

**COUNTY BOARD OF HEALTH
POLICY # HR-03105
HEALTH INSURANCE POLICY**

Approval:		<i>1/7/2020</i>
	Pamela Logan, District Health Director	Date



Public Health
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1.0 PURPOSE

This policy contains guidelines for the State Health Benefit Plan and the insurance benefits it offers to eligible employees of the County Board of Health.

2.0 AUTHORITY – The County Board of Health (CBOH) Health Insurance Policy is published under the authority of CBOH and in compliance with the following:

- 2.1** Official Code of Georgia Annotated (OCGA), Sections: (O.C.G.A. §45-18-1 et seq. - State Employees' Health Insurance Plan)
- 2.2** State Personnel Board Rule 478-2

3.0 SCOPE

This policy applies to eligible employees (as defined in this policy) of the County Board of Health.

4.0 POLICY

The policy of the County Board of Health is to make all eligible employees aware of available insurance options.

5.0 DEFINITIONS

- 5.1 CBOH** – County Board of Health

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5.2 DPH – Georgia Department of Public Health

5.3 HR – Human Resources

6.0 RESPONSIBILITIES

6.1 It is the responsibility of the eligible employee to enroll in the benefit plans offered during the Open Enrollment Period or when they begin work/pay status.

6.2 It is the responsibility of the eligible employee to make changes to their coverage due to a qualifying life event.

7.0 PROCEDURES

7.1 ELIGIBILITY

7.1.1 Employees who consistently work a minimum of thirty (30) hours per week are eligible to participate in the State Health Benefit Plan.

7.1.2 Retired employees who were enrolled in the State Health Benefit Plan at the time of retirement are eligible to continue coverage.

7.1.3 Employees who work part-time or no more than (29) hours per week or whose employment is student, seasonal, intermittent or intended for only a very limited duration are NOT eligible to participate in the State Health Benefit Plan.

7.2 ENROLLMENT & CHANGES

7.2.1 Eligible employees have the opportunity to enroll in the State Health Benefit Plan upon employment with CBOH. Coverage normally begins on the first day of the month following one complete month of employment. If employees are not in work status or on paid leave on this date, coverage begins on the date of return to work/pay status.

NOTE: Employees transferring to a CBOH or other State agencies without a break in service keep the same health insurance upon transfer.

7.2.2 Eligible employees have the opportunity to enroll in the State Health Benefit Plan or make changes to coverage during the Open Enrollment period each year.

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- 7.2.2.1 Open Enrollment is a designated period of time no earlier than October 1 and ending no later than November 30th. Exact dates are announced each year.
- 7.2.2.2 Enrollment and changes made during the Open Enrollment period become effective on January 1. If employees are not in work status or on paid leave on this date, coverage begins on the date of return to work/pay status.
- 7.2.2.3 Eligible employees can enroll or make changes to coverage at other times **ONLY** when a qualifying event occurs, such as a change in family status (marriage, birth, adoption, etc.) For specific information, employees should contact the State Health Benefit Plan at www.myshbpga.adp.com.

7.3 EXTENDED COVERAGE

- 7.3.1 The Federal Consolidated Omnibus Budget Reconciliation Act (COBRA) and the State Law regarding state employees' health insurance may entitle employees and their qualified dependents to extended health insurance coverage when coverage would otherwise end. Employees or qualified dependents should contact the HR for information regarding extended coverage.

8.0 REVISION HISTORY

REVISION #	REVISION DATE	REVISION COMMENTS
0	October 28, 2019	Initial Issue

9.0 RELATED FORMS

None