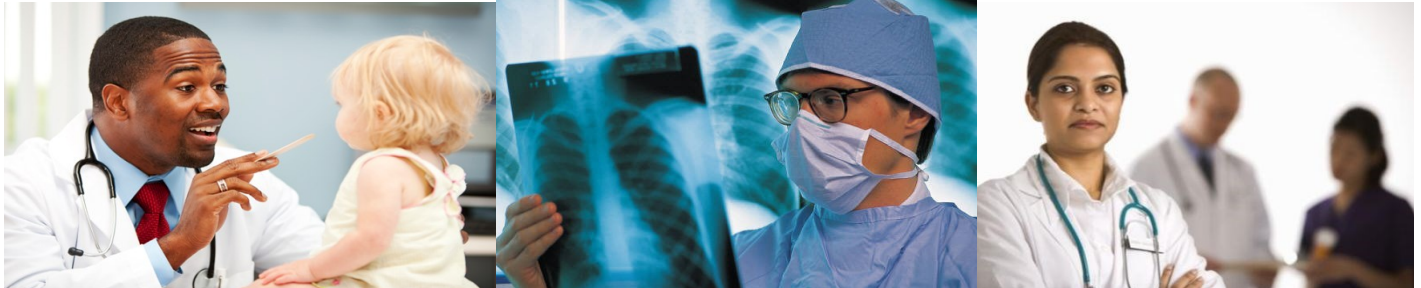




**AUTOMOTIVE**  
*Family of Dealerships*



**2016**  
**Employee Benefits &**  
**Enrollment Guide**

**Gettel Automotive** values the contributions our employees make to the overall success of our organization. In order to recognize this, Gettel strives to offer challenging and rewarding careers together with a comprehensive benefits package.

To aid you in making the best choices for you and your families, please review the benefits information in this enrollment guide which includes:

- Eligibility requirements
- Enrollment procedures
- Benefit plans
- Contact information, should you have questions about your coverage

### Who is Eligible?

Gettel Automotive employees who work at least 30 hours per week are eligible to elect benefits. Benefits are effective the first of the month following 30 days of employment. You may also elect coverage for your dependents as follows:

#### Medical:

- Your legal spouse
- Your children who are less than 26 years old, married or unmarried
- Your children 26 years old, but less than 30 years; unmarried and do not have dependents of his/her own; is a resident of Florida or a student and not covered under any other group or individual health policy; is not entitled to Medicare.
- Your children who are incapable of self-sustaining employment by reason of mental or physical handicap and supported primarily by you.

#### Dental and Vision:

- Your legal spouse
- Your children up to age 26
- Your children who are incapable of self-sustaining employment by reason of mental or physical handicap and supported primarily by you.

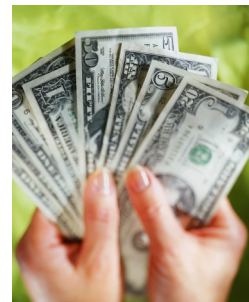
#### Voluntary Life:

- Your legal spouse
- Your children up to age 30
- Your unmarried child who is totally and permanently disabled and who was totally and permanently disabled prior to reaching 19 years of age.

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## Section 125 and Benefit Election Changes

**Under the Section 125 of the Internal Revenue Service (IRS)** code, you are allowed to pay for certain group insurance premiums with tax-free dollars. This means your **medical, dental and vision** premium deductions are taken before federal income and Social Security taxes are calculated. Depending on your tax bracket, your savings could be significant.



However, you must make your benefit elections carefully, including the choice to waive coverage, because your pretax elections will remain in effect until the next plan year, which begins in November of each year, unless you experience an IRS-approved qualifying change in status. Qualifying change in status events include, but are not limited to:

- Marriage or divorce
- Death of spouse or other dependent
- Birth or adoption of a child
- A dependent's eligibility status changes due to age, student status, marital status, or employment
- You or your spouse experience a change in work hours that affect benefit eligibility
- Relocation into or outside of your plan's service area.

**If you experience a qualifying change in status event, you can make changes to your benefit elections provided your elections are consistent with the event and you notify Human Resources within 30 days of the event.**

## Your Health Plan



Before choosing a plan please refer to the medical plan chart for a comparison of each plans' major provisions. The chart shows the amount the member is responsible for paying.

These plans utilize the Florida Blue BlueCare (HMO) and BlueOptions (PPO) networks of providers and are designed to offer the most cost effective benefits available today. Using in-network providers will result in lower out of pocket costs.



**Website: [www.FloridaBlue.com](http://www.FloridaBlue.com)**

Florida Blue's website offers you and your covered dependents personalized benefit information, claims information, and more. Once you register on the secure website you will be able to print temporary ID cards, find financial tools to help you spend your health care dollars wisely and other great tips.

This guide **only highlights** your benefits. Official plan and insurance documents actually govern your rights and benefits under each plan. It is the employee's responsibility to request plan documents. Plans may be subject to exclusions and other limitations.

## Medical Benefits - Florida Blue

	BlueCare HSA 124/125	BlueCare 50	BlueCare 58	BlueOptions 5772
<b>Deductible</b>	<b>Calendar Year</b>	<b>Calendar Year</b>	<b>Calendar Year</b>	<b>Calendar Year</b>
<b>In Network Individual</b>	\$2,500	\$2,000	\$0	\$2,000
<b>In Network Family</b>	\$5,000*	\$6,000	\$0	\$6,000
<b>Out Network Individual / Family</b>	Not Covered	Not Covered	Not Covered	\$6,000 / \$18,000
<b>Coinsurance</b>	<b>Member Responsibility</b>			
<b>In Network / Out of Network</b>	10%	30%	20%	20% In / 50% Out
<b>Maximum Out of Pocket (Includes Deductible, Coinsurance, Copays)</b>	<b>Member Responsibility</b>			
<b>In Network Individual</b>	\$5,000	\$6,350	\$5,000	\$5,500
<b>In Network Family</b>	\$6,850 / \$10,000*	\$12,700	\$10,000	\$11,000
<b>Out Network Individual / Family</b>	Not Covered	Not Covered	Not Covered	\$11,000 / \$22,000
<b>Physician Charges (In Network)</b>	<b>Member Responsibility</b>			
<b>Primary Care</b>	Deductible + 10%	\$35 Copay	\$35 Copay	\$35 Copay
<b>Specialist</b>	Deductible + 10%	\$65 Copay	\$80 Copay	\$65 Copay
<b>Hospital Admission (In Network)</b>	<b>Member Responsibility</b>			
<b>In Network</b>	Deductible + 10%	\$100 + Deductible + 30%	\$600 per day up to 5 days	\$100 + Deductible + 20%
<b>Out of Network</b>	Not Covered	Not Covered	Not Covered	\$500 + Deductible + 50%
<b>Outpatient Services (In Network)</b>	<b>Member Responsibility</b>			
<b>In Network Surgery</b>	Deductible + 10%	Deductible + 30%	\$400 Facility/\$500 Hospital	Deductible + 20%
<b>Urgent Care</b>	Deductible + 10%	\$70 Copay	\$80 Copay	\$70 Copay
<b>Emergency Room</b>	Deductible + 10%	\$300 Copay	\$100 Copay	\$300 Copay
<b>Diagnostic Services (In Network)</b>	<b>Member Responsibility</b>			
<b>Diagnostic Laboratory QUEST</b>	Deductible + 10%	\$0 Copay	\$0 Copay	\$0 Copay
<b>Diagnostic X-Ray</b>	Deductible + 10%	\$50 Copay	\$80 Copay	\$50 Copay
<b>Complex Imaging (Facility)</b>	Deductible + 10%	\$300 Copay	\$150 Copay	\$300 Copay
<b>Provider Network</b>				
	<b>BlueCare</b>	<b>BlueCare</b>	<b>BlueCare</b>	<b>BlueOptions</b>
<b>Prescriptions</b>	<b>Deductible +</b>			
<b>RX—Tier 1 Generic</b>	\$10 Copay	\$10 Copay	\$10 Copay	\$10 Copay
<b>RX—Tier 2 Formulary Brand</b>	\$50 Copay	\$50 Copay	\$50 Copay	\$30 Copay
<b>RX—Tier 3 Non-Form. Brand</b>	\$80 Copay	\$80 Copay	\$80 Copay	\$50 Copay
<b>RX—Mail Order</b>	\$25 / \$125 / \$200	\$25 / \$125 / \$200	\$25 / \$125 / \$200	\$25 / \$75 / \$125

\*Aggregate—Entire family deductible must be satisfied by one or a combination of family members before any individual family member is deemed to have satisfied it. The family out of pocket maximum is also aggregate with no individual paying more than \$6,850 toward the maximum.

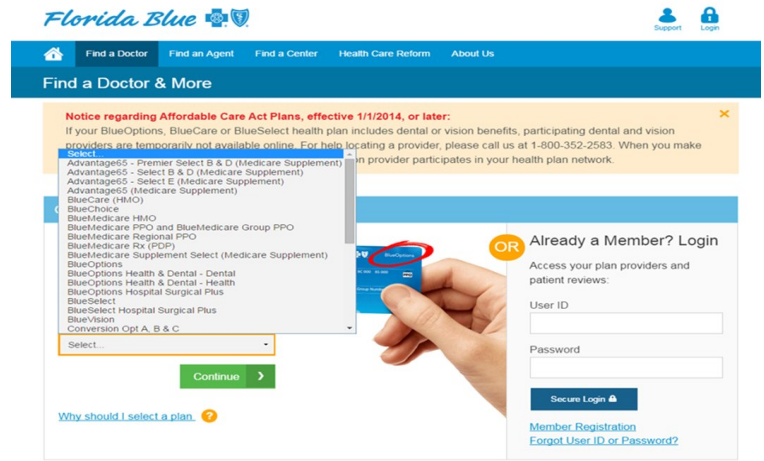
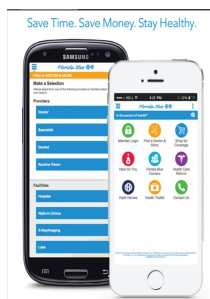
BlueCare plans are in network only and require a Primary Care Physician selection. No referrals are necessary.

# Tools & Resources

The Florida Blue website provides access to provider directories so members can save money and time by locating in network providers and services.

The Know Before You Go tool provides cost comparisons for medical procedures, providers, and prescription medications to get the best value care.

Members can review and download their Explanation of Benefits (EOB) that shows the amount billed, the amount paid by Florida Blue and what the member's cost will be on each claim.



FB OPD PLAN 001 092014

The Florida Blue mobile app is free for iPhone® and Android® devices and works on any smartphone and on the iPad®.

Use the app to access health information, provider directories, claims information and find discounts while on the go.

Save Time

Save Money

Stay Healthy

## Blue 365

This is the place to find discounts on everything from gym memberships, fitness equipment and apparel to vacations, spa services and weight management programs!!

Finding discounts is easy.... Log in to FloridaBlue.com and simply click on the Blue 365 link.

The site offers weekly deals and information on Fitness; Personal Care; Healthy Eating; Financial Health; Wellness; Healthy Lifestyles.



## Florida Blue Center & 24/7 Nurse Access



Have a question and want to be connected to a nurse? Contact Florida Blue by phone or on the website to get information from experienced, registered nurses and professionals. There is no cost for the call or the advice!

Florida Blue Centers are staffed with professionals who can provide advice and answers in person. Make an appointment or just walk in and get help with claims and plan information; flu shots; screenings and events like free yoga! Center hours may vary but usually open 9am - 7pm Monday through Saturday.

# Generic Medications

An effective way to save on your out-of-pocket healthcare costs is to consider switching to generic drugs when appropriate. Generic medicines are approved to be as safe and effective as their brand-name counterparts, and on average cost 50 percent less than brand name drugs.

Generic drugs contain the same active ingredients and are available in the same strength and dosage form as their brand-name counterparts. The U.S. Food and Drug Administration (FDA) regulates the manufacturers of all generic drugs, which helps ensure their strength, quality and purity. The FDA also requires generic drugs to be absorbed into the body at the same rate and to the same extent as the branded product, which ensures that generic and branded products provide the same effectiveness in children, adults and the elderly. You can save the most money by choosing generic medicines when available. Ask your doctor to authorize generic substitutions when medically appropriate.



## \$4 Generics!! Free Antibiotics!! Shop Around for Medications

Another smart way to save on medication costs is to shop around and look for the best price! The cost of a prescription medication can vary greatly from one pharmacy to another, even within the same store chain. For example, your medication at one CVS or Walgreens is not always the same cost at a different CVS or Walgreens, right across the street! Before you drop off the prescription to be filled, call ahead or check the pharmacy website to find out the cost.

Visit the drug manufacturer's website and look for coupons and discounts. Ask your doctor for samples and check to see if they have any discount coupons available.

### Wal-Mart, Sam's Club and Neighborhood Market:

\$4 generic medications per 30 day supply

\$10 generic medications per 90 day supply

\$10 certain women's medications, including drugs to treat breast cancer and hormone deficiency

[www.walmart.com](http://www.walmart.com)

### Winn Dixie Supermarkets:

\$4 generic medications per 30 day supply

\$10 generic medications per 90 day supply

[www.winndixie.com](http://www.winndixie.com)

### Publix Supermarket:

**FREE**— Certain oral antibiotics, including: Amoxicillin, penicillin, ciprofloxacin and more.

Also free Lisinopril & Amlodipine (HBP) and Metformin (diabetes)

No limits to the # of prescriptions you can have filled

[www.publix.com](http://www.publix.com)

## The Publix Pharmacy Diabetes Management System

Publix Pharmacy also offers a Diabetes Management System, which is designed to help you manage your diabetes through several key components, including:

**Free Medication** - Get your prescriptions for generic immediate-release Metformin (500mg, 850mg and 1000mg) FREE, up to a 30 day supply (up to 90 tablets). There's no limit to the number of refills of free medication you can receive.

**Online Resources** - Take advantage of up-to-date news and health education information, including interactive diabetes management tools, provided by StayWell Custom Communications. Visit this handy online resource often to learn the latest developments regarding diabetes. **You can also receive monthly e-newsletters with useful information, including coupons and special offers. Simply click "It's FREE!" at the top right of the StayWell screen.**

<http://publix.staywellsolutionsonline.com>

This additional information on generic drugs will help facilitate your search for the best deals to lower your prescription drug costs. As you conduct your own research, you may find many other cost-saving alternatives not listed in this benefit guide. The purpose of this article is not to instruct you to utilize these alternatives, but to enlighten you on various options available to you to help decrease costs and improve your health.

## Health Savings Account - Eflex TASC

A Health Savings Account (HSA) works with a qualified health plan and allows you to pay for health care expenses not covered by insurance using pre-tax dollars. Your HSA is funded through payroll deductions on a pre-tax basis into a personal account. The funds carry over from year to year and remain yours even if you change employers.

The **Florida Blue HSA 124/125** is a qualified HSA health plan. If you choose to enroll in the HSA 124/125 and you have no other “first dollar medical coverage” (ie: covered on your spouse’s HMO/PPO plan), not enrolled in Medicare and are not a dependent on someone else’s tax return you may open a HSA through eflexgroup. You will receive a debit card that allows you to pay for qualified medical expenses (deductibles, etc.) directly from your HSA account.

2016 Contribution Limits:	Self Only Coverage	\$3,350
	Family Coverage	\$6,750
2017 Contribution Limits:	Self Only Coverage	\$3,400
	Family Coverage	\$6,750



## Flexible Spending Account - Eflex TASC

If you enroll in **BlueOptions 5772; BlueCare 50; BlueCare 58 or Decline Medical coverage** you are eligible to open a Flexible Spending Account (FSA). The FSA is funded through payroll deductions on a pre-tax basis and used to pay for qualified medical expenses not covered by insurance. Employees choosing to open a FSA will receive a debit card to pay for copays, deductibles, etc. directly from your FSA account. All funds in the FSA must be used by the end of the plan year or they are forfeited.

2016 / 2017 Contribution Limit: \$2,500

### Examples of Qualified Expenses



- |                     |                        |
|---------------------|------------------------|
| Deductibles         | Bandages               |
| Copayments          | Over the Counter meds* |
| Dental Copays       | Splints                |
| Prescription Copays | Braces                 |
| Eyeglasses          | Wheelchair             |
| Contact Lenses      |                        |



\*Over the counter medications must be accompanied by a doctor’s prescription in order to be reimbursed.

## Dependent Care Account Eflex TASC

A Dependent Care Account (DCA) allows you to set aside pre-tax dollars to pay for child or elder care so that you can go to work. Reimbursement for Dependent Care occurs after you have paid for the service and must be accompanied by acceptable documentation. Acceptable documentation includes but is not limited to: start and end dates of service; dependent’s name and date of birth; provider’s name, address, tax ID or SSN.

2016 / 2017 Contribution Limit: \$5,000

## Dental Benefits - Florida Combined Life

Gettel Automotive offers a PPO dental plan designed to let you and your family choose a dental provider in or out of network. You pay less out of pocket when you choose an in network, contracted provider.

A covered member who visits the dentist at least yearly and uses less than the calendar year maximum in benefits can roll over a portion of the unused annual maximum.

Keep in mind that an out of network provider may balance bill you for any amount charged that exceeds the reasonable and customary benefit paid by Florida Blue.

This benefit is 100% employee paid.



### PPO Dental Plan

Deductible In or Out of Network (waived for preventive services)	\$50	\$150 Per Family
Calendar Year Maximum	\$1,000 (In and Out of Network Combined)	
<b>Services</b>	<b>In Network</b>	<b>Out of Network</b>
Preventive & Diagnostic Services (Cleanings, X-ray) Limited to 2X per year	Member pays 0%	Member pays 0%
Basic Services (Fillings and Root Canals)	Member pays 20% After Deductible	Member pays 20% After Deductible
Major Services (Crowns, Dentures, Periodontics)	Member pays 50% After Deductible	Member pays 50% After Deductible
This is only a sampling of covered procedures. Refer to the plan document for the full list of covered dental procedures. Pretreatment estimates are recommended for major services.		

## Vision Benefits - Advantica

	In Network	Out of Network
<b>Comprehensive Eye Exam</b> With dilation Every 12 months	\$10 Copay	Reimbursed up to \$40 (less applicable copay)
<b>Eyeglass Lenses</b> Every 12 months		Reimbursed (less applicable copay) Up to \$20
<b>Single</b>	\$15 Copay	Up to \$40
<b>Bifocal</b>		Up to \$60
<b>Trifocal</b>		Up to \$100
<b>Lenticular</b>		
<b>Eyeglass Frames</b> Every 24 months	\$15 Copay No copay if included with eyeglass lenses; paid in full on Special Selection frames; up to \$125 allowance outside Special Selection frames.	Reimbursed up to \$40 No copay if included with eyeglass lenses
<b>Contact Lens Exam</b>	\$30 Allowance	No reimbursement
<b>Contact Lenses</b> (in lieu of eyeglasses) every 12 months	\$125 Allowance	Reimbursed up to \$60 (less applicable copay)
<b>LASIK</b>	Discount Pricing	No reimbursement

The Advantica vision care network consists of private practitioners as well as national providers.

Comprehensive eye care through Advantica features affordable copayments for In-Network services and discount pricing for LASIK and contact lenses through their mail order program.

This benefit is 100% employee paid.





## Voluntary Term Life and AD&D Insurance - Florida Combined Life

Gettel Automotive Group provides employees with the opportunity to purchase Term Life and Accidental Death & Dismemberment (AD&D) coverage.

Please refer to the table below for an overview of the available benefits. The cost for employee and spouse coverage is determined by the employee's age and the amount of life insurance purchased and is shown on the enrollment system as you step through the process. The premium for the children's policy is a flat rate and not based on the number of children covered.

This benefit is 100% employee paid. **Benefits reduce at age 65.**

Voluntary Life/ AD&D Benefit	
Employee	<p>\$10,000 increments up to five times your annual earnings to a maximum of \$500,000</p> <p>New Hire Guarantee Issue (GI) amount: \$130,000</p> <p>New Hires may elect up to GI amount without answering medical questions (Evidence of Insurability)</p>
Spouse	<p>\$5,000 increments up to 50% of the Employee's amount to a maximum of \$250,000</p> <p>New Hire Guarantee Issue (GI) amount: \$50,000</p> <p>New Hires may elect up to GI amount for their spouse without answering medical questions</p> <p>Evidence of Insurability will be required for all increases.</p>
Child(ren)	<p>14 Days—6 months    \$ 500</p> <p>6 months—30 years    \$ 5,000 or \$10,000</p> <p>Not to exceed 50% of the Employee's coverage amount.</p>



**It is important to keep your beneficiary designations up to date. Your beneficiary is the person you assign to receive the benefit in the event of your death.**

**Please note that you are automatically the beneficiary of any spouse and/or child coverage you purchase.**

## Short Term Disability - Lincoln Financial Group

Short Term Disability (STD) provides income protection in the event you become disabled and are unable to work due to sickness, including pregnancy, or a non-occupational injury for a short period of time.

This benefit is 100% Employee Paid.

BENEFIT	60% of Weekly Income
MAX WEEKLY BENEFIT	\$1,500
BENEFITS BEGIN ON:	
ACCIDENT	1st Day
SICKNESS	8th Day
BENEFIT DURATION	26 Weeks
PRE-EXISTING CONDITION	6 / 12

**Pre-Existing Condition Limitation:** If a claim is filed within the first year an employee is enrolled, Lincoln Financial will decline coverage for any condition or injury for which the employee received treatment within the **6 months** prior to the employee's date of hire and exclude all claims for that particular condition/injury for **12 months** from the employee's effective date.



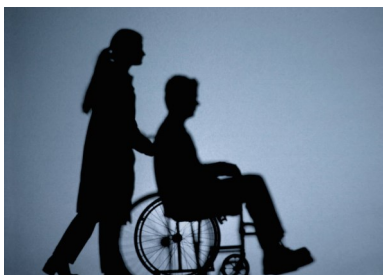
## Long Term Disability - Lincoln Financial Group

Long Term Disability (LTD) provides income protection in the event you become disabled and are unable to work for an extended period of time. You have two options to choose from

This benefit is 100% Employee Paid.

	LTD Base Plan
BENEFIT	60% of Monthly Income
MAX MONTHLY BENEFIT	\$5,000
BENEFITS BEGIN ON:	181st Day
DURATION OF BENEFITS	Up to 5 years or age 70
PRE-EXISTING CONDITION	3 / 12

	LTD Buy Up Plan
BENEFIT	60% of Monthly Income
MAX MONTHLY BENEFIT	\$5,000
BENEFITS BEGIN ON:	181st Day
DURATION OF BENEFITS	Later of age 65 or Normal Social Security Retirement Age
PRE-EXISTING CONDITION	3 / 12



**Pre-Existing Condition Limitation:** If a claim is filed within the first year an employee is enrolled, Lincoln Financial will decline coverage for any condition or injury for which the employee received treatment within the **3 months** prior to the employee's date of hire and exclude all claims for that particular condition/injury for **12 months** from the employee's effective date.

## 401(k) Plan - Principal

**Start saving for your future today in the Gettel Automotive 401(k) Plan. Your company sponsored retirement plan is administered by Principal and provides a convenient, tax-advantaged way to save for your retirement. You may participate if you are 18 years of age and have completed 6 months of service.**

Your plan helps make it easy for you to save by offering you the following features:

### **Convenient payroll deductions**

Deposits are made to your account directly and automatically from your paycheck.

### **A variety of investment options to choose from**

You can determine how the money you save is invested. You can create your asset allocation from the list of investment options offered in your plan or choose from one of the pre-set family of investments that is set based on your anticipated retirement date. To get more information about your plan investments, including fund performance, prospectuses and retirement planning tools, go to [www.principal.com](http://www.principal.com).

Your plan offers automatic account management features that can make your retirement planning easier.

### **An account you can take with you**

Should you leave the company, your vested account balance is yours to take with you. Any money you contribute from your paycheck is 100% yours. The company matching funds “vest” over time based on the schedule below. Once you are fully vested you can take the entire company match with you.

**Gettel Automotive will match 25% up to the first 4% of salary deferred.**

VESTING SCHEDULE	
Years of Service	Vesting
Less than 2 Years	0%
2 Years	25%
3 Years	50%
4 Years	75%
5+ Years	100%

Compli (pronounced “complee”) is a web-based tool allowing employees to access to:

- Review Employee Handbook
- Review and sign required company policies
- Complete required trainings
- Submit forms, such as time-off requests
- Download company documents
- Report suspected misconduct
- View elements of your personnel file
- Link to PlanSource Online Benefit Enrollment

Customer Login

User Name  Enter the User Name and Password provided by your Compli Administrator to log in to the system.

Password  Unauthorized access is prohibited.

[Advanced Login](#)

**LOGIN**

[Forgot Your Password?](#)

## What is my User Name?

Your User Name is your Employee Number. If you have one, you can also use your company email address as your User Name.

## What is my Password?

If this is your first time logging in, try **gettel123** in all lower case. If you don't know your password and have a company email address, click “Forgot my password” on the login page to reset it. Otherwise, please contact your HR Department.

## What is my Company Name?

You may be prompted to enter a company name the first time you login. If so, enter **gettel** or check with your Human Resources department for help.

## How do I sign my required Policies?

To complete the policy requirements from your Inbox, click on the policy title, review the policy, enter your password into the password field at the bottom of the policy, and then click the Apply button.

## How do I fill out a Form?

To fill out a form, click on the Forms tab, then click on the form title, review the form instructions, fill out the appropriate sections, and send to the appropriate person as per the routing instructions.



## How do I use the Compli Inbox?

Your **Inbox** contains company policies, trainings, and forms that you are required to act on. These items are accessible by selecting the appropriate title you wish to review and clicking on it.

Items requiring your attention		5 item(s)
Identity Theft Red Flags Policy for Employees	past due	03/26/09
Identity Theft Red Flags Policy for Employees	due	03/26/10
Red Flags Program Overview	due	03/26/10

## How do I complete my required Trainings?

To complete the required trainings from your Inbox, click on the training title, review the training introduction, click the Continue or Start button, and complete the training.

## How do I complete my required Forms

To complete the form requirements from your Inbox, click on the form title, review the form instructions, fill out the appropriate sections, and send to the appropriate person as per the routing instructions.

## How do I review my Employee Handbook?

To review your Employee Handbook and other company policies, click on the Library tab and then click on Policies. Finally select the policy you wish to review.

## How do I find Help?

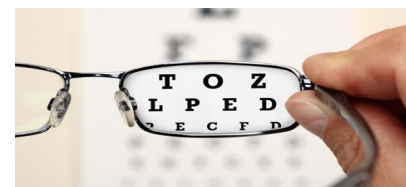
To review detailed Help Content regarding any section of your Compli system, click the Help link at the top of your window.

To contact your internal Compli Administrator, click the Help Contact link.

## Per Pay Period Deductions (Semi-Monthly 24 Pay Periods)

### MEDICAL PLANS

Semi-Monthly Deduction	BlueCare HSA 124/125	BlueCare 50	BlueCare 58	BlueOptions 5772
Employee Only	\$ 34.47	\$ 70.10	\$ 91.70	\$113.03
Employee + Spouse	\$245.10	\$356.61	\$407.99	\$458.77
Employee + Child(ren)	\$158.30	\$244.50	\$284.23	\$323.48
Employee + Family	\$364.06	\$510.24	\$577.60	\$644.17



### DENTAL PLAN

Semi-Monthly Deduction	
Employee Only	\$14.00
Employee + Spouse	\$28.47
Employee + Child(ren)	\$34.05
Employee + Family	\$48.52

### VISION PLAN

Semi-Monthly Deduction	
Employee Only	\$ 3.32
Employee + Spouse	\$ 6.63
Employee + Child(ren)	\$ 6.31
Employee + Family	\$10.85

## PlanSource Online Enrollment

Gettel Automotive is pleased to offer our employees an Employee Benefits website which will allow you to view and enroll in your insurance plans.

If you do not have internet access outside of work you may use your worksite computer to log on and enroll. Contact your manager to arrange access if you do not have a worksite computer. If enrolling during business hours, please use your lunch or break time to access the site.

**Online enrollment is MANDATORY**

Please log on to the website using the instructions below or use the link on Compli:

<https://benefits.plansource.com>

**username** – \*

firstinitiallastnameandlastfourdigitsofssn

(sample username : jsmith1234)

\*Use only the first six (6) characters of your last name.\*

**password** –

date of birth format (yyyymmdd)

(sample password: 19700128)

## Insurance Definitions

### **Carrier:**

The insurance company

### **Claim:**

The request for payment of services received in accordance with benefits described in the insurance policy.

### **Copay:**

A copayment or copay is a capped contribution paid by the insured person for a particular service each time that service is used.

### **Coinsurance:**

The cost share between the insured and the carrier as specified in the policy. Coinsurance generally is applied once the deductible has been satisfied.

### **Deductible:**

A deductible is the amount that the insured person pays before the carrier begins to pay. The deductible is accumulated on a calendar year basis and will reset each January 1st.

If the plan has an In Network and Out of Network deductible, those deductibles will accumulate separately. An Out of Network deductible is generally higher.

### **Explanation of Benefits (EOB):**

The statement produced by the carrier that show what the provider billed, the contracted (discounted) amount for members, the amount paid or denied by the carrier, and the amount the member is expected to pay.

### **In Network:**

Refers to the list of providers who participate in the carrier's network. Using In Network providers results in lower out of pocket costs for members.

### **Maximum Out of Pocket:**

The most a covered member must pay in a calendar year before benefits are paid 100% by the carrier.

### **Open Enrollment:**

The period of time during which an employee has the opportunity to enroll, waive coverage, or add / drop dependents from a plan.

### **Out of Network:**

Providers who are not contracted with the carrier. Services received from an Out of Network provider may be denied in full if the member is enrolled in an In Network only plan or benefits decreased if the member is enrolled in a PPO plan. An Out of Network provider may balance bill members for any portion of a claim not covered by the carrier.

### **Primary Care Provider (PCP):**

Generally a family practice, internal medicine, or pediatrician practitioner who provides routine medical care. An In Network only plan may require selection of a PCP but no referrals are required to receive other services.

### **Preventive Care:**

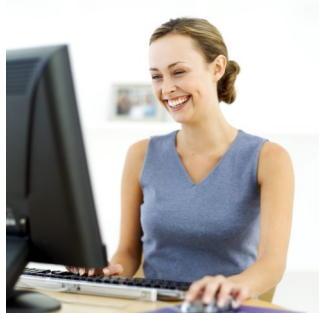
Care rendered by a physician to promote wellness and prevent future health problems for a member who currently does not exhibit any symptoms. Preventive care is covered on all plans at 100% each calendar year. There is no cost to the member.

### **Qualifying Event:**

A life event such as marriage, divorce, birth or adoption of a dependent, death of a dependent or a spouse gaining or losing medical coverage at his or her place of employment. Experiencing a qualifying event may allow the member to make a change to their benefit elections mid-year outside of the open enrollment period.



## Contact List



<b>Medical</b>		
Florida Blue	877.352.2583	<a href="http://www.floridablue.com">www.floridablue.com</a>
<b>Dental</b>		
Florida Combined Life	888.223.4892	<a href="http://www.floridablue.com">www.floridablue.com</a>
<b>Vision</b>		
Advantica	866.425.2323	<a href="http://www.advanticabenefits.com">www.advanticabenefits.com</a>
<b>Life Insurance &amp; Supplemental Life Insurance</b>		
Florida Combined Life	800.696-8562	<a href="http://www.floridablue.com">www.floridablue.com</a>
<b>Short and Long Term Disability</b>		
Lincoln Financial Group	800.423.2765	<a href="http://www.lfg.com">www.lfg.com</a>
<b>HSA, FSA, DCA</b>		
eFlex Group / TASC	877.933.3539	<a href="http://www.eflexgroup.com">www.eflexgroup.com</a>
<b>401(k)</b>		
Principal	800.986.3343	<a href="http://www.principal.com">www.principal.com</a>
<b>Gettel - Human Resources</b>		
All Stores	941.567.2660	

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Call us for all your insurance needs: 800.783.5085