2022 OPEN ENROLLMENT
October 18 – November 5, 2021
Open Enrollment Dates for 2022 Benefits
October 18 – November 5, 2021

Open Enrollment presentations will be available to all employees utilizing the Microsoft Teams platform on the following dates:

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>October 21, 2021</td>
<td>4:00 PM – 5:00 PM</td>
</tr>
<tr>
<td>October 26, 2021</td>
<td>4:00 PM – 5:00 PM</td>
</tr>
<tr>
<td>October 27, 2021</td>
<td>4:00 PM – 5:00 PM</td>
</tr>
<tr>
<td>November 1, 2021</td>
<td>4:00 PM – 5:00 PM</td>
</tr>
<tr>
<td>November 3, 2021</td>
<td>4:00 PM – 5:00 PM</td>
</tr>
</tbody>
</table>

Each session will be limited to 50 attendees. Click [here](#) or scan the QR code with your mobile device to request your choice of appointment times for the Open Enrollment Presentations.

Once your session is confirmed, you will receive an email with a Microsoft Teams meeting link.

Click on the Microsoft Teams meeting link to join your session on the date/time listed.
2022 Benefits Overview

This publication summarizes the benefits of employment for full-time, benefit-eligible employees of Rockdale County Public Schools. The information presented in this booklet is a summary.

It is the responsibility of each individual electing or declining coverage with Rockdale County Public Schools to read the information contained herein and any Summary Plan Descriptions. Failure to read or understand a plan or its provisions does not constitute an event that would allow changing or dropping coverage.

NOTE: Employees must visit two places to elect benefits during Open Enrollment! See below for login instructions to both websites.

Medical Benefits:
https://myshbpga.adp.com/shbp/
- Log in to the SHBP website
- Click Instructions to register to Create your User ID or Request to reset your password
- Enter Your User ID
- Create a password
- The code for first-time users is SHBP-GA

Supplemental Benefits:
https://www.rockdaleschools.org
- Careers and Staff
- Employee Links
- Class Link
- Sign in with Microsoft
- My HR Resources
- Bswift

Username: First initial + Last Name + Employee ID Number
Password: Employee ID Number

Note: All passwords have been reset to Employee ID Number. Your Employee ID Number can be found in the upper left-hand corner of your salary advice.
Employees are only required to pay the monthly employee portion, as seen below. Rockdale County Public Schools (RCPS) contributes $945 a month for each employee that elects health benefits as part of the RCPS Total Compensation Package. Health insurance is available to employees who work at least 20 hours per week. The State Health Benefit Plan is underwritten by the Department of Community Health (DCH), an agency of the State of Georgia.

<table>
<thead>
<tr>
<th>Plan</th>
<th>You</th>
<th>You + Child(ren)</th>
<th>You + Spouse</th>
<th>You + Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anthem Gold</td>
<td>$175.68</td>
<td>$320.11</td>
<td>$436.33</td>
<td>$580.76</td>
</tr>
<tr>
<td>Anthem Silver</td>
<td>$114.32</td>
<td>$215.80</td>
<td>$307.47</td>
<td>$408.95</td>
</tr>
<tr>
<td>Anthem Bronze</td>
<td>$76.58</td>
<td>$151.64</td>
<td>$228.22</td>
<td>$303.28</td>
</tr>
<tr>
<td>Anthem HMO</td>
<td>$143.03</td>
<td>$264.61</td>
<td>$367.76</td>
<td>$489.34</td>
</tr>
<tr>
<td>UHC HMO</td>
<td>$174.49</td>
<td>$318.09</td>
<td>$433.83</td>
<td>$577.43</td>
</tr>
<tr>
<td>UHC HDHP</td>
<td>$61.83</td>
<td>$126.57</td>
<td>$197.24</td>
<td>$261.98</td>
</tr>
<tr>
<td>Kaiser HMO</td>
<td>$154.13</td>
<td>$283.60</td>
<td>$391.49</td>
<td>$520.96</td>
</tr>
</tbody>
</table>

**Surcharge:** An $80 per month tobacco surcharge is added to your monthly premium if you or any covered dependents have used tobacco products in the previous 12 months.

*You will automatically be charged the applicable surcharges if you fail to answer questions concerning the tobacco surcharge.*

The State Health Benefit Plan (SHBP) website is where you will manage your Medical Open Enrollment selections; you can find the active decision guide and manage your health care information throughout the year on the SHBP website.
Group Dental Insurance

Ameritas Group Dental and Vision Insurance are available to employees who work at least 20 hours per week. See below for coverage information.

<table>
<thead>
<tr>
<th>Payroll Deduction</th>
<th>Employee</th>
<th>Employee + Child(ren)</th>
<th>Employee + Spouse</th>
<th>Employee + Spouse + Child(ren)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Option</td>
<td>$38.04</td>
<td>$107.68</td>
<td>$98.48</td>
<td>$122.12</td>
</tr>
<tr>
<td>Low Option</td>
<td>$28.80</td>
<td>$77.72</td>
<td>$77.44</td>
<td>$91.96</td>
</tr>
</tbody>
</table>

High Option - You may see any provider you wish
Low Option - (Maximum Allowable Charge-this plan utilizes a Participation Provider Organization Network). Visit the Ameritas website to view in-network providers in your area at [https://www.ameritas.com](https://www.ameritas.com).

Services Covered (Sample)
- 100% Service of a preventive, diagnostic, or emergency nature (oral exams, cleanings, and x-rays). 75% Restorative and surgical procedures (fillings and extractions).
- 50% Prosthodontics procedure (inlay, crowns, repair, or bridges and dentures to replace teeth extracted while this insurance is in force). Periodontics (root canals) and Endodontics are also covered at 50%.
- 50% Orthodontic procedures (maximum lifetime benefit of $1,500). Children only up to age 19. Maximum Dental Benefit $1,500 per person per benefit year for all combined except Orthodontics.

Group Vision Insurance

<table>
<thead>
<tr>
<th>Payroll Deduction</th>
<th>Employee</th>
<th>Employee + Child(ren)</th>
<th>Employee + Spouse</th>
<th>Employee + Spouse + Child(ren)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vision</td>
<td>$7.28</td>
<td>$11.84</td>
<td>$14.04</td>
<td>$18.64</td>
</tr>
</tbody>
</table>

As a bonus for carrying Dental and Vision with Ameritas, you qualify for $100 reimbursement $200 per household, per year towards your out-of-pocket expenses with our Vision Perfect Program.

Services Covered (Sample)

<table>
<thead>
<tr>
<th>Sample Services</th>
<th>Eye Med Access Network</th>
<th>Out of Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Eye Exam</td>
<td>Covered in Full</td>
<td>Up to $35</td>
</tr>
<tr>
<td>Lenses Single Vision</td>
<td>Covered in Full</td>
<td>Up to $25</td>
</tr>
<tr>
<td>Lenses Bifocal</td>
<td>Covered in Full</td>
<td>Up to $40</td>
</tr>
<tr>
<td>Lenses Trifocal</td>
<td>Covered in Full</td>
<td>Up to $55</td>
</tr>
</tbody>
</table>

Visit the Ameritas website to view in-network providers in your area and get detailed coverage information at [https://www.ameritas.com](https://www.ameritas.com).
Group Life, Disability & Critical Illness Insurance

- Long Term Disability-Employer Paid
- Basic Employee Life and AD&D
- Voluntary Life
- Spouse Life
- Child Life
- Dependent Life & AD&D
- Short Term Disability
- Critical Illness
- Spouse Critical Illness
- Child Critical Illness

Long Term Disability Insurance

**Plan Highlight:** This is an employer-paid benefit included in the RCPS Total Compensation Package and is at no cost to you.

**Plan Description:** Disability benefits are provided as a source of income if you become disabled and cannot work.

**Note:** You must be actively working a minimum of 15 hours per week to be eligible.

**Percentage of Salary Maximum:** 60% of your monthly earnings up to a maximum of $5,000 per month.

Basic Life and AD&D

**Plan Highlight:** This is an employer-paid benefit included as part of the RCPS Total Compensation Package and is provided to you at no cost.

**Plan Description:** Your benefit is an amount equal to 1.5 times your annual salary, up to $350,000.

- Maximum: $350,000
- Minimum: $20,000
- Age Factor Coverage Limitations: Benefit reduces to 65% at age 65 and 50% at age 70.

**Note:** Your amount of life insurance will be rounded to the next higher multiple of $1,000.

Employee Assistance Program (EAP) services with Licensed and Certified Health Professionals.

Visit [https://www.mutualofomaha.com/eap/](https://www.mutualofomaha.com/eap/) for more information regarding Mutual of Omaha’s EAP services.
Voluntary Life Insurance

Plan Highlights: Supplemental life insurance is an optional benefit offered to eligible employees as a financial resource to protect their families.

Plan Description:
- Maximum: 5x annual salary, up to $500,000
- Minimum: $10,000
- Coverage may be elected in increments of $10,000 to the applicable Maximum.
- Age Factor Coverage Limitations: Benefit reduces to 65% at age 70, 45% at age 75, 30% at age 80, 20% at age 85, and 15% at age 90.

Your amount of life insurance is subject to any reductions indicated in the Benefit Reductions provision in the Policy Schedule.

Voluntary Spouse Life Insurance

Plan Description: You may elect to have your spouse insured for an amount of life insurance from $5,000 to $100,000, in increments of $5,000, provided the amount elected does not exceed 50% of Your amount of life insurance.

Your spouse’s amount of life insurance is subject to any reductions indicated in the Benefit Reductions provision in the Policy Schedule.

Voluntary Child Life Insurance

Plan Description: You may elect to have Your Dependent eligible child(ren) insured for an amount of life insurance from $2,000 to $10,000, in increments of $1,000, provided the amount elected does not exceed 50% of Your amount of life insurance. Each eligible Dependent child must have the same amount of insurance.
**Basic Dependent Life & AD&D**

**Plan Description:** You may elect to add Accidental Death and Dismemberment insurance to your dependents (Spouse and children). Selecting this coverage adds $10,000 worth of coverage to your spouse and $5000 additional coverage to your child(ren). The double Indemnity provision is applied if the death is deemed an accident.

**Short Term Disability Insurance**

**Plan Description:** Short Term Disability is an optional benefit offered to eligible employees as a financial resource to protect their families in the event of a short-term disability. See policy documents for more detailed information, exclusions, and limitations.

- **7-Day Elimination Period**
  - Waiting Period: 7 days from date of disability
  - Weekly Maximum: $1500
  - Percentage of Salary: 60% of weekly salary
  - Duration of benefit: 21 weeks

- **14-Day Elimination Period**
  - Waiting Period: 14 days from date of disability
  - Weekly Maximum: $1500
  - Percentage of Salary: 60% of weekly salary
  - Duration of benefit: 20 weeks

- **30-Day Elimination Period**
  - Waiting Period: 30 days from date of disability
  - Weekly Maximum: $1500
  - Percentage of Salary: 60% of weekly salary
  - Duration of benefit: 18 weeks

**Note:** Mutual of Omaha considers the total of all your income from other sources of income in determining the amount of your weekly benefit. See policy documents for more detailed information, exclusions, and limitations.
Critical Illness Insurance

Plan Highlight: A critical Illness insurance policy provides a lump sum cash benefit upon the diagnosis of a critical illness that is covered under the policy guidelines. This benefit can be used to pay out-of-pocket medical expenses.

Plan Description: You may elect to be insured for an amount of Critical Illness insurance from $5,000 to $50,000 in increments of $5,000. Your amount of Critical Illness insurance is also referred to as Your Critical Illness Principal Sum. If you have questions regarding the amount of your Critical Illness insurance, please contact the Rockdale County Public Schools’ Benefits Department at benefitshelp@rockdale.k12.ga.us.

Spouse Critical Illness Insurance

Plan Description: Provided you have elected voluntary Critical Illness insurance for yourself, you may elect to have your spouse insured for an amount of Critical Illness insurance from $5,000 to $50,000, in increments of $5,000, provided the amount selected does not exceed 100% of your Critical Illness principal sum.

Child Critical Illness Insurance

Plan Description: Provided you have elected some amount of Critical Illness insurance, the amount of Critical Illness insurance for your eligible dependent child(ren) is 25% of your CI Principal Sum, but in no event more than $5,000. Any amount of Critical Illness insurance for your dependent(s) will be rounded to the next higher multiple of $1,000, if not already an even multiple of $1,000. Any amount of Critical Illness insurance for a dependent is the dependent’s Critical Illness Principal Sum.
**Plan Description:** A Flexible Spending Account (FSA) allows employees to set aside money for future medical expenses pre-tax. The total amount of your medical election is available for reimbursement upon the first day of your plan year. There is a $2,700 maximum contribution, and you will be payroll deducted based on the annual election chosen at Open Enrollment.

For example, if you elect the full available $2,700, you will receive a debit card with the $2,700 election loaded on it on January 1, 2022. You will be deducted $225 for each paycheck beginning in December 2021 and ending in November 2022.

See below for examples of some eligible expenses covered under the Flexible Spending Plan with BASIC:

- Insurance deductibles
- Co-payments
- Co-insurance
- Prescriptions
- Dental and Vision expenses
- Over-the-counter medicine
- Diabetic Supplies
Dependent Care Accounts

**Plan Description:** A Dependent Care Flexible Spending Account is a pre-tax benefit that allows reimbursement for qualified dependent care expenses. Qualified expenses include care for a dependent child under the age of 13 and care for your spouse or adult dependent who is physically or mentally unable to care for themselves.

**How it works:** Plan participants specify a specific dollar amount to contribute from their paychecks per pay period to their Dependent Care Account. The money is pre-tax, saving participants between 15%-40% for rendered services and lowering their overall tax liability. Unlike a Medical FSA, DCA accounts are pay-as-you-go accounts, meaning the employer does not advance funds. DCA accounts also differ from traditional FSAs since election amounts can change or stop during the year if expenses vary, significantly reducing the risk of use-it-or-lose-it.

**Path2College 529 Plan**

A Path2College 529 Plan works like a 401(k) or 403(b) retirement plan, and it is used to save for higher education.

**Plan Highlights**

- Contributions are payroll deducted.
- 100% tax-free growth.
- Financial aid friendly.
- Use at approved schools anywhere in the United States or abroad.

Please visit the Path2College website at [https://www.path2college529.com](https://www.path2college529.com) for more information.

This is a great opportunity to save for your dependent’s education or further your degree!
Rockdale County Public School partners with Lincoln Financial and Cannon Financial Strategists to provide supplemental Retirement options such as Voluntary 403(b), 457(b), and Roth plans.

Please access the Lincoln site through the Bswift enrollment portal to ensure all your beneficiary information is up to date and accurate. You may make changes to your alternate retirement plan by contacting one of our designated financial strategists or by accessing the Lincoln website at any time of the year.
Frequently Asked Questions (FAQs)

Open Enrollment Dates
Opens - October 18, 2021 (12:00 AM)
Closes - November 5, 2021 (11:59 PM)

Q: Will there be any presentations I can attend to learn more about enrolling in benefits?
A: Yes. Virtual Open Enrollment Presentations are being offered through Microsoft Teams and will be held on the following dates/times. You are required to register to attend. Registration links for these sessions are listed on page 2 of this booklet.

<table>
<thead>
<tr>
<th>Thursday, October 21, 2021</th>
<th>Tuesday, October 26, 2021</th>
<th>Monday, November 1, 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>4:00 PM – 5:00 PM</td>
<td>4:00 PM – 5:00 PM</td>
<td>4:00 PM – 5:00 PM</td>
</tr>
</tbody>
</table>

Wednesday, November 3, 2021
4:00 PM – 5:00 PM

Fifth presentation TBD

Q: Which websites do I have to visit to enroll in benefits?
A: Visit the SHBP website to enroll or change your medical benefits.
https://myshbpga.adp.com/shbp/
You must visit the Bswift site to enroll or change your Rockdale Sponsored benefits.
https://secure.bswift.com

Q: If I want to keep my same plan, is there anything I need to do?
A: If you are not making any changes to your medical plan or your RCPS benefits, there is no need to log into either site. Flexible Spending is the only exception. You MUST log in each year to the Bswift site to enroll in Flexible Spending. We also encourage you to declare/update your beneficiary information.

Q: What if I do not login to SHBP?
A: If you do not login, you will remain in the 2021 benefit plan you enrolled in for the 2022 Benefit Plan Year.

Q: What if I do not login to the Bswift site?
A: If you do not login, you will remain in the 2021 benefit plan you enrolled in for the 2022 Benefit Plan Year. Note: Even if you are not making any changes to your RCPS Sponsored benefits, we encourage you to access the site and declare your beneficiaries.

Q: What if I am unable to enroll online?
A: If you are unable to make elections online or need Technical Assistance, please call SHBP Member Services prior to the last day of Open Enrollment. Contact information is listed on page 2.
Q: What is my username and Password for State Health?
A: You must register for a username and Password with State Health even if you have a login. Wait to do this on the first day of Open Enrollment. The code for state health is SHBP-GA. Visit https://myshbpga.adp.com/shbp/.

Q: Can I just send SHBP or RCPS Benefits Department my enrollment changes via email?
A: No. You must login to the SHBP site and the Bswift site to select, add, or change your enrollment selections.

Q: What if I keep changing my elections throughout the OE period? Which election will I have for the 2021 plan year?
A: Your last confirmed election will be your election for the 2022 plan year.

Q: How do I sign up for my Rockdale Benefits?
A: To access the RCPS benefits website: Go online to https://secure.bswift.com

Q: I need help choosing my plan. What should I do?
A: Access the SHBP Decision Guide for plan comparisons attached to all Open Enrollment emails.

### Qualifying Events

<table>
<thead>
<tr>
<th>Qualifying Events</th>
<th>Eligible Dependents</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Birth, adoption of a child, or legal guardianship of a child</td>
<td>• Spouse • Dependent Child (natural child, adopted child, stepchild, legal guardianship of child)</td>
</tr>
<tr>
<td>• Death of a currently enrolled spouse or enrolled child • Your spouse’s or eligible dependent’s loss of eligibility for other group health coverage • Marriage or divorce • Medicare eligibility • Loss of Medicaid eligibility (excluding voluntary discontinuation of coverage/ non-compliance/ failure to make payment)</td>
<td></td>
</tr>
</tbody>
</table>

### Plan Contact Information

<table>
<thead>
<tr>
<th>State Health Benefits Plan (SHBP)</th>
<th>First day of Open Enrollment (10/19/20) register for a username and Password with State Health.</th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="https://myshbpga.adp.com/shbp/">https://myshbpga.adp.com/shbp/</a></td>
<td>• Click On: Register</td>
</tr>
<tr>
<td>SHBP Member Services: 800-610-1863</td>
<td>• Create Password: See the information below</td>
</tr>
<tr>
<td>Monday – Friday / 8:30 AM – 7:30 PM</td>
<td>• Code for State Health: SHBP-GA</td>
</tr>
<tr>
<td>Registration Code for the SHBP website is SHBP-GA</td>
<td>If you have not logged into the State Health portal within the last 12 months, you will need to select “Forgot Password.”</td>
</tr>
</tbody>
</table>

| Bswift (Rockdale Sponsored Benefits)                                             | Username: First initial + last name + employee ID Number                                 |
|----------------------------------------------------------------------------------| Password: Employee ID Number                                                         |
| https://secure.bswift.com                                                         | You can find your Employee ID Number on your paycheck or by logging into ESS under the personal Information Tab |
| **Dental, Vision, Flexible Spending, Life, Critical Illness, Disability**        |                                                                                      |

Print the confirmation page for SHBP and Bswift for your records.
Open Enrollment Contacts
Questions or Additional Information

- Benefits Help Email Address: benefitshelp@rockdale.k12.ga.us
- Kelly Coil, Benefits Manager: kcoil@rockdale.k12.ga.us

Please direct all general questions during Open Enrollment to the Benefits Help Email Address, and your questions will be answered in the order received.

The Rockdale County Public Schools Benefits Providers Information and Links are available on our Benefits Website. Visit www.rockdaleschools.org. Click on Employee Links, then Employee Benefits.

<table>
<thead>
<tr>
<th>VENDOR</th>
<th>PHONE NUMBER</th>
<th>WEBSITE INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anthem Blue Cross Blue Shield</td>
<td>1-855-641-4862</td>
<td><a href="https://www.anthem.com/">https://www.anthem.com/</a></td>
</tr>
<tr>
<td>United Healthcare</td>
<td>1-888-364-6352</td>
<td><a href="https://shbp.welcometouhc.com/">https://shbp.welcometouhc.com/</a></td>
</tr>
<tr>
<td>Kaiser Permanente</td>
<td>1-855-512-5997</td>
<td><a href="https://my.kp.org/shbp/">https://my.kp.org/shbp/</a></td>
</tr>
<tr>
<td>SHBP Be Well Sharecare</td>
<td>1-888-616-6411</td>
<td><a href="https://bewellshbp.com/">https://bewellshbp.com/</a></td>
</tr>
<tr>
<td>Pharmacy CVS Caremark</td>
<td>1-844-345-3241</td>
<td><a href="https://info.caremark.com/oe/shbp">https://info.caremark.com/oe/shbp</a></td>
</tr>
<tr>
<td>State Health Benefit Plan</td>
<td>1-800-610-1863</td>
<td><a href="https://myshbpga.adp.com/shbp/">https://myshbpga.adp.com/shbp/</a></td>
</tr>
<tr>
<td>Peach care for Kids</td>
<td>1-877-427-3224</td>
<td><a href="https://dch.georgia.gov/peachcare-kids">https://dch.georgia.gov/peachcare-kids</a></td>
</tr>
<tr>
<td>Social Security Administration</td>
<td>1-800-772-1213</td>
<td><a href="https://www.ssa.gov/">https://www.ssa.gov/</a></td>
</tr>
<tr>
<td>Centers for Medicare and Medicaid</td>
<td>1-800-633-4227</td>
<td><a href="https://www.medicare.gov/">https://www.medicare.gov/</a></td>
</tr>
</tbody>
</table>

RCPS Sponsored Supplemental Plans

<table>
<thead>
<tr>
<th>VENDOR</th>
<th>PHONE NUMBER</th>
<th>WEBSITE INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teachers Retirement System (TRS)</td>
<td>404-352-6500</td>
<td><a href="https://www.trsga.com">https://www.trsga.com</a></td>
</tr>
<tr>
<td></td>
<td>1-866-289-0614</td>
<td></td>
</tr>
<tr>
<td>BASIC Flex Spending Accounts</td>
<td>1-800-523-7542</td>
<td><a href="https://www.basiconline.com/">https://www.basiconline.com/</a></td>
</tr>
<tr>
<td>Mutual of Omaha Employee Assistance Program (EAP)</td>
<td>1-800-316-2796</td>
<td><a href="https://www.mutualofomaha.com/">https://www.mutualofomaha.com/</a></td>
</tr>
<tr>
<td>Lincoln Alliance 403(b), 457(b) and Roth IRA</td>
<td>706-548-4526</td>
<td><a href="https://www.lfg.com/public/individual">https://www.lfg.com/public/individual</a></td>
</tr>
</tbody>
</table>