

LOOK INSIDE FOR INFORMATION ABOUT:

How Your Benefits Work
Your Insurance Plans
Benefits Enrollment



Georgia Pharmacy
ASSOCIATION

Benefits Enrollment Guide

2021 Plan Year



Dear Associate:

Employers each year are faced with tough decisions regarding Employee Benefits. Georgia Pharmacy Association is not immune to the tough decisions upon review at each Renewal. Outside factors such as Healthcare Reform increase costs on top of aging populations, lifestyle changes, medical utilization, and medical advancement in technologies to name a few.

Our goal every year is to provide our employees with a comprehensive benefits package that helps meet your current needs. During the Enrollment Period, you will have an opportunity to select, change, or waive the benefit products offered for the 2021 plan year.

Changes to your current benefit elections will only be accepted during the Open Enrollment period of 11/1 to 11/30. Unless you experience a Qualifying Event during 2021, your next opportunity to make changes to your benefit elections will not occur until our next Open Enrollment period.

This Enrollment Guide has been designed to provide you with information about your benefits. Please review these materials carefully with your family before you make your elections.

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Qualifying Life Events

No changes are allowed to your medical, dental, or vision elections during the plan year, except for a “qualifying life event.” Qualifying life events that could result in changes to your coverage include the following:

- Marriage or divorce
- Birth or adoption of a child
- Death of a dependent
- Medicare entitlement
- End of a dependent’s full-time student status
- Termination of your spouse’s employment that affects benefits and/or loss of other group coverage

If you have a qualifying life event, you must notify Human Resources and provide the necessary documentation within 30 days of the change. If you do not do so within 30 days, you must wait until the next open enrollment to make medical, dental or vision benefit plan changes.

Eligibility

If you aren't currently eligible, you and your eligible family members can participate in the Georgia Pharmacy Association benefits package on the 1st of the month following 60 days of full-time employment. If you do not enroll for your benefits during or after becoming eligible, you must wait until the next open enrollment to elect benefits and you will be subject to late entrant penalties, if applicable.

Who Can Enroll?

You are eligible to participate in the Georgia Pharmacy Association plans if you are a regular full-time associate, and are scheduled to work 30 hours or more per week. Certain dependents of eligible employees can enroll in the medical, dental, vision, and dependent life insurance. Eligible dependents are:

- Spouse (except in the case of divorce).
- Unmarried children under age 26 regardless of student status, except for life insurance.
- Unmarried children who are mentally or physically handicapped and totally dependent on the associate for support, regardless of age with the exception of incapacitated children age 19 or older. To be eligible for coverage as an incapacitated dependent, the dependent must have been covered under this plan or have creditable coverage prior to reaching age 19. Certification of the handicap is required within 30 days of attainment of age 19. You will be required to complete a Handicapped/Disabled member certification form.

About Your Payroll Deductions

Your premiums for Medical, Dental and Vision plans will be deducted on a pre-tax basis because they are covered under your Cafeteria plan under Section 125 of the Internal Revenue Service code. This means that once you elect to enroll in any of these plans, you will not be allowed to drop or change your election until the Company's next Open Enrollment unless you have a qualifying event. Your voluntary life insurance, voluntary short term disability and voluntary long term disability premiums will be deducted on an after-tax basis.

Contact Information

Medical

BlueCross BlueShield of GA

Customer Service: 1-855-397-9267

Website: www.bcbsga.com

Dental, Vision, Life and Disability

BlueCross BlueShield of GA

Customer Service: 1-855-397-9267

Website: www.bcbsga.com

Questions? Contact:

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American Benefit Services

Toll-Free: 866-826-6554

Direct: 803-404-5970

Email: mriley@abstpa.com

Special Enrollment Rights

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance coverage, you may in the future be able to enroll yourself and your dependents in Georgia Pharmacy Association's medical, dental, or vision plans within 30 days after your other coverage ends.

Instructions For Using On-Line with Benefit Connector™

Your employer will provide you with the specific site address for the enrollment site. To access the site go to: <https://qpha.benefitconnector.com>.

User Name and Password are required to enter the enrollment site. If you are a first time user you must go through the registration process. Click on **'Register'** and follow the simple registration instructions. A default User Name will be assigned. You will create your Password.

Start Enrollment

During an Open Enrollment period click **Start Enrollment** to begin the enrollment process. Depending on case settings you may or may not be asked to verify both employee and dependent information. Dependents who are currently listed in the system can be updated and verified at this point. **Important:** You'll be given the opportunity to add dependents during the actual enrollment process.

My Info

Your demographic information will be displayed in the **My Info** tab, some of which can be edited. If there is incorrect information in fields that you are not allowed to edit, please contact your HR Dept and provide them with the correct information. **Suggestion:** Depending on case settings you may or may not be asked to verify your employee information during the enrollment process. Complete your enrollment first. If you were not asked to verify your information during the enrollment process, you can view/update your information once you've completed enrollment.

My Family

Dependents who are currently listed in the system will be displayed in the **My Family** tab. Where allowed you can update and correct dependent information. **Suggestion:** Depending on case settings you may or may not be asked to verify your dependent information during the enrollment process. Complete your enrollment first. If you were not asked to verify your dependent information during the enrollment process, you can view/update your dependents once you've completed enrollment.

My Current Benefits

Select **My Current Benefits** to view a summary of the benefits you are currently enrolled in.



Documents

Selects **Documents** to view and print any Forms or Documents that have been posted by your employer.



Settings

Selects **Settings** to change your Password or your Registration information.



Click for additional help information.

Registering on the Benefit Connector Enrollment Site

Step 1

Log on to: <https://gpha.benefitconnector.com>.

Step 2

If you have never accessed the site, you must register.

- From the log in screen, click '**register**' to begin registration process.

Step 3

- Enter the **Registration Information** - Last Name, Date of Birth, Last 4-Digits of SS#.
- Click 'Next' to continue.

Step 4

- Make note of your **Login/Username**.
- Select and answer a **Secret Question**.
- Create and verify a **Password**. Password strength is displayed as password is developed.
- Click 'Next' to continue.

Register

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If you have not previously been assigned a username and password you will need to register before attempting to log in.

[Register](#)

[Forgot Login](#) or [Forgot Password](#)

Register

Last Name

Date of Birth

Last 4 Digits of SSN

[Next](#)

Register

Your Login/Username is TTest

Secret Question
What was your High School's Mascot?

Secret Answer

Password must be...

- 8 characters
- Contains a number
- Upper and lower case letters
- May not contains personal information
- May not contains words like 'password'

Generated Username

Choose Password

Confirm Password

[Next](#)

Be sure to remember your Login/Username and Password for future access to Benefit Connector. If you forget your Password, it can be reset it by following the instructions for '**Forgot Login/Password**' in the log in box.

Medical Coverage (BlueCross BlueShield of Georgia)

There are 5 plans to choose from:

Option 1	In-Network	Out-of-Network
Co-Insurance	70%	50%
Calendar Year Deductible	\$3,000/\$9,000	\$6,000/\$18,000
Out of Pocket Maximum <i>(includes deductible and Rx)</i>	\$7,900/\$15,800	\$19,800/\$39,600
Physician Office Copay	\$40	50%
Specialist Copay	\$75	50%
Urgent Care Copay	\$75	50%
Emergency Copay <i>(waived if admitted)</i>	\$250 + 30%	\$250 + 30%
Inpatient	\$500 + 30%	50%
Outpatient	30%	50%
Lifetime Maximum	Unlimited	
Rx Copay	\$15/NA/NA	

Option 2	In-Network	Out-of-Network
Co-Insurance	80%	50%
Calendar Year Deductible	\$2,500/\$7,500	\$5,000/\$15,000
Out of Pocket Maximum <i>(includes deductible and Rx)</i>	\$7,900/\$15,800	\$21,450/\$42,900
Physician Office Copay	\$35	50%
Specialist Copay	\$75	50%
Urgent Care Copay	\$75	50%
Emergency Copay <i>(waived if admitted)</i>	\$250 + 20%	
Inpatient	20%	50%
Outpatient	20%	50%
Lifetime Maximum	Unlimited	
Rx Copay	\$500 Rx Deductible; \$20/\$50/\$90	

Option 3	In-Network	Out-of-Network
Co-Insurance	80%	50%
Calendar Year Deductible	\$1,800/\$5,400	\$3,500/\$10,500
Out of Pocket Maximum <i>(includes deductible and Rx)</i>	\$7,900/\$15,800	\$21,450/\$42,900
Physician Office Copay	\$35	50%
Specialist Copay	\$75	50%
Urgent Care Copay	\$75	50%
Emergency Copay <i>(waived if admitted)</i>	\$250 + 20%	
Inpatient	20%	50%
Outpatient	20%	50%
Lifetime Maximum	Unlimited	
Rx Copay	\$500 Rx Deductible; \$20/\$50/\$90	

Medical Coverage (BlueCross BlueShield of Georgia)

Option 4:	In-Network	Out-of-Network
Co-Insurance	80%	50%
Calendar Year Deductible	\$1,500/\$4,500	\$2,500/\$7,500
Out of Pocket Maximum <i>(includes deductible and Rx)</i>	\$7,900/\$15,800	\$21,450/\$42,900
Physician Office Copay	\$35	50%
Specialist Copay	\$75	50%
Urgent Care Copay	\$75	50%
Emergency Copay <i>(waived if admitted)</i>	\$250 + 20%	
Inpatient	20%	50%
Outpatient	20%	50%
Lifetime Maximum	Unlimited	
Rx Copay	\$500 Rx Deductible; \$20/\$50/\$90	

Option 5:	In-Network	Out-of-Network
Co-Insurance	80%	50%
Calendar Year Deductible	\$5,500/\$11,000	\$10,000/\$20,000
Out of Pocket Maximum <i>(includes deductible and Rx)</i>	\$7,000/\$14,000	\$3,000/\$6,000
Physician Office Copay	Ded	Ded
Specialist Copay	Ded	Ded
Urgent Care Copay	Ded	Ded
Emergency Copay <i>(waived if admitted)</i>	Ded	Ded
Inpatient	20% / 20%	50% / 50%
Outpatient		
Lifetime Maximum	Unlimited	
Rx Copay	Ded	

Monthly Medical Payroll Deductions (Pre-Tax)

	Option 1: OAP12 2.5K/30C (2MBX)	Option 2: OAP5 2.5K/20 KE (2M9C)	Option 3: OAP5 1.5K/20 7.15K KE (2M9G)	Option 4: OAP5 1K/20 4K KE (2M8U)	Option 5: HSAOAP8 5K/20 (2MBR)
Employee					
Employee + Spouse					
Employee + Child					
Family					

Medical Rates can be found in the enrollment system.

To view your plan, find in-network doctors and more, register at www.bcbsga.com.

Benefits of Health Savings Accounts (HSAs)

HSA Benefits

Health Savings Accounts (HSA) are savings accounts for your health and medical expenses. High Deductible Health Plans (HDHPs) with HSAs are designed to give you more control over how you manage your health care expenses. You can use the money in your account to pay for eligible expenses such as your annual deductible, coinsurance, dental, vision, pharmacy, etc. Your HSA funds can be used to pay for the health expenses of any tax dependent (i.e. spouse, children) even if they are not on your health insurance plan. HSAs are also designed to help you save for upcoming qualified medical and retiree health expenses on a tax-free basis. The maximum HSA contribution is determined annually by the IRS.

The 2021 IRS HSA maximum contribution amounts are:

- For individuals: \$3,600
- For family: \$7,200
- Catch-up contribution for members age 55+: \$1,000

You must complete an HSA enrollment packet to set up your Health Savings Account. Contact Human Resources for an HSA enrollment packet.



Set aside tax-free money for future medical services

HSA's are similar to Individual Retirement Accounts (IRAs) because funds may grow through interest and investments, and because unused funds roll over from year to year. Just remember, you must first enroll in the high-deductible health plan (HDHP) before you can establish an HSA.

Features of Health Savings Accounts

- As long as you are enrolled in a HDHP, you may continue to contribute money into your HSA (up to the maximum IRS limit).
- HSA's unused funds roll over each year. There is no "use it or lose it" rule. It is your personal savings account for related health expenses.
- **Tax Savings:** If you choose to contribute to your HSA, contributions are taken out of your paycheck before taxes are calculated, so you pay less tax.
- **Portability:** The money in your account is yours, so you can take it with you if you change employers, health plans, or retire.
- **Investment:** Once your account reaches a minimum balance requirement, you can transfer money to an investment account and invest in several mutual funds – earnings are tax free.
- **Savings:** Let the funds in your account grow tax-deferred. After age 65, you may withdraw from your HSA for any reason without penalty and taxes as long as you use the funds for qualified medical expenses. Use the savings to pay for qualified medical expenses or save the money and invest in various mutual funds. **Any funds you don't use will accumulate for the next year and the future; there is no "use it or lose it" rule.**
- You can access your HSA with a debit card, checks, or ATM.

2021 Health Savings Account (HSA) Contributions

	IRS Annual Limits
Employee Only	\$3,600
Employee + Spouse	\$7,200
Employee + Child(ren)	\$7,200
Family	\$7,200
	Catch-up Contributions (Optional)
Age 55 and up	\$1,000

HSA Qualified and Non-Qualified Medical Expenses

What are Qualified and Non-Qualified Medical Expenses?

Your HSA can be used to pay for covered expenses that apply toward your high deductible health plan (HDHP) annual deductible. You can also pay for qualified medical expenses that your health plan might not cover, such as vision care (eyeglasses and contact lenses), dental and orthodontic services, and even long-term care insurance. To be more specific, "qualified medical expenses" are the fees you pay for the diagnosis, care, mitigation, treatment or prevention of disease or illness. The following lists give you a general overview of qualified and non-qualified expenses. These lists are not all-inclusive, and are subject to change by the IRS.

When you pay for qualified medical expenses with your Health Savings Account (HSA), the funds you withdraw are tax-free if they:

- Are qualified medical expenses as generally described in Section 213(d) of the Internal Revenue Service Tax Code (see at www.irs.gov); and
- Have not been compensated or reimbursed by insurance or otherwise.

Remember that any HSA funds used for non-qualified expenses will be taxable, and will also be subject to a 20% IRS tax penalty, except in the case of distributions made after your death or disability, if you are under age 65. So be sure to consult your tax advisor if in doubt about a particular expense.



Qualified medical expenses include:

- Acupuncture
- Alcoholism treatment
- Bandages
- Birth Control Pills
- Braces
- Chiropractor
- Contact lenses
- Convalescent home (medical)
- Dental treatment/fees
- Drug addiction therapy
- Eyeglasses
- Handicap equipment
- Hearing aids and batteries
- LASIK eye surgery
- Nurses (registered) and nursing homes
- Ophthalmologist, optician and optometrist
- Prenatal care
- Prescription medicines
- Psychotherapy
- Surgeries/Operations (non cosmetic)
- Special school or home costs for the physically and mentally impaired
- Tuition for child with learning disability

Non-qualified medical expenses include:

- Athletic club membership
- Cosmetic surgery and procedures (unless due to accident, birth defect or disease)
- Illegal operations, drugs or treatments
- Over-the-Counter (OTC) medication (i.e., aspirin, cold medicine)* unless prescribed
- Premiums for life insurance, disability, etc.
- Special foods or beverages
- Stop-smoking programs
- Weight loss programs

Remember, you must comply with HSA spending regulations. You can find detailed information about qualified medical expenses in Section 213(d) of the Internal Revenue Code and IRS Publication 502. It is your responsibility to ensure that the funds from the account are being used for qualified medical expenses. For record keeping purposes or in the event of an audit, you should maintain receipts for all of your expenses.

* Healthcare reform legislation signed into law in March 2010 impacts OTC purchases with HSAs beginning January 1, 2011. While some OTC items will maintain current eligibility status, certain drugs and medicines will require a prescription to be considered an eligible expense.

Dental Coverage (Blue Cross Blue Shield)



Dental benefits are available to you and your eligible family members to cover routine care such as exams, x-rays and cleanings, as well as fillings, dentures, bridgework and periodontal care.

The Georgia Pharmacy Association dental plan benefits have been designed to allow employees and their dependents to use the dental provider of their choice, regardless of their network status. In-Network dentists are reimbursed a percentage of a fee that has been negotiated with Blue Cross Blue Shield. Out-of-Network dentist are reimbursed a percentage based on the Usual Customary and Reasonable (UCR) for their area. If you choose to see an Out-of-Network provider your out of pocket costs may be higher.

Dental Monthly Payroll Deductions		
Rates per subscriber per month	Guaranteed for One Year	
	Plan A – High Option	Plan B – Low Option
Employee only	\$39.25	\$25.54
Employee and one dependent	\$77.08	\$51.18
Employee and two or more dependents	\$140.03	\$102.56

Dental Summary of Benefits	Plan A – High Option		Plan B – Low Option	
	PPO	Non-participating Dentist	PPO Dentist	Non-participating Dentist
Diagnostic and Preventive Services				
Diagnostic and preventive services — includes exams, cleanings, fluoride, and space maintainers	100%	100%	100%	100%
Brush biopsy — to detect oral cancer	100%	100%	100%	100%
Sealants – to prevent decay of permanent molars	100%	100%	100%	100%
Radiographs — X-rays	100%	100%	100%	100%
Basic Services				
Emergency palliative treatment — to temporarily relieve pain	80%	80%	80%	80%
Periodontic Maintenance —cleanings by a specialist	80%	80%	80%	80%
Simple Extractions – non complicated extractions	80%	80%	80%	80%
Minor Restorative Services – fillings	80%	80%	80%	80%
Other Basic Services – misc. services	80%	80%	80%	80%
Major Services				
All Other Periodontic Services – to treat gum disease	50%	50%	Not covered	Not covered
Endodontic Services – root canals	50%	50%	Not covered	Not covered
All Other Oral Surgery Services – complex extractions and dental surgery	50%	50%	Not covered	Not covered
Major Restorative Services – crowns	50%	50%	Not covered	Not covered
Prosthodontic Services – bridges and dentures	50%	50%	Not covered	Not covered
Relines and Repairs – to bridges and dentures	50%	50%	Not covered	Not covered
Allowed Amounts				
Allowed Amount	PPO Fee	90th Percentile	PPO Fee	90th Percentile
Maximum Payment				
Maximum Payment	\$1,000 per person total per calendar year on Diagnostic & Preventive, Basic Services, and Major Services.		\$750 per person total per calendar year on Diagnostic & Preventive and Basic Services.	
Annual Deductible				
Deductible – \$50 deductible per person total per calendar year limited to a maximum deductible of \$150 per family per calendar year. The deductible does not apply to Diagnostic & Preventive.				

Vision Coverage (Blue Cross Blue Shield)

Georgia Pharmacy Association offers vision coverage through Blue Cross Blue Shield. You and/or your eligible spouse/dependents may elect vision coverage whether or not covered by the Georgia Pharmacy Association medical plan. Below is a brief summary of the coverages. For additional information, please refer to the Plan Summary.



Vision Monthly Payroll Deductions	
Employee	\$7.80
Employee + 1 Dependent	\$14.83
Employee + 2 Dependents	\$22.72

Vision Summary of Benefits		
Your Coverage with Blue View Vision Doctors and Affiliate Providers	Plan Type - B	
	Copay	Frequency
WellVision Exam Focuses on your eyes and overall wellness	\$10	Every 12 months
Prescription Glasses	\$25	See frame and lenses
Frame \$150 allowance for a wide selection of frames 20 percent savings on the amount over your allowance	Included in prescription glasses	Every 24 months
Lenses Single vision, lined bifocal and lined trifocal lenses Polycarbonate lenses for dependent children	Included in prescription glasses	Every 12 months
Lens Enhancements Standard progressive lenses Premium progressive lenses Average savings of 20–25 percent on other lens enhancements	\$65 \$85-\$110	Every 12 months
Contacts (instead of glasses) \$150 allowance for contacts; 15 percent savings on the amount over your allowance	Up to \$55 (applies to contact evaluation and fitting)	Every 12 months

**Coverage with a retail chain affiliate may be different. Once your benefit is effective, visit www.bcbsga.com for details. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with Blue Cross Blue Shield, the terms of the contract will prevail. Based on applicable laws, benefits may vary by location.*

Voluntary Life Insurance (AnthemLife)

Voluntary Group Term Life Summary of Benefits	
Voluntary Employee Life Benefit	\$50,000
Guaranteed Issue Limit	\$50,000
Living Benefit (Accelerated Death Benefit)	75% up to \$250,000
Waiver Of Premium	Premiums can be waived for employees who become totally disabled before age 60, after the 6 month elimination period. Coverage terminates at age 65 or retirement, whichever is earlier.
Conversion	Included
Portability	Included
Age Reductions	Benefit reduces by 35% at age 65; 50% at age 70. All coverage terminates at retirement.
Voluntary Dependent Life benefits	
Voluntary Dependent Life Benefit	Spouse: Employees may choose a Spouse Benefit in increments of \$5,000 up to \$25,000 Children: Employees may choose a Child Benefit in increments of \$5,000 up to \$10,000 Coverage begins at 15 days from birth. Children are eligible until they reach age 26.
Guaranteed Issue Limit	Spouse: \$25,000 Child(ren): \$10,000
Age Reductions	Reduces in accordance with employee's age and reduction schedule; Terminates at employee's retirement.
Benefit Limitation	Dependent benefits may not exceed 50% of the employee Optional Voluntary Life benefit amount
Spouse Rate Basis	Spouse rates are based on employee's age
Portability	Included
General Provisions	
Resource Advisor	Included
Travel Assistance	Included
Employee Contribution	100% employee paid
Participation Requirement	Greater of 5 enrolled lives or 20% of Eligible Employees
Rate Guarantee	Rates in this Proposal are guaranteed for 24 months

Disability (AnthemLife)

Short Term Disability Summary of Benefits

Benefit Amount	60% of weekly earnings
Maximum Weekly Benefit	\$1,000
Minimum Benefit	\$50
Guaranteed Issue Limit	\$1,000
Benefits Begin	15th day for disabilities caused by accident. 15th day for disabilities caused by illness.
Maximum Benefit Duration	11 weeks
Rounding (For Salary Based Benefits)	Benefits are rounded up to the next \$10
Definition Of Disability	Partial disability: Included
Zero Day Residual Benefits: Included	
Are Occupational Disabilities Covered	No
W-2 Preparation Service (For Disabled Employees)	Included
Work Retention Assistance	Included
Pre-Existing Condition Limitation	3/12

Long Term Disability Summary of Benefits

Benefit Percentage	60%
Guaranteed Issue Limit	\$5,000
Maximum Monthly Benefit	\$5,000
Minimum Benefit	Greater of 10% or \$100
Elimination Period	90 days
Maximum Benefit Period	SSNRA
Definition of Disability	2 Year Own Occupation
Residual	Included
Partial Disability	Included
Work Incentive Benefit	100% for 12 months
Indexation	Yes, Partial Disability and Gainful Occupation
Social Security Integration	Family
Pre-Existing Condition Limitation	12/6/24
Continuity Of Coverage	Included
Cost Of Living Freeze	Included
Limitations	24 months Mental Illness or Alcoholism or Drug Addiction per lifetime; Special Conditions limitation
Employer Participates In Workers Compensation?	Yes
Accumulation Of Elimination Period	Half the length of the elimination period.
Survivor Benefit	3 months gross
Workplace Modification Benefit	Up to \$10,000
Estimation Of Offsets	Included
Additional Benefits Included	Vocational Rehabilitation, Social Security Assistance, Cost of Living Freeze, Recurrent Disability, Work Retention, Assistance Waiver of Premium
Rehabilitation Incentive	5% for up to 12 months, to a maximum of \$750

Rates and premiums will be shown in the enrollment system.

Resource Advisor (AnthemLife)

Resource Advisor, a member assistance program that's included with your life and/or disability benefit, provides resources and services to support you and your household family members when you need it.

Counseling by phone, face-to-face or LiveHealth Online video chat

When you're feeling stressed, worried or having a tough time, you may want someone to talk to. You and your household family members can call Resource Advisor anytime, 24/7, and talk with a licensed counselor:

- **By phone:** Call 1-888-209-7840.
- **In-person:** Call to set up face-to-face sessions and then schedule with your counselor.
- **Video chat:** Talk with a counselor from the convenience of your home or wherever you have internet access and privacy using LiveHealth Online. To set up a LiveHealth Online visit, call Resource Advisor. We'll give you details about how to schedule a visit, along with a coupon code that gives you LiveHealth Online visits at no extra cost to you.

You can also review a therapist's background and qualifications to help choose one who's available and right for you. Whatever works for you — we're here to help with any concern, no matter how big or small.

You and your family members are eligible for up to three counselor visits for each issue or concern, at no cost to you.

Counselors can help with:

- Stress
- Financial concerns
- Anxiety and depression
- Legal issues
- Identity theft
- Help dealing with illness
- Relationship or family issues
- ID monitoring
- Child care and elder care

Support when you need it

Here are some services you can count on from Resource Advisor:

Financial planning: Call Resource Advisor to set up one-on-one financial counseling with a certified professional financial planner. They can help with issues like retirement planning, saving for a child's education and more.

Legal services: With a call to Resource Advisor, you can get a consultation with an attorney over the phone at no charge. If you want to meet with an attorney in person, the legal consultant can set up an appointment at a discounted fee.

Identity theft recovery and monitoring: Resource Advisor has fraud resolution specialists who can help if your identity is stolen. They can work with creditors, collection agencies, law firms and credit reporting agencies for you for up to one year. You can sign up for ID monitoring, get credit report reviews and place fraud alerts on credit reports no matter how many times your identity is compromised.

Online tools to help with life's issues: The Resource Advisor website has tools to help with many of life's challenges, such as creating a will, parenting, aging, healthy living, household support, referrals, funeral planning and more. Visit www.ResourceAdvisor.Anthem.com and use the program name "AnthemResourceAdvisor" to access resources.

Resource Advisor 1-888-209-7840
www.ResourceAdvisor.Anthem.com

**(Log in with program name
 AnthemResourceAdvisor.)**

Create your will using AnthemLife's simple online tool

It's one of the most important conversations you'll ever have. Making your final wishes clear by creating a will is one of the best ways to protect your loved ones' financial well-being and make their lives easier.

With Resource Advisor, the member assistance program included with your Anthem group life insurance, creating a will is simple and fast. An easy online tool will walk you through the process step by step — creating a will customized for you and specific to your state's laws. It's easy to understand and best of all, it won't cost you extra because it's included on the Resource Advisor website.

Here's how to use the online will tool

1. Go to www.ResourceAdvisor.Anthem.com and sign in using the password you'll get on the login screen.
2. Select **Legal/Financial** from the green menu on the right.
3. Scroll down until you see the NOLO logo. Select **Click here to easily create your simple, state-specific will**. Make sure you note the Coupon Code shown in the first paragraph — you'll need it later.
4. Select the orange **Buy Now** button. Don't worry if it shows a price — your Coupon Code will let you use the will tool at no cost.



5. Enter the Coupon Code in the Discount Codes box. Choose **Apply Coupon**. The cost will now show \$0.00.
6. Fill in your name, address and all required information on the next screen. At the following screen, choose **Go to my document**.
7. To create your will, answer the questions you'll see on screen.
8. Print your will.
9. Sign your will in front of two witnesses.
10. Keep your will in a safe place.

This tool works well for most people with typical assets, such as a house, a car, savings and investments. You'll be able to breathe a big sigh of relief, knowing you're protecting your family and loved ones.

Need more help?

If you have questions for a lawyer, you can call Resource Advisor at 1-888-209-7840. We can arrange a phone call with one at no cost. If you'd rather have a lawyer help write your will, you can get that, too. Call Resource Advisor and we can set up a visit with a lawyer. You'll pay the lawyer's fees, but if Resource Advisor sets up your meeting, you can get a 25% discount.

Why is a will so important?

A will — sometimes called a Last Will and Testament — is a written statement of what you want done with your property. It's also the only way to name a guardian for your children if you die before they're adults. Here are the most common things you can do with a will:

Decide who gets your property and money when you die, including your:

- Home
- Other property
- Money in bank accounts
- Investments
- Retirement accounts
- Financial assets like life insurance and annuities
- Possessions like furniture, art, vehicles and other items

Without a will or other plan, your state laws will determine how your property is distributed after you die. A will that clearly states your wishes can also help avoid arguments over your property and other assets. You can also use your will to take care of any debts or to provide money for someone's education or medical costs. And you can give to charity.

Name a guardian to take care of your children: Even if you have very few assets, you need a will to name a person or people who will take care of your children if you die before they become adults. Without a will, a court will decide.

Name a property manager to take care of property you leave to your children: If you leave property to your children through a will, trust or life insurance policy, it must be managed by an adult. You can leave instructions about how to manage the property, usually through a trust or Uniform Transfer to Minors Act (UTMA) custodianship.

Name an executor: This is the person who'll wrap up your estate after you die. It can be a relative or a trusted friend, or a lawyer, accountant or financial planner you choose. Without a will, a court will appoint someone to do this job.

Name a caretaker for your pet: A will is the simplest way to choose a caretaker for your pet. You can also leave money to that person to help take care of the pet.

Travel Assistance Services (AnthemLife)

When getting ready to travel, most people remember to pack comfy shoes for all the walking they plan to do, a sweater in case it gets chilly and a guide book to find the tourist spots. But what do you do when an unexpected medical emergency happens? No worries. That's already "packed" into your group term life insurance.

We've teamed up with Generali Global Assistance, Inc. (GGA) to help provide a safety net if you or your dependents have an emergency away from home.* Through our travel assistance services, you'll have peace of mind knowing you'll be able to get help if you need it while traveling more than 100 miles from home for 90 days or less (unless you're a full-time student). And since it's already part of your group term life insurance, one phone call can help with your travel needs!

24/7 help is just a phone call away

Travel assistance is available 24 hours a day through the Generali Global Assistance, Inc. Coordination Center, which can offer help in many languages.

With travel assistance, you'll have access to:

- **Emergency medical help**, such as finding doctors, dentists and health care facilities or getting and paying for medical evacuation. All services and transportation must be arranged in advance by GGA.
- **Travel services**, including getting and sending emergency messages, as well as emergency cash advances.
- **Pre-departure information**, such as immunization (shots) and passport needs, and travel alerts.

How does Generali Global Assistance, Inc. travel assistance work?

If you have a life-threatening emergency while traveling, call the local emergency authorities to get help right away. Then, as soon as possible, contact GGA for help. Call the number on your wallet card with any health, personal or travel needs. GGA will take it from there and closely monitor things to see you get the care you need.

Keep in mind that all services must be coordinated and arranged by GGA to be covered.

Some things to remember ...

You can get travel assistance when you're more than 100 miles away from home for 90 days or less. All services, including medical transport, must be arranged in advance by Generali Global Assistance, Inc.. And you may have to pay fees for certain other services GGA provides, such as cash advances.



Travel Assistance Services (AnthemLife)

Here are just some of the things you can count on GGA to help you with when you're traveling:

- **Medical referrals and case reviews:** Get help finding doctors, dentists and health care facilities. Professional case managers, including doctors and nurses, will help make sure you get the right care or decide if you need to be moved. Your medical coverage may cover you overseas, but you may have to find a way to pay for medical services you get. In most cases, GGA can provide the necessary payment guarantee, saving you from having to come up with cash to pay out of pocket, but you must provide a repayment guarantee.
- **Medical evacuation/return home:** If a doctor chosen by GGA decides you should be taken to a different health care facility or go back home for treatment, GGA will arrange that. GGA will also pay for it, up to the program limit of \$1 million for each medical incident (all services combined).
- **Traveling companion assistance:** If someone traveling with you can't continue to do that because of your medical emergency, GGA will arrange to get him or her home. GGA will also pay up to \$5,000 for the most direct route home on economy class airfare.
- **Help with dependent children:** If your dependent under the age of 26 is left alone because you're in the hospital, GGA will set up and pay for transportation home by the most direct route on economy class airfare, up to \$5,000 . GGA will also get and pay for a qualified escort, if needed.
- **Visit by family member/friend:** If you're alone and will be in the hospital seven days in a row, GGA will arrange and pay up to \$5,000 to get one member of your immediate family, or one friend, from his or her home to the hospital. GGA will also pay up to \$150 each day for meals and a place to stay for that person for up to five days.
- **Bringing your remains home if you pass away:** up to \$10,000.
- **Returning your personal vehicle in an emergency.**
- **Returning your pet in an emergency.** If you're traveling with your pet and it's left alone because you're in the hospital or pass away, GGA will arrange and pay for your pet's return home.
- **Replacing medicine and eyeglasses, and finding lost items.** (You must pay the full cost.)
- **Emergency messages:** Give messages to and get them from friends, family members and people you work with.
- **Emergency travel arrangements, cash and legal help/bail:** GGA will advance up to \$5,000 in an emergency, as long as you provide a guarantee of payment and pay any transfer or delivery fees. Legal help and bail require you to provide a guarantee of payment for the bail bond fees and pay the attorney fees. For emergency travel arrangements, you will have to provide a payment/credit card guarantee for all tickets, hotel and rentals.
- **Interpretation/translations:** GGA will help by phone in all major languages or refer you to a service that interprets and translates documents in writing.
- **Help finding lost luggage, documents and personal items.**
- **Help before you travel:** Find out about things like:
 - Visa requirements
 - Passports and immunization (shots) requirements
 - Cultural information
 - Weather conditions
 - Finding an embassy or consulate
 - Foreign exchange rates
 - Travel advisories (warnings)

Want to know more?

With our travel assistance services, you and your family will always have a special travel buddy with you when you need one. Find out more about travel assistance services at [anthemlife.com](https://www.anthemlife.com).



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