



**2019**

Beck Automotive Group  
Employee Benefit Guide



# Beck Automotive Group

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Dear Employee,

Beck Automotive Group recognizes the importance of benefits for you and your family, that's why we take the time to carefully select providers that can best serve our employees. We know you don't make your benefit decisions lightly, which is why we are dedicated to partnering with providers who offer quality benefits.

*Your benefit enrollment will be for all core:*

- **Medical-Florida Blue**-no changes to plans or rates
- **Dental-Florida Blue Dental**- no changes to plans or rates
- **Vision-Humana**-no changes to plans or rates

For 2019, we are proud to partner with American Fidelity Assurance Company for the following supplementary benefits:

- **Disability Income Insurance**
- **Term Life Insurance**
- **Accident Insurance**
- **Cancer Insurance**
- **Group Critical Illness Insurance**

Enrollment counselors from both Bates Hewett & Floyd and American Fidelity will be available throughout the open enrollment process to assist you in enrolling in all of your benefits and to answer any questions you may have.

The Human Resource Department developed the following benefit guide to provide you with information about your benefit options for the new plan year, explain the enrollment and change process, and serve as a valuable resource for information about all the benefits available to you.

Sincerely,

Vice President, Beck Automotive Group

*L. Wayne McClain*

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## About this Guide

This benefit guide is a compilation guide of employee benefits. It is intended for informational purposes only. The actual benefits available and the full descriptions of these benefits are governed in all cases by the relevant plan document, insurance contracts, and Ordinances and Resolutions of the group, and where applicable, collective bargaining agreements. If there are discrepancies between the benefit guide and the actual plan documents, insurance contracts, and Ordinances and Resolutions, the documents, contracts, and Ordinances and Resolutions will govern.

## HIPAA Compliance

The Health Insurance Portability and Accountability Act (HIPAA) requires that your health insurance plan limit the release of your health information to the minimum necessary required for your care. If you have questions about your claims, contact your insurance carrier first. If, after contacting the Plan administrator, you need a representative of the Employee Benefits Division to assist you with any claim issues, you may be required to provide written authorization to release information related to your claim. If you would like a copy of the HIPAA Notice of Privacy Practices or if you have any questions, please contact Randy Marquart at 386-328-0344, ext. 342.





# 2019 BENEFITS ENROLLMENT

**Annual Enrollment  
Section 125 Cafeteria Plan  
How to Enroll**

# Your Annual Enrollment

## Important Dates to Remember

Your Open Enrollment Dates are:

November 13th - 17th, 2018

Your Plan Year is:

January 1, 2019 - December 31, 2019

Note: Changes to insurance plans will go into effect January 1st.

## Annual Open Enrollment

Each year Open Enrollment provides you an opportunity to change plans and modify dependent coverage. Your election deductions begin in December and will remain in effect through the plan year (January 1, 2019 - December 31, 2019) for your Voluntary benefits.

NOTE: If eligibility changes during the year you must notify Human Resources within 31 days of the qualifying event.

# Your Section 125 Plan

## Save Money With Section 125

If there was a program available that could dramatically save money on your taxes, would you take advantage of it? That's exactly what the Section 125 Plan does—reduces your taxes and increases your spendable income! Plus, the Plan is available to you at no cost\* and you're already eligible, all you have to do is enroll.

The Plan works like this: You are allowed to deduct needed benefits from gross earnings before taxes are computed. This means that current after-tax expenses, such as insurance products and benefits, can be paid for with pre-tax dollars.

The advantage of this Plan is simple: The eligible premiums you pay under the Plan are paid on a pre-tax basis. You could be on your way to increased savings, just by signing up and taking advantage of this Plan!

## Benefits Eligible For The Section 125 Cafeteria Plan

- Group Medical, Dental and Vision Insurance
- Accident Insurance
- Cancer Insurance
- Flexible Spending Accounts

Before you meet with your American Fidelity Representative, take time to evaluate your current coverage and decide how well it serves the needs of you and your family.

## Important Points To Consider

- Figure an estimate of out-of-pocket medical expenses. Remember that over-the-counter drugs and medicines now require a prescription to be reimbursed.
- Figure an estimate of child care expenses.
- Review your beneficiaries.
- Review American Fidelity's options of portable insurance plans that you can keep if your employment changes.
- Evaluate your need for life insurance.
- Consider increasing your Disability Income Insurance policy amount to match your current salary.

## How Can This Plan Help Me?

The sample paycheck below shows the benefits under the Section 125 Plan compared to benefits outside of the Plan. In this example, the employee gained \$55 more spendable income per month!

Pre-Tax Example		After-Tax Example
\$1,500.00	Monthly Gross Salary	\$1,500.00
-\$150.00	Pre-Tax Medical Insurance	\$0.00
-\$25.00	Pre-Tax Disability Insurance	\$0.00
-\$25.00	Pre-Tax Accident Insurance	\$0.00
\$1,300.00	Adjusted Monthly Gross Salary	\$1,500.00
-\$260.00	Estimated Federal Tax (20%)	-\$300.00
-\$99.45	Estimated FICA (7.65%)	-\$114.75
\$0.00	After-Tax Medical Insurance	-\$150.00
\$0.00	After-Tax Disability Insurance	-\$25.00
\$0.00	After-Tax Accident Insurance	-\$25.00
<b>\$940.55</b>	<b>Take-Home Pay</b>	<b>\$885.25</b>

\* Taxes are a sample average of State, Federal and FICA taxes. Your own average tax rate may vary.

# How to Enroll

Beck Auto Group is providing every employee with an opportunity to understand their employee benefits, ask questions unique to their situation, and enroll in benefits. These include group meetings and one-on-one on-site enrollments.

## Group Meetings

Every site will be given an opportunity to host a group meeting, allowing employees an opportunity to meet together as a group to learn about new benefits, plan adjustments, and any other benefit or insurance related news about our group's program. All employees are encouraged to speak with their spouses or other family members about their personal benefit needs, to help prepare them for their one-on-one benefit review.

## Enroll On-site / One-on-one Benefit Review

On-site enrollment counselors will be available to assist you with the enrollment process. This allows you with the opportunity to ask unique questions regarding your benefit options, in a confidential and private setting.

Refer to the Open Enrollment Schedule provided in this guide for your scheduled attendance dates. Please remember to discuss with your supervisor to determine the best date to attend.

**During your One-on-one Benefit Review, you can learn more about or enroll in the following:**

- Medical Insurance
- Group Life Insurance
- Dental Insurance
- Vision Insurance
- Disability Income Insurance
- Term Life Insurance
- Accident Only Insurance
- Cancer Insurance
- Hospital Indemnity Insurance
- Flexible Spending Accounts





# INSURANCE PLANS

**Medical Plan  
Dental Plan  
Vision Plan  
Optional Medication Coverage  
General or Urgent Healthcare  
Questions  
Disability Income Insurance**

**Employee Assistance Program  
Individual Life Insurance  
Accident Insurance  
Cancer Insurance  
Critical Illness Insurance  
Universal Life Insurance**

# Health Plan Benefits

Blue Cross Blue Shield

## 2019 Health & Dental Insurance Rates

All plans include 100% Wellness / Annual Screening Benefit

<b>BCBS-OPTION 1 (05770):</b>	Employee only:	Employee/spouse:	Employee/child:	Employee/Family:
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\$1000/ind. Deductible \$3000/family, \$25/\$45 copay office visit 80% after ded., \$50 uc, \$200 ER  
 Out of pocket Max \$3500/\$7000 includes ded, coins & copay; Pharmacy benefits = \$10/30/50

Monthly Premium:	\$804.37	\$1,914.38	\$1,480.02	\$2,509.61
Beck Pays:	\$300.00	\$300.00	\$300.00	\$300.00
Employee Pays month:	\$504.37	\$1,614.28	\$1,180.02	\$2,209.61
Semi-monthly :	\$252.19	\$807.19	\$590.01	\$1,104.81

<b>BCBS-OPTION 2 (05772):</b>	Employee only:	Employee/spouse:	Employee/child:	Employee/Family:
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\$2000/ ind.deductible \$6000/family,\$35/\$65 copay office visit, coins. 80% after ded.,\$70 UC, \$300 ER  
 Out of pocket Max \$5500/\$11,000 includes ded, coins, & copay; Pharmacy = \$10/30/50

Monthly Premium:	\$707.38	\$1,683.56	\$1,301.57	\$2,207.03
Beck Pays:	\$300.00	\$300.00	\$300.00	\$300.00
Employee Pays month:	\$407.38	\$1,383.56	\$1,001.57	\$1,907.03
Semi-monthly :	\$203.69	\$691.78	\$500.79	\$953.52

<b>BCBS-OPTION 3 (05302):</b>	Employee only:	Employee/spouse:	Employee/child:	Employee/Family:
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\$5000/ind.deductible \$10,000/family, \$30/\$55 copay office visits, coins. 70% after ded., \$60 UC  
 \$300 ER, Out of pocket Max \$6,350/\$12,700 includes ded, coins & copay; Phar benefits \$ 10 generic Choices\*

Monthly Premium:	\$476.10	\$1,133.12	\$876.03	\$1,485.45
Beck Pays:	\$300.00	\$300.00	\$300.00	\$300.00
Employee Pays month:	\$176.10	\$833.12	\$576.03	\$1,185.45
Semi-monthly :	\$88.05	\$416.56	\$288.02	\$592.73

**EFFECTIVE JUNE 1, 2015 PREMIUMS FOR EMPLOYEES USING TOBACCO WILL BE INCREASED \$100.00 PER MONTH**

Dental Rates	
Employee Only	\$30.56
Employee/ spouse	\$61.14
Employee/child	\$80.52
Family	\$115.86



# Health Plan Benefits Plan Option 1 (05770)

Blue Cross Blue Shield

<b>Plan Number</b>	<b>05770</b>
<b>Cost Sharing - Member's Responsibility</b>	
<b>Deductible (DED) (Per Person/Family Aggregate)</b>	
In-Network	\$1,000 / \$3,000
Out-of-Network	\$3,000 / \$6,000
<b>Coinsurance (BCBSF pays / Member pays)</b>	
In-Network	80% / 20%
Out-of-Network	50% / 50%
<b>Out of Pocket Maximum (Per Person/Family Aggregate)</b>	
In-Network	\$3,500 / \$7,000
Out-of-Network	\$7,000 / \$14,000
<b>Medical Pharmacy OOP Maximum (Per Person Per Calendar Month)</b>	
In-Network (Preferred)	\$200
In-Network (Non-Preferred)	Combined with Preferred OOP
Out-of-Network	NA

<b>Office Services</b>	
In-Network Family Physician	\$25 Copayment
In-Network Specialist	\$45 Copayment
Out-of-Network	DED + 50%

<b>Emergency and Urgent Care</b>	
<p>• If admitted as an inpatient from ER, the hospital will submit an inpatient hospital claim instead of an ER facility claim. ER Copay will not apply on the claim; only inpatient facility cost share will apply.</p>	
<b>Emergency Room Facility</b>	
In-Network	\$200 Copayment
Out-of-Network	\$200 Copayment
<b>Physician Services at ER</b>	
In-Network	\$100 Copayment
Out-of-Network	\$100 Copayment
<b>Urgent Care Centers</b>	
In-Network	\$50 Copayment
Out-of-Network	DED + 50%

\$1000/ind. Deductible \$3000/family, \$25/\$45 copay office coin 80% after ded., \$50 uc, \$200 ER Out of pocket Max \$3500/\$7000 includes ded, coins & copay; Pharmacy benefits = \$10/30/50

BCBS Option 1 (05770)	Monthly Premium	Beck Pays	Employee Pays Month	Semi-Monthly
Employee Only	\$804.37	\$300.00	\$504.37	\$252.19
Employee/Spouse	\$1,914.38	\$300.00	\$1,614.38	\$807.19
Employee/Child	\$1,480.02	\$300.00	\$1,180.02	\$590.01
Employee/Family	\$2,509.61	\$300.00	\$2,209.61	\$1,104.81

PREMIUMS FOR EMPLOYEES USING TOBACCO  
WILL BE INCREASED \$100 PER MONTH.

<b>Prescription Drugs</b>	
<b>In-Network</b>	
- Retail	
Generic/Brand/Non-Preferred	\$10/50/80
- Mail Order	
Generic/Brand/Non-Preferred	\$25/125/20

# Health Plan Benefits Plan Option 2 (05772)

Blue Cross Blue Shield

<b>Plan Number</b>	<b>05772</b>
<b>Cost Sharing - Member's Responsibility</b>	
<b>Deductible (DED) (Per Person/Family Aggregate)</b>	
In-Network	\$2,000 / \$6,000
Out-of-Network	\$6,000 / \$18,000
<b>Coinsurance (BCBSF pays / Member pays)</b>	
In-Network	80% / 20%
Out-of-Network	50% / 50%
<b>Out of Pocket Maximum (Per Person/Family Aggregate)</b>	
In-Network	\$5,500 / \$11,000
Out-of-Network	\$11,000 / \$22,000
<b>Medical Pharmacy OOP Maximum (Per Person Per Calendar Month)</b>	
In-Network (Preferred)	\$200
In-Network (Non-Preferred)	Combined with Preferred OOP
Out-of-Network	NA

<b>Office Services</b>	
In-Network Family Physician	\$35 Copayment
In-Network Specialist	\$65 Copayment
Out-of-Network	DED + 50%

<b>Emergency and Urgent Care</b>	
<b>Emergency Room Facility</b>	<ul style="list-style-type: none"> <li>• If admitted as an inpatient from ER, the hospital will submit an inpatient hospital claim instead of an ER facility claim. ER Copay will not apply on the claim; only inpatient facility cost share will apply.</li> </ul>
In-Network	\$300 Copayment
Out-of-Network	\$300 Copayment
<b>Physician Services at ER</b>	
In-Network	DED + 20%
Out-of-Network	INN DED + 20%
<b>Urgent Care Centers</b>	
In-Network	\$70 Copayment
Out-of-Network	DED + 50%

\$2000/ ind. deductible \$6000/family,\$35/\$65 copay office visit, coins. 80% after ded.,\$70 UC, \$300 ER Out of pocket Max \$5500/\$11,000 includes ded, coins, & copay; Pharmacy = \$10/30/50

BCBS Option 2 (05772)	Monthly Premium	Beck Pays	Employee Pays Month	Semi-Monthly
Employee Only	\$707.38	\$300.00	\$407.38	\$203.69
Employee/Spouse	\$1,683.56	\$300.00	\$1,383.56	\$691.78
Employee/Child	\$1,301.57	\$300.00	\$1,001.57	\$500.79
Employee/Family	\$2,207.03	\$300.00	\$1,907.03	\$953.52

PREMIUMS FOR EMPLOYEES USING TOBACCO WILL BE INCREASED \$100 PER MONTH.

<b>Prescription Drugs</b>	
<b>In-Network</b>	
- Retail	
Generic/Brand/Non-Preferred	\$10/60/100
- Mail Order	
Generic/Brand/Non-Preferred	\$25/150/250

# Health Plan Benefits Plan Option 3 (05302)

Blue Cross Blue Shield

<b>Plan Number</b>	<b>05302</b>
<b>Cost Sharing - Member's Responsibility</b>	
<b>Deductible (DED) (Per Person/Family Aggregate)</b>	
In-Network	\$5,000 / \$10,000
Out-of-Network	\$10,000 / \$30,000
<b>Coinsurance (BCBSF pays / Member pays)</b>	
In-Network	70% / 30%
Out-of-Network	50% / 50%
<b>Out of Pocket Maximum (Per Person/Family Aggregate)</b>	
In-Network	\$6,350 / \$12,700
Out-of-Network	\$20,000 / \$40,000
<b>Medical Pharmacy OOP Maximum (Per Person Per Calendar Month)</b>	
In-Network (Preferred)	\$200
In-Network (Non-Preferred)	Combined with Preferred OOP
Out-of-Network	NA
<b>Office Services</b>	<ul style="list-style-type: none"> <li>In-Network services in Office, Urgent Care Center, and Convenient Care Center combined are subject to the Copay Limit, then DED and Coinsurance.</li> </ul>
In-Network Family Physician	\$30 Copayment
In-Network Specialist	\$55 Copayment
Out-of-Network	DED + 50%
<b>Emergency and Urgent Care</b>	
<b>Emergency Room Facility</b>	<ul style="list-style-type: none"> <li>Emergency Room Facility services are subject to the Copay Limit, then DED and Coinsurance.</li> <li>If admitted as an inpatient from ER, the hospital will submit an inpatient hospital claim instead of an ER facility claim. ER Copay will not apply on the claim; only inpatient facility cost share will apply.</li> </ul>
In-Network	\$300 Copayment
Out-of-Network	\$300 Copayment
<b>Physician Services at ER</b>	
In-Network	DED + 30%
Out-of-Network	INN DED + 30%
<b>Urgent Care Centers</b>	
In-Network	\$60 Copayment
Out-of-Network	DED + 50%

\$5000/ind. deductible \$10,000/family, \$30/\$55 copay office visits, coins. 70% after ded., \$60 UC \$300 ER, Out of pocket Max \$6,350/\$12,700 includes ded, coins & copay; Phar benefits \$10 generic Choices

BCBS Option 3 (05302)	Monthly Premium	Beck Pays	Employee Pays Month	Semi-Monthly
Employee Only	\$476.10	\$300.00	\$176.10	\$88.05
Employee/Spouse	\$1,133.12	\$300.00	\$833.12	\$416.56
Employee/Child	\$876.03	\$300.00	\$576.03	\$288.02
Employee/Family	\$1,485.45	\$300.00	\$1,185.45	\$592.73

PREMIUMS FOR EMPLOYEES USING TOBACCO  
WILL BE INCREASED \$100 PER MONTH.

<b>Prescription Drugs</b>	
<b>In-Network</b>	
- Retail	
Generic/Brand/Non-Preferred	\$10 Generic Choices
- Mail Order	
Generic/Brand/Non-Preferred	\$25 Generic Choices



## Benefits and Rates Summary

### BlueDental Plan: Single Plan Options BlueDental

#### Dental Plan Benefits

Deductible	In-Network/Out-of-Network
No Deductible for Preventive Services	
Per Person Per Plan Year	\$50 / \$50
Per Family Per Plan Year	\$150 / \$150

Benefits	Coinsurance *
<b>Preventive Services</b>	100% / 100%
<b>Basic Services</b>	80% / 80%
<b>Major Services</b>	50% / 50%
Periodic Oral Evaluation (0120)	Preventive
Comprehensive Oral Evaluation (0150)	Preventive
Bitewing X-rays, two films (0272)	Preventive
Cleanings - Adult/Child (1110, 1120)	Preventive
Fluoride Treatment - Child (1203)	Preventive
Office Visits (9430)	Preventive
X-rays - Intraoral/Complete Series (0210)	Preventive
Sealant – per tooth (1351)	Preventive
Amalgam Restorations (Silver Fillings) (2140)	Basic
Resin-Based Restorations - Anterior (2330)	Basic
Extractions - Routine and Surgical (7140)	Basic
Root Canal Molar (3330)	Major
Periodontal Scaling & Root Planing-per quad (4341)	Major
Crowns - Porcelain fused to noble metal (2752)	Major
Complete Dentures (5110, 5120)	Major
Pontic - Porcelain fused to noble metal (6242)	Major
Partial Dentures (5213, 5214)	Major
Surgical placement of implant body: endosteal implant (6010)	Major
Implant supported porcelain fused to metal crown(titanium, high noble metal) (6066)	Major

# Dental Plan

**BlueDental**

## Orthodontia Services

Child to age 19 only

BlueDental Coverage

50%

## Waiting Periods

Major Service Benefits

None

Orthodontia Benefits

None

## Maximum Benefits

Plan Year (per person)

\$2,000

Lifetime Orthodontia (per person)

\$1,000

BlueDental Rates	Monthly Rates	Semi-Monthly Rates
Employee	\$30.56	\$15.28
Employee/Spouse	\$61.14	\$30.57
Employee/child(ren)	\$80.52	\$40.26
Family	\$115.86	\$57.93

## Humana Vision 130

(100+ employees)

		If you use an IN-NETWORK provider (Member Cost)	If you use an OUT-OF-NETWORK provider (Reimbursement)
<b>Routine eye exam</b>	Exam with dilation, as necessary	\$10	Up to \$30
	Retinal imaging <sup>1</sup>	Up to \$39	Not covered
<b>Contact lens<sup>2</sup> exam options</b>	Standard contact lens fit and follow-up	Up to \$55	Not covered
	Premium contact lens fit and follow-up	10% off retail	Not covered
<b>Frames*</b>		Up to \$130, 20% off balance over \$130	Up to \$65
<b>Standard plastic lenses<sup>3</sup></b>	Single vision	\$15	Up to \$25
	Bifocal	\$15	Up to \$40
	Trifocal	\$15	Up to \$60
	Lenticular	\$15	Up to \$100
<b>Lens options<sup>3</sup></b>	UV coating	\$15	Not covered
	Tint (solid and gradient)	\$15	Not covered
	Standard scratch-resistance	\$15	Not covered
	Standard polycarbonate		
	• Adults	\$40	Not covered
	• Children <19	\$40	Not covered
	Standard anti-reflective coating	\$45	Not covered
	Premium anti-reflective coating		
	• Tier 1	\$57	Not covered
	• Tier 2	\$68	Not covered
	• Tier 3	80% of charge	Not covered
	Standard progressive (add-on to bifocal)	\$15	Up to \$40
	Premium progressive		
• Tier 1	\$110	Not covered	
• Tier 2	\$120	Not covered	
• Tier 3	\$135	Not covered	
• Tier 4	\$90, 80% of charge, then up to \$120	Not covered	
Photochromatic / plastic transitions	\$75	Not covered	
Polarized	20% off retail	Not covered	

\* Discounts available on all frames except when prohibited by the manufacturer



# Vision Plan

**Humana**

<b>Contact lenses<sup>4</sup></b> (Applies to materials only)	Conventional	Up to \$130, 15% off balance over \$130	Up to \$104
	Disposable	Up to \$130	Up to \$104
	Medically necessary	\$0	Up to \$200
<b>Frequency</b>	Examination	Once every 12 months	Once every 12 months
	Lenses or contact lenses	Once every 12 months	Once every 12 months
	Frames	Once every 24 months	Once every 24 months
<b>Diabetic Eye Care</b> (Care and testing for diabetic members)	Exam	\$0	Up to \$77
	Retinal imaging	\$0	Up to \$50
	Extended ophthalmoscopy	\$0	Up to \$15
	Gonioscopy	\$0	Up to \$15
	Scanning laser	\$0	Up to \$33
<i>(Up to 2 services per year for each listed service)</i>			

## OPTIONAL BENEFITS

12-Month Frame Benefit	Benefit replaces the 24-month frequency of the base plan
Retinal Imaging	\$0 in-network and up \$20 for out-of-network benefits. Does not cross apply.
LASIK / PRK	\$250 per eye in- and out-of-network; 12-month waiting period applies
Eye Glass and Contact Lens Benefit	Allows fulfillment of frame plus spectacle lenses in addition to the contact lens benefit of the base plan
Polycarbonate Lenses for Children <19	Provides for standard polycarbonate lens

## ADDITIONAL PLAN DISCOUNTS

Member may receive a 20% discount on items not covered by the plan at network Providers. Members may contact their participating provider to determine what costs or discounts are available. Discount does not apply to EyeMed Provider's professional services, or contact lenses. Plan discounts cannot be combined with any other discounts or promotional offers. Services or materials provided by any other group benefit plan providing vision care may not be covered. Certain brand name Vision Materials may not be eligible for a discount if the manufacturer imposes a no-discount practice. Frame, Lens, & Lens Option discounts apply only when purchasing a complete pair of eyeglasses. If purchased separately, members receive 20% off the retail price.

Members may also receive 15% off retail price or 5% off promotional price for LASIK or PRK from the US Laser Network, owned and operated by LCA Vision. Since LASIK or PRK vision correction is an elective procedure, performed by specially trained providers, this discount may not always be available from a provider in your immediate location.

- 1 Member costs may exceed \$39 with certain providers. Members may contact their participating provider to determine what costs or discounts are available.
- 2 Standard contact lens exam fit and follow up costs and premium contact lens exam discounts up to 10% may vary by participating provider. Members may contact their participating provider to determine what costs or discounts are available.
- 3 Lens option costs may vary by provider. Members may contact their participating provider to determine if listed costs are available.
- 4 Plan covers contact lenses or frames, but not both, unless you have the Eye Glass and Contact Lens Rider.

Humana Vision Rates	Monthly Rates	Semi-Monthly Rates
Employee	\$6.66	\$3.33
Employee Spouse	\$13.31	\$6.65
Employee child(ren)	\$12.66	\$6.33
Family	\$19.89	\$9.95

# Optional Medication Coverage

**Generic Choices/Florida Blue**

## What is Generic Choices?

Generic Choices is a low cost pharmacy option that provides coverage for generic and select brand medications through retail and mail order pharmacies.

### What types of drugs are covered?

Generic medications

Select brand medications\*

\*Cancer and HIV



### How much will drugs cost?

	Retail	Mail order	Out-of-network
Generic drugs, diabetic testing supplies (strips, lancets, meter) and insulin	\$10 copay	\$25	Not covered
Preferred brand name drugs	20% coinsurance \$50 minimum/ \$200 maximum	20% coinsurance \$125 minimum/ \$500 maximum	Not covered

## Is a specific drug covered by Generic Choices?

To find out if a drug is covered, check out the Generic Choices [medication guide](#). The medication guide lists covered drugs and the requirements and may be updated up to four times a year after careful review by a team of medical experts. Clinical effectiveness, safety risks, side effects and costs are all considered during this review. This helps us determine which drugs can help you stay well and keep your costs down.

## What pharmacies can I use?

Most major pharmacies are included. To find a participating pharmacy, go to [floridablue.com](http://floridablue.com), select as your plan, either BlueOptions or BlueCare, and click "Continue". Choose "Pharmacy" as the provider type and search by address or ZIP code.

## Is mail order available?

Ordering drugs by mail can save time and money. With a new prescription, simply complete a [mail order form](#) and mail it along with an original 90-day supply prescription from your doctor. Then, you'll order refills through your member account at [floridablue.com](http://floridablue.com).

## Questions?

Visit the [Prescription Drug Coverage](#) page on [floridablue.com](http://floridablue.com) for tips to save time and money on prescriptions. Once your Florida Blue benefits begin, you can log in to [floridablue.com](http://floridablue.com) for helpful drug information and tools. You can also call the toll-free customer service number on your member ID card.

# General or Urgent Healthcare Questions

Florida Blue

It's okay to ask for help... Your quality of life matters.

## Personal care services are part of your plan.

When you have health concerns, a little extra help can go a long way. That's why your health benefits include personalized services—for care, support and understanding that helps improve the quality of your life, and make health care decisions easier for you and your family.

Whether you're pregnant, or have a common cold, a chronic condition, a complex condition, or even an unexpected health crisis—there's extra help available to you.

- One-to-one health care professionals for support, guidance and answers to your questions.
- Personalized information based on your health care needs, such as health action plans, educational materials and community resources.
- Assistance with coordinating your care with multiple doctors.
- Quality treatment options and cost estimates based on your plan benefits, including office visits, medication, x-rays/images and surgical services.
- Education and support for the member, family and caregiver.
- You choose the level of assistance that you're comfortable with, and decide what's right for you. There's no cost to you, and your medical information is kept confidential.



### General or urgent health care questions

Health questions can come up at any time; and you don't have to wait for answers. You'll get answers, plus helpful resources that you can use. Whether you have an immediate health concern, or a general question about your doctor's plan of treatment—the **nurseline<sup>2</sup>** is always open at **1-877-789-2583**.

### Pregnancy and childbirth

This is the perfect time to join our Healthy Addition<sup>®</sup> program. It's a prenatal education program, and particularly important for those with high-risk pregnancies. You can talk with nurses, and they'll walk you through steps for a healthy pregnancy, birth and baby. Enjoy free educational materials and complementary gifts. **To join, call 1-800-955-7635, Option 6.**

You'll have help along the way, so you can focus on what matters most.



# General or Urgent Healthcare Questions

Florida Blue

We understand that each person is an individual with unique needs.

If you have an unexpected illness or even a long-term health condition(s), it helps to know what actions to take to manage your health for a better quality of life. We can help with your immediate health concerns and explain what resources are available to you. We have dedicated nurses and programs designed to help you manage chronic conditions such as:

- Diabetes
- Asthma
- Chronic Obstructive Pulmonary Disease (COPD)
- Coronary Artery Disease (CAD)
- Heart Failure
- Depression
- Behavioral Health



## Specialized care that requires close monitoring:

- Coordination of complex medical conditions, such as Cancer, Crohn's Disease, Hepatitis C, Multiple Sclerosis, Multiple Trauma, Rheumatoid Arthritis—and more.
- Physician home care for members confined to their home<sup>1</sup>.
- Palliative or pain management care to help relieve the pain, symptoms and other stressors of a serious illness.
- Hospice care management for individuals and families dealing with a terminal illness.

We're here to help you understand what you may experience with your condition, help you prevent complications and provide you with extra peace of mind. So you can focus on staying well. **To find out about services available to you, call our Care Consultants at 1-888-476-2227.**

Care Consultants help point you in the right direction.

## Your benefits and costs

Planning ahead can save you a lot of money — and make important decisions easier. Whether it's your first office visit, or a series of ongoing medical treatments or medication, **call our Care Consultants first.** You'll find out how your benefits work, what factors can affect your costs and which programs are available to assist you.

## Your member website is available anytime...

You'll find an entire area dedicated to Health and Wellness; explore health symptoms and conditions; assess your personal health, set health goals and track them online. Log in at [floridablue.com](http://floridablue.com).

## Personal Care Services—at no cost to you

24-Hour Nurseline <sup>2</sup> :	1-877-789-2583
Healthy Addition <sup>®</sup> :	1-800-955-7635, Option 6
Care Consultants/ Personal Care Services:	1-888-476-2227
Florida Blue Center:	1-877-352-5830 or visit <a href="http://floridablue.com">floridablue.com</a> for locations
Customer Service:	See the back of your ID card

# Disability Income Insurance

American Fidelity Assurance Company

## Disability Income Insurance

When a disabling injury or sickness happens to one of your employees, it can be difficult to know what to do. You want to help financially, but where do you draw the line? That is why offering disability insurance is so important to a comprehensive benefit package. It helps ensure that your employees' paychecks are protected when they need it the most.

American Fidelity's Disability Income Insurance has been designed specifically with your industry in mind. The plan design may be customized to meet the needs of each individual employee and complement your benefit offerings.

### Short-Term and Long-Term Disability

The benefits package you provide to your employees will ultimately drive which disability insurance program you decide to offer. At American Fidelity, we offer ways for both you and your employees to customize the plan to meet specific needs.

### Customized with Your Employees in Mind

Not everyone's needs are the same. That is why we offer multiple elimination and benefit periods for each employee to choose from. This allows each disability plan to be customized to each employee's specific needs.

## Highlights

### Eligibility

Each employee will have up to 13 months to apply for coverage without answering medical questions. Pre-existing conditions may apply.

### Return-to-Work Incentive

Employees will receive partial benefit for coming to work part-time while still on disability.

### Customized Benefit Amounts

Employees are allowed to select a benefit amount that meets their needs up to 60% of their income.

### Special Condition Benefits

Mental illness, drug and alcohol addiction, and other special conditions benefit payments are available.

### Employee Assistance Program

This value-added service is provided with the long-term disability product and provides your employees with access to telephonic life coaching, legal assistance, and more.

Short Term Disability	Elimination Periods	Benefit Periods Up To	Benefit Amount
	7 days	180 days	Up to 60% of monthly compensation
Paycheck Protector	Elimination Periods	Benefit Periods Up To	Benefit Amount
	14 Days Injury & 30 Days Sickness	Social Security Normal Retirement Age - Injury 150 days - Sickness	Up to 60% of monthly compensation
Long Term Disability	Elimination Periods	Benefit Periods Up To	Benefit Amount
	7 Days, 14 Days, 30 Days, 90 Days, or 180 Days	Social Security Normal Retirement Age - Injury 5 years - Sickness	Up to 60% of monthly compensation

*These products may contain limitations, exclusions and waiting periods.*

# Long-Term Disability Income Insurance

*American Fidelity Assurance Company*

How do you pay for your mortgage, bills, food and other monthly expenses? If your paycheck stopped today, could you maintain your current lifestyle?

American Fidelity's Long-Term Disability Income Insurance is designed to help protect you if you become disabled and cannot work due to a covered Accidental Injury or Sickness.

## How the Plan Works

If you become disabled due to a covered accident or sickness, Long-Term Disability Income Insurance will pay the disability benefit once you have satisfied the elimination period. Your benefit amount is dependent on your salary and the amount you select at the time of application. Disability benefits will be payable up to the benefit period stated in your policy.

## Optional Riders

Enhance your base plan with the following riders:

- **Critical Illness Rider**
- **Accident Only Spousal Rider**
- **Hospital Indemnity Benefit Rider**
- **COBRA Premium Rider**
- **Survivor Benefit Rider**

Coverage Feature	What It Means To You
Accidental Injury and Sickness Coverage	You are covered in the case of a covered accident that occurs away from work or a covered sickness that causes you to be disabled.
Benefit Paid Directly to You, Regardless of Other Coverage	Use the money however best fits your financial needs, regardless of other insurance.
Waiver of Premium	Premiums are not required while you are disabled based on the length of your disability.
Age at Entry	Your premiums will be based on the date your policy becomes effective.
Accidental Death Benefit	Receive a benefit if you die as the direct result of an Accidental Injury and death occurs within 90 days after the date of the Accidental Injury.
Competitive Premiums	Your monthly premiums could be paid with only one hour of a week's paycheck.
Payroll Deducted	Enjoy the convenience of having your premiums deducted straight from your paycheck.

Limitations, exclusions, and waiting periods apply. Refer to your policy for complete details. **This product is inappropriate for people who are eligible for Medicaid coverage.**

# Employee Assistance Program

American Fidelity Assurance Company

SPECIALIZING IN SUPPLEMENTAL BENEFITS FOR YOUR INDUSTRY



## Employee Assistance Program

### Help with everyday issues.

Your employer is offering you access to an Employee Assistance Program (EAP) to help you manage everyday issues from work-life balance to family concerns.

#### Telephonic Life Coaching

- Three phone sessions with a master's level certified life coach
- Participant and coach work together to develop personalized plan to meet participant's life goals
- Assist participant in exploring and identifying personal strengths and solutions
- Examples of life coaching issues include personal goals, relationship issues, adjusting to situations, career planning, and handling the workplace

#### 24/7 Resources

- Online and mobile app
- Access to legal library on more than 900 legal topics, including legal guides, forms, and an interactive will program
- Access to financial library with 40 interactive tools and assessments, including articles, podcasts, and CDs on financial health topics

- Access to work-life library addressing issues on parenting, child care, elder care, and workplace issues

#### Work-Life Program

- Telephonic support for legal and financial issues
- Access to LifeWorks on-staff attorneys to discuss legal areas such as estate law, living wills/power of attorney, real estate law, family law, credit, and collections law
- Access and discount to network of 22,000 attorneys
- Access to LifeWorks on-staff financial counselors to discuss issues such as credit card debt, debt management, foreclosure, mortgage, budgeting, savings, and investing

*This program is delivered by LifeWorks.*

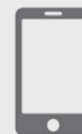
#### For More Information

800-456-0018

[lifeworks.com](http://lifeworks.com)

User ID: afac

Password: lifeworks



9000 Cameron Parkway • Oklahoma City, OK 73114  
800-654-8489 • [americanfidelity.com](http://americanfidelity.com)

AMERICAN FIDELITY   
a different opinion

# Individual Term Life Insurance

**American Fidelity Assurance Company**

Life insurance is an important factor to any family. It serves as a foundation to help in the case of a loved one's premature death. Plan today to make the right move for your loved ones.

American Fidelity offers an Individual Term Life Insurance policy to help with your financial needs for your short-term and long-term goals.

## How the Plan Works

Individual Term Life Insurance has a death benefit with no cash accumulation feature. The policy is initially written for a 10, 20 or 30-year term period, but may be renewed at the insured's option for the same level renewal period depending upon the term chosen.

The last level renewal period is no later than age 70 for the 10-year term policy and age 60 for the 20-year term policy. Thereafter, premiums are renewable annually up to age 90. The 30-year term policy is renewable annually after the initial 30-year term period up to age 90. Renewal rates will be based on the insured's age at the time of renewal.<sup>1</sup>

## Optional Riders

Enhance your base plan with the following riders:

- **Spouse Term**
- **Children's Term**
- **Waiver of Premium**
- **Accidental Death & Dismemberment**
- **Accelerated Benefit for Long Term Illness (30 Year Term Only)**

Interim coverage for death will be in force from the date your application is signed if on such date the proposed insured is insurable per our underwriting guidelines for the requested coverage in accordance with the terms of the policy. This interim coverage for death will remain in force until the earlier of: 1) the date a policy becomes effective; 2) the date we decline the application; or 3) the date we notify the proposed insured that they are ineligible for interim coverage. The employee and/or spouse must remain actively at work during the interim coverage period. If the death of the proposed insured occurs during the interim coverage period, the first month's premium will be subtracted from the policy proceeds. Interim coverage is only for death benefits under the base policy, Children's Term Rider and Spouse Term Rider. No interim coverage benefits are available under any Waiver of Premium Rider, Accidental Death and Dismemberment Rider, or Accelerated Benefit Rider for Long Term Illness.

Coverage Feature	What It Means To You
Three Plan Options: 10, 20 and 30-Year Level Term Coverage	Choose the coverage period to meet your financial needs.
Guaranteed Death Benefit	Your death benefit is guaranteed during the initial term period you choose.
Accelerated Death Benefit for Terminal Condition	Receive a portion of the chosen death benefit if you are diagnosed with a covered terminal condition. Limitations and exclusions may apply.
Conversion Benefit	Turn your policy into a permanent plan any time up to age 70. The rate for your new plan will be based on your attained age.
Guaranteed Renewable	Renew your policy up to age 90 regardless of your health. <sup>1</sup>
Interim Coverage for Death	Death benefit coverage starts when the life insurance application has been signed and underwriting guidelines have been met.
Enhance Your Coverage	Add optional Spouse Term, Children's Term, Waiver of Premium, Accidental Death & Dismemberment, Accelerated Benefit for Long Term Illness (30 Year Term Only) Riders to expand your policy.
Express Issue Application	Only 3 express issue health questions are required to issue coverage. <sup>2</sup>
Portable	You own the policy. Take the coverage with you if you choose to leave your current job.
Payroll Deducted	Enjoy the convenience of having your premiums deducted straight from your paycheck.

<sup>1</sup>Premiums are subject to increase upon renewal. <sup>2</sup>Issuance of the policy may depend on the answer to these questions.

Limitations, exclusions and waiting periods apply. Please refer to your policy for complete details, Policy Form Series RCTL14. **This product is inappropriate for people who are eligible for Medicaid coverage.** Individual Life plans do not qualify under Section 125.



# Individual Whole Life Insurance

**American Fidelity Assurance Company**

It's important to prepare for the unexpected and help ensure your loved ones will be financially protected in the event of a tragedy. Your life insurance benefit can help replace your income and help your family meet important financial needs like funeral expenses, everyday living costs, and college.

American Fidelity Assurance Company's Whole Life Insurance provides protection for your entire life. It's an individual policy, which means you own it and can take it with you when you leave employment or when you retire to age 121. The premium and amount of protection stay the same as long as the policy is in force, provided premiums are paid as required.

## Discontinue Your Premium While Keeping Your Coverage Active

- **Same Amount of Coverage - Shorter Length of Time:** Under the **Extended Term Insurance Provision**, your policy's original face amount (minus outstanding loans or accelerated benefit payments) will be guaranteed for a specific term of time. In addition, your premium is "paid in full" until your new extended term period expires, terminating your policy.
- **Coverage to Age 121 - Smaller Guaranteed Benefit Amount.** You can rest easy knowing you are covered for your entire life by utilizing the **Reduced Paid-Up Provision** and reducing your original death benefit to a smaller amount. Enjoy being premium-free while having the security of guaranteed lifetime coverage, just at a reduced benefit amount. Plus your cash value will continue to accumulate.

## Optional Riders

Enhance your base plan with the following riders:

- **Waiver of Premium Rider**
- **Accidental Death Dismemberment Rider**
- **Children's Term Rider**
- **Accelerated Benefit Rider for Long Term Illness**
- **Accelerated Benefit Rider for Critical Illness**

## Flexibility when you need it

By choosing a Whole Life Policy, you have flexibility to adjust your benefits when needed. Cash value flexibility features include:

	What It Means To You
Cash Surrender	You will receive a check equal to your plan's current available cash value. In many situations, cash surrenders may be paid tax free. <sup>1</sup>
Partial Surrender	You can withdraw a small portion of the policy's cash value in the form of cash, in exchange for a proportional reduction to the policy's available cash value and the face amount.
Loans	You can borrow against your cash value at a competitive 8% loan interest rate.

<sup>1</sup>As long as the cash surrender does not exceed the total premiums received under the policy since inception. Please consult your tax consultant for your specific situation.

Limitations, exclusions and waiting periods apply. Please refer to your policy for complete details, ICC14WL14 series. **Individual life plans do not qualify under Section 125.**

# Accident Only Insurance

Limited Benefit Accident Only Insurance

Whether a weekend warrior with an active lifestyle or just a busy family, accidents can happen anytime, anywhere, without warning. Being prepared for the unexpected can make all the difference.

American Fidelity's Accident Only Insurance policy provides you a solution for those unforeseen accidents that life sometimes delivers. Our Limited Benefit Accident Only Insurance is designed to help pay for the unexpected medical expenses an individual may incur for the treatment of covered injuries received in an accident.

## How the Plan Works

Our Accident Only Insurance policy pays according to a wide-ranging schedule of benefits. In addition, the policy provides 24-hour coverage for accidents that occur both on and off the job.

All benefits are only paid as a result of Injuries received in an Accident that occurs while coverage is in force. All treatment, procedures, and medical equipment must be diagnosed, recommended and treated by a Physician. All benefits are paid once per Covered Person per Covered Accident unless otherwise specified in the Limitations and Exclusions section.

## Optional Rider

Enhance your base plan with the following rider:

- **Accident Benefit Enhancement Rider**

## American Fidelity Assurance Company

Coverage Feature	What It Means For You
Plan Options: Basic, Enhanced, and Enhanced Plus	Choose the plan to meet your financial needs.
Four Choices of Coverage: Individual, Individual and Spouse, Individual and Child, or Family	Choose the coverage that fits your lifestyle.
Wide-Ranging Schedule of Benefits	Covers all types of covered injuries.
Wellness Benefit	The plan pays an annual Wellness Benefit for one Covered Person to receive a routine physical exam, including immunizations and preventative testing.
Accident Emergency Treatment Benefit	Receive a benefit when emergency treatment in a Physician's office or emergency room occurs within 72 hours of a covered accident.
Benefit Paid Directly to You, to use as you see fit	Use the benefit however best fits your financial needs.
Guaranteed Renewable	Keep your coverage as long as premiums are paid as required.
24-Hour Coverage	You are covered on or off the job.
Portable	You own the policy. Take the coverage with you if you choose to leave your current job. Your premiums will remain the same.
Additional Coverage Options	Enhance the base plan by adding an optional rider.
Payroll Deducted	Enjoy the convenience of having your premiums deducted straight from your paycheck.

Limitations, exclusions and waiting periods apply. Refer to your policy for complete details, AO-03 series with AMDI258 rider. **This product is inappropriate for people who are eligible for Medicaid coverage.** The premium and amount of benefits provided vary dependent upon the plan selected. The company has the right to change premiums by class. Availability of riders may vary by state.

# Cancer Insurance

Limited Benefit Cancer Insurance Policy

**American Fidelity Assurance Company**

A cancer diagnosis may be overwhelming. Even with a good medical plan, the out-of-pocket costs of cancer treatment, such as travel, childcare, and loss of income, are considerable and may not be covered.

American Fidelity Assurance Company's Cancer Insurance offers a solution to help you focus your attention on fighting cancer. We offer plans that can help assist with out-of-pocket costs often associated with a cancer diagnosis.

## How the Plan Works

Our plan is designed to help cover expenses if you are diagnosed with a covered Cancer. With over 20 benefits available to you, this plan provides benefits for the treatment of cancer, transportation, hospitalization and more. We provide the benefit directly to you, to be used however you see fit.

## Optional Riders

Enhance your base plan with the following riders:

- **Critical Illness Rider**  
Includes a cancer benefit and a heart attack/stroke benefit
- **Hospital Intensive Care Unit Rider**

Coverage Feature	What It Means For You
Plan Options: Basic, Enhanced and Enhanced Plus	Choose the plan to meet your financial needs.
Three Choices of Coverage: Individual, Single Parent Family, or Family	Choose the coverage that fits your lifestyle.
Wide-Ranging Schedule of Benefits	Covers a wide range of treatments.
Benefit Paid Directly to You	Use the money however best fits your financial needs.
Guaranteed Renewable	Policy is guaranteed renewable as long as premiums are paid as required.
Diagnostic and Prevention Benefit	Receive a benefit for visiting your doctor for a cancer screening test, which helps with early detection.
Transportation and Lodging	Receive benefits if you travel more than 50 miles from your home using the most direct route for covered treatment.
Portable	You own the policy. Take the coverage with you if you choose to leave your current job. Your premiums will remain the same.
Additional Coverage Options	Enhance the base plan by choosing from a selection of optional riders.
Payroll Deducted	Enjoy the convenience of having your premiums deducted straight from your paycheck.

Limitations, exclusions and waiting periods apply. Please refer to your policy for complete details. **This product is inappropriate for people who are eligible for Medicaid coverage.** The company has the right to change premiums by class. The premium and amount of benefits provided vary dependent upon the plan selected.

# Group Critical Illness Insurance

Limited Benefit Group Critical Illness Insurance Policy

**American Fidelity Assurance Company**

Surviving a critical illness, such as a heart attack or stroke, can come at a high price. With advances in technology to treat these diseases, the cost of treatment rises more and more every year. Even with medical insurance, the out-of-pocket expenses associated with a critical illness can affect anyone's finances.

American Fidelity Assurance Company's Limited Benefit Group Critical Illness Insurance can be the solution that helps you and your family focus on recovery, and may help you with paying bills. Our plan can assist with the expenses that may not be covered by major medical insurance.

## How the Plan Works

If you are diagnosed with a covered Critical Illness, such as a heart attack or stroke, this plan is designed to pay a lump sum benefit amount to help cover expenses. Also, this plan offers a Recurrent Diagnosis Benefit for certain specified Critical Illnesses that provides an additional 50% of the Critical Illness benefit amount after the second occurrence date. Covered Critical Illness events include Heart Attack, Permanent Damage Due to a Stroke, and Major Organ Failure.

## Guaranteed Renewable

You are guaranteed the right to renew your base policy until age 75 as long as you pay premiums when due or within the premium grace period. The insurer has the right to increase premium rates if the policy so provides.

Coverage Feature	What It Means For You
Plan Options	Choose from three lump sum benefit amounts: \$10,000, \$20,000 or \$30,000.
Coverage Option	Children are automatically covered under the Employee base plan. If elected, Spousal Benefit Amounts will be 50% of the Employee Benefit Amount.
Wellness Benefit	Receive a benefit for your annual health screening test.
Benefit Paid Directly to You	Use the benefit however best fits your financial needs.
Portable	You own the policy. Take the coverage with you if you choose to leave your current job. Your premiums will remain the same.
Additional Coverage Options	Enhance the base plan by adding an optional rider.
Payroll Deducted	Enjoy the convenience of having your premiums deducted straight from your paycheck.

Limitations, exclusions and waiting periods apply. Please refer to your policy for complete details. **This product is inappropriate for people who are eligible for Medicaid coverage.** Group Critical Illness is only offered on an after-tax basis.

# Universal Life Insurance

**Texas Life Insurance Company**

It is impossible for life insurance to emotionally compensate for a loss, but it may help ease the financial obligations placed on your loved ones. Portable individual life insurance products can help.

## Permanent, Portable Life Insurance (PureLife-Plus)

A voluntary permanent, portable product that guarantees life insurance to age 121. (Underwritten by Texas Life Insurance Company)

### Did You Know?

More Americans were relying on employer-sponsored life insurance coverage than individual coverage.<sup>1</sup>

We can provide you with the opportunity for Group Life Insurance — but, do you have permanent, portable, individual life insurance you can take with you after your employment ends? Life insurance at retirement can be very costly.

### Consider a PureLife-Plus Policy!

Ask your American Fidelity Representative how you can secure your life insurance premium today at a younger issue age with a permanent and portable product.

- Permanent life insurance to age 121.
- Minimal cash value - premiums dedicated primarily to the purchase of life insurance.
- Long premium guarantees.<sup>2</sup>
- Unique limited right to partial refund of premium if future premium required to continue coverage increases.<sup>2</sup> (Conditions apply)
- Portable when you leave employment.
- Coverage available for employee, spouse, domestic partner, child(ren) and grandchild(ren).<sup>3</sup>

<sup>1</sup>LIMRA: Employers Pessimistic About Benefit Costs Under PPACA February 12, 2013

<sup>2</sup>After the Guaranteed Period, premiums may go down, stay the same or go up.

<sup>3</sup>Coverage not available in WA on children and grandchildren. Texas Life complies with all state laws regarding marriages, domestic and civil union partnerships, and legally recognized familial relationships. Coverage and spouse/domestic partner eligibility may vary by state.

17M072-C1022 (expires 03/19)

Policy Form: PRFNG-NI-10

PureLife-plus is not available in NJ, NY or PA

SB-22482-0317

Coverage Feature	What It Means To You
Several Product Options	Choose the coverage to meet your financial needs.
Guaranteed Premium <sup>2</sup>	Your premiums are guaranteed for each applicable period.
Guaranteed Death Benefit <sup>4</sup>	Your death benefit is guaranteed for the life of the policy provided premiums are paid when due.
Interim Coverage <sup>5</sup>	You will be covered from the date of your application if you are insurable for the requested coverage on the date the policy takes effect. Your coverage will remain in force until the policy has been issued or declined.
Enhance Your Coverage	Additional riders may be available on certain products to expand your policy.
Easy Application	No medical exams and minimal health questions. <sup>6</sup>
Portable	You own the policy. Take the coverage with you if you choose to leave your current job.
Payroll Deducted	Enjoy the convenience of having your premiums deducted straight from your paycheck.


All products may not be available in all states and may contain limitations, exclusions and/or waiting periods. These are brief descriptions of the actual policies.

<sup>4</sup>Guarantees are subject to product terms, exclusions and limitations and the insurer's claims-paying ability and financial strength.

<sup>5</sup>Conditions apply. In Kansas, Temporary Insurance applies. Form 16M050.

<sup>6</sup>Issuance of this policy may depend on the answer to these questions. PureLife-plus is underwritten and issued by Texas Life Insurance Company, 900 Washington Avenue, Waco, Texas 76701. See the PureLife-plus brochure for details.





# **FLEXIBLE SPENDING ACCOUNTS**

**Health Flexible Spending Account (Healthcare FSA)  
Benefits Debit Card  
Dependent Care FSA  
Managing Your Account  
Retirement**

# Flexible Spending Accounts

**American Fidelity Assurance Company**

Flexible Spending Accounts are great cost savings tools to help with common medical expenses not covered by your major medical insurance and/or dependent care expenses. You can elect a portion of your pay to be deducted, on a pre-tax basis, from each paycheck to use for reimbursement of qualified out-of-pocket expenses throughout the plan year.

## Flexible Spending Account Savings Example

With FSA		Without FSA
\$30,000	Annual Gross Income	\$30,000
- \$2,400	Healthcare FSA Election	\$0
- \$2,500	Dependent Care Account Election	\$0
\$25,100	Taxable Gross Income	\$30,000
- \$5,020	Estimated Federal Tax (20%)	- 6,000
- \$1,920.15	Estimated FICA (7.65%)	- 2,295
\$18,159.85	Annual Net Income	\$21,705
\$0	Cost of Medical Expenses	- \$2,400
\$0	Cost of Dependent Care Expenses	- \$2,500
<b>\$18,159.85</b>	<b>Spendable Income</b>	<b>\$16,805</b>
<b>With an FSA, potential annual savings in this example is: \$1,354.85</b>		
By using an FSA to pay for eligible expenses, you can reduce your taxable income which will result in additional spendable income.		

## Healthcare Flexible Spending Account (Healthcare FSA)

A Healthcare FSA allows you to allocate money on a pre-tax basis to reimburse yourself for qualified medical expenses for you and your family. Qualified expenses include anything from co-payments, medical deductibles, prescriptions and much more.

Minimum Annual Election: Determined by your employer

Maximum Annual Election: Internal Revenue Code allows up to \$2,700 per plan year, but your employer will determine amount.

### Examples of Eligible Expenses for Healthcare FSA

- Copays/coinsurance
- Deductibles
- Dental treatments
- Diabetic supplies
- Prescription drugs and medicines
- Eye exams, eyeglasses, contact lenses, contact lens solution and enzyme
- Flu shots
- Immunizations
- Lab fees
- Laser/Lasik/RK surgery
- Medical exams
- Orthodontia
- Psychiatric care
- Wheelchair
- X-rays

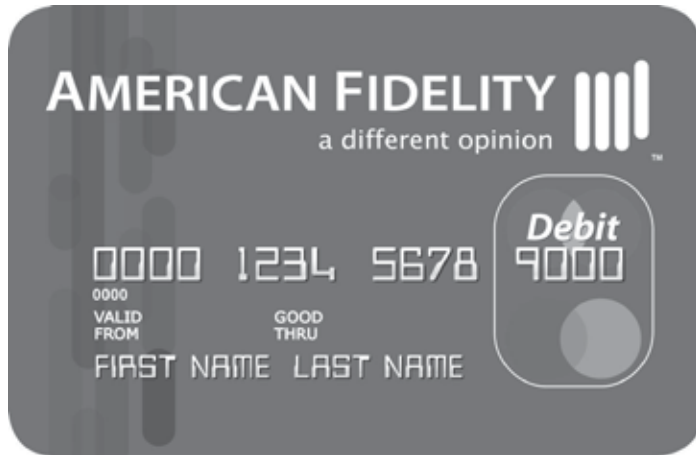
**For a more complete list of eligible expenses, please visit [www.americanfidelity.com](http://www.americanfidelity.com)**

# Flexible Spending Accounts

## Benefits Debit Card

### Benefits Debit Card

American Fidelity will provide a Benefits Debit Card to all employees who elect to participate in a Healthcare FSA (where offered by your employer.) The debit card gives immediate, convenient access to Healthcare FSA funds at the point of sale for prescriptions, copays, and other common qualified medical expenses. The card can only be used for the Healthcare FSA and is not available for the DCA.



### Using Your Benefits Debit Card

Simply swipe your card like you would with any other credit card. Whether at the doctor's office or the dentist, the amount of your eligible expenses will be automatically deducted from your Healthcare FSA. Save ALL receipts!

Cards for Healthcare FSAs can be used at:

- Health care related facilities which include: hospitals, physician offices, dental offices, vision offices; and,
- Merchants participating in the Inventory Information Approval System (IIAS).
- The card is for medical expenses only; dependent day care expenses are not eligible.
- The card cannot be used for over-the-counter drugs filled with a prescription. You will need to file a manual claim for these types of expenses.

### Snap. Submit. And Go!

When using your Benefits Debit Card to pay for an eligible expense, you may need to retain documentation to verify the expense. The AFmobile® app makes this easy.

- **Snap** a photo of the itemized receipt\* with your phone.
- **Submit** the photo of the itemized receipts within the app when you receive notification that a receipt is needed to verify your expense.
- **Go!** After submitting your verification and its review, you will be able to view the status of your reimbursement within the app.

\*The Internal Revenue Code (IRC) requires proof of the eligible expenses using itemized receipts or other documentation showing the date of service, person for whom service was provided and description of the expense. Depending on the type of expense, documentation may come in the form of third party itemized statements or Explanation of Benefits.

### Activating Your Card

You will receive your card at your home address and may begin using your card on the first day of your plan year. Your card will be automatically activated when you use it for the first time for an eligible expense.

# Flexible Spending Accounts

American Fidelity Assurance Company

## Dependent Care Account (DCA)

A Dependent Care Account allows you to allocate money on a pre-tax basis to reimburse yourself for dependent care expenses that allow you (and your spouse) to work. Reimbursement is permitted only after the services have been provided and the expense has been paid. As dependent care contributions are withheld from your paycheck and placed into the account, these funds become available for reimbursement requests. Submit the entire amount of your dependent care expense after the care is provided, even if it exceeds your monthly contribution amount, to maximize reimbursement opportunities. This allows you to build up a "pool" of submitted expenses, with pending amounts ready for reimbursement as soon as your next contribution is received and deposited into your account.

Minimum Annual Election: Determined by your employer.  
Maximum Annual Election: While the IRC allows a maximum of \$5,000 per year, the employer may set the maximum equal to or lower than this amount.

### Examples of Eligible Dependent Care Expenses

After-school care or extended day programs

Nanny expenses

Baby-sitter inside or outside participant's household

Custodial or elder care expenses if the qualifying individual still spends at least 8 hours each day in the employee's household

Dependent Day Care center\* expenses/pre-kindergarten/nursery school expense

Expenses paid to a non-dependent relative of participant to care for the child

Summer day camp if the primary purpose of the expense is custodial in nature and not educational

**For a more complete list of eligible expenses, please visit [www.americanfidelity.com](http://www.americanfidelity.com).**

*\*A Dependent Care Center is a place that provides care for more than six persons (other than persons who live there) and receives a fee, payment or grant for providing services for any of those persons, regardless of whether the center is run for profit.*

Regardless of whether you participate in the Dependent Care Account under the Section 125 Plan or claim the Dependent Care credit on your income tax return, you must provide the Internal Revenue Service with the name, address and taxpayer identification number (TIN) or Social Security number of your dependent care provider(s) by completing either Schedule 2 of Form 1040A or Form 2441 and attaching it to your annual income tax return. Be sure that you follow

the current instructions given by the IRS for preparing your annual income tax return. Failure to provide this information to the IRS could result in loss of the pre-tax treatment of your Dependent Day Care FSA contributions or loss of the Dependent Care Tax Credit.

## FSA Fund Availability

### Healthcare FSA

Your full annual election is available to you on the first day of the plan year.

### Dependent Care Account

Unlike the Healthcare FSA, the entire elected amount is not available on the first day of the plan year, but rather as contributions are received.

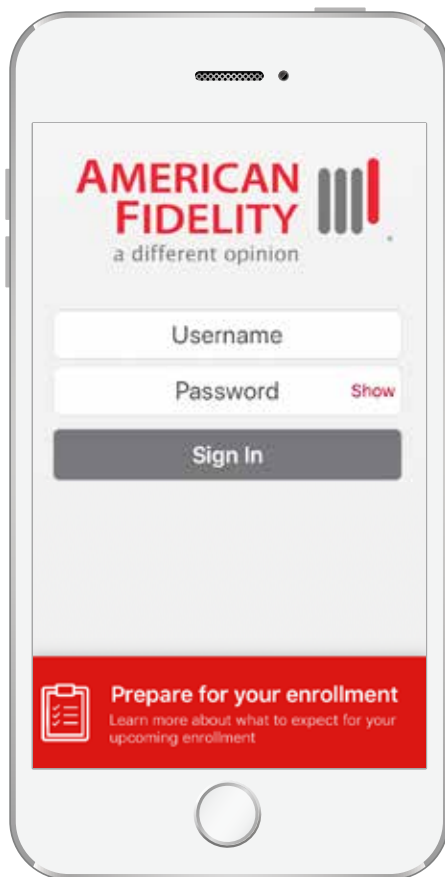
## Important FSA Notes:

- Participants are generally allowed a 90-day run-off period after the plan year ends to submit claims for expenses that occurred during the plan year but were not yet submitted.
- If you are a new employee entering the FSA during a plan year, reimbursement is only available for expenses and services provided after you begin your participation in the FSA.
- If you are enrolled in the Healthcare FSA and take a leave of absence during the plan year, you may (subject to your employer's plan):
  1. Prepay the contributions on a pre-tax basis, or
  2. Continue the contributions by remitting them to your employer. Pre-tax contributions may continue if you continue to receive enough pay, or
  3. Prorate the unpaid contributions over the remaining pay periods when you return to work.
- Failure to make all elected contributions will result in termination of your account as of the date contributions ceased.
- Healthcare FSAs must comply with COBRA and generally must offer COBRA continuation rights to qualified beneficiaries who lose Healthcare FSA coverage due to certain qualifying events. For most Healthcare FSAs, COBRA may be offered upon a qualifying event only if you have a balance remaining in your Healthcare FSA. The balance is generally calculated by subtracting the reimbursements made prior to the qualifying event from the annual election. If eligible, you may choose to continue your contributions by either sending your contributions to your employer on an after-tax basis each pay period, or, you may choose to make a pre-tax contribution for your remaining elections for the plan year from your final pay or severance pay. Expenses incurred while contributions are being made are eligible for reimbursement. Coverage generally may not continue beyond the current plan year. If you do not elect COBRA, only expenses incurred during the period of employment are reimbursable. Coverage under the Healthcare FSA ceases when the contributions cease.



## Mobile Convenience

For ultimate convenience, get 24/7 access, direct from your tablet or mobile device with AFmobile®. Our mobile application allows you to manage your reimbursement accounts and insurance benefits, all from the palm of your hand.



### AFmobile Features

- ✓ Manage claims
- ✓ Receive account alerts
- ✓ Maintain personal information
- ✓ View account balance
- ✓ Prepare for enrollment
- ✓ Submit receipt documentation

#### Getting started:

- Download AFmobile on your smart device.
- Register using your last name, Social Security Number, and email address.
- Your email address should be the same email address provided at time of enrollment.

Please allow one business day after you enroll  
before registering for your account.

*If you already have an online account, your username and password will be the same for AFmobile.*



## Online Control

From your laptop or desktop, access all of your American Fidelity accounts—reimbursement accounts and insurance benefits—from one portal.

### Getting started:

- Visit [americanfidelity.com](http://americanfidelity.com) and click on the **Login** button.
- Register using your last name, Social Security Number, and email address.
- Your email address should be the same email address provided at time of enrollment.



## File a Claim. Three Easy Ways.

- 1 Mobile**  
Use AFmobile to manage your reimbursement accounts and insurance benefits.
- 2 Online**  
Log in to your account by visiting [americanfidelity.com](http://americanfidelity.com) and clicking on the **Login** button.
- 3 Mail or fax**  
Download a claim form at [americanfidelity.com/forms](http://americanfidelity.com/forms). Follow the instructions on the form to mail or fax to us.



American Fidelity Assurance Company



Beck Auto Sales Inc. is pleased to offer you a retirement plan as a benefit to help you save for retirement. It's one way to thank you for your contribution to the organization's success.

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Email: ben.jones@lpl.com



# Benefits Directory

## Core Benefits

### **Bates Hewett & Floyd**

#### ***Health, Dental and Vision Assistance***

Richard Frederick

Mon - Fri, 8 a.m. - 5 p.m.

386-328-1100

bates-hewett.com

### **Florida Blue**

#### ***Health Plan***

Member Services

(Group Numbers 05770/05772/05302)

Mon - Fri, 24/7

800-352-2583

floridablue.com

### **Florida Blue**

#### ***Dental Plan***

Member Services

888-223-4892

floridabluedental.com

### **Humana**

#### ***Vision Plan***

Member Services

822-877-1051

humana.com

## Voluntary Benefits

### **American Fidelity Assurance Company**

#### ***Disability Income, Term Life, Whole Life, Accident, Cancer, and Group Critical Illness***

Mon - Fri, 7 a.m. - 7 p.m. CST

800-662-1113

americanfidelity.com

## Section 125 Administrative Services & Flexible Spending Accounts

### **American Fidelity Assurance Company**

Mon - Fri, 7 a.m. - 7 p.m. CST

800-662-1113

americanfidelity.com

## Other Contact Information

### **Auto Group**

#### ***Beck Human Resources***

Randy Marquart

386-328-0344 ext. 342

### **MassMutual/ The Bailey Group Retirement/401k**

Morgan Vitale, MassMutual

800-854-0647

Direct: 904-518-9164

massmutual.com/retirementaccess

Fred B. Jones

229-226-0111

ben.jones@lpl.com

### **American Fidelity Assurance Company**

#### ***Molly Wilson***

#### ***Account Executive***

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This Enrollment Benefits booklet is not a contract, is not legally binding, and does not alter any original plan documents. Rather, it is intended to be a summary of available benefits provided through your employer. Every effort has been made to ensure the accuracy of this information. However, the actual determination of your benefits is based solely on the plan documents and if statements in this description differ from the applicable plan documents, coverage documents or Summary Plan Descriptions, then the terms and conditions of those documents will prevail. Please check with your employer's Benefit's Office for further guidance.