

# 2026 Employee Benefits New Hire Guide



## Benefits for the 2026 Plan Year

  
benefits  
service center



For more information, access the benefits website at  
[www.effinghamschoolsbenefits.com](http://www.effinghamschoolsbenefits.com) or call the Benefits Service Center at  
(844) 249-ECSD (3273).

# INTRODUCTION

## Opening Remarks

This guide provides a brief overview of your Effingham County Schools benefits and the enrollment process. We encourage you to review this booklet carefully prior to completing your elections. Benefit plan documents contain complete plan details and can be requested through the Benefits Service Center or located on the benefits website at [www.effinghamschoolsbenefits.com](http://www.effinghamschoolsbenefits.com).

Our extensive benefits package provides financial protection and peace of mind for you and your family. Effingham County Schools provides a significant financial contribution towards your State Health Benefit Plan (SHBP) premiums. The district also provides basic life insurance coverage for you, your spouse, and your child(ren) at no cost. For the plans in which you have a contribution, your contribution will be payroll deducted.

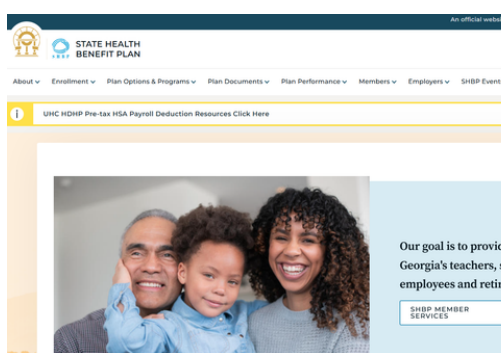
Your employee elections during enrollment are valid for the entire 2026 plan year unless you have a qualifying life event or change in family status.



**Make every moment count  
because every student matters.**



## Your Benefits Resources



**benefits  
service center**

### Benefits Service Center

Contact the Effingham County Schools Benefits Service Center for benefits questions, claims inquiries, assistance with voluntary plan enrollment, and general SHBP inquiries. The Benefits Service Center can also assist you with your voluntary benefits enrollment.

Phone: **(844) 249-ECSD (3273)**

Hours:

Monday through Thursday: 8am - 6pm

Friday: 8am - 5pm

### Benefits Website

Access plan documents, benefit summaries, forms, premium information, benefits presentations and guides, links to carrier websites (including SHBP), and more online at the benefits website at [www.effinghamschoolsbenefits.com](http://www.effinghamschoolsbenefits.com).

### State Health Benefit Plan (SHBP)

- Access the Decision Guide, premium information, wellness program information, links to the enrollment portal and vendor websites, and more at SHBP's website at <https://shbp.georgia.gov> or calling **(800) 610-1863**.

## How to Enroll

### State Health Benefit Plan (SHBP) - ADP Portal

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

**Note:** If you have difficulty completing your enrollment, please contact the Effingham County Schools Benefits Service Center at (844) 249-ECSD(3273), Monday – Thursday from 8am to 6pm and Friday from 8am to 5pm EST. You can also email [help@effinghamschoolsbenefits.com](mailto:help@effinghamschoolsbenefits.com).

### How to Reset Your SHBP Password

- Step 1: Go to <https://myshbpga.adp.com/shbp> and click "Need help signing in?"
- Step 2: Enter the requested demographic information.
- Step 3: Follow the instructions to answer security questions. Contact SHBP if you are unable to answer the questions.
- Step 4: Create a new password and click "Continue."

### Voluntary Benefits - Online or By Phone

#### Enrollment Online

**Step 1:** Visit the benefits website at [www.effinghamschoolsbenefits.com](http://www.effinghamschoolsbenefits.com), review the plan options, and then click "Enroll Now!"

**Step 2:** Click on "Login" to begin. You will be prompted to enter your email address on file your password. If you cannot remember your password, click on "Forgot your password?" to reset it.

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

#### Enrollment by Phone

Call the Effingham County Schools Benefits Service Center at **(844) 249-ECSD (3273)** to complete your voluntary benefits enrollment by phone. The Benefits Specialist will confirm your personal information, review your plan options, and complete your elections for 2026.

For both online and phone enrollment, you will receive a Confirmation Statement via your email address on file following your enrollment.

## New Employee Eligibility

As a new Effingham County Schools employee, you are eligible for benefits on the first of the month following 30 days of employment. No enrollment changes to your benefits are allowed during the plan year unless you experience a qualifying life event.

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

### Qualifying Life Events

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

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

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



## Medical Coverage

### State Health Benefit Plan (SHBP)

Effingham County School District participates in the State Health Benefit Plan. Refer to the Active Member Decision Guide for complete details.

### SHBP Employer Contribution

The district funds a significant portion of your 2026 health insurance premiums. This financial contribution allows you to receive quality medical plan coverage at a competitive cost.

### Medical Plan Overview

Preventive care is covered at 100% for all plan options.

| Anthem                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Coverage Level                       | Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| HRA Gold<br>HRA Silver<br>HRA Bronze | The Gold, Silver, and Bronze HRA plans have different HRA credits, deductibles, coinsurance levels, and out-of-pocket limits. Most services are subject to a deductible. Then you pay coinsurance up to the out-of-pocket maximum. For prescription drugs, you pay a percentage of the retail cost. The HRA plans include a SHBP-funded Health Reimbursement Account (HRA) to provide first-dollar medical and pharmacy expenses. Unused HRA credits roll over to future years. |
| HMO                                  | This plan has the lowest deductible and provides in-network coverage only. Some services, such as office visits, ER and prescription drugs, are covered at 100% after a copay. For most other services, you are responsible for a deductible and coinsurance until you meet your out-of-pocket maximum.                                                                                                                                                                         |
| UnitedHealthcare                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| HMO                                  | Same benefits as the Anthem HMO, but utilizes the UnitedHealthcare provider network.                                                                                                                                                                                                                                                                                                                                                                                            |
| High Deductible Health Plan (HDHP)   | Lowest premiums, highest deductible and out-of-pocket maximum. All services including pharmacy are subject to deductible and coinsurance. A Health Savings Account (HSA) is available with this plan.                                                                                                                                                                                                                                                                           |

### Pharmacy Information

- CVS Caremark administers the pharmacy benefits for all medical members.
- You are not limited to CVS pharmacies for your retail prescription needs. The CVS Caremark pharmacy network is extensive, and participating pharmacy information is available to view online at <https://info.caremark.com/oe/shbp>.
- For your convenience, you may purchase a 90-day supply via retail at participating in-network pharmacies.
- Certain drug costs are waived if SHBP is primary and you actively participate in the Coronary Artery Disease (CAD), Diabetes, Asthma Disease Management Programs and/or Medication for Addiction Treatment Programs.

### Online Resources

Access the plan websites to locate participating providers, and find health and wellness tools, plan details, and much more.

#### Anthem

Select "Find Care" from the Main Menu and then follow instructions to find a doctor on the Anthem website at [www.anthem.com/shbp](http://www.anthem.com/shbp).

#### United Healthcare

Visit the UHC website at [www.whyuhc.com/shbp.com](http://www.whyuhc.com/shbp.com) and select "Search for network providers" in the Health plans drop down. Then select your plan and follow search instructions.

### Telemedicine Virtual Visits

The medical plans include a telemedicine benefit that allows you to speak to a participating doctor from home or work through your mobile device, tablet, or computer. You must use in-network providers for coverage to apply. HMO members pay a copay and HRA members pay coinsurance for virtual visits. High Deductible Health Plan members can access this benefit subject to the health plan deductible. Consider this convenient benefit for non-complex medical conditions. Download the LiveHealth Online (Anthem) or the Virtual Visits mobile app (UHC) today!

### Dependent Documentation

- If you are covering a new dependent(s), ADP will provide instructions for submitting required documentation for the added dependents. Be sure to provide documentation in the format required by the deadline provided by ADP. Your dependents will not have coverage until the documentation is received and approved.
- If you do not receive the request, contact SHBP at (800) 610-1863 to have the request sent to you. **Your dependents will not be covered until the documentation for your new dependents is received and approved.**

## Medical Plan Designs and Premiums



|                                | Anthem HRA                         |          |                                    |          |                                    |          | Anthem & UHC    | UHC                          |          |
|--------------------------------|------------------------------------|----------|------------------------------------|----------|------------------------------------|----------|-----------------|------------------------------|----------|
|                                | Gold                               |          | Silver                             |          | Bronze                             |          | HMO             | HDHP                         |          |
|                                | In                                 | Out      | In                                 | Out      | In                                 | Out      | In-Network Only | In                           | Out      |
| <b>Deductible</b>              |                                    |          |                                    |          |                                    |          |                 |                              |          |
| You                            | \$1,500                            | \$3,000  | \$2,000                            | \$4,000  | \$2,500                            | \$5,000  | \$1,300         | \$3,500                      | \$7,000  |
| You + Child(ren)/Spouse        | \$2,250                            | \$4,500  | \$3,000                            | \$6,000  | \$3,750                            | \$7,500  | \$1,950         | \$7,000                      | \$14,000 |
| You + Family                   | \$3,000                            | \$6,000  | \$4,000                            | \$8,000  | \$5,000                            | \$10,000 | \$2,600         | \$7,000                      | \$14,000 |
| <b>Medical Out-of-Pocket</b>   |                                    |          |                                    |          |                                    |          |                 |                              |          |
| You                            | \$4,000                            | \$8,000  | \$5,000                            | \$10,000 | \$6,000                            | \$12,000 | \$4,000         | \$6,450                      | \$12,900 |
| You + Child(ren)/Spouse        | \$6,000                            | \$12,000 | \$7,500                            | \$15,000 | \$9,000                            | \$18,000 | \$6,500         | \$12,900                     | \$25,800 |
| You + Family                   | \$8,000                            | \$16,000 | \$10,000                           | \$20,000 | \$12,000                           | \$24,000 | \$9,000         | \$12,900                     | \$25,800 |
| <b>Coinsurance (Plan Pays)</b> | 85%                                | 60%      | 80%                                | 60%      | 75%                                | 60%      | 80%             | 70%                          | 50%      |
| <b>HRA</b>                     |                                    |          |                                    |          |                                    |          |                 |                              |          |
| You                            | \$400                              |          | \$200                              |          | \$100                              |          | N/A             | N/A                          |          |
| You + Child(ren)/Spouse        | \$600                              |          | \$300                              |          | \$150                              |          | N/A             | N/A                          |          |
| You + Family                   | \$800                              |          | \$400                              |          | \$200                              |          | N/A             | N/A                          |          |
| <b>Medical</b>                 |                                    |          |                                    |          |                                    |          |                 |                              |          |
| ER                             | Coins after ded                    |          | Coins after ded                    |          | Coins after ded                    |          | \$200 copay     | Coins after ded              |          |
| Urgent Care                    | Coins after ded                    |          | Coins after ded                    |          | Coins after ded                    |          | \$35 copay      | Coins after ded              |          |
| PCP Visit                      | Coins after ded                    |          | Coins after ded                    |          | Coins after ded                    |          | \$35 copay      | Coins after ded              |          |
| Specialist Visit               | Coins after ded                    |          | Coins after ded                    |          | Coins after ded                    |          | \$45 copay      | Coins after ded              |          |
| <b>Preventive Care</b>         | 100%                               | None     | 100%                               | None     | 100%                               | None     | 100%            | 100%                         | None     |
| <b>Retail Pharmacy</b>         |                                    |          |                                    |          |                                    |          |                 |                              |          |
| Tier 1                         | 15%,<br>Min \$5, Max \$10          |          | 15%,<br>Min \$5, Max \$10          |          | 15%,<br>Min \$5, Max \$10          |          | \$5 copay       | Coinsurance after deductible |          |
| Tier 2                         | 25%,<br>Min \$55, Max \$85         |          | 25%,<br>Min \$55, Max \$85         |          | 25%,<br>Min \$55, Max \$85         |          | \$55 copay      | Coinsurance after deductible |          |
| Tier 3                         | 25%,<br>Min \$85, Max \$130        |          | 25%,<br>Min \$85, Max \$130        |          | 25%,<br>Min \$85, Max \$130        |          | \$95 copay      | Coinsurance after deductible |          |
| <b>Mail Order Pharmacy</b>     |                                    |          |                                    |          |                                    |          |                 |                              |          |
| Tier 1                         | 15%, Min \$12.50,<br>Max \$25      |          | 15%, Min \$12.50,<br>Max \$25      |          | 15%, Min \$12.50,<br>Max \$25      |          | \$12.50 copay   | Coinsurance after deductible |          |
| Tier 2                         | 25%, Min \$137.50,<br>Max \$212.50 |          | 25%, Min \$137.50,<br>Max \$212.50 |          | 25%, Min \$137.50,<br>Max \$212.50 |          | \$137.50 copay  | Coinsurance after deductible |          |
| Tier 3                         | 25%, Min \$212.50,<br>Max \$325    |          | 25%, Min \$212.50,<br>Max \$325    |          | 25%, Min \$212.50,<br>Max \$325    |          | \$237.50 copay  | Coinsurance after deductible |          |

| Monthly Premiums | Anthem HRA |            |            | Anthem   | UHC      | UHC      |
|------------------|------------|------------|------------|----------|----------|----------|
|                  | Gold HRA   | Silver HRA | Bronze HRA | HMO      | HMO      | HDHP     |
| You              | \$213.71   | \$146.11   | \$92.12    | \$177.21 | \$217.19 | \$81.11  |
| You + Child(ren) | \$390.68   | \$275.76   | \$183.97   | \$328.63 | \$396.59 | \$165.26 |
| You + Spouse     | \$531.82   | \$389.86   | \$276.48   | \$455.17 | \$539.13 | \$253.36 |
| You + Family     | \$708.79   | \$519.51   | \$368.33   | \$606.59 | \$718.53 | \$337.51 |



## Wellness Program

Sharecare, your wellness program vendor, provides comprehensive well-being and incentive programs for SHBP members. As you complete wellness activities, you earn incentive points to help you pay for your medical expenses. HDHP members must meet a portion of the deductible before well-being points may be used.

You and your covered spouse are each eligible to receive up to 480 well-being incentive points (a family total of 960) when you complete the activities between January 1 and November 30. Enrolled members choose to redeem well-being incentive points in the Sharecare Redemption Center for either 1) 480 incentive points to apply towards eligible medical / pharmacy expenses or 2) a \$150 Sharecare Rewards Visa Prepaid Card.

| Step   | Action                                                                                                                                                    | Incentive Received                            |
|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| Step 1 | Complete the RealAge Test                                                                                                                                 | Earn 120 in well-being incentive points       |
| Step 2 | Complete a biometric screening                                                                                                                            | Earn 120 in well-being incentive points       |
| Step 3 | Complete one of or a combination of: <ul style="list-style-type: none"> <li>• Telephonic Coaching Pathway</li> <li>• Online Challenges Pathway</li> </ul> | Earn up to 240 in well-being incentive points |

Please refer to the SHBP Decision Guide or access the BeWell website at [www.bewellshbp.com](http://www.bewellshbp.com) for additional details. Download the Sharecare App today to complete activities or redeem well-being incentive points.

## TRICARE

The TRICARE Supplement Plan is an alternative to the State Health Benefit Plan that is offered to members and dependents who are eligible for SHBP coverage and enrolled in TRICARE.



Who is eligible for the TRICARE Supplement Plan?

- Retired military receiving retired, retainer, or equivalent pay
- Retired Reservists between ages 60 and 65
- Retired Reservists under age 60 and enrolled in TRICARE Retired Reserve (TRR)
- Qualified National Guard and Reserve Members enrolled in TRICARE Reserve Select (TRS)
- Spouses/surviving spouses of any of the above

| Coverage                         | Premium  |
|----------------------------------|----------|
| <b>You</b>                       | \$60.50  |
| <b>You + Spouse / Child(ren)</b> | \$119.50 |
| <b>You + Family</b>              | \$160.50 |

For information about eligibility and benefits, contact (866) 637-9911 or visit the TRICARE website at <https://shbp.georgia.gov/tricare-supplement-plan-supplement-plan>.



## Attention Families - PeachCare

- Your dependents, up to age 19, may be eligible for PeachCare (instead of SHBP), offered through the state of Georgia
- Income and other qualifications must be met
- Visit the PeachCare website at [www.peachcare.org](http://www.peachcare.org) for more information
- Not available through payroll deduction



## Dental Plans



There are three dental PPO plan options: Base Plan, Core Plan, and Buy-Up Plan. All options include preventive care at 100% (no deductible) and two cleanings every 12 months. The Base Plan has the lowest premiums and lowest annual maximum benefit, but only includes coverage for preventive and basic services. The Core Plan has higher premiums and a higher annual maximum, but does not include orthodontia coverage. The Buy-Up Plan is the richest plan option with the highest annual maximum and orthodontia coverage.

To reduce your out-of-pocket costs and prevent balance billing, you are encouraged to use in-network Elite Plus United Concordia dentists. Now is a great time to review the provider network with United Concordia. Access the UCCI website at [www.unitedconcordia.com](http://www.unitedconcordia.com) and select the **Elite Plus** network under "Find a Dentist" to locate in-network providers near you. You can also download the secure mobile app to find a provider.

| Monthly Deductions    |           |           |             |
|-----------------------|-----------|-----------|-------------|
| Coverage Level        | Base Plan | Core Plan | Buy-Up Plan |
| Employee Only         | \$32.26   | \$47.51   | \$60.67     |
| Employee + Spouse     | \$52.67   | \$76.61   | \$97.29     |
| Employee + Child(ren) | \$39.39   | \$57.26   | \$85.59     |
| Family                | \$88.19   | \$128.27  | \$183.30    |

| Dental Summary of Benefits              | Base Plan                      | Core Plan                      | Buy-Up Plan                    |
|-----------------------------------------|--------------------------------|--------------------------------|--------------------------------|
| Calendar Year Deductible                | \$50 Individual / \$150 Family | \$75 Individual / \$225 Family | \$75 Individual / \$225 Family |
| Calendar Year Maximum                   | \$500                          | \$1,250                        | \$1,500                        |
| Orthodontia Lifetime Maximum            | N/A                            | N/A                            | \$2,500                        |
| Type A Preventive Services (Preventive) | 100%                           | 100%                           | 100%                           |
| Type B Services (Basic Restorative)     | 80% after deductible           | 80% after deductible           | 80% after deductible           |
| Type C Services (Major Restorative)     | Not Covered                    | 50% after deductible           | 50% after deductible           |
| Orthodontia Services (Below age 19)     | Not Covered                    | Not Covered                    | 50% after deductible           |

## Vision Plan



The Effingham County Schools MetLife Vision plan provides coverage for eye exams, frames, eyeglass lenses, and contact lenses. Please refer to the benefit summary for complete details. If you visit a participating MetLife vision provider, you will have a higher benefit and lower out-of-pocket costs, and you will receive the benefit at the time of service (no need to file claims). If you go out-of-network, there is a reduced benefit, and you are required to pay at the time of service and file a claim for reimbursement.

**Frequency Limitations:** The exam benefit and lens benefit are once per 12 months. The frame benefit is one pair per 24 months. Either the eyeglass benefit or the contact lens benefit is payable per plan frequency.

| Vision Monthly Premiums |         |
|-------------------------|---------|
| Coverage                | Premium |
| Employee Only           | \$10.14 |
| Employee + Spouse       | \$16.92 |
| Employee + Child(ren)   | \$17.71 |
| Family                  | \$27.65 |

| Vision Summary of Benefits                        | In-Network                       |
|---------------------------------------------------|----------------------------------|
| Eye Exam                                          | \$20 copay                       |
| Retinal Imaging                                   | Up to \$39 copay                 |
| Lenses<br>(Single, Bifocal, Trifocal, Lenticular) | Covered in full after \$20 copay |
| <b>Contacts</b>                                   |                                  |
| Fit and Follow-up                                 | Up to \$60 copay                 |
| Elective Lenses                                   | \$130 allowance                  |
| Medically Necessary                               | Covered in full after \$20 copay |
| Frames                                            | \$130 allowance after \$20 copay |

# FLEXIBLE SPENDING ACCOUNTS (FSA)



## Flexible Spending Accounts (FSA)

There are two types of Flexible Spending Accounts (FSA's) available: **1) Healthcare FSA** for medical, dental, vision, pharmacy, and other related expenses and **2) Dependent Care FSA** primarily dependent day care expenses. Medcom is the administrator for your FSA plans. An FSA allows you to pay for these expenses with pre-tax dollars, saving you money. Your taxable income is reduced by your annual FSA contributions. Plus, the reimbursements are tax-free.

### Healthcare Flexible Spending Account

**You may contribute up to \$3,400 during 2026 into a Healthcare FSA.** Eligible Healthcare FSA expenses include deductibles, copays, coinsurance, prescription drugs, over-the-counter drugs and supplies (no prescription required), dental, and vision expenses.

A limited purpose FSA is also available for UnitedHealthcare HDHP participants. The limited purpose FSA can be used for dental and vision expenses for members with a Health Savings Account.

### Dependent Care Flexible Spending Account

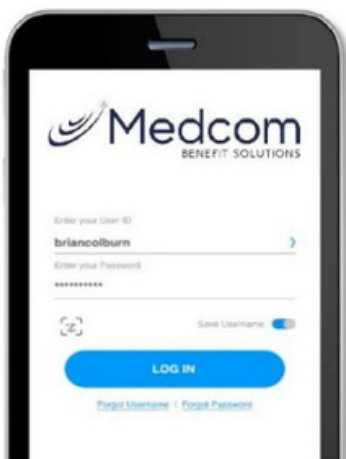
The Dependent Care FSA allows you to pay for certain dependent care expenses using before-tax dollars. **You may contribute up to \$7,500 in a Dependent Care FSA for 2026.** Eligible dependent care expenses include day care and after-school care for children up to age 13 and certain adult day care expenses for incapacitated adult dependents.

#### Child Daycare:

- Includes daycare facilities, babysitters inside or outside the household, before and after-school care, and more
- For children, step-children, and children eligible for a tax exemption on your federal tax return

#### Adult Daycare:

- Disabled children age 13+
- Spouses physically or mentally unable to care for him/herself
- Any adult you can claim as a dependent on your tax return who is physically or mentally unable to care for him/herself and lives in your home



Medcom offers a free mobile app for convenient account access.

### Other Account Features

Participants in the FSAs receive a debit card so that many expenses can be paid at the time of service, eliminating the reimbursement process. The funds are debited from the account and paid to the doctor's office, pharmacy, or day care facility directly at the time of purchase. When the debit card is not accepted, you are required to pay for the expense and submit a claim for reimbursement. As a reminder, you only receive new debit cards upon card expiration.



### Use It or Lose It

Claims must be incurred by December 31, 2026 to be eligible for reimbursement for the 2026 plan year. The IRS requires that any unused money in your account at the end of the plan year be retained by your employer and forfeited by the employee. However, the IRS allows **Healthcare FSA** plan members to roll over up to \$680 of unused funds for future use. The \$680 roll over option does not apply to the Dependent Care FSA.

IRS regulations require appropriate documentation to ensure your claims are valid expenses. You will be asked to provide receipts as documentation for most expenses. Retain receipts and provide them promptly upon request.

### 2026 Plan Year

The 2026 FSA plan year is from January 1 through December 31, 2026.

### Important Separation Information

Please note if you terminate employment or retire, eligible FSA claims must be incurred prior to your benefits end date, regardless of your FSA balance.

## Term Life Insurance



### Basic Group Life and Accidental Death & Dismemberment (AD&D) Insurance

Effingham County Schools provides basic life and accidental death & dismemberment (AD&D) insurance in the amount of \$25,000 for you, \$10,000 for your spouse, and \$10,000 for your child(ren). Basic life & AD&D Insurance is provided at no cost to you and pays a benefit to your beneficiary(ies) should you die as a result of an illness or an accident. It also includes an additional AD&D benefit in the event of death or loss of limbs, speech, hearing and more caused by a covered accident.

### Voluntary Group Life and Accidental Death & Dismemberment (AD&D) Insurance

You may elect voluntary life insurance for yourself and your dependents through payroll deduction to supplement the employer-paid basic benefit. Please refer to the Certificate of Coverage for complete policy details.

| Voluntary Life and AD&D Insurance Options                |                                                                                                                                                                                                                                                           |
|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Employee</b>                                          | <ul style="list-style-type: none"> <li>\$10,000 increments to \$100,000</li> <li>\$25,000 increments from \$100,000 to \$200,000</li> <li>\$50,000 increments from \$200,000 to \$500,000</li> <li>Not to exceed 10 times your annual earnings</li> </ul> |
| <b>Spouse</b><br><i>Premiums based on employee's age</i> | <ul style="list-style-type: none"> <li>\$5,000 increments to \$50,000</li> <li>\$25,000 increments from \$50,000 to \$200,000</li> <li>\$50,000 increments from \$200,000 to \$500,000</li> <li>Not to exceed 100% of employee amount</li> </ul>          |
| <b>Child(ren)</b>                                        | \$10,000 or \$20,000                                                                                                                                                                                                                                      |



**Beneficiary Information:** Your beneficiary is the person(s) who will receive your life insurance benefits in the event of your death. Your beneficiary can be one person or multiple people, charitable institutions, or your estate. Once named, your beneficiary remains on file until you make a change. If your family situation changes, please review your beneficiary on file and make updates if needed. If you don't name a beneficiary, your life insurance benefits will automatically go to your estate. You are required to designate your beneficiary during your enrollment, but you can change it at any time.

**Special Enrollment Opportunity:** Now is your opportunity to elect voluntary life insurance with no health questions. If you waive coverage as a new hire and elect coverage at later, health questions will apply. The guarantee issue amounts are below.

- Employee Guarantee Issue: Up to \$350,000
- Spouse Guarantee Issue: Up to \$75,000
- Child(ren) Guarantee Issue: Up to \$10,000

Should you elect an amount that exceeds the guarantee issue amounts, an Evidence of Insurability (EOI) will be required. The EOI Form is available on the benefits website. You will not be deducted for the pending coverage amount unless you are approved by Unum.

| Employee and Spouse Voluntary Life and AD&D Monthly Premiums |          |          |           |           |           |           |
|--------------------------------------------------------------|----------|----------|-----------|-----------|-----------|-----------|
| Age                                                          | \$10,000 | \$50,000 | \$100,000 | \$150,000 | \$250,000 | \$350,000 |
| 25                                                           | \$0.60   | \$3.00   | \$6.00    | \$9.00    | \$15.00   | \$21.00   |
| 35                                                           | \$0.94   | \$4.70   | \$9.40    | \$14.10   | \$23.50   | \$32.90   |
| 45                                                           | \$2.49   | \$12.45  | \$24.90   | \$37.35   | \$62.25   | \$87.15   |
| 55                                                           | \$6.60   | \$33.00  | \$66.00   | \$99.00   | \$165.00  | \$231.00  |
| 65                                                           | \$18.60  | \$93.00  | \$186.00  | \$279.00  | \$465.00  | \$651.00  |

| Child Voluntary Life and AD&D Monthly Premiums |          |          |
|------------------------------------------------|----------|----------|
|                                                | \$10,000 | \$20,000 |
| To Age 26                                      | \$1.90   | \$3.80   |



## Universal Life Insurance

Trustmark's portable Universal Life products address varying employee needs for permanent life insurance and peace of mind for a lifetime. Universal Life Insurance is a voluntary product that you may elect in addition to Voluntary Life & AD&D, which is a term product described on the prior page. You have two Universal Life insurance options from which to choose: Universal Life & Universal LifeEvents with Long Term Care. The following apply to both options:

- Convenient payroll deduction
- Flexibility to adjust the death benefit, premiums, and cash value as your needs change
- Ability to surrender coverage for the cash value or draw premiums from the cash value once accumulated
- Accelerated death benefit of 75% when life expectancy is 24 months or less
- Age 100 maturity date

### Option 1: Universal Life Insurance

This option includes a death benefit that remains constant as long as premiums are paid, but it does not include a long term care benefit. Premiums are higher for this option because the death benefit does not reduce due to age. Cash value accumulation is also higher with this permanent life option.

### Option 2: Universal LifeEvents Insurance with Long Term Care

This option provides a higher death benefit during working years when the need for life insurance is typically the highest. Option 2 also includes a long term care benefit for home care, assisted living, adult day care, and nursing home care. The monthly long term care benefit equals 4% of the face amount for up to 25 months. Today's population is more in need of long term care than ever before. Annually, more than 8.5 million people receive support for long term care services. A private room in a nursing home can cost \$225 per day or \$6,965 per month.

| Item                                                  | 1) Universal Life                         | 2) Universal LifeEvents with Long Term Care                                                |
|-------------------------------------------------------|-------------------------------------------|--------------------------------------------------------------------------------------------|
| <b>Life Level Insurance Benefit Regardless of Age</b> | Yes                                       | No<br>Death benefit reduces to 1/3 at the latter of age 70 or the 15th policy anniversary. |
| <b>Cash Value</b>                                     | Higher Cash Value                         | Lower Cash Value                                                                           |
| <b>Long Term Care Benefit</b>                         | Not Included                              | Included                                                                                   |
| <b>Premiums</b>                                       | Higher than Universal LifeEvents with LTC | Lower than Universal Life                                                                  |

### Coverage Options

Employee and spouse coverage is available in \$10,000 increments, up to \$300,000. Child coverage is available up to \$35,000 (depending on child age). Employees are not able to elect both Universal Life and Universal LifeEvents with Long Term Care.

### Issue Age Eligibility

| Coverage        | 1) Universal Life | 2) Universal LifeEvents with Long Term Care |
|-----------------|-------------------|---------------------------------------------|
| <b>Employee</b> | Ages 18 to 75     | Ages 18 to 64                               |
| <b>Spouse</b>   | Ages 18 to 70     | Ages 18 to 64                               |
| <b>Children</b> | To Age 23         |                                             |

## Universal Life Insurance



### Monthly Premium Example - \$25,000

| Female, Age 45 Non-Smoker        | 1) Universal Life | 2) Universal LifeEvents with Long Term Care |
|----------------------------------|-------------------|---------------------------------------------|
| Approximate Monthly Premium      | \$37.53           | \$27.39                                     |
| Approximate Cash Value at age 65 | \$5,380           | \$1,745                                     |
| Death Benefit at age 45          | \$25,000          | \$25,000                                    |
| Death Benefit at age 75          | \$25,000          | \$8,333                                     |
| Maximum Long Term Care Benefit   | N/A               | \$25,000                                    |

### Monthly Premium Example - \$50,000

| Female, Age 45 Non-Smoker        | 1) Universal Life | 2) Universal LifeEvents with Long Term Care |
|----------------------------------|-------------------|---------------------------------------------|
| Approximate Monthly Premium      | \$71.50           | \$51.13                                     |
| Approximate Cash Value at age 65 | \$11,370          | \$4,086                                     |
| Death Benefit at age 45          | \$50,000          | \$50,000                                    |
| Death Benefit at age 75          | \$50,000          | \$16,667                                    |
| Maximum Long Term Care Benefit   | N/A               | \$50,000                                    |

### How are Trustmark's Permanent Universal Life Options Different from Traditional Whole Life?

- With Trustmark's permanent universal life policies, you may change your premiums and death benefit at any time. With traditional whole life insurance, premiums remain level, and entire premiums are required to keep the policy in force.
- Premiums are generally higher for traditional whole life than for Trustmark's permanent universal life options.
- Traditional whole life has higher guaranteed cash values than Trustmark's permanent universal life options.
- Because the Trustmark permanent universal life premiums are generally lower, you can purchase a higher death benefit with the same premium dollars than traditional whole life.



*Benefit amounts shown are samples and not a guarantee. Underwriting conditions may vary, and determine eligibility for the offer of insurance. Benefits, availability, exclusions and limitations may vary by state and may be named differently. Pre-existing condition limitations may apply. Your policy/certificate will contain complete information. Trustmark® and LifeEvents® are registered trademarks of Trustmark Insurance Company.*

## Sick Leave Bank

Employees accrue 1.25 days of sick leave per month for the number of months you work. You can bank up to 45 days of sick leave.

### Sick Leave Donation to Help Employees in Need

You can donate one (1) sick leave day to help other employees in need. In the event an employee or dependent suffers a catastrophic illness and has exhausted personal sick leave, the bank is available for additional days. Catastrophic is defined as a disabling injury, illness, or surgery requiring a disability period of longer than 20 continuous work days. Sick leave bank eligibility begins at the end of the 20-day period. This is a one time only donation unless the sick leave bank is depleted. At that time, another day may be requested for participating employees to replenish the bank.

Benefits-eligible employees may participate in the sick leave bank. You must be employed for at least 1 year, and have accrued at least 6 sick leave days at the time of membership. Requests to join are only accepted during Open Enrollment and if approved, would be effective on the first working day in January. Please refer to the Effingham County Schools Employee Handbook for details.

## Disability Insurance



Disability coverage provides an income replacement benefit in the event you are unable to work due to an accident or illness. When making a benefit election, it is recommended that you consider how long you would be able to pay your bills without a continuous income should you be unable to work. Short Term Disability provides an income replacement benefit for a short period of time (up to 11 weeks). If you remain disabled and unable to work upon Short Term Disability exhaustion, Long Term Disability would begin on the 91st day of disability and continue to Social Security Normal Retirement Age should you remain disabled.

### Pre-Existing Conditions Exclusion

Both Short Term Disability and Long Term Disability plans include a pre-existing conditions exclusion to manage future premiums.

**Short Term Disability:** You have a pre-existing condition if you received medical treatment, consultation, or services, including prescription drugs, in the 3 months just prior to your effective date of coverage; and the disability begins in the first 6 months after your effective date of coverage. Once you have been insured on the Short Term Disability plan for 6 months, no limitation applies.

**Long Term Disability:** You have a pre-existing condition if you received medical treatment, consultation, or services, including prescription drugs, in the 3 months just prior to your effective date of coverage; and the disability begins in the first 12 months after your effective date of coverage. Once you have been insured on the plan for 12 months, no limitation applies.

| Disability Summary of Benefits |                                           |                                           |
|--------------------------------|-------------------------------------------|-------------------------------------------|
|                                | Short Term Disability                     | Long Term Disability                      |
| <b>Benefit Amount</b>          | 50% of weekly earnings                    | 30%, 40% or 50% of monthly earnings       |
| <b>Benefit Start Date</b>      | 15th day after accident or illness begins | 91st day after accident or illness begins |
| <b>Benefit Duration</b>        | 11 weeks                                  | Social Security Normal Retirement Age     |
| <b>Maximum Benefit</b>         | \$750 per week                            | \$6,000 per month                         |

**You may elect STD and LTD at this time with no health questions.** Your specific benefit options and premiums are available in the enrollment system or by calling the Benefits Service Center.

| Short Term Disability          |                 |
|--------------------------------|-----------------|
| Annual Salary / Weekly Benefit | Monthly Premium |
| <b>\$10,000 / \$96.15</b>      | \$4.65          |
| <b>\$20,000 / \$192.31</b>     | \$9.31          |
| <b>\$40,000 / \$384.62</b>     | \$18.62         |
| <b>\$50,000 / \$480.77</b>     | \$23.27         |
| <b>\$70,000 / \$673.08</b>     | \$32.58         |

| Long Term Disability - 50% Benefit |         |         |         |          |
|------------------------------------|---------|---------|---------|----------|
| Annual Salary / Monthly Benefit    | Age 25  | Age 35  | Age 45  | Age 55   |
| <b>\$10,000 / \$416.67</b>         | \$3.08  | \$7.25  | \$13.97 | \$19.05  |
| <b>\$20,000 / \$833.33</b>         | \$6.17  | \$14.50 | \$27.93 | \$38.10  |
| <b>\$40,000 / \$1,666.67</b>       | \$12.33 | \$29.00 | \$55.87 | \$76.20  |
| <b>\$50,000 / \$2,083.33</b>       | \$15.42 | \$36.25 | \$69.83 | \$95.25  |
| <b>\$70,000 / \$2,916.67</b>       | \$21.58 | \$50.75 | \$97.77 | \$133.35 |



## Critical Illness

Effingham County Schools offers voluntary Critical Illness coverage insured by Unum, which provides a lump sum benefit in the event of a diagnosis of a covered illness. The benefit is based on the amount of coverage in force, the specific illness diagnosed, and all other terms and provisions of the policy. You may elect coverage for yourself and your spouse. Children are automatically covered at 50% of the employee coverage amount.

### Benefit Options

**Employees:** From \$5,000 to \$20,000 in increments of \$5,000

**Spouses:** 50% of the employee amount (employees must be enrolled in order to elect spouse coverage.)

**Children:** 50% of employee coverage for all children (automatic)

Employees may elect up to the maximum amount of coverage for yourself and your spouse with no health questions. There are no age limits on electing coverage for yourself or your spouse.

### Covered Diagnoses and Conditions

- End stage renal (kidney) failure
- Heart attack
- Major Organ Failure Requiring Transplant
- Stroke
- Sudden Cardiac Arrest
- Coronary Artery Disease: Major and Minor (limited benefit)
- Invasive Cancer (including all breast cancer)
- Non-invasive Cancer (25% benefit)
- Skin cancer (\$500)
- Benign brain tumor
- Coma
- Loss of hearing, sight, speech
- Occupational PTSD
- Permanent Paralysis
- Benefits covered at 25%
  - Bone marrow/stem cell transplant
  - Infectious Diseases
  - Pulmonary Embolism
  - Transient Ischemic Attack (TIA)
- Progressive Diseases
  - Addison's Disease, ALS, Dementia, Functional Loss, Huntington's Disease, Lupus, Multiple Sclerosis, Muscular Dystrophy, Myasthenia Gravis, Parkinson's Disease, Systemic Sclerosis
- Critical Illnesses for Children
  - Cerebral Palsy, cleft lip or palate, congenital heart disease, Cystic Fibrosis, Down Syndrome, Sickle Cell Anemia, Spina Bifida, Type 1 Diabetes

### Be Well Benefit Included

To encourage health habits and preventive care, the plan includes a wellness screening benefit in the amount of \$50, once per person per calendar year. Screenings include but are not limited to:

- Cholesterol and diabetes screenings
- Cancer screenings
- Cardiovascular function screenings
- Imaging studies
- Annual examinations by a physician
- Immunizations

Please refer to the policy for a complete listing of eligible screenings.

### Building Benefit

This plan includes a building benefit feature which provides additional benefits as you retain coverage with Unum. Please refer to the Benefit Summary for details.

### Portability Upon Employment Separation

This plan is portable if you separate employment with the district by remitting premiums directly to Unum.

| Employee Critical Illness Monthly Premiums |         |          |          |          |
|--------------------------------------------|---------|----------|----------|----------|
| Age                                        | \$5,000 | \$10,000 | \$15,000 | \$20,000 |
| 20 - 29                                    | \$1.85  | \$3.70   | \$5.55   | \$7.40   |
| 30 - 39                                    | \$2.45  | \$4.90   | \$7.35   | \$9.80   |
| 40 - 49                                    | \$4.75  | \$9.50   | \$14.25  | \$19.00  |
| 50 - 59                                    | \$8.50  | \$17.00  | \$25.50  | \$34.00  |
| 60 - 64                                    | \$13.25 | \$26.50  | \$39.75  | \$53.00  |
| 65 - 69                                    | \$19.55 | \$39.10  | \$58.65  | \$78.20  |
| 70 +                                       | \$26.65 | \$53.30  | \$79.95  | \$106.60 |

| Spouse Critical Illness Monthly Premiums |         |          |
|------------------------------------------|---------|----------|
| Age                                      | \$5,000 | \$10,000 |
| 20 - 29                                  | \$2.15  | \$4.30   |
| 30 - 39                                  | \$2.75  | \$5.50   |
| 40 - 49                                  | \$5.05  | \$10.10  |
| 50 - 59                                  | \$8.80  | \$17.60  |
| 60 - 64                                  | \$13.55 | \$27.10  |
| 65 - 69                                  | \$19.85 | \$39.70  |
| 70 +                                     | \$26.95 | \$53.90  |

## Accident



Accident insurance is designed to help covered employees meet the out-of-pocket expenses and extra bills that can follow an accidental injury, whether minor or catastrophic. Indemnity lump sum benefits are paid directly to the employee based on the amount of coverage listed in the schedule of benefits. The Unum accident plan is guarantee issue, so **no health questions are required**.

| Accident Plan Summary of Benefits                              |                                                            |
|----------------------------------------------------------------|------------------------------------------------------------|
| Hospital Care                                                  |                                                            |
| Per Admission Benefit                                          | \$1,500                                                    |
| Daily Stay Benefit                                             | \$350 / day up to 365 days                                 |
| Surgery                                                        | \$1,000 (abdominal, thoracic, or cranial)                  |
| Medical Care Benefits (Non-hospital)                           |                                                            |
| Doctor visit                                                   | \$125                                                      |
| Emergency Room / Urgent care                                   | \$250                                                      |
| Follow-up treatment                                            | \$125 (max of 6)                                           |
| Physical / Occupational Therapy                                | \$75 (max of 15)                                           |
| Medical equipment                                              | \$50 to \$200                                              |
| Outpatient Surgery                                             | \$200                                                      |
| Medical Imaging                                                | \$100 to \$300                                             |
| Ambulance: Air   Ground                                        | \$1,500   \$500                                            |
| Injury-Based Benefits                                          |                                                            |
| Burns                                                          | \$750 to \$15,000                                          |
| Concussions                                                    | \$200                                                      |
| Lacerations                                                    | \$65 to \$800                                              |
| Dislocations                                                   | \$200 to \$4,125                                           |
| Fractures                                                      | \$275 to \$5,500                                           |
| Accident Death & Dismemberment (AD&D)                          |                                                            |
| Employee                                                       | \$75,000                                                   |
| Spouse                                                         | \$37,500                                                   |
| Child(ren)                                                     | \$18,750                                                   |
| <i>See schedule for Dismemberment Details</i>                  |                                                            |
| Organized Sports Benefit                                       |                                                            |
| Covers accidents as a result of an organized sporting activity | Pays an additional 25% for injury and treatment categories |

## Portability Upon Employment Separation

This plan is portable if you separate employment with the district by remitting premiums directly to Unum.

| Accident Monthly Premiums |         |
|---------------------------|---------|
| Coverage                  | Premium |
| Employee Only             | \$8.63  |
| Employee + Spouse         | \$14.75 |
| Employee + Child(ren)     | \$17.73 |
| Family                    | \$23.85 |



## Hospital Indemnity



The Unum Hospital Indemnity plan is designed to help provide financial protection for covered individuals by paying a benefit due to a hospitalization and in some cases, for treatment received for an accident or sickness. Employees can use the benefit to meet the out-of-pocket expenses and extra bills that can occur. Lump sum benefits are paid directly to the employee based on the amount of coverage listed in the schedule of benefits. There are no pre-existing conditions, and pregnancy is covered like any other medical condition.

### Hospital Indemnity Plan Schedule of Benefits

|                                                                    |                           |
|--------------------------------------------------------------------|---------------------------|
| Admission (4 days per year)                                        | \$1,000                   |
| Admission - Hospital ICU (4 days per year) (additive to Admission) | \$1,000                   |
| Daily Stay                                                         | \$100 / day up to 30 days |
| Daily Stay - Hospital ICU (additive to Daily Stay)                 | \$100 / day up to 15 days |

### Be Well Benefit Included

To encourage health habits and preventive care, the plan includes a wellness screening benefit in the amount of \$50, once per person per calendar year. Screenings include but are not limited to:

- Cholesterol and diabetes screenings
- Cancer screenings
- Cardiovascular function screenings
- Imaging studies
- Annual examinations by a physician
- Immunizations

Please refer to the policy for a complete listing of eligible screenings.

### Portability Upon Employment Separation

This plan is portable if you separate employment with the district by remitting premiums directly to Unum.

### Hospital Indemnity Monthly Premiums

| Coverage              | Premium |
|-----------------------|---------|
| Employee Only         | \$21.92 |
| Employee + Spouse     | \$38.71 |
| Employee + Child(ren) | \$33.02 |
| Family                | \$49.81 |



Group Legal Plan



The ARAG legal plan helps cover the costs of legal expenses associated with a variety of needs, and includes office and telephonic advice with an attorney for personal legal problems.

The ARAG legal plan includes coverage for divorce in both contested and uncontested proceedings, and allows members to go directly to a participating attorney for services with 100% coverage for certain services. Emergency service with an attorney is available 24 hours a day / 7 days a week.

Telephonic and office consultations are available on a variety of matters, including:

- Family law
- Real Estate and estate planning
- Financial issues
- Traffic offenses
- And more

| Legal Plan Monthly Premium |
|----------------------------|
| \$18.25                    |

If you are not enrolled, we encourage you to take the time to evaluate your current needs and learn more about the ARAG legal plan. Complete plan information is located on the Effingham County Schools benefits website.

Legal Resources for All Employees

- How-To Resources: caregiving, debt collection, estate planning, hiring / working with a contractor, managing legal / financial responsibilities surrounding the death of a loved one, tenant’s guidebook to renting property
- Law guide: collection of articles on legal topics
- LawExpresso Newsletter, Legal Glossary, Legal Links, and Personal Information Organizer

Identity Theft

Pro + Cyber Plan



Your identity includes more than your Social Security Number and bank accounts. The Allstate Identity Protection Pro + Cyber Plan does more than monitor your credit reports and scores. It safeguards your personal information and the data you share.

Allstate Identity Protection gives you the tools and protection to monitor activity, stop identity theft early, and resolve it quickly. Most victims only discover they have a problem when they are denied credit or receive bills for items never ordered. We encourage you to consider this benefit as a proactive step to help protect your personal information.

The Allstate Identity Protection plan provides extensive protection for you and your family. Please refer to the benefits summary for complete details. Below are some of the key features of the plan.

- 100% Fully Managed Resolution up to **\$5M**
- Proactive Credit Monitoring
- Credit Score Tracking
- Social Media & Dark Web Monitoring
- Student Loan Activity Alerts
- Lost Wallet Protection
- Data Breach Notifications
- Credit Freeze & Dispute Assistance
- Stolen Fund Reimbursement
- IP Address Monitoring
- Deceased Dependent Protection
- 24 / 7 Remediation Support

Cyber Crime Benefits Included

- SMS and phone scam education, alerts, and blocking
- \$100k cyberbullying coverage
- \$50k coverage for:
  - Scams, digital crimes & social engineering
  - Cryptocurrency funds reimbursement
  - Ransomware payment coverage, and more

| Coverage Level | ID Theft Monthly Premiums |
|----------------|---------------------------|
| Employee Only  | \$9.95                    |
| Family         | \$17.95                   |

## Retirement

### Teacher's Retirement System (TRS)



The following personnel are required to participate in TRS, a state retirement plan: certified teacher, administrator, clerical staff, paraprofessional, lead custodian, supervisor, and school nutrition manager. Your TRS account is funded by you and the district. Employees contribute 6% of earnings and the district contributes 22.32% of earnings. Employees are vested after 10 years of service.

### Public School Employees Retirement System (PSERS)



The following personnel are required to participate in PSERS, a state retirement plan: school nutrition, transportation, maintenance, and custodial staff. The employee contribution for employees hired before July 1, 2012 is \$4 per month for 9 months (\$36 per year). For employees hired on or after July 1, 2012, it is \$10 per month for 9 months (\$90 per year). Your retirement benefit will be \$17.00 per month multiplied by your number of years of service. Employees are vested after 10 years of service.

The Effingham County Board of Education offers a 403(b) plan through Corebridge Financial in addition to the state's retirement plan. They match 50% of your contributions up to 6%. More information is available by calling Corebridge at (800) 448-2542.

### State Health Benefit Plan (SHBP)



In order to continue your SHBP coverage as a retiree, you and any dependents you wish to cover must be enrolled in the plan at the time you retire. If you are not enrolled in SHBP and wish to carry coverage as a retiree, you will need to enroll during Open Enrollment the year prior to your retirement. Please refer to the Retiree Decision Guide for additional information regarding your SHBP coverage and retiree options. More information is available on the State Health Benefit Plan website at: <https://shbp.georgia.gov>.

### Third Party Administrator for Supplemental Retirement Plan

Arista Consulting Group is our Third Party Administrator for the Supplemental Retirement Plan. We have three preferred vendors that offer 403b / 457 plans, and Arista is available to assist with retirement and financial planning education, inquiries, and transactions. Contact information for Arista Consulting Group and the preferred retirement vendors are available on page 18.



## Employee Assistance Program

We've all experienced some type of personal problem, concern, or emotional crisis at one time or another. Unum's EAP + Work / Life program gives you access to counselors\* and services for help with personal, family, and work issues.

With your Employee Assistance Program and Work / Life Balance services, confidential assistance is as close as your phone or computer.

Unum's Employee Assistance Program is designed to help employees lead happier and more productive lives at home and at work. When you have issues arise, you can work with Licensed Counselors to define the problem and obtain appropriate assistance. The Licensed Professional Counselor will either address concerns during a few initial sessions or refer you to other appropriate counselors or community resources for long-term help.

Through the Employee Assistance Program, you can get help with personal, family, and work issues, such as:

- Stress
- Depression
- Anxiety
- Relationship Issues
- Divorce
- Job stress / work conflicts
- Family and parenting problems
- Anger
- Grief and loss
- Addiction
- Eating Disorders
- Mental Illness

### Who is Covered?

Unum's EAP services are available to you, your spouse, your children, and your parents and parents-in-law.

### Work / Life Balance Services

Employees can also reach out to Unum's Work / Life Specialists for help with balancing the demands of home, family, and the workplace. The Specialists can answer questions, as well as put you in touch with outside resources for things such as childcare services, eldercare services, financial services, and legal services.

### Additional Features

- 24/7 access to master's level staff clinicians for information, assessment, short-term problem resolution, and referrals.
- Up to 3 face-to-face counseling sessions. Sessions are conducted by a network of qualified EAP consultants.
- In lieu of face-to-face sessions, HIPAA compliant video counseling sessions are available for those in rural communities, those with transportation concerns, or those that may prefer the use of technology to receive the service.
- Access to a national network of over 60,000 licensed EAP affiliates. All EAP providers have a master's degree or higher with state licensure.
- Medical Bill Saver service that can help negotiate out-of-pocket medical and dental expenses over \$400.

## Always By Your Side

Help is easy to access:

**Online / phone support:** Unlimited, confidential, 24/7

(800) 854-1446 | [www.unum.com/lifebalance](http://www.unum.com/lifebalance)

**In-person:** You can get up to 3 visits with a Licensed Professional Counselor at no cost to you. Your counselor may refer you to resources in your community for ongoing support.

## Medical

### Anthem

Phone: (855) 641-4862  
Website: [www.anthem.com/shbp](http://www.anthem.com/shbp)

### UnitedHealthcare

Phone: (888) 364-6352  
Website: [www.whyuhc.com/shbp](http://www.whyuhc.com/shbp)

### Sharecare

Phone: (888) 616-6411  
Website: [www.bewellshbp.com](http://www.bewellshbp.com)

### CVS Caremark

Phone: (844) 345-3241  
Website: <http://info.caremark.com/shbp>

### SHBP Eligibility

Phone: (800) 610-1863  
Websites: [www.dch.georgia.gov/shbp](http://www.dch.georgia.gov/shbp)  
[www.myshbpga.adp.com](http://www.myshbpga.adp.com)

### Tricare Supplement Plan

Phone: (866) 637-9911  
Website: <https://shbp.georgia.gov/tricare-supplement-plan>

### Peachcare

Website: [www.peachcare.org](http://www.peachcare.org)

## Dental

### United Concordia

Phone: (800) 332-0366  
Website: [www.unitedconcordia.com](http://www.unitedconcordia.com)

## Vision

### MetLife

Phone: (855) 638-3931  
Website: [www.metlife.com/vision](http://www.metlife.com/vision)

## Flexible Spending Accounts

### Medcom

Phone: (800) 523-7542  
Website [www.medcombenefits.com](http://www.medcombenefits.com)  
Email: [medcomreceipts@medcombenefits.com](mailto:medcomreceipts@medcombenefits.com)

## Term Life

### Unum

Phone: (800) 445-0402  
Website: [www.unum.com](http://www.unum.com)

## Universal Life

### Trustmark

Phone: (800) 918-8877  
Website: [www.trustmarksolutions.com](http://www.trustmarksolutions.com)

## Short & Long Term Disability

### Unum

Phone: (800) 858-6843  
Website: [www.unum.com](http://www.unum.com)

## Critical Illness

### Unum

Phone: (800) 635-5597  
Website: [www.unum.com](http://www.unum.com)

## Accident

### Unum

Phone: (800) 635-5597  
Website: [www.unum.com](http://www.unum.com)

## Hospital Indemnity

### Unum

Phone: (800) 635-5597  
Website: [www.unum.com](http://www.unum.com)

## Legal Plan

### ARAG

Phone: (800) 247-4184  
Website: [www.araglegal.com](http://www.araglegal.com)

## ID Theft

### Allstate Identity Protection

Phone: (800) 789-2720  
Website: [www.allstateidentityprotection.com](http://www.allstateidentityprotection.com)

## Employee Assistance Program (EAP)

### Unum

Phone: (800) 854-1446  
Website: [www.unum.com/lifebalance](http://www.unum.com/lifebalance)

## Retirement Plans

### Teachers Retirement (TRS)

Phone: (800) 352-0650  
Website: [www.trsga.com](http://www.trsga.com)

### PSERS

Phone: (800) 805-4609  
Website: [www.ers.ga.gov](http://www.ers.ga.gov)

### Arista Consulting Group Supplemental Retirement Administrator

Phone: (877) 434-7786  
Email: [first@aristacg.com](mailto:first@aristacg.com)

### Horace Mann (403b)

Joe Brannen | Phone: (912) 354-0280  
Email: [joe.brannen@horacemann.com](mailto:joe.brannen@horacemann.com)

### Corebridge Financial (457 & 403b)

Dan Silva | Phone: (912) 660-5641  
Email: [dan.silva@corebridgefinancial.com](mailto:dan.silva@corebridgefinancial.com)

### Vision Financial (457 & 403b)

Talbert Edenfield | Phone: (912) 295-2222  
Email: [talbert@vision-ga.com](mailto:talbert@vision-ga.com)

## Effingham County Schools Payroll and Benefits Office

### Vonda McDonald

Phone: (912) 754-5618  
Email: [vmcdonald@effingham.k12.ga.us](mailto:vmcdonald@effingham.k12.ga.us)

### Taylor Hill

Phone: (912) 754-5619  
Email: [thill@effingham.k12.ga.us](mailto:thill@effingham.k12.ga.us)

### Mark Rahn

Phone: (912) 754-2512  
Email: [srahn@effingham.k12.ga.us](mailto:srahn@effingham.k12.ga.us)

## Effingham County Schools Benefits Service Center

Phone: (844) 249-ECSD(3273)  
Hours: Mon-Thurs 8am-6pm, Friday 8am - 5pm  
Email: [help@effinghamschoolsbenefits.com](mailto:help@effinghamschoolsbenefits.com)





## benefits service center

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