

NEW THIS YEAR- BILINGUAL ENROLLMENT CALL CENTER AVAILABLE

Call center dates and times:

Wednesday, September 1, 2021-Friday, September 3, 2021 and

Tuesday, September 7, 2021- Friday, September 10, 2021

10:00 am - 7:00 pm CST. Closed on the weekend and Labor Day.

See flyer for more information.

2021-2022 EMPLOYEE BENEFITS

Medical ■ Dental ■ Vision ■ Basic Life with AD&D ■ Voluntary Life
with AD&D ■ Voluntary Short & Long Term Disability
■ Voluntary Critical Illness, Accident & Hospital Confinement
Insurance ■ EAP Program



ASCENSION
PROPERTY SERVICES

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YOUR BENEFITS PROGRAM

Ascension Property Services, LLC's most important asset is our people. That's why we offer you an exceptional benefits program with many options, designed to meet your needs and the needs of your family. In this booklet you will find summaries for medical, dental, vision, voluntary short and long term disability, basic life with AD&D, voluntary life with AD&D, voluntary critical illness and voluntary accident and EAP plans.

This booklet contains important information about your benefits. Please take the time to review it and share the information with your family.

IMPORTANT STATE AND FEDERAL NOTICES

These notices along with Summary Plan Descriptions (SPD) and Summary of Benefits and Coverage (SBC) can be found in the Ease Central portal. If you are unable to access these for any reason, contact HR and they will provide a printed copy. Notices included are: HIPPA Notice of Special Enrollment Notice, Women's Health and Cancer Rights, Newborn's Act Health Disclosure, CHIPRA Notice and Medicare Part D Disclosure Notice.

CLAIM QUESTIONS OR ISSUES

McGriff Insurance Services is the advisory firm representing Ascension Property Services, LLC. We have a team of account managers to help you resolve any problems you have with your employee benefits. If you have a problem or a question about a claim:

1

Call your insurance carrier's customer service department. Phone numbers can be found on your ID cards and on page 15 of

2

If the carrier does not resolve your problem, contact Marcy Tashie at **901.684.3282** or marcy.tashie@mcgriff.com

3

If you are still not satisfied after steps 1 and 2, please contact your HR manager.

BENEFITS ELIGIBILITY

Full-time employees are eligible for benefits on the first day of the month following 60 days of full-time employment for medical, dental, vision, life, disability, critical illness, accident and voluntary life.

Spouses and dependent children of the employee are also eligible to participate in our benefit plans. Dependent children include natural children, legally adopted children, stepchildren, and children for whom the employee has been appointed guardian.

You can enroll the following dependents in our group benefit plans:

- Your legal spouse
- Children under age 26 no matter marital or student status
- Unmarried children of any age if totally disabled and claimed as a dependent on your federal income tax return (documentation of handicapped status must be provided)

Other dependents who may live with you, but are NOT eligible to be added to your benefit plans:

- Grandchildren, nieces, nephews or other children who do not meet specifications listed above
- Common law spouses or domestic partners (same or opposite sex)
- Ex-spouses, unless required via court order (documentation required)
- Parents, step-parents, grandparents, aunts, uncles, or other relatives who are not qualified legal dependents (even if they live in your house)

Enrollment is completed through the Ease Central system (pages 23-26)

MAKING CHANGES TO YOUR BENEFITS

Medical, dental and vision deductions are withheld from your paycheck on a pre-tax basis, therefore your ability to make changes to these benefits is restricted by the IRS. Once enrolled, most pre-tax benefit elections cannot be changed until the next annual Open Enrollment period, unless you have a qualifying life status change.

Open Enrollment generally occurs in September with plan changes effective from October 1st through September 30th of the following year.

To make benefit changes as a result of a Life Status Change as allowed under Section 125 of the IRS Code, you must:

- Notify Human Resources within 30 days* of the date of the qualifying event
- Provide proof of your life status event
- Log into Ease Central portal to complete enrollment/changes once Ascension Property Services, LLC Human Resources Department has approved the change



The Most Common Life Status Changes

- Marriage, divorce, legal separation
- Birth or adoption
- Change in your or your spouse's work status that affects your benefits or an eligible dependent's benefits
- Change in health coverage due to your spouse's annual Open Enrollment period
- Change in eligibility for you or a dependent for Medicaid or Medicare
- Receipt of a Qualified Medical Child Support Order or other court order

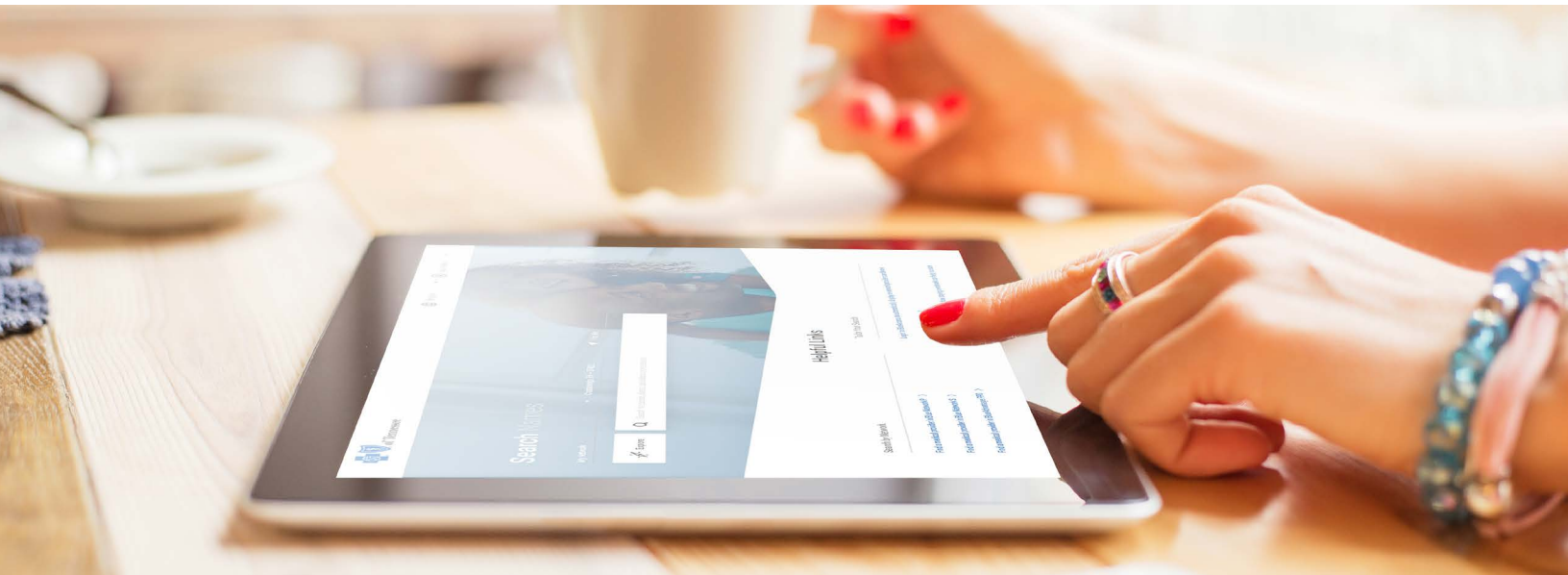
MEDICAL BENEFITS PROVIDED THROUGH BCBS OF TENNESSEE

(NATIONWIDE COVERAGE THROUGH THE BLUECARD PPO NETWORK OUTSIDE OF TN)

Ascension Property Services, LLC. provides medical group benefits with BCBST for the plan year 2021-2022. We will offer three plan options, one HDHP and two copay plans. BCBST is not just a health plan. They are also a team of health care providers — including doctors, nurses, pharmacists, and specialists — all working together to provide the right care for you and your family. It is always important to search your providers to make sure you stay in network to receive the best discounts and benefits.

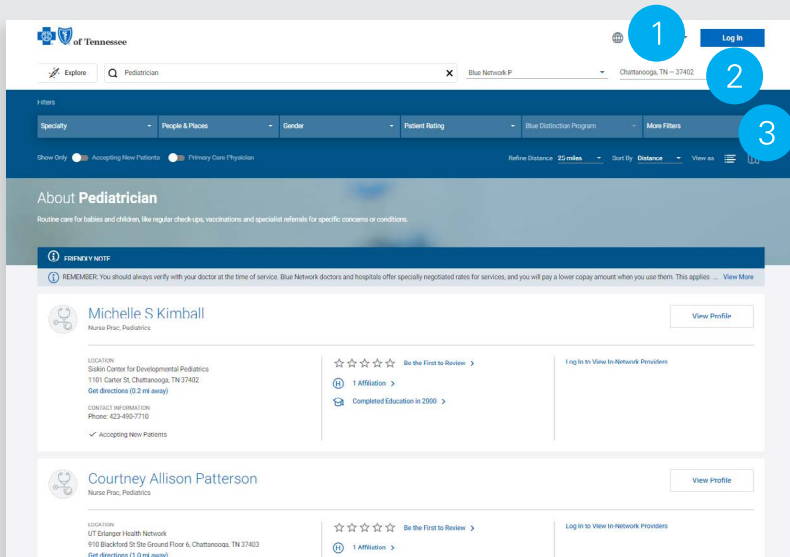
Detailed plan summaries can be found in the Ease Central portal.

MEDICAL BENEFITS (IN-NETWORK BENEFITS SHOWN)	Option 1 \$3,000 HDHP	Option 2 \$5,000	OPTION 3 \$3,000
In Network Deductibles (Individual/Family)	\$3,000 / \$6,000 HSA eligible	\$5,000 / \$10,000	\$3,000 / \$6,000
Out-of-Pocket Maximum (Individual/Family)	\$4,000 / \$8,000	\$6,600 / \$13,200	\$5,000 / \$10,000
Office Visits (coinsurance applies once deductible is met)			
<ul style="list-style-type: none"> Well Child/Adult Preventive Primary Care Physician Specialist Physician PhysicianNow Telemedicine 	100% coinsurance 50% after deductible 50% after deductible \$40 copay	100% coinsurance \$30 copay \$50 copay \$10 copay	100% coinsurance \$30 copay \$50 copay \$10 copay
Inpatient Services	50% after deductible	50% after deductible	50% after deductible
Outpatient Services	50% after deductible	50% after deductible	50% after deductible
Emergency Room Non-emergency use of Urgent Care, ER, or Ambulance is not covered	50% after deductible	50% after deductible	\$250 copay
Prescription Drug			
<ul style="list-style-type: none"> Generic Preferred (30-day limit) Brand Preferred (30-day limit) Non-Preferred (30-day limit) Specialty Drugs <ul style="list-style-type: none"> Preferred Non-Preferred 	50% after deductible BCBST list of Prev Rx covered before deductible \$10 / \$35 / \$60 as defined by plan	\$10 copay \$45 copay \$90 copay \$180 copay	\$10 copay \$45 copay \$90 copay \$180 copay
WEEKLY/BI-WEEKLY RATES			
Employee Only	\$26.86 W / \$53.71 Bi-W	\$40.10 W / \$80.19 Bi-W	\$50.83 W / \$101.67 Bi-W
Employee and Spouse	\$119.86 W / \$239.72 Bi-W	\$147.66 W / \$295.32 Bi-W	\$170.21 W / \$340.42 Bi-W
Employee and Child(ren)	\$97.03 W / \$194.07 Bi-W	\$121.26 W / \$242.52 Bi-W	\$140.91 W / \$281.82 Bi-W
Family	\$198.91 W / \$397.83 Bi-W	\$239.10 W / \$478.19 Bi-W	\$271.69 W / \$543.37 Bi-W



Finding a Doctor in Your Network Is as Easy as 1-2-3

GO TO [BCBST.COM/FINDADOCTOR](https://bcbst.com/findadoctor)



1 Log in

2 Search

3 Filter

Explore Pediatrician Blue Network P Chattanooga, TN - 37402

Specialty Height & Place Gender Patient Rating Blue Network Program More Filters

Show Only Accepting New Patients Primary Care Physician

Refine Distance 25 miles Sort By Distance View as

About Pediatrician

Routine care for babies and children, the regular check-ups, vaccinations and specialist referrals for specific concerns or conditions.

REMEMBER: You should always verify with your doctor at the time of service. Blue Network doctors and hospitals offer specially negotiated rates for services, and you will pay a lower co-pay amount when you use them. This applies to... View More

Michelle S Kimball
Nurse Practitioner, Pediatrics

LOCATION
Siskin Center for Developmental Pediatrics
1101 Carter St, Chattanooga, TN 37402
Get directions (0.2 mi away)

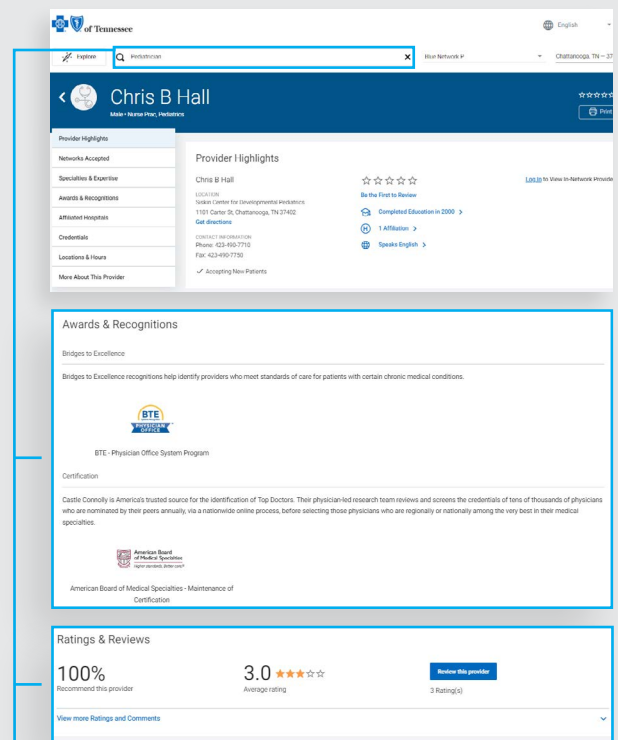
CONTACT INFORMATION
Phone: 423-493-7710
✓ Accepting New Patients

Courtney Allison Patterson
Nurse Practitioner, Pediatrics

LOCATION
UT Eastman Health Network
910 Blackford St Ste Ground Floor 6, Chattanooga, TN 37403
Get directions (1.0 mi away)

Choose network providers in three quick steps.

- 1 Log in to BlueAccessSM to include your network information when you begin your search.
- 2 Find network providers in your area by choosing your location and network.
- 3 Narrow your results by using the filter on the top of the search results page.



Explore Search Chattanooga, TN - 37402

Chris B Hall
Male • 18 years exp • Pediatrics

Provider Highlights

Networks Accepted

Specialties & Expertise

Awards & Recognitions

Attended Hospitals

Credentials

Locations & Hours

More About This Provider

Chris B Hall

LOCATION
Siskin Center for Developmental Pediatrics
1101 Carter St, Chattanooga, TN 37402
Get directions

CONTACT INFORMATION
Phone: 423-493-7710
Fax: 423-493-7730
✓ Accepting New Patients

Awards & Recognitions

Bridges to Excellence

Bridges to Excellence recognitions help identify providers who meet standards of care for patients with certain chronic medical conditions.

BTE
BTE - Physician Office System Program

Certification

Castle Connolly is America's trusted source for the identification of Top Doctors. Their physician-led research team reviews and screens the credentials of tens of thousands of physicians who are nominated by their peers annually, via a nationwide online process, before selecting those physicians who are regionally or nationally among the very best in their medical specialties.

American Board of Medical Specialties - Maintenance of Certification

Ratings & Reviews

100% Recommended this provider

3.0 Average rating

3 Rating(s)

View more Ratings and Comments

Know what you're looking for?

Use the search bar to see specifics about your doctor or facility, view quality scores, read reviews posted by other members and estimate the cost of a procedure.

PhysicianNow[®] Telehealth FAQs

Powered by
MDLIVE[®]



What is PhysicianNow?

PhysicianNow lets you talk with a doctor about non-emergency medical conditions. If you need a prescription, the PhysicianNow provider can send it to a pharmacy near you.

When is PhysicianNow available?

PhysicianNow doctors are available by phone 24/7, even on holidays. Video consultations are available from 7 a.m. to 9 p.m. ET, seven days a week.

When should I use PhysicianNow?

Use PhysicianNow when it's not an emergency, and you'd rather not go into the doctor's office. You'll typically pay less than you would for a visit to the office or urgent care clinic.

When can I start using PhysicianNow?

You can use it as soon as you create your account. Once you have an account, you can request a callback from the next available doctor or schedule a visit in advance from a list of available doctors.

What conditions can PhysicianNow doctors treat?

PhysicianNow doctors can treat a wide range of conditions. Some of the most common are:

- › Allergies, cold, fever and flu
- › Sinus or respiratory issues
- › Skin conditions (rashes or insect bites)
- › Certain pediatric conditions
- › Urinary tract infections
- › Constipation or diarrhea
- › Sore throat
- › Ear aches
- › Nausea and vomiting
- › Pink eye

Note: Children under the age of 36 months with a fever will be referred to their primary care pediatrician.

Can my family members use PhysicianNow?

Yes. Anyone your health plan covers can use PhysicianNow. You'll need to register any minor children at the same time you set up your account. And if your consultation is for a minor, they must be with you during the appointment.

Can PhysicianNow provide work or school excuses?

Yes, PhysicianNow doctors can give you a work or school excuse note at their discretion. After they do, you'll be able to find it in the Message Center in PhysicianNow, where you can print it for work or school. Accepting the note is up to each employer or school.

Where is PhysicianNow available?

PhysicianNow is available in all 50 states, with a few restrictions:

- › Arkansas and Idaho — Initial visit must be a video consultation. Later consultations may be over the phone.
- › Services aren't available outside the United States.
- › All prescriptions written by PhysicianNow doctors are subject to the laws of the state you're in at the time of your visit.

How much does PhysicianNow cost?

Setting up your account is free, but how much you pay for a consultation depends on your plan details. Check with your Human Resources department or read your Evidence of Coverage to find out more.

How can I pay for consultations?

PhysicianNow accepts most major credit and debit cards, as well as HSA, FSA and HRA cards.

Is PhysicianNow safe and private?

Yes. PhysicianNow complies with the Health Insurance Portability and Accountability Act (HIPAA). Your information will be shared with your selected doctor and pharmacy only if you give permission.

I have a question that isn't listed here. Can you help me?

You can call PhysicianNow with questions 24/7 at **1-888-283-6691**.

If you have a BlueCross-related question, call the Member Service number on the back of your Member ID card.

How do I start using PhysicianNow?

There are three ways to start using PhysicianNow. Use your Member ID card to register your account, then complete a brief medical history for you and your children (spouses and children over age 18 will need to set up their own accounts).

- › Sign up at **bcbst.com/physiciannow**. Log in and click **Talk With A Doctor Now**.
- › Sign up by phone Call **1-888-283-6691**.
- › Sign up through **myBlue TN**

Download myBlue TN from the App Store® or Google Play®.



Set up your account now so it's ready when you need it.



myBlue TNSM

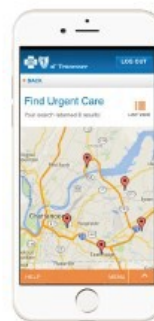
Your Blue at your fingertips

BlueCross BlueShield of Tennessee's new mobile application for iOS and Android

You're constantly on the go, so you need a convenient way to keep up with your BlueCross health plan. With myBlue TN, you can find doctors, look up claims information or access a digital version of your Member ID card.



To get started, log in to the application using the same username and password you use on the BlueAccessSM online member portal. Or just tap Register Now to quickly register. Have your Member ID card handy. Just a few taps and you'll be on your way to accessing your details.



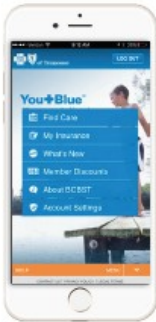
Find a doctor in your plan's network by specialty or name (enter the ID prefix from your Member ID card so the app knows which network doctors to display). Sort results or tap the Map View to see a map. Tap on a doctor to view details, call the office or save to your contacts.



Search for urgent care facilities using your current location, city or zip code. Tap on a listing to find the facility's contact information, view the listing on a map, and call or save as a contact.



Access balances, claims and health plan details and a mobile version of your Member ID card in My Insurance. You can view current balances, in-network and out-of-network deductibles, how much of your deductible you've met and how much remains on your plan.



Visit My Discounts often to see special Blue365® discounts that help you make healthy lifestyle choices with savings on a variety of health-related products and services.



Download the App
at the Apple App Store® or Google Play®.
Just search for "myBlue TN" to get started.

BlueCross BlueShield of Tennessee

1 Cameron Hill Circle, Chattanooga, TN 37402 | bcbst.com

BlueCross BlueShield of Tennessee complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

For TDD/TTY help call 1-800-848-0298.

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Android is a trademark of Google, Inc.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-565-9140 (TTY: 1-800-848-0298).

اللغوية تتوافر لك بالمجان. اتصل برقم 1-800-565-9140 (رقم هاتف الصم والبكم: 1-800-848-0298).
ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة

注意: 如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-565-9140 (TTY: 1-800-848-0298)。

WHERE TO GO GUIDE

The cost for care and time you wait can vary greatly depending on where you go. Below is a simple guide to choosing the right place to go for health care. In addition to clinical settings, you have access to PhysicianNow.

	Conditions Treated*	Your Cost & Time
Emergency Room		
For the immediate treatment of critical injuries or illness. If a situation seems life-threatening, call 911 or go to the nearest emergency room. Open 24/7.	<ul style="list-style-type: none"> Sudden numbness, weakness Uncontrolled bleeding Seizure or loss of consciousness Shortness of breath Chest pain Head injury/major trauma Blurry or loss of vision Severe cuts or burns Overdose 	<ul style="list-style-type: none"> Costs are highest No appointment needed Wait times may be long, averaging over 4 hours
Urgent Care Center		
For conditions that are not life threatening. Staffed by nurses and doctors and usually have extended hours.	<ul style="list-style-type: none"> Minor cuts, sprains, burns, rashes Fever and flu symptoms Headaches Chronic lower back pain Joint pain Minor respiratory symptoms Urinary tract infections 	<ul style="list-style-type: none"> Costs are lower than an ER visit No appointment needed Wait times vary
Doctor's Office		
The best place to receive routine or preventive care, track medications, or get a referral to see a specialist.	<ul style="list-style-type: none"> General health issues Preventive services Routine checkups Immunizations and screenings 	<ul style="list-style-type: none"> May include coinsurance and/or deductible Appointment usually needed May have little wait time
Convenience Care Clinic		
Staffed by nurse practitioners and physician assistants. Treat minor medical concerns that are not life threatening. Located in retail stores and pharmacies, they're often open nights and weekends.	<ul style="list-style-type: none"> Common cold/flu Rashes or skin conditions Sore throat, earache, sinus pain Minor cuts or burns Pregnancy testing Vaccinations 	<ul style="list-style-type: none"> Costs are same or lower than office visit No appointment needed Wait times typically 15 minutes or less
PhysicianNow		
Virtual visits with a doctor anytime 24/7/365 via computer with webcam capability or smartphone mobile app.	<ul style="list-style-type: none"> Cold and flu symptoms such as a cough, fever and headaches Allergies Sinus infections Family health questions 	<ul style="list-style-type: none"> Cost is lower than office visit No appointment needed Immediate, private, and secure visits

GREATER

LOWER

*List is not all inclusive. To find a specific health care facility or doctor, go to your medical carrier's website or call the number on your ID card. The listing of a health care professional or facility in the online directory does not guarantee that the services rendered by that professional or facility are covered under your specific medical plan. Check your official plan document for information about the services covered under your plan benefits. The information provided here is for informational purposes only. During a medical emergency, you should always visit the nearest hospital or call 911 for assistance.

DENTAL BENEFITS PROVIDED THROUGH PRINCIPAL

FINDING A PROVIDER

Principal's online directory makes it easy to find in-network dentists. Just follow these easy steps:

- 1) Go to Principal.com/dentist
- 2) Choose your state
- 3) Choose Principal Plan Dental Network
- 4) You can search by name or by zip code to find providers in your area or call 800-247-4695

Visit Your Dentist Regularly

Our plan covers preventive services at 100% in-network, with no deductible for preventive services. See summary of benefits for a list of these covered services.

DENTAL (In-Network Benefits Shown)	Base Plan	Buy Up Plan
Calendar Year Deductible	\$50 per member / up to \$150	\$50 per member / up to \$150
Out of Network Reimbursement Levels	Maximum Allowable Charge	90th Percentile
Diagnostic and Preventive Services Oral exams, routine cleanings, X-rays (bitewing), fluoride applications, sealants, space maintainers	100% no deductible	100% no deductible
Basic Restorative Services Fillings, simple oral surgery, anesthesia, endodontics, periodontics, repairs	80% after deductible	80% after deductible
Major Restorative Crowns, inlays, onlays, bridges and dentures	50% after deductible	50% after deductible
Maximum Annual Benefit (Per individual per calendar year)	\$750	\$1,500
Orthodontia (NEW THIS YEAR) (For children up to age 19)	None	\$1,500 Lifetime Maximum
WEEKLY / BI-WEEKLY RATES	Base Plan	Buy Up Plan
Employee Only	\$1.91 W / \$3.83 Bi-W	\$4.75 W / \$9.49 Bi-W
Employee and Spouse	\$6.36 W / \$12.72 Bi-W	\$12.04 W / \$24.09 Bi-W
Employee and Child(ren)	\$7.52 W / \$15.03 Bi-W	\$16.00 W / \$32.01 Bi-W
Family	\$12.63 W / \$25.27 Bi-W	\$24.79 W / \$49.59 Bi-W

VISION CARE PROVIDED THROUGH PRINCIPAL

Choosing an eye doctor is easy with Principal. Principal utilizes the VSP Network.

- 1) Go to Principal.com/vsp
- 2) Choose your city and state
- 3) Choose VSP Choice Network
- 4) You can search by name or by zip code to find providers in your area or call 800-247-4695

Did you know?

Taking care of your vision can also mean early detection for symptoms of:

- Diabetes
- Hypertension
- High cholesterol
- Tumors
- Thyroid disorders
- Neurological disorders



VISION	IN NETWORK	OUT OF NETWORK
Exam (once per frequency period)	\$10 copay	Up to \$45
Eyeglass Lenses Allowances <ul style="list-style-type: none"> ■ Single Vision ■ Bifocal ■ Trifocal ■ Lenticular 	\$25 copay	Single up to \$30 Lined Bifocal up to \$50 Lined Trifocal up to \$65 Lenticular up to \$100
Frame Retail Allowance (one set per 24 months)	Up to \$130 allowance	Up to \$70
Contact Lenses* (one set per 12 months) <ul style="list-style-type: none"> ■ Conventional ■ Disposables 	Up to \$130 Contacts are instead of frames and lenses	Up to \$105 Contacts are instead of frames and lenses
Frequency <ul style="list-style-type: none"> ■ Examination ■ Frames ■ Lenses and Contact Lenses 	Once every 12 months Once every 24 months Once every 12 months	Once every 12 months Once every 24 months Once every 12 months

*Contacts are in lieu of lenses and frames benefits. Detailed plan summary can be found in the Ease Central portal.

VISION	EMPLOYEE ONLY	EMPLOYEE + SPOUSE	EMPLOYEE + CHILD(REN)	FAMILY
Weekly/Bi-Weekly	\$0.60 W / \$1.20 Bi-W	\$1.88 W / \$3.76 Bi-W	\$1.95 W / \$3.89 Bi-W	\$3.50 W / \$7.00 Bi-W

BASIC LIFE WITH AD&D AND VOLUNTARY LIFE INSURANCE

PROVIDED THROUGH METLIFE

Basic Life with AD&D

Ascension Property Services, LLC provides all eligible employees with \$15,000 of basic employee life insurance with accidental death and dismemberment insurance at **NO COST** to you.

Voluntary Life Insurance

In addition to the insurance provided free by Ascension Property Services, LLC, you can purchase additional voluntary life coverage with AD&D for yourself, for your spouse, and for your child(ren). You must purchase employee coverage to be able to purchase coverage for your spouse and/or child(ren). Costs are based on age and can be found in the Ease Central system. If you are already enrolled, you may add \$10,000 at open enrollment up to the guarantee issue amount.

Why buy Voluntary Life coverage?

Voluntary Life provides a lump sum cash benefit to surviving dependents to cover immediate costs such as funeral expenses or ongoing living expenses. Voluntary life insurance benefits often help survivors adjust to the loss of income related to the death of a wage earner, or provide funds for college or retirement for the survivors.

******The guarantee issue amount is the highest amount of coverage you may elect without completing an evidence of insurability (EOI) form. This form will be required if you elect coverage not as a new hire or if you increase your elected amount at open enrollment. Any amounts elected that require EOI will not go into effect and payroll deductions will not will not start until the EOI has been reviewed and approved. EOI form and more detailed summaries can be found in the Ease Central system.

EMPLOYEE VOLUNTARY LIFE
\$10,000 increments with a maximum less of 5 times salary or \$500,000 Guarantee Issue: \$150,000 as a <u>new hire</u>
SPOUSE VOLUNTARY LIFE
Increments of \$5,000 to a \$250,000 maximum, not exceeding 50% of employee amount Guarantee Issue: \$25,000 when employee elects as a <u>new hire</u>
CHILD VOLUNTARY LIFE
Child Benefit: \$1,000 increments to a maximum of \$10,000



VOLUNTARY SHORT-TERM AND LONG-TERM DISABILITY

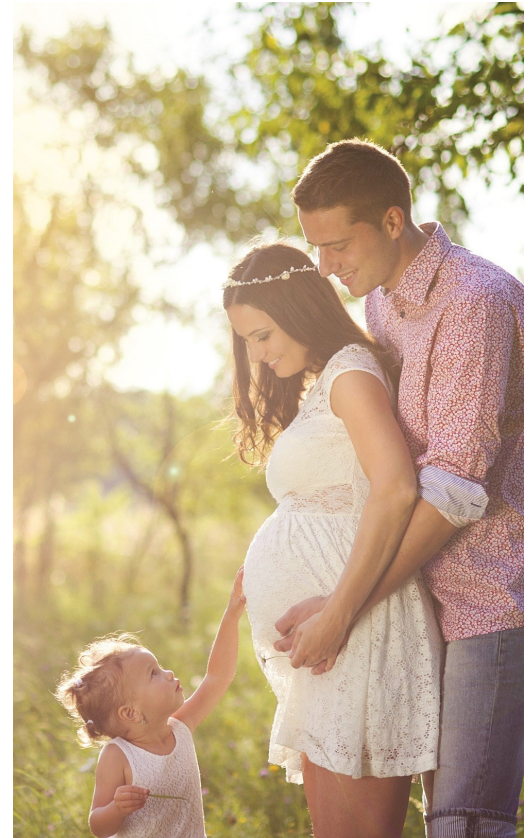
PROVIDED THROUGH METLIFE

WHY IS DISABILITY INSURANCE IMPORTANT?

One third of all Americans between the ages of 35 and 65 will become disabled for more than 90 days, according to the American Council of Life Insurers. Ascension Property Services, LLC provides the option to purchase short-term disability insurance through MetLife, which provides income continuation if you are ever unable to work due to an accident or illness.

VOLUNTARY SHORT-TERM DISABILITY

This voluntary (employee paid) coverage is an income replacement benefit that pays a weekly benefit after 14 days of injury or illness. The benefit duration is a maximum of 11 weeks and a benefit amount of 60% of weekly earnings to a maximum of \$1,000 per week. Please see the benefits summary in the enrollment system for details of this plan including the pre-existing condition limitations.



VOLUNTARY LONG-TERM DISABILITY

This voluntary (employee paid) coverage is an income replacement benefit that pays a monthly benefit of 60% of monthly earnings for all states to a maximum of \$5,000. The elimination period is 90 days. Please see benefits summary in the enrollment system for details of this plan including the pre-existing condition limitations.

YOUR COST FOR COVERAGE

The cost for disability coverage is based on your salary and/or age and will be calculated when you make your elections through the Ease Central portal.

VOLUNTARY CRITICAL ILLNESS, ACCIDENT & HOSPITAL CONFINEMENT COVERAGE

PROVIDED THROUGH RELIANCE STANDARD

VOLUNTARY CRITICAL ILLNESS INSURANCE

Ascension Property Services, LLC offers voluntary, guarantee issue, critical illness insurance that provides a fixed, lump sum benefit upon diagnosis of a critical illness which can include heart attack, stroke, paralysis and more. These benefits are paid directly to the insured and may be used for any reason, from deductible and prescriptions to transportation and child care. Employees may choose a benefit of \$5,000 to a maximum of \$30,000 in increments of \$1,000. Spouses may choose the same and dependent child(ren) may get 25% of the approved employee amount up to a maximum of \$7,500. There is a benefit waiting period of 30 days. A full list of the diagnosis amounts are available in the enrollment system and in the benefit guide. There is also an annual \$50 health screening benefit upon submission of proof of a covered health screening as outlined by the plan. See summary on the following pages and in the enrollment system for more details. No pre-existing limitations if added at open enrollment or as a new hire.



VOLUNTARY ACCIDENT INSURANCE

Ascension Property Services, LLC offers voluntary accident insurance for you and your family if you choose. The accident coverage provides a range of fixed, lump sum benefits for injuries resulting from a covered accident, or for accidental death and dismemberment. These benefits are paid directly to the insured and may be used for any reason, from deductibles and prescriptions to transportation and child care. There is an age reduction at age 70 and some exclusions apply. A full schedule of benefits and exclusions are available on the following pages and in the enrollment system. No pre-existing limitations if added during open enrollment or as a new hire.

NEW THIS YEAR VOLUNTARY HOSPITAL CONFINEMENT INSURANCE

Ascension Property Services, LLC offers voluntary hospital indemnity insurance that provides a range of fixed, lump-sum daily benefits to help cover costs associated with a hospital admission, including room and board costs. These benefits are paid directly to the insured following a hospitalization that meets the criteria for benefit payment. Employee must be covered in order for a spouse or child (up to age 26) to be covered. Nursery admission confinement benefit included for newborns' hospital stays. This benefit is guarantee issue meaning there are no medical questions asked and there are no pre-existing exclusions. There is a wellness benefit available each year for each covered member. With proof of preventive exams and procedures. See summary for more details of costs and benefits. No pre-existing limitations if added at open enrollment or as a new hire.

Plan Highlights

Voluntary Group Accident Insurance



Ascension Property Services, LLC

COVERAGE

Voluntary accident insurance provides a range of fixed, lump-sum benefits for injuries resulting from a covered accident, or for accidental death and dismemberment (if included). These benefits are paid directly to the insured and may be used for any reason, from deductibles and prescriptions to transportation and childcare.

ELIGIBILITY

Employees: All eligible employees.

Dependents: You must be insured in order for Dependents to be covered.

Dependents are:

- ▶ Your legal spouse or your domestic partner. Spouse must be under age 70 at date of application.
- ▶ Your dependent children* from birth to 26 years.
*An eligible employee's child(ren) from birth to 26 years, including natural children, legally adopted children, children who are dependent on the eligible employee during the waiting period before adoption, stepchildren, and foster children. Foster children must be in the custody of the eligible employee to be considered a Dependent; and an eligible employee's child(ren) beyond the limiting age who is incapable of self-sustaining employment by reason of intellectual disability or physical handicap and who is chiefly dependent on the eligible employee for support and maintenance.

A person may not have coverage as both an Employee and Dependent.

BENEFIT AMOUNT

See Full Schedule of Benefits on next page

CONTRIBUTION REQUIREMENTS

Coverage is 100% employee paid.

Weekly and Bi- Weekly Costs

Coverage	Weekly / Bi- Weekly
Employee	\$3.69 W / \$1.70 Bi- W
Employee and Spouse	\$5.08 W / \$2.34 Bi- W
Employee & Children	\$5.54 W / \$2.56 Bi- W
Employee & Family	\$7.38 W / \$3.41 Bi- W

FEATURES

- ▶ Portability to Employee Age 70
- ▶ FMLA/MSLA Continuation
- ▶ Newlywed and Newborn Provision
- ▶ 24-Hour Travel Assistance Services
- ▶ 24-Hour Coverage

EXCLUSIONS

Benefits will not be paid for any loss caused by: suicide; war; air travel (except as a passenger on commercial flights); assault/felony; acute or chronic intoxication; voluntary consumption of illegal or controlled substance or prescribed narcotic or drug.

For a comprehensive list of exclusions and limitations, please refer to the Certificate of Insurance. The Certificate also provides all requirements necessary to be eligible for benefits.

This Plan Highlights is a brief description of the key features of the RSL insurance plan. The availability of the benefits and features described may vary by state. It is not a certificate of insurance or evidence of coverage. Insurance is provided under group policy form LRS-9547-0318, et al.

Benefits	Amount
Ambulance	\$200 Ground, \$1,000 Air
Blood, Plasma and Platelets	\$200
Burns	To \$1,600 for 2nd degree burns; To \$12,800 for 3rd degree burns; Skin Graft - 25% of benefit payable for Burns
Chiropractic Services (per Visit)	\$25 per session, 6 sessions maximum
Coma	\$10,000
Concussion	\$250
Dental Injury	\$150 for Crown; \$50 for Extraction
Diagnostic Exams	\$100 per CT/MRI scan
Dislocation	To \$3,200 for Non-surgical; To \$6,400 for Surgical; Partial - 25% of full dislocation; Multiple - 100% of highest dislocation benefit
Emergency Treatment	\$150
Epidural Anesthesia Injection (per Injection)	\$100, 2 maximum
Eye Injury	\$100 for removal of foreign object, \$200 for surgical repair
Fractures	To \$3,750 for Non-surgical; To \$7,500 for Surgical repair; Chip fracture: 25% of non-surgical benefit; Multiple fractures: 100% of highest sustained fracture
Initial Hospital Admission	\$1,000
Initial Intensive Care Unit (ICU) Hospital Admission	\$2,000
Hospital Confinement (per Day)	\$200, 365 days maximum
Intensive Care Unit (ICU) Confinement (per Day)	\$400, 30 days maximum
Lacerations	To \$400
Lodging (per Day)	\$100 per day up to 30 days if more than 100 miles from residence
Medical Appliances	\$100
Organized Youth Sports Benefit	5% of the benefit amount
Paralysis	\$10,000 quadriplegia; \$5,000 paraplegia/hemiplegia
Physical Therapy (per Session)	\$25, 6 sessions maximum
Physician Visit	\$50 Initial, \$50 Follow-up
Prosthesis	\$500 for one, \$1,000 for two or more
Rehabilitation Facility Confinement (per Day)	\$50, 30 days maximum
Surgery	\$100 for Exploratory; \$300 for Knee Cartilage; \$1,000 for Abdominal or Thoracic; \$500 for Ruptured Disc; to \$600 Tendon, Ligament, or Rotator cuff
Transportation	\$300, if more than 100 miles from residence
X-Rays	\$25
Accidental Death Benefits	Amount
Employee AD&D	\$25,000
Spouse AD&D	\$12,500
Child AD&D	\$5,000
Common Carrier	100%
Accidental Dismemberment Benefits	% of AD Benefit Amount
Single Loss	50%
Multiple Loss (Catastrophic)	100%
Thumb / Finger / Toe	1%
2+ Thumb / Finger / Toe	3%
Speech	100%
Wellness (Health Screening) Benefit	Amount
Wellness (Health Screening)	\$50

Plan Highlights

Voluntary Group Critical Illness Insurance



Ascension Property Services, LLC

COVERAGE

Voluntary critical illness insurance provides a fixed, lump-sum benefit upon diagnosis of a critical illness, which can include heart attack, stroke, paralysis and more. These benefits are paid directly to the insured and may be used for any reason, from deductibles and prescriptions to transportation and child care.

ELIGIBILITY

Employees: All eligible employees.

Dependents: You must be insured in order for Dependents to be covered.

Dependents are:

- ▶ Your legal spouse or your domestic partner. Spouse must be under age 70 at date of application. Coverage terminates at age 75.
- ▶ Your dependent children* from birth to 26 years.
*An eligible employee's child(ren) from birth to 26 years, including natural children, legally adopted children, children who are dependent on the eligible employee during the waiting period before adoption, stepchildren, and foster children. Foster children must be in the custody of the eligible employee to be considered a Dependent; and an eligible employee's child(ren) beyond the limiting age who is incapable of self-sustaining employment by reason of intellectual disability or physical handicap and who is chiefly dependent on the eligible employee for support and maintenance.

A person may not have coverage as both an Employee and Dependent.

BENEFIT AMOUNT

Employee: Choose from a benefit of \$5,000 to a maximum of \$30,000 in \$1,000 increments.

Spouse: Choose from a benefit of \$5,000 to a maximum of \$30,000 in \$1,000 increments, not to exceed 100% of approved employee amount.

Dependent child(ren): 25% of approved employee amount up to a maximum of \$7,500.

GUARANTEED ISSUE

Employee: \$30,000

Spouse: \$30,000

Child: all child amounts are guaranteed issue

BENEFIT REDUCTION DUE TO AGE

Age	Original Benefit Reduced to
70	50%

CONTRIBUTION REQUIREMENTS

Coverage is 100% employee paid.

Please see the attached rate table for your age specific premium.

RELIANCE STANDARD

A MEMBER OF THE TOKIO MARINE GROUP

www.reliancestandard.com

Reliance Standard Life Insurance Company is licensed in all states (except New York), the District of Columbia, Puerto Rico, the U.S. Virgin Islands and Guam. In New York, insurance products and services are provided through First Reliance Standard Life Insurance Company, Home Office: New York, NY. Product features and availability may vary by state.

FEATURES

DIAGNOSIS ADULT	BENEFIT
Alzheimer's Disease	100%
Benign Brain Tumor	100%
Carcinoma In Situ	25%
Coma	100%
Coronary Disease	25%
Heart Attack	100%
Life Threatening Cancer	100%
Loss of Hearing	100%
Loss of Sight	100%
Loss of Speech	100%
Major Organ Failure	100%
Motor Neuron Disease (ALS)	100%
Multiple Sclerosis	100%
Paralysis	100%
Parkinson's Disease	100%
Ruptured Cerebral, Carotid or Aortic Aneurysm	100%
Severe Brain Damage	100%
Skin Cancer	5%
Stroke	100%
DIAGNOSIS CHILD	BENEFIT
Cerebral Palsy	100%
Cleft Lip or Palate	100%
Cystic Fibrosis	100%
Downs' Syndrome	100%
Muscular Dystrophy	100%
Spina Bifida	100%
Type 1 Diabetes	100%

- ▶ Lifetime Maximum Benefit – 1000% of Insurance Amount
- ▶ Subsequent Occurrence Benefit – 100% of benefit if diagnosed 1 months or later
- ▶ Recurrence Benefit (Same Illness) – 50% of benefit if diagnosed 18 months or later
- ▶ FMLA / MSLA Continuation
- ▶ Portability to employee age 70
- ▶ **Wellness (Health Screening) Benefit – \$50**

Benefit Waiting Period = 30 days

Exclusions

A benefit will not be paid if the Critical Illness is caused by or contributed to by one of the following: an act of war, declared or undeclared; intentionally self-inflicted Injury; commission or attempted commission of a felony; the use of alcohol or drugs unless taken as prescribed by a Physician; a Sickness or Injury that occurs while confined in a penal or correctional institution; cosmetic or elective surgery that is not medically necessary; committing or attempting to commit suicide while sane or insane; participation in a riot or insurrection; for a Critical Illness Diagnosed outside of the US unless confirmed within the US; for a Critical Illness which is Diagnosed during the Benefit Waiting Period; for a Critical Illness that follows a different Critical Illness Diagnosis for which a benefit has been paid, within a shorter time period than reflected under Features. (Subsequent Occurrence); and for the same Critical Illness for which a benefit has been paid, if it is Diagnosed within a shorter time period than reflected under Features. (Recurrence).

For a comprehensive list of exclusions and limitations, please refer to the Certificate of Insurance, which also provides all requirements necessary to be eligible for benefits.

This Plan Highlights is a brief description of the key features of the RSL insurance plan. The availability of the benefits and features described may vary by state.

It is not a certificate of insurance or evidence of coverage. Insurance is provided under group policy form LRS-9537-0118, et al.

Plan Highlights

Voluntary Hospital Indemnity Insurance



Ascension Property Services, LLC

COVERAGE

Voluntary hospital indemnity insurance provides a range of fixed, lump-sum daily benefits to help cover costs associated with a hospital admission, including room and board costs. These benefits are paid directly to the insured following a hospitalization that meets the criteria for benefit payment.

ELIGIBILITY

Employees: All eligible employees

Dependents: You must be insured in order for Dependents to be covered.

Dependents are:

- the Insured's lawful spouse or domestic partner; and
- the Insured's children from birth to 26 years, including natural children, legally adopted children, children who are dependent on the eligible employee during the waiting period before adoption, stepchildren, and foster children. Foster children must be in the custody of the eligible employee to be considered a Dependent; and an eligible employee's child(ren) beyond the limiting age who is incapable of self-sustaining employment by reason of intellectual disability or physical handicap and who is chiefly dependent on the eligible employee for support and maintenance.
- A person may not have coverage as both an Employee and Dependent.

FEATURES

- Guaranteed issue; no medical questions
- No pre-existing conditions exclusions
- Mental & Nervous and Substance Abuse treated same as any other hospital admission
- No deductibles
- Eligible for continuation of coverage
- HIPAA privacy compliant
- Overlying Major Medical Plan NOT Required*
- Coverage Offered on a Voluntary Basis

*Overlying major medical plan is required for all California residents.

CONTRIBUTION REQUIREMENTS

Coverage is 100% employee paid.

BENEFITS

Hospital Room & Board Benefits

Room & Board Benefit per Day (365 Daily Benefits per Coverage Year)*	\$100
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Hospital Critical Care Unit Benefits (Paid in addition to Room & Board Benefit)

Critical Care Unit Benefits per Day (30 Daily Benefits per Coverage Year)	\$200
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Hospital Admission Benefit

One Daily Benefit per Coverage Year	\$1,000
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Nursery Admission Benefit

One Daily Benefit per Coverage Year	\$500
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Nursery Admission Confinement Benefit

10 Daily Benefit per Coverage Year	\$100
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Wellness Care**

One Daily Benefit per Coverage Year	\$50
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Non-Insurance Services

On-Call Travel Assistance	Included
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**In no event will the Daily Benefits exceed 365 daily benefits per Coverage Year.*

***Wellness Care means medical examinations and procedures that are preventive in nature and not for the treatment of Injury or Sickness.*

WEEKLY AND BI-WEEKLY COSTS

Employee Only \$4.82 W / \$9.63 Bi- W

Employee + Spouse \$11.24 W / \$22.48 Bi-W

Employee + Children \$7.18 W / \$14.35 Bi- W

Employee + Family \$13.34 W / \$26.67 Bi- W

EXCLUSIONS

Benefits will not be paid for any loss caused by: suicide; war; assault/felony; dental care except hospitalizations for the care of sound, natural teeth and gums required on account of accidental injury that happens while covered, and that occur within 6 months of the accident; hospitalizations that occur while outside the United States of America; or care or treatment rendered in connection with cosmetic surgery, except hospitalizations for cosmetic surgery needed for breast reconstruction following a mastectomy or for an accident that happens while covered. The cosmetic surgery needed for an accidental injury must be performed within 90 days of the accident. For a comprehensive list of exclusions and limitations, please refer to the Certificate of Insurance. The Certificate also provides all requirements necessary to be eligible for benefits. This Plan Highlights is a brief description of the key features of the RSL insurance plan. The availability of the benefits and features described may vary by state. It is not a certificate of insurance or evidence of coverage.

HEALTH SAVINGS ACCOUNT

THROUGH HEALTH EQUITY

A health savings account is a powerful tool that helps individuals save on healthcare expenses now and in the future. An HSA paired with a high deductible health plan (HDHP) provides members with tax savings. Contributions are tax-deductible, grow within the account tax free, and when funds are used to pay for qualified medical expenses, the distribution of both principal and interest is tax-free. Money put in an HSA is yours and never expires. If you would like to open an individual HSA, you can contact HealthEquity at 866-335-7487 or sign up online at www.healthequity.com and click on “sign up for a HealthEquity HSA”

****Please note****- You must be enrolled in a high deductible health plan (HDHP) and have no other health coverage or a flexible spending account (FSA).



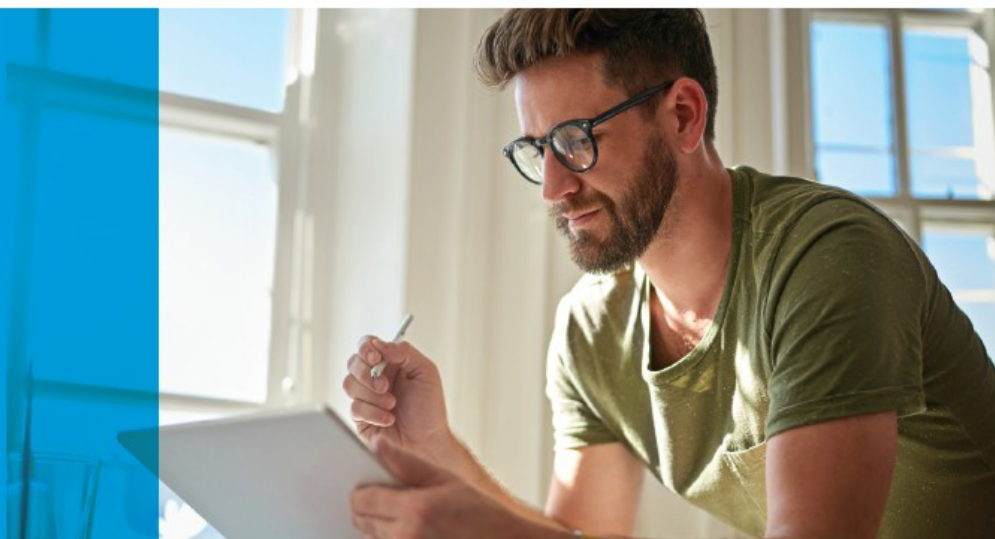
WHAT ARE THE ADVANTAGES OF PARTICIPATING IN AN HSA?

- ▶ Pre-tax savings – never pay federal government taxes on your HSA funds as long as you spend the money on eligible IRS 213(d) health care expenses (medical, dental, vision).
- ▶ Unused funds carry over from year to year and can build over time.
- ▶ You have complete control over how and when funds are used.
- ▶ Balances over a certain amount may have paid, similar to a 401(k).
- ▶ HSAs are portable; if you leave Ascension Property Services, LLC you can take the account and all funds in it with you.

Professional support and guidance for everyday life

Life doesn't always go as planned. And while you can't always avoid the twists and turns, you can get help to keep moving forward.

We can help you and your family, those living at home, get professional support and guidance to make life a little easier. Our Employee Assistance Program (EAP) is available to you in addition to the benefits provided with your MetLife insurance coverage. This program provides you with easy-to-use services to help with the everyday challenges of life — at no additional cost to you.



Help is always at your fingertips.

Our mobile app makes it easy for you to access and personalize educational content important to you.

Search “LifeWorks” on iTunes App Store or Google Play. Log in with the user name: **metlifeeap** and password: **eap**

Expert advice for work, life, and your well-being

The program's experienced counselors provided through LifeWorks — one of the nation's premier providers of Employee Assistance Program services — can talk to you about anything going on in your life, including:

- **Family:** Going through a divorce, caring for an elderly family member, returning to work after having a baby
- **Work:** Job relocation, building relationships with co-workers and managers, navigating through reorganization
- **Money:** Budgeting, financial guidance, retirement planning, buying or selling a home, tax issues
- **Legal Services:** Issues relating to civil, personal and family law, financial matters, real estate and estate planning
- **Identity Theft Recovery:** ID theft prevention tips and help from a financial counselor if you are victimized
- **Health:** Coping with anxiety or depression, getting the proper amount of sleep, how to kick a bad habit like smoking
- **Everyday Life:** Moving and adjusting to a new community, grieving over the loss of a loved one, military family matters, training a new pet

Convenient and confidential help when you want it, how you want it

Your program includes up to 5 phone or video consultations with licensed counselors for you and your eligible household members, per issue, per calendar year. You can call **1-888-319-7819** to speak with a counselor or schedule an appointment, 24/7/365.

When you call, just select “Employee Assistance Program” when prompted. You'll immediately be connected to a counselor.

If you're simply looking for information, the program offers easy to use educational tools and resources, online and through a mobile app. There is a chat feature so you can talk with a consultant to guide you to the information you are looking for or help you schedule an appointment with a counselor.

Log on to metlifeeap.lifeworks.com, user name: **metlifeeap** and password: **eap**



Navigating life together

Answers to important questions

Are Employee Assistance Program services confidential?

Yes. Any personal information provided to LifeWorks stays completely confidential.*

How do I get help?

Getting professional help is just a phone call away. Simply call 1-888-319-7819 to speak with a counselor or to schedule a phone or video conference appointment. These services are available 24 hours a day, 7 days a week.

When is the right time to call?

That's up to you. Counselors are here whenever you need them —whether you simply need to talk or want guidance on something you are going through.

Is my Employee Assistance Program included with my MetLife coverage?

Yes. There is no cost to you because your employer pays for the services provided within our program. While we offer a broad range of services, there may be some assistance that's not included. You can still work with counselors for these services by arranging to pay for them directly.

Does the program have any limitations?

While we offer a broad range of services, we may not cover all services you may need. Your Employee Assistance Program does not provide:

- Inpatient or outpatient treatment for any medically treated illness
- Prescription drugs
- Treatment or services for intellectual disability or autism
- Counseling services beyond the number of sessions covered or requiring longer term intervention
- Services by counselors who are not LifeWorks providers
- Counseling required by law or a court, or paid for by Workers' Compensation

When you need some support,
we're here to help.



Phone

1-888-319-7819



Web

metlfeeap.lifeworks.com

user name: **metlfeeap**
and password: **eap**



Mobile App

user name: **metlfeeap**
and password: **eap**

*MetLife and LifeWorks abide by federal and state regulations regarding duty to warn of harm to self or others. In these instances, the consultant may have a duty to intervene and report a situation to the appropriate authority.

Some restrictions may apply to all of the above-mentioned services. Please contact your employer or MetLife for details.



Metropolitan Life Insurance Company | 200 Park Avenue | New York, NY 10166

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BENEFITS RESOURCES

	PHONE	WEB/EMAIL
Medical - BCBS of TN	1-800-565-9140	www.bcbst.com
Telemedicine - Physician Now	1-888-283-6691	www.bcbst.com/member
Dental - Principal	1-800-832-4450	www.principal.com
Vision - Principal	1-800-877-7195	www.vsp.com
Basic Life Insurance with AD&D - MetLife	1-800-275-4638	www.metlife.com/mybenefits
Voluntary Life Insurance with AD&D - MetLife	1-800-275-4638	www.metlife.com/mybenefits
Voluntary Long and Short Term Disability - MetLife	1-800-275-4638	www.metlife.com/mybenefits
Voluntary Critical Illness, Accident Hospital Confinement - Reliance Standard	1-866-369-9960	www.reliancestandard.com
EAP (Employee Assistance Program) - MetLife	1-888-319-7819	www.metlifeeap.lifeworks.com User name: metlifeapp Password: eap
Broker Assistance - Marcy Tashie - McGriff Insurance Services	901.684.3282	marcy.tashie@mcgriff.com

TERMS TO KNOW

Deductible - Amount an employee pays out of pocket prior to the insurance company paying a percentage of the provider charges.

Coinsurance - The amount of payment split between the employee and the insurance company. Example: Insurance company pays 80% and employee pays 20% of the charges after the deductible is met.

Out of Pocket Maximum - The maximum an employee is responsible for paying out of pocket in any one calendar year prior to the insurance company paying the entire eligible amount for the remaining of the calendar year.

Network Providers - Doctors, Hospitals and other healthcare providers who have an agreement/contract with insurance companies agreeing to charge a discounted amount for services they render.

Pre-Authorization - Certain procedures or hospitalizations may require that the provider receive authorization. The provider is typically the one to go through this process with the insurance company and obtain pre-authorization.

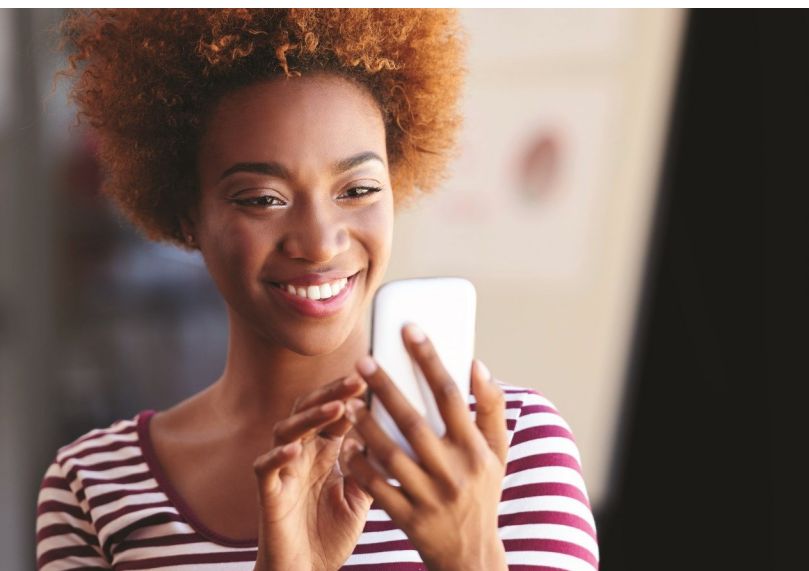
Pre-Determination - If you are having a major procedure done, your doctor or dentist can submit a pre-determination to the insurance company so you can know in advance of treatment how much of the bill you will be responsible for.

Explanation of Benefits (EOB) - The EOB is mailed to the employee after a claim is received and processed by the insurance company. The EOB will describe how the claim was processed and outline what portion of the charges are applied to the deductible, what portion the employee is responsible for, and explain if there is a denial or error processing the claim.

Appeal - If your health insurance company doesn't pay for a specific health care provider or service, you have the right to appeal the decision and have it reviewed by an independent third party.

Guaranteed Issue - The maximum amount of voluntary life insurance you can choose when making your initial election that does not require the answering of medical questions.

Evidence of Insurability (EOI) - The form containing medical questions that are required to be answered if you decide to elect voluntary life insurance after you have previously declined coverage, or if you decide to increase your current coverage. This may also be needed if you decide to add disability coverage after you have previously declined.



INSURANCE COMPANY WEBSITES AND APPS

Registering on your insurance company websites and downloading the smart phone apps gives you instant access to valuable resources. In most cases you can access:

- Specific plan details
- ID cards
- In-network provider search
- Your claims history
- And other tools and resources



FREQUENTLY
ASKED
QUESTIONS

How do I login?

When you receive the email from your HR Administrator or Broker, click the blue “Sign Up” button. If it is your first time logging in, you will need to choose a password. Be sure your password is at least 8 characters with one upper case letter, one lower case letter and one special character or number.



Welcome to Ease

Welcome Jane,

Your Manager just added you to Ease.

Ease helps you manage your benefits and other important HR activities.

Please sign in to complete your profile.

Important: This email is intended only for Jane Test and should not be forwarded to anyone else.

[Sign Up](#)

Welcome, Jane Test.

You have been invited to Ease. Please choose a password and click 'Sign Up' to continue.

Password *
Password

Confirm *
Confirm

☐ I agree to the [Terms of Service](#)

Your password must contain a minimum of 8 characters, with at least 1 lowercase, 1 uppercase, and 1 numeric or special character.

[Sign Up](#)

[Sign In](#)

How do I Enroll?

When you get to the benefits section you will have the choice to either waive or accept coverage.

To accept coverage, set yourself to Enrolled. If you are waiving, set yourself to Waived. If you are waiving you must enter a waive reason.



Jane Test - Employee ✓ Enrolled

Enrolled ▼

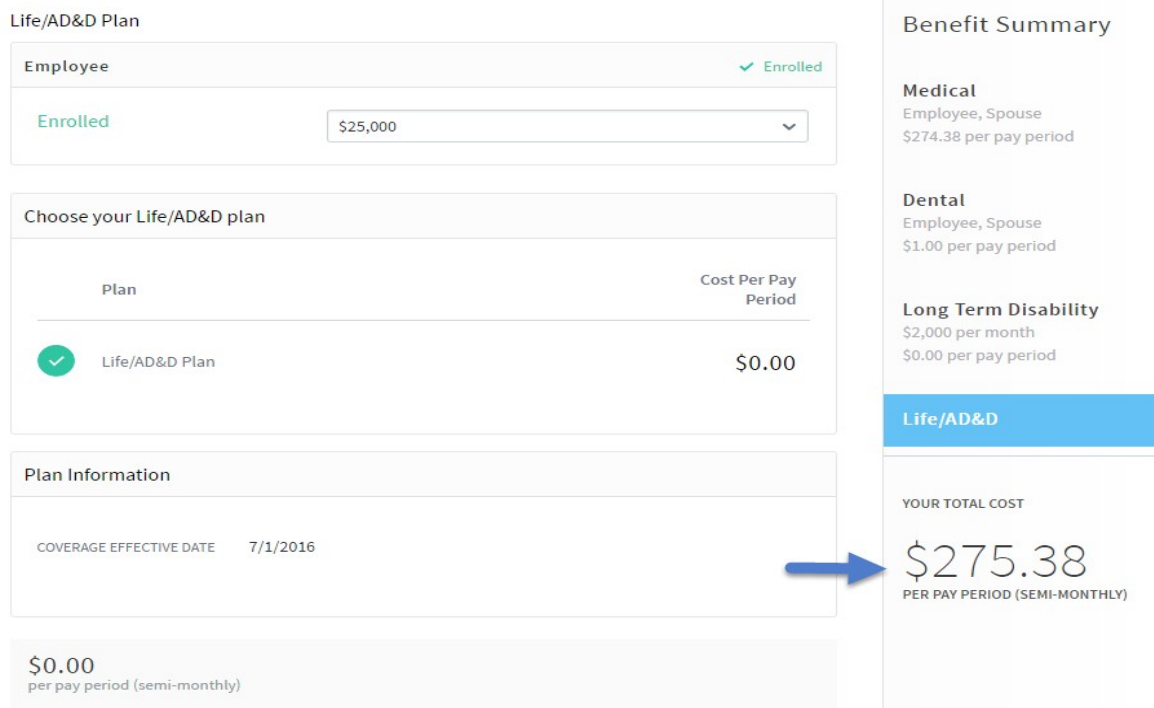
Enrolled ✓

Waived

Spouse ✓ Enrolled

You will continue to accept or waive your benefits by selecting Next to go to the next coverage.

You will be able to see a running cost on the far right-hand side.



Life/AD&D Plan

Employee ✓ Enrolled

Enrolled \$25,000 ▼

Choose your Life/AD&D plan

Plan	Cost Per Pay Period
✓ Life/AD&D Plan	\$0.00

Plan Information

COVERAGE EFFECTIVE DATE 7/1/2016

\$0.00 per pay period (semi-monthly)

Benefit Summary

Medical
Employee, Spouse
\$274.38 per pay period

Dental
Employee, Spouse
\$1.00 per pay period

Long Term Disability
\$2,000 per month
\$0.00 per pay period

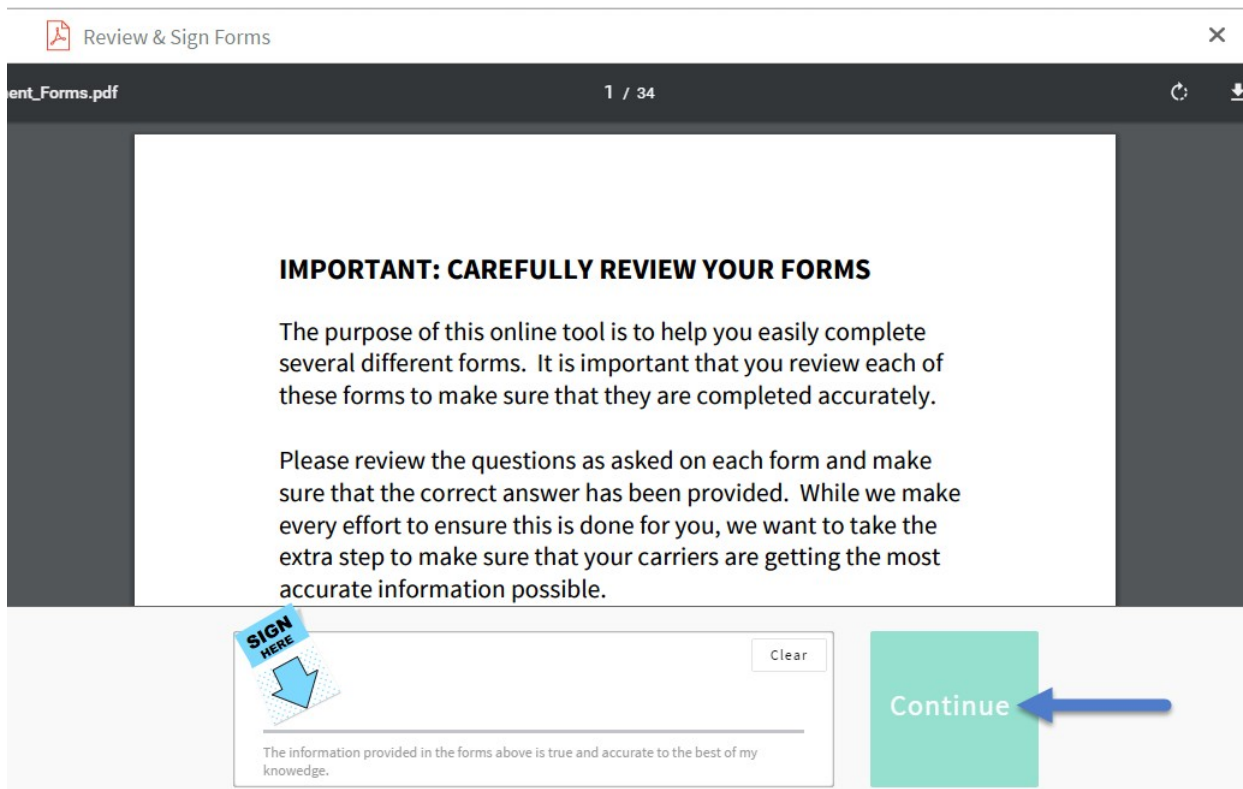
Life/AD&D

YOUR TOTAL COST

\$275.38
PER PAY PERIOD (SEMI-MONTHLY)

How do I sign the forms?

After making all elections and provided any missing information, you will be prompted to sign your forms. Please review the forms as directed and then sign in the signature box with your mouse, or finger if using a tablet or phone. This signature will be applied to all forms. Click the Continue button once you have signed.



Review & Sign Forms

ent_Forms.pdf 1 / 34

IMPORTANT: CAREFULLY REVIEW YOUR FORMS

The purpose of this online tool is to help you easily complete several different forms. It is important that you review each of these forms to make sure that they are completed accurately.

Please review the questions as asked on each form and make sure that the correct answer has been provided. While we make every effort to ensure this is done for you, we want to take the extra step to make sure that your carriers are getting the most accurate information possible.

SIGN HERE

Clear

Continue

The information provided in the forms above is true and accurate to the best of my knowledge.

How do I delete dependents?

Only your broker will have access to delete dependent information if the dependent was enrolled in a benefit. Please contact your HR administrator.

How do I complete an Evidence of Insurability (EOI) form?

If you go over your guarantee issue amount you will be asked to fill out an Evidence of Insurability form. Your broker usually will add that form to the documents section so you can fill it out and return to your HR Administrator. If no form is attached and you are prompted to complete an Evidence of Insurability form or Health Statement please contact HR.

Where do I see my Summary of Benefits?

After you sign your forms you will be brought to your summary of benefits. You can access this page at any time of the year by logging in and selecting Manage Benefits.

Hello, Jane!

You've finished enrollment. If you need to update your choices click below.

[Begin Enrollment](#)



Benefit Statement



Document Library



Manage Benefits



View Profile

NOTES

2021-2022
EMPLOYEE
BENEFITS



ASCENSION
PROPERTY SERVICES