

# DISABILITY INCOME PROTECTION

## Covered Earnings

Covered Earnings, as used in the Schedule of Benefits, means the Insured's monthly salary as reported by the Employer on the day just before the date of disability. Earnings does not include commissions, overtime pay, bonuses, or any other special compensation not received as basic salary. Covered Earnings are determined initially on the date an Employee applies for coverage. A change in the amount of Covered Earnings is effective on the date of change, provided the Insured is actively at work on the effective date of the change. If the Insured is not actively at work on that date, the effective date of the change will be deferred until the date the Insured returns to active work.

## How do I file a claim?

- Call Matrix Absence Management at the toll-free hotline as soon as possible 1-877-202-0055 (24/7 for telephonic claims filing)
- You may also file your claim online, 24 hours a day, seven days a week at: [matrixabsence.com](https://matrixabsence.com)
- Short-Term Disability or FMLA claims may be filed by using the mobile app. Search for "Matrix eServices" in your smartphone or tablet's app store.
- All filing options are available 24/7/365.

## For Housestaff Members:

### Group Long-Term Disability

Jackson Health System provides eligible Housestaff Residents and Fellows with Group Long-Term Disability Income Protection while they are employed by JHS. The amount of coverage is 60% of salary to a maximum of \$3,500. Long-Term Disability benefits start after you are disabled for the 90-day elimination period. Benefits continue for each period of total disability until Social Security Normal Retirement Age (SSNRA).

You are considered disabled if as a result of illness or injury you are unable to perform the material duties of your regular occupation. If you return to work and are earning less than your pre-disability earnings, a proportionate benefit may be payable.

### Optional Long-Term Disability Income Protection

Additional Disability Income Insurance, called Optional Long-Term Disability Income Protection is available. You are guaranteed coverage if you decide to enroll and you can keep the coverage at the same discounted rate when you leave Jackson Health System.

Long-Term Disability benefits are available up to \$3,500 per month. The benefits start after you have been disabled for the 90-day elimination period and are tax free. The plan covers you in your Own Specialty. The level premiums will be determined by your age and specialty at enrollment time.

For more information on your policy or if you wish to enroll in the optional disability, please contact The Lawrence D. Share Company at 305-577-3937 or email [jmhinfo@ldshare.com](mailto:jmhinfo@ldshare.com)

# DISABILITY INCOME PROTECTION

## Voluntary Short-Term Disability

|  |  |
|--|--|
| Weekly Benefit Amount                  | 60% of earnings to a maximum of:<br>Option 1: \$425<br>Option 2: \$700   |
| Elimination Period                     | Greater of 14 consecutive days<br>Accident and Sickness or expiration of<br>extended illness or accumulated sick<br>leave. |
| Benefit Duration                       | Maximum of 24 weeks  |
| Pre-Existing Limitation clause applies |  |

## Employer-Paid Short-Term Disability

|  |  |
|--|--|
| Eligible Company Numbers                                 | Plan   |
| Employees under Company Numbers: 110, 210, 220, 310, 320 | Elimination Period: Greater of: 6 working days (8 calendar days) or expiration of extended illness or accumulated sick leave<br>Benefit Duration: Maximum of:<br>-110, 210, 220: 12 weeks<br>- 310, 320: 25 weeks<br>Pre-Existing Limitation: None |

## Employer-Paid Short Term Disability with Employee-Paid Buy-up Option

|   |  |
|---|--|
| Eligible Company Numbers  | Plan   |
| Employees under Company Numbers: 200 & 300 – <b>Base Plan (Employer-Paid)</b> | Benefit: 60% of weekly earnings to a maximum of \$1,000<br>Elimination Period: Greater of: 6 working days (8 calendar days) or expiration of extended illness or accumulated sick leave<br>Benefit Duration: Maximum of:<br>-200: 12 weeks<br>- 300: 25 weeks<br>Pre-Existing Limitation: None |
| Employees under Company Numbers: 200 & 300 – <b>Base Plan (Employer-Paid)</b> | Benefit: 70% of weekly earnings to a maximum of \$1,500  |

## Voluntary Long-Term Disability

|                             |  |
|-----------------------------|--|
| Monthly Benefit Amount      | 60% of earnings to a maximum of:<br>Option 1: \$2,500<br>Option 2: \$6,000 |
| Elimination Period          | 180 Days   |
| Benefit Duration            | SSNRA or ADEA – B Age  |
| Pre-Existing Limitation     | 3/12   |
| Workplace Modification      | 100% up to \$2,000   |
| Survivor Income Benefit     | 3x monthly benefit   |
| Social Security Integration | Direct with Family SS offset   |
| Own Occupation Coverage     | Yes, 24 months   |
| Spouse Benefit              | None   |
| Conversion                  | Yes  |

# GROUP BASIC & OPTIONAL TERM LIFE INSURANCE & ADDITIONAL BENEFITS

## For Active Employees

What life insurance benefits are available?

### **Group Term Basic Life and Accidental Death and Dismemberment Insurance:**

Jackson Health System provides eligible employees with Group Term Basic Life Insurance in the amount of one times the employee's annual base salary. In addition, Jackson Health System provides Group Accidental Death and Dismemberment Insurance (AD&D) with a value equivalent to the employee's annual base salary in the event of death resulting from accidental injuries sustained whether on or off duty. Dismemberment benefits are payable for loss of hand, foot, or sight of eye resulting from an accident.

Premiums for the Group Term Basic Life and AD&D coverages are paid in full by Jackson Health System.

### **Group Term Optional Life Insurance:**

Jackson Health System also offers additional life insurance, called Optional Life, at the employee's expense. You may elect to purchase between one and five times your annual base salary for a maximum coverage of \$2 million. You may obtain up to three times your basic annual salary without being subject to medical approval during your initial eligibility period. If you choose not to enroll during your initial eligibility period, you may apply during the current Open Enrollment period. You may submit an application at this time; however, you will be subject to medical approval.

Premiums for Optional Life are based on your age and the amount of coverage you are purchasing and will be payroll deducted. Contact your HR Service Center office for further details.

### **Imputed Income:**

Jackson Health System provides one times your annual salary of basic group term life insurance. If the amount of life insurance exceeds \$50,000, Jackson Health System is required to withhold taxes on the amount above \$50,000.

**NOTE:** You can cancel or decrease coverage at any time, but you can only increase coverage during Open Enrollment. Your premiums are affected by salary and age changes (in five year increments). Beneficiaries for Life Insurance may be changed at any time.

### **Conversion:**

If your Basic Life and Optional Life Insurance ceases due to termination of employment or membership in an eligible class, you may have the option to continue coverage through the Conversion option. Contact Reliance Standard Customer Service at 1-800-351-7500 to obtain the application.

[CLICK HERE FOR EVIDENCE OF INSURABILITY >>](#)

## For Housestaff

What life insurance benefits are available?

### **Term Life Insurance**

Jackson Health System provides eligible House Staff Residents and Fellows with \$50,000 of personal Life Insurance. You must complete a beneficiary designation form during Open Enrollment. Beneficiary designations may be updated at any time.

### **Optional Term Life Insurance**

Additional life insurance, called Optional Life, is available during Open Enrollment at the employee's expense. You may elect to purchase an additional \$50,000 of coverage for \$60 per year. You are guaranteed coverage if you enroll during your initial eligibility period. However, if you enroll more than 6 months after becoming eligible, you will be subject to medical approval. Contributory insurance will be deferred until the date the insurer approves the employee's written evidence of insurability.

[CLICK HERE FOR HOUSESTAFF EVIDENCE OF INSURABILITY>>](#)

# ARAG® LEGAL INSURANCE

## Protect yourself and your family with legal insurance.

Life is full of legal situations. Some you plan for — like creating a will or buying a home. Others are more unexpected — like fighting a traffic ticket or getting your deposit back from a difficult landlord.

At Jackson Health System, we are excited to offer you a benefit that is there for the legal ups and downs: legal insurance from ARAG®. You'll have access to a nationwide network of attorneys when you need help with legal issues at any stage in life. Plus, attorney fees are 100% paid in full for most covered matters when you work with a network attorney who can offer legal guidance, review personal documents, and represent you, if needed.

## Rely on legal insurance benefits from ARAG.

Legal fees are expensive — averaging \$368 per hour for attorneys with 11 to 15 years of experience.<sup>1</sup> With legal insurance from ARAG:

- Save thousands of dollars on average, for legal matters by avoiding costly legal fees.<sup>1</sup>
- Avoid the hassle of finding a local network attorney easily in ARAG's network — many who average 20+ years of experience.
- Use DIY Docs® to create, edit and store legally valid, state-specific documents, such as a will or powers of attorney.

## Choose Flexible Benefit Options

You'll have two options to choose from: UltimateAdvisor®, which features a wide variety of legal coverages and services, and UltimateAdvisor Plus™, which offers more comprehensive legal coverage and additional services, like Identity Theft Protection, tax services, and services for parents/grandparents.

**Any legal matter that occurs or is initiated prior to the effective date of an Insured will be considered excluded and no benefits will apply.** ARAG defines this as an event covered by this policy whose initiation date will be considered the earlier of the date (a) written notice of a legal dispute is sent or filed by you or received by you; or (b) a ticket or citation is issued; or (c) an attorney is hired. If your matter is considered pre-existing, paid-in-full office visit or representation coverage is not available; however, as long as the matter is not listed under "Exclusions" in the plan, you are able to receive advice from a network attorney under the telephone legal access services benefit. You can also receive a reduced fee benefit of at least 25% off the network attorney's normal hourly rate if you have not previously hired an attorney.

VISIT [ARAGLEGAL.COM/MYINFO](https://araglegal.com/myinfo) AND ENTER ACCESS CODE 17845JHS TO LEARN MORE ABOUT YOUR ULTIMATEADVISOR® AND ULTIMATE ADVISOR PLUS™ PLANS!

SEE THE PLAN OPTIONS ON THE FOLLOWING PAGE.

| Biweekly Price | UltimateAdvisor® | UltimateAdvisor Plus™ |
|----------------|------------------|-----------------------|
| Individual     | \$6.20           | \$8.34                |
| Family         | \$8.18           | \$11.00               |

## Call for Questions or Plan Coverage Details

Get assistance from professionals and ARAG's award-winning Customer Care team, with dedicated specialists who can review your plan coverage and offer steps. Call 800-247-4184 when you are ready to address your legal issue or have a quick question about your coverage.

<sup>1</sup> Based on \$368 Average hourly attorney rate for attorneys with 11 to 15 years' experience according to The Survey of Law Firm Economics: 2018 Edition, The National Law Journal and ALM Legal Intelligence, October 2018.

Limitations and exclusions apply. Depending upon a state's regulations, ARAG's legal insurance plan may be considered an insurance product or a service product. Insurance products are underwritten by ARAG Insurance Company of Des Moines, Iowa. Service products are provided by ARAG Services, LLC. This material is for illustrative purposes only and is not a contract. For terms, benefits or exclusions, call 800-247-4184.

## About Legal Insurance

What is legal insurance? Learn how ARAG legal insurance can help you save money, time, and stress.



# ARAG® LEGAL INSURANCE

## Compare Your Legal Insurance Plan Options from ARAG®

| Plan Options   | Ultimate Advisor® | Ultimate AdvisorPlus™ |
|--|-------------------|-----------------------|
| <b>Consumer Protection</b>   |                   |                       |
| Auto Repairs, Buy/Sell a Car, Consumer Fraud, Contractors and More | •                 | •                     |
| Insurance Disputes   | •                 | •                     |
| <b>Estate Planning</b>   |                   |                       |
| Wills and Powers of Attorney                                       | •                 | •                     |
| Revocable Living Trusts  | •                 | •                     |
| Irrevocable Living Trusts  | •                 | •                     |
| Protection of Inheritance Rights                                   | •                 | •                     |
| Estate Administration & Closing (9 Hours)                          | •                 | •                     |
| <b>Family</b>  |                   |                       |
| Adoption   | •                 | •                     |
| Alimony/Child Custody/Visitation/Child Support (8 Hours)           |                   | •                     |
| Initial Child Custody/Child Support Agreements (8 Hours)           |                   | •                     |
| Contested Divorce (10 Hours)                                       | •                 |                       |
| Contested Divorce (15 Hours)                                       |                   | •                     |
| Uncontested Divorce  | •                 | •                     |
| Domestic Partnership Agreement                                     | •                 | •                     |
| Domestic Violence Protection                                       | •                 | •                     |
| Restraining/Protective Order                                       | •                 | •                     |
| Elder Law - Member Support   | •                 | •                     |
| Funeral Directive  | •                 | •                     |
| Gender Identifier Change   | •                 | •                     |
| Guardianship/Conservatorship                                       | •                 | •                     |
| Hospital Visitation Authorization                                  | •                 | •                     |
| Mental Incompetency or Infirmary                                   | •                 | •                     |
| Name Change  | •                 | •                     |
| Postnuptial Agreements   | •                 | •                     |
| Prenuptial Agreements  | •                 | •                     |
| School Administrative Hearings                                     |                   | •                     |
| <b>Real Estate — Primary and Secondary Residence</b>               |                   |                       |
| Buy/Sell   | •                 | •                     |
| Home Equity Loan   | •                 | •                     |
| Refinance  | •                 | •                     |
| Foreclosure  | •                 | •                     |
| Real Estate Disputes   | •                 | •                     |
| Neighbor Disputes  | •                 | •                     |
| Easements  | •                 | •                     |
| Zoning and Variances   | •                 | •                     |
| Building Codes   | •                 | •                     |
| <b>Traffic and Vehicle (Excluding DWI)</b>                         |                   |                       |
| Driving Privilege Protection                                       | •                 | •                     |
| Driving Privilege Restoration                                      | •                 | •                     |
| Minor Traffic  | •                 | •                     |
| <b>Services for Tenants</b>  |                   |                       |
| Disputes with a Landlord — Contracts, Lease, Eviction, Deposits    | •                 | •                     |

| Plan Options   | Ultimate Advisor® | Ultimate AdvisorPlus™ |
|--|-------------------|-----------------------|
| <b>Financial Services</b>                            |                   |                       |
| Financial Education and Counseling Services          | •                 | •                     |
| <b>Immigration</b>                                   |                   |                       |
| Immigration Services                                 | •                 | •                     |
| <b>Government Benefits</b>                           |                   |                       |
| Social Security/Veterans/Medicare                    | •                 | •                     |
| <b>Identity Theft</b>                                |                   |                       |
| Identity Theft Services                              | •                 | •                     |
| Full-Service Identity Restoration                    |                   | •                     |
| \$1 Million Theft Insurance¹                         |                   | •                     |
| Single-Bureau Credit Monitoring                      |                   | •                     |
| Internet Surveillance                                |                   | •                     |
| Change of Address Monitoring                         |                   | •                     |
| Child Identity Monitoring                            |                   | •                     |
| Lost Wallet Services                                 |                   | •                     |
| <b>Taxes</b>   |                   |                       |
| Tax Services   |                   | •                     |
| IRS Audit Protection                                 | •                 | •                     |
| IRS Collection Defense                               | •                 | •                     |
| Property Tax — Primary and Secondary Residence       |                   | •                     |
| <b>Debt</b>  |                   |                       |
| Bankruptcy   | •                 | •                     |
| Defense of Debt Collection                           | •                 | •                     |
| Defense of Garnishment                               | •                 | •                     |
| Mechanic's Lien                                      | •                 | •                     |
| Student Loan Debt Collection                         | •                 | •                     |
| <b>Services for Parents/Grandparents</b>             |                   |                       |
| Annual Legal Checkup, Advice and Caregiving Services |                   | •                     |
| <b>Criminal</b>                                      |                   |                       |
| Criminal Misdemeanor Defense                         |                   | •                     |
| Habeas Corpus  | •                 | •                     |
| Parental Responsibilities                            | •                 | •                     |
| Juvenile Court                                       | •                 | •                     |
| <b>Civil Damage Defense</b>                          |                   |                       |
| Libel/Slander, Pet-Related Matters and More          | •                 | •                     |
| <b>General Coverages</b>                             |                   |                       |
| Credit Record Correction                             |                   | •                     |
| Small Claims Court                                   | •                 | •                     |
| Miscellaneous Services (4 Hours per Year)            |                   | •                     |
| Document Preparation and Review                      | •                 | •                     |
| Personal Property Protection                         | •                 | •                     |
| <b>Premium Rate</b>                                  |                   |                       |
| Family bi-weekly                                     | \$8.18            | \$11.00               |
| Individual bi-weekly                                 | \$6.20            | \$8.34                |



800-247-4184

ARAGlegal.com/plans, access code 17845jhs

You may be eligible to receive a minimum 25% reduced fee off a network attorney's normal hourly rate for any other non-covered and non-excluded issues.

¹The Identity Theft Insurance is underwritten and administered by American Bankers Insurance Company of Florida, an Assurant company. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions. Please see the plan summary document for details. Limitations and exclusions apply. Depending upon a state's regulations, ARAG's legal insurance plan may be considered an insurance product or a service product. Insurance products are underwritten by ARAG Insurance Company of Des Moines, Iowa. Service products are provided by ARAG Services, LLC. This material is for illustrative purposes only and is not a contract. For terms, benefits or exclusions, contact us.

# PERMANENT LIFE INSURANCE



Combined Insurance  
Company of America,  
a Chubb company

## LifeTime Benefit Term Provides You with the Protection Your Family Needs

LifeTime Benefit Term helps protect you and your family if you were no longer able to provide for them. Your family can receive cash benefits paid directly to them upon your death that they can use to help cover expenses like mortgage payments, credit card debt, childcare, college tuition and other household expenses.

Cash benefits can also be paid directly to you while you are living for long term care expenses.

## You Decide How You Want to Use LifeTime Benefit Term Benefits

When you make the promise to protect your family with LifeTime Benefit Term, there are several ways it can work.

### As Life Insurance

LifeTime Benefit Term protects your family with money that can be used any way they choose. It is most often used to pay for mortgage or rent, education for children and grandchildren, retirement, family debt, and final expenses.

### For Qualified Long Term Care<sup>1</sup> (LTC)

If you become chronically ill<sup>2</sup>, LifeTime Benefit Term will pay you 4% of your death benefit each month you receive Long Term Care. You can use this money any way you choose, and your life insurance premiums will be waived.

- Your death benefit will reduce proportionately each month as you receive benefit payments for Long Term Care. After 25 months of receiving Long Term Care Benefits, your death benefit will reduce to zero.

### Restoration of Your Death Benefit

Ordinarily, accelerating your life coverage for Long Term Care benefits can reduce your death benefit to \$0. While in force, this rider restores your life coverage to not less than 50% of the death benefit on which your LTC benefits were based, not to exceed \$50,000. This rider assures there will be a death benefit available for your beneficiary until you reach age 121.

### For Terminal Illness<sup>3</sup>

After your coverage has been in force for two years, you can receive 50% of your death benefit, up to \$100,000, if you are diagnosed as terminally ill.

1. LTC and Extension of Benefits premiums may be adjusted based upon the experience of the group or other group characteristics that may affect results. Premiums will not be increased solely because of an independent claim. New premiums will be based on the insured's age and premium class on the rider's coverage date.
2. Chronically ill means certified by a licensed health care practitioner as: being unable to perform, without substantial assistance from another individual, at least two activities of daily living for a period of at least 90 days due to a loss of functional capacity; or requiring substantial supervision for protection from threats to health and safety due to severe cognitive impairment. Activities of daily living include Bathing, Continence, Dressing, Eating, Toileting and Transferring.
3. Terminally Ill means that the patient has a medical prognosis that his or her life expectancy is 1 year or less if the illness runs its normal course.

## LifeTime Benefit Term Features

### Affordable Financial Security

Lifelong protection with premiums beginning as low as \$3 per week.

### Dependable Guarantees

Guaranteed life insurance premium and Death Benefits last a lifetime.

### Fully Portable and Guaranteed Renewable for Life

Your coverage cannot be cancelled as long as premiums are paid as due.

### Highly Competitive Rates

For the same premium, LifeTime Benefit Term provides higher benefits than permanent life insurance and lasts to age 121.

### Family Coverage

Coverage is available for your spouse, children and dependent grandchildren.

This product is underwritten by Combined Insurance Company of America, a Chubb company.



# PERMANENT LIFE INSURANCE

| How LifeTime Benefit Term can be Used                           |  |               |                |                          |                  |
|---|--|---------------|----------------|--------------------------|------------------|
| Three options   | Life Situation   | Death Benefit | Long Term Care | Long Term Care Extension | Total Benefits   |
| <b>1. Life Insurance</b>  | You lead a full life and do not need Long Term Care (LTC)                                  | \$100,000     | ---            | ---                      | \$100,000        |
| <b>2. Long Term Care (LTC)* insurance</b>                       | You lead a full life and need assisted living or nursing home care                         | ---           | \$100,000      | ---                      |                  |
| <b>3. Split your Death Benefit for LTC &amp; life insurance</b> | You lead a full life but also need some LTC funds (Example: 4% of \$100,000 for 12 months) | \$52,000      | \$48,000       | ---                      |                  |
| Option 1, 2 or 3 = <b>TOTAL COVERAGE</b>                        |  |               |                |                          | <b>\$100,000</b> |

\* LTC premiums may be adjusted based upon the experience of the group or other group characteristics that may affect results. Premiums will not be increased solely because of an independent claim.

## Additional Benefit Options

**Accidental Death Benefit** Doubles the death benefit if death results from an accident.

**Child Term Benefit** Death Benefits available up to \$25,000. Guaranteed conversion to individual coverage at age 26—up to 5 times the benefit amount.

**Waiver of Premium Benefit** Waives premium if you become totally disabled.

**Payor Waiver of Premium Benefit** Waives premium of your spouse, if you become totally disabled.

## LifeTime Benefit Term Exclusions

If the insured commits suicide, while sane or insane, within two years from the Date of Issue, and while this Coverage is in force, We will pay in one sum to the Beneficiary, the amount of premiums paid for this Coverage.

## Long Term Care Exclusions

We will not pay Long Term Care benefits for care that is received or loss incurred as a result of: 1) Any Pre-Existing Conditions; 2) Mental or nervous conditions except Alzheimer's Disease; 3) Alcoholism and drug addiction; 4) Illness, treatment or medical conditions arising out of: War or act of war (whether declared or undeclared); Participation in a felony, riot or insurrection; Service in the armed forces or units auxiliary thereto; Suicide (sane or insane), attempted suicide, or intentionally self-inflicted injury; or Aviation (non-fare-paying passengers); 5) Treatment provided in a government facility (unless otherwise required by law), services for which benefits are available under Medicare or other Governmental program (except Medicaid), any state or federal workers' compensation, employers' liability or occupational disease law, or any motor vehicle no-fault law, services provided by a member of the covered person's immediate family, and services for which no charge is normally made in the absence of insurance. 6) Expenses for services or items available or paid under another long term care insurance or health insurance policy. 7) In the case of a long term care contract, expenses for services or items to the extent that the expenses are reimbursable under Title XVIII of the Social Security Act or would be so reimbursable but for the application of a deductible or coinsurance amount; or 8) Care or services received outside the United States or its territories.

**Pre-Existing Condition Limitation** LTC benefits are not payable for care received in the first 6 months after the coverage issue date if a Pre-Existing Condition causes an insured to be Chronically Ill. Care received 6 months or more after the issue date caused by a Pre-Existing Condition will be covered. Pre-Existing Conditions means a condition for which medical advice or treatment was recommended by or received from a provider of health care services within 6 months preceding the date of issue.

If you have questions about this product contact (855) 241-9891.

This document is a brief description of Certificate Form No. C34544FL. Benefits, rates, exclusions and limitations may apply. Refer to your certificate of insurance for specific details. Lifetime Benefit Term is a group life insurance policy that can provide benefits to help pay for qualified long term care expenses through the addition of the Accelerated Death Benefit for Qualified Long-Term Care Insurance Rider Form No. 34553FL and the Extended Accelerated Death Benefit for Qualified Long-Term Care Insurance Rider Form No. 34554FL.

**The purpose of this communication is the solicitation of insurance. Contact will be made by an insurance agent or insurance company.**

Chubb is the marketing name used to refer to subsidiaries of Chubb Limited providing insurance and related services. This insurance product is underwritten by Combined Insurance Company of America, Chicago, IL, a Chubb company.

# TRUSTMARK UNIVERSAL LIFE EVENTS®

## Financial Security Even After a Loss

Protecting your loved ones is one of life's greatest responsibilities. When a family loses someone, survivors can face – not only grief – but costly expenses, debt, and loss of income.

Universal LifeEvents insurance can mean those left behind can still pursue their own dreams, and help ensure that the ending of one story won't stop the beginning of another.

Universal LifeEvents provides a higher death benefit during your working years, when your needs and responsibilities are the greatest. You can choose a benefit amount that provides the right protection for you.

## Great Benefits:

- **Long-Term Care** – Provides up to 25 months of benefits for home healthcare, assisted living, adult day care, and nursing home care
- **Benefit restoration** – Restores the benefit paid out by LTC
- **Family coverage** – Coverage is available for employees, spouses, children, and grandchildren
- **Direct payment** - Benefits paid directly to the policyholder enabling choices in care

## Great Features:

- **Portability** – Coverage is completely portable, regardless of job changes or retirement
- **Streamlined Underwriting** - Simple and efficient underwriting process

- **EZ Value option** – Automatically increases benefits to keep pace with an employee's growing needs, without additional underwriting
- **Accelerated Death Benefit** - Accelerates up to 75% of the death benefit if a doctor determines the policyholder's life expectancy is 24 months or less

## Solving the Long-Term Care Issue

At any point in your life, you may need Long-Term Care services, which could cost hundreds of dollars per day. Universal LifeEvents includes an accelerated death benefit that can help pay for these services at any age. This benefit never reduces due to age, so the full amount is always available when you most need it.

## How does it work?

You can collect 4% of the face amount of your Universal LifeEvents policy per month for up to 25 months to help pay for Long-Term Care services.

Additionally, if you collect an accelerated benefit for LTC, your full death benefit is still available for your beneficiaries, as much as doubling your benefit.

Plan form GUL.205/IUL.205 and applicable cs are underwritten by Trustmark Insurance Company, Lake Forest, Illinois. Universal LifeEvents death benefit reduces to one-third at the latter of age 70 or the 15th policy anniversary; issue age is 18-64. Employees over age 65, up to a certain age, may select traditional Universal Life with a benefit that does not reduce due to age. Underwriting conditions may vary, and determine eligibility for the offer of insurance. Your policy will contain complete information. Trustmark® and LifeEvents® are registered trademarks of Trustmark Insurance Company.

## Examples of How Universal LifeEvents Works:

### How Universal LifeEvents Works

- A **higher death benefit** during working years.
- **Full LTC benefits** when you're most likely to need them.

Example: \$25,000 policy

| Before age 70 |                 |
|---------------|-----------------|
| Death benefit | <b>\$25,000</b> |
| LTC benefits  | <b>\$25,000</b> |

| After age 70  |                 |
|---------------|-----------------|
| Death benefit | <b>\$8,333</b>  |
| LTC benefits  | <b>\$25,000</b> |

Death benefit reduces to one-third at the latter of age 70 or the 15th policy anniversary. Issue age is 18-64.

### Benefit for terminal illness

- **Use part of your death benefit** if you're diagnosed with a terminal illness to help manage costs.

### Additional advantages

- **Keep your coverage** at the same price and benefits if you change jobs or retire.
- **Apply for coverage for family members:** spouse, children and grandchildren.
- **Convenient payroll deduction;** pay via direct bill, bank draft or credit card if you leave your employer.

### Plus: grow your benefit with EZ Value

The EZ Value option can automatically **increase your benefit amount** over time – without any medical questions.



Example is for age 40, employee only, non-smoker coverage, with accelerated death benefit and no additional features. Actual values will vary by age, smoking status, benefits selected and interest rates. Increases may be available for a maximum of 5 or 10 years, depending on employer selection.



# WHOLE LIFE INSURANCE W/LTC

How would your family get by if something happened to you suddenly and they could no longer rely on your paycheck? With Unum's Permanent Whole Life Insurance, you can help give your family the added financial protection they may need in the event something unexpected happens.

## Plan Features

- Voluntary, individual coverage is for employees, with multiple family coverage options available.
- No physical exams are required to apply for coverage. Policy issue may depend upon answers to health questions contained in the application.
- Premiums are guaranteed based on your age at the time of policy issue and do not increase due to age.
- Cash value is based on a tabular rate of 4.5%.
- The policy contains a reduced paid-up provision, which allows you to use your accumulated cash value to purchase a smaller, paid-up policy with no further premiums due.
- Coverage may be continued as long as sufficient premiums are paid.
- A Living Benefit Option rider is automatically included at no extra premium on all policies. This feature allows the policy owner to request 100% of the death benefit (to a maximum of \$150,000) if the insured is diagnosed with a medical condition that limits life expectancy to 12 months or less. Any payout reduces the death benefit.
- A Long-Term Care rider is automatically included at the initial offering to employees and spouses ages 15 to 70 who have policies with face amounts of at least \$10,000.
- All Whole Life policies are individually owned, which means you can take the policy with you – should you retire or leave the hospital.

## Employee Weekly Premium Limits

| Guaranteed Issue* | Simplified Issue |
|-------------------|------------------|
| \$3 - \$30        | \$31 - \$40      |

## Spouse Weekly Premium Limits

| Conditional Guaranteed Issue* | Simplified Issue |
|-------------------------------|------------------|
| \$3 - \$5                     | \$6 - \$10       |

## Additional Coverage Options

- Accidental Death Benefit Rider
- Waiver of Premium
- Long-Term Care Rider

## Plan Provider

Provident Life and Accident Insurance Company, a subsidiary of Unum Corporation, underwrites this plan. A.M. Best's Reports, which compares and rates the financial strength and performance of insurance companies, rates Unum "A" Excellent (rating effective as of May 7, 2021).

[CLICK HERE FOR WHOLE LIFE INSURANCE INFORMATION >>](#)

# CRITICAL ILLNESS INSURANCE



## Critical Illness Insurance

No one is ever really prepared for a life-altering critical illness diagnosis. The treatment to recovery is vital, but it can also be expensive. Your medical coverage may only cover some of the costs associated with treatment. You're still responsible for deductibles and coinsurance. If treatment keeps you out of work, the financial worries can grow quickly and stress levels may rise.

Critical Illness coverage helps provide financial support if you are diagnosed with a covered critical illness. With the expense of treatment often high, seeking the treatment you need could seem like a financial burden. When a diagnosis occurs, you need to be focused on getting better and taking control of your health, not stressing over financial worries.

## Key Features

- Guaranteed issue coverage without a Pre-Existing Condition Limitation\*
- Coverage available for dependents
- Covered dependents receive 50% of your basic-benefit amount
- Benefits paid regardless of any other medical or disability plan coverage
- Premiums are affordable and conveniently payroll deducted
- Coverage may be continued; refer to your certificate for more details

\* Please refer to the Exclusions and Limitations section of your brochure.

## Here's How it Works

You choose benefits to protect yourself and any family members, if diagnosed with a critical illness. Then, if diagnosed with a covered critical illness, you will receive a cash benefit based on the percentage payable for the condition.

With Allstate Benefits, you can make treatment decisions without putting your finances at risk. Are you in good hands? You can be.

## Disclosure

The coverage is provided under forms GVCIP4, or state variations thereof. The coverage has exclusions and limitations. Contact your benefits representative for full details. Allstate Benefits is the marketing name used by American Heritage Life Insurance Company (Home Office, Jacksonville, FL), a subsidiary of The Allstate Corporation.

**[CLICK HERE FOR THE ALLSTATE BENEFITS  
CRITICAL ILLNESS BROCHURE >>](#)**

# ACCIDENT INSURANCE



## Accident Insurance

Even when you live well, accidents happen. Treatment can be vital to recovery, but it can also be expensive. And if an accident keeps you away from work during recovery, the financial worries can grow quickly.

Most major medical insurance plans only pay a portion of the bills. Our coverage can help pick up where other insurance leaves off and provide cash to help cover the expenses.

With Allstate Benefits accident insurance, cash benefits are paid to help you gain financial protection. You also gain the financial empowerment to seek the treatment needed to be on the mend.

## Key Features

- Guaranteed issue coverage, subject to exclusions and limitations\*
- Coverage available for dependents
- Premiums are affordable and are conveniently payroll deducted
- Coverage may be continued; refer to your certificate for more details

\* Please refer to the Exclusions and Limitations section of your brochure.

## How it Works

Our coverage pays you cash benefits that correspond with hospital and intensive care confinement. Your plan may also include coverage for a variety of occurrences, such as: dismemberment; dislocation or fracture; ambulance services; physical therapy and more. The cash benefits can be used to help pay for deductibles, treatment, rent, and more.

With Allstate Benefits, you can protect your finances against life's slips and falls. YOU DECIDE how to use the cash benefits. Our cash benefits provide you with greater coverage options because you get to determine how to use them.

## Disclosure

The coverage is provided under forms GVAP6, or state variations thereof. The coverage has exclusions and limitations. Contact your benefits representative for full details. Allstate Benefits is the marketing name used by American Heritage Life Insurance Company (Home Office, Jacksonville, FL), a subsidiary of The Allstate Corporation.

**[CLICK HERE FOR THE ALLSTATE BENEFITS  
ACCIDENT INSURANCE BROCHURE >>](#)**

# HOSPITAL INDEMNITY PROTECTION

Group Hospital Indemnity coverage from Allstate Benefits pays cash benefits for expenses associated with hospital and emergency room visits.

Being hospitalized is something everyone could experience in their lifetime. If it happens, having the right supplemental hospitalization coverage in place can help offer peace of mind. Most major medical insurance plans only pay a portion of the hospital bills. Our coverage helps pick up where other insurance leaves off and provides cash to help cover the expenses.

- All benefits are paid direct to insured, unless assigned
- Benefits increase 5% after the first coverage year and each coverage year thereafter, for the next 5 years the policy remains in force at no corresponding increase in premium
- Rates are age banded; unisex
- Four-tier coverage options include: employee only, employee + spouse, employee + children, and employee + family
- Eligible to full-time and permanent part-time employees; excludes temporary and seasonal employees
- This plan is not HSA compatible

## Terms of Coverage

Family plan coverage may include employee/member, spouse and dependent children as defined in the policy. Individual and spouse coverage includes employee/member and spouse. Individual and children coverage includes employee/member and eligible children as defined in the policy.

## Effective Date

The effective date of coverage will be the policy date assigned by the home office and shown on the certificate specification page, not the application date.

## Disclosure

The coverage is provided under forms GVSP1, or state variations thereof. The coverage has exclusions and limitations. Contact your benefits representative for full details. Allstate Benefits is the marketing name used by American Heritage Life Insurance Company (Home Office, Jacksonville, FL), a subsidiary of The Allstate Corporation.

[CLICK HERE FOR THE ALLSTATE BENEFITS HOSPITAL INDEMNITY BROCHURE>>](#)

### LOW BIWEEKLY PREMIUM PLAN - 1 Unit Hospital Benefits, 1 Unit Surgery & Related Benefits, 1 Unit Outpatient Benefit

| Age   | Employee Only | Employee + Spouse | Employee + Child(ren) | Family  |
|-------|---------------|-------------------|-----------------------|---------|
| 18-35 | \$9.86        | \$18.86           | \$16.56               | \$25.06 |
| 36-49 | \$11.48       | \$22.02           | \$19.00               | \$29.02 |
| 50-59 | \$14.04       | \$27.64           | \$21.80               | \$34.80 |
| 60-64 | \$18.36       | \$36.72           | \$26.34               | \$44.00 |
| 65+   | \$24.18       | \$48.36           | \$32.90               | \$56.26 |

### MEDIUM BIWEEKLY PREMIUM PLAN - 3 Units Hospital Benefits, 1 Units Surgery & Related Benefits, 1 Units Outpatient Benefit

| Age   | Employee Only | Employee + Spouse | Employee + Child(ren) | Family   |
|-------|---------------|-------------------|-----------------------|----------|
| 18-35 | \$19.66       | \$36.82           | \$31.10               | \$47.74  |
| 36-49 | \$23.10       | \$43.46           | \$36.04               | \$55.86  |
| 50-59 | \$29.00       | \$56.62           | \$41.24               | \$68.28  |
| 60-64 | \$39.14       | \$78.26           | \$49.78               | \$88.20  |
| 65+   | \$52.84       | \$105.68          | \$62.82               | \$114.82 |

### HIGH BIWEEKLY PREMIUM PLAN - 5 Units Hospital Benefits, 1 Units Surgery & Related Benefits, 1 Units Outpatient Benefit

| Age   | Employee Only | Employee + Spouse | Employee + Child(ren) | Family   |
|-------|---------------|-------------------|-----------------------|----------|
| 18-35 | \$29.46       | \$54.76           | \$45.64               | \$70.42  |
| 36-49 | \$34.74       | \$64.90           | \$53.08               | \$82.68  |
| 50-59 | \$43.96       | \$85.62           | \$60.68               | \$101.76 |
| 60-64 | \$59.90       | \$119.80          | \$73.20               | \$132.40 |
| 65+   | \$81.50       | \$163.00          | \$92.72               | \$173.40 |

# HEALTH CONSUMER/FERTILITY & FAMILY PLANNING



**You may now sign up for or register for the Health Consumer/Fertility & Family Planning for membership discounts on the following plans:**  
**Fertility Advocacy**

Infertility affects one in eight couples, and employees struggling to build a family face higher rates of depression, absenteeism, and turnover in the workplace. Fertility Advocacy by WINFertility provides employees with personalized guidance and support through their fertility treatment journey, improving clinical outcomes in a cost-efficient manner while keeping employees happy and productive. The benefit gives employees a highly experienced Nurse Care Manager as their advocate to explore treatment options, access to a network of top-ranked fertility specialists, IVF treatment and fertility medication discount bundles, access to genetic testing and egg freezing services, financing options, and more.

- Guides you every step of the way through your fertility treatment journey, providing education, resources, medical discounts, and emotional support for your individual needs
- Highly trained Nurse Care Managers serve a personal advocate to help you understand treatment and medication options and determine the best course of action for you

- Receive access to a network of top-ranked fertility specialists, IVF treatment and fertility medication discount bundles, genetic testing and egg freezing services, financing options, and more

**Financial Wellness**

One in three employees admit to being less productive at work due to financial stress, costing businesses nearly one month of productive work days every year. Financial Wellness guides members through the major financial changes they'll face throughout life, from paying for college to buying a home to navigating the loss of a spouse. Members can achieve financial wellness with live, one-on-one coaching from accredited financial counselors and independent learning through online resources.

- Accredited or Certified Financial Counselors are accessible by phone to assess issues, discuss options, and help members determine the best course of action for their situation
- Online Financial Wellness Center does the heavy lifting for research, providing a variety of vetted articles, videos, worksheets, checklists, and more to guide the member's financial wellness journey
- Established learning tracks include resources for major life events, like getting married or having a child, and general financial goals, like developing a budget and eliminating student debt

Financial wellness disclosure: Financial Wellness does not provide investment, legal, or tax advice

| Health Consumer/Fertility & Family Planning Rates | Bi-weekly Pay Rate |
|---|--------------------|
| Employee  | \$7.00             |



# HEALTH CONSUMER/FERTILITY & FAMILY PLANNING

## Health Navigation

Health benefits can be confusing, medical costs are rising, and finding the right care solutions can be frustrating and time consuming. Alight Navigator simplifies the healthcare experience. A dedicated team of highly trained Health Pros:

- Helps you understand insurance benefits
- Provide guidance related to plan selection
- Explain care options
- Review medical bills and resolve errors
- Assist with scheduling appointments
- Help with issues related to dental and vision benefits
- Respond to most requests by the next business day
- Have passed rigorous credentialing and completed extensive training

## New Benefits Rx

Healthcare keeps getting more expensive, but you shouldn't have to choose between your prescription medications and other essential expenses. Make sure you're always getting the best deal on your prescriptions with deep discounts through New Benefits Rx. Save 10% to 85% on most prescriptions at 60,000 retail pharmacies nationwide and through home delivery.

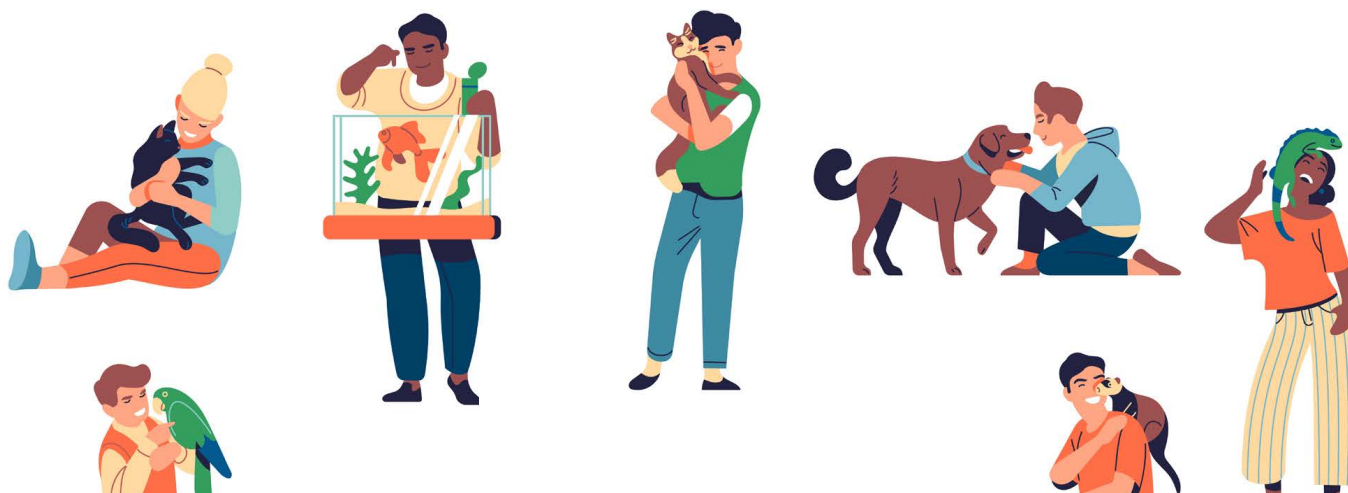
- Participating retail pharmacies include Walgreens, Target, CVS, and many other independent, national, and regional chains
- Save time and money through home delivery, powered by GeniusRx, delivering discounted medication directly to your door with free shipping
- Find the best deal by comparing prescription prices at participating pharmacies through your mobile app or web portal; then text or email the prescription price to easily cash in your savings at the pharmacy
- My Medicine Cabinet feature allows you to save your prescription search so you can easily refresh pricing for your next refill
- Even if you have insurance, you can present both cards at the pharmacy or research online to receive the lowest price
- Savings are available for your whole family, including certain medications for pets!

Health Consumer/Fertility & Family Planning program disclosure: **This program is NOT insurance coverage** and does not meet the minimum creditable coverage requirements under the Affordable Care Act or Massachusetts M.G.L. c. 111M and 956 CMR 5.00. **It contains a 30 day cancellation period**, provides discounts only at the offices of contracted health care providers, and each member is obligated to pay the discounted medical charges in full at the point of service. The range of discounts for medical or ancillary services provided under the program will vary depending on the type of provider and medical or ancillary service received. Member shall receive a reimbursement of all periodic membership fees if membership is canceled within the first 30 days after the effective date. Discount Plan Organization:

New Benefits, Ltd., Attn: Compliance Department, PO Box 803475, Dallas, TX 75380-3475, 800-800-7616. Website to obtain participating providers: [MyBenefitsWork.com](http://MyBenefitsWork.com).



# PET BENEFITS



## Pet Assure Veterinary Discount Plan

Pet Assure is a post-tax employee benefit program that enables members to receive discounts on all in-house medical services provided by network veterinarians.

You will save hundreds on your pets' medical care for only \$8/month. Pet Assure is the nation's oldest and largest veterinary discount plan and has been saving pet caretakers money on pet expenses since 1995.

### Here's what your membership includes:

- **25% off all in-house medical services** every time you visit a network veterinarian. With Pet Assure, you'll receive your discount right at the vet's office. This plan is not insurance so there are no hassles, no claim forms, and no deductibles. Savings are instant!
- **Any type of pet**, with absolutely no exclusions, can receive the discounts. There are no exclusions based on type, breed, age, past medical history, or pre-existing conditions.
- Do you have one dog, five cats, a lazy iguana and a donkey? One Pet Assure membership covers them all.
- ThePetTag Lost Pet Recovery Service. Every pet that joins can register in ThePetTag, Pet Assure's Lost Pet Recovery Service.

There are dozens of network providers in Miami and the surrounding areas. For a complete list of participating veterinary practices, visit Pet Assure online at [petassure.com](http://petassure.com)

**Pet Assure and PetPlus are brought to you by Pet Benefit Solutions. If you have any questions, please call Pet Benefit Solutions at: 800-891-2565. [petbenefits.com](http://petbenefits.com).**

## PetPlus Prescription Discount Plan

With PetPlus, members receive up to 40% off their pet's prescriptions, preventatives, food, treats, and more. It's instant savings without any paperwork, and no exclusions based on pre-existing conditions. All dogs and cats are covered!

You will get up to 40% off on:

- Flea and Tick Preventatives
- Heartworm Preventatives
- Rx Medications
- Vitamins and Supplements
- Food (Rx & Non-Rx)
- Treats and Toys

### Additional Benefits:

- Free shipping on all orders from PetCareRx.com
- Pickup human-grade Rx from participating pharmacies, including CVS, Walmart and other independent CVS Caremark® pharmacies
- 24/7 Pet Telehealth powered by AskVet

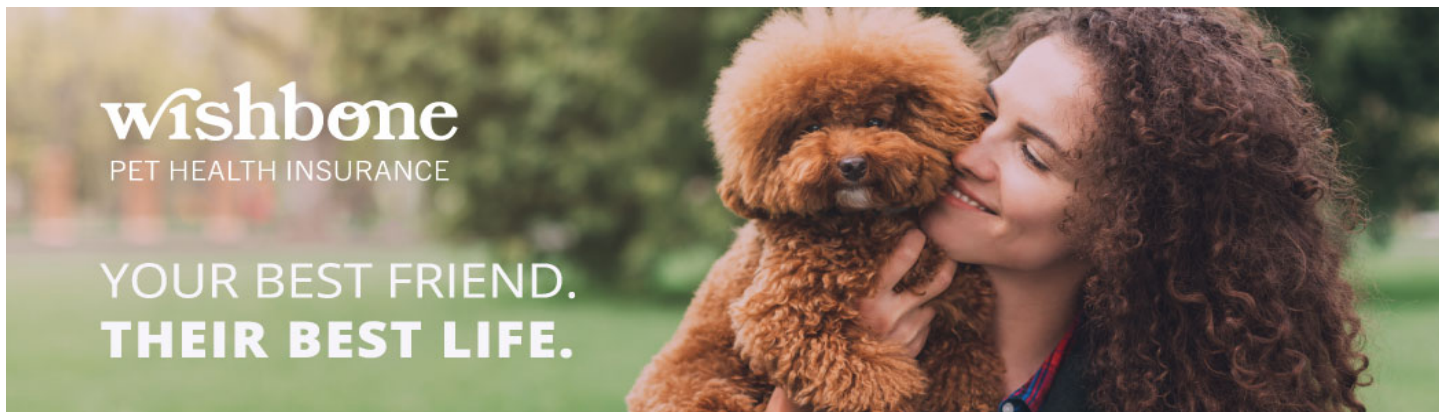
**Enroll today to start saving!**

## Pet Assure & PetPlus Rates

|   | Bi-weekly Pay Rate |
|---|--------------------|
| Pet Assure Unlimited Plan                 | \$3.69             |
| PetPlus Single Pet Plan                   | \$2.08             |
| PetPlus Unlimited Plan                    | \$3.92             |
| Pet Assure Unlimited + PetPlus Single Pet | \$5.77             |
| Pet Assure Unlimited + PetPlus Unlimited  | \$7.61             |

Unlimited plans covers all pets in your household.

# PET BENEFITS



## Jackson Health System is offering Wishbone Pet Insurance to employees.

Nobody wants to imagine their pet getting sick or injured - but when it comes to your pet's health, it's best to expect the unexpected.

**Enroll in pet health insurance from Wishbone and receive 90% reimbursement on your pet's veterinary care. With a low deductible of \$250, protecting your pet's health and your finances has never been easier!**

Wishbone Pet Insurance is accepted at any vet in the U.S., including emergency hospitals. Once you file a claim, expect to be reimbursed via direct deposit or mailed check in 5 business days or less. It's that easy!

### POLICYHOLDERS ENJOY:



Optional Routine  
Care Plans



Fast Claims  
Processing



Easy-to-Use Member  
Account



No Waiting Periods  
on Accidents or  
Illnesses



Lost Pet Recovery  
Service from  
**ThePetTag**



24/7 Pet  
Telehealth  
from **AskVet**

**Get a quote & enroll at [www.wishboneinsurance.com/jacksonhealthsystem](http://www.wishboneinsurance.com/jacksonhealthsystem)**

*Wishbone Pet Insurance is program managed by Odie Pet Insurance Marketing, Inc. and is underwritten by Clear Blue Insurance Group. Please visit [www.getodie.com](http://www.getodie.com) for more information.*

# CONSTANTCREDIT

It's YOUR credit. Keep it that way with ConstantCredit.

ConstantCredit monitors your credit report for any changes that may indicate suspicious activity or possible fraud. With ConstantCredit, you can be more aware of your credit health by receiving alerts when changes are reported. You will also receive information on your credit score, and access to tools that allow you to keep track of how your current and future activities may affect your credit score.

## Features and Benefits:

### LEVEL 3 (L3) VERIFICATION

You will verify your identity before monitoring begins. This ensures you are the only person to have access to your personal information through ConstantCredit.

### FULL ACCESS TO CREDIT REPORTS

With ConstantCredit, you have access to your full credit report at any time, regardless of what level of plan you have.

### CREDIT MONITORING

ConstantCredit monitors bureau activity and alerts you to any reported changes on your credit report. The sooner you find out if someone is acting on your behalf, the sooner you can act to mitigate the damage.

### SCORE TRACKER

Score Tracker is a monthly report based on four credit factors, showing you graphically how your credit score changes over time.

### SCORE SIMULATOR

Score simulator is a tool that helps you determine how certain actions will affect your credit, such as opening a new line of credit or paying off a loan.

### RESOURCE CENTER

At the Resource Center, you can find recent news and articles on issues related to financial health and other information to educate you on the importance of a healthy credit record.

Have Questions? Need Help? Call ConstantCredit at 855-592-7940.

## ConstantCredit Rates

|                   | Bi-weekly<br>Pay Rate |
|-------------------|-----------------------|
| Employee          | \$5.31                |
| Employee + Spouse | \$10.62               |

# ID COMMANDER

Identity theft is the fastest growing crime in America, with an identity stolen once every four seconds. ID Commander, a leader in proactive identity theft protection, uses a variety of industry-leading tools to help protect you from the growing crime of identity theft:

- Advanced Identity Monitoring and Alerts
- \$1 Million Identity Theft Insurance Policy, with \$0 deductible
- Full-service Identity Restoration
- 24/7 Lost Wallet Assistance
- Award-winning Computer Protection Software

ID Commander's comprehensive identity theft protection plans are available to both individuals and families, with complete access to benefits the moment membership begins. The ID Commander Family Protection Plan provides a truly managed household program and empowers individual family members with the tools and data they need to proactively manage the health and well-being of their identities.

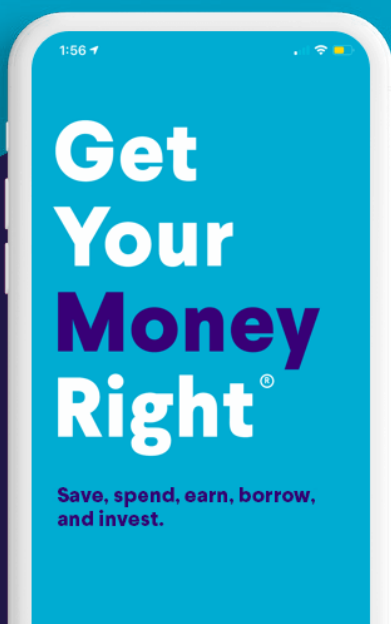
If the worst happens, and you become the victim of identity theft while covered by ID Commander, we will restore your identity and any related credit accounts to pre-theft status. No limits, no fine print, no "service guarantee." In addition, if you suffer any covered out-of-pocket expenses as a result of a breach, you're covered by a real insurance policy that will put money in your hands for qualified losses.

Take command of your future with ID Commander – sign up today!

## ID Commander Bi-Weekly Rates

|            | Ultimate |
|------------|----------|
| Individual | \$4.85   |
| Family     | \$10.38  |

# FINANCIAL WELLNESS



## Choose your own path.



### Learn

Read up on a wide variety of financial content.



### Manage

Keep an eye on your credit score, set financial goals, and track your spending.



### Organize

Securely connect your student loans and have an organized picture of them in one spot.



### Explore

Use financial tools to help manage student debt, learn how to invest, and more.

## Areas to explore

**Your benefits:** Receive special offers on SoFi products like a 0.25% rate discount\* for student loan refinancing

**Your finances:** Monitor your credit, save for life milestones, and track your spending.

**Insights:** Check out fresh content on current events, including SoFi's Daily Pod.

**Resources:** Visit and explore a full library of financial content, covering a range of topics.

**Tools:** See a complete picture of your student debt and get recommendations—whether it's around managing your student loans, or picking the right 529 college savings plan.

## Access your dashboard today.

1. Visit [SoFi.com/JHS](https://sofi.com/JHS)
2. Enter your last name and work email.
3. Create a SoFi account or log in to your existing account.
4. Land on your dashboard and explore.

\*Terms and conditions apply. Offer good for new student loan refinancing customers only and subject to lender approval. To receive the offer, you must: (1) register and/or apply through the referral link you were given; (2) complete a loan application with SoFi within 90 days of your application start date; (3) and meet SoFi's underwriting criteria. Once conditions are met the interest rate shown in the Final Disclosure Statement will include an additional 0.25% rate discount because of your involvement with a SoFi partner company at the time of loan origination. Cannot be combined with other rate discounts, with the exception of the 0.25% autopay rate discount. Autopay is not required to receive a loan from SoFi. SoFi reserves the right to change or terminate the Rate Discount Program to unenrolled participants at any time with or without notice.

NOTICE: Recent legislative changes have suspended all federal student loan payments and waived interest charges on federally held loans until 09/30/21. Please carefully consider these changes before refinancing federally held loans with SoFi, as in doing so you will no longer qualify for these changes or other current or future benefits applicable to federally held loans.

SoFi's Relay tool offers users the ability to connect both in-house accounts and external accounts using Plaid, Inc's service. The credit score provided to you is a Vantage Score® based on TransUnion™ (the "Processing Agent") data. Licensed by the Department of Financial Protection and Innovation under the California Financing Law, license #6054612. NMLS #1121636 (nmlsconsumeraccess.org). The Student Debt Navigator tool and 529 Savings and Selection tool are provided by SoFi Wealth, LLC, an SEC Registered Investment Advisor. 2750 E. Cottonwood Parkway #300 Cottonwood Heights, UT 84121. ©2020 Social Finance, Inc. All rights reserved. Information as of October 2020 and is subject to change. AW20-250289

# FINANCIAL WELLNESS

## Double your tax-deferred retirement savings

Contribute to both: 403(b) plan and 457(b) deferred compensation plan



Take advantage of this powerful way to save

Your employer offers you the opportunity to save in a 403(b), a 457(b) deferred compensation plan or both. Because you can choose to contribute to one or both, you can select the plan with features that best suit your situation.

### Double your tax-deferred retirement savings

#### How do the plans differ?

There are some significant differences between the plans, especially when it comes to withdrawals. Consider these differences when deciding which plan will suit you best.

| 403(b)  | 457(b)  |
|---|---|
| Withdrawals prior to age 59½ may be subject to a 10% federal early withdrawal tax penalty, unless an exception applies.   | Unlike the 403(b) plan, the 10% federal early withdrawal tax penalty for withdrawals prior to age 59½ does not apply to distributions from 457(b) plans except on amounts rolled into the plan from non-457(b) plans — including IRAs.  |
| Less stringent hardship withdrawal restrictions while you are employed.   | More stringent unforeseeable emergency withdrawal restrictions while you are employed.  |
| Examples of financial hardship include: <ul style="list-style-type: none"><li>• Certain unreimbursed medical expenses</li><li>• Payments to purchase a principal residence</li><li>• Qualifying expenses for higher education</li><li>• Payments to prevent eviction from or foreclosure of a mortgage on a principal residence</li></ul> | Examples of unforeseeable emergency include: <ul style="list-style-type: none"><li>• You or a dependent suffer an accident or unexpected illness</li><li>• Loss of property due to casualty</li><li>• Other similar extraordinary circumstances arising as a result of events beyond your control</li></ul> <p>Sending a child to college or purchasing a home, two common reasons for 403(b) hardship withdrawals, generally are not considered unforeseeable emergencies.</p> |

If this sounds complicated, don't be dismayed. You don't have to make the decision by yourself! The information in this flyer can help you get started, and then you can talk it over with your local financial advisor.

# FINANCIAL WELLNESS

## Save With CollegeAmerica.®

With tuition costs rising faster than inflation, many students need assistance paying for their education. To help you save for this important goal, your employer, working alongside a financial advisor, is offering you a CollegeAmerica 529 plan as part of your benefits package.

### Powered through Valic: You Get Some Great Benefits

- **Tax-advantaged investing** — Earnings in a 529 account grow free from federal tax. This can help you accumulate more over the long term.
- **Flexibility** — You can use the assets in your account to fund qualified, educational expenses for eligible K-12 school (up to \$10,000 per year per student for K-12 tuition), public or private college — undergraduate, graduate, professional, or vocational. Qualified expenses include tuition, fees, room and board, and many more.
- **Investing for any beneficiary** — You can save for anyone — your children, grandchildren, nieces, nephews, friends, etc. You can even save for yourself. In addition, there are no age or income limits.
- **Convenience of automatic investing** — You easily invest on a regular basis through deductions from your personal bank account or payroll deductions (if available). For details, talk to your employer.
- **Low plan costs** — You never pay a sales commission, and you benefit from low operating expenses. That way more of your money goes toward pursuing your goal.
- **Control over your account** — Unlike other education funding vehicles, you always control the assets in a 529, even when your beneficiary reaches the age of enrollment.

## UW@WORK - JHS FINANCIAL WELLNESS SERVICES

### Learn about FREE Financial Coaching at a Jackson UW@Work Event Near You

Earlier this year, Jackson partnered with United Way of Miami-Dade's Center for financial stability to bring the UW@WORK program to the health system. UW@WORK is an HR financial initiative that gives employees who make up to \$60,000 a year access to a team of experts that can help them jumpstart their finances and achieve their goals.

To learn more about what UW@WORK has to offer, visit one of their upcoming events at Jackson Memorial Hospital, Jackson North Medical Center, and Jackson South Medical Center. Services are available in Spanish, Kreyol, or English.

For more information,  
Email: [UWWork@UnitedWayMiami.org](mailto:UWWork@UnitedWayMiami.org)  
Phone: 305-646-7175  
Links: [UW@Work Financial Coaching](#)



# NOTICES



## COBRA Q&A

### Overview

COBRA is a continuation of Plan coverage when it would otherwise end because of a life event, also called a “qualifying event.” After a qualifying event, COBRA continuation coverage must be offered to each person who is a “qualified beneficiary.” You, your spouse, and your dependent children could become qualified beneficiaries if coverage under the Plan is lost because of the qualifying event. Under the Plan, qualified beneficiaries who elect COBRA continuation coverage must for COBRA continuation coverage.

If you’re an employee, you’ll become a qualified beneficiary if you lose your coverage under the Plan because of the following qualifying events:

- Your hours of employment are reduced, or
- Your employment ends for any reason other than your gross misconduct.

If you’re the spouse of an employee, you’ll become a qualified beneficiary if you lose your coverage under the Plan because of the following qualifying events:

- Your spouse dies;
- Your spouse’s hours of employment are reduced;
- Your spouse’s employment ends for any reason other than his or her gross misconduct;
- Your spouse becomes entitled to Medicare benefits (under Part A, Part B, or both); or
- You become divorced or legally separated from your spouse.

Your dependent children will become qualified beneficiaries if they lose coverage under the Plan because of the following qualifying events:

- The parent-employee dies;
- The parent-employee’s hours of employment are reduced;
- The parent-employee’s employment ends for any reason other than his or her gross misconduct;
- The parent-employee becomes entitled to Medicare benefits (Part A, Part B, or both);
- The parents become divorced or legally separated; or
- The child stops being eligible for coverage under the Plan as a “dependent child.”

### When is COBRA available?

The Plan will offer COBRA continuation coverage to qualified beneficiaries only after the Plan Administrator has been notified that a qualifying event has occurred. The employer must notify the Plan Administrator of the following qualifying events:

- The end of employment or reduction of hours of employment;
- Death of the employee; or
- The employee’s becoming entitled to Medicare benefits (under Part A, Part B, or both).

For all other qualifying events (divorce or legal separation of the employee and spouse or a dependent child’s losing eligibility for coverage as a dependent child), you must notify the Plan Administrator within 60 days after the qualifying event occurs. You must provide this notice to Jackson Health Systems.

### Options Besides COBRA

Instead of enrolling in COBRA continuation coverage, there may be other coverage options for you and your family through the Health Insurance Marketplace, Medicaid, or other group health plan coverage options (such as a spouse’s plan) through what is called a “special enrollment period.” Some of these options may cost less than COBRA continuation coverage. You can learn more about many of these options at [Healthcare.gov](https://www.healthcare.gov).

### More Information

This COBRA Q&A section does not fully describe continuation coverage or other rights under the Plan. More information about continuation coverage and your rights under the Plan is available from your employer.

### Keep Address Updated

To protect your family’s rights, let your Plan Administrator know about any changes in the addresses of family members. You should also keep a copy, for your records, of any notices you send to the Plan Administrator.

# NOTICES

## TAXABLE BENEFITS AND THE IRS

Certain benefits may be taxed if you become disabled, depending on how the premiums were paid during the year of the disabling event. Payments, such as disability, from coverages purchased with pretax premiums and/or nontaxable employer credits, will be subject to federal income and employment (FICA) tax. If premiums were paid with a combination of pretax and after-tax dollars, then any payments received under the plan will be taxed on a pro-rata basis. If premiums were paid on a post-tax basis, you will not be taxed on the money you receive from the plan. You can elect to have federal income tax withheld by the provider just as it is withheld from your wages. Consult your personal tax adviser for additional information.

In addition, FICA and Medicare taxes will be withheld from any disability payments paid through six calendar months following the last calendar month in which you worked prior to becoming disabled. Thereafter no FICA or Medicare tax will be withheld.

You will be required by the IRS to pay FICA, Medicare, and federal income taxes on certain other benefit payments, such as those from Hospital Indemnity Insurance, Personal Cancer Expense Insurance and Hospital Intensive Care Insurance, that exceed the actual Healthcare expenses you incur, if these premiums were paid with pretax dollars and/or nontaxable employer credits. If you have questions, consult your personal tax adviser.

## LIFE INSURANCE PREMIUMS AND THE IRS

According to IRS regulations, you can pay premiums on a pretax basis for the first \$50,000 of life insurance coverage under a group term life insurance, a group term life insurance plan, covering your life. However, you must pay tax on such coverage exceeding \$50,000.

## SOCIAL SECURITY

Social Security consists of two tax components: the FICA or OASDI component (the tax for old-age, survivors' and disability insurance) and the Medicare component. A separate maximum wage to which the tax is assessed applies to both tax components. There is no maximum taxable annual wage for Medicare. The maximum taxable annual wage for FICA is subject to federal regulatory change. If your annual salary after salary reduction is below the maximum wage cap for FICA, you are reducing the amount of taxes you pay and your Social Security benefits may be reduced at retirement time.

However, the tax savings realized through a cafeteria plan may generally outweigh the Social Security reduction. Call the service center at 1-855-569-3262 for an approximation.

## DISCLAIMER - HEALTH INSURANCE BENEFITS PROVIDED UNDER HEALTH INSURANCE PLAN(S)

Health Insurance benefits will be provided not by your employer's flexible benefits plan, but by the health insurance plan(s). The types and amounts of health insurance benefits available under the health insurance plan(s), the requirements for participating in the health insurance plan(s) and the other terms and conditions of coverage and benefits of the health insurance plan(s) are set forth from time to time in the health insurance plan(s). All claims to receive benefits under the health insurance plan(s) shall be subject to and governed by the terms and conditions of the health insurance plan(s) and the rules, regulations, policies and procedures from time to time adopted.

## NOTICE OF FBMC'S CAPACITY

FBMC Benefits Management, Inc. (FBMC) has been authorized by your employer to provide certain administrative services for some the insurance plans offered within your employer's benefit program. Importantly, FBMC is not the policyholder or an insurance company. The policyholder is the entity to whom the insurance policy has been issued; the employer is the policyholder for group insurance products and the employee is the policyholder for individual products. The policyholder is identified on either the face page or schedule page of the policy or certificate. The insurance companies noted in this guide have been selected by your employer and are liable for the funds to pay your insurance claims.

# NOTICES

## 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're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit **healthcare.gov**.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, 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, contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or **insurekidsnow.gov** to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't 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, contact the Department of Labor at **askebsa.dol.gov** or call 1-866-444-EBSA (3272).

If you live in Florida, you may be eligible for assistance paying your employer health plan premiums.

If you reside outside of Florida, view the entire CHIP Model Notice online at

**<https://www.dol.gov/sites/default/files/ebsa/laws-and-regulations/laws/chipra/model-notice.doc>**

Contact your state for more information on eligibility.

### FLORIDA – Medicaid

Website: **<https://www.flmedicaidprecovery.com/flmedicaidprecovery.com/hipp/index.html>**

Phone: 1-877-357-3268

To locate the list of states, current as of July 31, 2021, or to view states that have recently added a premium assistance program since July 31, 2021, or for more information on special enrollment rights, contact either:

U.S. Department of Labor  
Employee Benefits Security Administration  
**[dol.gov/agencies/ebsa](https://dol.gov/agencies/ebsa)**  
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services  
Centers for Medicare & Medicaid Services  
**[cms.hhs.gov](https://cms.hhs.gov)**  
1-877-267-2323, Menu Option 4, Ext. 61565

# NOTICES

## CREDITABLE COVERAGE NOTICE IMPORTANT NOTICE FROM JACKSON HEALTH SYSTEM ABOUT YOUR PRESCRIPTION DRUG COVERAGE AND MEDICARE

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Jackson Health System and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. Jackson Health System has determined that the prescription drug coverage offered by the Jackson First HMO, Jackson Select HMO and Jackson POS plans are, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and are therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.
3. When Can You Join A Medicare Drug Plan? You can join a Medicare drug plan when you first become eligible for Medicare and each year from Oct. 15, 2021 to Dec. 7, 2021.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan? Your current coverage pays for other health expenses, in addition to prescription drugs, and you will still be eligible to receive all of your current health and prescription drug benefits if you choose to enroll in a Medicare prescription drug plan.

If you do decide to join a Medicare drug plan and drop your current Jackson Health System coverage, be aware that you and your dependents will not be able to get this coverage back.

### When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with Jackson Health System and don't join a Medicare

drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

**For More Information About This Notice Or Your Current Prescription Drug Coverage...**Refer to your certificate of coverage issued by your medical insurance plan or visit [avmed.org/jhs](http://avmed.org/jhs). Contact AvMed at 844-439-5378.

You will receive this notice annually and at other times in the future such as before the next period you can enroll in Medicare prescription drug coverage, and if this coverage changes. You also may request a copy.

**For More Information About Your Options Under Medicare Prescription Drug Coverage...**More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

### For more information about Medicare prescription drug coverage:

- Visit [medicare.gov](http://medicare.gov)
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at [socialsecurity.gov](http://socialsecurity.gov), or call them at 1-800-772-1213 (TTY 1-800-325-0778).

REMEMBER: KEEP THIS CREDITABLE COVERAGE NOTICE. IF YOU DECIDE TO JOIN ONE OF THE MEDICARE DRUG PLANS, YOU MAY BE REQUIRED TO PROVIDE A COPY OF THIS NOTICE WHEN YOU JOIN TO SHOW WHETHER OR NOT YOU HAVE MAINTAINED CREDITABLE COVERAGE AND, THEREFORE, WHETHER OR NOT YOU ARE REQUIRED TO PAY A HIGHER PREMIUM (A PENALTY).

Last Updated: Oct. 27, 2021

Name of Entity: Jackson Health System

Contact-Position/Office: Human Resources  
Health and Wellness Department

Address: 1500 NW 12 Ave, Suite 106 W., Miami, FL 33136

Phone Number: 786-466-8378

# NOTICES

## HIPAA PRIVACY

The Plan complies with the privacy requirements of the Health Insurance Portability and Accountability Act of (HIPAA). These requirements are described in a Notice of Privacy that was previously given to you. A copy of this notice is available upon request.

## HIPAA SPECIAL ENROLLMENT NOTICE

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents' other coverage). However, you must request enrollment within "30 days" or any longer period that applies under the plan after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 30 days or any longer period that applies under the plan after the marriage, birth, adoption, or placement for adoption.

To request special enrollment or obtain more information, contact:

FBMC On-site Service Center  
1611 NW 12 Ave, Park Plaza West, L-109B  
Miami, FL 33136  
Phone: 305-585-6512  
JHSFieldOffice@fbmc.com

## WHCRA Annual Notice

Do you know that your plan, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services, including: all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedema? Call your plan administrator at 855-56JHS4U (855-565-4748) for more information.

## Designation of Primary Care Physician

JHS generally allows the designation of a primary care provider. You have the right to designate any primary care provider who participates in our network and who is available to accept you or your family members. Until you make this designation, JHS designates one for you. For information on how to select a primary care provider, and for a list of the participating primary care

providers, contact the AvMed at 1-844-439-5378 or visit [avmed.org/jhs](http://avmed.org/jhs). For children, you may designate a pediatrician as the primary care provider. You do not need prior authorization from AvMed or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in our network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain

services, following a pre-approved treatment plan, or procedures for making referrals. For a list of participating health care professionals who specialize in obstetrics or gynecology, contact the AvMed at 1-844-439-5378 or visit [avmed.org/jhs](http://avmed.org/jhs)

## JHS Wellness Program Notice of Reasonable Alternative

Your health plan is committed to helping you achieve your best health. Rewards for participating in a wellness program are available to all employees. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by different means. Contact JHS at we will work with you (and, if you wish, with your doctor) to find a wellness program with the same reward that is right for you in light of your health status.

## Notice Regarding Wellness Program

JHS's Wellness Program is a voluntary wellness program available to all employees. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others.

As part of the Wellness Program for JHS's AvMed members, employees have the opportunity to complete a voluntary Health Risk Assessment or "HRA." The HRA consists of a biometric screening and brief health questionnaire. The health questionnaire is a series of questions about health-related activities and behaviors and personal history of certain medical conditions (e.g., cancer, diabetes, or heart disease). The biometric screening includes a blood finger stick to obtain a sample of blood to test Total Cholesterol, HDL, Total Cholesterol to HDL Ratio, and Blood Glucose. You are not required to complete the HRA or participate in the blood test or other medical examinations. Employees who complete the HRA will receive a \$50 incentive.

The information from your HRA and the results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks, and may also be used to offer you services through the wellness program, such as participating in a Tobacco Cessation or Better You program, getting involved in on-site exercise or making an appointment with your primary care physician. You also are encouraged to share your results or concerns with your own doctor.

JHS's AvMed members who choose to participate in voluntary aspects of the wellness program will receive an incentive of up to \$200 per school year. These voluntary health activities include participating in a race, having an Annual Physical by a Primary Care Physician, attending a health lecture, having dental cleanings and much more. If you are unable to participate in any of the health-related activities to earn an incentive, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting JHS.



# NOTICES



## New Health Insurance Marketplace Coverage Options and Your Health Coverage

Form Approved  
OMB No. 1210-0149  
(expires 6-30-2023)

### 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 **AvMed at 844-439-5378, or view online at [www.avmed.org/jhs](http://www.avmed.org/jhs).**

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.



# NOTICES

## PART B: Information About Health Coverage Offered by Your Employer

This section contains information about any health coverage offered by your employer. If you decide to complete an application for coverage in the Marketplace, you will be asked to provide this information. This information is numbered to correspond to the Marketplace application.

|   |                |  |  |
|---|----------------|--|--|
| 3. Employer name<br>Jackson Health System   |                | 4. Employer Identification Number (EIN)<br>59-171-3947 |  |
| 5. Employer address<br>1611 NW 12th ave   |                | 6. Employer phone number<br>305-585-1111               |  |
| 7. City<br>Miami  | 8. State<br>FL | 9. ZIP code<br>33136                                   |  |
| 10. Who can we contact about employee health coverage at this job?<br>The Benefits Department |                |  |  |
| 11. Phone number (if different from above)<br>305-585-6512                                    |                | 12. Email address<br>hr-benefits@jhsmiami.org          |  |

Here is some basic information about health coverage offered by this employer:

- As your employer, we offer a health plan to:  
☐ All employees. Eligible employees are:

- ☒ Some employees. Eligible employees are:

Any Full time regular employee, house staff employee, or part– time employee with benefits status.

- With respect to dependents:  
☐ We do offer coverage. Eligible dependents are:

Spouse/Domestic Partner, Dependent Children to age 26 (or age 30 if special eligibility conditions are met)

- ☐ We do not offer coverage.

- ☒ If checked, this coverage meets the minimum value standard, and the cost of this coverage to you is intended to be affordable, based on employee wages.

\*\* Even if your employer intends your coverage to be affordable, you may still be eligible for a premium discount through the Marketplace. The Marketplace will use your household income, along with other factors, to determine whether you may be eligible for a premium discount. If, for example, your wages vary from week to week (perhaps you are an hourly employee or you work on a commission basis), if you are newly employed mid-year, or if you have other income losses, you may still qualify for a premium discount.

If you decide to shop for coverage in the Marketplace, [HealthCare.gov](https://www.healthcare.gov) will guide you through the process. Here's the employer information you'll enter when you visit [HealthCare.gov](https://www.healthcare.gov) to find out if you can get a tax credit to lower your monthly premiums.

# BENEFITS DIRECTORY

## JACKSON HEALTH SYSTEM

### Human Resources Capital Management

C/O HR Service Center  
Jackson Medical Towers  
1500 NW 12th Avenue, Suite 106W  
Miami, FL 33136  
305-585-6771

### Housestaff Office Department

East Tower, Room 1004  
305-355-1122

## BENEFITS ADMINISTRATOR

### FBMC Benefits Management, Inc. Service Center

Monday - Friday, 7 a.m. - 7 p.m. ET  
1-855-56JHS4U (1-855-565-4748)  
[myfbmc.com](http://myfbmc.com)

### FBMC On-Site Service Center

1611 N.W. 12<sup>th</sup> Avenue  
Park Plaza West L-109B  
Miami, FL 33136-1096  
305-585-6512  
[JHSFieldOffice@fbmc.com](mailto:JHSFieldOffice@fbmc.com)

## MEDICAL PROVIDER

### AvMed

1-844-439-5378  
[avmed.org/jhs](http://avmed.org/jhs)

### SmartShopper

1-800-824-9127  
[AvMed.VitalsSmartShopper.com](http://AvMed.VitalsSmartShopper.com)

### Jackson First Concierge

305-585-2727

## DENTAL PROVIDERS

### Delta Dental

Delta Dental PPO - 800-521-2651  
DeltaCare USA - 800-422-4234  
PO Box 1809  
Alpharetta, GA 30023-1809  
PPO Group Number – 19083  
DHMO Group Number – 78933  
[deltadentalins.com](http://deltadentalins.com)

## VISION PROVIDER

### Davis Vision

Vision Care Processing Unit  
PO Box 1525  
Latham, NY 12110  
Member Service: 1-877-393-7363  
[davisvision.com](http://davisvision.com)

## FLEXIBLE SPENDING ACCOUNTS

### PayFlex

11819 Miami Street Suite 200  
Omaha, NE 68164  
Monday - Friday, 8 a.m. - 8 p.m. ET  
Sat., 10 a.m. - 3 p.m. ET  
1-800-284-4885

### Toll-Free Claims Fax

1-855-703-5305

### General Account Info - Voice Response

24 hours a day  
1-800-284-4885  
[payflex.com](http://payflex.com)

## WELLNESS

### Jackson Health System

1-786-466-8378  
[HR-Benefits@jhsmiami.org](mailto:HR-Benefits@jhsmiami.org)

## EMPLOYEE ASSISTANCE PROGRAM

### Resources for Living, LLC

55 Lane Road  
Fairfield, NJ 07004  
24/7 Access for Jackson Health  
System employees:  
786-466-8377, Option 2

## DISABILITY PROVIDER

### Reliance Standard Life Insurance Company

Matrix Absence Management, Inc.  
1-877-202-0055  
24/7 for Telephonic Claims Filing or file  
online at [matrixabsence.com](http://matrixabsence.com)

### Reliance Standard Life Insurance Company

Matrix Absence Management, Inc.  
PO Box 13498  
Philadelphia, PA 19101  
1-800-866-2301  
Fax 602-866-9707

## HOUSESTAFF DISABILITY AND LIFE INSURANCE PROVIDER

### The Hartford/The Lawrence D. Share Company, Inc.

8211 West Broward Blvd Suite 400  
Plantation FL 33324  
305-577-3937  
[jmhinfo@ldshare.com](mailto:jmhinfo@ldshare.com)

# BENEFITS DIRECTORY

## LIFE INSURANCE PROVIDERS

### Chubb

Customer Service  
1-866-445-8874  
Monday - Friday, 7:30 a.m. - 6 p.m. CST  
[chubbworkplacebenefits.com](http://chubbworkplacebenefits.com)

### Reliance Standard Life Insurance Company

Customer Service  
1-800-351-7500  
[reliancestandard.com](http://reliancestandard.com)

### ReliaStar Life Insurance Company

A Member of the Voya® Family of Companies  
Customer Service  
1-800-537-5024  
PO Box 122  
Minneapolis, MN 55440-0122  
1-800-537-5024  
[voya.com](http://voya.com)

### Transamerica Life Insurance Company

Customer Service  
1-888-763-7474  
[transamerica.com](http://transamerica.com)

### Unum Life Insurance Company of America

Customer Service  
1-800-331-1538  
[unum.com](http://unum.com)

### Unum Whole Life Insurance with Long-Term Care

Customer Service  
Monday - Friday, 8 a.m. - 8 p.m. ET  
1-800-635-5597  
[unum.com](http://unum.com)

### Trustmark

Customer Care  
1-800-918-8877  
Customer Care Email  
[customercare@trustmarkbenefits.com](mailto:customercare@trustmarkbenefits.com)

Claims Phone  
1-877-201-9373  
[TrustmarkVB.com](http://TrustmarkVB.com)

## TAX SHELTER ANNUITY PROVIDERS

### AIG/VALIC

Miami District Office  
701 Brickell Avenue, Suite 1950  
Miami, FL 33131  
Office Phone: 305-817-2250  
Office Fax: 786-777-7626

VALIC Client Care Center:

1-800-448-2542  
[valic.com](http://valic.com)

## LEGAL INSURANCE

### ARAG®

500 Grand Avenue, Suite 100  
Des Moines, IA 50309  
1-800-247-4184  
[ARAGLegal.com/myinfo](http://ARAGLegal.com/myinfo)  
Access Code: 17845jhs  
[ARAGLegalCenter.com](http://ARAGLegalCenter.com)

## CRITICAL ILLNESS INSURANCE

### Allstate Benefits

Customer Service  
1-800-521-3535  
[allstatebenefits.com](http://allstatebenefits.com)

## ACCIDENT INSURANCE

### Allstate Benefits

1-800-521-3535  
[allstatebenefits.com](http://allstatebenefits.com)

## HOSPITAL INDEMNITY INSURANCE

### Allstate Benefits

1-800-348-4489  
[allstatebenefits.com](http://allstatebenefits.com)

Allstate Benefits is the marketing name used by American Heritage Life Insurance Company, a subsidiary of The Allstate Corporation.  
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## OTHER PROVIDERS

### Pet Benefit Solutions

1-800-891-2565  
[customercare@petbenefits.com](mailto:customercare@petbenefits.com)  
[petbenefits.com](http://petbenefits.com)

### ID Commander

Membership Services  
1-855-592-7941  
Monday - Friday, 9 a.m. - 6 p.m. ET  
[idcommander.com](http://idcommander.com)

### ConstantCredit

Membership Services  
1-855-592-7940  
Mon – Fri, 9 a.m. - 6 p.m. ET  
[constantcredit.com](http://constantcredit.com)

### Health Consumer/Fertility & Family Planning

Membership Services  
1-800-800-8304  
Mon – Fri, 8 a.m. - 8 p.m. ET  
Sat., 9 a.m. - 6 p.m. ET  
[www.newbenefits.com](http://www.newbenefits.com)



**Office Hours: 7:30 a.m. - 5 p.m. Monday - Friday ET**

**On-site FBMC Service Center**

Jackson Memorial Hospital  
1611 NW 12<sup>th</sup> Avenue, Park Plaza West, L-109B  
Miami, FL 33136-1096  
305-585-6512 • Fax 305-355-2324  
JHSFieldOffice@fbmc.com



Contract Administrator  
FBMC Benefits Management, Inc.  
PO Box 1878 • Tallahassee, Florida 32302-1878  
FBMC Service Center 855-56JHS4U (855-565-4748)  
**myFBMC.com**

**Disclaimer:** This guide does not contain an exhaustive list of the terms and conditions of each benefit. Please refer to the policy, certificate of coverage, or the carrier for more information. Information contained herein does not constitute an insurance certificate or policy. Certificates or policies will be provided to participants following the start of the plan year, if applicable.