DISCOVER YOUR BENEFITS

Medical • Dental • Vision • Basic Life and AD&D • Voluntary Life and AD&D
Short Term Disability • Long Term Disability • Employee Assistance Program (EAP)
Health Savings Account (HSA) • Flexible Spending Account (FSA) • Legal Shield
Wellness • Voluntary Benefits

ROCKDALE COUNTY
ESTABLISHED 1870
GEORGIA

2025
BENEFIT GUIDE

TABLE OF CONTENTS

OUR COMMITMENT TO YOU -
A PLAN DESIGN FOR YOUR NEEDS

Rockdale County believes in making an impact not only within our government, but also with our employees. Above all, we want our employees to make an impact in the communities where they live, work and play. Rockdale County's Benefits Plan is designed to recognize the diverse needs of our workforce. Our plan continues to:

- Provide competitive and comprehensive benefits options that allow you to design your own plan based on your individual needs.
- Offers plans to provide long-term financial security for you and your family.

We encourage you to review all your options before making your benefit elections. Only you can determine which benefits are the best fit for you and your family. We want you to understand all your options and make informed decisions.

Benefit Basics

Once you elect benefit options, your elections remain in effect for the entire plan year. You may only change coverage due to a qualified "life event" and must do so within 30 days of the event. A life event is a significant change in a person's life that creates the need to add, drop, increase, or change coverage (see list of qualifying events). Rockdale County encourages you to review all your benefit choices and make selections wisely.

Benefits Enrollment

Employees can ***enroll in*** or ***waive*** their benefits through the ADP website at www.workforcenow.adp.com/. Log on to complete your 2025 benefit elections:

If you have not already registered for ADP Workforce Now (an email is required to register):

Go to www.workforcenow.adp.com/.

Changing your Coverage

Make your benefit elections carefully, including the choice to waive coverage. Your pretax elections will remain in effect until the next annual open enrollment period unless you experience an IRS approved qualifying live event.

Qualified Life Events - Examples

- Marriage, divorce, or legal separation
- Death of spouse or other dependent
- Birth or adoption of a child
- A spouse loses coverage under another employer group medical health plan
- A spouse becomes eligible for coverage under another employer group medical health plan
- A dependent's eligibility status changes due to age
- You or your spouse are covered under a group health plan and experience a change in work hours.

If you experience a qualified life event, you will have 30 days from the date of that event to make a change or you must wait until the next annual Open Enrollment period. Life event changes can be initiated at www.workforcenow.adp.com/ (follow the instructions above), and by contacting Talent Management. Supporting documentation is required in order to make your requested change.

Beneficiary Forms for Life Insurance and Defined Benefit Pension Plan must also be on file in Talent Management. Please make sure that you update these forms as needed throughout the year. If you need to make updates, please complete the personal information, beneficiary and signature sections of these forms and return them to Talent Management. These forms are important to the well-being of you and your family.

YOUR BENEFITS / WHO PAYS WHAT?

Employee Benefits

Rockdale County provides a large selection of benefits that help protect your health, wealth and well being. You are eligible for the benefits described here if you are a regular employee working at Rockdale County at least 30 hours per week. You are eligible for benefits on the first day of the month following 30 days from your date of hire. The County provides some benefits at no cost to you, some you pay for, and other benefit costs are shared between you and Rockdale County. This approach helps to create the best benefits program that fits individual needs and lifestyle.

Benefit	Who Pays?	Pre-Tax / Post-Tax Benefit
Medical / Dental / Vision	Rockdale County & Employee	Pre-Tax
Basic Life & AD&D	Rockdale County	N/A
Dependent Life Insurance	Rockdale County	N/A
Employee Assistance Program (EAP) *Available to all employees*	Rockdale County	N/A
Short-Term / Long-Term Disability	Rockdale County & Employee	Post-Tax
Flexible Spending Accounts	Employee	Pre-Tax
Voluntary Term Life Insurance	Employee	Post-Tax
Voluntary Benefits	Employee	Pre-Tax/Post-Tax
Legal Plan	Employee	Post-Tax

Dependent Coverage

You also can elect coverage for your spouse and/or dependent children (up to age 26) for some benefits including:

- Medical
- Dental
- Vision
- Basic Life AD&D
- Dependent Life (up to age 19, if not enrolled in school)
- Voluntary Life

MEDICAL BENEFITS
ANTHEM (BCBSGA)

Medical Insurance | ANTHEM (BCBSGA)

As we all know, the cost of quality health coverage has increased over the past few years. At the same time, we need health care that protects our physical health as much as health care that protects our financial well-being. That's why Rockdale County believes it is important to invest in quality plans that are cost effective, easy to use and provide value. The following options are provided through ANTHEM (BCBSGA):

MEDICAL / ANTHEM (BCBSGA)		OPEN ACCESS PLUS		OPEN ACCESS PLUS HSA (High Deductible Health Plan)	
	In-Network Only	In-Network	Out-of-Network	In-Network	Out-of-Network
Co-Insurance	20%	20%	40%	10%	30%
Calendar Year Deductible - Individual - Family	 $500 $1,500	 $500 $1,500	 $500 $1,500	 $2,000 $4,000	 $4,000 $8,000
Out-of-Pocket Maximum (Deductible included) - Individual - Family	 $6,850 $13,700	 $6,850 $13,700	 $13,700 $27,400	 $4,000 $8,000	 $8,000 $16,000
Office Visit Copay - Primary - Specialist - Live Health Online (Virtual)	 $25 Copay $50 Copay $5 Copay	 $25 Copay $50 Copay $5 Copay	 40% after deductible 40% after deductible 40% after deductible	 10% after deductible 10% after deductible 10% after deductible	 30% after deductible 30% after deductible Not covered
Preventive Visits	100% Covered	100% Covered	40% after deductible	100% Covered	30% after deductible
Inpatient Services	20% after deductible	20% after deductible	40% after deductible	10% after deductible	30% after deductible
Outpatient Services	20% after deductible	20% after deductible	40% after deductible	10% after deductible	30% after deductible
Emergency Room (Waived if admitted)	$200 Copay	$200 Copay	$200 Copay	10% after deductible	30% after deductible
Urgent Care	$60 Copay	$60 Copay	$60 Copay, deductible does not apply	10% after deductible	10% after deductible
Lifetime Max. Benefits	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited

Prescription Drugs	OPEN ACCESS PLUS (In network only)	OPEN ACCESS PLUS	OPEN ACCESS PLUS – HSA (High Deductible Health Plan)
Retail (30 day supply) Generic Preferred Brand Non-Preferred Brand	 $20 Copay $35 Copay $60 Copay	 $20 copay for in and out of network $35 copay for in and out of network $60 copay for in and out of network	 0% after deductible 0% after deductible 0% after deductible
Home Delivery (90 day supply) Generic Preferred Brand Non-Preferred Brand	 $40 Copay $70 Copay $120 Copay	 $40 copay in network $70 copay in network $120 copay in network *No coverage for out of network 90-day supply	N/A

Help your employees take charge of their health
Our Sydney Health mobile app gives them access to health plan information and doctors — from anywhere.
Your employees have ongoing access to many valuable benefits. With the Sydney Health app, they can take advantage of features that help them save time, money, and manage their health, including:
Estimate costs
Check symptoms
Find care
Chat with a doctor
Access claims
Check benefits
View ID cards
Order medicine
Manage healthcare spending accounts
Motivate your employees to download the app
Our Sydney Health toolkit is filled with personalized information and how-to's your employees can use right away.
View the toolkit »
Anthem.

All the materials you need to get started with the Sydney Health app

Sydney Health flyer
Distribute this flyer to help your employees understand the benefits of the app and how to use it.

My Health Dashboard flyer
Share this guide to help your employees meet their health goals.

My Health Records flyer
Share this flyer to let your employees know about this helpful health records tool.

Connect with us flyer
Give this flyer to employees for help with checking their symptoms and connecting with a health professional, whenever, wherever.

Sydney Health Symptom Checker, Text Chat, Video Chat flyer
A valuable resource for employees, this flyer covers the basics of how to get care from a mobile device.

Find Care flyer
Let your employees know how our Care and Cost Finder tool can help them search for doctors and dentists, and compare costs.

Email
Share highlights of the smart new app.

Introductory video
Post to your intranet site or internal social feed to generate excitement.

Blog post/Intranet article
Remind employees to download the app by posting this on your company intranet.

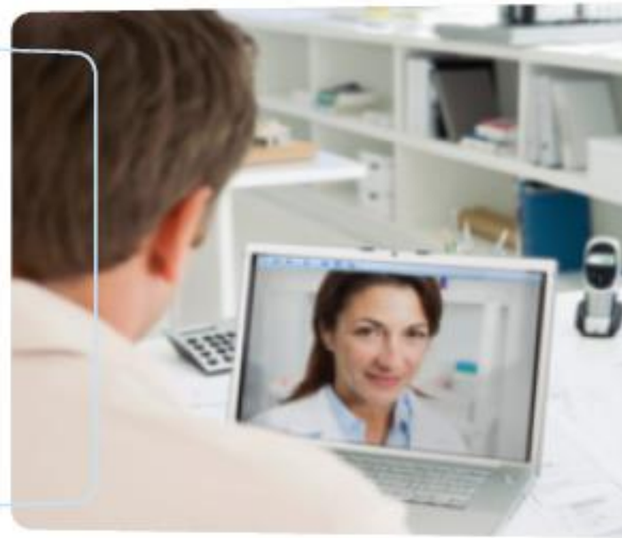
FAQs
Help employees understand the specifics of how the app works.

Do you have questions about Sydney Health or these materials?

Reach out to your broker or Anthem Blue Cross and Blue Shield team — they're ready to help.

No waiting room, no need to leave home.

You can also meet with board-certified Psychiatrists using LiveHealth Online!



When you're not feeling well you can get the support you need easily using LiveHealth Online. Whether you have a cold, you're feeling anxious or need help managing your medication, doctors and mental health professionals are right there, ready to help you feel your best. Using LiveHealth Online you can have a video visit with a board-certified doctor, psychiatrist or licensed therapist from your smartphone, tablet or computer from home or anywhere.

On LiveHealth Online, you can:

- **See a board-certified doctor 24/7.** You don't need an appointment to see a doctor. They're always available to assess your condition and send a prescription to the pharmacy you choose, if needed.[1] It's a great option when you have pink eye, a cold, the flu, a fever, allergies, a sinus infection or another common health issue.
- **Visit a licensed therapist in four days or less.**[2] Have a video visit with a therapist to get help with anxiety, depression, grief, panic attacks and more. Schedule your appointment online or call **1-888-548-3432** from **8 a.m. to 8 p.m.**, seven days a week.
- **Consult a board-certified psychiatrist within two weeks.**[3] If you're over 18 years old, you can get medication support to help you manage a mental health condition. To schedule your appointment call **1-888-548-3432** from **8 a.m. to 8 p.m.**, seven days a week.

You've got access to affordable and convenient care

Your Anthem plan includes benefits for video visits using LiveHealth Online, so you'll just pay your share of the costs — usually $59 or less for medical doctor visits, and a 45-minute therapy or psychiatry session usually costs the same as an office mental health visit.

Sign up for LiveHealth Online today – it's quick and easy

Go to **livehealthonline.com** or download the app and register on your phone or tablet.

Download on the App Store | ANDROID APP ON Google play

Anthem. LiveHealth ONLINE

MEDICAL BENEFITS KAISER

Medical Insurance | Kaiser

Your medical benefit will continue to be provided through Kaiser Permanente. You will be offered one plan. A summary of this plan is included here for your review.

Medical / Kaiser	Select Providers
Co-Insurance (you pay)	20%
Calendar Year Deductible - Individual - Family	 $250 $500
Out-of-Pocket Maximum (Deductible included) - Individual - Family	 $5,000 $10,000
Office Visit Copay - Primary - Specialist - Telemedicine	 $15 Copay $30 Copay $0 Copay
Preventive Visits	100% Covered
Inpatient Services	20% after deductible
Outpatient Services	20% after deductible
Emergency Room (Waived if admitted)	$200 Copay
Urgent Care	$30 Copay
Ambulance Services (per trip)	$100 co-pay
Lifetime Max. Benefits	Unlimited
Prescription Drugs	
Retail (30 day supply) Preventive Generic Drugs Preferred Generic Drugs Preferred Brand Drugs Specialty Drugs	 $5 at KP Pharmacies / $15 at Network Pharmacies $15 at KP Pharmacies / $25 at Network Pharmacies $30 at KP Pharmacies / $40 at Network Pharmacies 20% 20% to $300 max KP Pharmacies / 20% Network Pharmacies
Home Delivery (90 day supply)	2x Copay

Get the right care, **right now**

Save a trip with Kaiser Permanente's many virtual care options. Now you can get the care you need with no drive, no wait, and no copay. With all of these options your care team will have access to your medical records to personalize your care.

KP Now Telephone & Video Visits

KP Now offers same-day adult care—by phone or video appointment—for certain minor symptoms such as*:

- toothaches
- bladder infection
- sore throat
- stuffy nose/sinus issues
- cough
- itchy/red eyes
- allergies
- nausea, vomiting, and diarrhea

Just like a visit to the office, a Kaiser Permanente doctor will be able to view your medical record, prescribe medicine, order lab tests and X-rays, and make future appointments, if needed.

Specialty Telephone & Video Visits

Get care from wherever you are with telephone and video appointments* for a growing number of specialties, including Pediatrics, Behavioral Health, and Dermatology. These visits can be conducted right from your computer, tablet, or smartphone.

Over the next several months, appointments will also be available in Endocrinology, Infectious Disease, Ob/Gyn, Nephrology, Gastroenterology, Neurology/Sleep Medicine, Oncology, Ear/Nose/Throat, and more.

Email

Send an email to your doctor's office for answers to non-urgent health questions. You can also email a pharmacist with questions about medications.

Nurse Advice by Phone

Not sure what kind of care you need? Our 24/7 advice nurses can help guide you in the right direction by suggesting which type of care is best for your symptom or condition, helping you decide where to go for care, and even scheduling a routine appointment, if appropriate.

Already a member?
For advice or appointments call **404-365-0966.**
For easy access to Email and Video Visits download the Kaiser Permanente App.

*For members 18 or older who are registered on kp.org and have seen their doctor in the past year

Please Recycle. 60520908 10/16 Nine Piedmont Center • 3495 Piedmont Road NE • Atlanta, GA 30305

KAISER PERMANENTE®

HEALTH SAVINGS ACCOUNT (HSA)

(only available with HDHP Plan)

If you enroll in the High Deductible Health Plan (HDHP), you are eligible and encouraged to participate in the Health Savings Account (HSA). With the HDHP, you have an annual deductible to meet before benefits are paid by insurance. Preventive care is covered at 100% if you use a network physician without first meeting your deductible. You can use the money in your HSA to pay for the deductible and can access these funds via a special debit card or by submitting reimbursement requests.

Some features of your HSA include:

Control

- You make all of the decisions about your HSA:
- How much money you put in the account;
- Which medical expenses to pay from the account; and
- Whether to save the money from year to year

Portability

You keep the money in the account and it grows tax-deferred even if you:

- Change jobs;
- Change your health plan;
- Become unemployed;
- Change your marital status; or
- Carryover an unspent balance at the end of the year

Tax Savings

Your HSA provides tax savings:

- Contributions to your account are pre-tax (except for certain state taxes);
- Withdrawals for qualified expenses are tax-free

Flexibility

You can use the pre-tax money in your HSA for qualified medical expenses or you can save it to pay for:

- Health insurance premiums or medical expenses if you become unemployed;
- Future medical expenses in retirement (before Medicare);
- Out-of-pocket expenses when covered by Medicare
- Long-term care expenses and insurance

IMPORTANT NOTE

HSA's are now offered via payroll deductions. It is important that you open your Health Savings Account as soon as possible. Visit https://www.anthem.com for more information.

2025 HSA LIMITS

- **$4,300 Max for Individual Coverage; $8,550 for Family Coverage**
- **$1,000 "Catch-Up" for 55 and older**

FLEXIBLE SPENDING ACCOUNTS (FSA)

(only available with In-Network Plan and Open Access Plan)

Flexible Spending Accounts (FSA) | Ameriflex

A healthcare flexible spending account (FSA) is a smart and easy way to save money while protecting yourself and your family from expensive medical-related bills. Whether you have frequent anticipated medical costs, or simply want to be prepared financially should an unforeseen accident occur, allocating funds to an FSA can save you up to 30% on eligible healthcare expenses. Since the funds are pre-tax, every dollar you contribute earns you more in tax savings -- and with the rising cost of healthcare, every dollar matters.

Rockdale County offers you the opportunity to participate in Healthcare and Dependent Care Flexible Spending Accounts (FSA's) through Ameriflex. These plans allow you to pay for eligible expenses like deductibles, co-insurance, co-pays, eye exams, frames, lenses, prescription drugs, dental and orthodontic expenses, and mental health services all with pre-tax contributions. Day care expenses for dependents (dependent children under age 13, disabled children, disabled spouse incapable of self-care, or disabled dependent parent incapable of self-care).

Healthcare Flexible Spending Account (FSA)

If you're like most Americans, you're spending money every year on out-of-pocket, routine medical expenses. You can keep more of that money in your pocket and give yourself an instant raise when you make pre-tax contributions **(up to 3,200 per year!)** to a healthcare FSA. You'll get access to your entire election on day one of the plan year.

Dependent Care Account (DCA)

A DCA is an extension of an FSA and is designed to pay for the daily care of an eligible child or adult dependent. Funds can be used for expenses such as day care, before- and after-school programs, eldercare, and pre-school. The dependent day care service must be necessary in order for the employee to work. Expenses for 'mother's morning out" type programs are not eligible for reimbursement. The Dependent Care FSA is **$5,000 ($2,500 if married, but file income tax return separately from spouse).**

Convenience Card

Quickly and conveniently pay for qualified expenses with your MyAmeriflex Card. The card will automatically withdraw the funds from your benefit account when you swipe it at eligible merchants and (in most cases) eliminates the hassle of having to verify the eligibility of an expense later on.

Mobile App

Convenience and award-winning customer service – right at your fingertips! With the MyAmeriflex Mobile App, you can access your account from anywhere. Check your account balance, file a claim, or check on the status of a reimbursement right from your mobile phone.

Online Account Management just got easier. By logging into MyAmeriflex.com, you can gain access to resources aimed at helping you maximize the value of your benefit plan. In addition to managing all aspects of your account, you can also access interactive how-to's, spending calculators, and more.

How it works

When you choose to participate in your employer-sponsored FSA, you will elect a total dollar amount to contribute to your account, funded in the form of pre-tax payroll deductions taken out of each paycheck incrementally over the course of the year. The new plan year for the FSA will be January 1, 2025 through December 31, 2025. Your elections must be made prior to the beginning of the 2025 plan year during open enrollment. You will be unable to change your contribution amount until next open enrollment unless you experience a qualified event.

FSA "Rollover" Rule

You may now "rollover" up to $640 into the next plan year's account and it does not count toward the following year's maximum election amount. 2.5 Month Grace Period: You have until March 15, 2025 to spend down any remaining 2024 FSA funds.

How to enroll

Employees will enroll for Flexible Spending Accounts through the ADP portal (www.workforcenow.adp.com)

Once enrolled log on to Ameriflex at http://www.myameriflex.com

DENTAL INSURANCE

Taking care of your teeth is as important as taking care of the rest of your body. That's why Rockdale County offers a dental plan that covers routine check ups and additional services needed for your health.

Dental Insurance | DELTA DENTAL

Delta Dental offers coverage for any dentist you would like to use. Using dentists in the Delta Dental PPO network will maximize your benefit level under this plan and minimize your out-of-pocket cost. The Delta Dental Premier network also provides a greater discount than using Non-Delta Dental providers. Coverage for Non-Delta Dental providers is based on the usual, customary and reasonable fees. You may locate participating providers at www.deltadentalins.com.

Delta Dental	PPO & Premier Network Providers	Non-Delta Dental Provider
Deductible Individual Family	$50 $150	$50 $150
Diagnostic & Preventative Services (D&P) (Exams, Cleanings, X-Rays, Sealants & Space Maintainers)	100%	100%
Basic Services (Fillings, Simple Extractions & Denture Repair/Reline/Rebase)	80%	80%
Endodontics (Root Canals)	80%	80%
Periodontics (Surgical and Non-Surgical Periodontics)	80%	80%
Oral Surgery	80%	80%
Major Services (Crowns, Inlays, Onlays & Cast Restorations)	50%	50%
Prosthodontics (Bridges & Dentures)	50%	50%
Implants (Implant Services)	50%	50%
Orthodontics (Adult & Dependent Children)	50%	50%
Orthodontic Lifetime Maximum	$1,500	$1,500
Annual Plan Maximum* (Per member each Calendar Year)	$1,500	$1,500

****Diagnostic & Preventive services count toward annual maximum***

Vision Insurance | ANTHEM

Rockdale County offers flexible and easy to use vision coverage through Blue Cross Blue Shield of Georgia. This plan also provides benefits based on whether you use a network or non-network provider. You can find a network provider at www.anthem.com.

Vision / BCBS	In-Network	Out-of-Network
Exams	$10 Copay	Up to $35 Allowance
Lenses Single Vision Bifocal Trifocal	 $10 Copay $10 Copay $10 Copay	 Up to $25 Allowance Up to $40 Allowance Up to $55 Allowance
Frames	$130 Allowance with 20% off the balance	Up to $45 Allowance
Contact Lenses (Materials only) Elective / Disposable Medically Necessary	 $130 Allowance * Covered 100%	 $92 Allowance $200 Allowance
Frequency Exams Frames Lenses or Contact Lenses	 Once every 12 months Once every 12 months Once every 12 months	

Elective conventional (non-disposable) contacts have a $115 allowance with an additional 15% off any remaining balance.

Elective disposable contacts have a $115 allowance with no additional discount.

EMPLOYEE RATES

Below you will find the payroll deductions for all plans being offered by Rockdale County. Please note that all premiums listed below are deductions **per pay period**.

Medical Rates (Per Pay Period)

ANTHEM (BCBSGA) Employee Contributions	OPEN ACCESS PLUS In-Network		OPEN ACCESS PLUS		OPEN ACCESS PLUS – HSA (High Deductible Health Plan)	
	Wellness Participant	Wellness Non-Participant	Wellness Participant	Wellness Non-Participant	Wellness Participant	Wellness Non-Participant
Employee Only	$75.37	$105.88	$79.99	$112.37	$59.46	$83.52
Employee + Spouse	$159.59	$190.09	$169.40	$201.78	$128.67	$153.27
Employee + Child(ren)	$144.29	$174.80	$153.17	$185.55	$116.36	$140.96
Family	$228.38	$258.89	$242.45	$274.84	$184.12	$208.71

KAISER Employee Contributions	$250 DHMO	
	Wellness Participant	Wellness Non-Participant
Employee Only	$92.00	$120.93
Employee + Spouse	$194.80	$223.73
Employee + Child(ren)	$176.14	$205.07
Family	$278.78	$307.71

Dental Rates (Per Pay Period)

DELTA DENTAL Employee Contributions (per pay period)	
Employee Only	$7.85
Employee + 1	$25.14
Family	$40.53

Vision Rates (Per Pay Period)

BCBS Employee Contributions (per pay period)	
Employee Only	$1.22
Employee + 1	$3.03
Family	$5.59

WELLNESS

A strong County cannot exist without healthy employees. At ROCKDALE COUNTY, we believe that the health and well-being of our employees has a direct and important connection to the vitality and success of our County. From a business perspective, we believe these efforts will support our growth, productivity and profitability/ operations over time.

And more important, it is simply the right thing to do for our employees and their families. The daily choices we make can help us live healthier, happier, and more fulfilling lives—both at work and at home.

Our Board of Commissioners continues to be committed to developing a culture of wellness and good health throughout our county. We have partnered with EPIC Brokers & Consultants and ANTHEM (BCBSGA) to implement a comprehensive wellness program designed to improve your health, well- being, and productivity.

Our goal is to enhance your health and wellness by fostering interest in and encouraging you to adopt healthier lifestyles and understand that daily health related decisions have an impact on your wellbeing.

A comprehensive wellness program can:

- Increase productivity, morale and employee engagement
- Improve your health and well-being
- Increase your job satisfaction
- Reduce absenteeism and injuries
- Help contain healthcare and other costs
- Assist with talent, recruitment and retention WELLNESS

Premium Incentives

To earn the wellness participant rate for the upcoming year you will need to complete the following by the deadline announced by Talent Management:

- Biometric Screening (or a physician fax form)
- Online Health Assessment (ANTHEM (BCBSGA) located on Anthem member portal or Sydney App (www.anthem.com) under Health Assessment and Kaiser located on www.kp.org/engage under Total Health Assessment)
- Tobacco Affidavit
- Two wellness activities. The wellness activities can be a combination of any of the following:
    1. Coaching onsite
    2. Fitness classes
    3. Walking Sessions
    4. Lunch & Learns/ Seminars
    5. Webinars

*** Are you a Tobacco/Nicotine User? Need help kicking the habit? Enroll in the tobacco cessation program. Find out more information at www.anthem.com or www.kp.org.**

Those employees who choose to complete the steps mentioned above will **pay less** than those employees who choose not to participate.

Please keep in mind – all employees are eligible to participate in the **"Live Well Rockdale"**, not just employees enrolled in the Rockdale County medical plan.

BASIC LIFE & AD&D, VOLUNTARY LIFE AND DISABILITY

Basic Life & AD&D | UNUM

Rockdale County provides all eligible employees with a County paid Basic Life and Basic Accidental Death and Dismemberment (AD&D) benefit through UNUM.

Basic Life AD&D / UNUM	
Basic Life Benefit **Spouse Basic Life** ***Child Basic Life**	2 x Annual Salary to a maximum of $150,000 $5,000 $1,000

*Up to age 19 or 25 if a FT Student.

Voluntary Life Insurance | UNUM

In addition to the Basic Life and AD&D benefits provided by Rockdale County, you have the option to purchase additional life insurance for yourself, your spouse or your family. All *new hires* have the opportunity to enroll in coverage up to the Guarantee Issue Amount without completing an Evidence of Insurability form. If you decline coverage as a new hire and wish to enroll at the next open enrollment, you will have to complete a health questionnaire and be approved for coverage before coverage can begin.

Voluntary Life / UNUM	
Employee Voluntary Life	You can purchase coverage in increments of $10,000 up to a maximum of $500,000 or 7x Annual Salary. Guarantee Issue Amount is 7x Annual Salary up to a maximum of $200,000
Spouse Voluntary Life	Increments of $10,000 up to 50% of the amount you elect for yourself up to $250,000. Guarantee Issue Amount is 50% of the employee's benefit up to $50,000.
Child(ren) Voluntary Life	Increments of $2,000 up to 100% of employee's benefit up to $10,000. Guarantee Issue Amount is 100% of employee's benefit up to $10,000.

Disability | UNUM

Protecting your paycheck is important and that is why Rockdale County provides employees with the option to purchase Short and Long Term Disability coverage through UNUM.

Shorth Term Disability / UNUM	
Benefit	Benefits begin the 14th day of an accident or injury (maternity covered as an illness)
Rockdale County pays 50% of the premium	The benefit pays 60% of your before-tax weekly earnings to a maximum of $1,385 weekly for 24 weeks.
Rate is $0.305 per $10 of compensation	

Long Term Disability / UNUM	
Benefit	Benefit begins after the 180th day of disability
Rockdale County pays 50% of the premium	The benefit pays 60% of your before-tax monthly earnings to a maximum of $6,000 a month until you are no longer disabled or reach the age of 65. (See benefit summary for disabilities occurring at age 62 or older)
Rate is $0.40 per $100 of compensation	

NOTE: Personalized pricing for LTD & STD is available inside the open enrollment portal (ADP).

VOLUNTARY BENEFITS - AFLAC

AFLAC Group Critical Illness w/Cancer

A serious medical event such as cancer, heart attack or stroke could leave you with uncovered expenses such as deductibles, copayments, travel expenses to and from treatment centers and the loss of wages or salary. Group Critical Illness from AFLAC may help guard you against financial hardship. AFLAC's Group Critical Illness plan includes coverage for cancer and the protection you need to concentrate on what is most important—your treatment, care and recovery.

Group Cancer

Cancer coverage pays benefits to help with the cost of cancer screening and cancer treatment including radiation, chemotherapy, surgery and more.
Benefits to help with out of pocket medical and indirect non-medical cost of cancer treatment including:

- $50 Annual Specified Cancer-Screening test for each insured
- Chemotherapy & Radiation
- Hospitalization & Surgery
- Travel & more
- Guaranteed issue*

AFLAC Whole Life

This life insurance coverage provides whole life insurance and an opportunity to build savings through a cash accumulation account. You can even take loans and partial withdrawals from the account (once the cash value has built up to certain limits).

For more information or to enroll, contact the local AFLAC agent, Cassandra Mobley at 770.833.6136

Group Hospital Indemnity (Medical Bridge)

If you got sick or hurt, could you cover all of your medical expenses? Even with health insurance, you may still have to deal with deductibles, co-payments and co-insurance. Not to mention all the other bills you're already paying each month - mortgage, groceries, electricity and gasoline. That money must come from somewhere, too. AFLAC's Group Medical Bridge plan offers added financial protection for those out-of-pocket costs related to an accident or sickness. Provides a lump sum benefit for a covered hospital confinement, outpatient surgery, or diagnostic expense to help cover co-payments and deductibles that are not covered by most major medical plans.

- HSA and Non-HSA options
- Covered hospital confinement (all plans)
- $50 Annual Wellness Benefit
- Emergency Room Benefit
- Outpatient surgery
- Diagnostic expense
- Guaranteed Issue*

Group Accident Insurance

Group Accident Insurance helps pay for out-of-pocket costs that arise from covered accidents such as fractures, dislocations and lacerations. This is 24-hour coverage and includes the Line of Duty Rider. Aflac's group accident insurance provides benefits for many costs associated with accidental injury, regardless of any existing employer-sponsored healthcare benefits. The plan pays benefits that can be used for medical and non- medical expenses following a covered accidental injury.

LEGAL SHIELD AND EAP

Everyone deserves legal protection. Our legal plans are not just for lawsuits or for those involved in the criminal justice system, but for everyday people with everyday situations. LegalShield gives you the ability to talk to an attorney on an unlimited number of personal legal matters without worrying about the hourly costs. For a flat monthly fee, you can access legal advice, no matter how traumatic or trivial the issue. Our services include:

- Advice on an unlimited number of legal topics
- Letters and phone calls on your behalf
- 24/7 emergency assistance
- Legal document review
- Toll-Free phone consultations
- Trial defense hours
- Forms service center
- Will preparation
- 25% off the law firm's standard hourly rates

Contact Beth Fincher at 770-853-2925 for more information and to enroll.

For the 16th year in a row, identity theft is one of the leading complaints filed with the FTC. IDShield, our identity theft plan, is the 'oldest new name' in the market, with more than one million members, more than 200,000 personal identity consultations, and nearly 10,000 individual identities restored.

IDShield is the only service in the industry to offer comprehensive restoration services through Kroll's Licensed private investigators. An IDShield membership will protect your identity by monitoring personally identifiable information, providing preventive consultations with a licensed investigator, and should an identity theft occur, assigning a licensed investigator to work with the member to fully restore their identity back to its pre-theft status. Our services included:

- Identity Consultation Services
- Alerts and Notifications
- Black Market Website Surveillance
- Court Records Monitoring
- Quarterly Credit Score Tracker
- Dependent Identity Theft Protection
- Comprehensive Identity Restoration

Employee Assistance Program (EAP)

Just when you think you have it figured out, along comes a challenge. But whether those challenges are big or small, your Employee Assistance and Work/Life Support Program is available to help you and your family find a solution and restore your peace of mind.

- Achieve Work/Life Balance
- Financial Services & Referral
- Legal Consultation
- Identity Theft
- Child Care Assistance/Program 24/7
- Pet Care
- Senior Care

For assistance, call UNUM's Health Advocate at 1.800.635.5597

PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

If you or your children are eligible for Medicaid or CHIP and you are eligible for health coverage from your employer, your State may have a premium assistance program that can help pay for coverage. These States use funds from their Medicaid or CHIP programs to help people who are eligible for these programs, but also have access to health insurance through their employer. If you or your children are not eligible for Medicaid or CHIP, you will not be eligible for these premium assistance programs.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, you can contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, you can contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, you can ask the State if it has a program that might help you pay the premiums for an employer-sponsored plan.

Once it is determined that you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must permit you to enroll in your employer plan if you are not already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, you can contact the Department of Labor electronically at www.askebsa.dol.gov or by calling toll-free 1-866-444-EBSA (3272).

If you live in certain States, you may be eligible for assistance paying your employer health plan premiums. You should contact your State for further information on eligibility. The list below are states current as of 07/31/2022. Contact your state for more information on eligibility.

ALABAMA – Medicaid http://myalhipp.com/
Phone: 1-855-692-5447

ALASKA – Medicaid http://myakhipp.com/
Phone 1-866-251-4861
Email: CustomerService@MyAKHIPP.com
Medicaid Eligibility:
https://health.Alaska.gov.dpa/pages/default.aspx

COLORADO – Medicaid
http://www.colorado.gov/pacific/hcpf/child-health-plan-plus
CHP+ Customer Service: 1-800-359-1991

FLORIDA – Medicaid
https://www.flmedicaidtplrecovery.com/flmedicaidplrecovry.com/hipp/index.html
Phone: 1-877-357-3268

GEORGIA – Medicaid
https://Medicaid.Georgia.gov/health-insurance-premium-payment-program-hipp
Phone: 678-564-1162, Press 1

HEALTH INSURANCE PORTABILITY ACCOUNTABILITY ACT (HIPAA) SPECIAL ENROLLMENT RIGHTS

HIPAA provisions state that if you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself or your dependents in a plan offered by Rockdale County. if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing towards your or your dependents' other coverage). However, you must request enrollment within 30 days after you or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as result of marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and your dependents in one of the Rockdale County plans. However, you must enroll within 30 days after the marriage, birth, adoption or placement for adoption.

Effective April 1, 2009, special enrollment rights also exist in the following circumstances:

- If you or your dependents experience a loss of eligibility for Medicaid or your State Children's Health Insurance Program (SCHIP) coverage; or

- If you or your dependents become eligible for premium assistance under an optional state Medicaid or SCHIP program that would pay the employee's portion of the health insurance premium.

Note: In the two above listed circumstances only, you or your dependents will have sixty (60) days to request special enrollment in the group health plan coverage. An individual must request this special enrollment within sixty (60) days of the loss of coverage described at bullet one, and within sixty (60) days of when eligibility is determined as described at bullet two.

To request special enrollment or obtain more information, contact Talent Management at 770.278.7574.

Extension of Dependent Coverage to Age 26 (Coverage effective until end of birth month)

Individuals whose coverage ended or were denied coverage (or were not eligible for coverage), because the availability of dependent coverage of children ended before attainment of age 26 are eligible to enroll in the Rockdale County's medical coverage. Individuals may request enrollment for such children for 30 days from the date of the qualifying event. For more information contact Talent Management at 770.278.7574.

Lifetime Benefit Limit on Medical

The lifetime limit on the dollar value of benefits under ANTHEM (BCBSGA) does not apply. Individuals whose coverage ended by reason of reaching a lifetime limit under the plan are eligible to enroll in the plan. Individuals have 30 days from the date of this notice to request enrollment. For more information contact Talent Management at 770.278.7574.

Women's Health and Cancer Rights Act of 1998

The Women's Health and Cancer Rights Act of 1998 requires group health plans to make certain benefits available to participants who have undergone a mastectomy. In particular, a plan must offer mastectomy patients benefits for:

- All stages of reconstruction of the breast on which the mastectomy was performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Prostheses
- Treatment of physical complications of the mastectomy, including lymphedema

Our plan complies with these requirements. Benefits for these items generally are comparable to those provided under our plan for similar types of medical services and supplies. Of course, the extent to which any of these items is appropriate following mastectomy is a matter to be determined by the patient and her physician.

Our plan neither imposes penalties (for example, reducing or limiting reimbursements) nor provides incentives to induce attending providers to provide care inconsistent with these requirements. If you would like more information about WHCRA required coverage, you can contact ANTHEM (BCBSGA) at 1.855.397.9267.

CONTACT INFORMATION

Need additional information? Have a question about one of your benefits? Keep this brochure handy for a quick reference for all your benefit needs. If you still have questions, please contact Rockdale County Talent Management at 770.278.7574 or hr.benefits@rockdalecounty.org.

Plan	Administrator	Phone Number	Website
Medical Benefits	ANTHEM POS ANTHEM HSA Kaiser	1.855.397.9267 1.844.274.5201 1.404.261.2590	www.anthem.com www.anthem.com www.kp.org
Dental	DELTA DENTAL	1.800.521.2651	www.deltadentalins.com
Vision	BCBS	1.866.723.0515	www.anthem.com
Basic Life AD&D	UNUM	1.800.635.5597	www.UNUM.com
Disability	UNUM	1.800.635.5597	www.UNUM.com
Voluntary Benefits	AFLAC	1.770.833.6136	www.aflac.com
Flexible Spending Account	Ameriflex	1.844.423-4636	www.myameriflex.com/
Legal Plan	Legal Shield Beth Fincher	1.800.654-7757 1.770.853.2925	https://www.legalshield.com/
Employee Assistance Program (EAP)	Health Advocate thru UNUM	1.800.635.5597	www.unum.com
Retiree Benefits Administrator	ACCG formerly GEBCORP	1.800.736.7166	www.gebcorp.com
EPIC Brokers & Consultants	Sharon Matthews	1.678.939.4905	sharon.matthews@epicbrokers.com
Michael Gasses Agency	Karen Stephens	1.770.957.5535	kstephens@michaelgassesagency.com
Benefits Enrollment Portal	ADP		www.workforcenow.adp.com

The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the insurer. The text contained in this Guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are always possible. In case of discrepancy between the Guide and the actual plan documents, the actual plan documents and/or policy contracts will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about your Guide, contact EPIC Brokers & Consultants. These materials may not be reproduced in any way without the written permission of EPIC Brokers & Consultants.

NOTES

P.O. Box 289
981 Milstead Avenue
Conyers, GA 30012
770-278-7575
https://rockdalecountyga.gov