

Instructions for Enrolling in Health Insurance

Please read the information below before completing the [Carolina Rewards Orientation Worksheet \(CROW\)](#).

Employee Information

- Enter your given, legal name as it appears on your SSN Card.
- Enter the email address that you check most often. Upon receipt, the information will be entered into MyBenefits, SC Public Employee Benefits Authority (PEBA) Insurance Benefits electronic enrollment system. An email will be sent by SC PEBA to you to review and approve the transaction. Failure to acknowledge this email and take action may result in a delay of enrollment and/or missed opportunity to elect benefits as a new employee.
- Enter the county of your mailing address.
- Enter the date you will report to work as a new employee in the Date of Hire field.

Tobacco Certification

- If you enroll in a state health plan, you must certify your tobacco user status for yourself as well as all covered dependents.

Health Plan Election

- Spouse and children must be listed in Section 10 to be covered.
- Basic Life Insurance and Basic Long Term Disability are included automatically with Health Plan coverage, at no cost to you. Be sure to designate a beneficiary for Basic Life Insurance in Section 10. If you fail to designate a beneficiary, it will default to your estate.

Dental Plan Election

- Spouse and children must be listed in Section 10 to be covered.

Optional Life Insurance Election

If you enroll in the State Health Plan or TRICARE Supplement plan, Optional Life Insurance is in addition to Basic Life Insurance (\$3K) that USC provides at no cost to you. Be sure to designate a beneficiary in Section 11.

- You may request a level greater than three times your annual base salary, up to \$500,000, by submitting medical evidence of insurability and an [Active Notice of Election](#) for the total amount of coverage requested. The Active Notice of Election (NOE) should be submitted with the CROW, which will be held for the approval from the life insurance carrier. For example, if your base salary is \$42K, you can elect up to \$120K without medical evidence on the USC CROW– three times your salary in \$10K increments. If you would like to elect a total of \$300K, you will also need to complete the Active NOE: Sections 1 – 19, 26, sign and date. In this example, section 26 will indicate \$300K of optional life coverage.
- If you select to pay premiums with pre-tax dollars in Section 1 of the CROW, you must make the medical underwriting request within 31 days of your date of hire. An Evidence of Insurability form must be completed and submitted to Minnesota Life within 31 days of your date of hire.

The effective date for the higher level will be the first of the month after approval. Contact the Benefits Office at 803-777-6650 to assist with the [Evidence of Insurability Process](#).

- If you select to pay premiums with post-tax dollars in Section 1 of the CROW, you may apply for additional coverage, up to the maximum, throughout the year by submitting a completed Evidence of Insurability form to Minnesota Life. The effective date for the higher level will be the first of the month after approval.
- For employees age 70 and older, PEBA's system will convert the amount and the premium to the age 70 level, which you will be able to review in MyBenefits.
- [Premiums](#) are based on your age as of the previous Dec. 31.

Dependent Life Spouse Insurance

If you enroll in Optional Life Coverage, you may elect more than \$20K in Dependent Life Spouse Coverage with medical evidence of good health, but no more than \$100K and not to exceed 50% of your level of Optional Life Coverage. Follow the same procedures as outlined under Optional Life, above, for submitting evidence of insurability and an [Active Notice of Election](#) for the total amount of coverage requested.

- You may not cover a former spouse in Dependent Life Spouse Coverage.
- You are the beneficiary.
- [Premiums](#) are based on your age as of the previous Dec. 31.

Dependent Life Child(ren) Insurance

You can elect Dependent Life/Child(ren) for any of your eligible children. Children ages 19-24 must be full-time students or certified as incapacitated to be eligible for Dependent Life. Children older than 24 must be certified as incapacitated to be eligible for Dependent Life.

- If your spouse is also a state employee, you cannot both cover the same child.
- You are the beneficiary for all covered children.

Supplemental Long Term Disability (SLTD)

[Premiums](#) are based on your age as of the previous Jan. 1 and salary as of date of hire. PEBA is notified of salary changes annually and premiums are adjusted each Jan. 1 based on salary as of the previous Oct. If enrolling in the State Health Plan or TRICARE, Supplemental Long Term Disability is in addition to Basic Long Term Disability that USC provides at no cost to you.

Dependent Coverage Information

1. List your spouse's information first - REQUIRED. Because of coordination of benefits, your spouse's information is required even if the spouse is not covered.
 - Indicate whether the spouse is also a state employee covered by a participating employer.
 - All requested information is required, including spouse's birth date.
 - List the given legal name as it will appear on a claim.
 - Relationship: list as wife, husband, ex-wife, ex-husband to indicate gender. **Do not enter "spouse."**
 - [Supporting documentation](#), e.g., marriage license, **must be attached to the USC CROW.**
2. List all children to be covered. If not listed, they will not be covered.
 - Follow the same procedure for children as for the spouse.

- List the given legal name as it will appear on a claim.
- Relationship: list as son, daughter, niece, nephew, etc., to indicate gender. **Do not enter “child.”**
 - If child is older than 19 and enrolled in Dependent Life-Child, indicate whether a full-time student or incapacitated. If incapacitated, complete an [Incapacitated Child Certification Form](#) and return it with the paperwork.
 - If child is age 26 or older, child can only be covered if incapacitated. Check incapacitated on the USC CROW Form and complete the [certification process](#).
- **Supporting documentation**, e.g., birth certificate, **must be attached to the USCCROW.**

Beneficiary Designation

- List a beneficiary for Basic Life, if health coverage is elected.
- List a beneficiary for Optional Life, if this coverage is elected.
- List each beneficiary’s full legal name.
- List relationship as wife, husband, daughter, son, etc. Do not list “spouse” or “child.” An estate or trust has no relationship.
- Indicate whether each beneficiary is a primary or contingent beneficiary. Otherwise, all listed beneficiaries will be considered primary.

MONEYPLUS ENROLLMENT

In addition to health insurance, if you are enrolling in a health savings account, or spending account(s), please follow the enrollment instructions below to complete the MoneyPlus enrollment form:

The **Health Savings Account (HSA)** is only available to employees enrolled in the State’s Savings Plan, a qualified high deductible health plan.

- To participate in a HSA, you must:
 - Enroll in the State’s Savings Plan, a high deductible health plan;
 - Complete the top section of the [MoneyPlus Enrollment Form](#) and box “A”
 - Open an [HSA bank account online with Optum Bank](#) to receive your contributions. The State of SC account number is 0024700000000000 (00247 followed by 10 zeroes).

Note: If both spouses contribute to an HSA, and one of them has family coverage (employee + spouse, employee + child(ren) or full family coverage), the combined HSA contributions cannot exceed the IRS-allowed limit for family coverage. If both spouses have single coverage (employee-only coverage), each may contribute up to the IRS-allowed limit for single coverage.

In order for a new employee to sign up for a **Limited-Use Medical Spending Account (LMSA)**, you must also enroll in the State’s HSA. The LMSA can only be used for out of pocket dental and vision care expenses that are not covered by the Savings Plan.

- To participate in a LMSA, you must:
 - Enroll in the State’s HSA;
 - Complete the top section of the [MoneyPlus Enrollment Form](#), box “A” and box “B”.

Medical Spending Account (MSA) is used to reimburse out-of-pocket medical expenses that are incurred by you and/or your eligible dependents during the plan year.

- To participate in MSA, you must:
 - Complete the top section of the [MoneyPlus Enrollment Form](#) and Box “C”.

Dependent Care Spending Account (DCSA) is used to reimburse dependent care expenses that are typically incurred while an employee is working, such as day care services and after school care.

- To participate in DCSA, you must:
 - Complete the top section of the [MoneyPlus Enrollment Form](#) and Box “D”. If you are a **Highly Compensated Participant** (earns \$120,000 or more) and electing DCSA, you can only set aside **up to \$1,700 annually to pay dependent-care expenses**.

ADDITIONAL INSURANCE PROGRAMS AT USC

If you would like to supplement state insurance benefits with [voluntary insurance programs](#) offered at USC by Colonial Life Insurance, please follow the instructions below:

- To enroll in [Cancer Coverage](#), complete the [Enrollment Form](#)
- To enroll in [Hospital Confinement Coverage](#), complete the [Enrollment Form](#)
- Complete the [HIPAA UW Authorization](#)
 - **Mail the enrollment form(s) and HIPAA Authorization directly to Colonial Life Insurance:**
Colonial Life Enrollment
ATTN: Mike Linebaugh
1101 Javelin Court
Columbia, SC 29212
 - Do not send a copy to the USC Benefits Office.
- Complete the [Authorization for Payroll Deduction](#) form and return it to your HR Contact to be scanned to the Benefits Dropbox with the rest of your benefit enrollment documents.

OTHER IMPORTANT INFORMATION – READ CAREFULLY

- Please be sure to read the [Notice of Special Enrollment Rights](#) which contains important information regarding special enrollment opportunities.
- Additionally, [Employee Rights and Responsibilities](#) contains important information regarding the Family and Medical Leave Act (FMLA).
- **If you elect State Health Insurance:**
 - The carrier generates the health ID card(s) and they will be sent to the address provided on the Carolina Rewards Orientation Worksheet
- **If you elect State Dental Insurance:**
 - A State Dental Plan ID card will be issued to you from the USC Benefits Office. Upon receipt, write your BIN on the card. The [BIN](#), or Benefits Identification Number, is issued by SC PEBA. The dental plus carrier will mail ID cards directly to you, if elected.