



2027



EMPLOYEE BENEFITS ENROLLMENT GUIDE

Benefits for the 2027 Plan Year

For information and enrollment, visit
<https://www.daltonpublicschoolsbenefits.com> or call the Dalton Public
Schools Benefits Service Center at (866) 481-4920.



We're So Glad You're Here

We strive to provide our employees with a comprehensive and cost-effective benefits portfolio for you and your family. This guide provides an overview of Dalton Public Schools' benefits for the 2027 plan year and the employee enrollment process. You'll find important benefits resources and contact information throughout the guide. Additional benefits information and plan documents are available online at [Dalton Public Schools Benefits](https://www.daltonpublicschoolsbenefits.com) at: <https://www.daltonpublicschoolsbenefits.com>.

WE'RE THERE WHEN YOU NEED US MOST

benefits service center

- Benefits questions, including general SHBP questions
- Enrollment
- Finding a physician
- How to file a claim
- Understanding your benefits
- And more

Phone: (866) 481-4920

Email: info@daltonpublicschoolsbenefits.com

Monday – Thursday: 8am – 6pm EST

Friday: 8am – 5pm EST

Benefits Website

www.daltonpublicschoolsbenefits.com

- Benefits details, including SHBP
- Links to carrier and vendor websites
- Plan documents
- And more



Understanding Social Security and Retirement

As a school system employee, it's important to know whether you're contributing to Social Security. For Dalton Public Schools, Social Security taxes are being withheld from your paycheck, and you are earning credits toward federal retirement, disability, or survivor benefits under Title II of the Social Security Act. To qualify for these benefits, most people need 40 credits (roughly 10 years of work).

You are also enrolled in a pension/retirement plan: either TRS, PSERS, or ERS. If you're unsure of your status, review your paycheck or reach out to your Payroll Department for more information. You can find more information about the retirement plans here:

- TRS: <https://www.trsga.com>
- PSERS: <https://www.ers.ga.gov/public-school-employees-retirement-system>
- ERS: <https://www.ers.ga.gov>

How to Enroll

Voluntary Benefits - Online or By Phone

Enrollment Online

Step 1: Visit <https://www.daltonpublicschoolsbenefits.com> and click “Enroll Now!”

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

If you have not yet created an account, click on “Click Here to Begin” then “Get Started Now.” You will be prompted to enter your email address, last four digits of your Social Security Number, and date of birth. The system will identify you by these credentials and allow you to create a password.

Step 3: Once you have logged in, you will be able to complete your enrollment. You can complete your benefit elections by clicking “Begin Enrollment” and following the prompts.

Enrollment by Phone

Call the Dalton Public Schools Benefits Service Center at (866) 481-4920 to complete your voluntary benefits enrollment by phone. The Benefits Specialist will confirm your personal information, review your plan options, and confirm your elections. For online and phone enrollment, you will receive a Confirmation Statement via email following your enrollment.

State Health Benefit Plan (SHBP) - ADP Portal

1. Access <https://myshbpga.adp.com/shbp> to review your health coverage elections. Your Registration Code is “SHBP-GA” for new users. Employees may also enroll by calling (800) 610-1863.
2. If you are covering a new dependent(s), ADP will provide instructions for submitting required documentation for the added dependents. Be sure to provide documentation in the format required by the deadline provided by ADP. Your dependents will not have coverage until the documentation is received and approved.

How to Reset Your SHBP Password

Step 1: Go to <https://myshbpga.adp.com/shbp> and click “Need help signing in?”.

Step 2: Enter the requested demographic information.

Step 3: Follow the instructions to verify your identity.

Step 4: Reset password or access system using security code.

Eligibility

Employees working 20 or more hours per week and eligible family members can participate in the voluntary benefits package.

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

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

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

Qualifying Life Events

Qualifying life events that could result in changes to your benefit coverage include, but are not limited to, the following:

- Marriage or divorce
- Birth or adoption of a child
- Loss of a dependent or other group coverage
- Medicare entitlement
- Loss or gain of other coverage by a spouse

If you have a qualifying life event, please contact the Benefits Service Center and SHBP to complete your new elections and update your life insurance beneficiary(ies). You must also provide the supporting documentation to the Benefits Service Center and SHBP within 31 days of the change. If you do not do so within 31 days, you must wait until the next Open Enrollment to make any benefit plan changes.

Duplicate Coverage

Reminder: If you and your spouse are both district employees, duplicate coverage is prohibited. During your enrollment, please update your dependent record if your spouse is also a district employee.



State Health Benefit Plan (SHBP) Options



Dalton Public Schools participates in the State Health Benefit Plan. Refer to the 2027 Active Member Decision Guide for complete details at www.daltonpublicschoolsbenefits.com.

Employer Contribution for SHBP Coverage

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

Locate In-Network Providers

Anthem

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

UnitedHealthcare

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



Health Reimbursement Account (HRA)

Gold, Silver, & Bronze Options

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

HMO Option

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

High Deductible Health Plan (HDHP) Option

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

Why elect an HRA Plan?

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

Why elect an HMO Plan?

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

Why elect the HDHP Plan?

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

In-Network Benefits Summary

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

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

About Your Employee Premiums and Deductions

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

Important Things to Know



Pharmacy Information

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

Express Scripts
By EVERNORTH

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

Copay/Coinsurance Waiver for Disease Management Participation

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

PeachCare for Kids

- Your dependents, up to age 19, may be eligible for PeachCare (instead of SHBP), offered through the state of Georgia.
- Income and other qualifications must be met.
- Visit <https://dch.georgia.gov/peachcare-kids> for more information.
- This benefit is not available through payroll deduction.

Preventive Care

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

9amHealth Weight Management Program

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



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

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

TRICARE Supplement Plan for Military Members

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

Wellness Program



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

1 point = 1 dollar



when redeemed
for medical and
pharmacy expenses

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

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

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

How to Earn 2027 Well-Being Incentive Points

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

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

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

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

Sharecare Redemption Center

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

Dental Benefits



Dalton Public Schools offers a choice of an **Enhanced Plan** or a **Basic Plan** with Ameritas, and you may choose any licensed dentist for your care. However, if you obtain care from participating Ameritas dentists, you will maximize your plan benefits and keep your out-of-pocket costs as low as possible.

Access <https://dentalnetwork.ameritas.com> and choose Classic PPO Network to locate participating dental provider information.

Dental Summary of Benefits		
Item	Basic Plan	Enhanced Plan
Annual Deductible (Individual)	\$50	\$50
Preventive Care (Includes cleanings, exams, x-rays, and more)	After a \$5 office copay, 100%	After a \$5 office copay, 100%
Basic Services (Includes endodontics and periodontics)	80%	80%
Major Services (Crowns, bridges, dentures)	Not Covered	50%
Orthodontia (Children and adults)	Not Covered	50% (no deductible)
Orthodontia Lifetime Maximum	N/A	\$1,000
Annual Maximum	\$750 per person	\$1,000 per person
Note: All charges are subject to the usual and customary schedule.		

Carryover Benefits		
Item	Basic Plan	Enhanced Plan
Plan Threshold Minimum amount of unused maximum in a calendar year in order to qualify for carryover and PPO Bonus	\$250	\$500
Annual Carryover Amount Amount that is added to the following year's maximum	\$125	\$250
PPO Bonus Additional amount awarded for seeing a PPO provider	\$50	\$100
Maximum Carryover Highest possible maximum including carryover and PPO Bonus	\$500	\$1,000

Dental Monthly Premiums		
Coverage	Basic Plan	Enhanced Plan
Employee Only	\$26.52	\$46.64
Employee + Spouse	\$68.00	\$119.48
Employee + Child(ren)*	\$59.68	\$104.85
Family	\$91.32	\$160.52
*Children are eligible up to age 26.		



Vision Benefits

The Dalton Public Schools EyeMed Vision plan options (Basic or Enhanced) provide coverage for exams, frames, and lenses (either contacts or eyeglass lenses).

If you visit a participating EyeMed Vision provider, you will have a higher benefit and lower out-of-pocket costs. In order to obtain information regarding participating vision providers, access <https://www.eyemed.com/en-us>. Next, click on “Find an Eye Doctor” under Members & Consumers. Select the “Insight” Network and follow search instructions.

How the Vision Plan Works at the Time of Service:

If you go to a participating EyeMed provider, you will pay your portion of the bill at the time of service (no filing of claims). If you have services from a non-participating provider, you will need to pay at the time of service and file a claim with EyeMed for reimbursement.

Vision Summary of Benefits	Basic Plan	Enhanced Plan
Eye Exam (once every 12 months)	\$10 copay	\$10 copay
Lenses (once every 12 months)		
Single	Covered in full after \$25 copay	Covered in full after \$25 copay
Bifocal		
Trifocal		
Lenticular		
Contacts (once every 12 months)		
Fit and Follow-up Exams	\$40 copay	\$40 copay
Conventional	\$130 allowance, then 15% off balance	\$150 allowance, then 15% off balance
Disposable	\$130 allowance, then balance	\$150 allowance, then balance
Medically Necessary	Covered in full	Covered in full
Frames Basic Plan - once every 24 months Enhanced Plan - once every 12 months	\$130 allowance	\$150 allowance
Please refer to the Benefits Summary for complete details.		

Vision Monthly Premiums		
Coverage	Basic Plan	Enhanced Plan
Employee Only	\$7.36	\$11.49
Employee + Spouse	\$13.99	\$21.83
Employee + Child(ren)	\$14.72	\$22.98
Family	\$21.63	\$33.77

FLEXIBLE SPENDING ACCOUNTS (FSA)



Flexible Spending Accounts (FSA)

With an FSA, a portion of your paycheck is withheld before taxes and put into a special account to pay for eligible healthcare and dependent care expenses. Examples of common eligible healthcare expenses are deductibles, doctor visit copays, prescription copays, dental and vision expenses, and more. Because you do not receive the money in your paycheck, you do not pay taxes on this money. Plus, the reimbursements are tax-free. Visit <https://www.tasconline.com> to learn more.

How It Works

All FSA plan members receive a Welcome Kit and TASC debit card. This debit card can be used at the point of service to pay for your health and dependent care expenses. Using a debit card is a convenient way to use your FSA plan. The funds are debited from the account and paid to the doctor's office, pharmacy, or day care facility directly at the time of purchase. When the debit card is not accepted, you are required to pay for the expense and submit a claim form for reimbursement. We encourage you to retain all receipts, even for debit card purchases which may be requested in the event of a personal tax audit.

Use It or Lose It

The IRS requires that any unused money in your account at the end of the plan year be retained by your employer. It cannot be used by you for future expenses. If you have a balance, try to make purchases before the end of the grace period, by March 15, 2028. Purchases can be made for items like eyeglasses, prescription sunglasses, and over-the-counter medications and supplies.

Note: You can file your claims within 15 days after the end of the grace period.

Grace Period

If you have not spent all of the funds in your Healthcare or Dependent Care FSA prior to the end of the plan year, you may continue to incur claims for expenses during the grace period. The grace period for incurred claims is 2 ½ months after the end of the plan year.

Eligible Healthcare FSA Expenses

- Are incurred during your FSA plan year
- Are not eligible for reimbursement from any other source
- Require documentation from the provider of the services or supplies which shows the amount of each expense and the date it was incurred
- Include deductibles, copays, out-of-pocket dental and vision expenses, and more

Eligible Dependent Care FSA Expenses

- Licensed day care expenses (children up to age 13)
- Adult day care expenses
- Before-school and after-school care, nanny/au pair expenses

**Special requirements must be met for expenses to be reimbursable using the Dependent Care FSA.*

MyTASC: Online Account Management

As an FSA member, you have the ability to manage your account online or on your mobile device through MyTASC Online Account Management. Some of the member capabilities include:

- Viewing your current account balance, claims, and benefits
- Viewing your payroll contributions
- Subscribing to email and text notifications for balance information, reimbursement requests, and payments
- Submitting claims and viewing reimbursement requests

Monthly Administrative Fee

The monthly administrative fee for the FSA plan is assessed to the participants. Should you participate in the FSA, you will incur a **\$4.52** per month post-tax deduction for the FSA plan.

FLEXIBLE SPENDING ACCOUNTS (FSA)



About Manual FSA Claim Filing

If your provider/vendor doesn't accept the debit card, and you need to file a claim for reimbursement, please follow the instructions below:

- Pay for the expense with cash, check or credit card. Important: Retain the receipt for your records.
- Log in to your account at <https://www.tasconline.com>, and click Request for Reimbursement Wizard.
- Follow the instructions to enter your reimbursement request.
- Complete the claim form (VeriFlex Coversheet) and attach the receipt(s).
- Claims may be mailed, faxed, or submitted online on the portal or mobile app.

MyBenefits and MyCash

TASC has enhanced technology to provide additional convenience and expedite your FSA claim reimbursements. If you are not registered for direct deposit, TASC provides your FSA claim reimbursements directly onto your debit card. You will have a MyCash fund on your debit card for reimbursements of manual claims only. (If you use your debit card for all of your FSA claims, you will not have MyCash funds on your card.)

You have two buckets of money on your debit card once you begin receiving manual reimbursements from your FSA plan.

MyBenefits: This bucket is used for eligible healthcare and/or dependent care expenses.

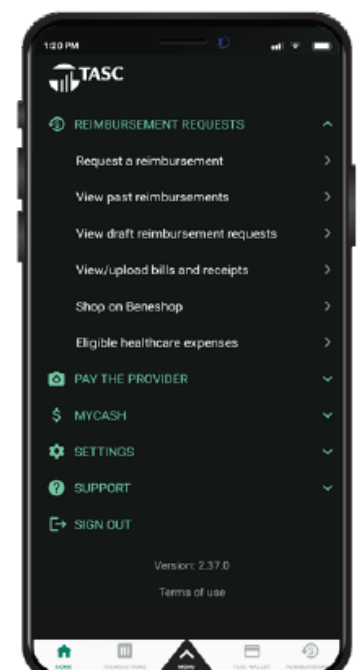
MyCash: This bucket of money may be used for any purpose of your choice. Again, this will only be for manual FSA claim reimbursements. When you receive claim reimbursements from your FSA plan, if you are not registered for direct deposit, the funds are deposited into the MyCash account on your debit card. You have a few ways to retrieve your money from your MyCash account:

- Use your debit card at an ATM (upon request of a PIN) to withdraw your money.
- You may transfer money into your personal bank account from your MyCash fund.
- You may use your MyCash fund with your debit card at vendors who accept Visa for any purchases.

Contact TASC at (800) 422-4661 for detailed questions about your FSA plan.

TASC Mobile Tools

TASC Mobile offers a free mobile app and text messaging option for FSA participants to access your accounts from anywhere at any time. You will enjoy convenient mobile options to check balances, view transaction details, request a reimbursement, and submit documentation on the go.



VOLUNTARY TERM LIFE AND AD&D INSURANCE

Voluntary Term Life & AD&D Insurance

RELIANCE STANDARD
LIFE INSURANCE COMPANY

As a Dalton Public Schools employee, you have the opportunity to elect voluntary term life insurance for yourself, your spouse, and your children. Included in the voluntary term life policy is an Accidental Death and Dismemberment (AD&D) benefit in the amount of the life insurance benefit. Should you (or your dependents if covered) die as a result of an accident, the policy will pay two times your life insurance benefit amount. The plan also includes a benefit for loss of limbs, sight, hearing, and more.

Voluntary Term Life Insurance Summary of Benefits			
	Employee	Spouse * elect prior to age 70 coverage ends at age 75	Children coverage ends at age 26
Benefit Amount	\$10,000 increments	\$5,000 increments	Less than 14 days: None 14 days but less than 6 months: \$1,000 6 months to age 26: \$10,000
Benefit Maximum	Lesser of 10x annual earnings or \$500,000	Lesser of 10x employee's annual earnings or \$500,000	\$10,000

*For spouse life insurance, the coverage must be elected prior to age 70, and life insurance coverage continues to age 75.

*Spouses can have coverage without employee coverage.

*Employee coverage is required in order to have child life coverage.

Special Open Enrollment for New Hires: You may elect up to \$150,000 for yourself and \$50,000 for your spouse at this time with no health questions. If you are electing an amount above \$150,000 for yourself and/or \$50,000 for your spouse, Evidence of Insurability (EOI) is required. You will not be deducted for the pending election unless/until you are approved.

If you are currently enrolled in voluntary term life and have not been previously denied coverage, you are able to increase your election by \$10,000 not to exceed \$150,000 at Open Enrollment with no health questions. All other elections require Evidence of Insurability (EOI). However, child coverage may be elected at this time with no health questions. Employees must be enrolled to elect child life insurance coverage.

Sample Monthly Premiums

Below are sample payroll deductions. Your Benefits Specialist will review your specific costs based on your age and desired benefit level.

Employee		
Age	\$50,000	\$150,000
25	\$3.10	\$9.30
35	\$4.85	\$14.55
45	\$11.65	\$34.95
55	\$31.20	\$93.60
65	\$52.30	\$156.90

Spouse (based on spouse's age)		
Age	\$30,000	\$50,000
25	\$1.86	\$3.10
35	\$2.91	\$4.85
45	\$6.99	\$11.65
55	\$18.72	\$31.20
65	\$31.38	\$52.30

Child
\$2.20 per month for \$10,000 of coverage

Beneficiary Information: The beneficiary is the person who would receive the life insurance benefit in the event of your death. It is very important for the Benefits Service Center to have your current life insurance beneficiary(ies), and you are required to confirm this information during your enrollment.

Disability Insurance

RELIANCE STANDARD
LIFE INSURANCE COMPANY

Disability coverage provides an income replacement benefit in the event you miss work due to an accident or illness, and are unable to work due to a temporary or permanent disability. When you are making your benefit election, it is recommended that you consider how long you would be able to pay your bills without a continuous income should you not be able to work. Visit

<https://www.reliancestandard.com/home/> to learn more.

Disability Summary of Benefits		
	Short Term Disability	Long Term Disability
Benefits Begin	15th day after accident or sickness begins	91st day after accident or sickness begins
Maximum Benefit Period	90 days	To age 65 or Normal Retirement Age
Benefit Amount	Weekly benefit amount up to 60% of earnings (in \$100 increments)	Monthly benefit amount up to 60% of earnings (in \$100 increments)
Maximum Benefit	\$1,250 per week (in \$100 increments)	\$5,000 per month (in \$100 increments)
Minimum Benefit	\$25 per week	\$100 per month

Pre-Existing Limitation

The disability plan includes a pre-existing condition limitation. A pre-existing condition is a condition for which you have received treatment, consultation, care or services during the 3 months immediately prior to the employee's effective date of disability insurance. Benefits are not paid for a disability caused by/contributed to by a pre-existing condition until the end of 12 months from the employee's effective date of insurance.

Short Term Disability Claim Example

Please note that sick leave must be exhausted before the Short Term Disability Plan pays a benefit.

Example of Short Term Disability (STD) for Pregnancy – Normal Delivery: In this example, the employee has had STD coverage for over a year, and the employee has 18 sick days.

- Delivery Date: November 1
- Approved Short Term Disability Benefit: 6 weeks
- Elimination Period (no STD benefit): November 1 – November 14
- Sick Days Used: November 1 – November 26
- STD Benefit Begins: November 27
- Benefit Duration: Through December 13

Paid Parental Leave

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

Maternal Birth Leave

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

The 120 hours of additional leave can only be taken by mothers immediately following the birth of their own child.

Important Notes

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

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

Both leaves run concurrently with any federal leaves and do not count against accrued leave.

No Health Questions

You may newly elect Short Term Disability and/or Long Term Disability at this time with no health questions.

Your monthly premium is based on the monthly benefit amount you elect and your age. All of your options are available during your enrollment.



Critical Illness

Dalton Public Schools offers critical illness insurance, which pays a lump sum to help you cover miscellaneous expenses or make up for lost income if you are diagnosed with a serious illness. Covered conditions include but are not limited to:

- Heart attack
 - Cancer (see certificate definition)
 - Stroke
 - Sudden cardiac arrest (limited benefit)
 - Major organ transplant
 - Coronary artery bypass (limited benefit)
 - Carcinoma in situ (limited benefit)
- Type 1 Diabetes
 - Benign brain tumor
 - Skin cancer (limited benefit)
 - Paralysis
 - Infectious diseases (limited benefit)
 - Child conditions as defined in the certificate, and more...

Refer to the certificate for full coverage details

This plan is portable when employment ends. You may continue coverage by paying premiums directly to Voya Financial. Open Enrollment is a great time to consider electing this benefit — you can enroll with no health questions.

Wellness Benefit

The voluntary Critical Illness plan includes a wellness benefit for covered preventive screenings including but not limited to:

- Annual physical exam, biometric screening, or stress test on bicycle or treadmill
- Blood test for triglycerides, CEA, bone marrow, CA 15-3 (breast cancer), fasting glucose, Hemoglobin A1C
- Chest x-ray, mammograms, breast ultrasound, sonogram, MRI
- Serum testing for cholesterol levels (HDL & LDL) or protein electrophoresis (myeloma)
- Routine dental or vision exam
- Electrocardiogram or ultrasound screening for abdominal aortic aneurysms
- Colonoscopy, prostate-specific antigen testing, or pap smear

Wellness Benefit Amount
Employee: \$75
Spouse: \$75
Child(ren): \$75 per child

Refer to the certificate for the extensive list of eligible covered screenings

Benefit Options

Employees: From \$5,000 to \$25,000 in increments of \$5,000

Spouses: Up to 50% of employee amount, to a max of \$12,500

- Employees must be enrolled to elect spouse coverage.

Children: 25% of employee coverage for all children (automatic)

- Covers all children.



Employee Critical Illness Monthly Deductions					
Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000
20-29	\$2.70	\$4.15	\$5.60	\$7.05	\$8.50
30-39	\$3.30	\$5.35	\$7.40	\$9.45	\$11.50
40-49	\$5.70	\$10.15	\$14.60	\$19.05	\$23.50
50-59	\$12.30	\$23.35	\$34.40	\$45.45	\$56.50
60-64	\$19.95	\$38.65	\$57.35	\$76.05	\$94.75
65-69	\$27.70	\$54.15	\$80.60	\$107.05	\$133.50
70+	\$33.45	\$65.65	\$97.85	\$130.05	\$162.25

You may elect up to the maximum amount of coverage for yourself and your spouse with no health questions.



Hospital Indemnity

Hospital indemnity insurance, insured by Voya Financial, provides a hospital confinement benefit plus daily benefits which are paid directly to you and can be used for any purpose. A summary of the benefits schedule is below. Please refer to the Summary of Benefits for complete details. Pregnancy is covered under this benefit with no pre-existing condition exclusion. This plan is portable when employment ends.

Hospital Indemnity Plan Schedule of Benefits

Hospital Admission	\$1,500
Daily Hospital Confinement Benefit	\$200 / day up to 30 days per confinement
Critical Care Unit Confinement Benefit	\$400 / day up to 30 days per confinement
Rehabilitation Facility Confinement Benefit	\$100 / day up to 30 days per confinement Includes substance abuse and mental health treatment facilities
Newborn Benefit	\$300 one-time benefit

Plan Description

The hospital indemnity plan pays when you are admitted to the hospital, whether it is a planned or unplanned admission. This includes emergencies and unexpected admissions as well as planned or scheduled surgeries and procedures. The fixed indemnity benefits may be used as you choose to help offset deductibles, coinsurance, and other expenses.

Wellness Benefit

The hospital indemnity plan includes a wellness benefit for covered preventive screenings including but not limited to:

- Annual physical exam, biometric screening, or stress test on bicycle or treadmill
- Blood test for triglycerides, CEA, bone marrow, CA 15-3 (breast cancer), fasting glucose, Hemoglobin A1C
- Chest x-ray, mammograms, breast ultrasound, sonogram, MRI
- Serum testing for cholesterol levels (HDL & LDL) or protein electrophoresis (myeloma)
- Routine dental or vision exam
- Electrocardiogram or ultrasound screening for abdominal aortic aneurysms
- Colonoscopy, prostate-specific antigen testing, or pap smear

Wellness Benefit Amount

Employee: \$50
Spouse: \$50
Child(ren): \$50 per child

Refer to the certificate for the extensive list of eligible covered screenings

Hospital Indemnity Monthly Premiums

Coverage	Premium
Employee Only	\$20.44
Employee + Spouse	\$40.90
Employee + Child(ren)	\$43.96
Family	\$64.42

Accident

The Voya Financial accident plan provides financial protection in the event of an unexpected accident. A summary of the benefits schedule is below. Please refer to the Voya Summary of Benefits or certificate of coverage for complete details. This plan is portable when employment ends. You may continue coverage by paying premiums directly to Voya Financial.

Hospital Care Surgery - Open abdominal, thoracic Blood, plasma, platelets Admission Confinement Transportation Lodging	\$1,500 \$625 \$1,750 \$325/day up to 365 days \$800/trip up to 3 per accident \$200/day up to 30 days
Accident Care Initial doctor visit Urgent care Follow-up doctor treatment Medical equipment Speech & physical therapy X-ray	\$125 \$250 \$125 \$275 \$60 (up to 10 per accident) \$90
Common Injuries Burns - 2nd and 3rd degree Emergency dental work Eye injury Torn knee cartilage Lacerations Tendon, ligament, rotator cuff Concussion Paralysis	\$1,500 to \$20,000 \$125 to \$400 \$110 to \$400 \$250 to \$900 \$50 to \$750 \$600 to \$1,400 \$350 \$12,500 to \$27,000
Injuries - Dislocations Hip Joint Knee Ankle or foot bones (other than toes) Shoulder Elbow, Wrist Partial dislocations	Non-Surgical Surgical \$4,000 \$8,000 \$2,500 \$5,000 \$1,700 \$3,400 \$2,000 \$4,000 \$1,250 \$2,500 25% of the non-surgical benefit
Injuries - Fractures Hip Leg Ankle, Forearm, Hand, Wrist Collarbone	Non-Surgical Surgical \$5,000 \$10,000 \$2,700 \$5,400 \$2,250 \$4,500 \$1,750 \$3,500
Accidental Death and Dismemberment	Employee: \$50,000 Spouse: \$25,000 Child: \$10,000
Additional Covered Benefits	Paralysis, pet boarding, induced coma, general anesthesia, home healthcare, prescriptions, outpatient IV, lab, traumatic brain injury
Sports Accident Benefit Covers accidents as a result of an organized sporting activity	Pays an additional 25% of the Hospital Care, Accident Care, or Common Injuries benefit to a maximum of \$1,000

Accident Monthly Payroll Premiums	
Coverage	Premium
Employee Only	\$9.78
Employee + Spouse	\$19.57
Employee + Child(ren)	\$21.04
Family	\$30.83

Wellness Benefit Amount

Employee: \$50

Spouse: \$50

Child(ren): \$50 per child

Hamilton Employee Assistance Program (EAP)

We provide an employer-paid Employee Assistance Program for all employees and dependents. The Hamilton EAP is a confidential resource to help deal with life's challenges. To obtain an assessment, call (706) 272-6558. You may contact the EAP yourself, or you may be referred by a supervisor, personal representative, or other company official. The initial assessment is free of charge, and your insurance may cover some or all of the cost.

The Hamilton Health Care System EAP provides individual counseling sessions to help you feel better as quickly as possible. Don't let problems overwhelm your life. If you have been dealing with concerns alone and the solutions aren't working, reach out for help.

What Kind of Problems Are Treated?

- Alcohol or drug dependency
- Stress
- Marital issues
- Family difficulties
- Financial problems
- Grief, loss of a job, depression
- Coping with change
- Post-trauma counseling services

Accessing Your EAP

Hamilton Health Care System's EAP is located at 1109 Burleyson Road Suite 100 (Lower Floor), Dalton, GA.



RETIREMENT

We are committed to supporting your financial future. In addition to state retirement benefits through the **Teachers Retirement System (TRS)** or the **Public School Employees Retirement System (PSERS)**, we offer a **403(b) tax-deferred retirement savings program** to help you plan for a secure retirement.

Teachers Retirement System (TRS)



The Teachers Retirement System (TRS) is a defined benefit plan providing a guaranteed monthly retirement income. Eligible employees include those working half-time or more in positions such as teachers, administrators, paraprofessionals, clerical staff, public school nurses, and certain supervisors or managers.

Your TRS account is funded by you and Dalton Public Schools. Employees contribute 6% of earnings and the district contributes 22.32% of earnings.

Public School Employees Retirement System (PSERS)



The Public School Employees Retirement System (PSERS) is a defined benefit plan that provides guaranteed monthly retirement income for public school employees not eligible for the Teachers Retirement System (TRS). PSERS covers non-supervisory positions in Maintenance, Food Service, Transportation, and Custodial functions. Employees hired before July 1, 2012, contribute \$4 per month for 9 months annually (\$36 per year), while those hired on or after July 1, 2012, contribute \$10 per month for 9 months annually (\$90 per year). Retirement benefits are calculated as **\$17.00** per month for each year of service, and employees become vested after 10 years of service. Dalton Public Schools will make a 1% base contribution and match 50% of the first 4% of salary into a supplemental 403(b) retirement plan for those employees covered under PSERS.

Corebridge Financial - Supplemental Retirement - 403(b) / Roth 403(b) / 457 Options

Dalton Public Schools has taken the steps to help you further plan for your retirement by providing Section 403(b), Roth 403(b), and 457 retirement plans for you. Section 403(b) plans are created for non-profit organizations such as schools, universities, charities, and religious groups. 457 plans are for governmental entities.

- There are tax benefits on the money deposited.
- No tax is paid on growth while money is in the account.
- You get to choose where to invest the money, and the money you deposit is 100% vested at all times.
- If you leave employment, you can transfer the money to your new employer's plan or to an individual IRA.
- At retirement, you can get a monthly check - tax is due on each payment at that time.

Below is a chart showing how much money you will have to invest each year, depending on your age when you start saving in order to have at least one million dollars when you retire at age 65. These figures assume that you'll get a 9% average annual return and that you put the money into your 403(b). Returns are not guaranteed.

Your Monthly and Annual Investments for \$1mm+ for Retirement at Age 65		
Age	Per Month	Per Year
25 Years	\$214	\$2,960
30 Years	\$340	\$4,636
35 Years	\$547	\$7,337
40 Years	\$892	\$11,807
45 Years	\$1,498	\$19,547

For more information, please call **Randy Russell** - (706) 271-6177 or **Terry Akins** - (706) 313-3850 at Corebridge Financial.



Farmers Insurance

Most people are required to maintain auto and homeowners insurance. Premiums for these coverages can be expensive and difficult to budget. Dalton Public Schools has partnered with Farmers Insurance to offer discounts up to 35% (depending on your length of employment with Dalton Public Schools) and premium payments through the convenience of payroll deduction.

Why Switch to Farmers Auto & Home?

- Special group rates could save you money because you're part of a participating group. Plus, you may even qualify for a variety of policy discounts to help increase your savings.
- Superior service with one easy-to-remember toll-free number to call for all your needs: (800) 438-6381.
- The Farmers Insurance benefits line is available Monday through Saturday for quotes, to apply for coverage, and for customer service. Claims can be reported 24 hours a day, 7 days a week.
- Convenient payment options that take the hassle out of paying for your insurance. There are several options, so you can choose the one that's best for you.



Auto Insurance

With custom-fit coverages, you can drive your own auto insurance policy while enjoying savings and benefits, like:

- Special group discounts
- Automated payment options
- Claim-free driving rewards
- Car rental
- No deductible windshield repair
- Roadside assistance
- Guaranteed auto repairs for covered losses
- ID protection services

GET A QUOTE

Call today, (800) 438-6381

Go online to Farmers My Auto Home at:
<http://www.myautohome.farmers.com>



Home Insurance

Quality home insurance coverage means you can rest easy knowing your most valuable asset is truly protected, along with savings and benefits, like:

- Special group discounts
- Replacement cost coverage
- Referral networks
- Automated payment options
- ID protection services

CALL (800) 438-6381

Contact Farmers Insurance at (800) 438-6381. Farmers can advise you as to whether it's in your best interest to change insurance companies prior to your renewal date.

IMPORTANT CONTACT INFORMATION

Vendor	Website / Email / Address	Phone Number
Dalton Public Schools Benefits Service Center Mon - Thurs 8am to 6pm EST Fri 8am to 5pm EST	www.daltonpublicschoolsbenefits.com info@daltonpublicschoolsbenefits.com	(866) 481-4920
State Health Benefit Plan (SHBP) Medical Plan Eligibility & Information Medical Plan Enrollment	www.dch.georgia.gov/shbp https://myshbpga.adp.com/shbp	(800) 610-1863
TASC Flexible Spending Account Administrator	www.tasconline.com	(800) 422-4661
Ameritas Dental	www.ameritas.com	(800) 487-5553
EyeMed Vision Care Vision	www.eyemedvisioncare.com	(866) 289-0614
Reliance Standard Life Insurance Company Life Insurance & Disability	www.reliancestandard.com	(800) 351-7500
Voya Financial Critical Illness, Hospital Indemnity, and Accident	www.voya.com	(877) 236-7564
Corebridge Financial Randy Russell & Terry Akins Retirement	www.corebridgefinancial.com	(706) 271-6177 (706) 313-3850
Farmers Insurance Home and Auto Insurance	www.myautohome.farmers.com	(800) 438-6381
Hamilton Employee Assistance Program (EAP)	1109 Burleyson Road, Suite 100, Lower Floor, Dalton, GA	(706) 272-6558





This guide is a general summary of your benefit options. For specific details, refer to each plan's Certificate or Summary Plan Description (SPD). SPDs for your health insurance can be found on the State Health Benefit Plan (SHBP) website at www.dch.georgia.gov/shbp. All other plan documents can be found at <http://www.daltonpublicschoolsbenefits.com>. Every effort has been made to ensure that this document accurately represents the benefits being offered. However, if there are any discrepancies between the terms in this document and the terms of the plan documents, the plan documents will prevail.