

2022 Employee Benefits Open Enrollment Guide



medical|dental|vision|life|disability

For Plan Year

10/1/2022-09/30/2023

Open Enrollment

- ◆ Each year in August-Early September we hold open enrollment for TLC Anthem Medical plan which includes dental and vision. During open enrollment we also offer voluntary benefit products (accident, critical illness, cancer, short-term disability, whole life, flexible spending accounts, and **HSA Accounts**).
- ◆ New Hires have 30 days to elect benefits
- ◆ Medical FSA and Daycare accounts have to be re-elected each year. You can elect up to \$2850 this year.
- ◆ Open Enrollment is **August 1 to August 15th** this year so all changes need to be completed by this time.
This is the only time during the year that you can make changes to these insurance benefits unless you experience a qualifying event as outlined below.

Qualifying Events

- ◆ Your next opportunity to change your elections would be during next year's open enrollment, unless you experience a qualifying event such as marriage, loss of current coverage, change in spouse's eligibility, divorce, birth or adoption of a child, or death.
- ◆ If you have a qualifying event during the year, you have 30 days from the date of the event to report it by contacting the Human Resources Department. If you miss the 30-day deadline, you cannot make changes to your benefits until the next open enrollment period.



Welcome to Your 2022 Benefits Guide!

Greene County Public Schools Benefit Overview

Greene County Public Schools recognizes the importance of providing a competitive and comprehensive benefits package to our employees. We have developed a benefits package that delivers quality and value, while satisfying the diverse needs of our workforce. We want to ensure that you and your family members have appropriate resources to maintain overall health & wellness for today and into the future. This benefits guide is specifically designed to assist in understanding the highlights of the benefits available to you and your family offered by the School Division.

Our Division offers Anthem medical and vision benefits as well as Delta Dental benefits through The Local Choice (TLC). These plans are bundled together. Benefit information and plan overviews will be provided at the open enrollment meetings and can also be found on our school website under benefits. To receive the highest level of benefits, you must see an in-network provider. Prescriptions are covered under the medical plans. As always, please refer to the benefit summaries provided to you by TLC for full details. Note: Dependent children may be covered under health, dental, and vision through the end of the calendar year in which they turn age 26, regardless of student status.

Coverage	Carrier/Vendor	Phone #	Website
Medical	TLC/Anthem	800-552-2682	www.anthem.com/tlc
Dental	Delta Dental of Virginia	888-335-8296	www.deltadentalva.com
Health Savings Account(HSA)	Health Equity	866-346-5800	www.healthequity.com
Flexible SavingsAccounts (FSA)	Health Equity	1-866-346-5800	www.healthequity.com
Retirement	VRS	888-827-3847	www.varetire.org
Employee Assistance Program (EAP)	AnthemEAP	855-223-9277	www.anthemep.com
Voluntary Benefits	Michelle Lawson	434-760-2257	mLawson@bostbenefits.com
School Benefits Consultant	Darla Rose	434.327.1652	DRose@bankersinsurance.net

How to Enroll/Make Changes-Existing Employees

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- **If you are not making any changes you do not need to do anything, unless you have the Flexible Spending Accounts. Those have to be reelected every year. You can do so in employee navigator. You will also get an email from Michelle Lawson if you have this account.**
- **If you need to make a medical change, you must complete a TLC Enrollment form and give to Rhonda Houchens by 8/15. If you are keeping your Medical the same no new form is required.**
- **If you need assistance with the with voluntary benefits, contact Michelle Lawson at MLawson@bostbenefits.com.**

ENROLL



How to Enroll/Make Changes-New Hires

Benefits are enrolled as follows:.

- For medical benefits, you must complete a TLC Enrollment form and give to Rhonda Houchens by 8/15. This must be done even if you are waiving medical coverage.
- If you need assistance with the voluntary benefits, contact Michelle Lawson at MLawson@bostbenefits.com.
- Elections are only allowed as a new hire or if you have a qualifying event or at open enrollment each year.

ENROLL



Services	Option 1	Option 2	Option 3
PLANS	500 Key Advantage	1000 Key Advantage	High Deductible Health Plan
	Key Advantage PPO	PPO	PPO
Referrals Required?	No	No	No
Plan Year Deductible	\$500 Individual	\$1,000 Individual	\$2,800 Individual
(July through June)	\$1,000 Family	\$2,000 Family	\$5,600 Family
Maximum Out-of-Pocket	\$4,000 Individual	\$5,000 Individual	\$5,000 Individual
(Plan Year)	\$8,000 Family	\$10,000 Family	\$10,000 Family
Office Visits	\$25 PCP	\$25 PCP	20% coinsurance, after deductible
(for illness of injury)	\$40 Specialist	\$40 Specialist	
Wellness Services	Covered at 100%; No Charge	Covered at 100%, No Charge	Covered at 100%; No Charge
(Well Child & Adult Preventative Care)			
Inpatient Hospitalization	20% coinsurance, after deductible	20% coinsurance, after deductible	20% coinsurance, after deductible
Outpatient Hospitalization	20% coinsurance, after deductible	20% coinsurance, after deductible	20% coinsurance, after deductible
Emergency Room	20% coinsurance, after deductible	20% coinsurance, after deductible	20% coinsurance, after deductible
Pharmacy Prescription Drugs	Tier 1- \$10	Tier 1- \$10	20% coinsurance, after deductible
	Tier 2- \$30	Tier 2- \$30	
	Tier 3- \$45	Tier 3- \$45	
	Tier 4- \$55	Tier 4- \$55	
Mail Order Prescription Drugs	Tier 1- \$20	Tier 1- \$20	20% coinsurance, after deductible
	Tier 2- \$60	Tier 2- \$60	
	Tier 3- \$90	Tier 3- \$90	
	Tier 4- \$110	Tier 4- \$110	
Out-of-Network Benefits	Yes	Yes	Yes

If an employee elects the **High Deductible Health plan** and elects Employee Only the School District gives \$99.40 per pay for 12 pays to the employee in a Health Savings Account. This money belongs to the employee and if the employee leaves the H.S.A account goes with the employee. You can also contribute funds on a tax free basis yourself up to the IRS Limits which you will find on page 12 of the Benefits Guide.

If an employee has dependents to be covered, the contribution amount for the Health Savings Account is applied to the cost of adding one or more dependents to the coverage. The employee can then elect to make contributions to their Health Savings for themselves and their dependents.



Medical Rates 2022-2023

Health Rates include Dental and Vision Benefits

Vantage 500	With Comprehensive Dental	With Preventative Dental
Employee Only:	\$37.50	\$35.84
Employee +1:	\$375.00	\$365.84
Family:	\$615.00	\$599.42
<i>Vantage 500/\$25/\$40/20% then RX 10/20/45</i>		

Vantage 1000

Employee Only:	\$8.34	\$8.34
Employee +1:	\$320.84	\$312.50
Family:	\$584.00	\$568.14
<i>Vantage 1000/\$25/\$40/20% then RX 10/20/45</i>		

HDHP \$2800 Deductible/\$5600 Deductible

Employee Only:	\$8.34	\$8.34
Employee and Child:	\$229.17	\$222.50
Employee & Children:	\$481.10	\$465.46
Employee & Spouse:	\$229.17	\$222.50
Family:	\$481.10	\$465.46

Your Employer will deposit \$99.40 a month for 12 months into your account. This is only if you do employee only on the High Deductible Health plan and for employee only. In addition you are given the Hospital Supplement plan for employee only.

Stand Alone Dental – Guardian Life 12 month rates – Voluntary Benefits

****If Medical Coverage is waived****

EE only	EE & Spouse	EE & Children	Family
\$0	\$47.80	\$77.49	\$125.30

Employees Participating in Medical that includes Dental

**** Add on to what medical covers ****

\$52.11	\$99.91	\$129.60	\$177.41
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If you are electing the Medical Plan through Anthem it includes Dental insurance with Delta Dental, this stand alone option through Guardian is only for those who waived Medical or need coverage for a dependent who is not covered under the health insurance.

Vision Benefits-Blue View Vision Network

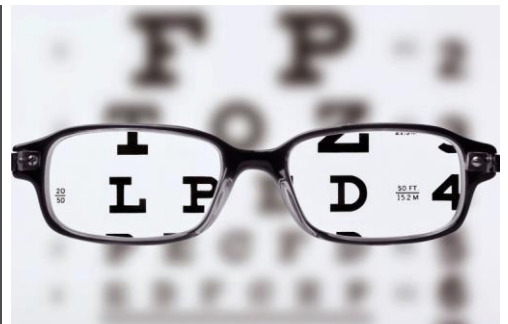
Routine Vision

Routine vision benefits are available through Blue View Vision (included with medical).

Type of Service	Paired with Key Advantage 500 and 1000	Paired with High Deductible Health Plan
Routine Eye Exam (once every 12 months)	\$40 copay	\$15 copay
Eyeglass Lenses (once every 12 months)	\$20 copay	\$20 copay
Eyeglass Frames (once every 12 months)	Up to \$100 retail allowance 20% discount above allowance	Up to \$100 retail allowance 20% discount above allowance
Contact Lenses (instead of eyeglasses) (once every 12 months)	Up to \$100 retail allowance	Up to \$100 retail allowance

*You may select a frame greater than the covered allowance and receive a 20% discount for any additional cost over the allowance.

Elective contact lenses are typically elected in lieu of eyeglass lenses. Non-Elective contact lenses are medically necessary contacts when glasses are not an option for vision correction, such as after cataract surgery.



Dental Benefits



As a subscriber with The Local Choice, your dental benefits are administered by Delta Dental of Virginia. With Delta Dental you have your choice of more than 6,900 dental locations throughout Virginia and more than 336,000 dental offices across the country. All dentists who have agreed to participate with Delta Dental will file your claims for you, will accept Delta Dental's allowances for services (in addition to any required coinsurance and deductible), and will abide by Delta Dental's guidelines for dental treatment. To find out more about your Delta Dental benefits plan with The Local Choice, please visit

www.deltadentalva.com/thelocalchoice.aspx



The Delta Dental Network

When you receive your dental care from a Delta Dental participating dentist, you will not be responsible for any charges that exceed Delta Dental's allowance for the covered services you receive. This means your out-of-pocket expenses will be limited to the amount of your coinsurance, deductible and any amounts that exceed your annual or lifetime maximums. Should you decide to receive dental care from a dentist who is not a member of the Delta Dental Network, you will still receive benefits from your dental plan, but your share of the cost will likely be higher than if you received care from a participating dentist. In addition, you may have to file any claims yourself.

Delta Dental Participating Dentists

- Participating dentists will file your claims to Delta Dental at no charge.
- Delta Dental will pay the dentist directly for covered benefits.

The dentist will accept Delta Dental's allowance for covered benefits. This means that you pay only the applicable co-insurance and deductible for these covered services.

Non-Participating Dentists

- You may be required to pay the non-participating dentist in advance for the entire bill, complete claim forms and submit to Delta Dental.
- Payment will be made directly to you unless your dentist agrees to accept payment from Delta Dental.

Non-participating dentists have not agreed to accept Delta Dental's allowance for their services. This means that, in addition to what Delta Dental pays, you must pay the applicable coinsurance and deductible and the difference between the non-participating dentist's charges and Delta Dental's payment for covered benefits.

Employee Assistance Program

Employee Assistance Program

All health plans offered to The Local Choice employees and their dependents have employee assistance programs (EAPs). Included are up to four sessions at no charge for such services as mental health, alcohol or drug abuse assessment, child or elder care, grief counseling and legal or financial services. In general, care must be authorized in advance. Contact your plan's Member Services department for more information. For the statewide plans, Anthem administers the EAP.

The Local Choice Key Advantage and HDHP Plans

- Anthem EAP

855-223-9277

www.anthemeap.com

Additional Voluntary Benefit Options

Greene County Public Schools offers additional benefits that employees may purchase through payroll deductions. The following chart lists these benefits, plan brochures on the School Divisions website under Voluntary Benefits.

Vendor	Product	Highlights
Minnesota Life	Life Insurance	<ul style="list-style-type: none"> • Attractive Group Rates • Coverage up to 4x your salary • Spouse & Children Eligible • Living, Double Indemnity, & • Dismemberment Benefits
Allstate	Accident Insurance	<ul style="list-style-type: none"> • Competitive Rates • Wellness Benefit • Physician Treatment • Benefits for Injuries
Allstate	Cancer Insurance	<ul style="list-style-type: none"> • Employee rates are the same regardless of age or tobacco usage • Age Lock • Wellness Benefit • Late Entry-Health Questions
Guardian	Critical Illness Insurance, Hospital Indemnity and Whole Life	<ul style="list-style-type: none"> • Benefits Pay Directly to employee • Age Lock • Wellness Benefits
Companion Life	Short-Term Disability Insurance	<ul style="list-style-type: none"> • No Health Questions • Income Protection • Maternity Benefits • Cash benefits paid directly to you
Standard	Long Term Disability Insurance	<ul style="list-style-type: none"> • Income Protection • Up to 60% of salary • Pre Existing conditions not covered the 1st year • Health questions apply for late entrants
Dental for those waiving Medical	Guardian	<ul style="list-style-type: none"> • If you waive Medical Insurance, you are given Guardian Dental Insurance for employee only. • Employees who want to cover a dependent who is not covered under the health plan can purchase this plan.
Arag	Legal Plan	Assists with Wills, Contracts, Legal Financial Questions and much more!

Health Savings Account (HSA)



*Paired with the High Deductible Health Plan

WHAT IS A HEALTH SAVINGS ACCOUNT (HSA)?

Health Savings Accounts (HSAs) are a great way to save money and efficiently pay for qualified medical, dental, vision, and pharmacy expenses. HSAs are tax-advantage savings accounts that accompany high deductible health plans (HDHPs). You can withdraw money tax-free to use for qualified medical expenses or grow the account and use it for qualified medical expenses in the future. Once you save it, it is yours to keep for qualifying health related expenses. And, unlike a Flexible Spending Account (FSA), HSA funds roll over and accumulate year after year if not spent, with the ability to earn tax-free interest on the account. HSA funds may be used to pay for qualified medical, dental, vision, and pharmacy expenses at any time without federal tax liability. **To be eligible for the HSA you must be enrolled in the High Deductible Health Insurance Plan.**

HSA FREQUENTLY ASKED QUESTIONS:

WHO WILL BE ADMINISTERING MY HEALTH SAVINGS ACCOUNT (HSA)?

Your Health Savings Account will be administered by Health Equity.

WHAT ARE THE BENEFITS OF A HEALTH SAVINGS ACCOUNT (HSA)?

An HSA provides for triple tax advantage—You make pre-tax deposits through payroll deduction, any earnings on the deposits are tax-free and, as long as the funds are used for qualified expenses, the withdrawals are tax-free.

WHAT MEDICAL EXPENSES ARE ALLOWED USING AN HSA?

In general, you can use the funds from an HSA on all qualified medical, dental, vision, and pharmacy expenses. You can also reimburse yourself for qualified expenses paid with post-tax dollars.

CAN FUNDS FROM AN HSA BE USED FOR NON-MEDICAL EXPENSES?

Yes, funds can be used for non-medical expenses, but the withdrawn funds are subject to all applicable income taxes and penalties.

IF I CHANGE JOBS OR HEALTH PLANS, CAN MY HSA BE MOVED TO ANOTHER ACCOUNT?

Yes, an HSA is owned by the individual, so if you change jobs or health plans, you may elect to keep your HSA or roll the funds into an HSA at another qualified institution.

HOW IS MY HSA FUNDED?

An HSA can be funded using pre-tax payroll deductions through your employer or by making contributions directly to your HSA. Contributions are funded on a per payroll basis.

HOW MUCH CAN I CONTRIBUTE TO AN HSA?

For 2022, the IRS maximum contribution for individual coverage is \$3,650 and \$7,300 for family coverage each calendar year. These are combined limits for the employee and employer contribution to the HSA. If you are 55 or older you can contribute an additional \$1,000 for catch-up purposes.

ACAC GYM Membership

The logo for acac, consisting of the lowercase letters 'acac' in a bold, sans-serif font.

Greene County Schools

Enjoy all the Benefits of a Gold Partnership at **acac!**

The Greene County schools corporate wellness partnership with acac allows our employee's access to discounted memberships and special programs. This partnership also allows employees to pay their monthly dues through payroll deductions making this benefit even easier to utilize. Employees interested in getting started are eligible for the special offer below.

- Pay Only \$60 For Your First 60 Days (\$1 a Day)
- \$0 Enrollment Fee
- \$30 Activation Fee (one-time only)
- Discounted Dues (10% off monthly dues for Individual, Couple, and Family)
- 3 FREE One Hour Personal Training Sessions (\$200 Value)
- Virtual Membership With Access to Live Streaming Classes
- Classes each week include: Body Step, Yoga, Tobata, HIT, Zumba, etc.
- Access to 5 acac locations including two 24/7 Clubs
- Outdoor Waterpark, Pool, Tennis Included With all Memberships
- Kids Zone included in Family Membership

For Questions or to schedule a tour, please contact
Terry Lynch at TerryL@acac.com or 434.987.9722

Flexible Spending Accounts (FSA)

The School Division offers employees the opportunity to participate in the Flexible Spending Plan administered by Health Equity. Flexible Spending Accounts (FSAs) allow you to set aside pre-tax dollars to pay for eligible health care or dependent care expenses not covered by insurance. The annual amount you elect to contribute to each account will be divided into equal amounts and deducted from your paycheck pre-tax. **Employees must re-enroll every year.** You may enroll or re-enroll by completing a FSA Enrollment Form available at the meetings or in the Human Resources Office.

HEALTH CARE FSA (NOT AVAILABLE TO THOSE ENROLLED IN THE HDHP)

You may elect an amount up to **\$2850 per plan year to** be used for medical, prescription drug, dental, and vision expenses for you and eligible dependents. Some eligible expenses include (but are not limited to) the following:

- ✓ Medical or Dental Deductibles and Coinsurance
- ✓ Office Visit and Prescription Drug Copays
- ✓ Orthodontic and Other Dental Work
- ✓ Eyeglasses and Contact Lenses
- ✓ Laser Eye Surgery
- ✓ Hearing Aids

DEPENDENT CARE FSA

You may elect an amount up to \$5,000 per plan year (\$2,500 maximum per year if married and filing a separate tax return) and can be used for child care for tax dependents under age 13, elder care, if they are a tax dependent, or care for a disabled child as long as expenses are incurred while you and your spouse work or attend school full time. Some eligible expenses include (but are not limited to) the following:

- ✓ Child Daycare
- ✓ Before and/or After School Care
- ✓ Adult Day Care
- ✓ Summer Day Camp
(overnight camps not covered)



Flexible Spending Accounts (FSA)

WHY SHOULD I PARTICIPATE?

By setting aside pre-tax dollars to pay for out-of-pocket expenses you would normally pay for using after-tax dollars, you are reducing your “taxable income” because it reduces the amount of federal, state, and FICA taxes you pay. This means more take-home pay for you!

HOW DOES AN FSA WORK?

Your contributions are taken pre-tax and divided equally among pay periods. Funds can be used for expenses incurred **from October 1, 2022 through September 30, 2023**, but all claims should be submitted to Health Equity as soon as possible to ensure reimbursement.

Additionally, the IRS imposes some rules and restrictions on FSAs. Unused funds left in the account(s) from the previous year that are not used to reimburse expenses incurred by the end of the plan year are subject to the use-it-or-lose-it rule and are forfeited.

HOW WILL REIMBURSEMENTS BE ISSUED?

Reimbursements will be mailed as a check to your home address or issued as a direct deposit. You may also use the Wageworks Credit Card at the point of purchase to access your FSA dollars.

CAN I CHANGE MY ELECTION DURING THE PLAN YEAR?

You may only change your annual election during the plan year if you experience a qualifying status change event. Qualifying status change events vary depending on the FSA you enrolled in. You must notify the Human Resources Department within 30 days of any status change event in order to change your election.



Resources

Employee Assistance Program (EAP) 1-855-223-9277

Your **EAP** includes up to **4 free, confidential counseling sessions per issue** for you, your covered dependents, and member of your household. It's also a valuable source for information about emotional well-being, childcare, and elder care resources, financial and legal issues, and more. Tap into all your **EAP** has to offer at [anthem.com/tlc](https://www.anthem.com/tlc). Choose the **EAP** link, enter **Commonwealth of Virginia** as your company, and select The LocalChoice.

LiveHealthOnline.com

Use your smartphone, tablet, or computer to see a board-certified doctor in minutes-anytime, day, or night. **LiveHealth Online** is a fast and easy way to get medical care for common medical conditions like the flu, colds, allergies, sinus infections, and more. The cost is the same as what you pay for a PCP visit. You can also see a therapist or psychologist through **LiveHealth Online Psychology**. In most cases, you can get an appointment for counseling within four days or less. And now you can use **LiveHealth Online EAP** to access your 4 free EAP counseling sessions. Contact Anthem EAP to learn more. Go to livehealthonline.com or download the app so you'll be ready whenever you need these **LiveHealth Online** services.

Future Moms 1-800-828-5891

Expecting? Enroll in **Future Moms** within the 1st trimester (14 weeks) for free pre- and post-natal support to help ensure a healthy pregnancy. It's there for you, your spouse or other covered dependents. Since no two pregnancies are alike, count on **Future Moms** for your first and subsequent pregnancies. Once your baby is born, take advantage of online visits with a certified lactation consultant, counselor, registered dietitian at no extra cost to you through **LiveHealth Online**! Sign up at livehealthonline.com or download the app, then sign up for **Future Moms with Breastfeeding Support**. Take advantage of personalized support to help you with breastfeeding techniques, learn about baby hunger cues, foods to avoid, and more.

24/7 Nurse Line & Audio Health Tape Library 1-800-337-4770

Sometimes you need health questions answered right away-even in the middle of the night. Call **24/7 NurseLine** to speak with a nurse. Or use the **Audio Health Tape Library** if you want to learn about a health topic on your own. Your call is always free and completely confidential.

Resources

ConditionCare 1-800-445-7922

Take advantage of free and confidential support to manage these conditions:

- Asthma
- Diabetes
- Chronic Obstructive Pulmonary Disease (COPD)
- Coronary Artery Disease (CAD)
- Heart Failure
- High Cholesterol
- Hypertension
- Metabolic Syndrome
- Obesity

You may receive a call from **ConditionCare** if your claims indicate you or an enrolled family member may be dealing with one or more of these conditions. While you're encouraged to enroll and take advantage of help from registered nurses and other health care professionals, you may also opt out of the program when they call.

MyHealth Advantage

You may receive a **MyHealth Note** in the mail. It's our way of reminding you about important medical screenings and other medical reminders. It also gives you a convenient summary of your recent medical claims, prescriptions, and money saving health care tips.

Quit for Life Tobacco Cessation 1-866-784-8454

This nationally acclaimed program is free, confidential, and it works! When you're ready to be tobacco free, you don't have to quit alone. Call or go to www.quitnow.net/commonwealth to get all the help you need.



Important Notices

Federal regulations require the School Division to provide benefit eligible employees with the following notices:

Private Health Information

A portion of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) addresses the protection of confidential health information. It applies to all health benefit plans. Confidential health information that identifies (or could be used to identify) you is kept completely confidential. This individually identifiable health information is known as “protected health information”(PHI), and it will not be used or disclosed without your written authorization, except as described in the Plan’s HIPAA Privacy Notice or as otherwise permitted by federal and state health information privacy laws. A copy of the Plan’s Notice of Privacy Practices that describes the Plan’s policies, practices, and your rights with respect to your PHI under HIPAA is available from your medical plan provider. For more information regarding this Notice, please contact Human Resources or the medical plan directly.

Women’s Health & Cancer Rights Act

The School Divisions medical plans as required by the Women’s Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services. These services include:

- All stages of reconstruction of the breast on which the mastectomy was performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Prostheses and treatment of physical complications resulting from mastectomy (including lymphedema)

This coverage will be provided in consultation with the attending physician and the patient and will be subject to the same annual deductibles and coinsurance provisions that apply to the mastectomy. For more information, contact your medical plan provider.

Summary of Benefits & Coverage(SBC)

Effective for plan renewals after January 1, 2012, the Patient Protection and Affordable Care Act requires employers that offer health coverage to provide a uniform Summary of Benefits and Coverage (SBC) to people who apply for and enroll in the health plan. This document contains the following:

- Overview of plan benefits, cost sharing and limitations
- Required set of examples of how the plan works
- Phone number and internet address for obtaining copies of plan documents
- A standard glossary of medical and insurance terms must also be available

The SBC will be updated each plan renewal to reflect applicable plan changes and may be found on the School Divisions website.

Additional Benefits

Banking:

As a Greene County Public Schools employee you will automatically be en-rolled in DirectDeposit.

Life Insurance: Eligible VRS employees receive two times their annual salary in life insurance as part of their benefits package.

Short and Long Term Disability Insurance HYBRIDS only:

HYBRIDS under VRS are given Short and Long Term Disability Insurance after 1 year of employment. Plan 1 and Plan 2 do not receive this benefit but can elect it through our Voluntary Benefits program.

