

Your 2024 Voluntary **BENEFITS**



RESPONSIBILITY | CHOICE | WELLNESS

A Message to All Employees

2024 Active Employees Open Enrollment for Voluntary Benefits

This year's open enrollment period for Voluntary Benefits is **September 25th – October 13th, 2023**. Open enrollment is the period where eligible employees can review / elect / decline or make plan changes for plan year beginning January 1, 2024. Please review your benefit options and select the plans in which you and your dependents would like to enroll. The options that you choose for pre-tax plans will be effective January 1, 2024, and will remain in effect through December 31, 2024, unless you have a qualifying life event (marriage, childbirth/adoption, divorce, etc.). If you experience a qualifying life event and want to enroll one or more eligible dependent(s), you must do so within 31 days of the event by reaching out to employeebenefits@fultoncountyga.gov. If you do not do so within this timeframe, the next time you can enroll your eligible dependents is during 2025 Open Enrollment, for coverage effective January 1, 2025.

VOLUNTARY BENEFITS PROGRAM – ENROLLMENT IS MANDATORY!

The voluntary benefits program is open to Full-time and, for certain post-tax benefits, Part-time employees. The premiums for voluntary benefits are 100% employee paid and payroll deducted on a pre-tax and post-tax basis. The following plans are available for enrollment effective January 1, 2024.

PLAN	VENDOR	PREMIUMS TAX BASIS
Accident	Aflac	Pre-Tax
Critical Illness	Aflac	Pre-Tax
Hospital Indemnity	Aflac	Pre-Tax
Whole Life with Long-Term Care Rider	Aflac	Post-Tax
Identity Theft Protection	LegalShield	Post-Tax
Short-Term Disability	MetLife	Post-Tax
Legal Insurance	MetLife	Post-Tax

2024 OPEN ENROLLMENT MEETINGS

Open Enrollment meetings will be held, virtually, through Zoom. After you register for a session, instructions to join the meeting (video or phone) will be emailed to you. Click the link below to select the session you would like to register for.

<https://bit.ly/3QXrTHq>

Available Sessions

9/21/2023 11am to 1pm

10/4/2023 11am to 1pm

10/9/2023 11am to 1pm

Note: The registration link works in Google Chrome, Microsoft Edge, Mozilla Firefox and Safari.

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This guide provides a summary of benefits available to Fulton County active employees and eligible dependents effective January 1, 2024, as well as laws, procedures, and regulations required to obtain and use such benefits. However, if inconsistencies occur between the contents of this enrollment guide and the contracts, rules, or laws regulating administration of the various programs, the program contract terms and/or appropriate legislation supersede this guide. In some instances, limitations and exclusions may apply.

If you have questions, please contact the benefit program’s member service department or the Fulton County Employee Benefits Division by email (employeebenefits@fultoncountyga.gov).

YOUR VOLUNTARY BENEFIT OPTIONS

Flexible Spending Accounts (FSA)



What is an FSA? What can it do for you?

Like most people, you expect to have regular medical, dental, vision, or dependent expenses. An FSA is the best way to cover them. That's because FSA contributions use your before-tax income. **Here's why that's so valuable.**

If you didn't elect an FSA, you would be paying for your unavoidable costs with take-home pay — money that has already been taxed between 20% and 35% depending on your tax bracket.

With an FSA, those tax dollars you would have lost by using your take-home pay are saved. That's because an FSA lets you pay for the same expense with pre-tax dollars that you have contributed from your paycheck. That lowers your taxable income, so you pay less federal income, Social Security and, in most states, state income tax. See the example chart below for a breakdown of how this would save someone with an average income of \$35,000.

What accounts are available?

Eligible employees will have the following Flexible Spending Accounts (FSAs) available for 2024, administered by Ameriflex. FSA contributions are deducted on a pre-tax basis.

Note: Aflac Insurance handles the enrollment for flexible spending accounts (FSA's) on behalf of Ameriflex.

Your Three FSA Options

- Traditional Health Care Flexible Spending Account (HCFSA)**
 This account covers eligible medical, prescription drugs, dental and vision expenses like deductible, copays, and coinsurance. This is available to BCBS POS Plan or Kaiser HMO Plan enrollees.
- Limited Purpose Health Care Flexible Spending Account (LP-HCFSA)**
 This account covers eligible expenses for *dental and vision* only and is available to BCBS CDHP enrollees.
- Dependent Care Flexible Spending Account (DCFSA).**
 You can use the Dependent Care FSA to reimburse yourself, tax-free, for certain dependent day care expenses you incur because you (and your spouse, if you are married) work, or are looking for work.

	With FSA	Without FSA
Annual Pay	\$35,000	\$35,000
Pre-Tax FSA Contribution	-\$1,500	-\$0
Taxable Income	=\$33,500	=\$35,000
Federal Income/ Social Security Taxes	-\$7,362	-\$7,852
After-tax Dollars used for Eligible Expenses	\$0	-\$1,500
Spendable Income	=\$26,138	=\$25,648
Your Tax Savings	\$490	\$0

How the Accounts Work

- Contributions.** For 2024, you can contribute up to \$3,050 a year to your Traditional HCFSA or LP-HCFSA, and up to \$5,000 a year to your DCFSA. (The IRS sets additional limits on your DCFSA contributions if you're married, and your spouse has a DCFSA through his or her employer.) The amount you choose will be deducted from your pay and deposited into your account equally throughout the year. You deposit money into each account separately. You cannot transfer money between the accounts and your deposits for the year can be used to pay eligible expenses you have between January 1 and December 31st.

- **\$610 Rollover—Traditional and Limited Purpose HCFSA.** FSA accounts have a “use it or lose it” rule, per the IRS, which requires funds set aside in your account for a year to be used that same year. However, if you get to the end of the plan year and you still have funds in your accounts, you still have the backup of a rollover – where some funds from the current year can roll into your account for the next year. The rollover limit for the 2024 Flexible Spending Account has increased from \$570 to \$610. If you contribute to the Traditional or Limited Purpose Health Care FSA, up to \$610 remaining in your account on December 31, 2024, will roll over automatically to the following year.

For example, if you contributed to the Traditional Health Care FSA in 2023, up to \$610 of funds remaining in your account as of December 31, 2024, will roll over to your 2024 Traditional Health Care FSA. The rollover provision does not affect the amount you can contribute to a Traditional or Limited Purpose HCFSA—you can still contribute up to the annual IRS maximum (\$3,050 for 2024).

IMPORTANT: The Health Care FSA “run-out period” will still apply

You will continue to have 90 days (through March 31 of the following year) to submit claims for reimbursement of eligible expenses you had in the previous year.

For example, you have until March 31, 2024, to submit claims for eligible expenses you had in 2023. At the end of the run-out period, your remaining balance, up to \$610, will roll over into 2024. Any amount over \$610 will be forfeited.

Use it or lose it — Dependent Care FSA. If you contribute to a Dependent Care FSA and you have unused funds in your account at the end of the plan year, you have until March 31 of 2024 to file for reimbursement of expenses you incurred in 2023. After March 31, 2024, any remaining 2023 contributions will be forfeited, per IRS rules.

How to Use The Funds

- **Reimbursements.** FSA funds are tax-free — your money goes in tax-free and comes out the same way. You can reimburse yourself for eligible health care expenses in one of two ways: with your Ameriflex debit MasterCard, or by filing a claim. You can reimburse yourself for eligible dependent day care expenses by filing a claim. These are explained below.
 - **Use your Ameriflex Card.** This MasterCard debit card allows you to access and manage your Health Care FSA funds with a single debit card. You can view your account balances, transactions, and claims information online, 24/7 through the Ameriflex portal <http://www.myameriflex.com/>. You will receive your Ameriflex debit card in the mail after you elect to contribute to a Traditional or Limited Purpose Health Care FSA. Whenever you make an eligible health care purchase or pay a health care provider, you can use it just like a debit card. Simply swipe the card at health care merchants that take MasterCard, and the funds will be withdrawn directly from your account to pay for the purchase. So, there’s no need to pay the expense out-of-pocket, file a claim form and wait for reimbursement.
 - **File a claim.** You can file the appropriate claim form (for health care expenses or dependent day care expenses, as applicable), along with copies of your receipts, with Ameriflex claim forms will be mailed to your home after you enroll.

COMMUTER REIMBURSEMENT ACCOUNTS

The transit and parking Commuter Reimbursement Accounts allow you to use pre-tax dollars to pay for services from transit and parking providers so you can work.

You can contribute up to \$270 per month in commuting / transit expenses and up to \$270 in parking expenses. These limits are subject to IRS regulations and can change each year. Simply use your Ameriflex debit card or submit your receipts with a claim form, and you will be reimbursed monthly from your account.

There is no “use it or lose it” rule or year-end forfeiture of unused balances if you are working; however, you must file for reimbursement within six months of the date of service. Unused funds in these accounts roll over each year. You can change your contribution rate any month. Transit and parking are separate accounts, and you cannot transfer money between them.

Reminder: Due to IRS rules, you must re-enroll in your FSA plan each year to ensure your contributions are available for the next year. You will not have an FSA in 2024 if you do not re-enroll.

OTHER VOLUNTARY BENEFIT OPTIONS



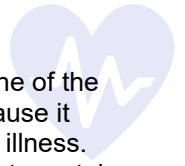
The following voluntary insurance products may be available through Aflac, MetLife, and LegalShield.

- MetLife Short-Term Disability (STD).** Voluntary short-term disability coverage continues a portion of your income if you have a non-work-related illness or injury, and you cannot work. This plan offers two coverage options, so you can design a plan that best meets your needs. Premiums for this benefit are deducted on a post-tax basis.

What are the benefit amounts?	Up to 60% of your pre-disability weekly pay, with a weekly max of \$2,000.
When do benefits begin?	After an elimination period of either 7 or 29 days, based on your plan choice.
How long do benefits last?	Either 22 or 25 weeks, based on your plan choice.

- Aflac Accident Plan.** The plan covers a wide range of non-work injury- and accident-related expenses, like ambulance rides, emergency room visits, major diagnostic testing and more. Premiums for this benefit are deducted on a pre-tax basis.

What are the benefit amounts?	Direct cash benefits are dependent on the type of injury. Specific amounts can be found in your AFLAC Accident Guide.
What are some examples of an Accidental Injury?	Burns, broken bones, concussions, lacerations, and many more. You can find more in your AFLAC Accident Guide.
Does this include a wellness benefit?	Yes. Depending on your level of coverage, each insured individual (you, a spouse or child) can receive between \$25 and \$50 following an annual wellness exam.



- Aflac Critical Illness.** Critical illness is one of the fastest growing benefit plans. That's because it pays cash benefits in the case of a major illness. You select the amount of your benefit, up to certain limits, with no deductible. When you enroll, you may need to answer questions to determine the maximum benefit you can elect. You'll be notified if you are approved for coverage and of how much coverage will be issued. Premiums for this benefit are deducted on a pre-tax basis.

What are the benefit amounts?	Direct cash benefits are dependent on the type of critical illness and the coverage amount you select. More info can be found in your AFLAC Critical Illness Guide.
What are some examples of a Critical Illness?	Cancer, heart attack, stroke, and kidney failure are all critical illnesses. You can find more in your AFLAC Critical Illness Guide.
Does this include a wellness benefit?	Yes. You and your covered spouse can each receive \$50 following an annual wellness exam.

- Aflac Hospital Indemnity.** This plan provides cash benefits for each day you are confined in a hospital for a covered illness or injury. The Benefits help to safeguard against expenses that medical insurance may not cover. It is also designed to help employers fill in the financial gaps left by most of today's high-deductible health plans. Premiums for this benefit are deducted on a pre-tax basis.

What are the benefit amounts?	Direct cash benefits are dependent on the length of the stay. More info can be found in your AFLAC Hospital Indemnity Guide.
Does this include a wellness benefit?	Yes. You and each other insured individual can receive \$50 following an annual wellness exam.

- **Aflac Whole Life Insurance.** Whole life insurance is an opportunity to build savings through a cash accumulation account while insuring yourself beyond the typical Term Life insurance policy. Whole life insurance is unique from other life insurance policies because your premiums are dependent on your age *when you first sign up*. Your premiums never increase over the years. Whole Life also includes an Accelerated Benefit, which pays a lump sum of up to one-half of the eligible death benefit when the insured is diagnosed with one or more Qualifying Life Events. Premiums for this benefit are deducted on a post-tax basis. You can learn more about this coverage in your Aflac Whole Life guide.



- **ID Shield – from LegalShield.** This plan provides 24/7 identity monitoring that sends you real-time alerts at the first signs of fraud. ID Shield's advanced detection platform can intercept and restore the misuse of personal information that puts identities at risk. To take your safety even further, ID Shield will hire a dedicated private investigator in the case that your identity is stolen. The plan even includes a \$1 Million Identity Fraud Protection plan for unauthorized electronic fund transfers and identity theft related expenses. Premiums for this benefit are deducted on a post-tax basis.
- **MetLife Legal Plans.** Hourly rates for an attorney can cost \$300 or more per hour. With this plan, you get access to expert legal help so you can navigate life's big moments confidently. A legal plan can assist when you need to have agreements reviewed or have an attorney attend a closing when purchasing a home; need to create wills and estate planning documents, or handle school and administrative hearings, adoption, or reproductive assistance legal matters ;or even advise on handling a traffic ticket, repossession, debt collection matter, or tax audit.



**To enroll in all
Voluntary Benefits during
Open Enrollment**

**Enroll online via ESS with
your Core benefits**

***If you experience any issues enrolling
in Voluntary Benefits***

Call 877-550-2842

**Monday through Friday
9:00am to 9:00pm**

CONTACT INFORMATION Voluntary Benefits

Plan/Service	Administrator	Contact
Fulton County Benefit Office	NA	404-612-7605 employeebenefits@fultoncountyga.gov
Employee Assistance Program	Anthem of Georgia	800-999-7222 www.AnthemEAP.com (password: Fulton)
Flexible Spending Accounts	Ameriflex – Aflac	888-868-3539 www.myameriflex.com
Commuter Reimbursement Accounts	Ameriflex – Aflac	888-868-3539 www.myameriflex.com
Life	MetLife	For General Questions: 800-438-6388 For Claims Support: 800-638-6420 Prompt #2 www.Metlife.com
Short-Term Disability	MetLife	For General Questions: 800-438-6388 For Claims Support: 888-608-6665 www.Metlife.com
Accident Plan	Aflac	800-433-3036 www.aflacgroupinsurance.com For Claims: https://www.aflacgroupinsurance.com/customer-service/file-a-claim.aspx
Whole Life Insurance	Aflac	800-433-3036 www.aflacgroupinsurance.com For Claims: https://www.aflacgroupinsurance.com/customer-service/file-a-claim.aspx
Critical Illness Plan	Aflac	800-433-3036 www.aflacgroupinsurance.com For Claims: https://www.aflacgroupinsurance.com/customer-service/file-a-claim.aspx
Hospital Indemnity	Aflac	800-433-3036 www.aflacgroupinsurance.com For Claims: https://www.aflacgroupinsurance.com/customer-service/file-a-claim.aspx
Cancer Plan (Individual Policy)	Aflac	800-992-3522 www.aflac.com
Identity Theft Protection	LegalShield ID Shield	1-888-807-0407 benefits.LegalShield.com/fultonco
Legal Plan	MetLife	800 438-6388 www.Metlife.com