

# 2025

## Madison County Charter School System Benefits Guide





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

## MADISON COUNTY CHARTER SCHOOL

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[mybenefits@campusbenefits.com](mailto:mybenefits@campusbenefits.com)

866.433.7661, opt 5

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### Eligibility

- Generally, full-time employees working 20 or more hours per week are eligible to enroll in the various benefits described throughout the guide. (Certain rules may apply per benefit).
- 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.

### 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. For all benefits, you must be actively at work on the effective date of coverage.

### Changes

- Employee benefit elections are allowed as a new hire and during the annual open enrollment period. The selected benefits will remain in effect throughout the plan year.
- A qualifying life event allows eligible changes to benefit elections throughout the plan year.
- **All qualifying life events must be submitted within 30 days of the event date.**
- A qualifying life event is a change in your situation such as getting married, having a baby, or losing health coverage.

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# ENROLLMENT & BENEFITS PORTAL

## Annual Open Enrollment

- Open Enrollment Dates: October - November
- You must re-enroll in the Flexible Spending Account each year.
- Plan Year: January 1 - December 31st

## New Hire Enrollment

- New hires: Benefits enrollment must take place within 30 days of hire date. Please go to [MadisonCountyBenefits.com](https://MadisonCountyBenefits.com) to begin your enrollment.



Review your benefits portal at:  
[MadisonCountyBenefits.com](https://MadisonCountyBenefits.com)

**1** [MadisonCountyBenefits.com](https://MadisonCountyBenefits.com)

**2** Select "Campus Connect" to login

**3** Enter Login Information

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

## FAQ'S

### 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: MCSD18

## New User Registration

1. On Login page click on "Register as a new user" and enter information below
  - First Name
  - Last Name
  - **Company Identifier: MCSD18**
  - 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

## Login Information

Username: \_\_\_\_\_

Password: \_\_\_\_\_

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# 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, Basic Life, Voluntary Term Life & AD&D and Permanent Life policies.
- Important: Review and Understand Guaranteed Issue Options (New Hires).
- Life Events - You are required to submit any life event changes for you and eligible dependents within 30 days of an event.
- This Guide - This guide is presented for illustrative purposes only and is not intended to offer insurance advice. It is important you review each benefit's summary plan description (SPD) and other carrier materials before making any selections.

## There are two separate benefit enrollments:

1. **Campus Benefits Voluntary Benefits**
2. **State Health Benefit Plan Medical Insurance**

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



### How to Enroll in Campus Benefits Voluntary Benefits

1. Visit <https://www.madisoncountybenefits.com/>
2. Select the "Enroll" tab or the "Campus Connect" tab
3. Follow the on-screen instructions OR
4. **Contact Campus Benefits at 866.433.7661, opt 5**
  - Plan year is 1/1 - 12/31
  - **Annual open enrollment occurs in the Fall (October - November)**

### How to Enroll in State Health Benefit Medical Plan

1. Visit <https://www.madisoncountybenefits.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)**

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TOGETHER WE'RE US

# 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.madisoncountybenefits.com/contact-campus>

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

## 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 the group dental card or vision card quickly?

A: Group dental and vision plan information is available at: <https://www.madisoncountybenefits.com/>



Phone: 866.433.7661, Opt 5

Email: [mybenefits@campusbenefits.com](mailto:mybenefits@campusbenefits.com)

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

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# EMPLOYEE ASSISTANCE PROGRAMS



**What is an EAP?** Programs offered to Madison County Charter School Systems' employees to provide guidance with personal issues, planning for life events or simply managing daily life which can affect your work, health and family. The two EAP's below can be used in conjunction with one another.

## Georgia Public Education/Ga DOE EAP

**Eligibility:** Eligible full-time Madison County Charter School Systems' employees working 29+ hours/week, their household members and children up to age 26

- Coverage through Acentra
- Provides support when you're facing issues that interfere with your health, well-being and productivity at home or at work.
- **Receive up to four counseling sessions**
- CALL 1.866.279.5177 or visit [www.EAPHelplink.com](http://www.EAPHelplink.com), Company Code: **GADOE**

## Mutual of Omaha EAP

**Eligibility:** Eligible Madison County Charter School Systems' employees, their household members and unmarried children up to age 26

- Coverage through Mutual of Omaha
- Provides support, resources, and information for personal and work-life challenges
- Receive up to three sessions per issue
- CALL 1.800.316.2796 or visit [mutualofomaha.com/eap](http://mutualofomaha.com/eap)

## Confidential Counseling (Mutual of Omaha & Ga DOE EAP)

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

## Work-Life Solutions (Mutual of Omaha & Ga DOE EAP)

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

## Financial Information and Resources (Mutual of Omaha & Ga DOE EAP)

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

## Online Resources (Ga DOE EAP)

- Timely articles, HelpSheets, tutorials, streaming videos and self-assessments
- Child care, elder care, attorney and financial planner searches

**Plan Rates**  
Coverage provided at no cost to you.

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# DISABILITY INSURANCE



**What is Disability Insurance?** A type of coverage that replaces a portion of your income if injury or illness prevents you from working. 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 or more hours per week

- Coverage through Mutual of Omaha
- Employee must be actively at work on the effective date
- **Employees must use sick leave (if available) in conjunction with the disability benefit**
- No health questions - Every Year at Open Enrollment! (Pre-existing condition will apply for new participants)
- Participants can begin the required disability paperwork up to 3-4 weeks before going out on disability
- **Paid Parental Leave: Can use within 12 months but cannot exceed FMLA**

See important claims information on the Service Hub page.

## Short-Term Disability Quick Summary

Elimination Period	Benefits begin on the 15th day of an injury or illness
Benefit Duration	Covers accidents and sicknesses up to 11 weeks
Benefit Percentage (weekly)	60% of your gross weekly salary
Maximum Benefit Amount Weekly	\$1,250
Pre-Existing Condition Limitation (New Enrollees Only)	3/6 Illness or injury for which you received treatment the 3 months prior to your effective date will not be covered for the first 6 months.

## Long-Term Disability Quick Summary

Elimination Period	Benefits begin on the 91st day of an injury or illness
Benefit Duration	Covers accidents and sicknesses up to Social Security normal age of retirement (Please note exclusions or limitations may apply, see plan certificate for details)
Benefit Percentage (monthly)	60% of your gross monthly salary
Maximum Benefit Amount Monthly	\$6,000
Pre-Existing Condition Limitation (New Enrollees Only)	6/12 Illness or injury for which you received treatment the 6 months prior to your effective date will not be covered for the first 12 months

## Plan Rates

Short-Term Disability	\$0.75 per \$10 of Weekly Benefit
Long-Term Disability	\$0.27 per \$100 of Covered Payroll

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# BASIC LIFE INSURANCE



**What is Basic Life Insurance?** A financial and family protection plan paid for by Madison County Charter School System which provides a lump-sum payment, known as a death benefit, to a beneficiary upon the death of the insured.

**Eligibility:** Eligible Full-time employees working 20 or more hours per week

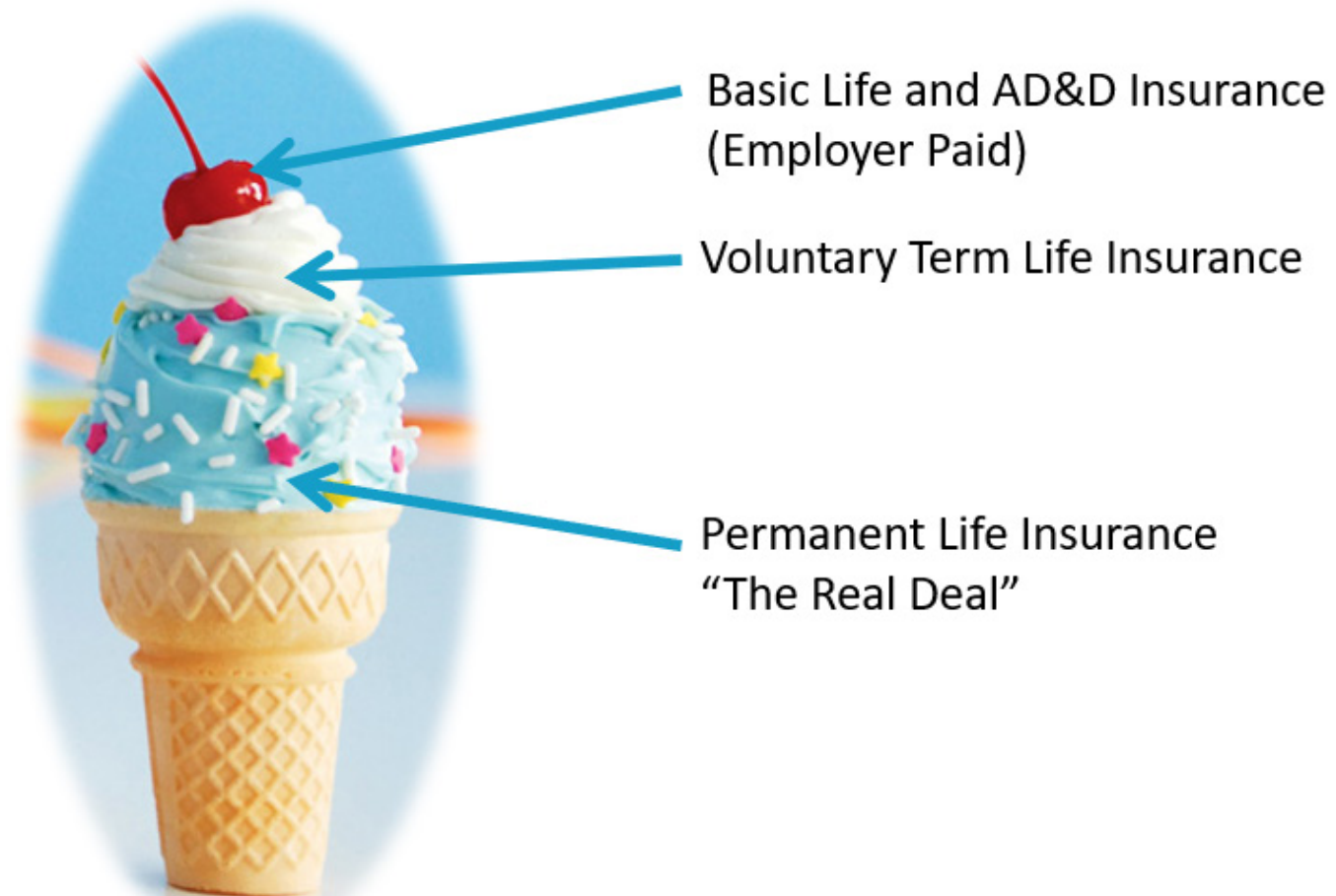
- Coverage through Mutual of Omaha
- Must be actively at work on the effective date

## Basic Life Insurance Quick Summary

All Eligible Employees	\$20,000
Additional Plan Features: Employee Assistance Program, Child Care Benefit, Higher Education Benefit, Repatriation	
Age Reduction	None
Conversion	Included (Rate will increase)

## Plan Rates

Coverage paid for by Madison County Charter School System at no cost to you!



Basic Life and AD&D Insurance  
(Employer Paid)

Voluntary Term Life Insurance

Permanent Life Insurance  
"The Real Deal"

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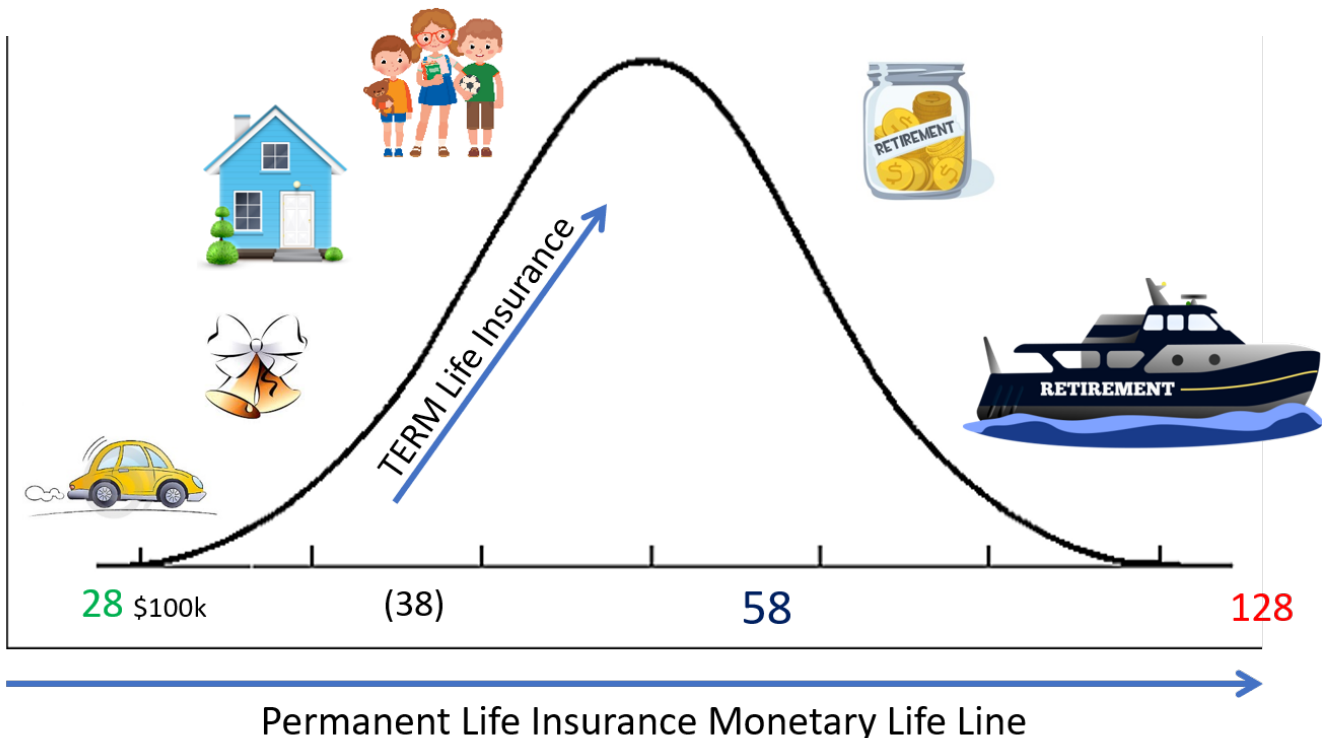
# LIFE INSURANCE 101

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

## TERM LIFE INSURANCE

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

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



## PERMANENT LIFE INSURANCE

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

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

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# VOLUNTARY TERM LIFE & AD&D INSURANCE



**What is Voluntary Term Life Insurance and AD&D?** A financial protection plan which provides a cash benefit to a beneficiary upon the 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 still be met; goals like paying off mortgage, keeping a business running, and paying for college. AD&D coverage is included as a part of life insurance benefits, and will pay out a lump-sum death benefit in the event you or a covered loved one die accidentally or pass away later as the direct result of an accident. This plan also has 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 or more hours per week, spouse & children up to age 26

- Coverage through Mutual of Omaha
- Must be actively at work on the effective date
- If electing Voluntary Term Life outside of initial enrollment period, health questions will be required
- Employee must elect coverage on themselves in order to cover spouse and/or children

Term Life and AD&D Quick Summary	
LIFE AMOUNT	
Employee	In increments of \$10,000 up to the lesser of \$500,000, or 5 times annual salary
Spouse	Increments of \$5,000 up to \$250,000, not to exceed employee amount (terms when employee turns age 80)
Child(ren)	\$5,000 or \$10,000
Child > 6 months	\$1,000
Dependent coverage may not exceed employee coverage amounts	
ACCIDENTAL DEATH & DISMEMBERMENT AMOUNT (INCLUDED)	
Employee, Spouse & Child(ren)	Matches the Life Amount
GUARANTEED ISSUE - FIRST TIME ELIGIBLE/NEW HIRE	
Employee	\$250,000
Spouse	\$50,000
Child(ren)	\$10,000
<b>GUARANTEED INCREASE IN BENEFIT</b>	<ul style="list-style-type: none"> <li>• Employee: If enrolled, can increase by \$20,000 up to guaranteed issue amount.</li> <li>• Spouse: If enrolled, can increase by \$10,000 up to guaranteed issue amount.</li> </ul>
<b>Age Reduction</b>	50% at age 80 (Based on employee age)
<b>Portability Provision</b>	Included (Rate will increase)
<b>Conversion</b>	Included (Rate will increase)
<b>Accelerated Life Benefit</b>	80% of Life Benefit
<b>Waiver of Premium</b>	Included

Employee Life and AD&D Rates	
Age	Per \$10,000
0-29	\$0.88
30-34	\$1.01
35-39	\$1.24
40-44	\$1.62
45-49	\$2.26
50-54	\$3.45
55-59	\$5.70
60-64	\$7.38
65-69	\$12.96
70+	\$39.06

Spouse Life and AD&D Rates	
Age	Per \$5,000
0-34	\$0.64
35-39	\$0.74
40-44	\$1.01
45-49	\$1.56
50-54	\$2.51
55-59	\$3.61
60-64	\$5.56
65-69	\$9.17
70+	\$48.24

*Coverage based on Employee Age / Spouse volume*

Child(ren) Life and AD&D Rates	
\$5,000	\$1.11
\$10,000	\$2.21

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# 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 or more hours per week, spouse & children/grandchildren up to age 26

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

## Permanent Life Quick Summary

### PLAN MAXIMUMS

Employee	\$2,000 - \$200,000
Spouse	\$2,000 - 35,000
Child	\$5,000 - \$50,000 (increments of \$5,000)

### GUARANTEED ISSUE (INITIAL ENROLLMENT/NEW HIRE)

Employee	\$35,000 (Ages 15-50) / \$25,000 (Ages 51-80)
Spouse	\$10,000
Child	\$25,000

### OTHER FEATURES

Guaranteed Premium  
 Guaranteed Death Benefit  
 Guaranteed Interest rate of 4.5%  
 Living Benefit Option Rider - 100% of the benefit amount if you are terminally ill

### Plan Rates

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

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# 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 or more hours per week, spouse & children up to age 26

- Coverage through Davis Vision
- To locate an in-network provider, please visit [www.davisvision.com/member](http://www.davisvision.com/member). Client Code: 8170
- *The chart below is a sample of covered services. Please see the Plan Certificate on your Employee Benefits Website for a detailed listing of services in their entirety. Plan certificate available on your Employee Benefits website.*

Vision Benefits Quick Summary		
	High Plan (In-Network)	Low Plan (In-Network)
Eye Exam	\$10 Copay	\$10 Copay
Contact Lens Exam	15% Discount	15% Discount
Frames	\$175 Allowance + 20% off Balance	\$150 Allowance + 20% off Balance
Single/Bifocal/Trifocal/Lenticular Lenses	\$25 Copay	\$25 Copay
UV Coating, Tint, Scratch Resistance, Polycarbonate, and Progressive Lens	\$12 - \$60	\$12 - \$60
Elective Contacts	\$175 Allowance + 15% off Balance	\$130 Allowance + 15% off Balance
Medically Necessary Contacts	Covered in Full	Covered in Full
Lasik or PRK	40-50% off national average	40-50% off national average
Frequencies	Exams, Frames, and Lens or Contact Lenses every 12 months	Exams, Frames, and Lens or Contact Lenses every 12 months
Additional Info <i>(Allowance must be purchased on two separate invoices)</i>	Each Member Chooses one of the following: <ul style="list-style-type: none"> <li>• 2 pairs of eyeglasses</li> <li>• 1 pair of eyeglasses &amp; contact allowance</li> <li>• Double the contact allowance</li> </ul>	30% discount on an additional pair of glasses and the Exclusive Collection of Contact Lenses evaluation, fitting, and follow-up care is covered in full.
Please visit <a href="https://www.madisoncountybenefits.com/vision">https://www.madisoncountybenefits.com/vision</a> for Out-of-Network allowances and additional information on your vision plan.		

Rates	High Plan	Low Plan
Employee	\$14.08	\$7.21
Employee + One	\$26.74	\$13.69
Employee + Family	\$23.74	\$21.05

**Client Code:** 8170  
**Identification #:** Found on your Davis Vision Card  
**Affiliation:** Madison County School District

*Providers and members can call 1.800.999.5431 to verify coverage and benefits. Call Campus Benefits for questions regarding your coverage at 1.866.433.7661*

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# DENTAL INSURANCE



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

**Eligibility:** Eligible full-time employees working 20 or more hours per week, spouse & dependent children up to age 26

- Coverage through MetLife
- In-Network provider Directory: <https://providers.online.metlife.com/> (Network: PDP Plus)
- Orthodontia available for employees, spouses, and children up to age 26 (only on Middle and High plans)
- Exams and cleanings are allowed 2 times each calendar year and do not have to be separated by 6 months
- No waiting periods or late entrant penalties
- *The chart below is a sample of covered services. Please see the Plan Certificate on your Employee Benefits Website for a detailed listing of services in their entirety.*

	High	Middle	Low
UCR	90 <sup>th</sup> UCR	In-Network Only	90 <sup>th</sup> UCR
Preventive	100%	100%	100%
Basic	80%	90%	80%
Major	50%	60%	0%
Annual Maximum	\$1,000 per person, per calendar year	\$2,000 per person, per calendar year	\$500 per person, per calendar year
<i>Preventive services do not apply to annual max</i>			
Coinsurance	50%	50%	N/A
Ortho Lifetime Maximum (Adults & Children)	\$1,000	\$1,500	N/A
Deductible	\$50 per person/\$150 per family max (Waived for Preventive)		

	Preventive (A)	Basic (B)	Major (C)
High Plan	Routine Exam (2/12 months) Bitewing X-Rays (1/12 months) Cleaning (2/12 Months) Fluoride for Children (18 & under)	Restorative Amalgams Restorative Composites Crown Repair Periodontics (nonsurgical) Denture Repair Anesthesia	Onlays Crowns Endodontics Periodontics (surgical) Implants Prosthodontics Simple Extractions Complex Extractions
Middle Plan	Routine Exam (2/12 months) Bitewing X-Rays (1/12 months) Cleaning (2/12 Months) Fluoride for Children (18 & under)	Restorative Amalgams Restorative Composites Endodontics (nonsurgical) Periodontics Denture Repair Simple Extractions Complex Extractions Anesthesia	Onlays Crowns/Crown Repair Implants Prosthodontics
Low Plan	Routine Exam (2/12 months) Bitewing X-Rays (1/12 months) Cleaning (2/12 Months) Fluoride for Children (18 & under)	Restorative Amalgams Restorative Composites Crown Repair Periodontics (nonsurgical) Denture Repair Anesthesia Endodontics	

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# DENTAL INSURANCE ADDITIONAL RESOURCES



## DENTAL PLAN

Dental insurance pays a portion of the costs associated with dental care.

### Tips for utilizing your benefit



Look for participating dentist online at [metlife.com](https://www.metlife.com).  
\*The Middle Plan is the only in-network only plans. Utilizing an in-network dentist will reduce your out-of-pocket costs.




Go to [metlife.com/mybenefits](https://www.metlife.com/mybenefits) or download the MetLife Mobile App. Find providers, view claims and more.  
**Group name: Madison County School District**



Your dentist can request a pre-treatment estimate for any service that is more the \$300 to help you manage your cost and care

- In-network discounts apply even after you reach your plan’s annual maximum, reducing your out-of-pocket expense.



**PDP Plus**

Madison County School District  
Group Name

5946558  
Group Number

Providers: 1.877.638.3379  
Members: 1.800.GET.MET8 (1.800.438.6388)

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



	High Plan	Middle Plan	Low Plan
Employee Only	\$56.44	\$49.14	\$38.48
Employee + Dependent	\$103.71	\$90.26	\$71.20
Employee + Family	\$158.85	\$138.17	\$108.72

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# ACCIDENT INSURANCE



**What is Accident Insurance?** This coverage is designed to help offset medical and out-of-pocket costs associated with unforeseen accidents. Payments made directly to you and benefits do not offset with medical insurance.

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

- Coverage through MetLife
- **No health questions - Every Year!**
- Keep your coverage even if you retire or change employers
- *The chart below is a sample of covered services. Please see the Plan Certificate on your Employee Benefits Website for a detailed listing of services in their entirety.*

Accident Plan Quick Summary	High Plan	Low Plan	
<b>INJURIES</b>			<b>High Plan Rates</b>
Fractures	\$100-\$6,000	\$50-\$3,000	Employee \$10.89
Dislocations	\$100-\$6,000	\$50-\$3,000	Employee + Spouse \$22.99
Second and Third Degree Burns	\$100-\$10,000	\$50-\$5,000	Employee + Child(ren) \$22.38
Concussions	\$400	\$200	Employee + Family \$27.53
Cuts/Lacerations	\$50-\$400	\$25-\$200	
Eye injuries	\$300	\$200	
<b>MEDICAL SERVICES &amp; TREATMENT</b>			<b>Low Plan Rates</b>
Ambulance	\$300-\$1,000	\$200-\$750	Employee \$5.70
Emergency Care	\$50-\$100	\$25-\$50	Employee + Spouse \$11.98
Non-Emergency Care	\$50	\$25	Employee + Child(ren) \$11.75
Physician Follow-Up	\$75	\$50	Employee + Family \$14.71
Therapy Services (including physical therapy)	\$25	\$15	
Medical Testing Benefit	\$200	\$100	
Medical Appliances	\$100-\$1,000	\$50-\$500	
Inpatient Surgery	\$200-\$2,000	\$100-\$1,000	
<b>Hospital Coverage (Accident)</b>			
Admission	\$1,000 (non-ICU)-\$2,000 (ICU) per accident	\$500 (non-ICU)-\$1,000 (ICU) per accident	
Confinement	\$200 a day (non-ICU)-\$400 (ICU) up to 31 days	\$100 a day (non-ICU)-\$200 (ICU) up to 31 days	
Inpatient Rehab	\$200 a day up to 15 days	\$100 a day up to 15 days	
Age Reduction	25% at age 65; 50% at age 70		
Includes Accidental Death and Dismemberment Benefit. <i>See policy certificate for details.</i>			

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# 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.

**Eligibility:** Eligible full-time employees working 20 or more hours per week, spouse & dependent children up to age 26

- Coverage through MetLife
- Must be actively at work on the effective date
- Elect Critical Illness with or without Cancer Coverage based on your individual needs
- Attained Age - Rates will increase as you age
- **No health questions- Every Year!** (Pre-existing condition will apply for new participants)
- *The chart below is a sample of covered services. Please see the Plan Certificate on your Employee Benefits Website for a detailed listing of services in their entirety.*

Critical Illness Benefits Quick Summary	CI Only	CI w/Cancer
Employee	\$10,000 or \$20,000	\$10,000 or \$20,000
Spouse	100% of EE Amount	100% of EE Amount
Dependent Children	100% of EE Amount	100% of EE Amount
<b>COVERED SPECIFIED CRITICAL ILLNESSES</b>	<b>Pays % of Face Amount</b>	<b>Pays % of Face Amount</b>
Heart Attack (Myocardial Infarction)	100%	100%
Stroke	100%	100%
Major Organ Failure	100%	100%
End Stage Renal Failure (Kidney)	100%	100%
Alzheimer's Disease	100%	100%
Coronary Artery Bypass Graft Surgery	100%	100%
Full Cancer Benefit	None	100%
Partial Cancer Benefit	None	25%
22 Additional Covered Conditions	25% - 1 payment for each condition per lifetime Addison's disease (adrenal hypofunction); amyotrophic lateral sclerosis (Lou Gehrig's disease); cerebrospinal meningitis (bacterial); cerebral palsy; cystic fibrosis; diphtheria; encephalitis; Huntington's disease (Huntington's chorea); Legionnaire's disease; malaria; multiple sclerosis (definitive diagnosis); muscular dystrophy; myasthenia gravis; necrotizing fasciitis; osteomyelitis; poliomyelitis; rabies; sickle cell anemia (excluding sickle cell trait); systemic lupus erythematosus (SLE); systemic sclerosis (scleroderma); tetanus; and tuberculosis	
<b>GUARANTEED ISSUE (Up to Age 70)</b>	\$20,000	\$20,000
<b>ANNUAL WELLNESS INCENTIVE</b>	\$50 - View the Wellness Incentives page for more details	
<b>TOTAL BENEFIT</b>	3 times the amount of your initial benefit	
<b>PRE-EXISTING CONDITION</b>	3/6 Any illness or injury for which you received treatment the 3 months prior to your effective date will not be covered for the first 6 months.	

### Plan Rates

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

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# HOSPITAL INDEMNITY INSURANCE



**What is Hospital Indemnity Insurance?** Supplemental coverage that helps offset costs associated with hospital stays, whether for planned or unplanned reasons. Payments made directly to you and benefits do not offset with medical insurance.

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

- Coverage provided by MetLife
- **No health questions – Every Year! (No pre-existing condition limitation)**
- No waiting period and no age reduction of benefits
- Keep your coverage even if you retire or change employers
- *The chart below is a sample of covered services. Please see Plan Certificate for a detailed listing of services in their entirety which can be found on your new benefits website.*

Hospital Indemnity Quick Summary	High Plan	Low Plan
Hospital Admission	\$1,000	\$500
ICU Supplemental Admission	\$1,000	\$500
Admission Benefit (4 times per calendar year - separated by 90 days)		
Confinement	\$200	\$100
ICU Supplemental Confinement	\$200	\$100
Confinement Benefit (365 days per calendar year)		
Confinement Benefit for Newborn Nursery Care (2 days per confinement)	\$50	\$25
Wellness Incentive	\$50 - View the Wellness Incentives page for more details	

High Plan Rates	
Employee	\$23.71
Employee + Spouse	\$43.72
Employee + Child(ren)	\$35.66
Employee + Family	\$55.67

Low Plan Rates	
Employee	\$14.13
Employee + Spouse	\$26.23
Employee + Child(ren)	\$21.49
Employee + Family	\$33.59

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# CANCER INSURANCE



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

**Eligibility:** Eligible full-time employees working 20 or more hours per week, spouse & children up to age 26

- Coverage through Guardian
- No age reduction on benefits
- Payments made directly to you and do not offset with medical insurance
- **No health questions - Every Year!** (Pre - existing condition will apply for new participants)
- **Must be cancer free for 5 years if previously diagnosed with cancer**
- Keep your coverage even if you retire or change employers
- *The chart below is a sample of covered services. Please see the Plan Certificate on your Employee Benefits Website for a detailed listing of services in their entirety.*

Cancer Plan Quick Summary		High Plan	Low Plan	
<b>HOSPITAL AND RELATED BENEFITS - DAILY BENEFIT</b>				
Initial Cancer Diagnosis		\$5,000	\$2,500	<b>High Plan Monthly Rates</b>
Continuous Hospital Confinement		\$400	\$300	
Private Duty Nursing Expenses (daily)		\$150	\$100	
At Home Nursing, Hospice Care		\$100	\$50	
<b>RADIATION, CHEMOTHERAPY &amp; RELATED BENEFITS</b>				
Radiation, Chemo for Cancer (every 12 months)		\$15,000	\$10,000	Employee + Spouse \$56.91
Blood, Plasma, Platelets (every 12 months)		Up to \$10,000	Up to \$5,000	Employee + Child(ren) \$34.91
Medical Imaging (2 per year)		\$200	\$100	Employee + Family \$61.23
<b>SURGERY AND RELATED BENEFITS</b>				
Surgery (inpatient or outpatient)		up to \$5,500	up to \$4,125	<b>Low Plan Monthly Rates</b>
Anesthesia (% of surgery)		25%	25%	
Ambulatory Surgical Center		\$350/day	\$250/day	
Second Opinion		\$300	\$200	
<b>Bone Marrow or Stem Cell Transplant</b>				
1. Bone Marrow		\$10,000	\$7,500	Employee \$18.82
2. Stem Cell		\$2,500	\$1,500	Employee + Spouse \$34.93
3. Donor Benefit		\$1,500	\$1,000	
<b>MISCELLANEOUS BENEFITS</b>				
Ambulance (per confinement)		\$250	\$200	Employee + Child(ren) \$21.55
Transportation (local or non-local)		\$0.50 per mile (\$1,500 round trip)	\$0.50 per mile (\$1,000 round trip)	Employee + Family \$37.66
Outpatient or Family Lodging (daily)		\$100	\$75	
Physical or Speech Therapy (Daily)		\$50	\$50	
New or Experimental Treatment		\$200 per day / \$2,400 per month	\$100 per day / \$1,000 per month	
Prosthesis		\$300 - \$6,000	\$200 - \$4,000	
Annual Wellness Incentive (See Wellness Incentives page for details)		\$75	\$50	
Waiting Period (Initial Diagnosis)		30 Days		
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 first 12 months.		

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# WELLNESS INCENTIVES

## GET REWARDED FOR PREVENTIVE CARE

**What are Wellness Incentives?** An annual reimbursement for covered members who complete one of the eligible screening procedures on your critical illness, hospital indemnity and/or cancer insurance plans.

**Eligibility:** You, spouse and dependents who are covered on the critical illness, hospital indemnity or cancer plans

**How it works:**

- If you or a covered dependent get one of the eligible screenings, you can file a wellness claim
- Once approved, you will receive a check for the wellness benefit amount
- The wellness incentive can be filed annually as long as your critical illness and cancer plans are in force

Available Wellness Incentives	Low Plan	High Plan
Critical Illness and Hospital Indemnity - MetLife		\$50
Cancer Plan - Guardian	\$50	\$75
State Health Benefit Plan	See the SHBP for details more details	

What Qualifies as Wellness?	
Critical Illness and Hospital Indemnity - MetLife	Cancer - Guardian
<p>May Include, but not limited to: (Please refer to the benefits website for additional wellness incentives and claims information)</p> <ul style="list-style-type: none"> <li>• Annual physical exam</li> <li>• Biopsies for cancer</li> <li>• Blood test to determine total cholesterol/triglycerides</li> <li>• Bone marrow testing</li> <li>• Breast MRI, ultrasound, sonogram</li> <li>• Cancer antigen 15-3 and 125 blood test for breast cancer (CA 15-3)/ovarian cancer (CA 125)</li> <li>• Carcinoembryonic antigen blood test for colon cancer (CEA)</li> <li>• Carotid doppler</li> <li>• Chest x-rays</li> <li>• Clinical testicular exam</li> <li>• Colonoscopy; Digital rectal exam (DRE)</li> <li>• Doppler screening for cancer</li> <li>• Doppler screening for peripheral vascular disease</li> <li>• Echocardiogram; Electrocardiogram (EKG)</li> <li>• Endoscopy</li> <li>• Fasting blood glucose/plasma test</li> <li>• Flexible sigmoidoscopy</li> <li>• Hemocult stool specimen</li> <li>• Hemoglobin A1C</li> <li>• Human papillomavirus (HPV) vaccination</li> <li>• Lipid panel</li> <li>• Mammogram</li> <li>• Oral cancer screening</li> <li>• Pap smears or thin prep pap test</li> <li>• Prostate-specific antigen (PSA) test</li> <li>• Serum cholesterol test to determine LDL or HDL</li> <li>• Serum protein electrophoresis</li> <li>• Skin Exam; Skin cancer biopsy; screening</li> <li>• Stress test on bicycle or treadmill</li> <li>• Successful completion of smoking cessation program</li> <li>• Tests for sexually transmitted infections (STIs)</li> <li>• Thermography</li> <li>• Two hour post-load plasma glucose test</li> <li>• Ultrasounds for cancer detection</li> <li>• Ultrasound screening of the abdominal aorta for abdominal aortic aneurysms</li> <li>• Virtual colonoscopy</li> </ul>	<ul style="list-style-type: none"> <li>• Bone marrow testing</li> <li>• BRCA testing</li> <li>• Breast ultrasound</li> <li>• Breast MRI</li> <li>• CA 15-3 (blood test for breast cancer)</li> <li>• CA125 (blood test for ovarian cancer)</li> <li>• CEA (blood test for colon cancer)</li> <li>• Chest x-ray</li> <li>• Colonoscopy/Virtual</li> <li>• Colonoscopy</li> <li>• CT scans /MRI scans</li> <li>• Flexible sigmoidoscopy</li> <li>• Hemocult stool analysis</li> <li>• Mammography</li> <li>• Pap smear /ThinPrep pap test</li> <li>• PSA (blood test for prostate cancer)</li> <li>• Serum protein electrophoresis (blood test for myeloma)</li> <li>• Testicular ultrasound</li> <li>• Thermograph</li> </ul>
How to submit a wellness claim?	
<ul style="list-style-type: none"> <li>• Call 1.800.GET.MET8. (800.438.6388)</li> <li>• File your Health Screening Benefit online through the MyBenefits portal at <a href="http://www.metlife.com/mybenefits">www.metlife.com/mybenefits</a> or by mail with a paper claim form.</li> </ul> <p><i>Important Note: Must use Madison County School District when registering on the MetLife MyBenefits site.</i></p>	<ul style="list-style-type: none"> <li>• Log on to <a href="http://guardianlife.com">guardianlife.com</a> and select "My Account/Login" to register or access your account.</li> </ul>
<p>Additional wellness information and claim forms can be found on your employee benefits website, <a href="http://madisoncountybenefits.com">madisoncountybenefits.com</a></p>	

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# MEDCARECOMPLETE

## THE SMART WAY TO REDUCE YOUR HEALTHCARE COSTS



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

**Eligibility:** Eligible full-time employees working 20 or more hours per week, spouse & unmarried children up to age 26

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

### Included with the MedCareComplete Membership:

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

### Medical Bill Negotiator

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

### Telemedicine

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.**

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

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

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

### Medical & ID Theft Protection

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

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# FLEXIBLE SPENDING ACCOUNTS



**What are Medical Flexible Spending Accounts (FSAs)?** A pre-tax benefit account used to pay for out-of-pocket healthcare costs such as deductibles, co-pays, prescribed medication, and other medical costs.

**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 or more hours per week, spouse & children up to age 26; Children under age 13 are eligible for Dependent Care and up to age 26 for Medical FSA

- Coverage through Medcom
- **Plan year is from January 1 - December 31**
- Dependent Care Funds used for daycare and available for tax dependent adults for adult care
- Only family status changes will allow you to alter your annual election. The altered election must be consistent with the status change
- Married and not filing jointly participants limited to \$2,500 deferral for Dependent Care
- Transfer of funds between Dependent Care and un-reimbursed Medical are prohibited
- For a full list of eligible expenses, please go to [www.medcom.net](http://www.medcom.net)

## FSA Benefits Quick Summary

### MEDICAL FSA ACCOUNT

Minimum Contribution	\$300 annually
Maximum Contribution	\$3,200 annually
Carryover Maximum*- Maximum participants can carry over if re-electing the plan	\$640

Total elected amount is available at the beginning of the plan year  
**All receipts should be kept to submit if verification is requested**

### DEPENDENT CARE ACCOUNT

Minimum Contribution	\$300 annually
Maximum Contribution	\$5,000 annually
Carryover Maximum	None

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
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### Admin Fee

Fee Per Participant Per Month (One fee even if electing both Medical FSA and Dependent Care)	\$3.50
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### 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 or disabled for self-care (i.e. day care, adult day care). Medical expenses for your dependent are not eligible for reimbursement under the Dependent Care account.*

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# HELPFUL FSA RESOURCES



## What is covered under Medical FSA Accounts?

- 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 under 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

**Medcom**  
BENEFIT SOLUTIONS

**Your Benefits Are Going MOBILE**

In the App Store go to: MedCom Mobile

Online Portal and Access to information:  
<https://medcom.wealthcareportal.com>

### IMPORTANT NOTE:

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

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# 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
- Visit <https://www.legalplans.com/why-enroll> or call 800.821.6400 for additional information
- Non-Members & Members create an account and select Employer for plan information (creating an account doesn't enroll you in plans)
- Plan Certificate available on your Employee Benefits Website (<https://www.madisoncountybenefits.com/>)

Low Plan Quick Summary		High Plan Quick Summary							
<b>Money Matters</b>	<ul style="list-style-type: none"> <li>• Identity Theft Defense</li> <li>• Negotiations with Creditors</li> <li>• Promissory Notes</li> <li>• Debt Collection Defense</li> <li>• Tax Collection Defense</li> </ul>	<ul style="list-style-type: none"> <li>• Identity Theft Defense</li> <li>• Negotiations with Creditors</li> <li>• Promissory Notes</li> <li>• Debt Collection Defense</li> <li>• Tax Collection Defense</li> </ul>	<ul style="list-style-type: none"> <li>• Personal Bankruptcy</li> <li>• LifeStages Identity Management</li> <li>• Tax Audit Representation</li> <li>• Financial Education Workshops</li> </ul>						
<b>Home &amp; Real Estate</b>	<ul style="list-style-type: none"> <li>• Deeds</li> <li>• Mortgages</li> <li>• Foreclosure</li> <li>• Tenant Negotiations</li> <li>• Eviction Defense</li> <li>• Security Deposit Assistance</li> </ul>	<ul style="list-style-type: none"> <li>• Deeds</li> <li>• Mortgages</li> <li>• Foreclosure</li> <li>• Tenant Negotiations</li> <li>• Eviction Defense</li> <li>• Security Deposit Assistance</li> </ul>	<ul style="list-style-type: none"> <li>• Sale or Purchase (Primary or Vacation Home)</li> <li>• Refinancing &amp; Home Equity</li> <li>• Property Tax Assessments</li> <li>• Boundary &amp; Title Disputes</li> <li>• Zoning Applications</li> </ul>						
<b>Estate Planning</b>	<ul style="list-style-type: none"> <li>• Simple and Complex Wills</li> <li>• Healthcare Proxies</li> <li>• Living Wills</li> <li>• Codicils</li> <li>• Powers of Attorney (Healthcare, Financial, Childcare, Immigration)</li> </ul>	<ul style="list-style-type: none"> <li>• Simple and Complex Wills</li> <li>• Healthcare Proxies</li> <li>• Living Wills</li> <li>• Codicils</li> <li>• Powers of Attorney (Healthcare, Financial, Childcare, Immigration)</li> </ul>	<ul style="list-style-type: none"> <li>• Revocable &amp; Irrevocable Trusts</li> </ul>						
<b>Family &amp; Personal</b>	<ul style="list-style-type: none"> <li>• Guardianship</li> <li>• Conservatorship</li> <li>• Name Change</li> <li>• Review of ANY Personal Legal Document</li> <li>• School Hearings</li> <li>• Demand Letters</li> <li>• Affidavits</li> <li>• Personal Property Issues</li> <li>• Garnishment Defense</li> <li>• Domestic Violence Protection</li> </ul>	<ul style="list-style-type: none"> <li>• Guardianship</li> <li>• Conservatorship</li> <li>• Name Change</li> <li>• Review of ANY Personal Legal Document</li> <li>• School Hearings</li> <li>• Demand Letters</li> <li>• Affidavits</li> <li>• Personal Property Issues</li> <li>• Garnishment Defense</li> <li>• Domestic Violence Protection</li> </ul>	<ul style="list-style-type: none"> <li>• Juvenile Court Defense (Including Criminal Matters)</li> <li>• Parental Responsibility Matters</li> <li>• Review of Immigration Documents</li> <li>• Prenuptial Agreement</li> <li>• Adoption</li> </ul>						
<b>Civil Lawsuits</b>	<ul style="list-style-type: none"> <li>• Disputes over Consumer Goods &amp; Services</li> <li>• Administrative Hearings</li> <li>• Incompetency Defense</li> </ul>	<ul style="list-style-type: none"> <li>• Disputes over Consumer Goods &amp; Services</li> <li>• Administrative Hearings</li> <li>• Incompetency Defense</li> </ul>	<ul style="list-style-type: none"> <li>• Civil Litigation Defense &amp; Mediation</li> <li>• Small Claims Assistance</li> <li>• Pet Liabilities</li> </ul>						
<b>Elder Care Issues</b>	Consultation & Document review for issues related to your (or Spouse's) parents: <ul style="list-style-type: none"> <li>• Medicare</li> <li>• Medicaid</li> <li>• Prescription Plans</li> <li>• Nursing Home Agreements</li> <li>• Leases</li> <li>• Promissory Notes</li> <li>• Deeds</li> <li>• Wills</li> <li>• Power of Attorney</li> </ul>	Consultation & Document review for issues related to your (or Spouse's) parents: <ul style="list-style-type: none"> <li>• Medicare</li> <li>• Medicaid</li> <li>• Prescription Plans</li> <li>• Nursing Home Agreements</li> <li>• Leases</li> <li>• Promissory Notes</li> <li>• Deeds</li> <li>• Wills</li> <li>• Power of Attorney</li> </ul>	<table border="1"> <thead> <tr> <th>Low Plan</th> <th>High Plan</th> </tr> </thead> <tbody> <tr> <td>\$8.00 Per Month</td> <td>\$16.50 Per Month</td> </tr> <tr> <td colspan="2" style="text-align: center;">NO COPAY</td> </tr> </tbody> </table>	Low Plan	High Plan	\$8.00 Per Month	\$16.50 Per Month	NO COPAY	
Low Plan	High Plan								
\$8.00 Per Month	\$16.50 Per Month								
NO COPAY									
<b>Vehicle &amp; Driving</b>	<ul style="list-style-type: none"> <li>• Repossession</li> <li>• Defense of Traffic Tickets</li> <li>• Driving Privileges Restoration</li> <li>• License Suspension due to DUI</li> </ul>	<ul style="list-style-type: none"> <li>• Repossession</li> <li>• Defense of Traffic Tickets</li> <li>• Driving Privileges Restoration</li> <li>• License Suspension due to DUI</li> </ul>							

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# STATE HEALTH BENEFIT PLAN

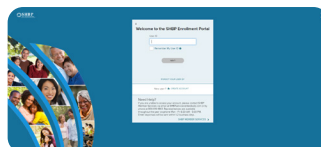


**Eligibility:** Please review the SHBP Decision Guide for plan eligibility rules.

- Coverage through Anthem (BCBS of GA) or United Healthcare
- All qualifying life events must be submitted via the SHBP Portal
- **Notice:** Madison County School District 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 2022 Plan Year
- Kaiser Permanente is only available in the Atlanta Metro area.

## 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:

<https://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

## SHBP 2025 Wellness Incentives Overview:

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

Plan Option	Anthem HMO MyIncentive Account (MIA)	Anthem Health Reimbursement Arrangement (HRA)	UHC HMO & HDHP Health Incentive Account (HIA)
Who's Eligible	Up to	Up to	Up to
Member	480 credits	480 credits	480 credits
Spouse	480 credits	480 credits	480 credits
Bonus credits for member	N/A	N/A	480 credits*
Potential Total credits/dollars	960 credits	960 credits	1,440 credits

Please review the Active Decision Guide for full incentive program details and requirements.

\*Members and their covered spouses enrolled in UHC can earn a 240 well-being incentive credit match with a maximum combined up to 480 well-being incentive credits. The credits will be added to your HIA.

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# 2025 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 2025												
	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	
<b>Deductible</b>												
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	
<b>Medical OOPM (Out of Pocket Maximum)</b>												
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	
<b>Coinsurance (Plan Pays)</b>												
	85%	60%	80%	60%	75%	60%	80%	80%	70%	50%	100%	
<b>HRA (Health Reimbursement Arrangement) Credits</b>												
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	
<b>Medical</b>												
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%	
<b>Retail Rx</b>												
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	
<b>Mail Order Rx</b>												
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												
<b>Monthly Premiums</b>	<b>Anthem Gold Plan HRA</b>		<b>Anthem Silver Plan HRA</b>		<b>Anthem Bronze Plan</b>		<b>Anthem HMO</b>	<b>UHC HMO</b>	<b>UHC HDHP</b>		<b>Kaiser HMO*</b>	
<b>Employee</b>	<b>\$194.67</b>		<b>\$131.17</b>		<b>\$82.67</b>		<b>\$157.53</b>	<b>\$196.58</b>	<b>\$72.69</b>		<b>\$157.53</b>	
<b>Employee + CH</b>	<b>\$355.26</b>		<b>\$247.31</b>		<b>\$164.86</b>		<b>\$292.12</b>	<b>\$358.50</b>	<b>\$147.89</b>		<b>\$292.12</b>	
<b>Employee + SP</b>	<b>\$482.76</b>		<b>\$349.41</b>		<b>\$247.56</b>		<b>\$404.77</b>	<b>\$486.77</b>	<b>\$226.60</b>		<b>\$404.77</b>	
<b>Family</b>	<b>\$643.35</b>		<b>\$465.55</b>		<b>\$329.75</b>		<b>\$539.36</b>	<b>\$648.69</b>	<b>\$301.80</b>		<b>\$539.36</b>	
<b>An \$80 tobacco surcharge will be added to all rates for tobacco users.</b>												

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

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## The Service Hub Helps With:

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

The 2025 Benefits Enrollment Guide is provided for illustrative purposes only. Actual benefits, eligibility, services, premiums, claims processes and all other features and plan designs for coverage offered is governed exclusively by the insurance contract and associated Summary Plan Description (SPD). In case of discrepancies between this document and the insurance contract and SPD, the contract and SPD will prevail. We reserve the right to change, modify, revise, amend or terminate these plan offerings at any time. Updates, changes and notices are all located at [madisoncountybenefits.com](https://www.madisoncountybenefits.com). These should be reviewed fully prior to electing any benefits.