

City of Guyton, Georgia City Council Regular Meeting September 9, 2025 at 7:00 P.M.

Guyton City Hall 310 Central Boulevard Guyton, GA 31312

AGENDA

- 1. Call to Order
- 2. Invocation and Pledge of Allegiance
- 3. Consideration to Approve the Agenda
- 4. Consideration to Approve the Minutes
 - © 8/12/25 Regular Meeting
- 5. Reports from Staff and Committees

\odot	Police Department	Kelphie Lundy
0	Fire Department	Clint Hodges
0	Public Works/Water/Sewer	EOM
0	Planning and Zoning	Lon Harden
0	Industrial Development	Lon Harden
0	Historical Commission	Lucy Powell
0	Leisure Services	Lula Seabrooks
0	Downtown Development	Miller Bargeron, Jr.

- 6. Public Participation
 - Pastor Scott Stringer Presentation regarding 2025 Christmas Tree Lighting
- 7. Old Business
- 8. New Business
 - A. Consideration to approve variance to install an LED "blade" sign at Parcel G0010040 (114 Central Blvd)
 - B. Consideration to approve the Anthem renewal quote for the City of Guyton
 - C. Discussion regarding roll-over of DDA FY25 funds for \$8,549.25

- D. Consideration to approve Alexander Farms water agreement
- 9. Dates to Remember
 - **Wednesday, September 17, 2025, Downtown Development Authority Meeting at 10:00 A.M. Guyton City Hall, 310 Central Boulevard, Guyton, GA 31312**
 - Thursday, September 18, 2025, Bingo from 11:00 A.M. until 12:00 P.M. Leisure Services Room, 505 Magnolia Street, Guyton, GA 31312
 - Tuesday, October 9, 2025, Guyton City Council Meeting at 7:00 P.M. --- Guyton City Hall, 310 Central Boulevard, Guyton, GA 31312
- 10. Consideration to adjourn

Rules of Decorum for All Meetings

The purpose of the Rules of Decorum is to foster an atmosphere of civil and courteous discourse, even and especially when discussing contentious topics, at all meetings held by the City of Guyton.

(A) General rules applicable to all (Mayor and City Council, Staff, Members of the Public)

- 1) Each speaker should refrain from personal attacks, foul or abusive language, and will maintain a civil and courteous manner and tone.
- 2) During designated times for members of the public to speak, members of the public will be permitted 10 minutes to discuss topics. After 10 minutes of discussion on a topic, members of the public will be limited to 3:00 minutes speaking time. The Mayor or presiding officer shall have the authority to grant additional speaking time. Notwithstanding the foregoing, during public hearings involving zoning decisions, members of the public will have no less than 10 minutes to speak in favor, and no less than 10 minutes to speak in opposition.
- 3) Members of the audience will respect the rights of others and will not create noise or other disturbances that will disrupt or disturb persons who are addressing the Mayor and Council or Committee or Board or Commission, or members of those bodies who are speaking, or otherwise impede the orderly conduct of the meeting.

(B) Additional Rules for Mayor and City Council, Committees, Boards or Commissions

- 1. The Mayor and City Council, Committees, Boards, Authorities, or Commissions will conduct themselves in a professional and respectful manner at all meetings.
- 2. Questions for staff or individuals or other Council, Committee, Board or Commission members will be directed to the appropriate person to answer. Members of the Mayor and City Council, Committees, Boards, Authorities, or Commissions will attempt to answer or address questions presented one at a time without attempting to talk over another member.
- 3. Members of the Mayor and City Council, Committees, Boards, Authorities, or Commissions are always free to criticize or question policies, positions, data, or information presented. However, members of the Mayor and City Council, Committees, Boards, Authorities, or Commissions will not attack or impugn the person presenting.

(C) Enforcement

The Mayor or presiding officer has the authority to enforce each of the Rules of Decorum regarding members of the public. If any Rule is violated, the Mayor or presiding officer will give the speaker a warning, citing the Rule being violated, and telling the speaker that a second violation will result in a forfeiture of the right to speak further. The Mayor or presiding officer also may have the offending speaker removed from the meeting if the misconduct persists. The Mayor or presiding officer shall not have any power under this provision regarding a Council, Committee, Board or Commission member.

City of Guyton, Georgia

Established 1887

Working Together to Make a Difference

City of Guyton Variance Application

Applicant Name: Marcus Peterson - Owner Bolts + Bullets, UC
Address: 114 Central Blvd. Guyton Phone: 301-1110-0523
Email: Marcus @ Bolts And Bullets.com
Address or Location of Property: 114 Central Blvd., Guyton, GA 31312
In order that the general health, safety and welfare of the citizens may be preserved, and substantia justice maintained, I/we the undersigned request in connection with the property hereinafter described:
Tax Map Parcel Number: 60010040 Number of Acres 0.37
Present Use of Property: Retail. ZOORD C-1.
Proposed Use of Property: Same. Zoned C-1.
The subject property is described as follows: <u>Conumercial Refaul Location</u> .
VARIANCE: Describe the unusual conditions of the property pertaining to size, shape, location or topography, which justify the variance (attach additional pages if necessary): SEE AHOCHED LEHER DESCRIPTIONS - THE VARIANCE request-

Bolts and Bullets, LLC requests a variance to be permitted to install a LED 'blade' style sign on the exterior of our business located at 114 Central Blvd to facilitate effective advertising and awareness to the public that passes through downtown Guyton. Every day in the store we hear, "I had no idea you were here," though we've been in the location now for almost two years. We regularly hear very similar sentiments from our neighboring business owners as well. We have concluded that nobody sees Guyton – meaning people drive through the historic downtown district and completely ignore it as a block of broken-down old buildings that have nothing to offer. Bolts and Bullets wants to combat that problem, not only for the sake of our business but also for all Guyton businesses as well as the city itself. This simple sign can serve as an advertising platform for city and community events, other downtown businesses, and principally, our business.

According to the current city Ordinances and communications to the sign company, the proposed sign does not meet the following:

- "Since it will be an LED sign, they can animate it to do anything, it can't say "Stop",
 "Go", "Slow", "Danger", etc
 - We can agree not to use any visuals including messages as written above.
 The sign will display current events, sales, business, and information.
- Displays flashing or intermittent lights for less than 5 seconds.
 - We can agree to ensure that no single image, flashing or intermittent light is displayed for less than 5 seconds.
- "I would also like to know the height above the ground"
 - o The sign is intended to be installed at the second-floor level above the currently installed window coverings.
- Section 913 Setbacks states "No sign shall overhang any public right-of-way (sidewalk) or public street.
 - o Unfortunately, the only viable location for the sign, in order to facilitate 2-way viewing, places the sign above the sidewalk.
- Section 919 (14) states "Outdoor advertising or separate use signs that contain alphanumeric characters, graphics, or symbols defined by a small number of matrix elements using different combinations of light-emitting diodes (LED's) are prohibited
 - O We would like a variance to this ordinance. The best method of sign advertising is through the use of LED. This method will allow us to keep the content displayed on the sign current and relevant while not forcing us to create new signage. The information displayed will never be out of date.

Adjacent Properties:

- 202 Central Blvd. Sweats Pharmacy LLC.
- 112 Central Blvd. Malcolm & Linda Edwards
- 109 Lynn Bonds Guyton Christian Church
- 110 Lynn Bonds Renne Klock & Deborah Arnold
- 104 B Lynn Bonds John Black
- 115 W Central Blvd. JAMR Properties LLC
- 113 W Central Blvd.
 City of Guyton





PO Box 99 Guyton, Georgia 31312 Telephone – 912.772.3353 • Fax – 912.772.3152 www.cityofguyton.com Working Tegether to Make a Difference Mayor Russell Deen City Manager Meketa Brown City Clerk Fabian M. Mann

Date Received:	Date Issued:	Permit#:	Permit Fee:	
Map/Parcel Number: G001	0040 Old Map/	Parcel Number:	Zoning: C-1	
Setbacks: FR_	SISS	Flood Zone: NO	Wetlands Present: Yes_	No_
Project Address:	114 Central Blvd Guyto	n, GA Lot	Unit#:	ç
Development:	n/a	.38 Lot Size: <u>acres</u>	Power Company: GA po	wer Co.
New Construction - Ren	model Addition Access	ory Building 🗆 Electric	al 🗆 Plumbing 🗆 Mechanical (□ Fence □ Demolitio
□ Other			Project Valuation:	1360000
DESCRIPTION OF WO	ORK: 4'x4' 9mm double sided	Cirrus blade style EN	AC	c
# Dwellings:	# Floors:	# Bedrooms:	#Baths:	
Building Area (Sq. Ft.):	* 16 Heated Are	a (Sq. Ft.):	Unheated Area (Sq. Ft.):	
Type Roofing:	Foundation:		Exterior Wall Covering:	
CLASS OF WORK:				
■New Construction □ E	xisting Structure	t 🗆 Addition	□ Alteration □ Repair	□ Remodel
□ Other:				
CONTRACTOR / OWI	NER INFORMATION:			
Owner:	Guyton Mercantile LL	.C Contractor:_	e .	TBD
Mailing Address: 4 Cen	tral Blvd	Mailing Add	ress:	
	301*660*0523		ne:	
Work Phone:		State/Local I	License #:	
Email Address:	marcus@boltsandbulle	ts.com Email Addre	SS:	
£				

SUB-CONTRACTOR INFORMATION:

Electrical:	License Number:
Mailing Address:	Contact Phone:
Engineer/Architect:	License Number:
Mailing Address:	Contact Phone:
Plumber:	License Number:
Mailing Address:	Contact Phone:
Mechanical:	License Number:
Mailing Address:	Contact Phone:
Building Inspector:	Building Inspector Signature:

*All applications shall have two sets of drawings that are legible, two site plans that indicate all other structures, septic tank, and drain field areas and well locations along with distances from all property lines, an energy check sheet (ResCheck, etc), any dwelling that require a septic system will need approval from Effingham County Health Department.

*NOTE: If any inspections are failed, re-inspect fees will be required to be remitted prior to the issuance of the Certificate of Occupancy or Certificate of Completion.

Applicant: Courtney Aguilar, Cirrus LED caguilar@cirrusled.com 502-565-8465

Bolts & Bullets LLC

Install

Project ID:





Cirrus





31312

Guyton

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- 113 W Central Blvd.
 City of Guyton



Sec. 915. Resistance to wind pressure.

Freestanding signs shall be capable of withstanding horizontal wind pressure amounting to 30 pounds per square foot. In assuming or determining the pressure on any sign, the wind shall be assumed to be blowing from the direction which will produce the maximum stress.

Sec. 916. Reserved.

Reserved.

Sec. 917. Maintenance.

Whenever a sign becomes structurally unsafe or endangers the safety or well-being of the building or the general public, the Zoning Administrator shall order that such sign be brought into compliance with appropriate codes and ordinances or removed. Such order shall be complied with within ten days of the receipt thereof by the person owning or using the sign or the owner of the building or premises on which such unsafe sign is affixed or erected.

Sec. 918. Temporary portable signs.

- a) *Inspection*. Any temporary portable electric signs shall further require an electrical inspection to ensure a proper connection to a power source. The inspection shall occur upon obtaining the permit.
- b) *Number of Signs*. Only one temporary portable electric sign shall be permitted for each business location, and such sign shall be located in such a manner so as not to interfere with the visual clearance along any highway, street or road or to interfere with the visual clearance of adjoining properties or businesses.
- c) Display Period; Waiting Period Between Permits. A temporary portable sign shall not be redisplayed at a business location until 60 days has passed since the last permit was issued.
- d) Copy Size Requirements. The copy shall not exceed 20 square feet per sign face. The copy shall be restricted to three lines of uniform sized lettering between eight and four inches in height. The copy shall be securely fastened to the sign face and neatly maintained to appear as initially designed and placed

Sec. 919. Outdoor advertising or separate use signs.

To preserve and promote the public health, safety, and welfare of the citizens of Guyton, Georgia, to maintain and enhance the visual environment, and to preserve the right of citizens to enjoy Guyton's scenic beauty, to improve pedestrian and traffic safety, and to minimize the possible adverse effect of outdoor advertising or separate use signs on nearby public and private property, the following regulations shall govern the location of such signs within the City of Guyton:

(1) An outdoor advertising or separate use sign may be located on any property located in commercial or industrial zoning district in addition to any other freestanding sign authorized by this article so long as such sign complies with the pertinent provisions of the City Code.

- (2) Outdoor advertising or separate use signs are allowed on parcels fronting state or federal highways in commercial, industrial, or mixed use districts only. Such signs are limited to 480 square feet in sign area with dimensions not exceeding 12 feet in height or 42 feet in width.
- (3) Outdoor advertising or separate use signs are allowed on parcels adjacent to streets other than state or federal highways in commercial and industrial districts only. Such outdoor advertising or separate use signs are limited to 400 square feet in sign area per face, with dimensions not exceeding 12 feet in height and 25 feet in width.
- (4) Outdoor advertising or separate use signs shall be erected to a height of no more than 50 feet where located adjacent to state and federal highways and no more than 30 feet when located adjacent to other streets.
- (5) All portions of a sign face and support members of any outdoor advertising or separate use sign shall be set back from all buildings, structures, and property lines in compliance with the setback requirements of this Code applicable to the zoning district where the sign is located.
- (6) Only one outdoor advertising or separate use sign shall be allowed per platted lot. No outdoor advertising or separate use sign shall be placed on any residentially zoned lot which contains any freestanding sign. Outdoor advertising or separate use signs shall be no less than 1,000 feet apart, measuring from the two closest points and only one sign face shall be allowed to face the same direction per location. This allows back-to-back or "V" formation signs but prohibits two signs side-by-side or over-and-under, facing the same direction. The faces of a sign constructed in the form of a "V" shall not exceed 45 degrees.
- (7) No outdoor advertising or separate use sign or part thereof, shall be erected, used, or operated or maintained:
 - a. Within 150 feet of the nearest edge of the right-of-way of another intersecting right-of-way.
 - b. Within 200 feet of any church, temple, mosque, place of worship, school, cemetery, or public park.
 - c. Overhanging a public right-of-way or a private road or drive.
 - d. Within 100 feet from any residentially zoned area.
- (8) Sign illumination shall not cause beams or rays of light to be directed to a roadway or adjacent properties. Flashing illumination such as, without limitation, flashing, running, or sequential lights are prohibited except as expressly provided herein.
- (9) Outdoor advertising or separate use signs shall be prohibited in areas where no roadway of any kind currently exists. Outdoor advertising or separate use signs shall only be permitted on roadways which are currently functioning as a bona fide roadway and are under the care and control of the Georgia Department of Transportation, Effingham County, Georgia, or under municipal control.

- (10) The following outdoor advertising or separate use signs are expressly prohibited unless specifically stated otherwise in this article:
 - a. Signs employing movement, including, but not limited to, changeable copy signs, pennants, flags, banners, streams, propellers, discs, and search lights.
 - b. Signs that include lights which flash, blink, or turn on and off intermittently, but not including time and temperature signs.
 - c. Signs employing direct, indirect, internal, flashing, or other illumination with light sources or reflectivity of such brightness that constitute a hazard to ground or air traffic or a nuisance, as determined by the City Manager.
 - d. Inflatable signs, including, but not limited to, balloons.
 - e. Roof billboards which are erected or painted on a roof or which extend in height above the roofline of the building on which the sign is erected.
 - f. Any sign which may be confused with or obstruct the view of any authorized traffic sign or signal, obstructs the site distance triangle at any street or highway intersection, or extends into the public right-of-way.
- (11) Extrusions beyond the face of any outdoor advertising or separate use sign, excluding aprons, are prohibited.
- (12) There shall be an initial inspection of outdoor advertising or separate use signs and reinspection every five years.
- (13) Trees may be cut, trimmed, or pruned in locating, erecting, or maintaining any outdoor advertising or separate use sign provided a tree removal permit is issued by the City.
- (14) Outdoor advertising or separate use signs that contain alphanumeric characters, graphics, or symbols defined by a small number of matrix elements using different combinations of light-emitting diodes (LEDs) are prohibited.
- (15) Each outdoor advertising or separate use sign shall have attached thereto a legend identifying the agent or agency responsible for the erection and maintenance of such sign. Such legend shall set forth the permit number issued by the Zoning Administrator for such sign.
- (16) Each outdoor advertising or separate use sign shall constitute a self-supporting structure erected on one pole permanently attached to a concrete foundation. The foundation shall be designed to carry the weight and windload of the sign in the soil in which it is placed. The sign's pole and supporting apparatus shall be fabricated only from painted or galvanized steel or metal. No portion of the supporting structure for the sign shall be visible above the advertising display area.
- (17) Every outdoor advertising and separate use sign, including its supports, braces, guys, and anchors, shall be maintained in a safe, presentable, and good structural material condition at all times, which includes the repair or replacement of defective parts, painting, repainting, cleaning, and other acts required for the maintenance of

- said sign. The surrounding premises of each sign shall be maintained in a clean, sanitary, and inoffensive condition and free and clear of all obnoxious substances, rubbish, and weeds.
- (18) The advertising or copy area shall be replaced periodically to maintain good appearance. When the sign displays no advertising copy, its face shall continue to have a tight, closed, or solid surface concealing the sign's supporting apparatus and shall be of a uniform color.

ARTICLE X. ENFORCEMENT AND ADMINISTRATION

Sec. 1001. Planning and zoning director.

- A. All provisions of this ordinance shall be enforced and administered by the Planning and Zoning Director(s) or such persons designated by the City Council.
 - B. The duties and powers of the Planning and Zoning Director shall be:
 - (1) To receive and check all applications for building and sign permits, certificates of occupancy, and certificates of appropriateness:
 - (a) Prior to issuance of any building permit, the Planning and Zoning Director shall ensure that the building structures or use proposed conforms in all respects to the provisions of this zoning ordinance and other applicable regulations (See Section 1002);
 - (b) Prior to issuance of a certificate of occupancy, the Planning and Zoning Director shall determine that the work completed is in accordance with all provisions of this zoning ordinance and other applicable regulations (See Section 1003);
 - (c) For new developments proposed with the city which meet or exceed the minimum thresholds identified in the Department of Community Appraiser Procedures and Guidelines for the Review of Developments of Regional Impact (DRI), the city will comply with these intergovernmental review procedures. The city shall be allowed up to a maximum of thirty (30) days to complete the review process for large development projects that are likely to create impacts in other local jurisdictions. The city will not take any official action to further any such developments until the DRI review Process is completed or a maximum of thirty (30) days has transpired from the date the completed DRI Request for Review Form was forwarded to the Coastal Regional Commission.
 - (2) To require any information necessary to determine the conformity of the application with the regulations of this ordinance and building codes. This information may include:
 - (a) Proposed uses of building, structure, or land;
 - (b) Placement of the building or structure on the lot;



Anthem Blue Cross and Blue Shield P.O. Box 4445 Atlanta, Georgia 30302

July 24, 2025

CITY OF GUYTON P.O. BOX 99 GUYTON, GA 31312

Time to renew your health plan! Everything you need is in this packet.

Dear Valued Customer:

Thank you for choosing us to be your continued partner in health. We're committed to protecting your most important asset — your employees. Our plans offer affordable, whole-person care and a simplified healthcare experience. We're here to support you and your employees every step of the way.

What's in this packet

You will find everything you need to renew your plan or switch to a different one:

- This year's monthly premium equivalent renewal rates.
- Important plan information and highlights.
- Information on other plans if you would like to make a change.
- The list of documents required for renewal.

Added benefits for better overall health

When you add dental and vision coverage to your medical plan, your employees get comprehensive, cost-effective, coordinated care. Because we integrate data across our plans, we can create a personalized, more complete picture of an employee's health. This lets us identify issues earlier, close gaps in care, and improve health management to help employees stay healthy and productive.

Please work with your broker to return your paperwork on the 20th of the month before your effective date.

Your broker can help you choose the right plan.

Please note that your Georgia Chamber SMART Plan participation agreement requires 30 days' prior written notice of cancellation if your group chooses not to accept this renewal. As your renewal is provided by Georgia Chamber SMART Plan, you will see appropriate premium equivalent rates for medical; however, specialty is offered by Anthem and reflects fully insured premiums.

Thank you for partnering with us. We look forward to a great year together.

Anthem Blue Cross and Blue Shield and the Georgia Chamber of Commerce SMART Health Care Plan

Help your employees feel covered, protected, and confident

A great value for you, and lower costs for your employees





As an employer, you want to make sure your employees are healthy, happy, and productive.

That's why your new benefits deliver unmatched value and support for you and your employees. No matter where they are with their health, we're here to ensure your employees get trouble-free access to quality care while saving money.

Georgia Chamber SMART plan (SMART) benefit changes for 2025

Changes to your health plan for 2025 focus on keeping your employees healthy. Your employees will become more aware of their health while they are able to earn rewards through increased digital engagement with tools, assessments, and trackers.* Differences between your existing plan options and your options for 2025 are listed below.

Plan changes

Benefit name	Details	2024 benefits	2025 benefits
Out-of-network pharmacy (POS plans only)	Consistency in the application of the medical deductible to all out-of-network pharmacy claims	The application of the medical deductible for out-of-network pharmacy claims varies by plan	All out-of-network pharmacy claims are subject to the medical deductible and then 50% coinsurance
Out-of-pocket	Out-of-pocket changes were made on select plans	Varies by plan	Varies by plan
Deductible	Deductible changes were made on select plans	Varies by plan	Varies by plan
PT/OT/ST in an office setting	When a plan applies a copay to physical, occupational, or speech therapy office visits, the specialist office visit copay applies	Varies by plan	Specialist copay
Pharmacy benefits	Pharmacy program that ensures the member's true out-of-pocket costs is reflected against their benefit design, even with the use of manufacture discount coupons. Members can access available manufacturer copay assistance program funds through a high touch enrollment experience. This allows us to reduce the cost for certain specialty drugs, which can result in savings for members when they enroll.	None	Specialty drug accumulator program and pharmacy cost relief program are included upon renewal

Keep your employees healthy and productive with help from Anthem, your partner in health.

For information about your 2025 plan options, contact your Anthem Sales representative. If your current plan no longer meets your needs, we have other plans available. Ask your broker or your Anthem Sales representative for details.

Protecting the health of your employees — and your business

Health plans that offer whole-person care for better overall health

Renewal Packet for CITY OF GUYTON

Group #: SP3888

Effective Date: October 01, 2025

Georgia Chamber SMART Plan

Group State: Georgia Zip Code: 31312







Helping your employees — and your business — stay healthy



Making sure you and your employees have great healthcare is good for business. Anthem plans include benefits that support whole-person health and come with tools that make it easier to get care from anywhere.

All of this helps your employees stay healthy and productive for longer.



EmployerAccess is now the hub for plan administration, marketing resources, and news. This updated site has everything you need to administer your plan and manage your benefits, including helpful tools and resources for both you and your employees.



Benefits that work together

Anthem plans keep you and your employees at the center of a whole-person, team-based care model, transforming healthcare into a collaborative process. By combining all aspects of coverage — medical, behavioral health, pharmacy, dental, and/or vision doctors can see the whole picture of a person's health for simpler, smarter, and more cost-effective care.

- · Programs to motivate employees to take charge of their well-being.
- · Engaged care management teams that can identify potential health issues and coordinate health action plans.
- · Digital tools to help employees connect to resources, as well as receive alerts and updates.



Wellbeing Solutions

Our health and wellness programs are included in our plans, and focus on awareness, prevention, and the right resources to help enable better health and cost savings.



Support for emotional health

Our plans also include access to the Emotional Well-being Resources program, powered by Learn to Live. With this program, employees learn how to manage specific behavioral patterns, such as anxiety, sleep issues, stress, and drug and alcohol use. Experienced coaches also provide support by email, text, or phone.



Pharmacy

Our integrated medical and pharmacy benefits work together to improve employee health and manage costs. With 24/7 access to pharmacy experts and digital tools that can help with pricing a medication, finding a pharmacy, or requesting a refill, we're working to make it easier for employees to stay on top of their medications, their health, and their budgets.



👧 sydney

The SydneySM Health app connects your employees to high-quality, affordable care with expanded virtual care options. It provides a simple, guided, and intuitive experience using data, artificial intelligence, and machine learning to create deep employee personalization. Empowering your employees to:

- Search for in-person or virtual care, including virtual primary care and urgent care.
- Video-chat with a board-certified healthcare professional or therapist.
- · Order and refill prescriptions.
- Easily access their health plan ID card on their mobile devices.

We make it simpler for you and your employees to manage your own health, while staying by your side every step of the way.

Sydney Health is offered through an arrangement with Carelon Digital Platforms, it separate company offering mobile

Learn to Live, Inc. is an independent company offering online looks and programs for behavioral health support. Learn to like is an education program and should not be considered medical treatment.

CITY OF GUYTON SP3888 Georgia Chamber SMART Plan

Effective Date: 10/01/2025

Your Renewal Snapshot

Your current medical plan(s) and the renewal plan(s) are reflected in the grid(s) below. A complete listing of benefit details can be found on the Summary of Benefits at sbc.anthem.com. Or click on the plan name in electronic copies, then enter your renewal effective date into the top box of that page.

Renewal Premium Equivalent Rates for your Medical Plan(s)

	Plan Name/Contract Code	Ded Ind/Fam	OOP Max	Office Visit PCP/SPC	Inpatient Hospital	ER/ UC	Prescription Drugs	EMP	ESP	ЕСН	FAM	% of Chang	
Current Plan 1	CSP Blue Open Access POS 2000/0%/4000 - AOPS	\$2000/ \$4000	\$4000/ \$8000	\$30/ \$70	Ded;0%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$815.57	\$1712.70	\$1590.36	\$2487,49		
Renewal Plan 1	<u>CSP Blue Open Access POS</u> 2000/0%/4000 - 855A	\$2000/ \$4000	\$4000/ \$8000	\$30/ \$70	Ded;0%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$889.60	\$1868.16	\$1734.72	\$2713.28	9.08%	6
							Enrolle	d 9	1	0	0	Total:	10
		Me	edical Enrolled	: 10		Monthly Prem	lum Equivalent Rate: \$9874.56	Medi	cal % of Cha	nge:	9	9.08%	

Georgia Chamber SMART Plan Effective Date: 10/01/2025

Your Specialty Coverage

Employers, for more information please work directly with your broker. **Brokers,** our Anthem Connect team is here to assist. For more information or to request a specialty quote, please contact the Anthem Connect team at 866-956-8602 or Connect@anthem.com.

	Dental Plan(s)													
	Plan Name/Contract Code	Ded Ind/Fan	Annual 1 Max I	Diag/Prev In/Out Net	Basic In/Out Net	Major In/Out Net	Ortho	725	EMP	ESP	ЕСН	FAM	Total	% of Change
<u>_</u>								Current	\$34.70	\$70.79	\$74.82	\$113.72	\$459.30	
enew Plan 1	CSP Essential Choice Classic GA-C25/5G2G	\$50/ \$150	\$1500	100%/ 80%	80%/ 60%	50%/ 50%	Not Covered	Renewal	\$36.09	\$73.62	\$77.81	\$118.27	\$477.68	4.00%
Visio								Enrolled	7	2	1	0	10	
	Vision Plan(s)													
	Plan Name/Contract Code	Туре	Exam Copay/ Frequency	Lens Copa Frequenc			acts Benefit/ requency		ЕМР	ESP	ECH	FAM	Total	% of Change
wal 1			\$10/	\$0/	\$130	/	\$130/	Current	\$7.22	\$14.44	\$13.32	\$20.92	\$86.64	
Renewal Plan 1	CSP FS.A.10.0.130.130/48ZV	Full Service				every calendar	Renewal	\$7.22	\$14.44	\$13.32	\$20.92	\$86.64	0.00%	
-			calendar year	calendar ye	ar calendar	year	year	Enrolled	8	2	0	0	10	

Monthly Comparison Details

This data is current as of 06/11/2025 (any changes to the census after this date may not be reflected).

Coverage Types - EMP=Employee Only, ESP=Employee/Spouse, ECH=Employee/Child(ren), FAM = Family

		er Age	er Age s Age dren			Medical Premium Equivalent Rate			Dental Fully Ins. Premium			Vision Fully Ins. Pro		Combir	ned Total
Insured Subscribers		Subscriber Age	Spouse Age	# Children	Coverage Type	Current Rate	New Rate	Coverage Type	Current Rate	New Rate	Coverage Type	Current Rate	New Rate	Current Rate	New Rate
Medical Plan 855A CSP Blue	Open Access I	POS 200	00/0%/40	000										15 5 5	
1. ERRATO ANTHONY		49			EMP	815.57	889.60	EMP	34.70	36.09	EMP	7.22	7.22	857.49	932.91
2. FORT CRISA		44			EMP	815.57	889.60	EMP	34.70	36.09	EMP	7.22	7.22	857.49	932.91
3. HESTER ANGEL		40			EMP	815.57	889.60	EMP	34.70	36.09	EMP	7.22	7.22	857.49	932.91
4. JORDAN TAMMY		56	69		EMP	815.57	889.60	ESP	70.79	73.62	ESP	14.44	14.44	900.80	977.66
5. LINDSEY WILLIAM F		52	48		ESP	1712.70	1868.16	ESP	70.79	73.62	ESP	14.44	14.44	1797.93	1956.22
6. LUNDY KELPHIE K		47			EMP	815.57	889.60	EMP	34.70	36.09	EMP	7.22	7.22	857.49	932.91
7. LYON DAVID H		37		1	EMP	815.57	889.60	ECH	74.82	77.81	EMP	7.22	7.22	897.61	974.63
8. MCVEY JENNA		38			EMP	815.57	889.60	EMP	34.70	36.09	EMP	7.22	7.22	857.49	932.91
9. NESMITH DANIEL C		64			EMP	815.57	889.60	EMP	34.70	36.09	EMP	7.22	7.22	857.49	932.91
10. POE NATHANIEL		24			EMP	815.57	889.60	EMP	34.70	36.09	EMP	7.22	7.22	857.49	932.91
Subtotal						9052.83	9874.56		459.30	477.68		86.64	86.64	9598.77	10438.88
Total						\$9052.83	\$9874.56		\$459.30	\$477.68		\$86.64	\$86.64	\$9598.77	\$10438.88
Percent of Change						9	.08%		4.	00%		0.	00%	8.	75%

Anthem rates and benefits are subject to regulatory review or approval.

Summary of Benefits and Coverage (SBCs) can be accessed through our Internet Posting Site at sbc.anthem.com. The benefit information included in this packet is intended to present only a general overview of the benefits. The entire provisions of benefits and exclusions are contained in the Certificate of Coverage. In the event of a conflict between the Certificate of Coverage and the description included in this packet, the terms of the Certificate of Coverage will prevail.

CITY OF GUYTON SP3888 Georgia Chamber SMART Plan Effective Date: 10/01/2025

Premium Equivalent Rates

Addendum to the Participation Agreement

The Employer shall pay Anthem the following premium equivalent rates per Employee per month for the Contract Period.

Coverage	EMP	ESP	ECH	FAM
CSP Blue Open Access POS 2000/0%/4000 - 855A	\$889.60	\$1868.16	\$1734.72	\$2713.28

Premium equivalent rates are proposed for an effective date of 10/01/2025. Rerate is required after this date. Final rates will be based on the actual effective date. Premium equivalent rates are based on SIC 9121, located primarily in the 31312 zip code area. Final rates will be based on the actual location, enrolled census, final benefits selected. This proposal is subject to underwriting approval by the Georgia Chamber of Commerce SMART Health Care Plan and please do not cancel your coverage until the application has been approved in writing. This information is intended to present only a general overview of the benefits. Renewal business rates calculated using standard underwriting guidelines.

Morgan Law, Plan Administrator

Georgia Chamber of Commerce SMART Health Care Plan

Georgia Chamber SMART Plan Effective Date: 10/01/2025

Interested in changes to your Medical Plan(s)?

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Select	Plan Name/ Contract Code	Ded Ind/Fam	OOP Max	Office Visit PCP/SPC	Inpatient Hospital	ER/ UC	Prescription Drugs	EMP	ESP	ECH	FAM
	<u>CSP Blue Open Access POS</u> <u>1500/0%/3500</u> - 856F	\$1500/ \$3000	\$3500/ \$7000	\$30/ \$70	Ded;0%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$909.26	\$1909.45	\$1773.06 te* \$10092	\$2773.24 2.79
	CSP Blue Open Access POS 2000/0%/4000 - 855A	\$2000/ \$4000	\$4000/ \$8000	\$30/ \$70	Ded;0%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$889.60	\$1868.16	\$1734.72 te* \$9874.	\$2713.28 56
	<u>CSP Blue Open Access POS</u> 1000/20%/4500 - 8566	\$1000/ \$3000	\$4500/ \$9000	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$880.34	\$1848.71	\$1716.66 te* \$9771.	\$2685.04
	CSP Link Virtual First Blue Open Access POS 50/8000 Plus - 8554	\$0/ \$0	\$8000/ \$16000	\$50/ \$75	\$1500 Per Day for 4 days	\$750/ \$75	\$0/\$10/\$60/\$125/\$400	\$870.73	\$1828.53	\$1697.92 te* \$9665.	\$2655.73
	<u>CSP Blue Open Access POS</u> <u>2500/10%/4500</u> - 856M	\$2500/ \$5000	\$4500/ \$9000	\$30/ \$70	Ded;10%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$854.58	\$1794.62	\$1666.43 te* \$9485.	\$2606.47 84
	<u>CSP Blue Open Access POS</u> <u>1500/20%/6000</u> - 856D	\$1500/ \$3000	\$6000/ \$12000	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$851.17	\$1787.46	\$1659.78 te* \$9447.	\$2596.07
	CSP Link Virtual First Blue Open Access POS 1500/5500 Plus - 8565	\$1500/ \$4500	\$5500/ \$11000	\$25/ \$75	Ded;\$750	Ded;\$500/ \$75	\$0/\$10/\$60/\$125/\$400 Ded Tier(s) 3,4	\$849.86 Mol	\$1784.71	\$1657.23 te* \$9433.	\$2592.07
	* Monthly Estimate calculus employees with medical	ulation uses the p al coverage are e	remium equivalen nrolled on this pla	t rates and assum า.	es all		SP ECH FAM 1 0 0	Represer "Your Re	nts renewal p newal Snapsh	lan(s) display not Page"	ed on
	Coverage Types - EMP=Em		Employee/Spous	e, ECH=Employee/	'Child(ren), FAM = F	amily					
	Authorization for ANY Group Email Address:	_					Date:				
					_ Signature:		outo.	_	_		

Georgia Chamber SMART Plan Effective Date: 10/01/2025

Interested in changes to your Medical Plan(s)? (Continued)

If you would like to renew with the plan(s) we've selected for you no additional paperwork is needed to implement your renewal. Otherwise, check the select box for all the plan(s) you would like to offer upon renewal.

Select	Plan Name/ Contract Code	Ded Ind/Fam	OOP Max	Office Visit PCP/SPC	Inpatient Hospital	ER/ UC	Prescription Drugs	ЕМР	ESP	ECH	FAM
П	CSP Blue Open Access POS 2750/10%/5000 - 8558	\$2750/ \$5500	\$5000/ \$10000	\$30/ \$70	Ded;10%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$842.34	\$1768.91	\$1642.56	\$2569.14
	<u>2139/10/0/3000</u> - 6556	\$5500	\$10000	\$70		\$70		n	lonthly Estima	ate* \$9349	.97
П	CSP Blue Open Access POS 3500/0%/6000 - 856C	\$3500/ \$7000	\$6000/ \$12000	\$30/ \$70	Ded;0%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$839.02	\$1761.94	\$1636.09	\$2559.01
_		•	******	***		Ų.		N	onthly Estima	ite* \$9313	.12
	CSP Blue Open Access POS 3000/20%/5000 - 8575	\$3000/ \$6000	\$5000/ \$10000	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$836.15	\$1755.92	\$1630.49	\$2550.26
_								IV.	onthly Estima	ite* \$9281	.27
	CSP Blue Open Access POS 3500/20%/6000 - 854X	\$3500/ \$7000	\$6000/ \$12000	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$815.35	\$1712.24	\$1589.93	\$2486.82
								IV.	onthly Estima	te* \$9050	.39
	CSP Blue Connection EPO 1500/0%/3500 - 856L	\$1500/ \$3000	\$3500/ \$7000	\$30/ \$70	Ded;0%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$805.07	\$1690.65	\$1569.89	\$2455.46
								. M	onthly Estima	te* \$8936.	.28
	CSP Blue Open Access POS 4300/20%/6500 FP - 856H	\$4300/ \$8600	\$6500/ \$13000	\$0 < age 19; \$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$804.86	\$1690.21	\$1569,48	\$2454.82
									onthly Estima		
	CSP Link Virtual First Blue Open Access POS 3000/8000 Plus - 856Z	\$3000/ \$6000	\$8000/ \$16000	\$25/ \$75	Ded;\$750	Ded;\$500/ \$75	\$0/\$10/\$60/\$125/\$400 Ded Tier(s) 3,4	\$803.21	\$1686.74	\$1566.26	\$2449.79
								M	onthly Estima	te* \$8915.	63
	* Monthly Estimate calcul employees with medica		SP ECH FAM	Repres	ents renewal p enewal Snaps	olan(s) display	yed on				
			1 0 0	70011	enewai siiaps	not rage					
	Coverage Types - EMP=Emp Authorization for ANY P										
	Group Email Address:	_	Date:								
	Printed Name:								_		

Georgia Chamber SMART Plan Effective Date: 10/01/2025

Interested in changes to your Medical Plan(s)? (Continued)

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Select	Plan Name/ Contract Code	Ded Ind/Fam	OOP Max	Office Visit PCP/SPC	Inpatient Hospital	ER/ UC	Prescription Drugs	EMP	ESP	ECH	FAM
	CSP Blue Open Access POS 4500/0%/4500 w/HSA - 855V	\$4500/ \$9000	\$4500/ \$9000	Ded;0%/ Ded;0%	Ded;0%	Ded;0%/ Ded;0%	Deductible, then 0% coinsurance	\$798.94	\$1677.77	\$1557.93	\$2436.77
								Mo	nthly Estima	te* \$8868.	23
	CSP Blue Open Access POS 4500/20%/7000 - 855S	\$4500/ \$9000	\$7000/ \$14000	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$794.04	\$1667.48	\$1548.38	\$2421.82
								Mo	nthly Estima	te* \$8813.	84
	CSP Blue Connection EPO	\$2000/	\$4000/	\$30/ \$70	Ded;0%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$788.67	\$1656.21	\$1537.91	\$2405.44
Ш	2000/0%/4000 - 856A	\$4000	\$8000	\$70		\$70		Mo	nthly Estima	te* \$8754.	24
_	CSP Blue Open Access POS 5000/20%/7500 - 856N	\$5000/	\$7500/	\$30/ \$70	Ded;20%	Ded;\$350/	\$0/\$10/\$60/\$90/20%	\$783.82	\$1646.02	\$1528.45	\$2390.65
Ш	<u>5000/20%/7500</u> - 856N	\$10000	\$15000	\$70	Deu,20%	\$70	40, 410, 400, 430, 207	Mo	nthly Estima	te* \$8700.	40
	CSP Blue Connection EPO 1000/20%/4500 - 8DW8	\$1000/	\$4500/	\$30/	D-100W	Ded;\$350/	\$0/\$10/\$60/\$90/20%	\$775.64	\$1628.84	\$1512.50	\$2365.70
Ц	1000/20%/4500 - 8DW8	\$3000	\$9000	\$70	Ded;20%	\$70	\$0/\$10/\$00/\$30/2070	Mo	nthly Estima	te* \$8609.	60
_	CSP Link Virtual First Blue	\$4500/	\$8700/	\$25/	0.46750	Ded;\$500/	\$0/\$10/\$60/\$125/\$400 Ded Tier(s) 3,4	\$773.24	\$1623.80	\$1507.82	\$2358.38
Ш	Open Access POS 4500/8700 Plus - 8551	\$9000	\$17400	\$75	Ded;\$750	\$75	\$07 \$107 \$007 \$1237 \$400 DEG HENS) 3,4	Mo	nthly Estimal	e* \$8582.9	96
	CSP Link Virtual First Blue	\$0/	\$8000/	\$50/	\$1500 Per Day	\$750/		\$769.45	\$1615.85	\$1500.43	\$2346.82
	Connection EPO 50/8000 Plus - 8567	\$0	\$16000	\$75	for 4 days	\$75	\$0/\$10/\$60/\$125/\$400	Mo	nthly Estimat	e* \$8540.9	90
	* Monthly Estimate calcu employees with medica				es all	EMP ES	SP ECH FAM		nts renewal p newal Snapsi	lan(s) display	ed on
						9	1 0 0	Tour Ne	newai Snapsi	lot rage	
	Coverage Types - EMP=Emp		Employee/Spous	e, ECH=Employee/	Child(ren), FAM = F	Family					
	Authorization for ANY P Group Email Address:					[Date:				
	COMPLETE SIGN and	d Email to gal	ocalsgimnl@	anthem com							

Georgia Chamber SMART Plan Effective Date: 10/01/2025

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Select	Plan Name/ Contract Code	Ded Ind/Fam	OOP Max	Office Visit PCP/SPC	Inpatient Hospital	ER/ UC	Prescription Drugs	EMP	ESP	ECH	FAM		
	CSP Blue Open Access POS 5500/20%/8500 - 8553	\$5500/ \$11000	\$8500/ \$17000	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$768.79	\$1614.46	\$1499.14	\$2344.81		
								M	Monthly Estimate* \$8533.57				
	CSP Blue Open Access POS 6000/30%/8500 - 855E	\$6000/ \$12000	\$8500/ \$17000	\$30/ \$70	Ded;30%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$765.47	\$1607.49	\$1492.67	\$2334.68		
								M	inthly Estima	te* \$8496.	72		
\Box	<u>CSP Blue Connection EPO</u> <u>2500/10%/4500</u> - 8DW6	\$2500/	\$4500/	\$30/ \$70	Ded;10%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$756.90	\$1589.49	\$1475,96	\$2308.55		
		\$5000	\$9000	\$70				Me	nthly Estima	te* \$8401.	59		
	CSP Blue Open Access POS 3300/20%/7500 w/HSA - 8568	edes s	*	5 339 A	Ded;20%	Ded;20%/ Ded;20%		\$755.43	\$1586.40	\$1473.09	\$2304.06		
		\$3300/ \$6600	\$7500/ \$15000	Ded;20%/ Ded;20%			\$0/ \$10/ \$60/ \$125/ \$400 Ded Tier(s) All	Mo	nthly Estimat	te* \$8385.	27		
	CSP Blue Open Access POS 6500/30%/9200 - 856B	\$6500/ \$13000	\$9200/ \$18400	\$30/ \$70	Ded;30%	Ded;\$350/ \$70		\$755.25	\$1586.03	\$1472.74	\$2303.51		
							\$0/\$10/\$60/\$90/20%	Mo	nthly Estimat	te* \$8383.	28		
								\$751.88	\$1578.95	\$1466.17	\$2293,23		
	CSP Blue Connection EPO 1500/20%/6000 - 8DVE	\$1500/ \$3000	\$6000/ \$12000	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%						
								Mo	nthly Estimat	te* \$8345.	37		
	CSP Link Virtual First Blue Connection EPO 1500/5500	\$1500/ \$4500	\$5500/	\$25/ \$75	Ded;\$750	Ded;\$500/	\$0/\$10/\$60/\$125/\$400 Ded Tier(s) 3,4	\$750.62	\$1576.30	\$1463.71	\$2289.39		
Ц	Plus - 855U		\$11000	\$75		\$75		Mo	nthly Estimat	e* \$8331.	38		
	* Monthly Estimate calcu	lation uses the n	remium equivalen	t rates and assume	الدء					-			
	employees with medica	al coverage are er	nrolled on this plan	n.	3 uii	9 ES		Represe "Your Re	nts renewal p newal Snapsh	lan(s) display not Page"	ed on		
	Coverage Types - EMP=Em	ployee Only, ESP=	Employee/Spous	e, ECH=Employee/(Child(ren), FAM = F	amily							
	Authorization for ANY F	Plan Change											
	Group Email Address:						Date:						
	Printed Name:				_ Signature:				_				
							4						

Georgia Chamber SMART Plan Effective Date: 10/01/2025

Interested in changes to your Medical Plan(s)? (Continued)

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Select	Plan Name/ Contract Code	Ded Ind/Fam	OOP Max	Office Visit PCP/SPC	Inpatient Hospital	ER/ UC	Prescription Drugs	EMF	ESP	ECH	FAM		
	CSP Blue Connection EPO 2750/10%/5000 - 8DV6	\$2750/	\$5000/	\$30/	Ded;10%	Ded;\$350/	\$0/\$10/\$60/\$90/20%	\$746.5	3 \$1567.71	\$1455.73	\$2276.92		
П	2/50/10%/5000 - 8DV6	\$5500	\$10000	\$70	Bed,10 %	\$70	43, 433, 433, 233	Monthly Estimate* \$8286.48					
П	CSP Blue Connection EPO 3500/0%/6000 - 8DV7	\$3500/ \$7000	\$6000/	\$30/	Ded;0%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$745.2	7 \$1565,07	\$1453.28	\$2273.07		
	3500/0%/6000 - 8DV/	\$7000	\$12000	\$70	200,000				Monthly Estima	ate* \$8272	.50		
П	CSP Blue Connection EPO 3000/20%/5000 - 854T	\$3000/	\$5000/	\$30/	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$740.8	9 \$1555.87	\$1444.74	\$2259.71		
ш	3000/2010/3000 - 8541	\$6000	\$10000	\$70	,				Monthly Estima	ite* \$8223.	88		
П	CSP Link Virtual First Blue Open Access POS 4000/7100 w/HSA Plus - 856Q	\$4000/ \$8000	\$7100/ \$14200	Ded;\$25/ Ded;\$75	Ded;\$750	Ded;\$500/ Ded;\$75	\$0/\$10/\$60/\$125/\$400 Ded Tier(s) All	\$738.3	9 \$1550.62	\$1439.86	\$2252.09		
П			\$14200						Monthly Estima	ite* \$8196.	13		
П	CSP Link Virtual First Blue Open Access POS 7500/20%/9200 - 855P	\$7500/ \$15000	\$9200/ \$18400	\$50/ \$75	Ded;20%	Ded;20%/ \$75	\$0/\$10/\$60/\$125/20%	\$726.2	\$1525.10	\$1416.17	\$2215.03		
ш	7500/20%/9200 - 855P	V 10000	\$18400	φ/3		4.0			Monthly Estima	te* \$8061.	26		
П	<u>CSP Blue Connection EPO</u> 3500/20%/6000 - 8DWA		\$6000/ \$12000	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$722.9	\$1518.11	\$1409.67	\$2204.88		
			\$12000						Monthly Estima	te* \$8024.	30		
П	CSP Blue Connection EPO 4300/20%/6500 FP - 855H	\$4300/ \$8600	\$6500/ \$13000	\$0 < age 19; \$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$713.3	\$1498.06	\$1391.05	\$2175.75		
	3311	40000	\$13000	Ψ.0		Ψίσ		Monthly Estimate* \$7918.30					
	* Monthly Estimate calc				s all	EMP E	SP ECH FAM	Renr	esents renewal r	nlan(s) display	red on		
	employees with medic	al coverage are er	irolled on this pi	all.			1 0 0	Represents renewal plan(s) displayed on "Your Renewal Snapshot Page"					
	Coverage Types - EMP=Em		Employee/Spou	se, ECH=Employee/0	Child(ren), FAM =	Family							
	Group Email Address:_	•					Date:						
	Printed Name:				_ Signature:								
	COMPLETE, SIGN, an	d Email to gal	ocalsgimpl@	anthem.com.									

Georgia Chamber SMART Plan Effective Date: 10/01/2025

Interested in changes to your Medical Plan(s)? (Continued)

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Select	Plan Name/ Contract Code	Ded Ind/Fam	OOP Max	Office Visit PCP/SPC	Inpatient Hospital	ER/ UC	Prescription Drugs		EMP	ESP	ECH	FAM
	CSP Link Virtual First Blue Connection EPO 3000/8000 Plus - 8579	\$3000/ \$6000	\$8000/ \$16000	\$25/ \$75	Ded;\$750	Ded;\$500/ \$75	\$0/\$10/\$60/\$125/\$400 Ded Tier(s) 3,4		\$712.41	\$1496.06	\$1389.20	\$2172.85
									Mo	nthly Estima	te* \$7907	75
П	CSP Blue Open Access POS 6300/30%/6850 w/HSA - 854W	\$6300/ \$12600	\$6850/ \$13700	Ded;30%/ Ded:30%	Ded;30%	Ded;30%/ Ded;30%	\$0/ \$10/ \$60/ \$125/ \$400 Ded Tier(s) All		\$712.36	\$1495.96	\$1389.10	\$2172.70
	654W								Mo	nthly Estima	te* \$7907.	20
	CSP Blue Connection EPO 4500/0%/4500 w/HSA - 8DVJ	\$4500/ \$9000	\$4500/ \$9000	Ded;0%/ Ded;0%	Ded;0%	Ded;0%/ Ded;0%	Deductible, then 0% coinsurance		\$708.17	\$1487.16	\$1380.93	\$2159.92
_									Mo	nthly Estima	te* \$7860.	69
П	CSP Blue Connection EPO 4500/20%/7000 - 855W	\$4500/ \$9000	\$7000/ \$14000	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%		\$703.70	\$1477.77	\$1372.22	\$2146.29
—			\$14000	\$70					Mo	nthly Estimat	e* \$7811.	07
П	CSP Blue Open Access POS 7500/0%/7500 w/HSA -	\$7500/	\$7500/	Ded;0%/	Ded;0%	Ded;0%/	Deductible, then 0% coinsurance		\$700.48	\$1471.01	\$1365.94	\$2136.46
Ц	855X	\$15000	\$15000	Ded;0%	***************************************	Ded;0%			Mo	nthly Estimat	e* \$7775.	33
П	CSP Blue Connection EPO 5000/20%/7500 - 8DVS	\$5000/ \$10000 \$1500	\$7500/	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%		\$694.37	\$1458.18	\$1354.02	\$2117.83
Ш			\$15000						Moi	nthly Estimat	e* \$7707.	51
	CSP Link Virtual First Blue Connection EPO 4500/8700 Plus - 856U	\$4500/ \$9000 \$	\$8700/ \$17400	\$25/ \$75	Ded;\$750	Ded;\$500/ \$75	\$0/\$10/\$60/\$125/\$400 Ded Tier(s) 3,4		\$685.74	\$1440.05	\$1337.19	\$2091.51
Ц				\$75	564,4750		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Mor	nthly Estimat	e* \$7611.	71
	* Monthly Estimate calcu	lation uses the n	remium equivalen	t rates and assume	es all							
	employees with medica						SP ECH FAM 1 0 0	RID R	Represer "Your Rei	its renewal pl newal Snapsh	an(s) display ot Page"	ed on
	Coverage Types - EMP=Emp	oloyee Only, ESP=	Employee/Spous	e, ECH=Employee/	Child(ren), FAM = I	Family						
	Authorization for ANY F Group Email Address:					ī	Date:					
	Printed Name:						Jate.					
	COMPLETE CION				0							

Georgia Chamber SMART Plan Effective Date: 10/01/2025

Interested in changes to your Medical Plan(s)? (Continued)

If you would like to renew with the plan(s) we've selected for you no additional paperwork is needed to implement your renewal. Otherwise, check the select box for all the plan(s) you would like to offer upon renewal.

Select	Plan Name/ Contract Code	Ded Ind/Fam	OOP Max	Office Visit PCP/SPC	Inpatient Hospital	ER/ UC	Prescription Drugs	EMP	ESP	ECH	FAM
	CSP Blue Open Access POS 5000/20%/7500 Lean Rx - 8557	\$5000/ \$10000	\$7500/ \$15000	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$15/100%/100%/100%	\$681.26	\$1430.65	\$1328.46	\$2077.84
	<u>CSP Blue Connection EPO</u> <u>5500/20%/8500</u> - 8DV9	\$5500/ \$11000	\$8500/ \$17000	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$680.79	\$1429.66	\$1327.54 ste* \$7556.	\$2076.41
	CSP Blue Connection EPO 6000/30%/8500 - 8DVZ	\$6000/ \$12000	\$8500/ \$17000	\$30/ \$70	Ded;30%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$677.65	\$1423.07	\$1321.42 te* \$7521.	\$2066,83
	CSP Blue Connection EPO 3300/20%/7500 w/HSA - 8DVW	\$3300/ \$6600	\$7500/ \$15000	Ded;20%/ Ded;20%	Ded;20%	Ded;20%/ Ded;20%	\$0/\$10/\$60/\$125/\$400 Ded Tier(s) All	\$669.65 Mo	\$1406.27	\$1305.82 te* \$7433.	\$2042.43
	CSP Blue Connection EPO 6500/30%/9200 - 8DVB	\$6500/ \$13000	\$9200/ \$18400	\$30/ \$70	Ded;30%	Ded;\$350/ \$70	\$0/\$10/\$60/\$90/20%	\$668.40 Ma	\$1403.64	\$1303.38 te* \$7419.	\$2038.62 24
	CSP Blue Open Access POS 6000/30%/8500 Lean Rx - 8556	\$6000/ \$12000	\$8500/ \$17000	\$30/ \$70	Ded;30%	Ded;\$350/ \$70	\$15/100%/100%/100%	\$664.39	\$1395.22	\$1295.56 te* \$7374.	\$2026.39 73
	CSP Link Virtual First Blue Connection EPO 4000/7100 w/HSA Plus - 8563	\$4000/ \$8000	\$7100/ \$14200	Ded;\$25/ Ded;\$75	Ded;\$750	Ded;\$500/ Ded;\$75	\$0/\$10/\$60/\$125/\$400 Ded Tier(s) All	\$654.28	\$1373.99	\$1275.85 te* \$7262.	\$1995.55 51
	* Monthly Estimate calcu employees with medica	SP ECH FAM 1 0 0	Represei "Your Re	nts renewal p newal Snapsl	olan(s) display hot Page"	red on					
	Coverage Types - EMP=Em Authorization for ANY I Group Email Address:	Plan Change					Date:	-			
	Printed Name:				_ Signature:				-		

Georgia Chamber SMART Plan Effective Date: 10/01/2025

Interested in changes to your Medical Plan(s)? (Continued)

If you would like to renew with the plan(s) we've selected for you no additional paperwork is needed to implement your renewal. Otherwise, check the select box for all the plan(s) you would like to offer upon renewal.

Select	Plan Name/ Contract Code	Ded Ind/Fam	OOP Max	Office Visit PCP/SPC	Inpatient Hospital	ER/ UC	Prescription Drugs	EMP	ESP	ECH	FAM
	CSP Link Virtual First Blue Connection EPO 7500/20%/9200 - 856R	\$7500/ \$15000	\$9200/ \$18400	\$50/ \$75	Ded;20%	Ded;20%/ \$75	\$0/\$10/\$60/\$125/20%	\$642.04	\$1348.28	\$1251.98 te* \$7126	\$1958.22
	CSP Blue Open Access POS 9000/0%/9000 - 855Q	\$9000/ \$18000	\$9000/ \$18000	Ded;0%/ Ded;0%	Ded;0%	Ded;0%/ Ded;0%	Deductible, then 0% coinsurance	\$641.94	\$1348.07	\$1251.78 te* \$7125.	\$1957.92 53
	CSP Blue Connection EPO 6300/30%/6850 w/HSA - 8DVT	\$6300/ \$12600	\$6850/ \$13700	Ded;30%/ Ded;30%	Ded;30%	Ded;30%/ Ded;30%	\$0/\$10/\$60/\$125/\$400 Ded Tier(s) All	\$628.63	\$1320.12	\$1225.83 te* \$6977.	\$1917.32 79
	CSP Blue Connection EPO 7500/0%/7500 w/HSA - 854P	\$7500/ \$15000	\$7500/ \$15000	Ded;0%/ Ded;0%	Ded;0%	Ded;0%/ Ded;0%	Deductible, then 0% coinsurance	\$619.92 Mo	\$1301.83	\$1208.84 te* \$6881.	\$1890.76
	CSP Blue Connection EPO 5000/20%/7500 Lean Rx - 8DVL	\$5000/ \$10000	\$7500/ \$15000	\$30/ \$70	Ded;20%	Ded;\$350/ \$70	\$15/100%/100%/100%	\$602.34	\$1264.91	\$1174.56 te* \$6685.	\$1837.14 97
	CSP Blue Connection EPO 6000/30%/8500 Lean Rx - 8DW4	\$6000/ \$12000	\$8500/ \$17000	\$30/ \$70	Ded;30%	Ded;\$350/ \$70	\$15/100%/100%/100%	\$586.95	\$1232,60	\$1144.55 e* \$6515.	\$1790.20
	CSP Blue Connection EPO 9000/0%/9000 - 8DVA	\$9000/ \$18000	\$9000/ \$18000	Ded;0%/ Ded;0%	Ded;0%	Ded;0%/ Ded;0%	Deductible, then 0% coinsurance	\$567.36	\$1191.46	\$1106.35 e* \$6297.	\$1730.45 70
	* Monthly Estimate calcu employees with medic	ılation uses the p al coverage are ei	remium equivalen nrolled on this pla	t rates and assume n.	s all		SP ECH FAM	Represei "Your Re	nts renewal p newal Snapsł	lan(s) display not Page"	ed on
	Coverage Types - EMP=Em		Employee/Spous	e, ECH=Employee/0	Child(ren), FAM = I	Family					
	Authorization for ANY I Group Email Address:	•				г	Date:				
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