

Speak with your benefits counselor to enroll

2026 OPEN ENROLLMENT:
May 13- August 21, 2026



Don't miss this opportunity to make the most of your benefits package.

SCAN QR CODE

To apply for coverage,
SPEAK WITH YOUR BENEFITS COUNSELOR



Taylor Maciow
856-242-0293
taylor@colonialnj.com

Colonial Life®

CCESC is pleased to make the following benefits available to you to provide you and your family with the "extra" financial protection you need during life's challenging moments.

ALL EMPLOYEES ARE ELIGIBLE TO ENROLL.

You have the opportunity to apply for the following benefits:

- Disability insurance
- Life insurance
- Dental PPO insurance
- Accident insurance
- Cancer/Critical Illness insurance
- Hospital Confinement insurance
- Health Care & Dependent Care FSA

IMPORTANT BENEFIT INFORMATION:



NJ school districts **do not** participate in the State disability plan or provide district paid disability insurance. **YOU MUST PURCHASE THE INCOME PROTECTION YOU NEED BEFORE SOMETHING HAPPENS TO YOUR HEALTH.**

YOU MUST RE-ENROLL IN THE FSA BEFORE 8/21/2026.

COLONIAL LIFE POLICYHOLDERS:

Please update your policies annually with salary increases and changes to family status (marriage, divorce, birth, age of children)

Scan QR CODE to:
Watch 2-minute video





Camden County Educational Services Commission

Flex Facts Flexible Spending Accounts

Plan Year: September 1, 2026- August 31, 2027

ENROLL NOW

SAVE 20-40% on
eligible health, dental,
vision & dependent
care expenses!

**YOU MUST ENROLL BEFORE 8/21/26. NO LATE
ENTRANTS PERMITTED DUE TO IRS RULE.**

Maximum contributions

Health Care - **\$3,400**

Dependent Care- **\$7,500 (New higher maximum!)**

Your plan includes a carry over benefit which allows you to rollover
your unused healthcare FSA balance up to \$680 to the next plan year.

Here is how it works:

	Without FSAs	With FSAs
Annual pay	\$65,000	\$65,000
Contribution to FSAs	N/A	\$7,000
Taxable income (W-2 earnings)	\$65,000	\$58,000
Federal and state income taxes (25% bracket)	\$16,250	\$14,500
FICA (Social Security + Medicare)	\$4,972	\$4,437
Total taxes	\$21,223	\$18,937
After tax expenses	\$7,000	N/A
Net spendable income	\$36,777	\$39,063
Tax savings with FSAs	N/A	\$2,286
Increase in spendable income:	N/A	\$2,286

LEARN MORE

www.flexfacts.com

Increase your take
home pay by over
\$2,200!

IMPORTANT FSA REMINDER

THIS BENEFIT DOES NOT AUTOMATICALLY RE-ENROLL

YOU MUST SPEAK WITH YOUR BENEFIT COUNSELOR TO ENROLL IN THIS PLAN EVERY YEAR!

Please watch the FSA videos posted on the scheduling site or SCAN QR CODES
below to learn how this pre-tax plan can help you and your family save money.

Health
Care
FSA



Dependent
Care
FSA





Educator Disability insurance

Affordable income protection created exclusively for NJ school district employees.

**IMPORTANT BENEFIT INFORMATION:
NJ SCHOOL DISTRICT EMPLOYEES DO NOT
PARTICIPATE IN THE STATE DISABILITY PLAN**

Without disability insurance, how would you pay your expenses including the cost of your benefits?

PAYROLL CONTRIBUTIONS- 20 PAYROLL DEDUCTIONS

(Administrative, Clerical & Teaching Staff)

Available Monthly Benefits:
\$400 - \$5,000 (66 2/3% of income)

Annual Salary	Monthly Benefits		30 Day Wait	14 Day Wait
	First 6 Months	Next 6 Months		
\$23,400 - \$25,199	\$1,300	\$650	\$12.93	\$16.83
\$27,000 - \$28,799	\$1,500	\$750	\$14.49	\$18.99
\$32,400 - \$34,199	\$1,800	\$900	\$16.83	\$22.23
\$41,400 - \$43,199	\$2,300	\$1,150	\$20.73	\$27.63
\$45,000 - \$46,799	\$2,500	\$1,250	\$22.29	\$29.79
\$48,600 - \$50,399	\$2,700	\$1,350	\$23.85	\$31.95
\$50,400 - \$52,199	\$2,800	\$1,400	\$24.63	\$33.03
\$52,200 - \$53,999	\$2,900	\$1,450	\$25.41	\$34.11
\$54,000 - \$55,799	\$3,000	\$1,500	\$26.19	\$35.19
\$55,800 - \$57,599	\$3,100	\$1,550	\$26.97	\$36.27
\$57,600 - \$59,399	\$3,200	\$1,600	\$27.75	\$37.35
\$59,400 - \$61,199	\$3,300	\$1,650	\$28.53	\$38.43
\$62,000 - \$62,999	\$3,400	\$1,700	\$29.31	\$39.51
\$63,000 - \$64,799	\$3,500	\$1,750	\$30.09	\$40.59
\$64,800 - \$66,599	\$3,600	\$1,800	\$30.87	\$41.67
\$66,600 - \$68,399	\$3,700	\$1,850	\$31.65	\$42.75
\$68,400 - \$70,199	\$3,800	\$1,900	\$32.43	\$43.83
\$70,200 - \$71,999	\$3,900	\$1,950	\$33.21	\$44.91
\$72,000 - \$73,799	\$4,000	\$2,000	\$33.99	\$45.99
\$73,800 - \$75,599	\$4,100	\$2,050	\$34.77	\$47.07
\$75,600 - \$77,399	\$4,200	\$2,100	\$35.55	\$48.15
\$77,400 - \$79,199	\$4,300	\$2,150	\$36.33	\$49.23
\$79,200 - \$80,999	\$4,400	\$2,200	\$37.11	\$50.31
\$81,000 - \$82,799	\$4,500	\$2,250	\$37.89	\$51.39
\$82,800 - \$84,599	\$4,600	\$2,300	\$38.67	\$52.47
\$84,600 - \$86,399	\$4,700	\$2,350	\$39.45	\$53.55
\$86,400 - \$88,199	\$4,800	\$2,400	\$40.23	\$54.63
\$88,200 - \$89,999	\$4,900	\$2,450	\$41.01	\$55.71
Over \$90,000	\$5,000	\$2,500	\$41.79	\$56.79



ENROLL NOW

IN THE **MOST AFFORDABLE**
DISABILITY PLAN
AVAILABLE TO
NJ SCHOOL DISTRICT
EMPLOYEES

WHY COLONIAL LIFE?

- Premiums are not based on age and will never increase.
- Benefits are paid regardless of sick leave and work schedule.
- Portable coverage.
- Benefits can be paid even if you are not disabled for **Accident, Hospital & AD&D**.
- Lifetime **protection-converts to a \$6,000 monthly hospital benefit.**

SCAN IMAGE FOR
EDUCATOR BROCHURE





Understanding the Benefits of Supplemental Health Insurance

Colonial Life®

Protect Yourself from Unexpected Medical Costs with Colonial Life

It's no secret that unexpected accidents, illnesses, or serious medical conditions can be financially devastating. Fortunately, Colonial Life offers plans to help cover expenses not covered by your current benefits such as:

- **Deductibles & co-payments**
- **Missed time from work**



Don't let unexpected medical costs catch you off guard – the following plans with Colonial Life help can help you prepare for the unexpected.

- **Accident insurance**
- **Cancer insurance**
- **Critical Illness insurance**
- **Hospital Confinement insurance**



Health Screening Benefits

Included with the following plans in NJ:

- Cancer\$100
- Accident\$ 50
- Critical Illness\$ 50

*per covered person, per calendar year.



CANCER WELLNESS TESTS

- | | |
|--|--|
| • Bone marrow testing | • Hemoccult stool analysis |
| • Breast ultrasound | • Mammography ³ |
| • CA 15-3 (blood test for breast cancer) | • Pap smear |
| • CA 125 (blood test for ovarian cancer) | • PSA (blood test for prostate cancer) |
| • CEA (blood test for colon cancer) | • Serum protein electrophoresis (blood test for myeloma) |
| • Chest X-ray | • Skin biopsy |
| • Colonoscopy | • Thermography |
| • Flexible sigmoidoscopy | • ThinPrep® Pap test ⁴ |
| | • Virtual colonoscopy |

HEALTH SCREENING TESTS

- | | |
|--------------------------------|--|
| • Blood test for triglycerides | • Fasting blood glucose test |
| • Carotid Doppler | • Serum cholesterol test for HDL and LDL levels |
| • Echocardiogram (ECHO) | • Stress test on a bicycle or treadmill |
| • Electrocardiogram (EKG, ECG) | |



To encourage early detection, many of our supplemental health insurance plans offer benefits for health screening tests.



File online at:
www.coloniallife.com

Login and choose "file a claim".
No need to wait for a check.
You can choose to have a direct deposit as your payment method.



Supplemental health insurance
Premiums- 20 payroll deductions



PREMIUMS WILL NOT INCREASE ONCE COVERAGE IS ISSUED

SCAN ME

Individual Accident for NJ

- On/Off-Job benefits and \$50 Standard Wellbeing Assistance

PLAN	One Insured	Employee/Spouse	Employee/Child(ren)	Family
PREFERRED	\$11.60	\$19.57	\$23.59	\$31.55

Cancer Assist for NJ

- Level 2 with \$5,000 initial diagnosis benefit & \$100 health screening benefits

AGES	One Insured	Employee/Spouse	Employee/Child(ren)	Family
17-75	\$16.68	\$26.52	\$17.16	\$27.00

Individual Medical Bridge for NJ

- \$1,000 Admission benefit & \$50 daily benefit

Issue Age	Employee Only	Employee/Spouse	Employee/Child(ren)	Family
17-49	\$8.28	\$16.41	\$12.12	\$20.25
50-59	\$11.61	\$22.83	\$15.45	\$26.67
60-64	\$16.17	\$31.89	\$20.01	\$35.73
65-75	\$21.90	\$43.14	\$25.74	\$46.98

Expanding your family?

Add this plan to your Educator Disability insurance to provide benefits during the waiting period until your benefits begin.

A 3-day hospital stay = \$1,100 benefit!



\$5,000 Face Amount

NEW Group Critical Illness GCI 6000 Plan 1 for NJ

- \$50 Health Screening Benefit

NON-SMOKER				
Issue Age	Employee Only	Employee/Spouse	Employee/Child(ren)	Family
17-24	\$1.85	\$2.84	\$2.66	\$4.07
25-29	\$2.03	\$3.08	\$2.84	\$4.34
30-34	\$2.24	\$3.44	\$3.08	\$4.70
35-39	\$2.81	\$4.25	\$3.65	\$5.57
40-44	\$3.35	\$5.06	\$4.22	\$6.41
45-49	\$4.13	\$6.26	\$5.06	\$7.67
50-54	\$4.94	\$7.43	\$5.90	\$8.90
55-59	\$5.93	\$9.11	\$6.95	\$10.67
60-64	\$7.25	\$11.21	\$8.33	\$12.86
65-69	\$7.58	\$12.29	\$8.69	\$14.00
70-74	\$7.79	\$12.47	\$8.87	\$14.18

SMOKER				
Issue Age	Employee Only	Employee/Spouse	Employee/Child(ren)	Family
17-24	\$2.12	\$3.23	\$2.93	\$4.49
25-29	\$2.42	\$3.71	\$3.26	\$4.97
30-34	\$2.84	\$4.34	\$3.68	\$5.66
35-39	\$3.71	\$5.60	\$4.61	\$6.98
40-44	\$4.52	\$6.80	\$5.45	\$8.24
45-49	\$5.60	\$8.51	\$6.59	\$10.04
50-54	\$6.68	\$10.34	\$7.73	\$11.96
55-59	\$8.45	\$12.68	\$9.59	\$14.42
60-64	\$9.98	\$15.83	\$11.18	\$17.72
65-69	\$11.21	\$17.57	\$12.47	\$19.55
70-74	\$11.48	\$18.35	\$12.77	\$20.36

Choose a face amount from **\$5,000 – \$100,000** and upon diagnosis of any covered illnesses, the benefit is paid:

- Coma
- Heart attack (myocardial infarction)
- End-stage renal (kidney) failure
- Major organ failure
- Permanent paralysis
- Sudden cardiac arrest
- Stroke
- Loss of Hearing
- Loss of sight
- Benign Brain tumor
- Coronary artery disease
- TIA-25% of face amount



Term Life and Whole Life Insurance

Peace of mind for you and your loved ones



NJ SCHOOL DISTRICT EMPLOYEES LOSE A MAJORITY OF THEIR LIFE INSURANCE IMMEDIATELY UPON RETIREMENT

ENROLL NOW in affordable benefits you can keep at the same cost and benefit when you leave or retire!

Advantage of Whole Life insurance

Guaranteed issue coverage that includes:

- Guaranteed lifetime protection
- Guaranteed cash value accumulation
- Guaranteed premiums that will NEVER increase
- Coverage is available for your spouse/dependent children

Advantage of Term Life insurance

Plan includes:

- Premiums are locked in for 10, 15, 20 or 30 years
- Simplified underwriting available (no physical exams)
- Coverage is available for your spouse/dependent children

Optional Long Term Care Rider is available for both plans!



44% of Americans say their household would face financial hardship within six months should a wage earner die unexpectedly.

LIMRA, 2022 Life Insurance Barometer Study.

Benefits and features of Colonial Life policies:

- Spouse and dependent child coverage is available (with or without your participation)
- Keep your coverage at the same cost and benefit when you leave or retire
- Premiums are locked in and will not increase once your coverage is issued
- Coverage is available without blood work or exam

Individual Term Life (ITL5000)- NON-SMOKER PREMIUMS

Sample premiums (20 payroll deductions)

Rates are for illustrative purposes only.

TALK TO YOUR BENEFITS COUNSELOR FOR ADDITIONAL OPTIONS AND SMOKER PREMIUMS.

10 Year Term

ISSUE AGE	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000
25	\$3.98	\$6.36	\$6.13	\$7.99	\$9.85
30	\$4.24	\$6.99	\$6.13	\$7.99	\$9.85
35	\$4.54	\$7.76	\$6.75	\$8.92	\$11.10
40	\$4.79	\$8.38	\$8.42	\$11.44	\$14.45
45	\$5.50	\$10.15	\$11.17	\$15.56	\$19.95
50	\$7.03	\$13.97	\$15.35	\$21.82	\$28.30
55	\$9.70	\$20.66	\$21.82	\$31.54	\$41.25
60	\$14.02	\$31.43	\$32.38	\$47.36	\$62.35
65	\$20.92	\$27.20	\$52.00	\$76.80	\$101.60
70	\$33.23	\$45.67	\$88.94	\$132.22	\$175.49

15 Year Term

ISSUE AGE	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000
25	\$4.00	\$6.41	\$6.22	\$8.14	\$10.05
30	\$4.25	\$7.04	\$6.22	\$8.14	\$10.05
35	\$4.57	\$7.81	\$6.85	\$9.07	\$11.30
40	\$4.81	\$8.42	\$8.55	\$11.62	\$14.70
45	\$5.52	\$10.20	\$11.45	\$15.97	\$20.50
50	\$7.07	\$14.09	\$16.10	\$22.95	\$29.80
55	\$9.88	\$21.08	\$23.15	\$33.52	\$43.90
60	\$14.60	\$32.91	\$35.45	\$51.97	\$68.50
65	\$22.30	\$30.95	\$59.50	\$88.04	\$116.60
70	\$35.80	\$52.90	\$103.40	\$153.89	\$204.39

20 Year Term

ISSUE AGE	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000
25	\$4.03	\$6.46	\$6.32	\$8.29	\$10.25
30	\$4.27	\$7.09	\$6.32	\$8.29	\$10.25
35	\$4.61	\$7.94	\$6.95	\$9.22	\$11.50
40	\$4.94	\$8.75	\$9.25	\$12.67	\$16.10
45	\$5.81	\$10.93	\$13.07	\$18.41	\$23.75
50	\$7.60	\$15.41	\$18.95	\$27.22	\$35.50
55	\$10.84	\$23.48	\$27.80	\$40.50	\$53.20
60	\$16.10	\$36.66	\$43.20	\$63.60	\$83.99
65	\$24.60	\$36.92	\$71.45	\$105.97	\$140.50

30 Year Term

ISSUE AGE	\$10,000	\$25,000	\$50,000	\$75,000	\$100,000
25	\$4.04	\$6.51	\$6.90	\$9.15	\$11.40
30	\$4.30	\$7.14	\$7.10	\$9.45	\$11.80
35	\$4.77	\$8.32	\$8.62	\$11.74	\$14.85
40	\$5.38	\$9.86	\$11.77	\$16.46	\$21.15
45	\$6.64	\$13.01	\$17.05	\$24.37	\$31.70
50	\$8.89	\$18.64	\$25.10	\$36.45	\$47.80




Keep when
you retire!



NEW Dental PPO Insurance with optional vision rider

MAXIMUM BENEFIT PER PERSON (POLICY YEAR)

Enhanced plan: \$3,000

Premier plan: \$5,000



Giving you a reason to smile

Dental insurance can help take the sting out of a dental visit. Our strong, national network of qualified providers saves you money on your dental care. With our dental insurance, you will receive:

- ✓ **Immediate, 100% coverage** on preventive services from any network provider
- ✓ **No waiting periods on ALL services**
- ✓ **Coverage for major services**
- ✓ **Freedom to choose any provider** for dental care, or use in-network provider for additional savings.
- ✓ **Easy-to-access customer service** that is as personal as it is professional
- ✓ **Quick and simple claims** processing and no balance billing with network providers

Policy details

The policy year maximum benefit per person is **\$3,000 (ENHANCED) or \$5,000 (PREMIER)**

Class A, B and C services apply toward the maximum.

This policy has a deductible of \$50 per person, per policy year for class B and C services.

Maximum of three for all members on plan.

The coinsurance for this policy is:

ENHANCED PREMIER

Class	Service type	Plan pays	Plan pays
Class A	Preventive services	100%	100%
Class B	Basic services	80%	90%
Class C	Major services	50%	60%

Large national network

- Save more with 120,000+ unique providers
- Claims filed for members by providers
- Easy provider search on ColonialLifeDental.com
- Dedicated team to expand the network

PREMIUMS BASED ON HOME ZIP CODE & WILL NEVER INCREASE EVEN IF YOU LEAVE OR RETIRE

Individual Dental PPO (8100) for NJ- 20 payroll deductions

NO WAITING PERIODS- Enhanced & Premier NJ plans

	ENHANCED PLAN		PREMIER PLAN		VISION RIDER
	Zip codes:	ZONE 2	ZONE 3	ZONE 2	ZONE 3
Employee Only		\$27.01	\$30.06	\$29.66	\$33.02
Employee/Spouse		\$51.04	\$57.10	\$56.06	\$62.72
Employee/Child(ren)		\$64.01	\$71.93	\$70.31	\$79.02
Family		\$94.76	\$106.55	\$104.10	\$117.04

ZONE 2 Zip Codes: 080,081,082,083,084,086

ZONE 3 Zip Codes: 070,071,072,073,074,075,076,077,078,079,085,087,088,089



Dental PPO Insurance

Vision Rider

Life is full of unexpected moments, and healthy vision can help you see them all. Our vision coverage helps you and your family maintain your vision wellness, with coverage for eye exams and optical materials, such as eyeglasses or contact lenses.

VISION NETWORK — MAXIMIZE YOUR BENEFITS

You can maximize your vision benefits with any provider in our large, nationwide network. Our network includes independent optometrists and ophthalmologists, as well as retail stores such as:

- Walmart and Sam's Club Optical
- Target Optical
- Pearle Vision
- Visionworks
- Costco

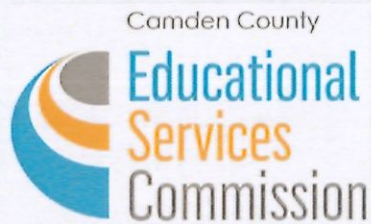
You can choose different providers to use your benefits for eye exams and eyeglasses or contact lenses.

FIND A PROVIDER OR REFER A PROVIDER

Find a network provider near you on our Vision Provider Directory at ColonialLifeVision.com.

If your preferred provider isn't in our network, you can send their contact information to referaprovider@ColonialLife.com, and one of our network recruiters will reach out to them.

VISION BENEFITS	IN-NETWORK	OUT-OF-NETWORK
CO-PAYS		
Exam (once per 12 months)	\$10 co-pay	Up to \$35 allowance
Materials	\$25 co-pay	See below
STANDARD PLASTIC LENSES (once per 12 months)		
Single vision Bifocal Trifocal Lenticular Progressive		Up to \$25 allowance
Polycarbonate lenses (for dependents to age 19)	Covered by co-pay	Up to \$40 allowance
	Covered by co-pay	Up to \$50 allowance
Choose any frame available at provider locations	Covered by co-pay	Up to \$50 allowance
	Up to \$80 allowance	Up to \$40 allowance
	Up to \$70 allowance Covered by co-pay	N/A
	Up to \$120 allowance	Up to \$50 allowance
Elective	Up to \$120 allowance	Up to \$100 allowance
Medically necessary	Up to \$210 allowance	Up to \$210 allowance



FOR MORE INFORMATION OR TO ENROLL

**SPEAK WITH YOUR
BENEFITS COUNSELOR**

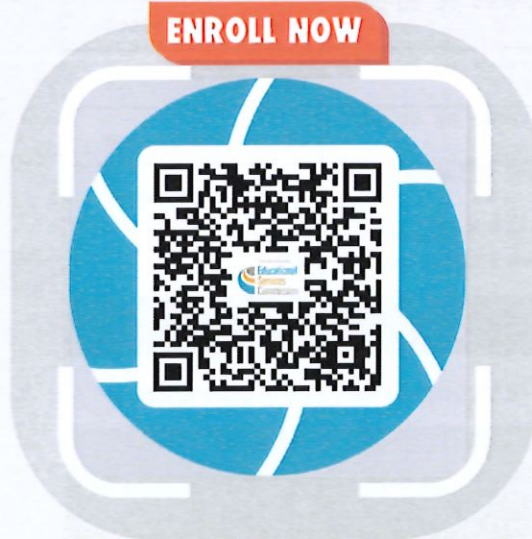


Taylor Maciow
856-242-0293
taylor@colonialnj.com

SCAN TO SCHEDULE

A 15-MINUTE PHONE CALL NOW

ENROLL NOW



DEADLINE

FSA ACCOUNTS DO NOT AUTOMATICALLY RE-ENROLL. YOU MUST ENROLL IN THE FSA NO LATER THAN 8/21/2026 FOR THE 9/1/2026 PLAN YEAR. NO LATE ENTRANTS ARE PERMITTED DUE TO IRS RULES.