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Eli\$ibility 3nd Enrollment

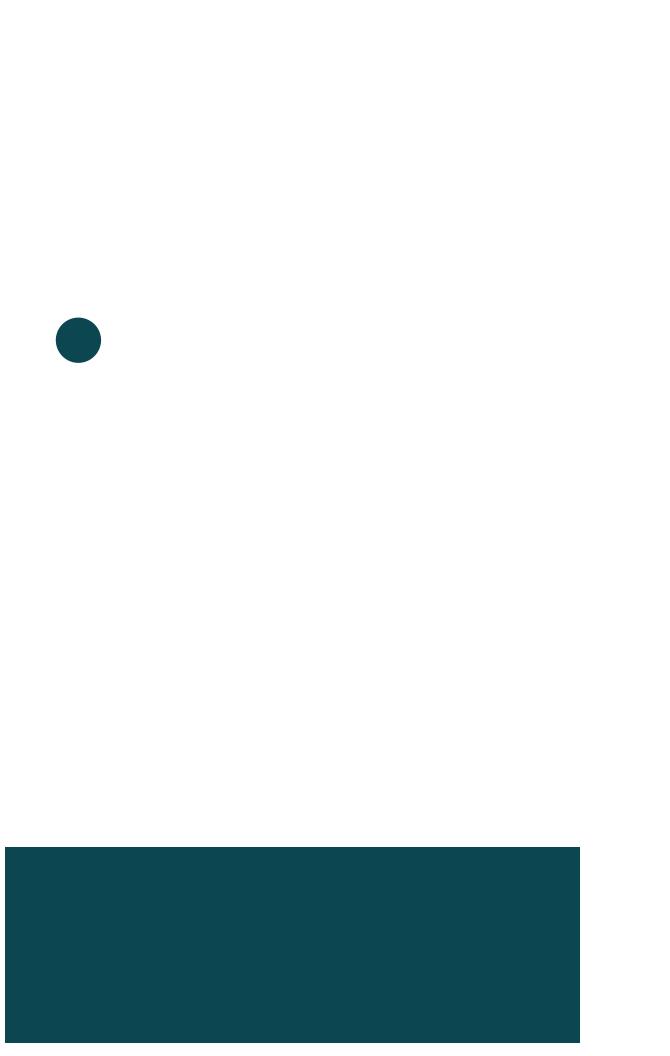
Important Information

Prescription Dru\$s

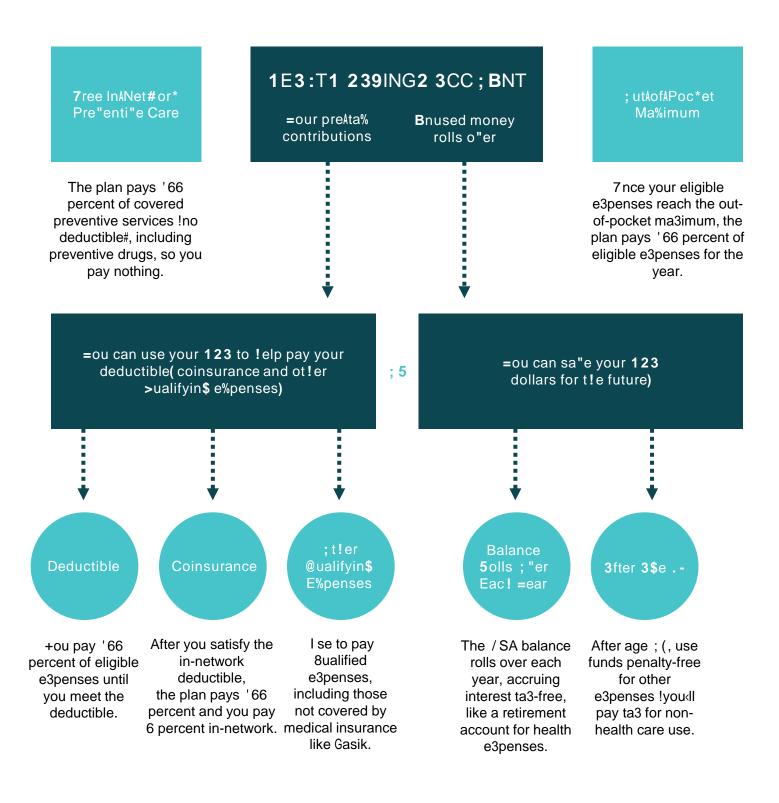
Prescription drug coverage provides a benefit that is important to your overall health, whether you need a prescription for a short-term health issue like bronchiti

Emergency Room

Emergency rooms are designed to treat serious, life-threatening incidents, like a head injury, heart attack, severe burn, choking, breathing problems, deep wound, injury to neck or spine, to name a few examples. If you visit the emergency room when you are not having an emergency, you'll have a 15' T57A0717' T4A2



1ealt! 2a"in\$s 3ccount





"ependent care fle3ible spending accounts! "C SAs# enable you to set aside some of your pay, on a pre-ta3 basis, into an account to pay for eligible dependent care e3penses. .y setting aside money pre-ta3, which you would normally be spending post-ta3, you save between \$(percent and)6 percent on your everyday e3penses.

The dependent care SA covers child care e3pense while you are at work for children under age '* or other dependents who are incapable of self-care.

Ma*e contributions) +ou set aside pre-ta3 money through payroll deductions up to 40 S limits. or a dependent care SA, you must contribute no more than 1 (,666. Please note, if you are married and file a separate income ta3 return, the ma3imum you can contribute is 1\$, (66. "ependent care SA funds are available after theyeve been deducted from your paycheck.

Bse your funds) This plan allows you to pay for eligible out-of-pocket dependent care e3penses with pre-ta3 dollars. , ligible e3penses may include daycare centers, in-home child care, and before or after school care for your dependent children under age '*. 7ther individuals may 8ualify if they are considered your ta3 dependent and are incapable of self-care.

Don8t lose your funds) The money you set aside must be used during the plan year L it will not roll over into your account. Any money left in the account will be forfeited. +ou have until ? arch to turn in receipts for reimbursement.

Dental

: ife Insurance

4f you have loved ones who depend on your income for support, having life and accidental death and

Disability Insurance



"isability plans, offered through Gincoln inancial Jroup, are intended to replace a portion of your income if an illness or inlury leaves you unable to work. "isability benefits are sublect to applicable ta3es and are offset by any other income or disability benefits you receive !or are eligible to receive#, such as Social Security and workers< compensation.

: on \$ATerm Disability

Gong-Term "isability !GT" # coverage pays you a certain percentage of your income if you can/kt work because an in-Bury or illness prevents you from performing any of your Bob functions over a long period of time. 4t/s important to know that benefits are reduced by income from other benefits you might receive while disabled, like workers/compensation and Social Security.

- ? onthly . enefit: Plan pays ; ; .; 2D of covered monthly earnings
- % ?a3imum ?onthly .enefit: 1>,**)
- senefits begin: After =6 days of disability
- ? a3imum Payment Period: Social Security & ational 0 etirement Age !changes based on disability date# 0

0The age at which the disability begins may affect the duration of the benefits.

3dditional Benefits

3ccident Insurance

Accident coverage is designed to help meet the out-of-pocket e3penses and e3tra bills that can follow an accidental inBury. 4ndemnity lump sum benefits through Gincoln inancial J roup are paid directly to you based on the amount of coverage listed in the schedule of benefits.

Critical Illness

Critical 4llness insurance, available through Gincoln inancial J roup, is designed to help you offset the financial effects of a catastrophic illness with a lump sum benefit if you or a covered dependent are diagnosed with a covered critical illness.

1 ospital Indemnity

/ ospital 4ndemnity coverage, available through Gincoln inancial Jroup, pays a benefit when you are admitted to the hospital for a covered stay. This coverage can compliment your health insurance to help you pay for the costs associated with a hospital stay. 4t can also provide funds which can be used to help pay the out-of-pocket e3penses your medical plan may not cover, such as coinsurance, copays and deductibles.



7ocus on Wellbein\$? Tim8s 2tory

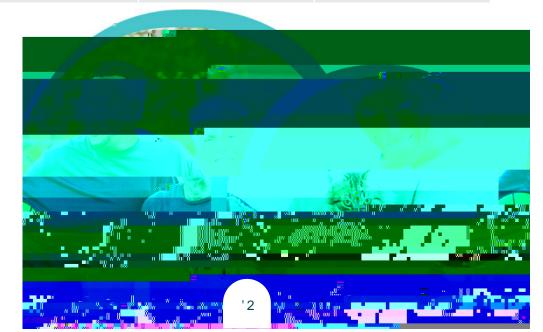
CCPS Employee Wellness Center Charlotte Technical Center Campus 18150 Murdock Circle, Buildin ! Port Charlotte, "lorida ##\$%8 Phone&'\$%1()*#+%%%



Cost of Co"era\$e < Per Pay

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Cost of Co"era\$e A Mont!ly

Lincoln Critical Illness - Monthly Rates						
Employee Rates						
Employee Age Range	\$10	\$10,000		000	\$30,000	
		Tobacco	Non Tobacco	Tobacco	Non Tobacco	Tobacco

Important Contacts

Insurance and Termination/5esi\$nation

Insurance and Termination/5esi\$nation of Employment Continued

5ETI5EMENT 3ND IN2B53NCE

The criteria for continuing coverage after retirement is the employee\s age at the retirement date.

4f the employee is under ; (, they may have the option to pay for their medical insurance until age ; (. A certified letter will be sent to the employee informing them of their options. 4f continuing, premium payments will be sent to the CCPS main office. or those electing this option, you will receive notification in the mail that your CCPS insurance will be terminating a month prior to turning ; (.

4f the employee retires at age; (, all insurances are automatically terminated.

4f the employee has covered their spouse or dependents who are under; (on their policies, the spouse or dependents may continue coverage under a C7.0A policy directly to the insurance vendors. A premium statement will be sent upon notification to the insurance vendors. Spouses and dependents can not continue coverage with the CCPS plan if the retiree is terminated.

Gong Term "isability and Gife 4nsurance are automatically cancelled. Oetirees do have the option to continue Gife 4nsurance on a direct pay basis. The re8uest for information must be made within *6 days of the termination date. or those electing to continue coverage until age; (, you will receive notification in the mail that your CCPS insurance will be terminating.

All retirees who continue to carry insurance through CCPS will also participate in the 7 pen, nrollment period.

Oetirees at age; (and older may elect the lorida State Oetiree . enefits Consortium! So.C#., which provides? edicare-eligible employees and their dependents with access to? edicare medical, dental, and vision benefits. or more information, please call So.C at '->**-;>;-6=>* or visit their website at: www.myfsrbc.bswift.com





Contact the person listed below for further information. & 7T,: +oudl get this notice each year. +ou will also get it before the ne3t period you can Boin a ? edicare drug plan, and if this coverage through Charlotte County Public Schools changes. +ou also may re8uest a copy of this notice at any time.

? ore detailed information about ? edicare plans that offer prescription drug coverage is in the <code>0?</code> edicare N +ouA handbook. +oudl get a copy of the handbook in the mail every year from ? edicare. +ou may also be contacted directly by ? edicare drug plans.



4n addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

+ou may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be sublected to retaliation if you choose not to participate.

4f you have 8uestions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact / uman 0esources at =) '-\$((-6>6>, select 2

Premium 3ssistance Bnder Medicaid and t!e C!ildren8s 1ealt! Insurance Pro\$ram (C1IP

4f you or your children are eligible for ?edicaid or C / 4P and youkre eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their ?edicaid or C / 4P programs. 4f you or your children arenkt eligible for ?edicaid or C / 4P, you wonkt be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the / ealth 4nsurance ?arketplace. or more information, visit www.healthcare.gov.

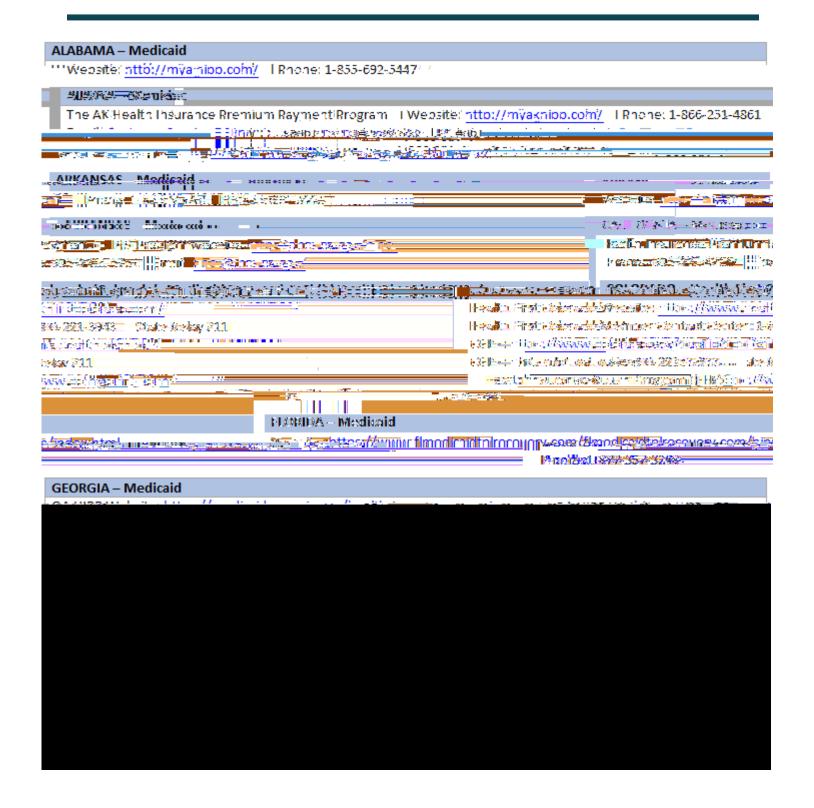
4f you or your dependents are already enrolled in ? edicaid or C / 4P and you live in a State listed below, contact your State ? edicaid or C / 4P office to find out if premium assistance is available.

4f you or your dependents are &7T currently

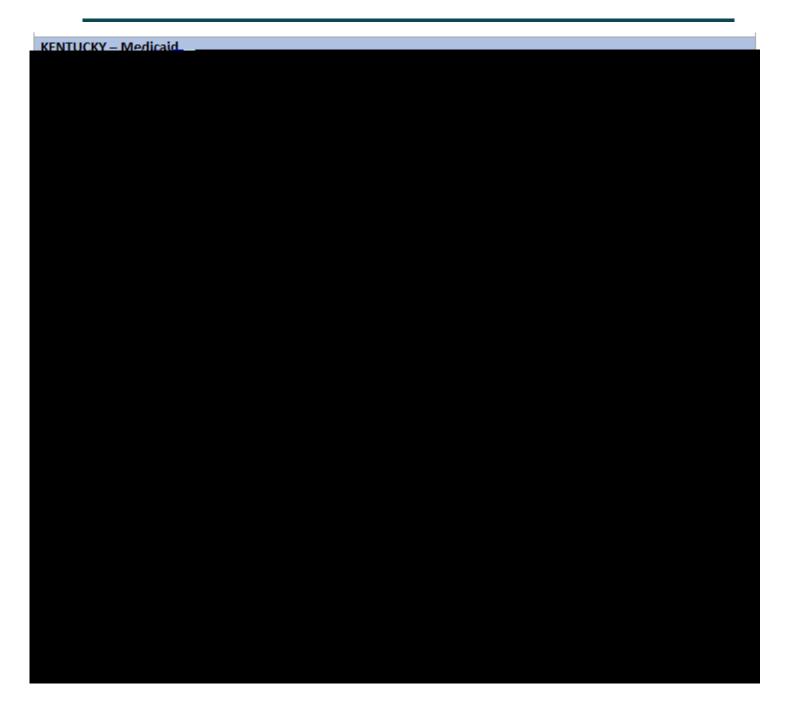
enrolled in ? edicaid or C / 4P, and you think you or any of your dependents might be eligible for either of these programs, contact your State ? edicaid or C / 4P office or dial '->22-V4" S & 7W or www.insurekidsnow.gov to find out how to apply. 4f you 8ualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

4f you or your dependents are eligible for premium assistance under ? edicaid or C / 4P, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you arend already enrolled. This is called a special enrollment opportunity, and you must resuest coverage within; 6 days of being determined eligible for premium assistance. 4f you have suestions about enrolling in your employer plan, contact the "epartment of Gabor at www.askebsa.dol.gov or call '->;;-)))-, . SA !*\$2\$#.

4f you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of 5uly *', \$6\$*. Contact your State for more information on eligibility.



Gegal & otices



Notes

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