

2026 Employee Benefits Open Enrollment Guide



**Monday, October 20 through
Friday, November 7, 2025**

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**benefits
service center**



For information and enrollment, access www.tcjacketsbenefits.net or
call the Thomas County Schools Benefits Service Center at (866) 606-6865.

Benefits Service Center

It's Annual Open Enrollment for your Thomas County Schools benefits! We're committed to making the process easy for you and your family. This benefits guide is designed to provide you with the information you need to understand your benefits options and what's changing for 2026. We encourage you to review this booklet and access www.tcjacketsbenefits.net prior to completing your next year benefits elections.

Our extensive benefits package provides financial protection and peace of mind for you and your family. Thomas County Schools provides a significant financial contribution towards your State Health Benefit Plan (SHBP) premiums and your dental plan premiums. The district also provides a no-cost Employee Assistance Program and \$10,000 in basic life insurance for all benefit-eligible employees. Your employee contributions for the employee-paid benefits are conveniently deducted from your monthly paycheck.

The Thomas County Schools Benefits Service Center is your benefits resource. The Benefits Service Center manages all aspects of your voluntary (non-medical) benefits and can also assist with general State Health Benefit Plan questions. We are here to help support you during Open Enrollment but also all year long for your benefits needs.

Your benefit elections are valid for the entire 2026 plan year unless you have a Qualifying Life Event. A Qualifying Life Event is a change in status, such as marriage, divorce, birth of a child, or loss/gain of other coverage (supporting documentation required).

WE'RE THERE WHEN YOU NEED US MOST.

Connect with the Benefits Service Center

(866) 606-6865

www.tcjacketsbenefits.net

Monday - Thursday: 8am - 6pm EST

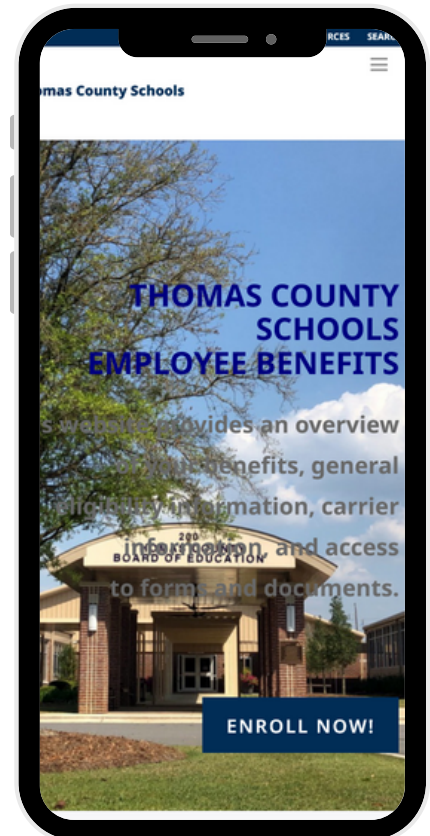
Friday: 8am - 5pm EST

Contact for assistance with:

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




**benefits
service center**



INTRODUCTION

Open Enrollment is **Monday, October 20 through Friday, November 7**. The first deductions for 2026 are taken in December 2025 for coverage, which is effective January 1, 2026.

For State Health Benefit Plan (SHBP), an active election is **not required**. However, we encourage all employees to complete an active election for your 2026 medical coverage and retain the SHBP Confirmation Statement for your records.

We encourage all employees to review your current benefits, dependent information, and life insurance beneficiary information by completing a 2026 enrollment election. However, a voluntary 2026 benefits enrollment election is **not required**. If you take no action, your existing benefits will be continued to next year with the exception of the Flexible Spending Account (FSA) plan, for which an active election is required every year.



What's Changing for 2026...

STATE HEALTH BENEFIT PLAN

- The medical plan premiums will have an increase of approximately 10%.
- To help medical plan members save more by using Tier 1/Generic prescriptions, the Tier 1 copays will be reduced and the copays for Tiers 2 and 3 will have a slight increase for the HMO and HRA plans.

VOLUNTARY BENEFITS

- Dental: The Standard and Premium dental plans have an enhancement for 2026 with no changes in employee costs. Preventive and diagnostic services will **not** count towards your annual maximum benefit. This gives you a higher overall benefit amount, allowing the plan to pay more towards your care. All dental plan members will receive new ID Cards for 2026.
- The annual contribution limit for the Dependent Care Flexible Spending Account (FSA), primarily for child day care expenses, will be \$7,500 (an increase from \$5,000).
- The annual contribution limit for the Healthcare FSA will be \$3,400.
- There are no other voluntary benefits updates for 2026.



Enrollment Sessions

Attend an onsite session for in-person assistance with benefits questions and your enrollment:

Monday, October 20

- Board of Education, PLC Annex Classroom: Maintenance, Nutrition, Transportation, Thomas County Academy, Pathways, and Renaissance Center
7:30am - 4:30pm
- Cross Creek Elementary School, Media Center:
7:30am - 4:30pm

Thursday, October 23

- Hand in Hand, Media Center:
7:30am - 4:30pm
- Garrison Pilcher Elementary School, Conference Room: 7:30am - 4:30pm

Friday, October 31

- Thomas County Middle School, Media Center Conference Room: 7:30am - 4:30pm
- Thomas County Central High School, Prep Academy Conference Room:
7:30am - 4:30pm

How to Enroll

Voluntary Benefits (Non-Medical) Enrollment

You may complete your new employee benefits elections, which include dental, vision, Flexible Spending Accounts (FSA), life insurance, disability, critical illness, hospital indemnity, and accident online or by phone. Access at www.tcjacketsbenefits.net or call the Benefits Service Center at (866) 606-6865.

Telephonic Enrollment

Call the Benefits Service Center at (866) 606-6865 for personalized, one-on-one assistance from a trained Benefits Specialist. The Benefits Specialist will help you navigate your options based on your unique situation. Call center hours are Monday through Thursday from 8am to 6pm EST, and Friday from 8am to 5pm EST. English and Spanish Benefits Specialists are available. A Confirmation Statement will be provided via email upon completion of your enrollment.

Online Enrollment

Step 1: Access www.tcjacketsbenefits.net. Click on “Enroll Now”.

Step 2: Click on “Get Started Now” to begin. You will be prompted to enter your email address on file, the last four digits of your Social Security Number, and your Date of Birth. The system will identify you by these credentials and allow you to create a password.

Step 3: Click “Begin Enrollment” and follow the prompts. For future logins, use your district email as your User ID. Once you complete your benefit elections, a Confirmation Statement will be emailed to you—review it carefully and contact the Benefits Service Center with any questions.

State Health Benefit Plan (SHBP) - ADP Portal

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

How to Reset Your SHBP Password

- **Step 1:** Go to www.myshbpga.adp.com and click “Need help signing in?”.
- **Step 2:** Enter your name and email or phone number.
- **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.”

Understanding Social Security and Retirement

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

You are also enrolled in a pension/retirement plan: either TRS or PSERS. If you’re unsure of your status, review your paycheck or reach out to your Payroll Department for more information.

You can find more information about the retirement plans here:

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



Medical Coverage

State Health Benefit Plan (SHBP)

Thomas 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: **\$1,885 per month / \$22,620 per year**. 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	
HRA Gold HRA Silver 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 HRA, HMO, and HDHP 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 (<https://info.caremark.com/oe/shbp>).
- For your convenience, you may purchase a 90-day supply of certain maintenance medications 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

www.anthem.com/shbp

Select "Find Care" from the Main Menu and then follow instructions to find a doctor.

United Healthcare

www.whyuhc.com/shbp

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 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
Deductible									
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
Medical Out-of-Pocket									
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
Coinsurance (Plan Pays)	85%	60%	80%	60%	75%	60%	80%	70%	50%
HRA									
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	
Medical									
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	
Preventive Care	100%	None	100%	None	100%	None	100%	100%	None
Retail Pharmacy									
Tier 1	15%, Min \$5, Max \$10		15%, Min \$5, Max \$10		15%, Min \$5, Max \$10		\$5 copay	Coinsurance after deductible	
Tier 2	25%, Min \$55, Max \$85		25%, Min \$55, Max \$85		25%, Min \$55, Max \$85		\$55 copay	Coinsurance after deductible	
Tier 3	25%, Min \$85, Max \$130		25%, Min \$85, Max \$130		25%, Min \$85, Max \$130		\$95 copay	Coinsurance after deductible	
Mail Order Pharmacy									
Tier 1	15%, Min \$12.50, Max \$25		15%, Min \$12.50, Max \$25		15%, Min \$12.50, Max \$25		\$12.50 copay	Coinsurance after deductible	
Tier 2	25%, Min \$137.50, Max \$212.50		25%, Min \$137.50, Max \$212.50		25%, Min \$137.50, Max \$212.50		\$137.50 copay	Coinsurance after deductible	
Tier 3	25%, Min \$212.50, Max \$325		25%, Min \$212.50, Max \$325		25%, Min \$212.50, 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

2026 Plan Update: Tier 1/Generic copays for the HMO and HRA plans have a reduction, and Tiers 2 and 3 copays have a slight increase, saving you more money when using Tier 1/Generic medications.



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 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: • Telephonic Coaching Pathway • Online Challenges Pathway	Earn up to 240 in well-being incentive points

Please refer to the State Health Benefit Plan Decision Guide or access 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

You	\$60.50
You + Spouse / Child(ren)	\$119.50
You + Family	\$160.50

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



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 www.peachcare.org for more information
- Not available through payroll deduction



Dental Plans



There are two dental plan options available, the Simple Standard Plan and the Simple Premium Plan, administered by 90 Degree Benefits. The Simple Dental plan options are unique and very easy to use and understand. You may visit any dentist, and the benefits are paid based on a schedule. The key features of your dental plan options are:

- All procedures are covered except for cosmetic procedures.
 - Cosmetic procedures include but are not limited to veneers and bleaching/whitening services.
- The plan reimburses all procedures at the same percentages.

Dental Plan Benefit Summaries

Standard Plan
Preventive services coverage at 100% *
\$50 deductible (not applicable for preventive care)
Then, plan pays 40%
Annual Maximum: \$875 per person (excludes preventive services)
Does not include orthodontia coverage

Premium Plan
Preventive services coverage at 100% *
\$50 deductible (not applicable for preventive care)
Then, plan pays 60%
Annual Maximum: \$1,500 per person (excludes preventive services)
Includes orthodontia coverage

* Preventive services include 2 cleanings, 2 exams, and 4 bitewing x-rays per year. Also included are panoramic x-rays or full-mouth x-rays once every 24 months, and fluoride and sealants for children under 18 twice a year. **New for 2026: Preventive and diagnostic services do not count towards the annual maximum benefit, providing you with a higher potential annual plan benefit.**

Claims Administration

Many dentists file the claims with Simple/90 Degree Benefits for your convenience. However, if your provider is unable to file your dental claims, you may provide an itemized receipt to 90 Degree Benefits for processing. 90 Degree Benefits: 1325 Barksdale Blvd., Suite 300, Bossier City, LA 71111.

Employer-Paid Benefit

Thomas County Board of Education is contributing 100% of the cost of employee-only coverage for the Standard Plan. We encourage all employees to take advantage of this no-cost dental benefit and visit your dentist regularly.

Monthly Premiums

Monthly Dental Premiums	Standard Plan	Premium Plan
Employee Only	\$0 - district paid	\$17.00
Employee + One	\$25.00	\$57.00
Family	\$51.00	\$103.00

ID Cards

Dental plan members will receive new ID cards for 2026. Please use the cards when you obtain your dental care services.

Mobile App



Administration is easy with the Simple mobile app. Review your benefits and Explanations of Benefits (EOBs) on the 90 Degree Benefits mobile app.

Registration is easy:

Visit www.90degreebenefits.com to Login and register once you are enrolled in the dental plan.

DENTAL PLAN MEMBER PORTAL

Dental Plan Member Portal

The dental plans are administered by 90 Degree Benefits. This means that 90 Degree Benefits manages the plan eligibility and claims. As a Simple Dental Plan member, you'll receive access to a member portal. You can review your annual benefits, claims information, plan documents, and covered dependents on the portal, and a convenient mobile app is also available.

Access Instructions Member Portal

Stay Connected On the Go!

Registration

1. Visit your Member Portal at www.90degreebenefits.com
2. In the upper right corner go to Members then Login.
3. In the upper right corner of the Member Portal home screen, click the **Register Now** button.

Register Now

4. Fill out the Registration Form and click Submit. Your ID Number is printed on your Health Insurance ID Card or use your SS#.

Logging In

Once you have registered for the Member Portal, you may use your username and password to log in. Go to Benefits - ID Card.

Account Access

User Name* ⓘ

Enter User Name

Password*

Enter Password

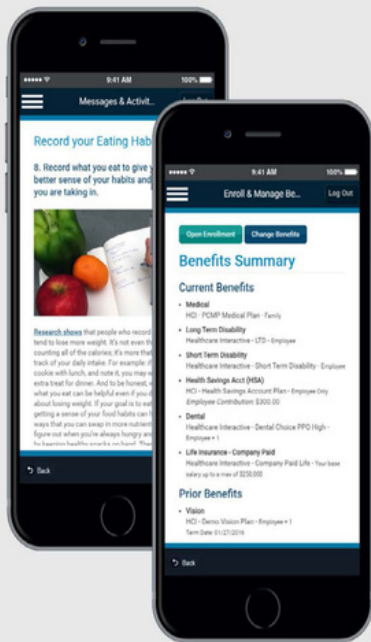
[Forgot password?](#)

Login



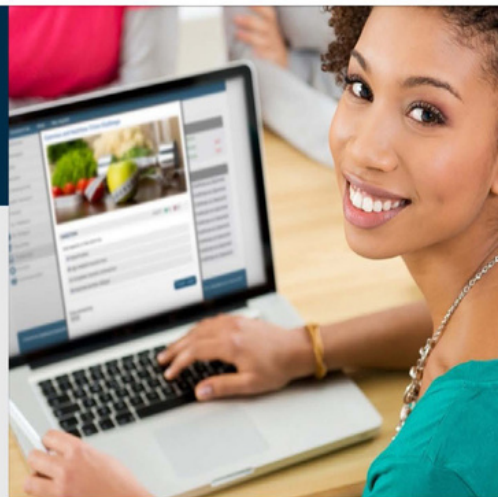
hciactive.my90db Mobile App

Use your mobile device to access the same great health plan and wellness features of your Member Portal!



Log in to your Member Portal at
www.90degreebenefits.com

Look for the **hciactive.my90db** mobile app in the
Apple App Store and Google Play Store.



Member Portal Quick Start Guide

Getting started is easy!



Vision Coverage

With the EyeMed vision plan, you are highly encouraged to use participating vision providers to maximize your vision benefits. Access www.eyemedvisioncare.com and click “Find an Eye Doctor.” Then, choose the **Select Network**. Services obtained at participating EyeMed vision providers have a significantly higher benefit, and you receive the benefit at the time of service. If you go out-of-network, you will need to pay at the time of service and file a claim for reimbursement. If you obtain services from out-of-network vision providers, you will receive a benefit according to the out-of-network reimbursement schedule, but the benefit is significantly lower than the in-network benefit.

The EyeMed vision plan provides coverage for exams, frames, and lenses (either contacts or eyeglasses lenses). If you see an in-network provider, you pay a copay for your eye exam and lenses, and the plan pays a benefit of up to \$130 for frames and \$120 for lenses. Additional copays apply for eyeglass lens options.

Frequency Limitations: The vision plan includes frequency limitations. The exam benefit and lens benefit are once every calendar year. The frame benefit is once every 24 months.

Vision Summary of Benefits		In-Network
Eye Exam		\$10 copay
Lenses		
Single	Covered in full after \$20 copay	
Bifocal		
Trifocal		
Lenticular		
Contacts		
Fit and Follow-Up	\$40 copay	
Electives Lenses	\$120 allowance	
Medically Necessary	Covered in full up to \$200	
Frames	\$130 allowance	

Vision Monthly Premiums	
Employee Only	\$6.26
Employee + One	\$11.89
Family	\$17.47



Important Vision Network Information

To locate participating EyeMed vision providers, access www.eyemedvisioncare.com and click “Find an Eye Doctor”, then choose the **Select Network**. Then, continue to follow search instructions. Or call EyeMed Vision Care at (866) 299-1358 for network information.


English
AAA

Find an eye doctor


Search by location


Search by doctor


Online & Lasik

Network

Select Network


USE MY LOCATION

OR

Zip code

SEARCH BY ZIP

Search by County

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 for dependent day care expenses. Consolidated Admin Services (CAS) 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.

2026 Plan Year

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

Healthcare Flexible Spending Account

You can 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. Annual contributions are loaded on your FSA card on January 1 and are immediately available.

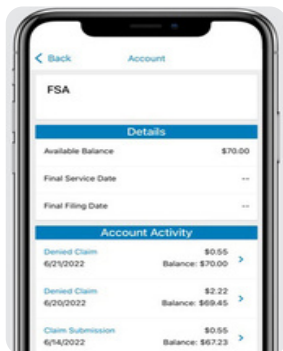
Dependent Care Flexible Spending Account

The Dependent Care FSA enables you to pay for certain dependent care expenses using before-tax dollars. Single individuals and married couples filing jointly may contribute **up to \$7,500** in a Dependent Care FSA for 2026. For married individuals filing separate returns, the **limit is \$3,750**. Eligible dependent care expenses include but are not limited to day care and before and after-school care for children up to age 13 and certain adult day care expenses for incapacitated adult dependents.

Secure FSA Member Portal and Mobile App

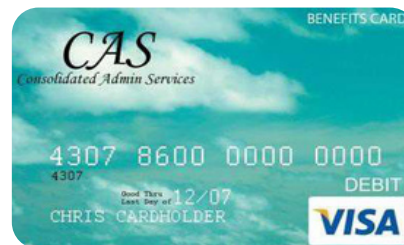
You'll receive access to a secure member portal to track your balance, view your claims, and submit claims for reimbursement. It's important for FSA members to manage your account using the member portal.

You can also access your FSA account details through your mobile device with the Consolidated Administrative Services app. You can easily access your account details on the app and submit claims and documentation using your phone. You can also use your mobile wallet for secure payments from your FSA.



Convenient Debit Card

FSA participants receive a CAS Visa debit card to make it easy to pay for eligible services and products. When you use the card, payments are automatically withdrawn from your account. Most expenses can be validated through the card transaction, but you may need to provide receipts for certain transactions. When the debit card is not accepted by physicians or pharmacies, you are required to pay for the expense and submit a claim for reimbursement.



Use It or Lose It Rule - Estimate Carefully

Before you enroll, you must first decide how much you would like to contribute to your accounts. It is important that you estimate your anticipated eligible expenses for the 2026 plan year carefully prior to selecting your contribution amount.

Claims must be incurred by **December 31, 2026** to be eligible for reimbursement for the 2026 plan year. You have up to 60 days following the end of the plan year to submit FSA claims for processing. Should you not use all of your healthcare FSA funds during the plan year, you may rollover up to \$680 into next year's healthcare FSA plan. This rollover feature does not apply to the Dependent Care FSA.

According to IRS regulations, all unused Healthcare FSA funds in excess of \$680 and all unused Dependent Care FSA funds will be forfeited.

Retain Your Receipts

The 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.

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.

Life Insurance



District-Paid Basic Life Insurance with AD&D

Thomas County Schools provides all eligible employees a \$10,000 life insurance and Accidental Death & Dismemberment (AD&D) insurance benefit at **no cost to you**. The AD&D benefit provides an additional payment in the event of a death or loss of limb(s), speech, hearing, and more caused by a covered accident.

Term Life Insurance with AD&D

Term life insurance with Accidental Death & Dismemberment (AD&D) is insured by Lincoln. Life insurance pays a benefit to your beneficiary(ies) should you die as a result of an illness or an accident. It pays an additional AD&D benefit in the event of death or loss of limbs, speech, hearing and more caused by a covered accident. You may elect group term life insurance for yourself and your dependents through convenient post-tax payroll deduction. AD&D coverage does not apply to child life insurance coverage.

Voluntary Life and AD&D Insurance Options	
Employee	Up to 5x salary in \$10,000 increments, not to exceed \$500,000
Spouse	Up to 100% of employee amount in \$5,000 increments, not to exceed \$500,000
Child(ren)* excludes AD&D coverage	\$20,000 (minimum of \$10,000 in employee coverage required)

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. **You are required to designate your beneficiary during your enrollment, but you can change it at any time.**

Special Enrollment Opportunity: If you are currently enrolled in at least the minimum amount of employee and spouse coverage, you may increase your employee and spouse coverage at this time up to the below Guarantee Issue amounts with no health questions. This offer does not apply to previously declined employees and spouses. You may also elect \$20,000 of child life coverage at this time with no health questions.

The Guarantee Issue amounts are below:

- Employee Guarantee Issue: Up to \$200,000
- Spouse Guarantee Issue: Up to \$50,000
- Child(ren) Guarantee Issue: \$20,000

Employee Life with AD&D Monthly Premiums						
Age	\$10,000	\$50,000	\$100,000	\$150,000	\$250,000	\$350,000
25	\$0.66	\$3.30	\$6.60	\$9.90	\$16.50	\$23.10
35	\$1.02	\$5.10	\$10.20	\$15.30	\$25.50	\$35.70
45	\$1.84	\$9.20	\$18.40	\$27.60	\$46.00	\$64.40
55	\$4.34	\$21.70	\$43.40	\$65.10	\$108.50	\$151.90
65	\$5.34	\$26.70	\$53.40	\$80.10	\$133.50	\$186.90

Child Term Life with AD&D Monthly Premiums	
Age	\$20,000 Benefit
0-26	\$5.00

Spouse Life with AD&D Monthly Premiums (based on spouse age)						
Age	\$10,000	\$50,000	\$100,000	\$150,000	\$250,000	\$350,000
25	\$1.32	\$6.60	\$13.20	\$19.80	\$33.00	\$46.20
35	\$1.87	\$9.35	\$18.70	\$28.05	\$46.75	\$65.45
45	\$3.06	\$15.30	\$30.60	\$45.90	\$76.50	\$107.10
55	\$4.66	\$23.30	\$46.60	\$69.90	\$116.50	\$163.10
65	\$13.06	\$65.30	\$130.60	\$195.90	\$326.50	\$457.10

Employment Separation

The life insurance plan includes coverage continuation options if certain conditions are met, and the application is required within 30 days of your separation date. The employer-paid benefit includes the conversion option, converting your coverage to an individual whole life policy. The voluntary employee-paid benefit includes portability or conversion. To be eligible for portability, you must have voluntary life insurance coverage for a minimum of 12 months. Coverage terminates at age 70 for the voluntary life insurance portability option.

- For employees age 70 and older, the maximum coverage available is \$50,000

PERMANENT LIFE WITH LONG TERM CARE

Permanent Life Insurance with Long Term Care

CHUBB

Chubb's Permanent Life Insurance product provides permanent life insurance protection with a long term care benefit.

Guaranteed Life Insurance Protection with Death Benefits

This plan provides term life insurance and a death benefit for when it is needed most. The death coverage is 100% guaranteed through age 99.

After 10 years, paid-up benefits begin to accrue. Paid-up benefits are accumulated benefits that apply if the policy terminates for non-payment of premium. These values will pay out for either death of the insured or for long term care benefits. At any point thereafter, if you stop paying the premium, a reduced paid-up benefit is available and can never lapse. That means at retirement you can stop paying premiums and have a death benefit for the rest of your life - guaranteed.

Life insurance premiums will never increase and are guaranteed through age 100.

Benefits for Long Term Care (LTC)

Long Term Care is costly and averages \$8,821 per month for a semi-private room in a nursing home. The Chubb Permanent Life plan can pay death benefits in advance of death if you require long term care. You can use these benefits for home health care, assisted living, adult day care, and nursing home care. The long term care benefit is 4% of the death benefit for up to 25 months. Long term care benefits could reduce in the event of a life insurance benefit reduction.

How It Works

Age 45 employee elects a \$25,000 policy.

- Employee needs Long Term Care at age 57.
- Plan provides \$1,000 / month for Long Term care for up to 25 months.
- Employee uses 13 months of the Long Term care benefit for a total payment of \$13,000.
- Employee passes away at age 67. Death Benefit Amount is \$12,000.

Age 45 employee elects a \$100,000 policy.

- Employee needs Long Term Care at age 57.
- Plan provides \$4,000 / month for Long Term care for up to 25 months.
- Employee uses 13 months of the Long Term care benefit for a total payment of \$52,000.
- Employee passes away at age 67. Death benefit amount is \$48,000.

Coverage Options

Employee: Up to \$100,000

Spouse: Up to \$75,000

Child: Up to \$25,000

Restoration of Your Death Benefit

Ordinarily, using your life insurance coverage for Long Term Care benefits can reduce your death benefit to \$0. While in force, this benefit restores your life coverage to not less than 50% of the death benefit on which your LTC benefits were based. This feature assures a death benefit is available for the insured at time of death.

Monthly Premium Example - \$50,000

Age 40 Non-Tobacco	
Approximate Monthly Premium	\$46.00
Death Benefit at Age 45	\$50,000
Death Benefit at Age 70	\$50,000
Long Term Care Benefit	\$1,000 per month for up to 25 months
Paid-up Value at Year 11	\$3,657

Enrollment and Health Questions

Employees may elect or increase coverage up to \$100,000 at this time with no health questions. All other elections and increases are subject to medical underwriting.

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 after a 14 day waiting period). 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 (SSNRA) should you remain disabled. Sick leave can be used in conjunction with disability to equal 100% of your pay.

Disability Summary of Benefits		
	Short Term Disability	Long Term Disability
Benefit Amount	60% of monthly income, up to \$6,000 per month	60% of monthly income, up to \$6,000 per month
Benefit Start Date	After 14-day elimination period/waiting period	After 90-day elimination period/waiting period
Benefit Duration	up to 11 weeks	Social Security Normal Retirement Age
Maximum Benefit	\$1,385 per week	\$6,000 per month

You may elect Short Term Disability and Long Term Disability at this time with no health questions. This offer does not apply to employees previously declined. Your specific benefit options and premiums are available in the benefit enrollment system or by calling the Benefits Service Center.

Short Term Disability			
Age	\$20,000 Salary 60% Weekly Benefit	\$40,000 Salary 60% Weekly Benefit	\$60,000 Salary 60% Weekly Benefit
25	\$9.23	\$18.46	\$27.69
35	\$8.31	\$16.62	\$24.92
45	\$9.00	\$18.00	\$27.00
55	\$12.00	\$24.00	\$36.00
65	\$15.00	\$30.00	\$45.00

Pre-Existing Conditions Exclusion

The Short Term Disability and Long Term Disability plans have a pre-existing conditions exclusion for disabilities that begin in the first 12 months of your coverage. A pre-existing condition is one for which you have received medical treatment, consultation, or services, including prescription drugs, in the 3 months prior to your effective date. Once you have been covered for 12 months, no limitation applies.

Long Term Disability			
Age	\$20,000 Salary \$1,000 Monthly Benefit	\$40,000 Salary \$2,000 Monthly Benefit	\$60,000 Salary \$3,000 Monthly Benefit
25	\$1.22	\$2.43	\$3.65
35	\$3.85	\$7.70	\$11.55
45	\$8.37	\$16.73	\$25.10
55	\$13.77	\$27.53	\$41.30
65	\$17.35	\$34.70	\$52.05

Employment Separation

Short Term Disability and Long Term Disability plans are portable for up to 12 months if certain requirements are met.

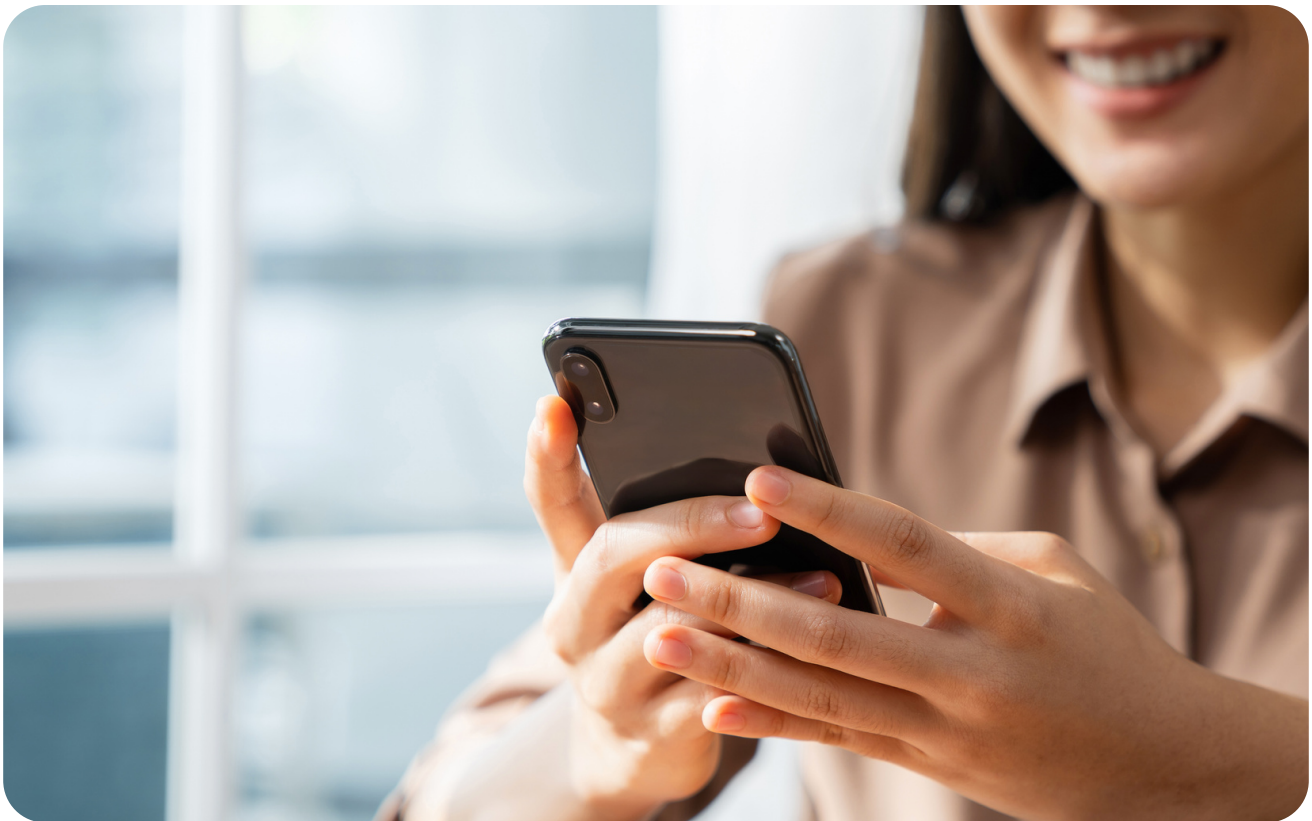
EMPLOYEE ASSISTANCE PROGRAM

Employee Assistance Program (EAP)

Thomas County Schools is committed to supporting the wellness of all its teachers and staff by offering free and confidential short-term counseling services through the Employee Assistance Program (EAP).

In partnership with Archbold Memorial Hospital, Thomas County Schools provides free counseling services to all full-time employees. To access this benefit, employees can request a referral through your building supervisor or by contacting Dr. Brecca Pope, Assistant Superintendent of Administrative Services.

This service is **completely confidential**, and referrals are kept private between the employee and the medical provider. No records are shared with the school district, and all counseling records are maintained solely by Archbold Memorial Hospital.





Critical Illness

The Critical Illness plan is insured by Prudential and provides a lump sum benefit in the event of a diagnosis of a covered illness. You may elect coverage for yourself and your spouse, and children are automatically covered at 100% of the employee's benefit amount. This plan includes a health screening benefit for all insureds as well.

Benefit Options

Employees: \$10,000, \$20,000 or \$30,000

Spouses: 100% of employee amount

Children: Automatic coverage at 100% of employee benefit amount

Enroll now with no health questions required!

Covered Diagnoses and Conditions

Critical Illnesses	
- Heart attack - Stoke - Major organ failure - End-stage kidney failure	- Coronary artery disease - Major (50%) coronary artery bypass graft or valve replacement - Minor (10%) balloon angioplasty or stent placement

Cancer Conditions
- Invasive cancer - all breast cancer is considered invasive - Non-invasive cancer (25%) - Skin cancer - \$500

Progressive Diseases	Supplemental Conditions
- Amyotrophic Lateral Sclerosis (ALS) - Dementia, including Alzheimer's disease - Multiple Sclerosis (MS) - Parkinson's disease - Functional loss	- Loss of sight, hearing or speech - Benign brain tumor - Coma - Permanent Paralysis - Infectious Diseases (25%) - Third degree burns - Lupus (25%) - TIA (25%)

Covered Conditions - Child	
- Cerebral Palsy - Cleft lip or palate - Cystic Fibrosis - Down Syndrome	- Sickle Cell Anemia - Spina Bifida - Congenital Heart Disease - Type 1 Diabetes

Wellness Benefit Included

The voluntary Critical Illness plan includes a wellness benefit of \$50 per covered member per calendar year. The benefit covers one test per insured once per calendar year.

- Annual exams by a physician, including sports physicals
- Immunizations and other health screenings
- Cardiovascular, cholesterol, and diabetes screenings
- Imaging, including chest X-ray, mammography, and more

Sample Payroll Deductions

Monthly Costs			
Age	Employee \$10,000	Spouse \$10,000	Family \$10,000
under 25	\$3.58	\$3.58	\$7.15
25-29	\$4.52	\$4.52	\$9.04
30-34	\$5.62	\$5.62	\$11.24
35-39	\$7.42	\$7.42	\$14.84
40-44	\$9.72	\$9.72	\$19.44
45-49	\$12.52	\$12.52	\$25.04
50-54	\$15.72	\$15.72	\$31.44
55-59	\$21.12	\$21.12	\$42.24
60-64	\$29.12	\$29.12	\$58.24
65-69	\$42.72	\$42.72	\$95.44
70-74	\$67.02	\$67.02	\$134.04

All coverage options and premiums will be available at the time of your enrollment.

* Refer to the benefits summary for rates above age 74.

ACCIDENT

Accident



The Accident plan is insured by Prudential. Accidents result in unexpected expenses, many of which are for medical care. We offer this Accident coverage to help with these unpredictable expenses. If you have an unexpected injury that results in necessary medical treatment, the accident plan provides a benefit according to a schedule. The plan includes benefits for many kinds of medical treatment such as hospital admission, office visits, therapy, and x-rays. The accident plan also pays a benefit depending on the specific type of injury, and also includes an Accidental Death and Dismemberment benefit. If your child is injured as a result of an organized sporting activity, the plan pays an additional benefit.

Consider this plan when selecting your medical plan option. You may wish to consider a higher deductible on your health plan if you have the accident benefit, because of the additional financial protection it can provide.

Hospital Care Benefits

Per Admission Benefit	\$1,000 / Intensive Care: \$2,000
Daily Stay Benefit	\$200/day - up to 365 days
Surgery	Up to \$2,000

Medical Care Benefits

Emergency Room	\$150
Follow-up Physician Treatment	\$75 up to 2 visits
Ambulance	\$400 / Air Ambulance: \$1,500
Physical / Occupational / Speech Therapy	\$50 up to 10 visits
Outpatient Surgery	\$300
Medical Imaging Test	\$200
Coma	\$10,000

Injury-Based Benefits

Burns	\$500 - \$10,000
Concussions	\$200
Lacerations	\$25 - \$600
Dislocations	\$150 - \$6,000
Fractures	\$75 - \$7,500

Accidental Death & Dismemberment (AD&D)

Employee	\$50,000
Spouse	\$25,000
Child(ren)	\$12,500

Additional Benefit

Organized Sports Activity Benefit (child coverage only)	Additional 25%
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Wellness Benefit Included

The Accident plan includes a wellness benefit of \$50 per covered member per calendar year. The benefit covers one test per insured once per calendar year.

- Annual exams by a physician, including sports physicals
- Immunizations and other health screenings
- Cardiovascular, cholesterol, and diabetes screenings
- Imaging, including chest X-ray, mammography, and more

Accidental Monthly Premiums

Employee	\$14.66
Employee + Spouse	\$23.71
Employee + Child(ren)	\$27.37
Family	\$36.42



This is an abbreviated description of the accident plan benefits. Please refer to the complete Benefit Summary for details.

Hospital Indemnity



Thomas County Schools offers a Hospital Indemnity plan that pays a confinement benefit, plus daily benefits which are paid directly to you and can be used for any purpose. A summary of the benefits schedule is below. Please refer to the Summary of Benefits or certificate of coverage for complete details. Pregnancy is covered under this benefit with no pre-existing condition exclusion. This plan is portable at time of separation. You may continue by paying premiums directly to Prudential.

Wellness Benefit Included

The Hospital Indemnity plan includes a wellness benefit of \$50 per covered member per calendar year. The benefit covers one test per insured once per calendar year. Annual exams including sports physicals, immunizations, cardiovascular, cholesterol, and diabetes screenings, chest X-rays, mammograms, and more are covered screenings and eligible for the wellness benefit.

Schedule of Benefits

Hospital Admission Benefit	\$1,000
ICU Admission Benefit	\$2,000
Hospital Confinement Benefit	\$200/day, up to 30 days
ICU Confinement Benefit	\$400/day, up to 30 days
Hospital Observation Benefit	\$100
Mental Illness/Nervous Disorder Benefit	\$100
Substance Abuse	\$100/day, up to 30 days

Hospital Indemnity Monthly Premiums

Employee	\$19.18
Employee + Spouse	\$36.18
Employee + Child(ren)	\$37.59
Family	\$54.59

IMPORTANT: This is a fixed indemnity policy, not health insurance

This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized.

- The payment you get isn't based on the size of your medical bill.
- There might be a limit on how much this policy will pay each year.
- This policy isn't a substitute for comprehensive health insurance.
- Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.



Sick Leave

Full-time benefits-eligible employees earn sick leave at a rate of 1.25 days for every calendar month worked. Any unused sick leave can be carried over from one fiscal year to the next, up to a maximum of 60 days. It is important to note that personal and professional leave may not be granted on system critical days.

Sick Leave Bank

Thomas County Schools offers a voluntary Sick Leave Bank to all full-time benefits-eligible employees. The Sick Leave Bank provides additional sick leave to members who have used all their personal and available leave and are unable to perform their job duties for an extended period due to a catastrophic illness.

A catastrophic illness is defined as a condition that prevents a member from performing their work duties for more than ten consecutive workdays or an illness affecting the member's child, spouse, or parent that requires their care and also results in an absence of more than ten consecutive workdays.

To join the Sick Leave Bank, you must complete an application either during your new hire election period or during the district's annual open enrollment. Membership requires transferring one day of your accumulated sick leave to the Sick Leave Bank account.

Georgia Paid Parental Leave

Full time eligible employees can take advantage of Georgia Paid Parental Leave, which allows up to 240 hours of paid parental leave within a year of the birth of their child or within a year after adoption or taking in a minor through foster care.

Employees eligible for Georgia Paid Parental Leave can take up to 240 hours within a rolling 12-month period, regardless of the number of qualifying life events. This leave doesn't deduct from accrued leave and runs concurrently with federal laws like FMLA. Leave can be taken as needed in increments of four hours. Eligibility criteria include full-time status in the district, participation in TRS or PSERS, six months of continuous employment for salaried employees, and 700 hours worked in the six months preceding the requested leave for hourly employees. Qualifying events include the birth of a child or the placement of a minor child for adoption or foster care. For additional information, contact Miranda McInnis in Human Resources at (229) 584-9114 or via email at mmcinnis@tcjackets.net.



Retirement

The Thomas County Schools retirement program is comprised of either the Teachers Retirement System (TRS) or the Public School Employees Retirement System (PSERS), in addition to supplemental 457(b) and 403(b) plans.



Teacher Retirement System (TRS)

The following personnel are required to participate in TRS, a state retirement plan: certified teachers, administrators, clerical staff, paraprofessionals, department leads, and department managers. Your TRS account is funded by you and the district. Employees contribute 6% of earnings and the district contributes 21.91% of earnings to the account (effective July 1, 2025). 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: maintenance, school nutrition, bus drivers and monitors, transportation, and warehouse 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.

Supplemental Retirement Plan

In addition to the mandatory Teachers Retirement System (TRS) and Public School Employees Retirement System (PSERS), Thomas County Schools offers voluntary 403(b) and 457(b) plans to help employees enhance their retirement savings.

You can contribute between 1% and 100% of your pay, with an annual limit of \$23,500, and employees aged 50 or older can contribute an additional \$7,500. Contributions can be made pre-tax, deferring taxes until retirement, or after-tax, with taxes applied to earnings upon withdrawal.

Your contributions are immediately 100% vested. Contact information for local financial advisors is found on page 22 of the guide.

State Health Benefit Plan (SHBP) Retirement Note

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 here: <https://shbp.georgia.gov/>.



Professional Association of Georgia Educators (PAGE)



PAGE is the state's largest and most respected association for educators, serving teachers, paraprofessionals, support personnel, and students. We provide the best in membership, legislative, and legal support.

MEMBERSHIP TYPES

Professional

\$175 annually or \$14.58 Monthly*

All certified and professional staff in public schools and district offices, including social workers, nurses, SROs, counselors, media specialists, SLPs, long-term substitutes, and retired educators working at 49%.

Support

\$87.50 annually or \$7.29 Monthly*

Public school paraprofessionals, transportation, school nutrition, maintenance, clerical, substitutes, and other classified staff.

TRANSFERRING SYSTEMS?

Your membership does NOT automatically transfer. You MUST update your membership profile by paper application, online, or by scanning the QR code below.

RECENT GRADUATE?

Student membership no longer covers you, even if it hasn't expired. Use the QR Code below, fill out a paper application, or go online to upgrade to Professional and enjoy your 50 percent discount!**



SCAN FOR INFO ABOUT

- PAGE membership
- Grants
- PAGE 1:1 coaching
- Scholarships
- Legal protection

www.pageinc.org

*Via payroll deduction or credit card payment

**Half-price discount given to members who upgrade to Professional after being enrolled as a Student member or Support member.



We've got you covered!



PAGE Is Your Shield. We Are Here To Protect You.

- \$1 million liability coverage
- \$10,000 policy each for criminal defense, employment rights, and violations with the PSC
- All coverage is "win or lose" with no reimbursements, deductibles, or up-front costs.
- Calls are not screened, and all members have direct and unlimited access to one-on-one confidential guidance from our expert legal team.

Coverage is limited to activities performed in a professional capacity and is subject to industry-standard exclusions.



PAGE Amplifies Your Voice Through Legislative Advocacy.

- PAGE engages lawmakers at local, state, and national levels on a variety of issues that affect educators and students throughout the year, especially during each session of the Georgia General Assembly.
- Advocacy focus areas include salary increases and pay supplements, school funding, teacher evaluation, assessment and accountability, Teachers Retirement System, school safety, and preventing the expansion of private school vouchers.



PAGE Empowers Your Professional Growth.

- Free 1:1 coaching and professional learning enables you to overcome professional challenges.
- Educator Classroom Grants
- College Scholarships



PAGE Provides Opportunities For Your Students.

- STAR (Student Teacher Achievement Recognition), Georgia Academic Decathlon, and PAGE Academic Bowl for Middle Grades
- Future Georgia Educators initiatives support Georgia's teacher pipeline.



PAGE Is An Unbeatable Value For Georgia Educators.

- PAGE dues have not increased since 2013.
- Dues support YOU. PAGE does not endorse or contribute to political campaigns.
- Dues stay in Georgia and work for you.

www.pageinc.org

Commonly Used Healthcare and Benefits Terms

Carrier – Insurance company insuring your benefits.

Coinsurance – Percentage of medical bills that patient is responsible for; goes into effect after deductible has been met.

Copay – The per visit charge paid each time you see your doctor.

Deductible – The amount of medical costs you are financially responsible for before coinsurance applies.

Employee Assistance Program (EAP) – Program with services to assist with handling life's problems (stress, mental illness, addiction, workplace issues, etc.)

Explanation of Benefits (EOB) – Received from carrier summarizing charges for care received. It will spell out what was billed, how much your carrier paid, and how much you are responsible for.

In-Network – Providers that have contracted with your carrier. Going in-network will save you money.

Out-of-Network – Providers that have not contracted with your carrier. Going out-of-network will result in reduced coverage, or no coverage at all. Potential balance billing can occur when you go out-of-network.

Out-of-Pocket Maximum – The maximum amount you will pay for medical expenses before your plan will pay 100%.

Primary Care Provider (PCP) – Doctor that you typically visit first with health issues; they manage your overall care.

Participating Dental Provider (PDP) Fee – Amount dentist has agreed to accept as payment for services from carrier.

Premium – Amount deducted from your paycheck to pay your portion of your insurance.

Preventive care – Care obtained to prevent major health issues: annual physicals, mammograms, colonoscopies, etc.

Qualifying Life Event (QLE) – Event (i.e. marriage, birth of child, gain/loss of coverage), that allows you to make changes to coverage during the year within a specific timeframe, typically 31 days from date of event.

Summary Plan Description (SPD) – Overview of provisions of plan, including coverage for specific procedures and applicable legal language.

Plan Types

- **High Deductible Health Plan (HDHP)** – Typically has individual deductible of at least \$1,700. Many qualified HDHP plans do not have copays, and all care is subject to the deductible and coinsurance.
- **Health Maintenance Organization (HMO)** – Network plans require a PCP to be responsible for care. There is no out-of-network coverage, and HMOs usually have more plan restrictions.
- **Health Reimbursement Arrangement (HRA)** – An employer-funded health plan that reimburses employees for qualified medical expenses. Reimbursement dollars received by employees are generally tax-free.

Medical Savings Account Types

- **Healthcare and Dependent Care Flexible Spending Accounts (FSA)** – Accounts in which pre-tax income is put aside to pay for IRS-qualified medical / dependent care expenses. The FSA is “use it or lose it”: funds must be used by end of plan year or be forfeited. 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.



Definition of Dependent

- Legally married spouse
- Natural or legally adopted child(ren) or stepchild(ren)
- Children acquired through legal guardianship
- Children age 26 or older who are physically or mentally disabled prior to age 26 and who are primarily dependent on the enrolled member for support

IMPORTANT CONTACT INFORMATION

Medical

Anthem

(855) 641-4862
anthem.com/shbp

United Healthcare

(888) 364-6352
whyuhc.com/shbp

Sharecare

(888) 616-6411
bewellshbp.com

CVS Caremark

(844) 345-3241
info.caremark.com/shbp

SHBP Eligibility

(800) 610-1863
dch.georgia.gov/shbp
myshbpga.adp.com

TRICARE Supplement

(866) 637-9911
info.selmanco.com/ga_shbp

Dental

Simple Dental administered by

90 Degree Benefits
(800) 270-4158
90degreebenefits.com

Vision

EyeMed Vision Care

(866) 939-3633
eyemed.com

Flexible Spending Accounts

Consolidated Admin Services (CAS)

(877) 941-5956
consolidatedadmin.com

Basic/Term Life & AD&D Insurance

Lincoln Financial

(800) 423-2765
www.lincolffinancial.com

Permanent Life Insurance

Chubb

(855) 241-9891
claims@gotoservice.chubb.com

Short and Long Term Disability

Lincoln

(800) 423-2765
lincolffinancial.com

Critical Illness, Hospital Indemnity, & Accident

Prudential

(844) 455-1002
prudential.com

Employee Assistance Program

Archbold Memorial Hospital

Referral Request:
Dr. Brecca Pope, Assistant Superintendent
of Administrative Services
bpope@tcjackets.net | (229) 584-9101

Thomas County Schools Benefits Service Center

(866) 606-6865
help@tcjacketsbenefits.net

Monday - Thursday 8am - 6pm
Friday 8am - 5pm

Retirement Plans

Teachers Retirement System of Georgia (TRS)

- trsga.com
- (800) 352-0650

Public School Employees Retirement System of Georgia (PSERS)

- ers.ga.gov
- (800) 805-4609

Supplemental Retirement Plans

Von Hellens and Partners

Erik Von Hellens
(229) 413-0026
erik@vonhellensandpartners.com

Melanie Cromartie
(229) 413-0026
melanie@vonhellensandpartners.com

Thomas County Schools Finance

Brandi Norton, Benefits Coordinator
(229) 584-9120
bnorton@tcjackets.net

Renee Van Gundy, Payroll Coordinator
(229) 584-9102
rvangundy@tcjackets.net

Morgan Bass, Accounting Manager
(229) 584-9104
mbass@tcjackets.net

Joey Holland, CFO
(229) 584-9112
jholland@tcjackets.net

Human Resources
Miranda McInnis: (229) 584-9114
mmcinnis@tcjackets.net





**benefits
service center**

This guide is a general summary of your benefit options. For specific details, refer to each plan's Certificate or Summary Plan Description (SPD). SPDs for your health insurance can be found on the State Health Benefit Plan (SHBP) website at dch.georgia.gov/shbp. Access tcjacketsbenefits.net for other benefit plan documents.

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.