enter information below
 - First Name
 - Last Name
 - Company Identifier: CFR18
 - 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: _____

SHORT - TERM DISABILITY



What is Short-Term Disability Insurance? A type of coverage that replaces a portion of your income if injury or illness prevents you from working for a short period of time. It provides financial security for you and any loved ones who may depend on 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 working 20+ hours per week

- Coverage through OneAmerica
- Must be actively at work on the effective date
- Employees can start/stop sick leave to get through the elimination period
- **No Health Questions- EVERY YEAR!**

Short-Term Disability Quick Summary	
Elimination Period	Benefits begin after you have been out of work due to an injury or illness for 14 days
Benefit Duration (maximum)	13 Weeks
Benefit Percentage (weekly)	60% of earnings
Maximum Benefit Amount (weekly)	\$1,000 per week
Pre-existing condition	3/6- You may not be eligible for benefits if you have received treatment for a condition within 3 months prior to your effective date under this policy until you have been covered under the policy for 6 months.

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 \$1,000, then enter \$1,000. This is your maximum weekly benefit amount.	
Step 3	Divide weekly amount in Step 2 by \$10	
Step 4	Multiply Step 3 by the rate of \$0.65. This is your monthly premium.	
*Enrollment system will calculate based on payroll information provided by employer		

LONG - TERM DISABILITY



What is Long-Term Disability Insurance? A type of coverage that replaces a portion of your income if injury or illness prevents you from working for a long period of time. It provides financial security for you and any loved ones who may depend on 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 working 20+ hours per week

- Coverage through OneAmerica
- Must be actively at work on the effective date
- Employees can start/stop sick leave to get through the elimination period
- **No Health Questions- EVERY YEAR!**

Long-Term Disability Quick Summary	
Elimination Period	Benefits begin after you have been out of work due to an injury or illness for 90 days
Benefit Duration (maximum)	Social Security Full Retirement Age
Benefit Percentage (monthly)	60% of Earnings
Maximum Benefit Amount (monthly)	\$5,000 per month
Pre-existing condition	3/3/12- You may not be eligible for benefits if you have received treatment for a condition within 3 months prior to your effective date under this policy until you have been covered under the policy for 12 months, or you remain treatment free for a period of 3 consecutive months.

Long-Term Disability Rate Factors	
0-19	\$0.15
20-29	\$0.15
30-34	\$0.23
35-39	\$0.38
40-44	\$0.58
45-49	\$0.80
50-54	\$1.04
55-59	\$1.32
60-64	\$1.11
65-69	\$0.87
70+	\$0.76

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 rate factor listed below. This is your monthly premium.	
*Enrollment system will calculate based on payroll information provided by employer		

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.

EMPLOYEE ASSISTANCE PROGRAM



What is an EAP? A program offered to eligible Chattahoochee-Flint RESA employees to provide guidance with personal issues, planning for life events or simply managing daily life which can affect your work, health and family. This coverage is provided at no cost to you.

Eligibility: Eligible Chattahoochee-Flint RESA employees and dependents

- Coverage through One America
- Provides support, resources, and information for personal and work-life challenges
- CALL 1.855.387.9727 or visit [Guidanceresources.com](https://www.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 three sessions per issue per year (employees and dependents) 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](https://www.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

Plan Rates
Coverage provided at no cost to you by Chattahoochee-Flint RESA!

LIFE INSURANCE 101

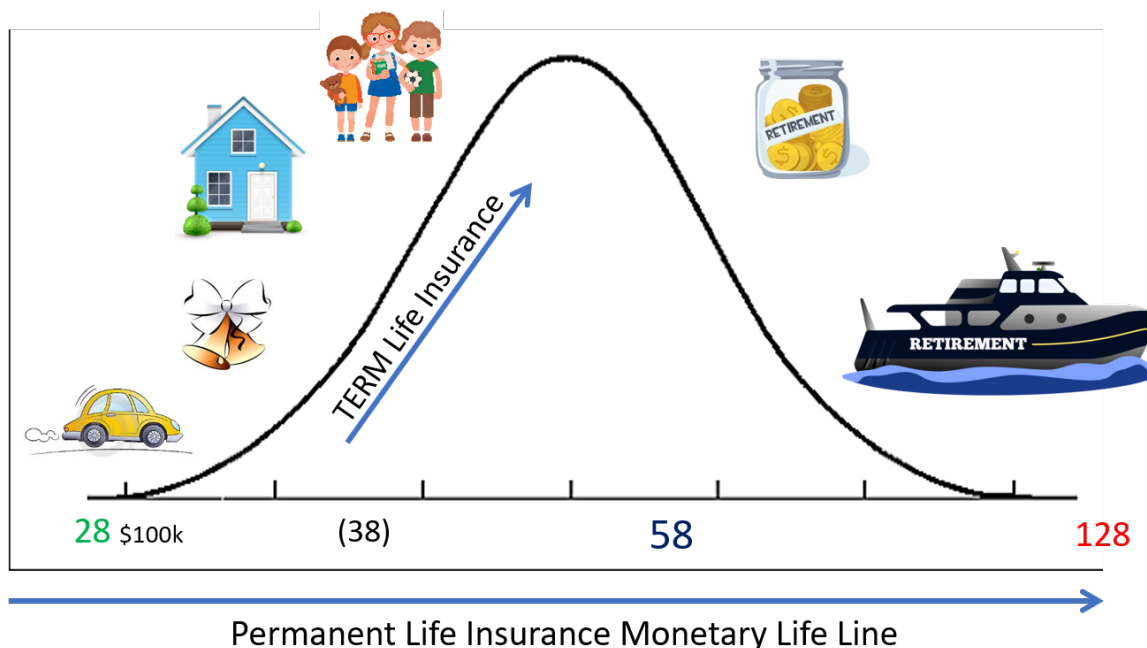
The need for life insurance depends on each individual life situation. If loved ones are financially dependent on you, then buying life insurance coverage can absolutely be worth it. Even if you don't have financial dependents yet, life insurance can be a valuable solution for making death easier on 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 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 when ported**)
- 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

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.

PERMANENT LIFE INSURANCE



What is Permanent Life Insurance? Coverage that provides lifelong protection, and the ability to maintain a level premium.

Eligibility: Eligible full-time employees working 20+ hours per week, spouse & children (up to age 26)

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

* *Child marital status does not impact benefit eligibility. Student status does impact benefit eligibility*

Permanent Life Benefits Quick Summary	
PLAN MAXIMUMS	
Employee (Ages 15 - 79)	Up to \$500,000
Spouse (Ages 15 - 79)	Up to \$50,000
Child (0 - 17) Juvenile Policy Child (18-26 if a full-time student) Adult Policy	Up to \$25,000
GUARANTEED ISSUE (FIRST TIME ELIGIBLE/NEW HIRE)	
<p>Employee guaranteed issue amounts may be available for first time eligible employees/new hires. Amounts will be based on age. Spouse & Child Simplified Issue Amounts (One Health Question) may be available. Contact Campus Benefits for Additional Questions.</p>	
ADDITIONAL FEATURES	
<p><i>Options for Paid up to age 70 or age 100 Terminal Illness accelerated death benefit for up to 75% (Up to \$150,000)</i></p>	

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

VOLUNTARY TERM LIFE & AD&D INSURANCE



What is Voluntary Term Life Insurance? A financial protection plan which provides a cash benefit to the beneficiary upon death of the insured. Proceeds can be used to replace lost potential income during working years and help ensure your family's financial goals will be met; goals like paying off a mortgage, keeping a business running, and paying for college. AD&D coverage is included as 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. This plan also includes a dismemberment benefit which provides an additional lump sum payment if an insured becomes dismembered in an accident.

Eligibility: Eligible full-time employees working 20+ hours/week, spouse and unmarried children (up to age 26)

- Coverage through OneAmerica
- Must be actively at work on the effective date
- **If electing for the first time outside of the initial new hire enrollment period, health questions will be required**
- Employee must elect coverage on themselves in order to cover spouse and/or children
- Spouse rate is based on employee age

Voluntary Term Life Benefit Quick Summary	
LIFE AMOUNT	
Employee	\$400,000 (not to exceed 5 x salary) Increments of \$1,000
Spouse	\$400,000 (100% of Employee Amount in Increments of \$500)
Child(ren)	\$10,000 (\$1,000 for child less than 6 months of age)
AD&D Amount	Matches Life Election
GUARANTEED ISSUE (AT INITIAL NEW HIRE ENROLLMENT)	
Employee	\$200,000
Spouse	\$50,000
Child(ren)	\$10,000
Additional Plan Features	
GUARANTEED INCREASE IN BENEFIT (Prior to age 70)	Employee & Spouse: If currently enrolled, increase coverage up to the guaranteed issue amount at Open Enrollment with no health questions
Age Reduction	Employee & Spouse: 50% at Age 70
Portability Provision	Included (Prior to age 70)
Conversion	Included
Accelerated Life Benefit	25%, 50% or 75% of the life amount
Waiver of Premium	Prior to Age 60 after 9 month elimination period to Age 65

Plan Rates

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

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.

DENTAL INSURANCE



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

Eligibility: Eligible full-time employees working 20+ hours/week, spouse and dependent children (up to age 26)

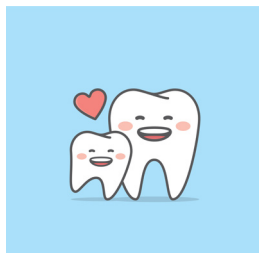
- Coverage through Guardian
- Claims must be submitted within 90 days of service
- In-Network Provider Directory: <https://www.guardianlife.com/find-a-provider> Network: **Dental Guard Preferred**
- Orthodontics available for Children Only up to age 19 (subject to takeover provision)
- **No waiting periods or late entrant penalties**
- *The chart below is a sample of covered services. For detailed benefit information, policy documents and highlight sheets, please visit your employee benefits website.*

*Child marital status impacts benefit eligibility

Coinsurance	High Plan	Low Plan
Preventive	100%	100%
Basic	80%	60%
Major	50%	50%
Orthodontics Child Only (To age 19)	50%	Not Covered

Dental Benefits Quick Summary	High Plan	Low Plan
Calendar Year Deductible	\$50/person \$150/family	\$50/person \$150/family
Out of Network Coverage	90th percentile UCR	90th percentile UCR
Waiting periods	None	None
Calendar Year Plan Maximum	\$2,000 per person	\$1,000 per person
Orthodontia (Lifetime)	\$1,500 per person	Not Covered

*Dental rollover included. See policy documents for more information.



Services	High Plan	Low Plan
Type A - Preventative		
Routine Exam	100%	100%
Bitewing X-rays	100%	100%
Cleaning	100%	100%
Fluoride (Children up to 19)	100%	100%
Panoramic X-rays	100%	100%
Type B - Basic		
Filings	80%	60%
Simple Extractions	80%	60%
Surgical Extractions	80%	60%
Anesthesia	80%	60%
Type C - Major		
Inlays/Onlays	50%	50%
Crowns & Repairs	50%	50%
Scaling and Root Planning	50%	50%
Full Mouth Debridement	50%	50%
Bridges	50%	50%
Denture Repair	50%	50%
Endodontics	50%	50%
Periodontics	50%	50%

Monthly Plan Rates	High Plan	Low Plan
Employee	\$47.16	\$35.16
Employee + One	\$99.92	\$73.87
Family	\$145.60	\$109.40

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.

VISION INSURANCE



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 working 20+ hours/week, spouse and dependent children (up to age 26)

- Coverage through MetLife
- Claims must be submitted within 90 days of service
- In-Network Provider Directory: <https://mymetlifevision.com/> Network: **PPO**
- **No waiting periods or late entrant penalties**
- *The chart below is a sample of covered services. For detailed benefit information, policy documents and highlight sheets, please visit your employee benefits website.*

*Child marital status impacts benefit eligibility

Vision Benefits Quick Summary	In-Network
Exam	\$10 Copay
Contact Lens Fit and Follow-Up	Covered in Full with a max Copay of \$60
Retinal Imaging	Up to \$39 Copay
Lasik or PRK	15% Discount off Retail and 5% off Promotional
Frames	\$25 Copay - \$150 Allowance + 20% off Balance \$85 Allowance at Walmart, Costco, Sam's Club
Lenses and Lens Options	
Single/Lined Bifocal & Trifocal/Lenticular	\$25 Copay
Standard Progressive Lens	Up to \$55 Copay
Ultraviolet Coating	Covered in Full
Polycarbonate (child up to age 18)	Covered in Full
Tint (variable by type)	Up to \$17 - \$44 Copay
Scratch Resistant Coating	Up to \$17 - \$33 Copay
Anti-Reflective Coating (variable by type)	Up to \$41 - \$85 Copay
Contact Lenses	
Elective Contacts	\$150 allowance
Medically Necessary Contacts	Covered in Full after eyewear copay
Frequencies	
Exams/Lenses/Frames	12/12/24 months
2nd Pair Benefit	Each covered person can get one of the options below: 2 pairs of prescription eyeglasses 1 pair of prescription eyeglasses and an allowance toward contacts Double the contact lens allowance

Monthly Plan Rates	
Employee	\$8.63
Employee + Spouse	\$17.30
Employee +Child(ren)	\$14.64
Family	\$24.14

Mock Vision Card

Chattahoochee-Flint Regional
Educational Service Agency 05972203

Group Name Group Number

This card is not a guarantee of coverage or eligibility. Visit metlife.com/mybenefits to print your vision card and view benefit information.

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.

CRITICAL ILLNESS INSURANCE



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. Payments are made directly to you and do not coincide with health insurance.

Eligibility: Eligible full-time employees working 20+ hours/week, spouses, and unmarried children (up to age 26)

- Coverage through Guardian
- Elect Critical Illness with or without Cancer coverage based on your individual needs
- **Issue Age - Rates are locked in and will not increase with age**
- If electing outside of the initial open enrollment period, health questions will be required
- **Keep your coverage even if you retire or change employers; Portable prior to age 70.**
- **Guaranteed issue coverage for Employees and Spouses up to age 70.**

Critical Illness Benefits Quick Summary	Critical Illness Only	Critical Illness w/Cancer
Employee	\$1,000 - \$10,000	\$1,000 - \$10,000
Spouse	\$500 - \$5,000 (50% of EE Amount)	\$500 - \$5,000 (50% of EE Amount)
Dependent Children	Automatically Covered at 25% of Employee Election	
COVERED SPECIFIED CRITICAL ILLNESSES	Pays % of Face Amount	Pays % of Face Amount
Heart Attack (Myocardial Infarction)	100%	100%
Stroke	100%	100%
Heart Failure	100%	100%
Major Organ Failure	100%	100%
Kidney Failure	100%	100%
Coronary Arteriosclerosis	30%	30%
Full Cancer Benefit	Not Included	100%
Benign Brain Tumor	Not Included	75%
Carcinoma In Situ	Not Included	30%
GUARANTEED ISSUE (Less than age 70)	Employee: \$10,000 Spouse: \$5,000	Employee: \$10,000 Spouse: \$5,000
Recurrence Benefit	50% of Benefit payable if Covered Person has not exhibited symptoms or received care or treatment for the covered Critical Illness for at least 12 months *Please see plan certificate for covered illnesses that receive recurrence benefits	
Pre-existing Condition:	12/12 - Any illness or injury for which you received treatment the 12 months prior to your effective date will not be covered for the first 12 months (applies to new enrollees only)	
Age Reduction	Benefits reduce by 50% at age 70	

Plan Rates

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

LEGAL PLAN



What is 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 working 20+ hours/week, spouse and dependent children (up to age 26)

- Coverage through MetLife
- Elder Care extends to parents and in-laws
- Additional information for non-plan members - info.legalplans.com or call 800.821.6400
- Under "Not a member?", enter plan access code "Legal" to learn more about plan providers in your area
- Plan members, select member login for plan specific information. Additional resources are available on your employee benefits website.

**Child marital status impacts benefit eligibility*

	Low Plan (0530010)	High Plan (0531010)
Money Matters	<ul style="list-style-type: none"> • Identity Theft Defense • Negotiations with Creditors • Promissory Notes • Debt Collection Defense • Tax Collection Defense 	<ul style="list-style-type: none"> • Identity Theft Defense • Negotiations with Creditors • Promissory Notes • Debt Collection Defense • Tax Collection Defense • Personal Bankruptcy • LifeStages Identity Management • Tax Audit Representation • Financial Education Workshops
Home & Real Estate	<ul style="list-style-type: none"> • Deeds • Mortgages • Foreclosure • Tenant Negotiations • Eviction Defense • Security Deposit Assistance 	<ul style="list-style-type: none"> • Deeds • Mortgages • Foreclosure • Tenant Negotiations • Eviction Defense • Security Deposit Assistance • Sale or Purchase (Primary or Vacation Home) • Refinancing & Home Equity • Property Tax Assessments • Boundary & Title Disputes • Zoning Applications
Estate Planning	<ul style="list-style-type: none"> • Simple and Complex Wills • Healthcare Proxies • Living Wills • Codicils • Powers of Attorney (Healthcare, Financial, Childcare, Immigration) 	<ul style="list-style-type: none"> • Simple and Complex Wills • Healthcare Proxies • Living Wills • Codicils • Powers of Attorney (Healthcare, Financial, Childcare, Immigration) • Revocable & Irrevocable Trusts
Family & Personal	<ul style="list-style-type: none"> • Guardianship • Conservatorship • Name Change • Review of ANY Personal Legal Document • School Hearings • Demand Letters • Affidavits • Personal Property Issues • Garnishment Defense • Domestic Violence Protection 	<ul style="list-style-type: none"> • Guardianship • Conservatorship • Name Change • Review of ANY Personal Legal Document • School Hearings • Demand Letters • Affidavits • Personal Property Issues • Garnishment Defense • Domestic Violence Protection • Juvenile Court Defense (Including Criminal Matters) • Parental Responsibility Matters • Review of Immigration Documents • Prenuptial Agreement • Adoption
Civil Lawsuits	<ul style="list-style-type: none"> • Disputes over Consumer Goods & Services • Administrative Hearings • Incompetency Defense 	<ul style="list-style-type: none"> • Disputes over Consumer Goods & Services • Administrative Hearings • Incompetency Defense • Civil Litigation Defense & Mediation • Small Claims Assistance • Pet Liabilities
Elder Care Issues	Consultation & Document review for issues related to your (or spouses) parents: <ul style="list-style-type: none"> • Medicare • Medicaid • Prescription Plans • Nursing Home Agreements • Leases • Promissory Notes • Deeds • Wills • Power of Attorney 	Consultation & Document review for issues related to your (or spouses) parents: <ul style="list-style-type: none"> • Medicare • Medicaid • Prescription Plans • Nursing Home Agreements • Leases • Promissory Notes • Deeds • Wills • Power of Attorney
Vehicle & Driving	<ul style="list-style-type: none"> • Repossession • Defense of Traffic Tickets • Driving Privileges Restoration • License Suspension due to DUI 	<ul style="list-style-type: none"> • Repossession • Defense of Traffic Tickets • Driving Privileges Restoration • License Suspension due to DUI

Monthly Low Plan Rate	Monthly High Plan Rate
\$8.00	\$16.50
NO COPAY	

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.

FLEXIBLE SPENDING ACCOUNTS



What are Medical Flexible Spending Accounts (FSA's)? A pre-tax benefit account used to pay for out-of-pocket healthcare costs such as deductibles, copays, prescribed medication and some over the counter medications.

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

Eligibility: Eligible full-time employees working 20+hours/week, spouse and children (tax dependents up to age 26 for medical & up to age 13* for dependent care or tax dependent adults for adult care)

- **Coverage through Consolidated Admin Services (CAS)**
- Plan year is from July 1, 2024 to June 30, 2025 and employees must re-enroll each year
- Only family status changes will allow you to change your annual election. The altered election must be consistent with the status change
- Participant must elect the Medical FSA plan for the next year to access the carryover funds
- Married and not filing jointly participants limited to \$2,500 deferral for Dependent Care
- Transfer of funds between the Dependent Care and Medical Care accounts are not allowed

Flexible Spending Accounts Quick Summary	
MEDICAL FSA ACCOUNT	
Minimum Contribution	\$300 annually
Maximum Contribution	\$3,200 annually
CARRYOVER MAXIMUM- Maximum participants can carryover if re-electing the plan	\$640 For the plan year ending 6.30.2024, \$610 can be carried over to the 7.1.2024 plan year. For the plan year ending 6.30.2025, \$640 can be carried over to the 7.1.2025 plan year. (Any unused amounts over \$610/\$640 will be forfeited)
Total elected amount is available at the beginning of the plan year	
DEPENDENT CARE ACCOUNT	
Minimum Contribution	\$300 annually
Maximum Contribution	\$5,000 annually
CARRYOVER MAXIMUM	\$0 (Any unused amounts over \$0 will be forfeited)
Total elected amount is available as it is payroll deducted	
Plan Rules	
RUNOUT PERIOD-Time to turn in receipts for services rendered during the plan year.	30 days
All receipts should be kept to submit if verification is requested	

Monthly 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 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.

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://fsastore.com/fsa-eligibility-list>

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 up to age 13 (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



Get Reimbursed
Quickly



Track Receipts



Check Balances

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.

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.

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 working 20+hours/week, spouse and unmarried children (up to age 26)
- This is a supplemental benefit and does not replace health insurance
 - Register @ MCC: <https://www.medcarecomplete.com/> to access the full range of benefits
 - Register @ 1800MD: 1800md.com or 800.388.8785 to access telemedicine benefits
- Information needed to register - Group Name, Group #, Member ID (all located on MCC Card)

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

Medication Management

This service takes the guesswork out of medication management by sorting, labeling, and organizing medications for you. For added convenience, the service provides medication delivery to your home or healthcare provider's office at no additional cost. Specially trained clinical pharmacists are on staff to ensure that medications are reviewed for potential drug interactions, are clearly understood by patients, and are as effective as possible.

Telemedicine

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 | Ear Infection | Pink Eye |
| Headache | Diarrhea | Gout | Sore Throat |
| Infections | Heartburn | | Cold & Flu |
| Migraines | Sinus Conditions | | Nausea & Vomiting |

Individual Monthly Rate	Family Monthly Rate
\$10.50 Per Month	\$12.50 Per Month
NO COPAY	

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.

MEDCARECOMPLETE

THE SMART WAY TO REDUCE YOUR HEALTHCARE COSTS



Medical Bill Negotiator

Members can use the Medical Bill Negotiator service to review their expensive medical bills for errors. A medical bill advocate will identify and appeal common billing errors and overcharges for the member. Advocates provide continuous support during appeals, which typically results in an average savings of 40% on 80% of medical bills reviewed.

Restoration Expert

A Restoration Expert is available if you become a victim of identity theft. The service provides a concierge level of identity resolution. A dedicated and Certified Identity Theft Risk Management Specialist (CITRMS) will work with the victim to assess their ID theft situation, and move forward with a fully managed resolution.

Sex Offender Alerts

Members can request text and email alerts and reports of registered sex offenders for a specific address. Reports highlight the location of the offender, a photo ID, and the offense they committed. You may review the saved report in your online account at any time. Additionally, users can select an address to continuously monitor and receive alerts when new offenders move in or out of that neighborhood.



Expense Reimbursement

Restoring one's name and good credit is a time-consuming and expensive process. In response, \$25,000 expense reimbursement coverage is included in the member ID theft protection plan. This ensures you are covered in those instances when expenses compound. A Certified Identity Theft Risk Management Specialist (CITRMS) representative can assist with filing these expense reimbursement claims.

Social Media Tracking

The Social Media Tracking tool allows you to receive alerts on your social media accounts including Facebook, LinkedIn, Twitter, and Instagram if reputation-damaging items are posted. As we utilize social media platforms, we are creating a permanent online trail of our personal history, including photos, geo-location data, employment data, birthday, email, address, and phone number details. Over-sharing can lead to an increased risk for reputation damage, fraud, and identity theft. Reputation-damaging items including racist, violent, derogatory, vulgar, or inappropriate comments directed at you or your family.

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.

STATE HEALTH BENEFIT PLAN

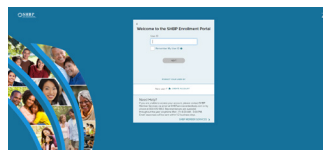


Notice: Chattahoochee-Flint RESA offers eligible employees health insurance through the Georgia State Health Benefit Plan. During the annual open enrollment, employees have the opportunity to review all available options and make elections for the upcoming plan year.

- **Coverage through Anthem BCBS of GA, United Healthcare, or Kaiser Permanente**
- All qualifying life events must be submitted via the SHBP Portal.
- Kaiser Permanente is only available in the Atlanta Metro area.
- Plan year is January 1- December 31 with enrollment in the fall of each year.
- **Attention to participants approaching age 65 and/or retirement:** Please review: <https://shbp.georgia.gov/retirees-0/turning-age-65>

SHBP Enrollment Portal:

<https://myshbpga.adp.com>



How to Enroll:

1. Go to <https://myshbpga.adp.com>
2. Enter your Username and Password and click Login.
If you need assistance, click on "Forgot User ID?" or "Forgot Your Password?"
3. If you have not registered, click "Register Here".
4. Your registration code is SHBP-GA.

SHBP Wellness Portal:

bewellshbp.com

SHBP Decision Guide:

This Guide provides a brief explanation about each health benefit option, a benefit comparison guide, and a list of things to consider before making plan decisions.

Access the decision guide at <https://shbp.georgia.gov/>

SHBP Phone Number: 800.610.1863

2024 WELLNESS INCENTIVES Quick Summary					
Plan Option	Anthem HMO MyIncentive Account (MIA)	Anthem Health Reimbursement Arrangement (HRA)	Kaiser Permanente (KP) Regional HMO	United Healthcare HMO Health Incentive Account (HIA)	United Healthcare HDHP Health Incentive Account (HIA)
	Up to	Up to		Up to	Up to
Member	480	480	\$500 Reward Card	480	480
Covered Spouse	480	480	\$500 Reward Card	480	480
United Healthcare Reward Card for enrolled member and covered spouse	n/a	n/a	n/a	\$250 Reward Card (member) \$250 Reward Card (Covered Spouse)	\$250 Reward Card (member) \$250 Reward Card (Covered Spouse)
Potential Total	960	960	\$1,000	1,460	1,460

Anthem: Members enrolled in an Anthem HRA Plan Option will receive SHBP-funded base credits at the beginning of the Plan Year. The amount funded will be based on your elected coverage tier. If you enroll in a HRA during the Plan Year, these credits will be prorated based on the elected coverage tier and the months remaining in the current Plan Year.

***KP:** Members enrolled in the KP Regional HMO Plan Option and their covered spouses will each receive a \$500 reward card after they each satisfy KP's Wellness Program requirements.

****UnitedHealthcare:** Members and their covered spouses enrolled in an UnitedHealthcare Plan Option can each earn a 240 well-being incentive credit match with a maximum combined up to 480 well-being incentive credits matched by UnitedHealthcare for completing wellness requirements under the plan. After credits are added to your HIA, any remaining credits will rollover to the next plan year.

2024 SHBP PLANS & PRICING

The table below is a high level overview, for official details and plan information please review the SHBP Decision Guide.



Plan Designs for 2024											
	Anthem Gold Plan HRA		Anthem Silver Plan HRA		Anthem Bronze Plan HRA		Anthem HMO	UHC HMO	UHC HDHP		Kaiser HMO*
	In	Out	In	Out	In	Out	In	In	In	Out	In
Deductible											
You	\$1,500	\$3,000	\$2,000	\$4,000	\$2,500	\$5,000	\$1,300	\$1,300	\$3,500	\$7,000	N/A
You + Spouse	\$2,250	\$4,500	\$3,000	\$6,000	\$3,750	\$7,500	\$1,950	\$1,950	\$7,000	\$14,000	N/A
You + Child(ren)	\$2,250	\$4,500	\$3,000	\$6,000	\$3,750	\$7,500	\$1,950	\$1,950	\$7,000	\$14,000	N/A
You + Family	\$3,000	\$6,000	\$4,000	\$8,000	\$5,000	\$10,000	\$2,600	\$2,600	\$7,000	\$14,000	N/A
Medical OOPM (Out of Pocket Maximum)											
You	\$4,000	\$8,000	\$5,000 \$10,000		\$6,000	\$12,000	\$4,000	\$4,000	\$6,450	\$12,900	\$6,350
You + Spouse	\$6,000	\$12,000	\$7,500 \$15,000		\$9,000	\$18,000	\$6,500	\$6,500	\$12,900	\$25,800	\$12,700
You + Child(ren)	\$6,000	\$12,000	\$7,500 \$15,000		\$9,000	\$18,000	\$6,500	\$6,500	\$12,900	\$25,800	\$12,700
You + Family	\$8,000	\$16,000	\$10,000	\$20,000	\$12,000	\$24,000	\$9,000	\$9,000	\$12,900	\$25,800	\$12,700
Coinsurance (Plan Pays)	85%	60%	80%	60%	75%	60%	80%	80%	70%	50%	100%
HRA (Health Reimbursement Arrangement) Credits											
You	\$400		\$200		\$100		N/A	N/A	N/A		N/A
You + Spouse	\$600		\$300		\$150		N/A	N/A	N/A		N/A
You + Child(ren)	\$600		\$300		\$150		N/A	N/A	N/A		N/A
You + Family	\$800		\$400		\$200		N/A	N/A	N/A		N/A
Medical											
ER	Coins after ded		Coins after ded		Coins after ded		\$150 copay	\$150 copay	Coins after ded		\$150 copay
Urgent Care	Coins after ded		Coins after ded		Coins after ded		\$35 copay	\$35 copay	Coins after ded		\$35 copay
PCP Visit	Coins after ded		Coins after ded		Coins after ded		\$35 copay	\$35 copay	Coins after ded		\$35 copay
Specialist Visit	Coins after ded		Coins after ded		Coins after ded		\$45 copay	\$45 copay	Coins after ded		\$45 copay
Preventative	100%	N/A	100%	N/A	100%	N/A	100%	100%	100%	N/A	100%
Retail Rx											
Tier 1	15%, Min \$20, Max \$50		15%, Min \$20, Max \$50		15%, Min \$20, Max \$50		\$20 copay	\$20 copay	Coins after ded		\$20 copay
Tier 2	25%, Min \$50, Max \$80		25%, Min \$50, Max \$80		25%, Min \$50, Max \$80		\$50 copay	\$50 copay	Coins after ded		\$50 copay
Tier 3	25%, Min \$80, Max \$125		25%, Min \$80, Max \$125		25%, Min \$80, Max \$125		\$90 copay	\$90 copay	Coins after ded		\$80 copay
Mail Order Rx											
Tier 1	15%, Min \$50, Max \$125		15%, Min \$50, Max \$125		15%, Min \$50, Max \$125		\$50 copay	\$50 copay	Coins after ded		\$50 copay
Tier 2	25%, Min \$125, Max \$200		25%, Min \$125, Max \$200		25%, Min \$125, Max \$200		\$125 copay	\$125 copay	Coins after ded		\$125 copay
Tier 3	25%, Min \$200, Max \$313		25%, Min \$200, Max \$313		25%, Min \$200, Max \$313		\$225 copay	\$225 copay	Coins after ded		\$200 copay
Rx OOPM	All Plans Combined with Medical										
Monthly Premiums	Anthem Gold Plan HRA		Anthem Silver Plan HRA		Anthem Bronze Plan		Anthem HMO	UHC HMO	UHC HDHP		Kaiser HMO*
Employee	\$188.56		\$125.19		\$77.69		\$148.53	\$177.91	\$63.36		\$169.54
Employee + CH	\$343.04		\$235.32		\$154.57		\$274.99	\$324.94	\$130.20		\$311.96
Employee + SP	\$464.72		\$331.65		\$231.90		\$380.66	\$442.36	\$201.80		\$430.64
Family	\$619.20		\$441.78		\$308.78		\$507.12	\$589.39	\$268.64		\$573.06
An \$80 tobacco surcharge will be added to all rates for tobacco users.											

*The Kaiser HMO plan is only available in the Atlanta Metro area.

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.



Employee Benefits Website:

<https://www.chattflintbenefits.com>



The Service Hub Helps With:

- Portability/Conversion
- 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

The 2024-2025 Benefits Enrollment Guide is provided for illustrative purposes only. Actual benefits, 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 www.chattflintbenefits.com

These should be reviewed fully prior to electing any benefits.