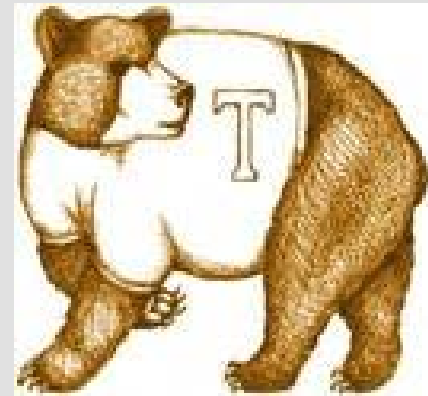


# THOMASTON PUBLIC SCHOOLS

**EMPLOYEE  
BENEFITS OPEN  
ENROLLMENT  
RECORDING**

**2021-2022**





When to Enroll



Online Enrollment  
Portal



How to Enroll



2021-2022 Benefits  
By Carrier



Benefit Tools &  
Resources.

# Overview



# Benefit Open Enrollment

**Friday, May 14, 2021, at 9:00 AM**

## Completion Date

**Monday, May 24, 2021, at 9:00 AM**

Enrollment contact: Eileen Berg,  
[Eileen.berg@coloniallifesales.com](mailto:Eileen.berg@coloniallifesales.com)

**When to Enroll**

# Benefits Open Enrollment Period

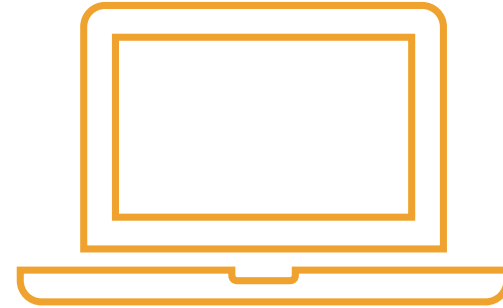
**Open Enrollment is every May for a July 1<sup>st</sup> effective date.**

**Plan year is July 1<sup>st</sup> – June 30<sup>th</sup>.**

- You should always elect benefits during open enrollment to ensure you get the coverage you need. However, once you make your elections through a cafeteria or Section 125 plan, you are unable to change your elections until the plan year ends. But sometimes qualified life events occur, allowing you to change your elections outside of the standard enrollment period.

**Qualified Life Events that allow you to change your benefit elections in the middle of the plan year.**

- Qualified life events depend on a specific plan's terms, but some common examples can be found below:
- Change in status (e.g., marital status, number of dependents and employment status)
- Significant cost changes
- Significant curtailment of coverage
- Change in coverage under other employer's plan
- Addition or significant improvement of benefits package option
- FMLA leaves of absence
- COBRA qualifying events
- HIPAA special enrollment events
- Medicare or Medicaid entitlement



# Online Enrollment Portal

Colonial Life

Information  
you need to  
have before  
you begin.

- Spouse and Dependent Information which includes dates of birth and social security numbers.
- This information is required this year. If enrollment in benefits, the insurance carrier requires the information. The information is also used to calculate waiver credits.

# Virtual Enrollment Assistance

- Please email Eileen Berg with questions about Colonial benefits, new enrollments or changes with the Colonial benefits. Also, assistance with the virtual enrollment process. [Eileen.berg@coloniallifesales.com](mailto:Eileen.berg@coloniallifesales.com)
- Please email Eileen and she will work with you regarding the best time for the phone call.

# Benefit Question Contacts

- **Benefit Questions Contact /Assistance with virtual enrollment.**
- **Sonia Kaminsky at [skaminsky@bbofct.com](mailto:skaminsky@bbofct.com) or call 203-687-8539.**
- **Sheila Stoddard at [sstoddard@bbofct.com](mailto:sstoddard@bbofct.com) or call 860-665-8473.**



Link to  
Open  
Enrollment  
Portal

# Self-Enroll Website

<https://harmony.benselect.com/enroll>

Colonial Life.

ENROLLMENT SITE

**Your Benefits Enrollment**

To use this website, you must have your employee ID or Social Security Number and your confidential Personal Identification Number (PIN). If you have difficulty logging in, please contact the Enrollment Solutions Help Desk at 1-866-875-4772.

Employee ID or Social Security Number

Personal Identification Number (PIN)

By clicking the login button below, you are agreeing to the [Terms of Use](#) and [Privacy Notice](#).

[FORGOT PASSWORD](#) [LOGIN](#)

© Colonial Life & Accident Insurance Company  
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[Security Info](#) [Admin Site](#)

Access to  
Harmony.benselect.com

- **Personal Identification Number (PIN): Last 4 digits of SSN + the last 2-digits of your birth year**
- **(ex. if born in 1970 - just add 70 to last 4 digits of SSN) 444470**

Benefits Enrollment Guide available in the open enrollment email and at

<http://www.visityouville.com/en/THOMASTONBOE>

# Getting Started

# Once Logged In

Review the important information on this page and then click Next to begin.

Home You & Your Family ▾ My Benefits ▾ Sign & Submit

## Welcome to Your Benefit Enrollment for Plan Year 2021-2022

At Thomaston Board of Education, we know that benefit requirements change. That's why we have an open enrollment period each year.

For most benefits, Open Enrollment is the only time of year you are allowed to make changes in your benefits. Unless you experience some qualifying life event, you will only be able to make benefit changes during the Open Enrollment period. During open enrollment, you should consider the benefits you have today and ask yourself if they will serve you and your loved ones well in the coming plan year.

During open enrollment, you will have the ability to take the following actions:

- Enroll (if not currently enrolled but eligible)
- Add/remove dependent(s) (with proper documentation)
- Change plans when available or
- Opt out of a plan

All Eligible Employees Must:

- Complete the Open Enrollment Process in its entirety. You must complete the open enrollment process even if you are electing or waiving benefits.
- READ all instructions and information VERY CAREFULLY!
- DEPENDENT AND BENEFICIARY INFORMATION IS REQUIRED, INCLUDING SOCIAL SECURITY NUMBERS.
- CAREFULLY REVIEW your final benefit selections to ensure that they fit your needs.
- Electronically sign your confirmation statement to COMPLETE your enrollment. Print confirmation statement for your records.

To enroll or make changes to Colonial Life benefits, you need to speak with Eileen Berg - [eileen.berg@coloniallifesales.com](mailto:eileen.berg@coloniallifesales.com)

Click *Next* to begin.

### ✓ Your Benefit Options

[Medical](#)  
[Dental](#)  
[Insurance Waiver](#)  
[Health Savings Account](#)  
[Health Care FSA](#)  
[Limited Purpose FSA](#)  
[Dependent Care FSA](#)  
[Basic Term Life and AD&D](#)  
[Colonial Accident](#)  
[Colonial Cancer](#)  
[Colonial Critical Illness](#)  
[Colonial Disability](#)  
[Colonial Hospital Confinement](#)  
[Colonial Term Life](#)  
[Colonial Whole Life](#)

Press *Next* to review personal information and begin enrollment.

Next

# Personal Information

Review Personal information. Please update phone and email if they are not accurate. Click Next.

Home You & Your Family - My Benefits - Sign & Submit

## Personal Information

**!** If any personal information needs to be updated, please make the changes below AND contact the HR Department. Click the *Next* button to continue.  
Optional items are in *italics*.

### Personal Info

Name:      
First MI Last Suffix

Date of Birth:

SSN:

Gender:  Male  Female  Other

### Contact Info

Address:    
Country

Street

Street (cont.)

City State Zip

Home Phone:

Work Phone:

Mobile Phone:

Email:

Personal Email:

[Back](#) [Next](#)

# Dependent Information Required

Please review dependent information by clicking on the dependent name. If changes are required, enter and save. To add dependents, click on blue box. If married, add spouse and if you have children under the age of 26, add them.

**Dates of birth and Social Security numbers required.** This information is required even if you are not enrolling them in the insurance. The information is also used for waiver credits.

You can only add one dependent in time.

Home You & Your Family - My Benefits - Sign & Submit

## Dependents

**REQUIRED:** Please add/update the Social Security Numbers for ALL dependents below. Insurance carriers required this information. Click Add ("Plus" icon at top right of table) to add your spouse or dependent children. Dependent children may only be covered in a plan if they meet the necessary requirements defined by the plan. Click the Next button when you are finished.

### Dependents

Name	SSN	DOB	Sex	Relation	Uploads	
Justin Test	***-**-0000	4/4/1980	M	Spouse	0	+ ✎ ✕

### Add a Dependent

If your dependent is not listed above or you would like to add an additional dependent, simply click the Add Dependent button below.

[+ Add Dependent](#)

[Back](#) [Next](#)

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# Steps to move from benefit to benefit.

- Click Review for each benefit. Review the dependents listed, if enrolling, select the correct tier of coverage, then click enroll, click next and then click confirm. If you are declining the benefit (waiving coverage), click decline, click next and click confirm.
- You can get to each benefit by scrolling down the page and clicking on review or click on each benefit on the right-hand side.
- All Eligible employees must enroll or decline each benefit.

Thomaston Board of Ed / Sample Employee (0011) / Self-Enroll



HOME

YOU & YOUR FAMILY

MY BENEFITS

SIGN & SUBMIT

LOGOUT

## Benefit Summary

Below is a list of your current benefit elections.

For each of the benefit options below, your "Quick Enroll" option is shown. Click the Quick Enroll link to accept on each one, or click "Review" to review your other options.

Medical ←

[Review](#) ←

ⓘ Based on your group's rules, choosing "Quick Enroll" will waive this benefit.

Dental

[Review](#)

ⓘ Based on your group's rules, choosing "Quick Enroll" will waive this benefit.

Health Savings Account

[Review](#)

ⓘ Based on your group's rules, choosing "Quick Enroll" will waive this benefit.

### My Benefits

Medical ←  
 Dental ←

Health Savings Account  
 Health Care FSA  
 Dependent Care FSA  
 Basic Term Life and AD&D  
 Colonial Life Disability  
 Colonial Life Accident  
 Colonial Life Critical Illness  
 Colonial Life Cancer  
 Colonial Life Hospital Confinemen  
 Colonial Life Term Life  
 Colonial Life Universal Life  
 Colonial Life Whole Life

# Enroll or Decline

- **Click Review** next to the benefit and walk through the steps below for each benefit. You must complete each benefit.
  - Within each benefit, you can **click on the pencil icon** under the individual plan selection to update dependent information.
- **If Enrolling, Click the appropriate tier.**
  - Employee Only
  - Employee +1
  - Employee + Family
- **If Waiving Coverage, Click Decline**
  - Review for accuracy
- **Click Next**
- **Click Confirm**
- If you confirmed in error, you can go back to that benefit, unlock, select the correct information, Click Next and Confirm again.

## Medical

**i** Listed below are the options and coverage choices available to you.

HDHP \$2250/\$4500 Summary Plan Description [Click Here.](#)

- To enroll or continue your current coverage, click the option that represents your election.
- You can edit which dependents will be covered by using the pencil icon next to the list of Covered People when available.
- When you are finished, click on the **Enroll** button to continue.

**Current**

**HDHP \$2250/\$4500 ANTHEM**

Your Cost: Per Pay Period

<input type="radio"/> Employee Only:	\$101.86
<input checked="" type="radio"/> Employee + 1:	\$207.80
<input type="radio"/> Employee+Family:	\$271.66

Covered People: ✎

Jane Test  
Justin Test

**Enroll**

**DECLINE COVERAGE**

You should only decline coverage if you are covered elsewhere. Declining coverage may require you to answer questions about your reasons for declining.

Your Cost: \$0.00

**Decline**

Once confirmed, the system will bring you back to the Benefit election page with the data from your election. The circle will change to green with a white check mark. **Click** on Dental and start process for that benefit.

# Back to Benefit Summary Page

## Benefit Summary

**i** Below is a list of your current benefit elections.

Click "Review" to review your other options.

The Colonial Benefits need to be enrolled with the assistance of a Colonial Representative.

Within each Colonial benefit, click Waive Coverage so you can complete your enrollment session.

For further information regarding the voluntary supplemental benefits, please contact Eileen Berg - eileen.berg@coloniallifesales.com

Click on the following Colonial Benefits Overview page and rates to determine if the Colonial benefits are right for you.

**10 Month Employees Colonial Pages. 12 Month Employees Colonial Pages.**

**Medical** Review

Enrollment Details

Product Name: HDHP \$2250/\$4500 ANTHEM  
 Coverage Level: Employee + 1

First Name	MI	Last Name	DOB	Sex	Relationship
Jane		Test	9/20/1975	M	Employee
Justin		Test	1/1/1960	M	Spouse

You have completed enrollment in this plan. Your cost per pay period will be \$207.80

**Dental** Review

You were previously enrolled in \$1000 MAX ANTHEM; EO at a cost per pay period of \$4.82

You have to complete enrollment in this plan.

**My Benefits**

- Medical \$207.80
- Dental \$0.00
- Health Savings Account \$0.00
- Health Care FSA \$0.00
- Limited Purpose FSA \$0.00
- Dependent Care FSA \$0.00
- Basic Term Life and AD&D \$0.00
- Optional Term Life \$0.00
- Spouse Life \$0.00
- Child Life \$0.00
- Colonial Accident \$0.00
- Colonial Cancer \$0.00
- Colonial Critical Illness \$0.00
- Colonial Disability \$0.00
- Colonial Hospital Confinement \$0.00
- Colonial Term Life \$0.00
- Colonial Whole Life \$0.00

Employer Cost \$768.36

Pre-tax cost \$207.80

Post-tax cost \$0.00

**Total Cost Per Pay Period \$207.80**

The Benefit Table only includes the employee's individual cost per benefit cost. The ER cost does show at the bottom and individually at the end on your review page.



# Health Savings Account















You can only elect to participate in the HSA IF you are enrolled in the medical HDHP and not in an HRA.

- Select Benefit Level based on your HDHP Benefit Tier.
- Maximum Contributions are based on your number of payroll periods. The maximum on this page is the IRS maximum decreased by the dollar amount funded by Thomaston Public Schools per the union contract. The IRS maximum is based on a calendar year.
- Add the amount you would like from each pay period. **Click** Calculate and then I wish to apply for this coverage.

- I wish to apply for this coverage
- I wish to CANCEL this coverage

# Submission of a benefit

- A green circle with a check mark will appear your “My Benefits” table for benefits you view and elected coverage. The faded red circle with an x is a benefit that is not available to you. The bright red circle with the x is for a benefit that you declined. Each circle must be filled in order to submit your enrollment. circle will either be red or green once that benefit is complete. Repeat this process for each benefit.

My Benefits		
	Medical	\$207.80
	Dental	\$10.12
	Health Savings Account	\$100.00
	Health Care FSA	\$0.00
	Limited Purpose FSA	\$0.00
	Dependent Care FSA	\$0.00
	Basic Term Life and AD&D	\$0.00
	Colonial Accident	\$0.00
	Colonial Cancer	\$0.00
	Colonial Critical Illness	\$0.00
	Colonial Disability	\$0.00
	Colonial Hospital Confinement	\$0.00
	Colonial Term Life	\$0.00
	Colonial Whole Life	\$0.00

# Colonial Life Benefits

- Colonial Life Benefits: for enrollment or changes, please email Eileen Berg. Those changes must be completed by phone. **To continue through the enrollment process, click enroll if currently enrolled, and Decline if you are not.** *If you click to enroll you will receive a page that enrollment is unavailable. Click on the benefit title in blue in the "My Benefits" table so that you can go back and decline coverage. Complete the entire enrollment process and email Eileen Berg if you would like to enroll in a Colonial benefit.*

## Colonial Whole Life

Colonial Whole Life

- Choose *Enroll/Change/Cancel Coverage* if you wish to view rates and enroll in this product.
- Choose *Waive Coverage* if you do not wish to have coverage in this plan.

Press *Next* after you have made your selection.

Enroll/Change/Cancel Coverage

Waive coverage

Back

Next

## Colonial Whole Life

You have elected to WAIVE coverage under this plan.

Back

Confirm

# Online Enrollment Final Steps

# Electronic Signature

- Click Next to authorize your Benefit Confirmation Form.
- Enter your PIN in the box at the bottom of the form.
- **The Congratulations Screen confirms that your enrollment is complete.**
- Print/save your Benefit Confirmation for your records.
- Click on Benefit Confirmation Form to open your confirmation in pdf format.

## IMPORTANT:

- YOUR ELECTRONIC SIGNATURE ON YOUR CONFIRMATION STATEMENT WILL SERVE AS ACKNOWLEDGEMENT THAT:
- YOU FULLY UNDERSTAND AND AGREE WITH YOUR ELECTIONS AS OF FINAL CLOSURE AND PROCESSING OF OPEN ENROLLMENT FOR PLAN YEAR 2021-2022, and
- ONCE FINAL CONFIRMATIONS ARE SUBMITTED TO HUMAN RESOURCES (FOR FILING) AND PAYROLL (FOR PROCESSING), SUCH ACKNOWLEDGEMENT AND AGREEMENT WILL BE BINDING AND NOT SUBJECT TO CHANGE\*, QUESTION, OR GRIEVANCE.
- THIS IS ONE WEEK AFTER OPEN ENROLLMENT CLOSES.

# Sample enrollment medical, dental and HSA enrollment

Sample Review page for an enrollment.

## Sign and Submit

Here is a recap of your enrollment elections. The summary below shows your election for each benefit and includes your pre-tax and post-tax contributions per pay period for each plan.

**IMPORTANT:**

YOUR ELECTRONIC SIGNATURE ON YOUR CONFIRMATION STATEMENT WILL SERVE AS ACKNOWLEDGEMENT THAT:

- YOU FULLY UNDERSTAND AND AGREE WITH YOUR ELECTIONS AS OF FINAL CLOSURE AND PROCESSING OF OPEN ENROLLMENT FOR PLAN YEAR 2021-2022, and
- ONCE FINAL CONFIRMATIONS ARE SUBMITTED TO HUMAN RESOURCES (FOR FILING) AND PAYROLL (FOR PROCESSING), SUCH ACKNOWLEDGEMENT AND AGREEMENT WILL BE **BINDING AND NOT SUBJECT TO CHANGE**, QUESTION OR GRIEVANCE.

\*Remember, during open enrollment you have a chance to make changes and add/remove spouses and dependents. Once the enrollment deadline is past, your choices are binding until the next enrollment period and you can only make changes resulting from a "qualifying life event". Completed enrollment forms and documentation of qualifying life events will be required within **30 days of the qualifying life event**.

Are You Satisfied With Your Elections? If you are satisfied with your choices, click on the "NEXT" button at the bottom of this screen to sign your Enrollment Verification Form electronically using your PIN.

### Your Benefits

Plan	Description	Pretax Cost	Posttax Cost	Employer Paid
Medical	HDHP \$2230 ANTHEM; E+1	\$207.80	\$0.00	\$768.36
Dental	\$1000 MAX ANTHEM; E0	\$3.05	\$0.00	\$18.68
Insurance Waiver	Waived			
Health Savings Account	\$2,640	\$120.00	\$0.00	\$0.00
Health Care FSA	Waived			
Limited Purpose FSA	Waived			
Dependent Care FSA	Waived			
Basic Term Life and AD&D	GROUP TERM LIFE AND AD&D; \$40,000	\$0.00	\$0.00	\$4.04
	Waived			
Colonial Cancer	Waived			
Colonial Critical Illness	Waived			
Colonial Disability	Waived			
Colonial Hospital Confinement	Waived			
Colonial Term Life	Waived			
Colonial Whole Life	Waived			
<b>Total</b>		<b>\$332.85</b>	<b>\$0.00</b>	<b>\$791.08</b>

### Signatures Required

To complete your enrollment, you must sign the following forms. Press Next to begin signing forms.

Form Name	Status	Date Signed/Reviewed
ANTHEM HDHP \$2230 Summary Plan Description	Reviewed	N/A
Benefit Confirmation Form	Unsigned	

Next

Sample waiver of benefits/ decline.

The top arrow is the waiver credit, and the bottom arrow points toward the total paid by Thomaston Public Schools, per pay period.

Sample  
Review page  
for a waiver

Home You & Your Family - My Benefits - Sign & Submit

## Sign and Submit

Here is a recap of your enrollment elections. The summary below shows your election for each benefit and includes your pre-tax and post-tax contributions per pay period for each plan.

**IMPORTANT:**

YOUR ELECTRONIC SIGNATURE ON YOUR CONFIRMATION STATEMENT WILL SERVE AS ACKNOWLEDGEMENT THAT:

- YOU FULLY UNDERSTAND AND AGREE WITH YOUR ELECTIONS AS OF FINAL CLOSURE AND PROCESSING OF OPEN ENROLLMENT FOR PLAN YEAR 2021-2022, and
- ONCE FINAL CONFIRMATIONS ARE SUBMITTED TO HUMAN RESOURCES (FOR FILING) AND PAYROLL (FOR PROCESSING), SUCH ACKNOWLEDGEMENT AND AGREEMENT WILL BE **BINDING AND NOT SUBJECT TO CHANGE\*, QUESTION OR GRIEVANCE.**

\*Remember, during open enrollment you have a chance to make changes and add/remove spouses and dependents. Once the enrollment deadline is past, your choices are binding until the next enrollment period and you can only make changes resulting from a "qualifying life event". Completed enrollment forms and documentation of qualifying life events will be required within 30 days of the qualifying life event.

Are You Satisfied With Your Elections? If you are satisfied with your choices, click on the "NEXT" button at the bottom of this screen to sign your Enrollment Verification Form electronically using your PIN.

### Your Benefits

Plan	Description	Pretax Cost	Posttax Cost	Employer Paid
<a href="#">Medical</a>	Waived			
<a href="#">Dental</a>	Waived			
<a href="#">Insurance Waiver</a>	Insurance Waiver	\$0.00	\$0.00	\$68.18
<a href="#">Health Savings Account</a>	Waived			
<a href="#">Health Care FSA</a>	Waived			
<a href="#">Limited Purpose FSA</a>	Waived			
<a href="#">Dependent Care FSA</a>	Waived			
<a href="#">Basic Term Life and AD&amp;D</a>	GROUP TERM LIFE AND AD&D; \$40,000	\$0.00	\$0.00	\$4.04
<a href="#">Colonial Cancer</a>	Waived			
<a href="#">Colonial Critical Illness</a>	Waived			
<a href="#">Colonial Disability</a>	Waived			
<a href="#">Colonial Hospital Confinement</a>	Waived			
<a href="#">Colonial Term Life</a>	Waived			
<a href="#">Colonial Whole Life</a>	Waived			
<b>Total</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$72.22</b>

Signatures Required

To complete your enrollment, you must sign the following forms. Press Next to begin signing forms.

Form Name	Status	Date Signed/Reviewed
Benefit Confirmation Form	Unsigned	

Next

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# Online Enrollment Review and Sign

## Signatures Required

To complete your enrollment, you must sign the following forms. Press Next to begin signing forms.

Form Name	Status	Date Signed/Reviewed
 Benefit Confirmation Form	Unsigned	

### Review / Sign Forms

Here is a review of your enrollment selections. The summary below shows your selection for each benefit and includes your employee and dependent identification numbers for each plan.

**WARNING**

- YOUR SELECTIONS AS A SUPPLEMENT TO YOUR CURRENT EMPLOYER'S PLAN WILL BE IN EFFECT FOR YOUR CURRENT EMPLOYMENT ONLY.
- IF YOU HAVE CURRENTLY OR ARE ABOUT TO JOIN ANOTHER EMPLOYER OR CHANGE YOUR EMPLOYER, YOU WILL NEED TO RE-EVALUATE YOUR SELECTIONS FOR EACH ADDITIONAL EMPLOYER AND ENROLLMENT WILL BE REQUIRED AND NOT ALLOWED TO CARRY OVER TO SUBSEQUENT EMPLOYERS.
- IF YOU ARE CURRENTLY OR ARE ABOUT TO JOIN ANOTHER EMPLOYER, YOU WILL NEED TO RE-EVALUATE YOUR SELECTIONS FOR EACH ADDITIONAL EMPLOYER AND ENROLLMENT WILL BE REQUIRED AND NOT ALLOWED TO CARRY OVER TO SUBSEQUENT EMPLOYERS.

\*Benefits during your enrollment can be added, deleted, or modified. However, you cannot add or delete a benefit until the enrollment process is complete. Once the enrollment process is complete, your selections are binding until the next enrollment period and you can only make changes resulting from a "rolling" enrollment. Complete enrollment forms and documentation of existing life events will be required within 30 days of the end of the enrollment period.

Are You Satisfied With Your Selections? If you are satisfied with your selections click on the "NEXT" button at the bottom of this screen to sign your enrollment confirmation form electronically using your PIN.

Benefit Confirmation / Deduction Authorization										HIGH SCHOOL		
Name	Date of Birth	Home Phone	Work Phone	Address								
Jane Test	06/20/1976	(860) 555-2277		30 CHURCH STREET THORINGTON, CT 06787								
Employee ID	Hire/Key Date	Gender	E-mail Address									
0	06/20/2016	MF	janetest@msd.com									
Location	Department	Reason for Changing Form										
HIGH SCHOOL	TEACHER	Open Enrollment										
Job Class	Title											
TEACHERS	Teacher											
Benefit Plan	Option	Emp. Cost	Employee Cost	Health Plan	Health Plan	Health Plan	Health Plan	Health Plan	Health Plan	Health Plan		
Medical	Wanted											
Dental	Wanted	\$1500	\$500	ANHEIM	04	20	07/01/2007		10.12	0.00	37.41	
Health Savings Account	Wanted											
Health Care FSA	Wanted											
Dependent Care FSA	Wanted											
Basic Term Life and AD&D	GROUP TERM LIFE AND AD&D	00	20	07/01/2007	45,000					4.54		
Cancer Accident	Wanted											
Cancer Control	Wanted											
Cancer Critical Illness	Wanted											
Cancer Disability	Wanted											
Cancer Hospital Confinement	Wanted											
Cancer Term Life	Wanted											
Cancer Whole Life	Wanted											
<b>Total:</b>										10.12	0.00	41.45

Page 1 of 2

MS 04-01-2007

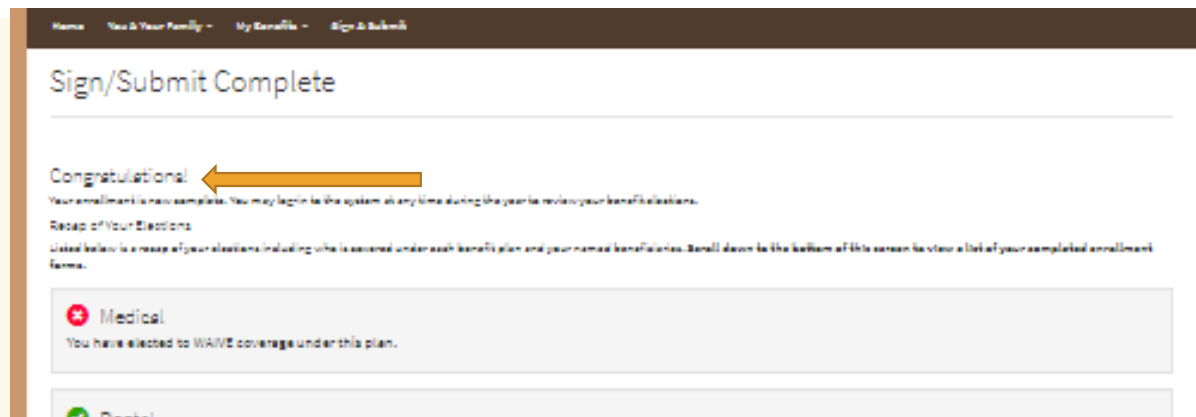
Please enter your PIN below and click on "SIGN FORM" to complete your enrollment and submit your elections. By entering your PIN, you are electronically signing the Benefit Verification/Deduction Confirmation Form above. Please review it carefully before entering your PIN.

PIN:

Sign Form

Next

# Congratulations!



## Completed Forms

Following is a list of forms reviewed and/or signed during the enrollment. Click on the form name to view or print.

Press *Logout* to exit the website.

Form Name	Date Signed/Reviewed
<a href="#">Benefit Confirmation Form</a>	05/14/2021

Back

Logout

Click on Benefit Confirmation Form, click print, to save to your computer, print to pdf and save. To print hard copy, select a printer. Click back to Sign/Submit Complete tab and Log out.



# Preventive Cost Share Discount

- Contract language: On an annual basis, in the event that the **employee and his/her family members on the Board health insurance plan** complete their health risk assessment and biometric screening during a contract year, the employee will receive a one percent (1%) reduction in his or her premium share contributions for the subsequent contract year.
- The new form is included on the open enrollment email with the link for this presentation and also at the <http://www.visityouville.com/en/THOMASTONBOE>
  - **If you have provided forms to Connecticare for this time frame, please provide a copy of that form to Brown & Brown. Fax**
- To receive the 1% discount to the July 1, 2021, cost shares included in the open enrollment portal, Brown & Brown must receive the completed provider forms no later than June 30, 2021. Each item on the list is required for the discount and the date of service would need to be between July 1, 2020 and June 30, 2021. If the health insurance includes a spouse and/or dependents, a completed form(s) is required for them as well.
- Contact Brown & Brown with any questions. Sheila Stoddard, [sstoddard@bbofct.com](mailto:sstoddard@bbofct.com), 860-665-8473 or Sonia Kaminsky, [skaminsky@bbofct.com](mailto:skaminsky@bbofct.com), 203-687-8539

# Employees that waive coverage for the first time.

- The July 1, 2021 open enrollment portal includes current waiver credits.
- For any employee that waives for the first time, this will be a 2-step process. You will complete the open enrollment process and receive a Congratulations page. Save this document as a pdf.
- Once the Open Enrollment portal is closed, the waiver amount will be manually entered, and you will be contacted to go back into the portal to resubmit and print an updated benefit confirmation form. This will be date and time stamped.
- Save this for your final benefit enrollment for 2021-2022.

**2021-2022  
Benefits  
By Carrier-  
NO  
Changes**



**Medical: Anthem**



**Dental: Anthem**



**Life, AD&D The Standard  
Voluntary Life : Anthem Life**



**Optional Products:  
Colonial Life**

# Medical and Dental

- Carrier: **Anthem Blue Cross Blue Shield**
- Website: <https://www.anthem.com/>
- Medical Network: National BlueCard PPO Network
- Dental Network: Anthem Complete GRID Network
- Pharmacy Search: Individual & Family,
  - Prescription Search, National Drug Lists



# Voluntary Life – New Hire Eligibility Only

## Benefit Amount

- Employee - \$100,000
- Spouse - \$50,000
- Child/Children - \$25,000 up to age 26

The employee only has guaranteed issue for this benefit when first eligible for benefits. **This is not an open enrollment benefit.** If an employee is interested in electing this benefit, please contact Brown & Brown.

Sheila Stoddard, [stoddard@bbofct.com](mailto:stoddard@bbofct.com),  
860-665-8473 or  
Sonia Kaminsky, [skaminsky@bbofct.com](mailto:skaminsky@bbofct.com),  
203-687-8539.

\* You will be required to complete a medical underwriting form for Anthem Life.



# Anthem Online Assistance

## Smart

Sydney acts like a personal health guide, answering your questions and connecting you to the right resources at the right time. And you can use the chatbot to get answers quickly.

## Simple

Ready for you to use quickly, easily, seamlessly – with one-click access to benefits info, Member Services, wellness resources and more.

## Personal

Get alerts, reminders and tips directly from Sydney. Get doctor suggestions based on your needs. The more you use it, the more Sydney can help you stay healthy and save money.



- Say hi to “Sydney”
  - Find care and check costs
  - Check all benefits
  - See claims
  - Get fact answers with chat feature
  - View and use digital ID cards
- [https://players.brightcove.net/3707693280001/SJTY\\_B3Dob\\_default/index.html?videoId=6066270106001](https://players.brightcove.net/3707693280001/SJTY_B3Dob_default/index.html?videoId=6066270106001)



# Live Health Online

- **Private video visits with a doctor from your smartphone, tablet or computer**

## On LiveHealth Online, you can:

- **See a board-certified doctor 24/7.** You don't need an appointment to see a doctor. They're always available to assess your condition and send a prescription to the pharmacy you choose, if needed.<sup>1</sup> It's a great option when you have pink eye, a cold, the flu, a fever, allergies, a sinus infection or another common health issue.
- **Visit a licensed therapist in four days or less.**<sup>2</sup> Have a video visit with a therapist to get help with anxiety, depression, grief, panic attacks and more. Schedule your appointment online or call **1-888-548-3432** from **8 a.m. to 8 p.m.**, seven days a week.
- **Consult a board-certified psychiatrist within two weeks.**<sup>3</sup> If you're over 18 years old, you can get medication support to help you manage a mental health condition. To schedule your appointment call **1-888-548-3432** from **8 a.m. to 8 p.m.**, seven days a week.

## You've got access to affordable and convenient care

Your Anthem plan includes benefits for video visits using LiveHealth Online, so you'll just pay your share of the costs — usually \$59 or less for medical doctor visits, and a 45-minute therapy or psychiatry session usually costs the same as an office mental health visit.

Sign up for LiveHealth Online today — it's quick and easy

Go to [livehealthonline.com](https://livehealthonline.com) or download the app and register on your phone or tablet.



# Better Health

## Health & Wellness Programs from Anthem



### ConditionCare

If you have asthma, diabetes, chronic obstructive pulmonary disease (COPD), heart disease or heart failure, ConditionCare can give you the tools and resources you need to take charge of your health. You'll get:

- 24/7, toll-free phone access to nurses who can answer health questions.
- Support from nurse care managers, dietitians and other health care professionals to help you reach your health goals.
- Educational guides, electronic newsletters and tools to help you learn more about your condition(s).



### 24/7 NurseLine

Whether it's 3 a.m. or a lazy Sunday afternoon, you can talk to a registered nurse any time of the day or night.

These nurses can:

- Answer questions about health concerns.
- Help you decide where to go for care when your doctor, dentist, or eye doctor isn't available.
- Help you find providers and specialists in your area.
- Enroll you and your dependents in health management programs.
- Remind you about scheduling important screenings and exams, including dental and vision check ups.



### Future Moms

Having a baby is an exciting time! Future Moms can help you have a healthy pregnancy and a healthy baby. Sign up as soon as you know you're pregnant. You'll get:

- A nurse specializing in obstetrics who can answer your questions, 24/7, and will call to check on your progress.
- The *Mayo Clinic Guide to a Healthy Pregnancy*, which explains the changes your body and baby are going through.
- A screening to check your health risks.
- Resources to help you make healthier decisions during pregnancy.
- Free phone access to pharmacists, nutritionists and other specialists, if needed.
- Other helpful information on labor and delivery, including options and how to prepare.

## Get the support you need

Call us to sign up and use these programs at no extra cost:

- ConditionCare: 866-962-0959
- Future Moms: 800-828-5891
- 24/7 NurseLine: 800-337-4770



# The Standard EAP

## Contact EAP

**888.293.6948**

**TDD: 800.327.1833**

24 hours a day,  
seven days a week

[workhealthlife.com/Standard3](http://workhealthlife.com/Standard3)

You, your dependents (including children to age 26) and all household members can contact master's-degreed clinicians 24/7 by phone, online, live chat, email or text. There's even a mobile EAP app. Receive referrals to support groups, a network counselor, community resources or your health plan.

The program includes up to three assessment and counseling sessions per issue. Sessions can be done in person, on the phone or by video.

Information piece to be emailed.

**Standard Insurance Company**

# Optional Colonial Life Products

## You have the option to purchase additional supplemental benefits:

### Short-term disability insurance

- Helps replace a portion of your income to make ends meet if you become disabled from a covered accident or covered sickness

### Accident insurance

- Helps offset unexpected medical expenses, such as emergency room fees, deductibles and co-payments that can result from a fracture, dislocation or other covered accidental injury

### Cancer insurance

- Provides benefits for treatments and services such as certain cancer screening tests, hospital confinement and surgical benefits, radiation, chemotherapy, transportation and lodging.

### Critical Illness insurance

- Supplements your major medical coverage by providing a lump-sum benefit that you can use to help pay the direct and indirect costs related to a covered critical illness

### Hospital Confinement Indemnity Insurance

- Provides Lump Sum Benefit for a covered hospital confinement to help pay both medical and not-medical expenses associated with the stay.

### Term life insurance

### Whole life insurance

100% of cost is paid by employee through payroll deductions

# Benefit Questions

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Google Doc: Questions / Answers

<https://docs.google.com/spreadsheets/d/191e14LkLzXk3X9YuDq2Bl5gYFjQ3sclB43VSdCL6FIM/edit?usp=sharing>

Brown & Brown of Connecticut

Sonia Kaminsky

[skaminsky@bbofct.com](mailto:skaminsky@bbofct.com)

203-687-8539

Any Time



Sheila Stoddard

[sstoddard@bbofct.com](mailto:sstoddard@bbofct.com)

860-665-8473

8:30 a.m. to 5:30 p.m. EST

Monday through Friday

Thomaston HR Questions

Kristen DiVenere

[hr@thomastonschools.org](mailto:hr@thomastonschools.org)

Thank you!

