

Cartersville School System Employee Benefits At A Glance 2023



Please see reverse side for important information concerning this year's Benefits Enrollment.

MetLife Dental – MetLife				
	Low Plan	Middle Plan		
Calendar Year Deductible • Single • Family Max	\$50 \$150	\$0 \$0		
Annual Benefit Maximum	\$1,750 Calendar Year	\$2,250 Calendar Year		
Diagnostic/Preventive Services	100% Coverage (no deductible)	100% Coverage (no deductible)		
Basic Treatment	80% Coverage (subject to deductible)	80% Coverage (subject to deductible)		
Major Treatment	50% Coverage (subject to deductible)	80% Coverage (subject to deductible)		
Orthodontia	50% Coverage to a Lifetime Maximum of \$1,000	50% Coverage to a Lifetime Maximum of \$1,000		
Waiting Period	None	None		

Vision – NVA				
	In-Network	Non-Network		
Vision Exam	\$10 copay	Up to \$40 reimbursement		
Contacts Fitting Standard Premium	\$0 Copay No more than \$50	\$20 reimbursement \$30 reimbursement		
Contact Lenses Elective Medically Necessary	Up to \$120 allowance Covered in full	Up to \$120 allowance Up to \$210 allowance		
Standard Plastic Lenses • Single Vision • Bifocal • Trifocal	\$25 copay \$25 copay \$25 copay	Reimbursement Up to \$30 Up to \$50 Up to \$70		
Frames	Up to \$120 allowance (retail); Up to \$47 allowance (Walmart/Sam's)	Up to \$84 reimbursement		
Benefit FrequencyExamLensesFrames	Once every 12 months Once every 12 months Once every 12 months			

To locate a dental provider, visit www.metlife.com and click on "Find a Dentist". You can locate a dentist by registering or searching by plan. If searching by plan, you will choose the "PDP Dental Network".



To locate a vision provider, visit www.e-nva.com.

This benefits at a glance is meant only to cover the major points of each plan. It does not contain all of the details that are included in your Summary Plan Descriptions (SPD) (as described by the Employee Retirement Income Security Act). If there is ever a question about one of these plans, or if there is a conflict between the information on this page and the formal language of the Plan Documents, the formal wording in the Plan Documents will govern.

See Enrollment Guide for additional details on these coverages:

Employee Basic Life & AD&D - Cigna

Cartersville County Schools provides all eligible employees with Basic Life & AD&D Insurance in the amount of \$50,000 for you at no cost.

Employee Voluntary Life & AD&D - Cigna

Eligible employees have the option to purchase additional term life insurance. Employees can elect up to a maximum of \$200,000 not to exceed 5 times their salary in increments of \$10,000. New hires will have a guaranteed issue amount up to \$200,000.

Spouse Voluntary Life - Cigna

Eligible employees can purchase term life insurance for their spouse. Employees must elect coverage on themselves in order to cover their spouse. Spousal coverage is available in \$5,000 increments to a maximum of \$25,000 not to exceed 100% of the employee's election. New hires will have a guaranteed issue amount of \$25,000.

Child Voluntary Life - Cigna

The child life coverage can be purchased in increments of \$2,000 to a maximum of \$10,000. Employees must elect coverage on themselves in order to cover their dependent children. One election will cover all eligible children up to age 26.

Short Term Disability - Cigna

This coverage provides employees with 60% of your gross salary (to a maximum of \$2,000 per week) in the event of an illness or off job accident. The benefit will begin after the later of your accumulated sick leave or 14 days from the accident/illness. The benefit is payable for up to 11 weeks. If you have previously declined this coverage and are selecting this coverage for the first time, you will be directed to fill out an Evidence of Insurability form at the end of your enrollment.

Long Term Disability - Cigna

This coverage is in place to help supplement your income in the event of an illness or off job accident. You will receive 60% of your gross salary up to a maximum benefit of \$6,000 per month. The waiting period for this benefit is 90 days and will pay a benefit up to Social Security Normal Retirement Age. If you have previously declined this coverage and are selecting this coverage for the first time, you will be directed to fill out an Evidence of Insurability form at the end of your enrollment.

Flexible Spending Accounts - Navia

You must re-enroll in this program each year; previous year's election will not continue.

Employees can set aside pre-tax dollars into a Healthcare Flexible Spending account to be used for eligible healthcare, dental, and/or vision expenses. The maximum contribution amount for 2023 is \$2,850. Employees will receive a debit card from Navia as a way of accessing funds. Up to \$600 of unused funds can be rolled over to the next plan year.

Employees also can set aside up to \$2,500 if filing separate or \$5,000 filing married of pre-tax dollars into a Dependent Care Flexible Spending account to be used for eligible dependent care expenses.

Additional Coverage Offerings:

Aflac Critical Illness w/ Cancer Rider Aflac Accident Aflac Universal Life

Benefit/Enrollment Questions

NFP 1-800-994-7429 www.shawhankins benefits.net/css

Medical Benefits

State Health 1-800-610-1863 www.myshbpga.adp.com

Dental Benefits

MetLife 1-800-942-0854 www.metlife.com/dental

Vision Benefits

NVA 1-800-672-7723 www.e-nva.com

Life and Disability Benefits

Cigna 1-800-36-CIGNA www.cigna.com

Flexible Spending Accounts

Navia 1-800-669-3539 www.naviabenefits.com

Aflac

1-800-992-3522 www.aflac.com

Special Note to Remember: State Health and the NFP Benefit Enrollments are separate enrollments. To access the State Health enrollment site, go to www.myshbpga.adp.com.

Cost Per Month:

Dental

Coverage Tier	Low	High
Employee	\$37.93	\$56.94
Employee + Spouse	\$74.17	\$110.93
Employee + Child(ren)	\$87.62	\$116.38
Employee + Family	\$130.32	\$181.81

Vision

Coverage Tier	Monthly Rates
Employee	\$6.11
Employee + 1 Dependent	\$11.59
Employee + Family	\$17.03