



**COLQUITT COUNTY
SCHOOL DISTRICT**
— ESTD. 1873 —

2027

**benefits
service center**

EMPLOYEE BENEFITS ENROLLMENT GUIDE

Benefits for the 2027 Plan Year

For information and to complete your enrollment,
access www.colquittcountyschoolsbenefits.com
or call the Colquitt County Schools Benefits Service Center
at (844) 635-0709.



INTRODUCTION

This guide provides an overview of your Colquitt County Schools benefits, the enrollment process, and your benefits resources. We encourage you to review this guide before completing your elections.

Our extensive benefits package provides financial protection and peace of mind for you and your family. Colquitt County Schools provides a significant financial contribution towards your State Health Benefit Plan (SHBP) premiums. The district also provides basic life insurance coverage as well as an Employee Assistance Program (EAP) including counseling and other tools and resources at no cost. For the plans for which you have a contribution, your contribution will be payroll deducted.

Your benefit elections are valid for the entire plan year unless you have a qualifying life event, such as marriage, divorce, birth of a child, etc. (supporting documentation required).

Benefits Service Center

Colquitt County Schools is pleased to partner with the Benefits Service Center as an extension of our Human Resources Department.

The Benefits Service Center manages all aspects of your voluntary (non-medical) benefits plans, such as dental, vision, life insurance, disability, and more. The Benefits Service Center can help you with benefit questions, including general State Health Benefit Plan inquiries, claims issues, qualifying life events, ID Cards, and life insurance beneficiary updates.

We're here to support you all year long, even at times when the district is closed. For assistance, call (844) 635-0709 or email benefits@colquittcountyschoolsbenefits.com.

Service Center hours are 8am to 6pm Monday - Thursday and 8am to 5pm Friday.



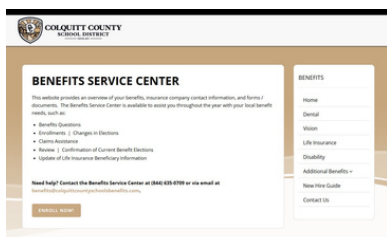

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Benefits Resources

Benefits Website

Access complete employee benefits information and plan documents on the benefits website at:
www.colquittcountyschoolsbenefits.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 by calling **(800) 610-1863**.

Benefits Service Center

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

Phone: (844) 635-0709

Email:
benefits@colquittcountyschoolsbenefits.com

How to Enroll

Voluntary Benefits

Enrollment Online

Step 1: Visit the benefits website at www.colquittcountyschoolsbenefits.com and click “Enroll Now”.

Step 2: If you have previously accessed the system, click on “Login” to begin. You will be prompted to enter the email address on file for you and your password. If you cannot remember your password, click on “Forgot your password?” to reset it.

If you have not yet created an account, click on “Click Here to Begin” then “Get Started Now.” You will be prompted to enter your email address, last four digits of your Social Security Number, and date of birth. The system will identify you by these credentials and allow you to create a password.

Step 3: Once you have created your password, 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 Colquitt County Schools Benefits Service Center at **(844) 635-0709** to complete your voluntary benefits enrollment.

Following your online or telephonic enrollment, you will receive a Confirmation Statement via email.

State Health Benefit Plan (SHBP) - ADP Portal Online or By Phone

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.

How to Reset Your SHBP ADP Password

- **Step 1:** Go to www.myshbpga.adp.com and click “Need help signing in?”.
- **Step 2:** Enter the requested demographic information.
- **Step 3:** Follow the instructions to verify your identity.
- **Step 4:** Reset password or access system using the security code.

Employee Eligibility

Colquitt County Schools employees are eligible for benefits on the first of the month following 30 days of employment, and have 30 days to enroll from the date of hire. No enrollment changes to your benefits are allowed during the plan year unless you experience a qualifying life event.

Open Enrollment information will be available in mid-October through early November of each year.

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.

Duplicate Coverage

Reminder: If you and your spouse are both district employees, duplicate coverage is prohibited. During your enrollment, please update your dependent record if your spouse is also a district employee.



State Health Benefit Plan (SHBP) Options



Colquitt County School District participates in the State Health Benefit Plan. Refer to the 2027 Active Member Decision Guide for complete details at <https://colquittcountyschoolsbenefits.com>.

SHBP Employer Contribution

The district funds **\$1,935 per month / \$23,220 per year** towards medical coverage for all eligible employees. This generous employer contribution helps you and your family access a high-quality health plan while keeping your employee costs competitive.

Locate In-Network Providers

Anthem

Visit <https://www.anthem.com/mcr/shbp>. Select "Care" then "Find Care." Follow search instructions.

UnitedHealthcare

Visit <https://www.whyuhc.com/shbp>. Select "Search for network providers" in the Health plans drop down and follow search instructions.



Health Reimbursement Account (HRA)

Gold, Silver, Bronze Options

- Offered by Anthem
- Most services subject to deductible and coinsurance
- No copays
- SHBP-funded HRA credits, available immediately, reduce your medical and pharmacy out-of-pocket costs
- Credits are used as you obtain services, with no action required
- You pay nothing until your HRA credits are used
- Unused credits roll over as long as you remain enrolled in SHBP

HMO Option

- Offered by Anthem and UnitedHealthcare (UHC)
- The only difference between the Anthem and UHC options is the provider network.
- Coverage for services from in-network providers only
- You are not required to select a Primary Care Physician, and referrals for specialist care are not required.
- Copays for services such as office visits, emergency room, urgent care, and prescription drugs
- Lowest deductible of all options

High Deductible Health Plan (HDHP) Option

- Offered by UHC
- In-network and out-of-network coverage
- Lowest payroll deduction cost
- Pay less through your paycheck, and pay more at the time you need medical services
- All services except preventive care subject to the deductible first, then coinsurance
- Optional Health Savings Account (HSA), allowing you to set aside money on a tax-advantaged basis for healthcare expenses

Why elect an HRA Plan?

- You're **comfortable without knowing your exact out-of-pocket cost** prior to receiving medical care
- You prefer to **choose the HRA option that works best for you**

Why elect an HMO Plan?

- **You like copays**, and you prefer to know your out-of-pocket cost for services such as office visits and prescription drugs prior to your appointment or purchase
- You prefer to **pay more through payroll deductions in exchange for lower costs at the time you need care**

Why elect the HDHP Plan?

- You prefer to **pay less through your paycheck and pay more at the time you need medical services**
- You value the ability to make **pre-tax contributions** to your HSA
- You understand that **all services are subject to deductible and coinsurance**

In-Network Benefits Summary



	Anthem			Anthem & UHC	UHC
	Gold HRA	Silver HRA	Bronze HRA	HMO	HDHP
Deductible (You Pay)					
You	\$1,500	\$2,000	\$2,500	\$1,300	\$3,500
You + Child(ren)/Spouse	\$2,250	\$3,000	\$3,750	\$1,950	\$7,000
You + Family	\$3,000	\$4,000	\$5,000	\$2,600	\$7,000
Coinsurance (Plan Pays)	85%	80%	75%	80%	70%
Out-of-Pocket Maximum (You Pay)					
You	\$4,000	\$5,000	\$6,000	\$4,000	\$6,450
You + Child(ren)/Spouse	\$6,000	\$7,500	\$9,000	\$6,500	\$12,900
You + Family	\$8,000	\$10,000	\$12,000	\$9,000	\$12,900
HRA Credits					
You	\$400	\$200	\$100	n/a	n/a
You + Child(ren)/Spouse	\$600	\$300	\$150		
You + Family	\$800	\$400	\$200		
Preventive Care	100%	100%	100%	100%	100%
PCP Visit & Urgent Care 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
Emergency Visit	Coins after ded	Coins after ded	Coins after ded	\$200 copay	Coins after ded
Outpatient Surgery (facility)	Coins after ded	Coins after ded	Coins after ded	Coins after ded	Coins after ded
Inpatient Hospitalization	Coins after ded	Coins after ded	Coins after ded	Coins after ded	Coins after ded
Outpatient Testing, Lab, X-Rays	Coins after ded	Coins after ded	Coins after ded	Coins after ded	Coins after ded
Telemedicine/Virtual Visit	Coins (no ded)	Coins (no ded)	Coins (no ded)	\$15 copay	Coins after ded
Routine Eye Exam (1/24 months)	100%	100%	100%	100%	100%
Maternity Care (non-routine, prenatal, delivery, postpartum)	Coins after ded	Coins after ded	Coins after ded	\$35 PCP or \$45 Specialist copay	Coins after ded

Monthly Premiums	Anthem HRA			Anthem	UHC	UHC
Coverage Level	Gold HRA	Silver HRA	Bronze HRA	HMO	HMO	HDHP
You	\$227.19	\$153.17	\$94.16	\$189.29	\$232.70	\$83.76
You + Child(ren)	\$415.51	\$289.67	\$189.35	\$351.08	\$424.87	\$171.67
You + Spouse	\$565.89	\$410.44	\$286.52	\$486.30	\$577.46	\$264.68
You + Family	\$754.21	\$546.94	\$381.71	\$648.09	\$769.63	\$352.59

About Your Employee Premiums and Deductions

- The total monthly employee premiums are noted above.
- Tobacco users are subject to a monthly tobacco surcharge in the amount of \$80.

Important Things to Know



Pharmacy Information

Express Scripts By EVERNORTH

- Express Scripts Pharmacy Benefit Services, part of Evernorth Health Services, administers the SHBP pharmacy benefits.
- Retail (up to 31 day supply), mail order (32-62 and 63+ day supply), and specialty pharmacy services are included. Eligible mail order medications have reduced out-of-pocket costs.
- Caremark has an extensive pharmacy network. Access the pharmacy locator at express-scripts.com/shbp.

Pharmacy Tier	Anthem			Anthem & UHC	UHC
	Gold HRA	Silver HRA	Bronze HRA	HMO	HDHP
Retail Tier 1	15% \$5 minimum / \$10 maximum			\$5 copay	Coins after deductible
Retail Tier 2	25% \$55 minimum / \$85 maximum			\$55 copay	Coins after deductible
Retail Tier 3	25% \$85 minimum / \$130 maximum			\$95 copay	Coins after deductible
Mail Order 63+ Days Tier 1	15% \$12.50 minimum / \$25 maximum			\$12.50 copay	Coins after deductible
Mail Order 63+ Days Tier 2	25%, \$137.50 minimum / \$212.50 maximum			\$137.50 copay	Coins after deductible
Mail Order 63+ Days Tier 3	25%, \$212.50 minimum / \$325 maximum			\$237.50 copay	Coins after deductible

Copay/Coinsurance Waiver for Disease Management Participation

- Certain **drug costs are waived if SHBP is primary and you enroll and actively participate in one of the Disease Management (DM) Programs for diabetes, asthma, coronary artery disease, or medication for addiction treatment.**
- Call Anthem at **(866) 901-0746** or UHC at **(888) 364-6352** for program information.

PeachCare for Kids

- 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 <https://dch.georgia.gov/peachcare-kids> for more information.
- This benefit is not available through payroll deduction.

Preventive Care

Approved preventive care services obtained from in-network providers are covered at 100% for all plan options.

9amHealth Weight Management Program

- This optional program is available for SHBP members age 18 or older to improve your health and help you achieve your weight loss goals.
- The program includes access to weight health experts through virtual appointments, prescription medications, lab tests, at-home devices, and nutrition and fitness coaching.
- 9amHealth providers include obesity medicine specialists, endocrinologists, pharmacists, dietitians, bariatric specialists, and more.
- To sign up, go to <https://join9am.com/shbp> or call/text: (888) 870-9542.



Newly Adding Dependent Spouse and/or Child(ren) to Your Coverage?

- If you are electing new coverage for a dependent spouse and/or child(ren), ADP will provide instructions for submitting the required documentation.
- Be sure to provide documentation in the format requested by the deadline provided by ADP.
- If you do not receive the documentation request, contact SHBP by phone at **(800) 610-1863**.
- Your dependents will not be covered unless documentation is received and approved by the deadline.**

TRICARE Supplement Plan for Military Members

- The TRICARE Supplement Plan is an alternative to SHBP for retired military.
- Contact (866) 637-9911 or <https://shbp.georgia.gov/plan-options-programs/tricare> for information.

Wellness Program



Sharecare, your wellness program vendor, provides a comprehensive well-being and incentive program for SHBP members. As you complete wellness activities, you earn **incentive points to help you pay for your medical and pharmacy expenses**.

1 point = 1 dollar



**when redeemed
for medical and
pharmacy expenses**

**Complete activities and
submit documentation
by November 30**

2027 Well-Being Incentives				
Plan Option	Anthem HRA	Anthem HMO	UnitedHealthcare HMO	UnitedHealthcare HDHP *
	Up to	Up to	Up to	Up to
Member	480	480	480	480
Covered Spouse	480	480	480	480
UHC Reward Card	n/a	n/a	\$250 for Employee \$250 for Spouse	\$250 for Employee \$250 for Spouse
Potential Total	960	960	1,460	1,460

* HDHP members must meet a portion of the deductible before well-being points may be used.

How to Earn Well-Being Incentive Points	
If You Complete...	You Will Earn...
The RealAge Test Complete a confidential, online questionnaire	120 points
A Biometric Screening Complete your screening through your physician, at an SHBP-sponsored event, or at a Quest Diagnostics Patient Service Center (PSC)	120 points
Preventive Screening Exams Complete a preventive screening exam (colonoscopy, mammogram, pap smear, or prostate screening)	60 points for each exam, up to two times - Screenings should be completed by August 31, 2027 - For screenings completed in September through November, members can self-attest by November 30, 2027.
January 1 - May 31 Coaching Challenges	Coaching: 40 points each, 1 call/month Challenges: 30 points each 120 points maximum
June 1 - November 30 Coaching Challenges	Coaching: 40 points each, 1 call/month Challenges: 30 points each 120 points maximum

All unused well-being incentive credits earned in the current plan year will roll over to the new plan option you choose during Open Enrollment. These points will be deposited in April of the following plan year. If you remain in the same plan option for next year, the credits will be available immediately.

Access
<https://bewellshbp.com>
for complete details.

Download the
Sharecare app today
to complete activities and
earn incentive points.

Sharecare Redemption Center

You and your covered spouse may choose to redeem your incentive credits in the **Sharecare Redemption Center** for either 1) a \$150 Visa Prepaid Card (when redeeming 480 points) or 2) 480 credits towards medical and pharmacy expenses.

Dental Plans



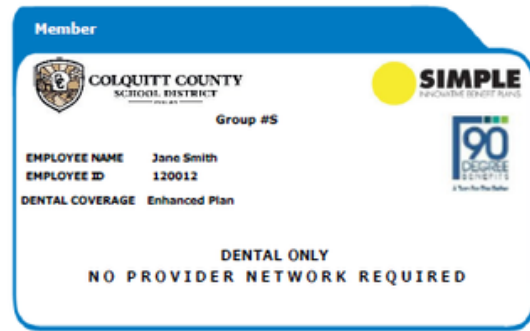
- Colquitt County Schools offers two Simple Dental plan options, administered by 90 Degree Benefits. The Simple Dental plan is self-insured, which allows the district greater control over the cost and benefit design. This provides a long-term opportunity to reduce expenses while enhancing the benefits package for employees.

The Simple Dental Basic and Enhanced plan options are very easy to use and understand. Key features of the new dental plan options are:

- You may visit any dentist without worrying about a network.
- All dental procedures are covered except for cosmetic procedures (e.g., whitening services and veneers) and services related to workers' compensation injuries.
- Orthodontia is excluded on the Basic Plan.
- There are no frequency limits for your services, with the exception of preventive and diagnostic services.
- Preventive and diagnostic services, subject to usual and customary charges, are covered at 100% and do not count towards the Annual Maximum Benefit.
- There are no deductibles with the new Simple Dental plan options.
- The Simple Dental plans pay up to the usual and customary charge (the 90th percentile of dental fees in your area). If a dentist charges more, you may owe the difference.

Dental Plan ID Cards

New dental plan members will receive new Simple ID Card(s) at your home address following enrollment. Although an ID Card is not required to obtain dental plan services, please present your new card when visiting your dentist.



Benefit Summary		
Coverage	Basic Plan	Enhanced Plan
Preventive & Diagnostic Services	100% Does not count towards the Annual Maximum Benefit	100% Does not count towards the Annual Maximum Benefit
Plan Pays	50% of services up to the Annual Maximum Benefit	50% of services up to the Annual Maximum Benefit
Deductible	None	None
Annual Maximum Benefit	\$750	\$1,250
Orthodontia Benefit children < age 26	Not covered	\$1,250 lifetime benefit <i>separate from annual maximum</i>



Monthly Premiums		
Coverage Level	Basic Plan	Enhanced Plan
Employee Only	\$32.44	\$38.72
Employee + Spouse	\$58.34	\$70.90
Employee + Child(ren)	\$76.04	\$100.74
Family	\$101.94	\$132.92

How the Claim Process Works

Most dentists will file your claims with 90 Degree Benefits, your dental plan administrator. If yours doesn't, you can send the claim to 90 Degree Benefits yourself for processing.

Vision



With the MetLife vision plan, you may visit any vision provider. However, to maximize your vision benefit, visit participating providers. Access the MetLife website at www.metlife.com and click “Find a Vision Provider” under Support from the homepage. Be sure to select the **VSP Choice Network**. Services obtained at participating MetLife vision providers have a 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.

The MetLife vision plan provides coverage for exams, frames, and lenses. Either the eyeglass benefit or the contact lens benefit may be used per frequency. If you visit an in-network provider, you pay a copay for your eye exam and lenses, and the plan pays a benefit of up to \$200 for frames and contact lenses. Additional copays apply for eyeglass lens options.

Frequency Limitations: The vision plan includes frequency limitations. The exam benefit, lens benefit, and frame benefit are once every 12 months. Either eyeglass lenses or contact lenses are allowed every 12 months.

Vision Summary of Benefits	In-Network
Eye Exam	\$10 copay
Retinal Imaging	Up to \$39 copay
Lenses (Single, Bifocal, Trifocal, Lenticular)	Covered in full after \$25 copay
Contacts	
Fit and Follow-up	\$25 copay
Elective Lenses	\$200 allowance
Medically Necessary	Covered in full after \$25 copay
Frames	\$200 allowance

Vision Monthly Premiums	
Coverage	Premium
Employee Only	\$9.73
Employee + Spouse	\$16.16
Employee + Child(ren)	\$16.48
Family	\$26.05



FLEXIBLE SPENDING ACCOUNTS (FSA)



Flexible Spending Accounts (FSA)

There are two types of Flexible Spending Accounts (FSAs) available: **1) Healthcare FSA** for medical, dental, vision, pharmacy, and other related expenses and **2) Dependent Care FSA** for dependent day care expenses. Medcom is the administrator for the FSA plans. An FSA allows you to pay for eligible expenses using 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 can contribute up to the current IRS maximum at the time of enrollment into a Healthcare FSA each year. Married employees can each contribute up to the maximum. Eligible Healthcare FSA expenses include deductibles, copays, coinsurance, prescription drugs, over-the-counter drugs and supplies (no prescription required), dental, and vision expenses.

Dependent Care Flexible Spending Account

The Dependent Care FSA enables you to pay for certain dependent care expenses using before-tax dollars. You can contribute up to the current IRS maximum at the time of enrollment in a Dependent Care FSA each year. Eligible dependent care expenses include, but are not limited to, day care and before-school and after-school care for children under age 13 and certain adult day care expenses for incapacitated adult dependents.

Child Day Care:

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

Adult Day Care for:

- Disabled children age 13+
- Spouses physically or mentally unable to care for self
- 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

Use It or Lose It

Claims must be incurred by the last day of the plan year to be eligible for reimbursement. The IRS requires that any unused money in your account at the end of the plan year is retained by your employer and forfeited by the employee.

However, the IRS allows **Healthcare FSA** plan members to roll over a specified amount of unused funds to the following year. The rollover 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.

FSA Plan Year

The FSA plan year is January 1 through December 31.

Monthly FSA Administrative Fee

FSA plan participants pay a **\$3.50** monthly post-tax administrative fee via payroll deduction. Only one fee applies if you are enrolled in both the Healthcare FSA and the Dependent Care FSA.

FSA Debit Card

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.



Life Insurance



Your Colquitt County Schools life insurance plan is insured by Prudential.

Employer-Paid Basic Life & Accidental Death & Dismemberment (AD&D) Insurance

Colquitt County Schools provides all eligible employees a \$10,000 life insurance and 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.

Employee Term Life and AD&D Insurance (employee-paid option)

You may elect life and AD&D insurance in the amount of \$10,000 to \$40,000 in \$10,000 increments to supplement the employer-paid benefit. The monthly cost, regardless of your age, is as follows:

Benefit Amount	Monthly Premiums
\$10,000	\$2.20
\$20,000	\$4.40
\$30,000	\$6.60
\$40,000	\$8.80

Spouse Term Life Insurance (employee-paid option)

You may elect a \$10,000 life insurance benefit for your spouse, regardless of your spouse's age. The cost for this coverage is \$1.49 per month.

Child Term Life Insurance (employee-paid option)

You may elect coverage for your children up to age 26 (or for disabled children with no limiting age) in the amount of \$15,000 per child. The monthly cost for child life coverage is \$0.39, and this deduction covers all of your children.

Important Enrollment Information

- During your enrollment, you will be required to review your life insurance beneficiary. The beneficiary is the person you designate to receive your life insurance benefits upon your passing.
- Medical Underwriting: All new employees may elect coverage up to the maximum coverage amount with no health questions. Most new elections and increases after initial new hire eligibility require health questions. Any pending elections that require medical underwriting will be noted on your Benefits Confirmation Statement.



Life Insurance



Employee & Spouse Voluntary Life Insurance (employee-paid option)

In addition to the previously described employee-paid options, you may elect the below term life insurance coverage for yourself and your spouse. For these options, your monthly premium is based on your age.

	Employee	Spouse
Benefit Amount	\$10,000 increments up to the lesser of 5 times your earnings or \$500,000	\$10,000 increments to a maximum of \$200,000

Per \$1,000 of Coverage Rates	
Age	Rate
Under 30	\$.035
30-34	\$.037
35-39	\$.075
40-44	\$.115
45-49	\$.180
50-54	\$.290
55-59	\$.470
60-64	\$.630
65-69	\$1.010
70-74	\$1.820
75+	\$3.220

Sample Monthly Premiums

Employee and Spouse Voluntary Life Monthly Premiums				
Age	\$50,000	\$100,000	\$150,000	\$250,000
25	\$1.75	\$3.50	\$5.25	\$8.75
35	\$3.75	\$7.50	\$11.25	\$18.75
45	\$9.00	\$18.00	\$27.00	\$45.00
55	\$23.50	\$47.00	\$70.50	\$117.50
65	\$50.50	\$101.00	\$151.50	\$252.50

Age-Banded Voluntary Life Insurance Rates

- Your age is calculated as of January 1 for purposes of life insurance premiums.
- Spouse rates are based on your spouse's age.

Important Enrollment Information

- During your enrollment, you will be required to review your life insurance beneficiary. The beneficiary is the person you designate to receive your life insurance benefits upon your passing.
- New employees may elect up to the Guarantee Issue amounts with no medical questions. The Guarantee Issue amounts are \$300,000 for employee coverage and \$50,000 in coverage for your spouse.
- Child Life Insurance Medical Underwriting: Employees may elect new child life coverage with no health questions.
- Most voluntary life insurance elections and increases after your initial new hire eligibility window require medical underwriting. An Evidence of Insurability (EOI) Form may be obtained from the benefits website or the Benefits Service Center. Any pending elections will be noted on your Benefits Confirmation Statement.

Benefit Reductions Due to Age

All life insurance benefits for employees and spouses reduce beginning at age 65. Life insurance reduces to 65% at age 65, to 50% at age 70, and to 30% at age 75.

Life Insurance Continuation of Coverage

In the event of termination of employment, you have the option to continue your life insurance coverage if certain conditions are met. Should you wish to apply for continuation of coverage, you must contact Prudential within 30 days of your date of separation.

Permanent Life Insurance with Long Term Care

CHUBB®

Chubb's Lifetime Benefit Term product provides 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 for the longer of 25 years or through age 70. After age 70, the death benefit will never be reduced to less than 50% of the original death benefit.

Paid-Up Death Benefit

After 10 years, paid-up benefits begin to accrue. 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.

Guaranteed Premiums

Life insurance premiums will never increase and are guaranteed through age 100. After age 100, no additional premium is due while the coverage can continue to age 121.

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 Lifetime Benefit Term 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 50 months.

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 Long Term Care benefits were based. This feature assures a death benefit is available for the insured at time of death.

How It Works

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

- Employee needs Long Term Care at age 57.
- Plan provides \$1,000 / month benefit for up to 50 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 benefit for up to 50 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.

* Once the full death benefit has been paid in advance of passing for Long Term Care, payments can be extended. Extension of Benefits may extend the same monthly Long Term Care benefit for up to an additional 25 months, doubling the value.



Permanent Life Insurance with Long Term Care

CHUBB®

Monthly Premium Example - \$25,000

Age 45 Non-Tobacco	Benefit
Approximate Monthly Premium	\$30.67
Death Benefit at age 45	\$25,000
Death Benefit at age 70	\$25,000
Long Term Care Benefit	\$1,000 per month for up to 50 months

Eligibility

- Employees up to age 80 eligible to enroll
- Spouses age 19 through 70 eligible to enroll
- Children 15 days through age 25 eligible to enroll

Enrollment

Enrollment is subject to health questions. Following enrollment, Chubb will contact you to confirm any necessary health information and review your election.



Disability Insurance



Disability coverage provides an income replacement benefit in the event you are unable to work due to a non-work-related illness or accident. The ability to work is usually an employee's most important financial asset. The Social Security Administration estimates that just over 1 in 4 of today's 20-year-olds will become disabled before reaching age 67. Once an individual has become disabled for over 90 days, the average length of disability is 4 years.

The Prudential Short Term Disability and Long Term Disability plans provide income while you are unable to work. Keep in mind your premiums are based on your annual earnings and benefit amount.

Sick Leave

Sick leave is accumulated at the rate of 1.25 days per month, and employees may accumulate up to 60 days of sick leave.

Short and Long Term Disability

Short Term Disability coverage provides an income replacement for a relatively short time period. You may elect to use your sick leave benefits in addition to the Short Term Disability benefits if desired.

Long Term Disability coverage provides a benefit up to Social Security Normal Retirement Age should your disability continue beyond the Short Term Disability period and if you continue to satisfy the definition of disability.

Disability Summary of Benefits		
	Short Term Disability	Long Term Disability
Benefit Amount	66 2/3% of weekly earnings	66 2/3% of monthly earnings
Maximum Benefit	\$500 per week	\$7,000 per month
Benefit Start Date	Day 1 for accident Day 8 for illness	90 days
Benefit Duration	13 weeks	To Social Security Normal Retirement Age (SSNRA). SSNRA is age 67 for employees born in 1960 or later. For employees born prior to 1960, the benefit duration is up to 21 months. Refer to the Certificate for complete details.

Sample Disability Monthly Premiums

Earnings	Weekly STD Benefit Amount Monthly LTD Benefit Amount	Monthly Premium STD LTD
\$30,000	\$384.81 \$1,667	\$21.93 \$18.93
\$50,000	\$500 \$2,778	\$28.50 \$31.54
\$70,000	\$500 \$3,889	\$28.50 \$44.16

The Long Term Disability plan excludes disabilities caused by a pre-existing condition for the first 12 months of coverage. A pre-existing condition is one for which you have been diagnosed or treated within the prior 3 months before newly enrolling in the plan. Once you have been insured with Long Term Disability coverage for 12 months, no coverage restrictions related to pre-existing conditions apply.

Important Disability Enrollment Information & Health Questions

New employees may elect Short Term Disability and/or Long Term Disability coverage with no health questions. If you are electing coverage after your initial eligibility date, an Evidence of Insurability (EOI) for medical underwriting is required. An EOI Form may be obtained from the benefits website or the Benefits Service Center. Any pended elections will be noted on your Benefits Confirmation Statement.

Critical Illness



Colquitt County Schools offers voluntary Critical Illness coverage, which provides a lump sum benefit in the event of a diagnosis of a covered illness. The plan is insured by Prudential, and you may elect coverage for yourself, your spouse, and your child(ren) with no health questions.

Covered Diagnoses and Conditions

- Cancer (see certificate definition)
- Heart attack
- Stroke
- Major organ transplant
- Coronary artery bypass surgery
- End stage renal failure
- And more

Benefit Options

Employees: From \$5,000 to \$30,000 in increments of \$5,000

Spouses: 50% of the employee amount

- Employees must be enrolled to elect spouse coverage.

Children: 50% of employee coverage for all children

- Employees must be enrolled to elect child coverage.

You may elect up to the maximum amount of coverage for yourself and your spouse with no health questions.

Sample Monthly Premiums

Employee \$10,000 Spouse and Child(ren) \$5,000 Monthly Premiums				
Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
25	\$4.75	\$7.61	\$6.72	\$9.58
35	\$6.74	\$10.25	\$8.71	\$12.22
45	\$11.76	\$17.21	\$13.73	\$19.18
55	\$21.29	\$31.97	\$23.25	\$33.94
65	\$39.71	\$60.78	\$41.68	\$62.74

Wellness Benefit *

The voluntary Critical Illness plan includes a wellness benefit for covered preventive screenings including but not limited to:

- Annual physical exam, biometric screening, or stress test on bicycle or treadmill
- Blood test for triglycerides, CEA, bone marrow, CA 15-3 (breast cancer), fasting glucose, Hemoglobin A1C
- Chest x-ray, mammograms, breast ultrasound, sonogram, MRI
- Serum testing for cholesterol levels (HDL & LDL) or protein electrophoresis (myeloma)
- Routine dental or vision exam
- Electrocardiogram or ultrasound screening for abdominal aortic aneurysms
- Colonoscopy, prostate-specific antigen testing, or pap smear

Wellness Benefit *

Employee | Spouse | Child(ren): \$50
Maximum of once per year per insured

*The wellness benefit can be claimed on each plan in which you are enrolled. For example, if you are enrolled in both Critical Illness and Accident, you can claim the wellness benefits under both plans with the same annual preventive screening.

How to File a Claim

Step 1: Visit Prudential Benefits Online at www.prudential.com/mybenefits and log in or register to complete your form electronically.

Step 2: Select "My claims" from the left side menu and click on the option to "File a claim/Report an absence."

Step 3: Provide authorization for Prudential to obtain necessary medical information from your doctor, saving you time.

Accident



The Prudential Voluntary Accident Plan provides financial protection in the event of an unexpected accident. A summary of the benefits schedule is below. Please refer to the Summary of Benefits or certificate of coverage for complete details.

Schedule of Benefits	
Hospital Care Surgery Admission Confinement ICU Confinement Inpatient Rehab	Up to \$1,500 \$1,000 \$200 / day up to 365 days \$400 / day up to 30 days \$150 / day up to 15 days
Medical Treatment Benefits Initial and follow-up doctor visit ER Urgent care Surgery Outpatient Surgery Speech, Occupational, and Physical Therapy	\$75 \$150 \$75 From \$750 to \$1,500 \$300 \$35
Injury-Based Benefits Fractures Lacerations Concussions Dislocations Coma	From \$200 to \$8,000 From \$50 to \$400 \$250 From \$200 to \$8,000 \$7,500
Additional Benefits Organized Sports Activity Benefit Accidental Death & Dismemberment (AD&D) Wellness Benefit*	Additional 25% Up to \$75,000 \$50 per insured per year

Accident Monthly Premiums	
Coverage	Premium
Employee Only	\$5.40
Employee + Spouse	\$10.66
Employee + Child(ren)	\$12.86
Family	\$15.15

Wellness Benefit *

The Accident plan includes a wellness benefit for covered preventive screenings.

- Employee, Spouse, and/or children: **\$50 once per member per year**

*The wellness benefit can be claimed on each plan in which you are enrolled. For example, if you are enrolled in both Critical Illness and Accident, you can claim the wellness benefits under both plans with the same annual preventive screening.

How to File a Claim

Step 1: Visit Prudential Benefits at www.prudential.com/mybenefits and log in or register to complete your form electronically.

Step 2: Select “My claims” from the left side menu and click on the option to “File a claim/Report an absence.”

Step 3: Provide authorization for Prudential to obtain necessary medical information from your doctor, saving you time.

Hospital Indemnity



The Prudential Hospital Indemnity plan includes a hospital confinement benefit plus daily benefits which are paid directly to you and may be used for any purpose. Please refer to the Summary of Benefits or certificate of coverage for complete details. This plan is portable at time of separation. Should you wish to continue this benefit upon separation, you may do so by remitting premiums directly to Prudential.

Schedule of Benefits	
Type	Benefit
Hospital Admission ICU Admission	\$1,000 \$2,000 up to 5x per calendar year
Daily Hospital Confinement Benefit	\$150 / day up to 30 days per confinement
Daily Intensive Care Confinement Benefit	\$300 / day up to 30 days per confinement

No Pre-Existing Conditions Restrictions

This plan does not include a pre-existing condition limitation. This includes pregnancy, which is covered with no restrictions.

Wellness Benefit Included *

The Hospital Indemnity plan includes a wellness benefit for covered preventive screenings including but not limited to:

- Annual physical exam, biometric screening, or stress test on bicycle or treadmill
- Blood test for triglycerides, CEA, bone marrow, CA 15-3 (breast cancer), fasting glucose, Hemoglobin A1C
- Chest x-ray, mammograms, breast ultrasound, sonogram, MRI
- Serum testing for cholesterol levels (HDL & LDL) or protein electrophoresis (myeloma)
- Routine dental or vision exam
- Electrocardiogram or ultrasound screening for abdominal aortic aneurysms
- Colonoscopy, prostate-specific antigen testing, or pap smear

Wellness Benefit Amount

- Employee, Spouse, and/or children: **\$50 once per member per year**

*The wellness benefit can be claimed on each plan in which you are enrolled. For example, if you are enrolled in both Hospital Indemnity and Accident, you can claim the wellness benefits under both plans with the same annual preventive screening.

How to File a Claim

Step 1: Visit the Prudential website at www.prudential.com/mybenefits and log in or register to complete your form electronically.

Step 2: Select “My claims” from the left side menu and click on the option to “File a claim/Report an absence.”

Step 3: Provide authorization for Prudential to obtain necessary medical information from your doctor, saving you time.

Hospital Indemnity Monthly Premiums	
Coverage	Premium
Employee Only	\$17.71
Employee + Spouse	\$33.01
Employee + Child(ren)	\$34.09
Family	\$49.39

Group Legal Plan



The ARAG legal plan helps cover the costs of legal expenses associated with a variety of needs, and includes in-office and telephonic advice with an attorney for personal legal issues. The plan covers 100% for an extensive listing of legal items when you visit a network participating attorney. If you go out-of-network, the plan pays a benefit according to a schedule.

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. Emergency service with an attorney is also available 24 hours a day / 7 days a week.

Legal Plan Monthly Premium

\$18.25

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

- Family law
- Estate planning and wills
- Real estate
- Tax matters
- Divorce
 - Contested: up to 30 hours
 - Uncontested: unlimited hours
- Financial issues
- Traffic offenses
- And more

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

We encourage you to evaluate your legal needs and consider this benefit.

Identity Theft



Colquitt County Schools offers Identity Theft Protection through Equifax ID Watchdog.

1 in 14 people become victims of identity fraud. Your identity includes more than your Social Security Number and bank accounts. The Identity Protection Plan does more than monitor your credit reports and scores. It safeguards your personal information and the data you share.

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 Equifax ID Watchdog protection plan has extensive protection for you and your family. Benefits include, but are not limited to:

- Tri-Bureau Credit Monitoring
- Rapid Credit Alerts
- Monthly Credit Score Tracking
- Credit Report Disputes and Freeze Assistance
- Social Network Alerts
- Registered Sex Offender Reporting
- 100% Fully Managed Resolution up to \$1M

Coverage Level	Monthly Premium
Employee Only	\$8.90
Family	\$15.90

Air Ambulance - AirMedCare Network

Colquitt County Schools offers a medical emergency air ambulance plan. Even with medical insurance, air medical transport can result in significant out-of-pocket expenses. This benefit eliminates your out-of-pocket expenses for medically necessary flights if flown by an AirMedCare Network provider. Please note this benefit is for emergency transport only.

AirMedCare Network is America's largest air medical membership network, providing financial coverage for emergency air medical transport. Air Evac Lifeteam, located in Tifton, is the closest provider in your area. The state of Georgia has several additional providers in the network; chances are favorable that you will be transported by an AirMedCare Network provider in the event you need emergency medical transport.

Membership Options

You pay the total cost indicated below over 2 payroll deductions, in the February and March payrolls. The benefit auto-renews each year unless you cancel.

Coverage Level	Total Cost	Two Premiums
1 Year	\$60	\$30 each (Feb and March payrolls)

Household and Nationwide Service Area

Membership covers not just yourself, but anyone who resides in your home. Plus membership is valid in all service areas, so you are covered at home and while traveling. The AirMedCare Network includes coverage in 38 states and over 320 locations in the U.S.

This program covers emergency air transportation only.

Paid Parental Leave

Paid Parental Leave

Paid Parental Leave is available for all eligible employees within a year of the birth, adoption, or placement of a minor through foster care, and provides **up to 240 hours** of paid parental leave.

This time is not charged against accrued leave and runs concurrently with any other federal leave, such as FMLA.

Maternal Birth Leave

All eligible employees who give birth can take an additional **120 hours** of paid Maternal Birth Leave.

The 120 hours of additional leave can only be taken by mothers immediately following the birth of their own child, and it is not charged against accrued leave. It also runs concurrently with any federal leave.

Eligibility

Employees must be eligible to be granted the leave(s).

- Full-time salaried employees: 6+ months of continuous employment
- Hourly employees: 700+ hours in the six months immediately preceding the first requested paid parental leave

Employee Assistance Program (EAP)

Employees have access to two Employee Assistance Programs (EAP) which offer free and confidential assessments, short-term counseling, referrals, and follow-up services for personal and/or work-related problems. EAPs address a broad and complex body of issues affecting mental and emotional well-being, such as alcohol and other substance abuse, stress, grief, family problems, and psychological disorders. The GuidanceResources EAP also provides resources for legal services, financial planning services, and other support services aimed at helping employees with work/life balance.

Employees are eligible to take part in one or both of the Employee Assistance Programs offered by Colquitt County Schools. This is a valuable benefit that is paid by the district at no cost to you.

Plan 1: Sterling Group Psychiatry	Plan 2: GuidanceResources
Employee + Household Members	Employee + Household Members
3 free face-to-face counseling sessions per person per year	3 free face-to-face counseling sessions per issue per person per year
Covered Issues	
Depression	Depression
Anxiety	Marital / Family Conflicts
Relationship Problems	Job Pressures
Parenting Concerns	Stress / Anxiety
Eating Disorders	Alcohol / Drugs
Abuse	Grief / Loss
Alcohol / Drugs	Legal (Free 30-Min Consult w/ 25% Discount)
Grief	Divorce / Family Law
ADHD	Debt Obligations / Bankruptcy
Behavioral Disorders	Criminal Actions / Civil Lawsuits
Emotional Issues	Financial, Including Retirement Planning, Saving for College/Estate Planning, Debt Management, and Tax Inquiries
Contact Information	
<u>Sterling Group</u> Phone: (229) 891-9443 Appointments Available Monday - Thursday 9:00AM - 5:00PM	<u>GuidanceResources</u> Phone: (800) 311-4327 Website: guidanceresources.com Web ID: GRE311 Available 24 hours a day / 7 days a week



Retirement

Teachers 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.

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 elect 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 SHBP website at <https://shbp.georgia.gov/>.

Third Party Administrator for Supplemental Retirement Plan

The 457(b) Deferred Compensation Plan is serviced by Corebridge Financial. As a reminder, the Board of Education matches your contribution at 100% up to 6% of your compensation for those enrolled in this plan. To increase or change your contribution from the default 3% or move from the 457(b) Plan to the 403(b) Plan, you may use the following methods:

- **Online:** Visit the Corebridge Financial website at <https://www.corebridgefinancial.com/rs>, and click on “Enroll.” Enter Group Access Code for the appropriate plan below (in the Login field) and click Continue.
 - 457(b) Plan
 - 457(b) pre-tax contribution - 07739001
 - 457(b) post-tax (Roth) - 07739101
 - 403(b) Plan
 - 403(b) pre-tax contribution - 07739002
 - 403(b) post-tax (Roth) - 07739102
- **By Phone:** Call the Enrollment Center at **(888) 569-7055** between 8:30 a.m. and 8:00 p.m. (ET). If you are a new employee, reference Group ID 07739002.



IMPORTANT CONTACT INFO

Medical

Anthem

Phone: (855) 641-4862

Website: www.anthem.com/shbp

UnitedHealthcare

Phone: (888) 364-6352

Website: www.whyuhc.com/shbp

Sharecare

Phone: (888) 616-6411

Website: www.bewellshbp.com

9amHealth

Phone: (888) 870-9542

Website: <https://join9am.com/shbp>

Express Scripts by Evernorth

Phone: (800) 809-8593

Website: express-scripts.com/shbp

SHBP Eligibility & Enrollment

Phone: (800) 610-1863

Websites: <http://dch.georgia.gov/shbp>
www.myshbpga.adp.com

TRICARE Supplement Plan

Phone: (866) 637-9911

Website: <https://shbp.georgia.gov/tricare-supplement-plan>

PeachCare for Kids

Phone: (877) 427-3224

Website: <https://dch.georgia.gov/peachcare-kids>

Dental

Simple Dental

Administered by 90 Degree Benefits

Phone: (855) 502-7223

Website: www.90degreebenefits.com

Vision

MetLife

Phone: (855) 638-3931

Website: www.metlife.com/vision

Flexible Spending Accounts

Medcom

Phone: (800) 523-7542

Website: www.medcombenefits.com

Email: medcomreceipts@medcombenefits.com

Term Life Insurance

Prudential

Phone: (800) 944-8786

Website: www.prudential.com

Permanent Life with Long Term Care

Chubb

Phone: (855) 241-9891

Email: claims@gotoservice.chubb.com

Short & Long Term Disability

Prudential

Phone: (800) 842-1718

Website: www.prudential.com

Critical Illness

Prudential

Phone: (844) 455-1002

Website: www.prudential.com

Accident

Prudential

Phone: (844) 455-1002

Website: www.prudential.com

Hospital Indemnity

Prudential

Phone: (844) 455-1002

Website: www.prudential.com

Group Legal

ARAG

Phone: (800) 247-4184

Website: www.araglegal.com

Identity Theft

Equifax ID Watchdog

Phone: (866) 513-1518

Website: www.idwatchdog.com

Employee Assistance Program

Sterling Group Psychiatry

Phone: (229) 891-9443

Appts: Monday - Thursday: 9AM - 5PM

GuidanceResources (24/7)

Phone: (800) 311-4327

Website: guidanceresources.com (ID: GRE311)

Air Ambulance

Global Medical Response

Phone: (800) 793-0010

Website: airmedcarenetwork.com

Email: membership@airmednetwork.com

Retirement Plans

Teachers Retirement (TRS)

Phone: (800) 352-0650

Website: www.trsga.com

PSERS

Phone: (800) 805-4609

Website: www.ers.ga.gov

Supplemental Retirement

Corebridge Financial

Phone: (888) 569-7055

Website: <https://www.corebridgefinancial.com/rs>

Colquitt County Schools Benefits Office

Penny Kebler

Phone: (229) 890-6219

Email: penny.kebler@colquitt.k12.ga.us

Colquitt County Schools Benefits Service Center

Phone: (844) 635-0709

Monday - Thursday 8am-6pm

Friday 8am-5pm

Email: benefits@colquittcountyschoolsbenefits.com





**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. All other plan documents can be found at www.colquittcountyschoolsbenefits.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.