

New Hire Enrollment

Benefits Guide

2021 Plan Year

Information to help with your
enrollment choices.



To enroll, call the Benefits Service Center at 770-295-1100
or visit www.jimellisbenefits.com.

INTRODUCTION

Jim Ellis Atlanta offers an extensive benefits portfolio for you and your family. Basic life insurance and an Employee Assistance Program are provided to you at no cost. You are eligible to elect medical, dental, vision, optional life insurance, short term disability, long term disability, critical illness, and accident coverage. Jim Ellis makes a financial contribution to your medical and dental premiums.

Additional information about your benefits is located on the benefits website at www.jimellisbenefits.com. The Benefits Service Center is also able to assist with benefits questions and enrollment. We encourage you to use these resources to maximize your benefits and understand your options.

We appreciate your service as a Jim Ellis employee.

Jimmy Ellis

Pre-Tax Benefits

Your medical, dental, and vision premiums will be deducted on a pre-tax basis. Once you enroll in these plans, no changes are permitted during the plan year without a qualifying life event.

Common qualifying life events that could result in changes to your benefit coverage include the following:

- Marriage or divorce
- Birth or adoption of a child
- Loss of a dependent
- Medicare entitlement
- A change in your spouse's employment that affects benefits
- Gain or loss of coverage

Should you have a qualifying event during the year, please notify the Benefits Service Center at 770-295-1100. You must submit necessary documentation to the Benefits Service Center within 30 days of the event for the change to be effective.

Benefits Eligibility

You are eligible for benefits on the first of the month following 60 days of your hire date. You are required to enroll in benefits by the 25th of the month prior to your effective date. If you do not call to enroll, your voluntary benefits will be waived. Annual Open Enrollment is held in November and the plan year begins January 1. Should you wish to change your elections after your effective date, you will need to wait until the next Annual Open Enrollment unless you have a qualifying life event.



Table of Contents

Enrollment Information	2
Medical	3
Virtual Primary Care	12
Dental	13
Vision.....	14
Life Insurance.....	15
Disability.....	16
Critical Illness	17
Accident	18
Identity Theft and EAP	19
Marketplace Notice	20
Legal Notice	21
Contact Information.....	22

Jim Ellis Medical Wellness Program

Employee health and wellness is a priority for Jim Ellis. When you comply with the biometric screenings and non-tobacco affidavit requirements, you avoid potential surcharges. Information about the biometric screening events is coming soon.

Enrollment Information

Information Needed to Enroll

- Your name, date of birth, and Social Security Number.
- The name(s), date(s) of birth, and Social Security Number(s) of your dependent children up to age 26. (Required) Dependent children include your natural children, adopted children, step-children, and children whom you claim as dependents for Federal Income Tax purposes, or for whom you have legal guardianship.*
- The name, date of birth, and Social Security Number of your spouse, if applicable.*
- Your current address to ensure your ID cards and other important benefit information are sent to the correct address.
- The full name, address, and date of birth of your life insurance beneficiary (your beneficiary must be at least 18 years old).

Note: The collection of dependent Social Security Numbers is a legislative requirement for enrollment in the health, dental, and vision plans.

Two Ways to Enroll

Telephonic Enrollment: Should you wish to complete your elections by phone, please call the Benefits Service Center at 770-295-1100. Benefits Service Center hours are Monday – Thursday from 8 a.m. to 6 p.m. and Friday from 8 a.m. to 5 p.m. The Benefits Specialists will explain your benefit choices and complete your enrollment.

On-line Enrollment: You may also enroll online at www.totemtools.com. Provide the information requested to login.

- **Step 1:** Use the link that was sent to your email to Verify Account. Set your password and click Complete Verification.
- **Step 2:** Return to the login screen. Your Username is your last name and your date of birth (mmddyyyy). Enter your username and your newly created password.
- **Step 3:** Scroll down and click “Begin Event.”

The Benefits Service Center is available to assist you with website navigation should you choose to enroll on-line.

Completing Your Enrollment

Once you have completed the new hire enrollment process, you will receive a confirmation statement. Please review this form carefully and contact the Benefits Service Center if you need to make changes.

Employee Portal Information

The Jim Ellis Employee Portal is your online resource for:

- Company events, news, and announcements (located on the Welcome page)
- Viewing and updating your personal information, such as address or dependent changes
- Viewing attendance, paid time off, and sick time
- Viewing and printing benefits forms
- Searching the Company Directory
- Accessing your Jim Ellis email
- And much more...

Please direct questions about the Employee Portal to:

- Mickey Patterson, Portal Administrator
770-225-4837
mickeyr@jimellis.com

Portal Registration

- Please go to: <https://workforcenow.adp.com>
- Click on the first bullet point: [First Time Users Register Here](#)
- When asked for your Registration Code enter:
JIMELLIS-ADPNET (registration code is case-sensitive)
- You must register with your full name as it appears on your pay check.
- Please read carefully and select your security questions.
- Enter your contact information accurately so that you may receive emails from the company and your activation code for the portal from ADP.
- After your initial registration, you can access the Portal from anywhere at anytime, using a laptop, desktop, or mobile device.
- If you do not have your own desktop, you can access your Jim Ellis email through the Portal. A link to the email login screen is located on the Welcome Page. You are encouraged to check your email regularly for inter-company communication!

Note: For email address inquiries, please contact:
training@jimellis.com.

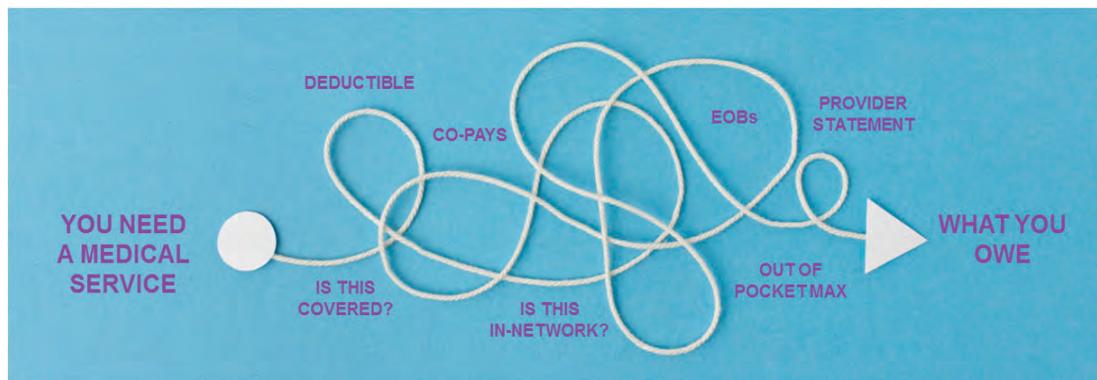
Medical Coverage



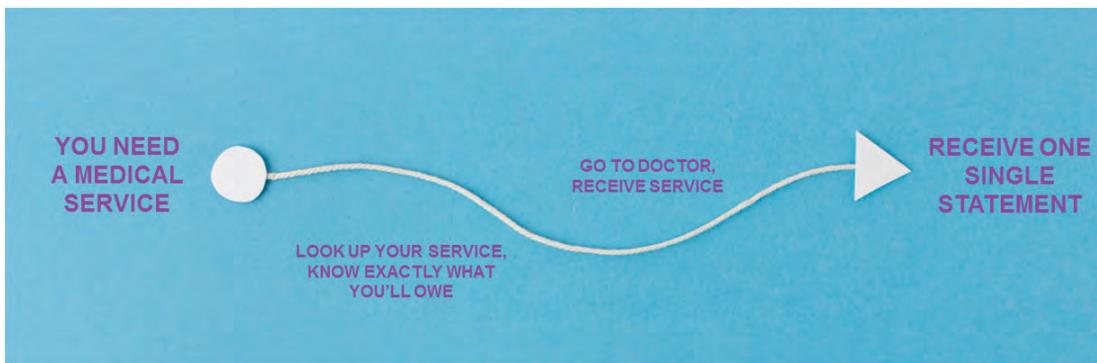
Jim Ellis is pleased to offer a medical plan called SimplePay Health. The goal with SimplePay Health is to "simplify" the healthcare experience while providing you and your dependents with the best healthcare providers available.

Healthcare is complex. One of the challenges with healthcare is that most of the time, we don't know what services will cost in advance of a service or procedure. Another challenge is that there is a tremendous variation in quality between doctors in the provider network, and we can't always easily identify the best doctors to ensure we get high quality care while avoiding unnecessary procedures. SimplePay Health solves both of these challenges.

CURRENT HEALTHCARE PROCESS



SIMPLEPAY HEALTHCARE PROCESS



Medical Coverage



Copays Based on Quality of the Physicians

Data shows that within the same health plan networks, doctors are not the same in terms of quality. Some physicians have better outcomes and lower readmission and complication rates. With SimplePay Health, copays are based on the quality of the physicians, and you pay a lower copay for better quality. SimplePay Health's tools make it easy for you to make informed healthcare decisions.

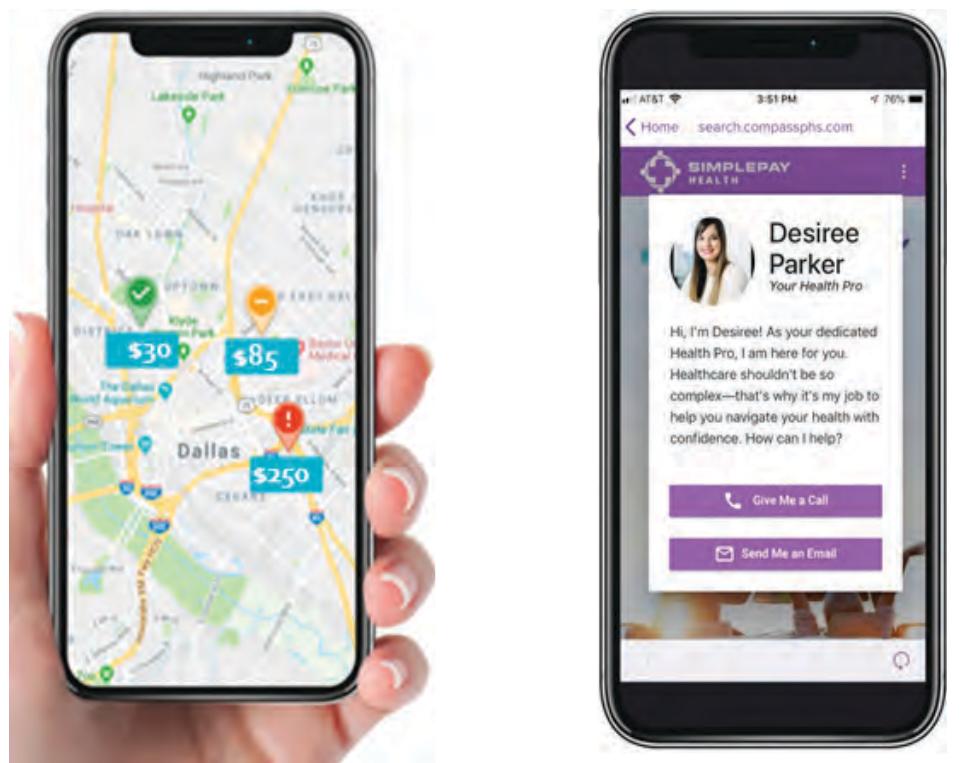
Quality Based Copays



Know What You

Owe Up Front

SimplePay Health's mobile app includes a user-friendly doctor search tool with a map that displays doctors for the search parameters and the corresponding member copays. You'll also have a dedicated Health Pro, available by telephone and app messaging. The Health Pro is your resource for all aspects of your health plan, including doctor recommendations.



Medical Coverage



Large National Open Access Network

The SimplePay Health plan includes **in-network coverage only**. You must access a participating provider for coverage to apply. The SimplePay Health plan uses the extensive national Aetna Open Choice PPO network. Access aetna.com/individuals-families/find-a-doctor.html, then select “Plan from an employer” under “Guests”, and choose **Open Choice PPO** under **Aetna Standard Plans**. The plan is “open access.” You do not need to select a Primary Care Physician, and you may go directly to a specialist within the network without a referral. We do however, encourage you to use the search tools to access the best providers that have the lowest copays.

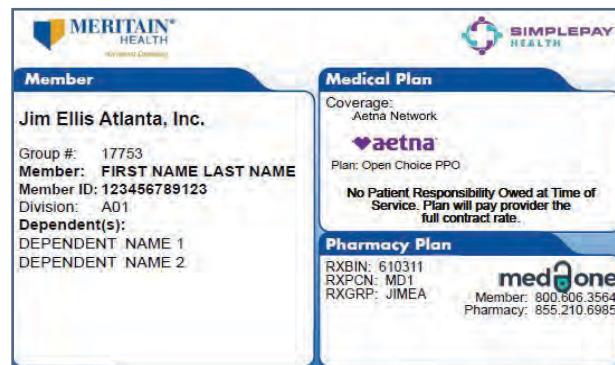
Preventive Care and Unlimited Coverage

In compliance with the Affordable Care Act, preventive care is covered at 100% with no member cost share. Simply use the app search tool or contact your SimplePay Health Pro for assistance. There are no pre-existing limitations, and the plan includes unlimited coverage for covered services.

Copays Only Plan and No Payment at Time of Service

There are no deductibles and no coinsurance to pay, only copays. You pay nothing at the time of service at the physician’s office or the pharmacy. Show your SimplePay Health ID Card at the doctor’s office, hospital, or pharmacy and your claim will be processed, and the physician, hospital, or pharmacy will be paid by your health plan. You will receive one consolidated monthly SimplePay Health statement that includes the copays due. No more Explanations of Benefits (EOBs), and no more bills from doctors and hospitals.

SimplePay Health ID Card



Convenient Financing Available

A great feature of the SimplePay Health plan is built-in zero-interest member financing. If you don’t make a payment towards your SimplePay balance within 30 days, you will be automatically be enrolled in a zero-interest payment plan through convenient payroll deduction. You also have the option to use another account and avoid deductions if desired.

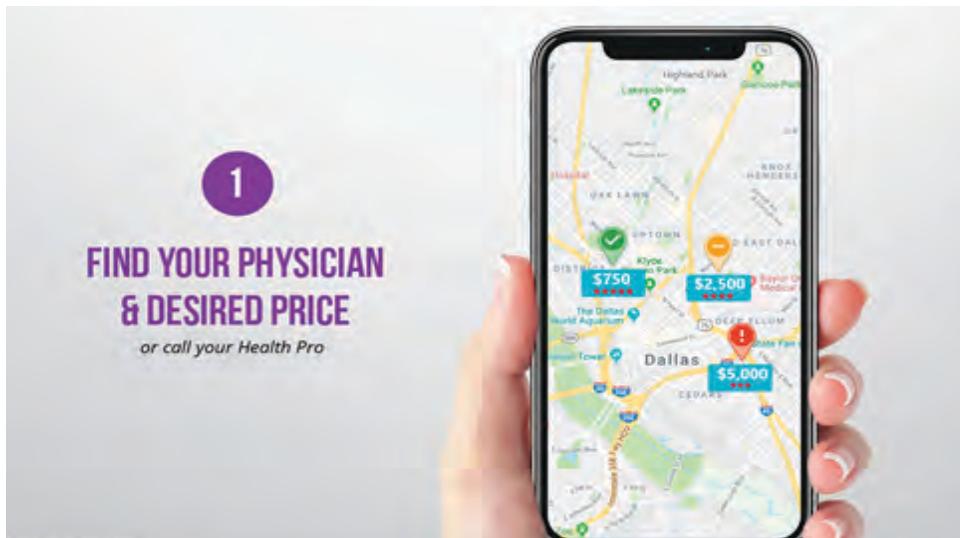
2021 Medical Payroll Deductions

SimplePay Health Plan									
Annual Earnings	Under \$14,999	\$15,000 - \$19,999	\$20,000 - \$24,999	\$25,000 - \$29,999	\$30,000 - \$34,999	\$35,000 - \$39,999	\$40,000 - \$44,999	\$45,000 - \$49,999	\$50,000+
Semi-Monthly Contributions									
Employee Only	\$37.50	\$56.25	\$75.00	\$93.75	\$112.50	\$131.25	\$150.00	\$168.75	\$168.95
Employee + Spouse	\$283.84	\$302.59	\$321.34	\$340.09	\$358.84	\$377.59	\$396.34	\$415.09	\$415.29
Employee + Child(ren)	\$250.25	\$269.00	\$287.75	\$306.50	\$325.25	\$344.00	\$362.75	\$381.50	\$381.70
Family	\$496.59	\$515.34	\$534.09	\$552.84	\$571.59	\$590.34	\$609.09	\$627.84	\$628.03
Weekly Contributions									
Employee Only	\$17.31	\$25.96	\$34.62	\$43.27	\$51.92	\$60.58	\$69.23	\$77.88	\$77.97
Employee + Spouse	\$131.00	\$139.66	\$148.31	\$156.96	\$165.62	\$174.27	\$182.93	\$191.58	\$191.67
Employee + Child(ren)	\$115.50	\$124.15	\$132.81	\$141.46	\$150.12	\$158.77	\$167.42	\$176.08	\$176.17
Family	\$229.19	\$237.85	\$246.50	\$255.15	\$263.81	\$272.46	\$281.12	\$289.77	\$289.86

Medical Coverage



Three Simple Steps for Healthcare



Insurance
that's simple.



Medical Summary



Plan Item	Coverage		
Lifetime Maximum Benefit	Unlimited		
Calendar Year Maximum Benefit	Unlimited		
Calendar Year Deductible	Not Applicable		
Out-Pocket-Maximum (Includes copays)	Single: \$8,150		Family: \$16,300
Physician Services	Tier 1	Tier 2	Tier 3
Preventive Care & Eden Health Virtual Primary Care		\$0	
Primary Care Office Visit	\$15	\$45	\$95
Mental Health / Substance Use Office Visit	\$15	\$45	\$95
Specialist Office Visit	\$30	\$85	\$250
Medical Benefits	Tier 1	Tier 2	Tier 3
Emergency Room/Services	\$500 per visit		
Ambulance Services	\$500 per visit		
Urgent Care Facility	\$30	\$85	\$190
Diagnostic Labs	\$10	\$30	\$65
Diagnostic Radiology	\$50	\$150	\$500
Advanced Imaging (MRI, MRA, CAT, and PET scans)	\$200	\$425	\$1,500
Outpatient Surgery (Ambulatory Surgical Center)	\$750	\$2,500	\$5,000
Outpatient Therapies (PT, OT, ST - 20 visit limit each)	\$30	\$85	\$250
Allergy Injections, Serum, & Testing	\$30	\$85	\$250
Chiropractic Care (20 visit limit each)	\$30	\$85	\$250
Durable Medical Equipment **	\$65	\$200	\$425
Home Health Care (50 visit limit)	\$30	\$85	\$190
Hospice	\$150	\$465	\$1,030
Skilled Nursing Facility (160 visit limit)	\$1,200	\$4,000	\$6,000
Hearing Aids (one per ear, every 3 years, \$3,000 limit)	\$65	\$200	\$425
Temporomandibular Joint Dysfunction (\$5,000 lifetime max)	\$750	\$2,500	\$5,000
Transplants and Gender Reassignment Surgery	\$1,750	\$4,500	\$6,000
Hospital Expenses	Tier 1	Tier 2	Tier 3
Includes Mental Health and Substance Use Disorders			
Inpatient	\$1,750	\$4,500	\$6,000
Outpatient	\$750	\$2,500	\$5,000
Maternity	Tier 1	Tier 2	Tier 3
Initial Office Visit	\$30	\$85	\$250
Preventive and On-going Prenatal Care	No Charge (Included in global delivery copay)		
Delivery and Postnatal Care	\$1,750	\$4,500	\$6,000

* No out-of-network coverage is included with this plan (exception: emergency services: \$500 copay).

** Diabetic equipment and supplies provided by Livongo are covered at \$0.

Prescription Drug Benefit



SimplePay Health pharmacy coverage includes retail, specialty, and mail order benefits and the prescription benefit is included in the medical plan out-of-pocket. Did you know certain pharmacies are more expensive than others and cost the health plan more money for the same exact medication? For example, the same prescription you fill at Walgreens could cost twice as much as a prescription filled at your local grocery store. Just like the health plan, you'll pay less when accessing certain pharmacies for your prescriptions. SimplePay Health has a user-friendly prescription drug search tool that allows you to select your pharmacy based on cost.

MedOne is your prescription drug vendor, and the MedOne Rx logo is included on your health plan ID Card. (There is a single ID card for both medical and pharmacy.) Your SimplePay HealthPro is your single-point-of-contact for your medical and pharmacy service needs.

Pharmacy Benefit Summary

Plan Feature	All Other Network Pharmacies	CVS	Walgreens
Retail (Up to a 30 Day Supply)			
Generics - Tier 1	\$5	\$15	\$35
Preferred Brand - Tier 2	\$20	\$80	\$160
Non-Preferred Brand - Tier 3	\$40	\$120	\$240
Specialty Drug Program			
Specialty Drugs		\$100	
Mail Order Pharmacy (90 Day Supply)			
Generics - Tier 1		\$20	
Preferred Brand - Tier 2		\$80	
Non-Preferred Brand - Tier 3		\$160	

***Dispense As Written Rule:** If a physician requests a brand name drug, no member penalty applies. If a member requests a brand name drug, the member pays the brand copay plus the difference between the brand and generic cost of the product.*

Select Drugs & Products Program

The pharmacy benefit includes the Paydhealth Select Drugs & Products Program that can fund all or part of your specialty drug costs independent of the medical plan. The program allows you to take an active role in helping reduce both your costs and the Jim Ellis plan costs for these medications. If you are taking a specialty medication(s), your participation in this program is required, and you will be contacted by a Paydhealth Case Coordinator for specific enrollment instructions. If you have questions at this time about this unique program or if you are currently taking specialty medications and would like to learn more, please contact the Jim Ellis Benefits Service Center.

Prescription Drug Price Lookup

In order to compare drug prices and find a participating pharmacy, follow the instructions below.

- 1) Go to the www.simplepayhealth.com and sign in.
- 2) Click on "Medical & Rx" at the top of the page.
- 3) Scroll down to the "Find a pharmacy and compare drug prices" section, and select your desired option: Compare Drug Costs or Manage Rx and Pharmacies.

SimplePay Health Monthly Statement

Instead of receiving Explanations of Benefits and bills from the doctor or hospital, you will receive one medical statement at the end of the month summarizing the copays you owe from the past 30 days if you access services or fill a prescription. The copays on your statement match the copay amounts provided through the search tool or your Health Pro. There is a possibility the physician or pharmacy could bill less than the copay, in which case the lower billed amount would display on your statement. If you pay your statement in full by the due date, you'll receive 1.5% credit on future statements.



12712 Park Central Dr St. 100
Dallas, TX 75251

000000-000001-000000-000001 180026 5305ST01
JOHN DOE
999 PURPLE LN
ANYCITY, TX 99999

MONTHLY STATEMENT

Member ID	SP1000CB0
Billing Period	01/01/2019-01/31/2019
Due On	03/22/2019

ACCOUNT SUMMARY

Outstanding Balance	\$10.00
Payments Made	\$0.00
Current Charges	\$82.76
Amount Due	\$92.76

Pay online at <https://acap.secureconduit.net>. You may also detach and mail the bottom portion of this statement with your payment.

OUT-OF-POCKET MAXIMUM

JOHN DOE	JANE DOE	Family
		
Spent \$0.00	Spent \$82.76	Spent \$82.76
Remaining \$4,000.00	Remaining \$3,992.24	Remaining \$7,992.24



12712 Park Central Dr St. 100
Dallas, TX 75251

MONTHLY STATEMENT

DATE OF SERVICE	CLAIM ID	PATIENT NAME	SERVICE	PROVIDER	SIMPLEPAY AMOUNT
01/29/19	3285133901297G	JANE DOE	ESCITALOPRAM TAB 20MG	KROGER PHARMACY	\$4.02
01/29/19	3285186901293G	JANE DOE	LAMOTRIGINE TAB 200MG	KROGER PHARMACY	\$3.74
04/08/19	57070900	JANE DOE	Unknown - Specialist Visit	MR DOCTOR MD	\$30.00
04/10/19	CHMIEL000	JOHN DOE	Chiropractor - Specialist Visit	DR CHIROPRACTOR DC	\$45.00
TOTAL					\$82.76



SimplePay Health Member Portal



GET READY FOR THE NEW SIMPLEPAY HEALTH MEMBER PORTAL AND MOBILE APPS, POWERED BY VIRGIN PULSE.

SimplePay Health has joined forces with Virgin Pulse to create an exciting health plan and wellbeing experience for you. You'll have the medical and pharmacy benefit information you need, along with new tools to get active, get healthy, and live better every day.

Portal Features:

- Contact Your SimplePay Health Pro
- Find a Doctor or Pharmacy & Compare Costs
- Claims & Statements
- Member ID Card
- Telemedicine
- Clinical Programs
- Health Check
- Journeys®
- Health Coaching
- Activity Tracking

Trackers and Challenges:

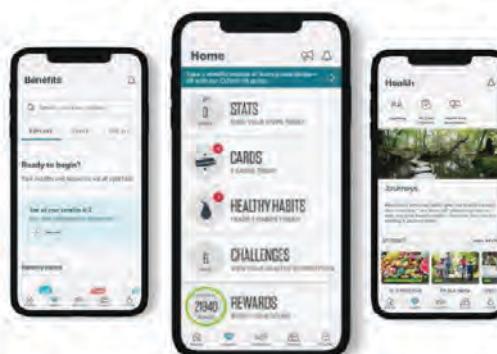
- Healthy Habit Trackers: *Choose from hundreds of habits in categories like Getting Active, Reducing Stress, Learning New Things, and more.*
- Challenges: *In addition to challenges you can do with your coworkers, you'll be able to challenge yourself to practice some healthy habits and even design and invite your coworkers and friends to participate.*
- Nutrition and Sleep Guides and resources
- Invite your family and friends to participate

SIMPLEPAY HEALTH REWARDS

SimplePay Health has ways to earn points toward a quarterly raffle to redeem a gift card, spend in the Virgin Pulse Store, or donate! Visit your Rewards page once available to see the fun ways to earn toward the raffle. Your points also help determine how SimplePay Health gives to nonprofits during our annual Season of Giving! Look out for surveys to Choose Your Charity.

GET THE APP

Be sure to download the Virgin Pulse app from the App Store or Google Play. SimplePay Health is your sponsor organization.



www.simplepayhealth.com • 1-800-606-3564

Journeys are registered trademarks of Virgin Pulse, Inc.

SimplePay Health Clinical Solutions

The SimplePay Health plan has several programs to help manage chronic conditions and improve your overall health including:



Livongo (Diabetes and Cardiovascular Disease Management): As a SimplePay Health member you have access to Livongo for Diabetes and Hypertension: health benefits at no cost that help make it easier to live with diabetes and high blood pressure. Livongo is available to you, your spouse, or your dependent(s) enrolled in the SimplePay Health plan who have been diagnosed with diabetes and/or hypertension. Participants will receive a free glucose and blood pressure monitor, unlimited test strips, and coaching support.



Clarity (Digestive Health): SimplePay Health has partnered with this first-of-its-kind digital program to help those who struggle with digestive disorders. Guided by expert digestive dietitians, participants can get back to feeling normal again, saving time and money with fewer ER and specialist visits, and finally, overcoming the cycle of frustration when searching for ways to treat these conditions.



Ovia (Fertility, Pregnancy & Parenting): Ovia Health's mobile apps Ovia Fertility, Ovia Pregnancy, and Ovia Parenting are your daily companion as you navigate your health and parenting journey by helping you take control of your health and achieve your goals. While the apps are available for free on the App Store and Google Play, linking your app to your SimplePay benefit unlocks all of Ovia's features, including unlimited 1-on-1 coaching and related benefits navigation.



Naturally Slim (Weight Management & Health Eating): Naturally Slim is an online skill-building program that teaches you not what to eat, but when and how to eat to lose weight and keep it off. The program focuses on behavior change, taking care of your vital needs, and how to start adding physical activity into your life. No more foods to buy, points to count, or guidelines on what you can or cannot eat.



Joyages (Mental Health): Joyages is a mental health app that delivers a customized experience designed to empower users to become happier in just minutes each day. The app encourages positive habit formation and mindset shifting. With customized assessments designed to alert users to mental risks, the Joyages app is a private, user-friendly digital life coach that helps users navigate through life's toughest moments and build the resilience necessary to thrive.



Regenexx (Stem Cell Therapy): Regenexx uses the body's natural healing agents to replace the need for up to 70% of elective orthopedic surgeries. Your stem cells and blood platelets are concentrated in the on-site orthobiologics lab and injected under image guidance into the precise area of your injury where they repair and regrow damaged bone, cartilage, muscle, tendon, and ligament tissues. With Regenexx, you can get back to doing what you love without invasive surgery and lengthy recovery.



2nd.MD (Expert Second Opinion Services): 2nd.MD provides expert medical opinions via video or phone consultations with leading medical specialists. A member must have received a diagnosis and/or treatment plan from a licensed medical practitioner or remain undiagnosed after multiple visits to specialists. The 2nd.MD care team assists the member in selecting a Specialist, providing medical records to the Specialist for review, and scheduling the Specialist consultation.

For more information on each of these programs available to SimplePay Health members, please visit www.simplepayhealth.com member portal or contact your Health Pro at (800) 606-3564.

Virtual Primary Care edenhealth

Included for Medical Employees and Dependents

Virtual Primary Care Benefits

This unique benefit is included for all medical plan members and your covered dependents, and is the easiest way to get the primary care you need while at home or on the-go **at no cost to you.**

What you get:

- Extended, unrushed doctor's visits
- No paperwork, no wait time
- Expert team of providers
- Prescriptions or medical refills any time
- Nationwide medical assistance
- Help with COVID-19 concerns
- Lifestyle coaching
- 24/7 virtual care

Each member receives a dedicated Care Team of best-in-class doctors, clinicians, and insurance experts available directly in the app

4.95  Avg member rating out of 5 stars

Scope of Care

Acute Care

- Diagnose and treat illnesses, injuries, and infections including
 - * Colds, flus, and other bacterial, fungal, & viral infections
 - * Rashes, acne, and dermatological issues
 - * Sprains, strains, and aches & pains
 - * Fatigue, weakness, dizziness, & headaches

Preventive care

- Annual wellness exams
- Travel medicine and prophylaxis coordination
- Behavioral and sexual health screenings
- Illness and injury prevention

Chronic care

- Management of ongoing issues
 - * Allergies
 - * Asthma, diabetes, high / low blood pressure, high cholesterol
 - * Gastrointestinal disorders
 - * Back and muscular pain

COVID-19 Care

- Virtual symptom screening
- Medical guidance and support and testing coordination



Eden Health is available for employees who don't enroll in medical on an employee-paid basis. The cost is \$6.00 semi-monthly or \$2.77 weekly for you and your dependents.

Dental Coverage



Anthem Dental Plan

The Anthem dental plan is a comprehensive plan with an extensive network of dentists. We encourage you to use network dentists to help manage the long term costs of the dental plan and reduce your out-of-pocket costs.

Frequency Limitations: The dental plan includes frequency guidelines for services. Some examples of frequency limitations are listed below.

- Full Mouth X-rays: Covered once every 5 years
- Implants / Bridges: Once per tooth every 7 calendar years
- Inlays / Onlays / Crowns: Once per tooth every 7 calendar years
- Dentures: Once per 7 years

For out-of-network services, the Anthem dental plan pays at the 80th percentile of usual and customary (U&C).

Anthem Dental Provider Information

Although the Anthem dental plan includes coverage for any dentist, we encourage the use of in-network providers to avoid potential balance billing. To locate participating dentists, follow the below steps:

- Access anthem.com and click “Find a Doctor” and select “Dental” for type of care. Select “Georgia” in the drop down.
- Select “Dental” for the type of plan, then “Dental Complete.”

Additional Features

- Accidental Injury Benefit - covered at 100%, no deductible or coinsurance up to the dental plan annual max
- Online resources: “Ask a Dental Hygienist” and Cost Estimator tool
- Cleanings, gum maintenance, fluoride, sealants, and more for members with certain health conditions.
- International Emergency Dental Program: 100% coverage for emergency dental services while traveling abroad.

Anthem Dental Summary of Benefits	
Calendar Year Deductible	\$50 Individual / \$150 Family Does not apply to preventive care or orthodontic care
Calendar Year Maximum	\$5,000
Orthodontia	50% – Children to age 19 only – \$1,000 Benefit Lifetime Maximum
Preventive Care	100% – no deductible <ul style="list-style-type: none"> • Exams and Cleanings – 2 per 12 months • Fluoride – 2 per 12 months (children under age 16) • Bitewing x-rays – once per calendar year • Full mouth x-rays – once per 5 years
Basic Services	80% after deductible <ul style="list-style-type: none"> • Sealants – once per tooth per 3 years (children under 16) • Space maintainers – once per 5 years (to age 16) • Amalgam and composite fillings - once per tooth per 2 years
Major Services	50% after deductible <ul style="list-style-type: none"> • Root canal • Periodontal maintenance and surgery • Scaling and root planing • Crowns • Oral surgery – simple & surgical * • Dentures • Fixed bridges • Inlays/onlays • Implant services
Please refer to the Certificate of Coverage for a complete listing of covered services and frequency limitations.	

Dental Payroll Deductions	Weekly	Semi-Monthly
Employee Only	\$4.19	\$9.09
Employee + Spouse	\$12.91	\$27.98
Employee + Child(ren)	\$16.96	\$36.74
Family	\$27.40	\$59.38
<i>Dependent children are eligible up to age 26.</i>		

Vision Coverage



The Anthem vision plan includes an eye exam, frames, and lenses (either contact lenses or eyeglass lenses). We encourage you to access in-network providers and retail locations for the best benefits. Plus, when you go in-network, the claim is processed at the time of service with no claims to file.

Be sure to review the Anthem vision providers because not all vision plans use the same providers. The Anthem vision network is extensive, and includes LensCrafters, Pearle Vision, Target Optical, JC Penney, and more along with independent vision providers. Below are instructions to locate participating Anthem vision providers:

- Access anthem.com
- Click “Find a Doctor” and select “Vision” in the drop down for type of care.
- Select “Blue View Vision” for the plan/network and follow search instructions.

Preventive vision care is important. During an exam, healthcare professionals are able to see signs of a number of health conditions. This can lead to early detection of major health problems before they become more serious.

Frequency Limitations: The exam, lens, and frame benefits are once per calendar year.

Anthem In-Network Vision Summary of Benefits

Eye Examination Standard	\$20 copay
Eyeglass Lenses (instead of contact lenses) Single Bifocal Trifocal Lenticular	\$20 copay \$20 copay \$20 copay \$20 copay
Lens Options Transitions (children to age 19) - NEW! Standard Polycarbonate (children to age 19) Factory Scratch Coating Standard Progressive UV Coating Standard Polycarbonate (adults)	\$0 copay \$0 copay \$0 copay \$65 copay \$0 copay \$40 copay
Eyeglass Frames	Plan pays \$250 less \$20 copay, then 20% off balance Additional pairs: 40% discount
Contact Lenses Conventional & Disposable Medically Necessary (covered in full)	\$250 allowance, then 15% off balance Covered in full

Vision Payroll Deductions	Weekly	Semi-Monthly
Employee Only	\$1.86	\$4.03
Employee + Spouse	\$3.72	\$8.05
Employee + Children	\$3.81	\$8.25
Family	\$5.67	\$12.28

Dependent children are eligible up to age 26.

Life Insurance Coverage



Greater Georgia Life Employer-Paid Basic Life / AD&D Insurance

Jim Ellis provides Basic Term Life insurance and Accidental Death and Dismemberment (AD&D) coverage at no cost to you.

Basic Term Life insurance includes Accidental Death and Dismemberment, which is an additional benefit paid for loss of life, limbs, speech, and hearing caused by an accident (see certificate for details.)



Greater Georgia Life Voluntary Life Insurance

Voluntary Term Life Insurance provides the opportunity to supplement the basic coverage provided by Jim Ellis. You may elect additional life insurance coverage for yourself and your family members.

You may elect up to \$200,000 for yourself and \$50,000 for your spouse at this time with no health questions. Additional coverage amounts require medical underwriting. Please obtain an Evidence of Insurability (EOI) form from the Benefits Service Center if you wish to enroll in coverage above these amounts. This form will need to be completed and submitted to Greater Georgia Life for review before coverage can be confirmed.

If you terminate employment at Jim Ellis, you are able to maintain your life insurance by paying your premiums directly to Greater Georgia Life, as long as you apply within 31 days of your termination date. See certificate for details.

Voluntary Life Summary of Benefits		Employee	Spouse
Benefit Amount		Up to 5x annual income in \$10,000 increments	Up to 50% of employee's benefit in \$5,000 increments
Benefit Maximum		\$500,000 or 5x annual income <i>(whichever is less)</i>	\$100,000 or 50% of employee's benefit <i>(whichever is less)</i>
Child			
Age 15 days to 26 years		\$10,000 <i>(not to exceed 50% of employee's benefit)</i>	
<i>Benefits reduce 35 % at age 65 and by 50% at age 70.</i>			

Voluntary Life Payroll Deductions

Costs are based on age and desired benefit level.

Employee	Weekly		Semi-Monthly	
	\$100,000	\$200,000	\$100,000	\$200,000
Age 20	\$2.77	\$5.54	\$6.00	\$12.00
Age 30	\$3.23	\$6.46	\$7.00	\$14.00
Age 40	\$6.46	\$12.92	\$14.00	\$28.00
Age 50	\$19.15	\$38.31	\$41.50	\$83.00
Age 60	\$40.62	\$81.23	\$88.00	\$176.00

Spouse (Based on spouse age)	Weekly		Semi-Monthly	
	\$25,000	\$50,000	\$25,000	\$50,000
Age 20	\$0.40	\$0.81	\$0.88	\$1.75
Age 30	\$0.46	\$0.92	\$1.00	\$2.00
Age 40	\$0.87	\$1.73	\$1.88	\$3.75
Age 50	\$2.42	\$4.85	\$5.25	\$10.50
Age 60	\$5.94	\$11.88	\$12.88	\$25.75

Child(ren)	Weekly		Semi-Monthly	
	\$10,000	\$10,000	\$10,000	\$10,000
15 days to Age 26		\$0.28		\$0.60

*Rate covers all children in the family.

If you are below age 60 and diagnosed with a terminal illness with a life expectancy of less than 12 months, you may be eligible collect 75% of your life insurance benefit, up to \$250,000, prior to your death. See certificate for details.



Disability Coverage

Greater Georgia Life Voluntary Disability

Disability coverage provides income replacement benefit in the event you are unable to work due to an illness or accident. Just over 1 in 5 of today's 20 year olds will become disabled before they retire, and over 56 million Americans are classified as disabled (about 19% of the population).

- **Short Term Disability (STD)** provides a benefit to replace a portion of your income for a short period of time. The benefit amount is 60% of your earnings and the benefit can be paid for up to 13 weeks.
- **Long Term Disability (LTD)** provides monthly income replacement, up to age 65, if you remain disabled. LTD coverage also provides 60% of your earnings, and begins on day 91 of disability.

You may elect Short Term Disability and/or Long Term Disability coverage at this time with no health questions. If you do not enroll during your new employee enrollment period, you will be required to complete Evidence of Insurability (EOI) should you wish to enroll at a future date and coverage is not guaranteed.

Pre-Existing Conditions

The disability plans exclude coverage for disabilities caused by pre-existing conditions. A pre-existing condition is one for which you have been treated or diagnosed during the 12 months prior to your disability effective date. Please refer to the Certificates of Coverage for details.

Short Term Disability

Short Term Disability Summary of Benefits	
Benefit Amount	60% of weekly earnings
Maximum Weekly Benefit	\$500 (tax-free)
Maximum Benefit Period	13 weeks
Benefits Begin	1st day due to injury 8th day due to illness

Sample Payroll Deductions

Below are sample deductions for STD coverage. Your Benefits Service Center Specialist will calculate your specific costs based on your age and annual income.

The post-tax payroll deductions below are for an employee with:

- An Annual Income of \$50,000
- A Weekly Income of \$961.54
- A Weekly Benefit of \$576.92 (tax-free)

Deduction	Age 25	Age 35	Age 45	Age 55
Weekly	\$2.49	\$3.29	\$4.87	\$8.04
Semi-Monthly	\$5.39	\$7.13	\$10.56	\$17.42

Long Term Disability

Long Term Disability Summary of Benefits	
Benefit Amount	60% of monthly earnings
Maximum Monthly Benefit	\$5,000 (tax-free)
Maximum Benefit Period	To age 65 or Social Security Normal Retirement Age
Benefits Begin	91st day of disability

Sample Payroll Deductions

Below are sample deductions for LTD coverage. Your Benefits Service Center Specialist will calculate your specific costs based on your age and annual income.

The post-tax payroll deductions below are for an employee with:

- An Annual Income of \$50,000
- A Monthly Income of \$4,166.67
- A Monthly Benefit of \$2,500 (tax-free)

Deduction	Age 25	Age 35	Age 45	Age 55
Weekly	\$1.44	\$2.40	\$4.62	\$9.81
Semi-Monthly	\$3.13	\$5.21	\$10.00	\$21.25

Critical Illness Coverage



The Jim Ellis voluntary critical illness plan provides a flat dollar benefit in the event of a diagnosis of a covered illness. The critical illness plan is insured by Voya Financial.

Benefit Options	
Employees	From \$5,000 to \$30,000
Spouses (must be below age 70 to elect coverage)	From \$5,000 to \$15,000
Children	\$1,000 \$2,500 \$5,000 \$10,000
Benefit Reduction at Age 70	Employee and spouse benefits reduce at age 70

*Employee must have coverage in order to elect spouse and child coverage.

Covered Diagnoses

- Cancer (*see certificate definition*)
- Carcinoma in situ (25%)
- Heart attack
- Stroke
- Major organ failure
- End stage renal (kidney) failure
- Paralysis
- Coma (*see certificate definition*)
- Coronary artery bypass surgery (25%)
- Deafness, blindness
- Benign brain tumor
- Occupational HIV

Wellness Benefit Included

The voluntary critical illness plan includes a wellness benefit for preventive screenings, including: chest x-ray, mammogram, hemocult, colonoscopy, CA 125 and CEA blood tests, prostate-specific antigen testing, and pap smear.

Wellness Benefit Amount:

- Employee: \$50
- Spouse: \$50
- Child(ren): \$25 (maximum of \$100 for all covered children)

How to File a Claim

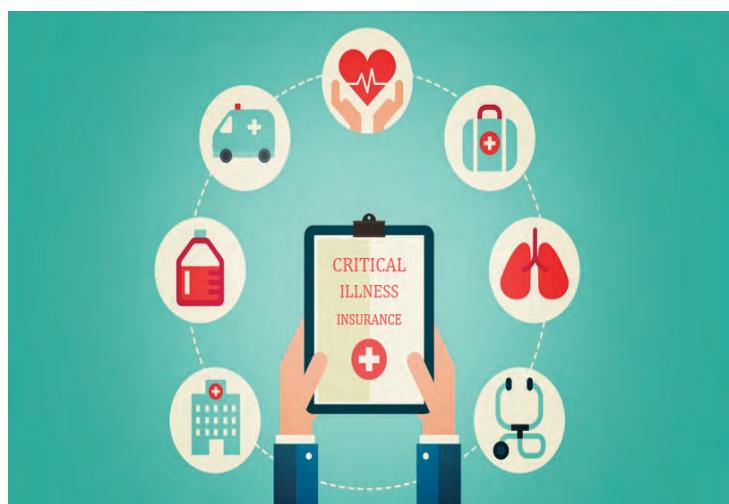
- Go to voya.com/claims.
- Scroll down to “Have a Wellness Benefit Claim?” section and click “Submit your claim” button.
- Select Critical Illness Insurance.
- Click “Continue” and follow the screen prompts. Once all questions are answered, click “Submit”.
- The Group Name and Number are: Jim Ellis Automotive Group | 70271-4

Critical Illness Payroll Deduction

Age	Employee Payroll Deductions			
	Weekly	Semi-Monthly		
	\$5,000	\$10,000	\$5,000	\$10,000
Under 30	\$0.44	\$0.88	\$0.95	\$1.90
30-39	\$0.65	\$1.29	\$1.40	\$2.80
40-49	\$1.21	\$2.42	\$2.63	\$5.25
50-59	\$2.83	\$5.65	\$6.13	\$12.25
60-64	\$7.10	\$14.19	\$15.38	\$30.75
65-69	\$7.67	\$15.35	\$16.63	\$33.25
70+	\$9.90	\$19.80	\$21.45	\$42.90

Age	Spouse Payroll Deductions			
	Weekly	Semi-Monthly		
	\$5,000	\$10,000	\$5,000	\$10,000
Under 30	\$0.60	\$1.20	\$1.30	\$2.60
30-39	\$0.68	\$1.36	\$1.48	\$2.95
40-49	\$1.30	\$2.61	\$2.83	\$5.65
50-59	\$2.48	\$4.96	\$5.38	\$10.75
60-64	\$3.55	\$7.11	\$7.70	\$15.40
65-69	\$5.40	\$10.80	\$11.70	\$23.40
70+	\$8.15	\$16.29	\$17.65	\$35.30

Child Payroll Deductions		
Benefit	Weekly	Semi-Monthly
\$1,000	\$0.06	\$0.14
\$2,500	\$0.16	\$0.34
\$5,000	\$0.31	\$0.68
\$10,000	\$0.62	\$1.35



Accident Coverage

The Jim Ellis voluntary accident plan provides financial protection in the event of an accident. The accident plan is insured by Voya Financial. The plan provides benefits based on the schedule below. Please refer to the Summary of Benefits or Certificate of Coverage for complete details.

Hospital Care		Accident Payroll Deductions Weekly
<ul style="list-style-type: none"> Surgery – Open abdominal, thoracic Blood Admission Confinement per day up to 365/year Transportation per trip up to 3/accident Lodging per day up to 30 days 	\$1,000 \$500 \$1,125 \$350 \$650 \$150	Employee \$1.32 Employee + Spouse \$2.18 Employee + Child(ren) \$2.84 Family \$3.70
Accident Care		<i>Note: Spouses age 70 and older are not eligible to enroll. Employees are eligible regardless of age.</i>
<ul style="list-style-type: none"> Initial doctor visit Urgent care Follow-up doctor treatment Medical equipment Speech & physical therapy up to 6 / accident X-Ray 	\$75 \$200 \$75 \$100 \$40 \$40	Employee \$2.85 Employee + Spouse \$4.73 Employee + Child(ren) \$6.15 Family \$8.03
Common Injuries		<i>Note: Spouses age 70 and older are not eligible to enroll. Employees are eligible regardless of age.</i>
<ul style="list-style-type: none"> Burns – 2nd and 3rd degree ER dental work Eye injury Torn knee cartilage Lacerations Tendon, ligament, rotator cuff Concussion Paraplegia 	\$1,125 - \$12,500 \$75 - \$300 \$80-\$275 \$175-\$650 \$25-\$400 \$350-\$1,000 \$175 \$13,500 - \$20,000	
Dislocations		
<ul style="list-style-type: none"> Hip Joint Knee Ankle or foot bones (other than toes) Shoulder Elbow, Wrist Finger/Toe Hand bones(s) other than fingers Lower jaw, collarbone Partial dislocations 	Non-Surgical / Surgical \$3,200 / \$6,400 \$2,000 / \$4,000 \$1,200 / \$2,400 \$1,500 / \$3,000 \$900 / \$1,800 \$250 / \$500 \$900 / \$1,800 \$900 / \$1,800 25% of the non-surgical benefit	
Fractures		
<ul style="list-style-type: none"> Hip Leg Ankle, Hand, Wrist Collarbone Rib(s) Shoulder 	Non-Surgical / Surgical \$2,500 / \$5,000 \$1,800 / \$3,600 \$1,500 / \$3,000 \$1,200 / \$2,400 \$350 / \$700 \$1,500 / \$3,000	
Sports Accident Benefit		Pays an additional 25% of the Hospital Care, Accident Care, or Common Injuries benefit to a maximum of \$1,000

How to File a Claim

- Go to voya.com/claims.
- Select “Get Started” under “Start a Claim” section and click the “Continue.”
- Select Accident Insurance.
- Click “Continue” and follow the screen prompts. Once all questions are answered, click “Submit”.
- The Group Name and Number are: Jim Ellis Automotive Group | 70271-4



Identity Theft



Every 2 seconds, thieves steal another identity. Your identity includes more than your Social Security Number and bank accounts. The Allstate Identity Protection Pro Plus Plan does more than monitor your credit reports and scores. It safeguards your personal information and the data you share.

Allstate Identity Protection gives you the tools and protection to monitor activity, stop identity theft early, and resolve it quickly. Most victims only discover they have a problem when they are denied credit or receive bills for items never ordered. We encourage you to consider this benefit as a proactive step to help protect your personal information.

The Allstate Identity Protection plan provides extensive protection for you and your family. Benefits include but are not limited to:

- Proactive Credit Monitoring
- Credit Score Tracking
- Social Media & Dark Web Monitoring
- Student Loan Activity Alerts
- Lost Wallet Protection
- Data Breach Notifications
- Credit Freeze & Dispute Assistance
- Stolen Fund Reimbursement
- IP Address Monitoring
- Deceased Dependent Protection
- 24 / 7 Remediation Support

ID Theft Deductions		
Coverage Level	Weekly	Semi-Monthly
Employee Only	\$2.30	\$4.98
Family	\$4.14	\$8.98



Employee Assistance Program



Resource Advisor

Jim Ellis provides an employer-paid Employee Assistance Program called Resource Advisor by Greater Georgia Life at no cost. This service is confidential and is available to you and your family members. You may speak with an expert and receive counseling as well as legal and financial assistance.

Counseling

During challenging times, just talking to someone can help you feel better and prevent problems from becoming unmanageable. :

- 24/7 toll-free access to trained counselors: Talk privately with a counselor.
- Face-to-face counseling with local, licensed mental health professionals (psychologists, social workers, etc.): Receive up to 3 visits with a counselor for marital counseling, child/adolescent counseling or help with stress, anxiety or depression – or any issue you wish to discuss.
- Time with a lawyer: Talk to a lawyer for 60 minutes about wills, estate planning and real estate – or any other matter when you need legal advice. If you need more time, you can get discounts on future meetings.
- Help from a certified financial planner: Get advice from a financial planner to go over everything from budgeting to retirement planning to taxes.

Online Resources

Resource Advisor's website has many tools to help you find support whenever you need it. These tools include:

- Parenting advice and services
- Eldercare information and services
- Advice on coping with difficult life events like losing a loved one
- Tips on dealing with emotions
- Financial calculators and tools
- Legal library to help prepare wills, living wills, and power of attorney

Support for Loss of Loved One

We know that when someone passes away, you want to do all you can to help the family. At a time when many people feel helpless, Resource Advisor's extensive services provide support to beneficiaries to help them ease the burden because beneficiaries' needs go a lot deeper than the financial help of a life insurance check.

To access services, simply call 1-888-209-7840 or visit www.resourceadvisor.greatergeorgialife.com.



New Health Insurance Marketplace Coverage Options and Your Health Coverage

Form Approved
OMB No. 1210-0149
(expires 1-31-2017)

PART A: General Information

When key parts of the health care law take effect in 2014, there will be a new way to buy health insurance: the Health Insurance Marketplace. To assist you as you evaluate options for you and your family, this notice provides some basic information about the new Marketplace and employment-based health coverage offered by your employer.

What is the Health Insurance Marketplace?

The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers "one-stop shopping" to find and compare private health insurance options. You may also be eligible for a new kind of tax credit that lowers your monthly premium right away. Open enrollment for health insurance coverage through the Marketplace begins in October 2013 for coverage starting as early as January 1, 2014.

Can I Save Money on my Health Insurance Premiums in the Marketplace?

You may qualify to save money and lower your monthly premium, but only if your employer does not offer coverage, or offers coverage that doesn't meet certain standards. The savings on your premium that you're eligible for depends on your household income.

Does Employer Health Coverage Affect Eligibility for Premium Savings through the Marketplace?

Yes. If you have an offer of health coverage from your employer that meets certain standards, you will not be eligible for a tax credit through the Marketplace and may wish to enroll in your employer's health plan. However, you may be eligible for a tax credit that lowers your monthly premium, or a reduction in certain cost-sharing if your employer does not offer coverage to you at all or does not offer coverage that meets certain standards. If the cost of a plan from your employer that would cover you (and not any other members of your family) is more than 9.5% of your household income for the year, or if the coverage your employer provides does not meet the "minimum value" standard set by the Affordable Care Act, you may be eligible for a tax credit.¹

Note: If you purchase a health plan through the Marketplace instead of accepting health coverage offered by your employer, then you may lose the employer contribution (if any) to the employer-offered coverage. Also, this employer contribution—as well as your employee contribution to employer-offered coverage—is often excluded from income for Federal and State income tax purposes. Your payments for coverage through the Marketplace are made on an after-tax basis.

How Can I Get More Information?

For more information about your coverage offered by your employer, please check your summary plan description or contact _____.

The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit HealthCare.gov for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

¹ An employer-sponsored health plan meets the "minimum value standard" if the plan's share of the total allowed benefit costs covered by the plan is no less than 60 percent of such costs.

Important Legal Notice

Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you are eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage. These states use funds from their Medicaid or CHIP programs to help people who are eligible for these programs, but also have access to health insurance through their employer. If you or your children are not eligible for Medicaid or CHIP, you will not be eligible for these premium assistance programs.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a state listed below, you can contact your state Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, you can contact your state Medicaid or CHIP office or dial **1-877-KIDS NOW** or www.insurekidsnow.gov to find out how to apply. If you qualify, you can ask the state if it has a program that might help you pay the premiums for an employer-sponsored plan.

Once it is determined that you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must permit you to enroll in your employer plan if you are not already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, you can contact the Department of Labor electronically at www.askebsa.dol.gov or by calling toll-free 1-866-444-EBSA (3272).

If you live in Georgia, you may be eligible for assistance paying your employer health plan premiums. For additional information, please use below contact information:

Website: <http://dch.georgia.gov>

Click on Programs, then Medicaid, then Health Insurance

Premium Payment (HIPP)

Phone: 678-564-1162 ext 2131



For additional information on special enrollment rights, you can contact:

U.S. Department of Labor

Employee Benefits Security Administration

www.dol.gov/ebsa

1-866-444-EBSA (3272)

U.S. Department of Health and Human Services

Centers for Medicare & Medicaid Services

www.cms.hhs.gov

1-877-267-2323, Menu Option 4, Ext. 61565

CONTACT INFORMATION



Carrier Contact Information

Medical & Pharmacy

SimplePay Health

1-800-606-3564

www.simplepayhealth.com

healthpro@simplepayhealth.com

Virtual Primary Care

Eden Health

1-917-261-4414

www.edenhealth.com

Clinical Solutions

SimplePay Health

1-800-606-3564

www.simplepayhealth.com

healthpro@simplepayhealth.com

Dental

Anthem

1-800-627-0004

www.anthem.com

Vision

Anthem

1-866-723-0515

www.anthem.com

Basic Life & Voluntary Life

Anthem Greater Georgia Life

1-800-851-8544

www.greatergeorgialife.com

Disability

Anthem Greater Georgia Life

1-800-232-0113

www.greatergeorgialife.com

Critical Illness & Accident

Voya Financial

1-877-236-7564

www.voya.com

Identity Theft

Allstate Identity Protection

1-800-789-2720

www.allstateidentityprotection.com

Resource Advisor

Greater Georgia Life

1-888-209-7840

www.ResourceAdvisor.GreaterGeorgiaLife.com



Benefits Service Center

770-295-1100

Benefits Website

www.jimellisbenefits.com



Please complete enrollment elections by the 25th of the month prior to your effective date or your voluntary benefits, including health insurance, will be waived.

ERISA Disclosure

If you would like to receive a paper copy of your plan documents, please contact the Jim Ellis Benefits Service Center at 770-295-1100. Benefit plan documents can be found at www.jimellisbenefits.com.



Please note that this guide is a general summary of your benefits. For specific details, you may refer to each carrier's summary plan description. Every effort has been made to ensure that this booklet accurately represents the benefits. However, if there are any discrepancies between the terms in this booklet and the terms in the plan document, the plan document will prevail.