

USG Open Enrollment for pre-65 retirees is October 28 to November 8, 2024

To enroll in your 2025 benefits!



Join a Live Online Session October 30!

Visit benefits.usg.edu to register for the information session to hear about the 2025 USG Open Enrollment changes.

- Explore benefits.usg.edu to prepare for Open Enrollment.
- REQUIRED: Complete your tobacco certification, or a surcharge will apply.
- Complete your elections by November 8 at oneusgconnect.usg.edu.

Highlights for 2025

Open Enrollment is your annual opportunity to look at your current coverage and consider other USG benefit options for the new year. Here's what to look for in 2025:

- A few changes. You'll see an increase to healthcare and dental plan premiums. There will also be changes to deductibles, out-of-pocket maximums, coinsurance and copays for all USG healthcare plans.
- A new plan offering! Beginning January
 1, 2025, you can choose to enroll in auto,
 home and renter's insurance through
 Farmers Insurance Choice® to protect
 your belongings.



Get ready to enroll

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Learn

Visit benefits.usg.edu to learn what you need to know about this year's Open Enrollment and register for the Open Enrollment information session.



Get Support

For benefits support, log in to oneusgconnect.usg.edu or call 1-844-587-4236 from 8 a.m. to 5 p.m. Eastern time, Monday through Friday.



Enroll

Visit the OneUSG Connect -Benefits website at oneusgconnect.usg.edu. Click Manage My Benefits to log in and enroll.



Download the Alight Mobile app

Scan the QR code to download the Alight Mobile app or go to alight.com/app or the App Store for an easy way to enroll on the go and access your USG benefits.

- · Enter "University System of Georgia."
- Select Login with your employer credentials and select your institution.



Programs for you



Total Health, Total You Program

Connect with an Anthem advocate by phone, chat or secure messaging. If you are an Anthem member in 2025, you will receive simplified and personalized support through the Total Health, Total You program. Anthem provides access to an advocate to help you navigate your healthcare — they'll connect you to the right care and resources, at the right time. All of this is included in your healthcare plan, at no additional cost to you or your family.



Connect to Anthem by downloading and registering via the Sydney App.



Pet Insurance

Remember, we offer you the opportunity to enroll for pet insurance through MetLife. You can create the plan you want, based on your pet's needs. Plus, MetLife offers wellness benefits for your pet. Visit metlife.com/getpetquote to enroll.



USG healthcare at a glance

You will see plan design changes across all four plans, shown in **bold** in the chart below. This chart is a summary and only shows in-network coverage. For complete details and plan premiums, review the 2025 Comparison Guide on **benefits.usg.edu**.

	ANTHEM CONSUMER CHOICE HSA ¹	ANTHEM COMPREHENSIVE CARE	ANTHEM BLUECHOICE HMO	KAISER PERMANENTE HMO
Coverage	In-network ²	In-network ²	In-network only	In-network only
Deductible (Single/Family)	\$3,200/\$6,400	\$1,500/\$4,500	None	\$100/\$200
Annual out-of-pocket maximum (Single/Family)	\$5,000/\$10,000 (\$9,200 ind. cap)	\$3,300/\$6,600	\$5,500/\$9,900	\$6,350/\$12,700
PCP required	No	No	Yes	Yes
Preventive care		Plan pa	ys 100%	<u>'</u>
Physician office visit/ specialist visit		\$25 copay/ \$50 copay	\$40 copay/ \$100 copay	\$40 copay/ \$75 copay
Urgent care	You pay 20% after deductible	\$50 copay	\$100 copay	\$75 copay
Inpatient hospital services		You pay 10% after deductible	\$1,000 copay	\$600 copay (after deductible)
Outpatient hospital services			\$600 copay	\$400 copay (after deductible)
Care in emergency room		\$300 copay, then you pay 10% after deductible	\$600 copay (ambulance: \$75 copay)	\$400 copay
PRESCRIPTION DRUGS				
Retail and Mail Order	Coinsurance After Deductible	Copay/Coi	nsurance	Copay/Coinsurance
Generic		You pay \$20 copay		\$15 copay; Non-Kaiser pharmacies: \$25 copay
Preferred brand	You pay 20% You pay 20% with \$50 min/ \$125 m		50 min/ \$125 max	\$45 copay; Non-Kaiser pharmacies: \$55 copay
Nonpreferred brand		You pay 35% with \$125 min/ \$250 max		\$75 copay; Non-Kaiser pharmacies: \$85 copay
Specialty	Limited to a 30-day supply for new prescriptions			
Generic Preferred brand Nonpreferred brand	You pay 20%	You pay 20% with \$85 max You pay 20% with \$175 max You pay 35% with \$250 max		You pay 30% with \$250 max
Pharmacy annual out-of-	pocket maximum			
Per Member	The annual out-of- pocket maximum amounts will be combined with the medical out-of-pocket maximum amounts.	\$2,000/member (capped at \$6,000)		\$1,750 Single/ \$3,500 Family

 $^{^{\}mbox{\tiny 1}}\mbox{All}$ services in the Consumer Choice HSA are subject to deductible except preventive care.

²The Consumer Choice HSA and Comprehensive Care plans both offer in-network and out-of-network coverage.

³Your formulary can change throughout the year, so make sure to periodically check your medications against the approved drug list.

To check coverage and copay amounts and get information about medications, visit benefits.usg.edu.

You will see dental plan premium changes, shown in **bold** in the chart below. **Note:** If you are currently enrolled in USG dental or vision, you can change your coverage during Open Enrollment. If you are not currently enrolled in dental or vision coverage, you cannot add new coverage.

Your dental options	DELTA DENTAL BASE PLAN	DELTA DENTAL HIGH PLAN
	In-network	In-network
Annual maximum	\$1,000 per person*	\$1,500 per person*
Deductible (Single/Family)	\$50/\$150	\$50/\$150
Diagnostic/preventive services*	You pay 0%	You pay 0%
Basic benefit services	You pay 20%	You pay 20%
Major benefit services**	You pay 50%	You pay 20%
Orthodontia (child and adult)	You pay 100%	You pay 20%
Lifetime orthodontia maximum	N/A	\$1,000
Retiree Monthly Premiums		
Retiree only	\$36.86	\$45.56
Retiree + Child(ren)	\$70.04	\$86.56
Retiree + Spouse	\$73.74	\$91.08
Family	\$117.96	\$145.80

^{*}Preventive and diagnostic services do not count toward the annual maximum. **Benefit limits apply on full replacement of existing dentures or crowns.

Your vision coverage	EYEMED VISION		
	In-network	Out-of-network reimbursement	
Exam	\$10 copay	\$40	
Single vision lens	\$25 copay	\$40	
Frames contribution	\$150 allowance	\$58	
Contact lenses	\$150 allowance	\$130	
Medically necessary contact lenses	Paid in full	\$210	
Retiree Monthly Premiums			
Retiree only	\$6.90		
Retiree + Child(ren)	\$13.12		
Retiree + Spouse	\$15.52		
Family	\$20.34		

Enrollment Checklist





Required: Surcharge certification

If you are enrolled in a USG healthcare plan, you are required to complete a tobacco certification each year during Open Enrollment, or you will be charged the monthly surcharge.

2025 TOBACCO SURCHARGE					
NOTE: If you don't certify, you will be charged the monthly surcharge.					
Retiree	Spouse	Children 18+ (one surcharge for all children who use tobacco)			
\$150/month	\$150/month	\$150/month			

Trying to quit?

Learn more about tobacco cessation programs and resources at **benefits.usg.edu**.



Update your beneficiaries

While you are enrolling, check to see if you have the correct beneficiaries on file for your life insurance and retirement plans. It's simple to do and an important task to complete each year that ensures the right person or people will receive your benefits in the event of your death.

