

# New Hire Enrollment Guide Benefits for the 2022 Plan Year

Information to help with  
your enrollment choices.

**JIM** *Ellis*  
Expect the best  
Est. 1971  
Automotive Group



To enroll, call the Benefits Service Center at (770) 295-1100  
or visit [www.jimellisbenefits.com](http://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](http://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.



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## 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 will be sent to your email after your effective date.

# 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. Access [www.jimellisbenefits.com](http://www.jimellisbenefits.com). Click on “Enrollment Portal.”

- **Step 1:** Click on “Get Started Now.” You will be prompted to enter your e-mail address, the last four digits of your Social Security Number, and Date of Birth. The system will identify you by these credentials and allow you create a password.
- **Step 2:** Once you have created your password, you will be able to complete your enrollment. Complete your benefits elections by clicking “Begin Enrollment” and following the prompts. For future logins, your User ID will be your email address.

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](mailto: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 inquires, please contact: [training@jimellis.com](mailto:training@jimellis.com).

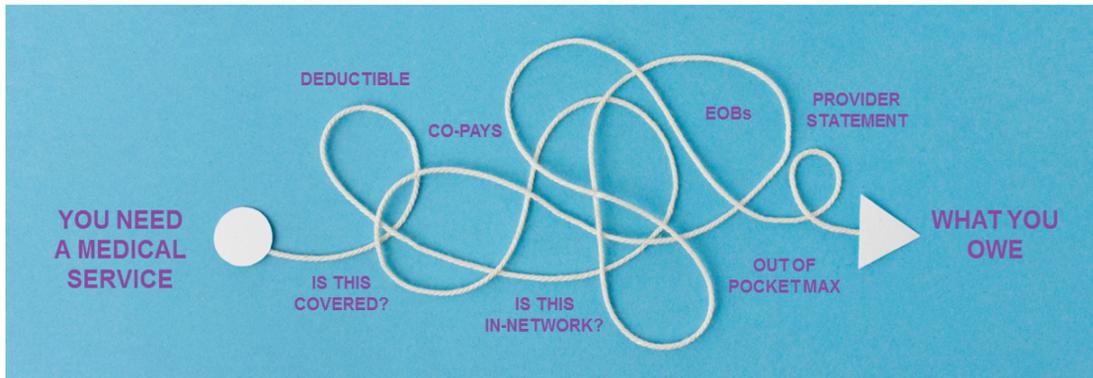
# Medical Coverage



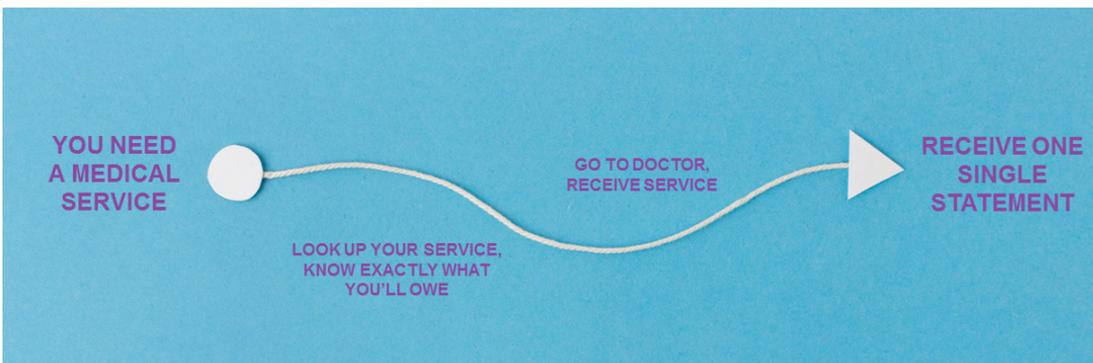
Jim Ellis is pleased to offer a medical plan called SimplePay Health. The goal of our health plan is to simplify the healthcare experience while getting our employees and your dependents to the best healthcare available. For next year, many of the copays for Tier 1, the highest quality providers, have been reduced to provide you with the best care at the best price.

Healthcare is complex. One of the problems with healthcare is that most of the time, we don't know what we will owe in advance of a service or procedure. Another problem is that there is a tremendous variation in quality between doctors within the same network, making it difficult to 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



### Spousal Health Plan Coverage Requirements

- Employees covering spouses on the health plan will be required to provide proof of current marriage (marriage certificate and joint marital document, i.e. mortgage / bank statement, utility bill, etc.).
- Spouses with other employer-sponsored health coverage will not be eligible for the Jim Ellis health plan. An affidavit acknowledging no other employer-sponsored health coverage will be **required**.
- If you are covering a spouse for health coverage, you will receive an email from the Benefits Service Center following enrollment explaining the documentation needed.

# 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. To locate an in-network provider, access [aetna.com/individuals-families/find-a-doctor.html](http://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’re not required to select a Primary Care Physician, and you may go directly to a specialist within the network without a referral. Although you are covered using in-network providers, you will pay significantly lower costs when using Tier 1 providers. In order to locate Tier 1 providers, contact the SimplePay Healthpro at (800) 606-3564.

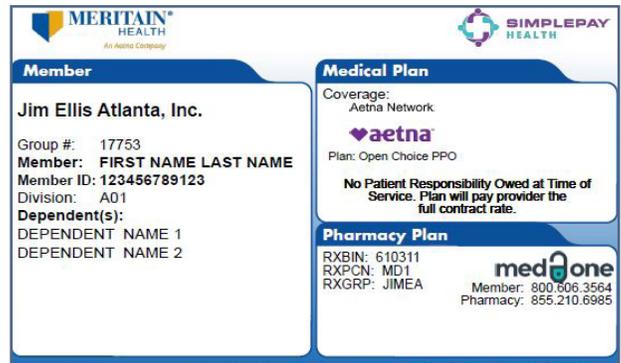
## Preventive Care and Unlimited Coverage

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 Health Pro for assistance. There are no pre-existing limitations, and the plan includes unlimited coverage for covered services.

## Copay Only Plan and No Payment at Time of Service

There are no deductibles and no coinsurance, only copays. You pay nothing at the time of service to the physician’s office or the pharmacy. Show your SimplePay Health ID Card at the doctor’s office, hospital, or pharmacy. Your claim will be processed, and the physician, hospital, or pharmacy is paid by your health plan. You will receive one consolidated monthly SimplePay Health statement that includes your all of your copays.

SimplePay Health ID Card



## Convenient Financing Available

Another great feature of the SimplePay Health plan is built-in zero-interest member financing available. If you can’t pay your monthly copay statement by the due date, you can take advantage of a zero interest payment plan through convenient payroll deduction.

## 2022 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 +
<b>Semi-Monthly Contributions</b>									
<b>Employee Only</b>	\$37.50	\$56.25	\$75.00	\$93.75	\$112.50	\$131.25	\$150.00	\$168.75	\$177.33
<b>Employee + Spouse</b>	\$370.06	\$388.81	\$407.56	\$426.31	\$445.06	\$463.81	\$482.56	\$501.31	\$509.88
<b>Employee + Child(ren)</b>	\$324.71	\$343.46	\$362.21	\$380.96	\$399.71	\$418.46	\$437.21	\$455.96	\$464.54
<b>Family</b>	\$657.26	\$676.01	\$694.76	\$713.51	\$732.26	\$751.01	\$769.76	\$788.51	\$797.09
<b>Weekly Contributions</b>									
<b>Employee Only</b>	\$17.31	\$25.96	\$34.62	\$43.27	\$51.92	\$60.58	\$69.23	\$77.88	\$81.84
<b>Employee + Spouse</b>	\$170.80	\$179.45	\$188.10	\$196.76	\$205.41	\$214.07	\$222.72	\$231.37	\$235.33
<b>Employee + Child(ren)</b>	\$149.87	\$158.52	\$167.18	\$175.83	\$184.48	\$193.14	\$201.79	\$210.44	\$214.40
<b>Family</b>	\$303.35	\$312.01	\$320.66	\$329.31	\$337.97	\$346.62	\$355.28	\$363.93	\$367.89

# Medical Coverage



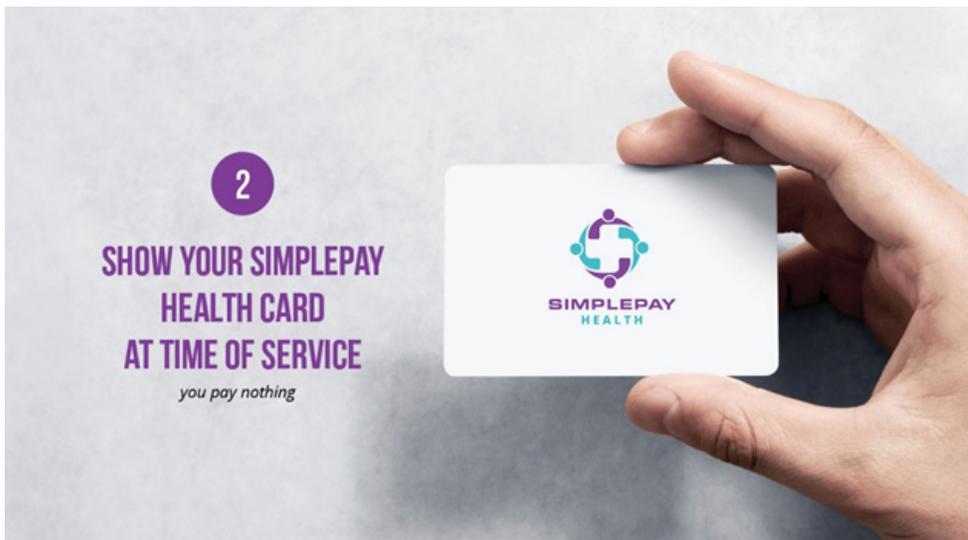
## Three Simple Steps for Healthcare



**Insurance  
that's simple.**

**Contact your Simplepay  
Health Pro at (800) 606-3564  
or use the SimplePay app to  
find Tier 1 providers.**

**Tier 1 providers are the best  
quality doctors, and they  
cost you much less.**



**Pay nothing at the  
time of service.**

**You can pay your balance,  
make a minimum payment,  
or pay \$0 and receive  
an interest free loan  
through convenient payroll  
deductions.**



# Medical Summary



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

\*\*\*Please refer to your medical plan document for certain treatment exclusions.

# Prescription Drug Benefit

SimplePay Health prescription coverage includes retail and mail order benefits, administered by MedOne, 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 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. This information is on the SimplePay App and is easy to find. Just access the SimplePay app to check drug prices, or call the Health Pro.

Walgreens prescription drug prices are the highest among all pharmacies and is not covered under the prescription drug benefit.

## Pharmacy Benefit Summary

Plan Feature	All Other Network Pharmacies	CVS	Walgreens
<b>Retail (Up to a 30 Day Supply)</b>			
Generics - Tier 1	\$5	\$15	Not Covered
Preferred Brand - Tier 2	\$20	\$80	Not Covered
Non-Preferred Brand - Tier 3	\$40	\$120	Not Covered
<b>Specialty Drug Program</b>			
Specialty Drugs	Not Covered		
<b>Mail Order Pharmacy (90 Day Supply)</b>			
Generics - Tier 1	\$20		
Preferred Brand - Tier 2	\$80		
Non-Preferred Brand - Tier 3	\$160		

## Specialty Medication Exclusion

Specialty medications are not covered on the medical plan.

## International Pharmacy Programs



You may qualify for free prescription medications with one of the International Rx Programs! All employees, spouses, and dependent children who are enrolled in the Jim Ellis medical plan are eligible. All members may receive eligible prescription medications at zero cost (\$0 copay), simply by enrolling to receive these medications through international mail order. If your medications are included on the list of eligible drugs, you'll receive an Enrollment Package automatically that will include an enrollment form and program information. Members taking eligible brand medications will be contacted by CanaRx. Members taking eligible diabetic medications will be contacted by ElectRx.

For general information, contact CanaRx at (866) 893-6337 or [info@canarx.com](mailto:info@canarx.com) or ElectRx at (855) 353-2879 or [info@electrx.com](mailto:info@electrx.com).

# SimplePay Health Monthly Statement

Instead of receiving Explanations of Benefits and bills from the doctor or hospital, you receive one medical statement at the end of the month summarizing the copays you owe from the past 30 days. The copays on your statement should 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
<b>Amount Due</b>	<b>\$92.76</b>

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 Remaining: \$4,000.00	Spent: \$82.76 Remaining: \$3,992.24	Spent: \$82.76 Remaining: \$7,992.24



12712 Park Central Dr St. 100  
Dallas, TX 75251

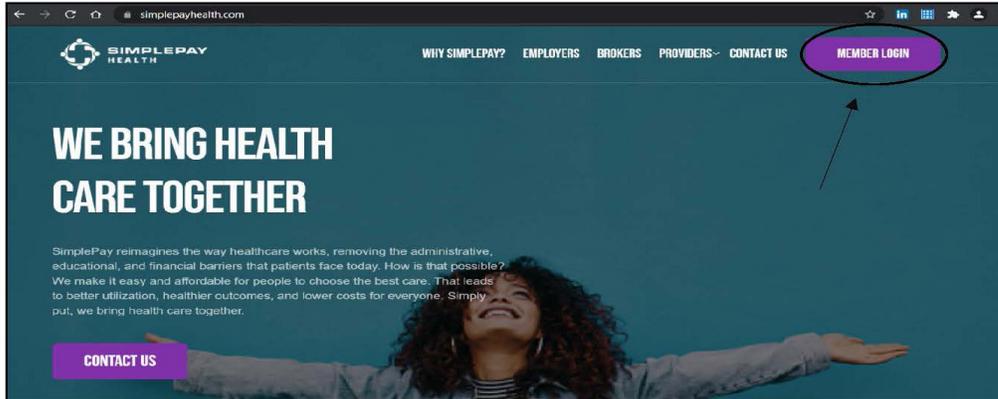
## MONTHLY STATEMENT

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
<b>TOTAL</b>					<b>\$82.76</b>



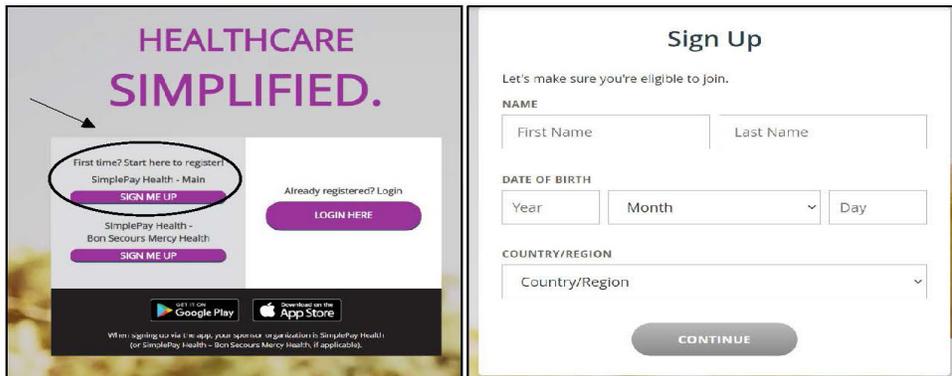
# SimplePay Health Member Portal

Step 1: Head over to [www.simplepayhealth.com](http://www.simplepayhealth.com) and select “Member Login”.



Step 2: Select the “SIGN ME UP” option under “SimplePay Health – Main” as shown below.

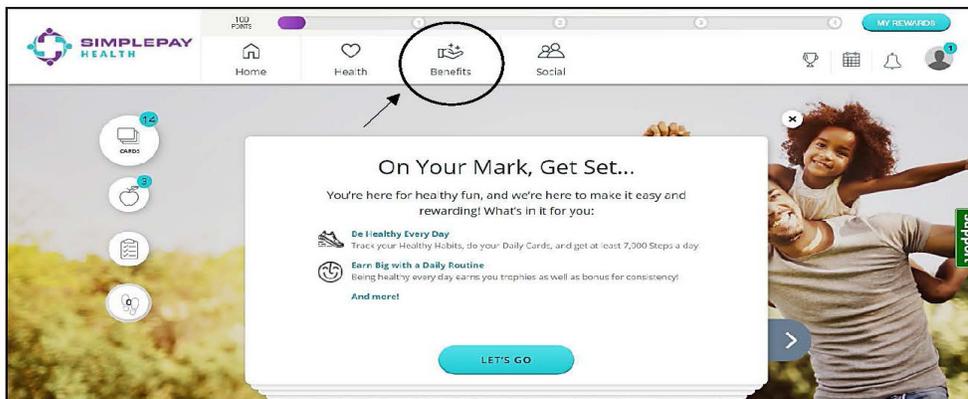
(This will initiate the registration process as shown in the “Sign Up” image) Simply enter your basic demographic information to proceed with registration.



Step 3: Once you have registered you will land on the member portal homepage.

The member portal is your one stop shop for all wellness and SimplePay resources.

To access your SimplePay Health resources, click on the “Benefits” icon as shown below.



# SimplePay Health Clinical Solutions

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



**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 to you 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, an 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 you feel 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 can't 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 your 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 our 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.

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

# Edison Centers of Excellence



Distance and cost should never get in the way of you receiving the best possible medical care. Our employees who are enrolled in medical will have full access to Edison's Smart Care Network. All possible barriers have been removed for the best care and all travel expenses will be covered for you and a companion. All employees, spouses, and dependent children who are enrolled in the medical plan are eligible. This is ZERO COST HEALTHCARE at AMERICA'S BEST MEDICAL CENTERS for the below diagnosis types.

EDISON HEALTHCARE

## SMART CARE CENTER NETWORK

-  SPINE
-  ORTHOPEDIC
-  CANCER
-  HEART / VALVE
-  PEDIATRIC
-  REGENERATIVE MEDICINE
-  COMPLEX CARE

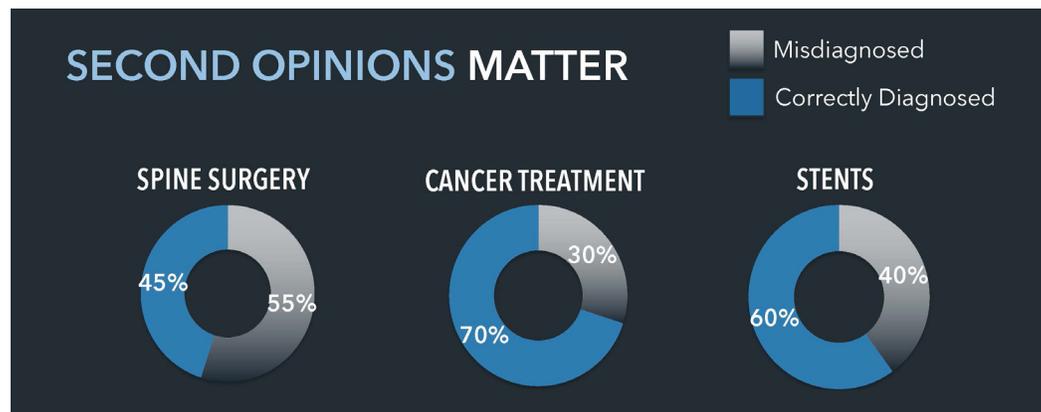
### NOT ALL MEDICAL CENTERS ARE THE SAME

Edison Healthcare has contracted with leading health systems committed to offering multidisciplinary, team-based evaluation and treatment of patients. The emphasis is on appropriate care.



Edison protects you from misdiagnosis and unnecessary care.

Misdiagnosis rates for complex care are below:



### Second Opinions

A thorough medical review is provided before travelling to an Edison's Smart Care Center.

### Travel with Ease

Edison will coordinate all of your travel, cover all costs, and provide you a prepaid card for your food and incidentals. Traveling for care has never been this easy!

### Why are Edison's medical centers considered the best of the best?

- Medical centers that are recognized as the top in the world based on risk-adjusted quality outcomes.
- Multi-disciplinary teams who deliver a fully vetted diagnosis, the best possible treatment, and extraordinary surgical outcomes.
- Team-based diagnosis / treatment plan for all and doctors who are paid a salary rather than procedure based compensation.

### Get to know Edison

We encourage you to reach out and learn how Edison can help you and your family today. We understand how frightening a new diagnosis can be, which is why we have partnered with Edison to give you the best resources and care possible!

Phone: (866) 982-7988

Email: [ehc@edisonhealthcare.com](mailto:ehc@edisonhealthcare.com)

If you have been diagnosed with one of the conditions above, we strongly encourage you to contact Edison Health to evaluate participation in this program. This program ensures you will receive the best healthcare at no cost to you.

# Telemedicine

Jim Ellis is pleased to offer an employer-paid telemedicine benefit available for all employees. Teladoc's telemedicine benefit provides 24-hour access to board-certified licensed physicians at no employee cost. This convenient benefit helps you and your family members get the care you need when you need it. Speak with a licensed physician for non-complex medical needs and advice.

Teladoc members can consult with a physician 24/7/365 by phone, online video, or mobile app from anywhere. You can get advice and treatment for non-emergency medical concerns. You can also use Teladoc for medical advice and care in the following situations:

- When your primary care physician is not available or accessible.
- After normal business hours, nights, and weekends.
- When you are at home, traveling, or don't want to take time off work for a doctor's appointment.
- When you need a prescription refill (not all scripts will be filled by your Teladoc physician).

## Common Medical Conditions Treated

- Allergies
- Bronchitis
- Sinus issues
- Cold / flu
- Headaches / migraines
- Respiratory infections
- Stomach ache and diarrhea
- Urinary tract infections
- And more

 <p>Talk to a doctor anytime, anywhere you happen to be</p>	 <p>Receive quality care via phone or online video</p>	 <p>Prompt treatment, average call back in 16 min</p>
 <p>A network of doctors that can treat children of any age</p>	 <p>Secure, personal and portable electronic health record (EHR)</p>	 <p>No limit on consults, so take your time</p>

## Benefits of Using Teladoc

- Quicker recovery
- Save time and money
- Choice of consultation method
- Convenient prescriptions

## Zero Cost Valuable Benefit for All Employees and Dependents

This benefit is included at no member cost with the SimplePay medical plan. Plus, Jim Ellis is providing this benefit for employees who are not enrolled in medical. If you intend to waive medical, please ensure any eligible dependents are added during enrollment to ensure they also have this great benefit.

# 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](http://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

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

Please refer to the Certificate of Coverage for a complete listing of covered services and frequency limitations.

Dental Payroll Deductions	Weekly	Semi-Monthly
<b>Employee Only</b>	\$3.64	\$7.89
<b>Employee + Spouse</b>	\$11.22	\$24.30
<b>Employee + Child(ren)</b>	\$14.73	\$31.91
<b>Family</b>	\$23.80	\$51.57

*Dependent children are eligible up to age 26.*

# 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](http://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

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

Vision Payroll Deductions	Weekly	Semi-Monthly
<b>Employee Only</b>	\$1.86	\$4.03
<b>Employee + Spouse</b>	\$3.72	\$8.05
<b>Employee + Children</b>	\$3.81	\$8.25
<b>Family</b>	\$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
<b>Benefit Amount</b>	Up to 5x annual income in \$10,000 increments	Up to 50% of employee's benefit in \$5,000 increments
<b>Benefit Maximum</b>	\$500,000 or 5x annual income <i>(whichever is less)</i>	\$100,000 or 50% of employee's benefit <i>(whichever is less)</i>
<b>Child</b>		
<b>Age 15 days to 26 years</b>	\$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
<b>Age 20</b>	\$2.31	\$4.62	\$5.00	\$10.00
<b>Age 30</b>	\$2.77	\$5.54	\$6.00	\$12.00
<b>Age 40</b>	\$5.77	\$11.54	\$12.50	\$25.00
<b>Age 50</b>	\$17.08	\$34.15	\$37.00	\$74.00
<b>Age 60</b>	\$36.46	\$72.92	\$79.00	\$158.00

Spouse (Based on spouse age)	Weekly		Semi-Monthly	
	\$25,000	\$50,000	\$25,000	\$50,000
<b>Age 20</b>	\$0.35	\$0.69	\$0.75	\$1.50
<b>Age 30</b>	\$0.40	\$0.81	\$0.88	\$1.75
<b>Age 40</b>	\$0.75	\$1.50	\$1.63	\$3.25
<b>Age 50</b>	\$2.13	\$4.27	\$4.63	\$9.25
<b>Age 60</b>	\$5.31	\$10.62	\$11.50	\$23.00

Child(ren)	Weekly	Semi-Monthly
	\$10,000	\$10,000
<b>15 days to Age 26</b>	\$0.28	\$0.60
<i>*Rate covers all children in the family.</i>		

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 an income replacement benefit in the event you are unable to work due to an illness or accident and become disabled. 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	
<b>Benefit Amount</b>	60% of weekly earnings
<b>Maximum Weekly Benefit</b>	\$500 (tax-free)
<b>Maximum Benefit Period</b>	13 weeks
<b>Benefits Begin</b>	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
<b>Weekly</b>	\$2.00	\$2.66	\$4.13	\$6.79
<b>Semi-Monthly</b>	\$2.00	\$2.66	\$4.13	\$6.79

### Long Term Disability

Long Term Disability Summary of Benefits	
<b>Benefit Amount</b>	60% of monthly earnings
<b>Maximum Monthly Benefit</b>	\$5,000 (tax-free)
<b>Maximum Benefit Period</b>	To age 65 or Social Security Normal Retirement Age
<b>Benefits Begin</b>	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
<b>Weekly</b>	\$1.44	\$2.40	\$4.62	\$9.81
<b>Semi-Monthly</b>	\$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	
<b>Employees</b>	From \$5,000 to \$30,000
<b>Spouses</b> ( <i>must be below age 70 to elect coverage</i> )	From \$5,000 to \$15,000
<b>Children</b>	\$1,000 \$2,500 \$5,000 \$10,000
<b>Benefit Reduction at Age 70</b>	Employee and spouse benefits reduce at age 70
<i>*Employee must have coverage in order to elect spouse and child coverage.</i>	

## Covered Diagnoses

- Cancer (*see certificate definition*)
- Carcinoma in situ (25%)
- Heart attack
- Stroke
- Major organ failure
- End state 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](http://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

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

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

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



# Accident Coverage **VOYA** FINANCIAL

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.

<b>Hospital Care</b> <ul style="list-style-type: none"> <li>Surgery – Open abdominal, thoracic</li> <li>Blood</li> <li>Admission</li> <li>Confinement per day up to 365/year</li> <li>Transportation per trip up to 3/accident</li> <li>Lodging per day up to 30 days</li> </ul>	<ul style="list-style-type: none"> <li>\$1,000</li> <li>\$500</li> <li>\$1,125</li> <li>\$350</li> <li>\$650</li> <li>\$150</li> </ul>
<b>Accident Care</b> <ul style="list-style-type: none"> <li>Initial doctor visit</li> <li>Urgent care</li> <li>Follow-up doctor treatment</li> <li>Medical equipment</li> <li>Speech &amp; physical therapy up to 6 / accident</li> <li>X-Ray</li> </ul>	<ul style="list-style-type: none"> <li>\$75</li> <li>\$200</li> <li>\$75</li> <li>\$100</li> <li>\$40</li> <li>\$40</li> </ul>
<b>Common Injuries</b> <ul style="list-style-type: none"> <li>Burns – 2nd and 3rd degree</li> <li>ER dental work</li> <li>Eye injury</li> <li>Torn knee cartilage</li> <li>Lacerations</li> <li>Tendon, ligament, rotator cuff</li> <li>Concussion</li> <li>Paraplegia</li> </ul>	<ul style="list-style-type: none"> <li>\$1,125 - \$12,500</li> <li>\$75 - \$300</li> <li>\$80-\$275</li> <li>\$175-\$650</li> <li>\$25-\$400</li> <li>\$350-\$1,000</li> <li>\$175</li> <li>\$13,500 - \$20,000</li> </ul>
<b>Dislocations</b> <ul style="list-style-type: none"> <li>Hip Joint</li> <li>Knee</li> <li>Ankle or foot bones (other than toes)</li> <li>Shoulder</li> <li>Elbow, Wrist</li> <li>Finger/Toe</li> <li>Hand bones(s) other than fingers</li> <li>Lower jaw, collarbone</li> <li>Partial dislocations</li> </ul>	Non-Surgical / Surgical <ul style="list-style-type: none"> <li>\$3,200 / \$6,400</li> <li>\$2,000 / \$4,000</li> <li>\$1,200 / \$2,400</li> <li>\$1,500 / \$3,000</li> <li>\$900 / \$1,800</li> <li>\$250 / \$ 500</li> <li>\$900 / \$1,800</li> <li>\$900 / \$1,800</li> <li>25% of the non-surgical benefit</li> </ul>
<b>Fractures</b> <ul style="list-style-type: none"> <li>Hip</li> <li>Leg</li> <li>Ankle, Hand, Wrist</li> <li>Collarbone</li> <li>Rib(s)</li> <li>Shoulder</li> </ul>	Non-Surgical / Surgical <ul style="list-style-type: none"> <li>\$2,500 / \$5,000</li> <li>\$1,800 / \$3,600</li> <li>\$1,500 / \$3,000</li> <li>\$1,200 / \$2,400</li> <li>\$350 / \$700</li> <li>\$1,500 / \$3,000</li> </ul>
<b>Sports Accident Benefit</b> Covers accidents as a result of an organized sporting activity	Pays an additional 25% of the Hospital Care, Accident Care, or Common Injuries benefit to a maximum of \$1,000

Accident Payroll Deductions Weekly	
Employee	\$1.32
Employee + Spouse	\$2.18
Employee + Child(ren)	\$2.84
Family	\$3.70

*Note: Spouses age 70 and older are not eligible to enroll. Employees are eligible regardless of age.*

Accident Payroll Deductions Semi-Monthly	
Employee	\$2.85
Employee + Spouse	\$4.73
Employee + Child(ren)	\$6.15
Family	\$8.03

*Note: Spouses age 70 and older are not eligible to enroll. Employees are eligible regardless of age.*

### How to File a Claim

- Go to [voya.com/claims](http://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



Accident insurance

## Identity Theft



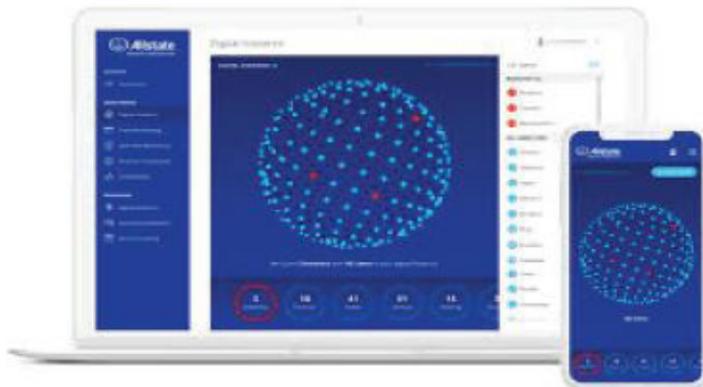
Every 2 seconds, thieves steal another identity. Your identity includes more than your Social Security Number and bank accounts. The Allstate Identity Protection Pro Plus Plan does more than monitor your credit reports and scores. It safeguards your personal information and the data you share.

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 use services, call (888) 209-7840 or visit [www.resourceadvisor.anthem.com](http://www.resourceadvisor.anthem.com). Program name: AnthemResourceAdvisor.



## 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.<sup>1</sup>

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](http://HealthCare.gov) for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

<sup>1</sup> 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 **(877) KIDS NOW** or [www.insurekidsnow.gov](http://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](http://www.askebsa.dol.gov) or by calling toll-free (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: <https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp>  
Phone: 678-564-1162 Press 1



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

#### U.S. Department of Labor

Employee Benefits Security Administration  
[www.dol.gov/agencies/ebsa](http://www.dol.gov/agencies/ebsa)  
(866) 444-EBSA (3272)

#### U.S. Department of Health and Human Services

Centers for Medicare & Medicaid Services  
[www.cms.hhs.gov](http://www.cms.hhs.gov)  
(877) 267-2323, Menu Option 4, Ext. 61565



## Carrier Contact Information

### Medical & Pharmacy

#### SimplePay Health

(800) 606-3564  
www.simplepayhealth.com  
[healthpro@simplepayhealth.com](mailto:healthpro@simplepayhealth.com)

### Telemedicine

#### Teladoc

(800) 835-2962  
www.teladoc.com

### Clinical Solutions

#### SimplePay Health

(800) 606-3564  
www.simplepayhealth.com  
[healthpro@simplepayhealth.com](mailto:healthpro@simplepayhealth.com)

### Dental

#### Anthem

(800) 627-0004  
www.anthem.com

### Vision

#### Anthem

(866) 723-0515  
www.anthem.com

### Basic Life & Voluntary Life

#### Anthem

(800) 851-8544  
www.anthem.com/employer/life-and-disability/

### Disability

#### Anthem

(800) 232-0113  
www.anthem.com/employer/life-and-disability/

### Critical Illness & Accident

#### Voya Financial

(877) 236-7564  
www.voya.com

### Identity Theft

#### Allstate Identity Protection

(800) 789-2720  
www.allstateidentityprotection.com

### Resource Advisor (EAP)

#### Anthem

(888) 209-7840  
www.ResourceAdvisor.Anthem.com



### Benefits Service Center

(770) 295-1100

### Benefits Website

[www.jimellisbenefits.com](http://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](http://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.