

Important Employee Benefit Information



provided by The American Worker®

JDK Management Co. is genuinely pleased and excited to continue offering, to all eligible employees, an affordable limited employee benefit program offered through The American Worker®. This program allows you to choose between three limited employee benefit plans, which is designed to provide coverage for basic healthcare services. We encourage you to review the enclosed information in order to decide which plan is most suitable for you and your family's needs.

KEY FEATURES OF THE PLAN

- Guarantee Issue
- First Dollar Coverage
- No Pre-existing Condition Limitations
- No Deductibles or Co-insurance
- No Networks for Medical Benefits
- No Benefit Waiting Periods
- No Coordination of Benefits - Plan pays in **addition** to other insurance you may have



COVERED SERVICES INCLUDE

- Doctor's Office Visits
- Accidental Injury Care
- Emergency Room Sickness
- Surgical Procedures
- Prescription Benefits
- Discounted Health Services
- Hospital Stays
- Diagnostic Tests, X-Rays, and Lab Work
- Wellness Exams
- Life Insurance



JDK Management Co. employees will use our national call center to enroll for coverage. Our call center is staffed with live customer service representatives who are available to answer benefit questions and immediately enroll you in the plan over the phone.

**Open Enrollment Begins February 2, 2011
and Ends February 16, 2011.**

For an Effective Date of Coverage of February 25, 2011 or March 4, 2011*.

*Activation of plan coincides with your first payroll deduction.

Please call 1-866-866-3424 to enroll today!

The enrollment center is available between the hours of
8:00 AM to 8:00 PM EST Monday through Friday



To all Employees: We are very excited to introduce a new package of EMPLOYEE BENEFIT PLANS. The **AMERICAN WORKER® PLAN** provides **immediate first dollar coverage** with **no deductibles** and **no coinsurance** requirements. This plan is **fully insured** with **no pre-existing condition limitations** and **limited network restrictions***. Benefits are paid directly to the provider, unless you wish to accept reimbursement from the insurance company.

Automatically included in all plans is the valuable Non-Insurance New Benefits Discount Program!

NEW BENEFITS DISCOUNT PROGRAM - Network Use is Required

Pharmaceutical Benefits:
Preferred Generic Drugs - \$10, \$20, or \$40 tier for a typical 30-day supply
Preferred Brand Name Drugs - \$10, \$20, or \$40 tier for a typical 30-day supply
Non-Preferred Brand and Generic Drugs - Discounts averaging 19% off the average wholesale price
 No maximum annual benefit, no deductibles, no claim forms to file, accepted at over 45,000 network pharmacies nationwide

Health Services:
 This program offers savings on health services at a network provider. It also provides employees access to medical information.

Health Service Discounts: **Vision** - Save up to 60% **Chiropractic** - Save up to 50% **Hearing** - Save up to 60%

Medical Information: Access to a **24-Hour Nurse Hotline** Access to **Counseling Services** and Discounts on **Referrals**

	BASIC	PREFERRED	ELITE
Doctor's Office Visits • Calendar Year Maximum	Pays \$40 per Visit, \$300 Maximum per Person	Pays \$50 per Visit, \$300 Maximum per Person	Pays \$60 per Visit, \$360 Maximum per Person
Preventive Care • Calendar Year Maximum	Pays \$50 per Visit, \$150 Maximum per Person	Pays \$75 per Visit, \$150 Maximum per Person	Pays \$150 per Visit, \$150 Maximum per Person
Accident Benefit	\$300 per Occurrence	\$500 per Occurrence	\$1,000 per Occurrence
Diagnostic, X-Ray, & Lab • Calendar Year Maximum	Pays \$40 per Visit, \$300 Maximum per Person	Pays \$50 per Visit, \$300 Maximum per Person	Pays \$60 per Visit, \$360 Maximum per Person
Emergency Room Sickness • Calendar Year Maximum	Pays \$75 per Visit, \$300 Maximum per Person	Pays \$75 per Visit, \$300 Maximum per Person	Pays \$75 per Visit, \$300 Maximum per Person
Surgical Benefit	Not Available	Pays \$500 per Year (According to a Schedule)	Pays \$500 per Year (According to a Schedule)
Hospital Indemnity • Lifetime Maximum	Pays \$100 per Day, 500 Days Lifetime Maximum	Pays \$200 per Day, 500 Days Lifetime Maximum	Pays \$300 per Day, 500 Days Lifetime Maximum
Intensive Care Benefits	Pays \$200 per Day, First 30 Days, \$100 per Day Thereafter	Pays \$400 per Day, First 30 Days, \$200 per Day Thereafter	Pays \$600 per Day, First 30 Days, \$300 per Day Thereafter
Substance Abuse • Calendar Year Maximum	Pays \$50 per Day, 30 Days per Year Maximum	Pays \$100 per Day, 30 Days per Year Maximum	Pays \$150 per Day, 30 Days per Year Maximum
Skilled Nursing Benefits • Calendar Year Maximum	Pays \$50 per Day, 60 Days Maximum per Stay	Pays \$100 per Day, 60 Days Maximum per Stay	Pays \$150 per Day, 60 Days Maximum per Stay
Mental Health (Inpatient) • Calendar Year Maximum	Pays \$50 per Day, \$5,000 per Year Maximum	Pays \$100 per Day, \$5,000 per Year Maximum	Pays \$150 per Day, \$5,000 per Year Maximum
Life and AD&D Insurance • Employee • Spouse (Life Only) • Child (Life Only)	\$5,000 \$2,500 \$1,250	\$5,000 \$2,500 \$1,250	\$5,000 \$2,500 \$1,250
Bi-Weekly Rates			
Employee:	\$23.99	\$34.88	\$44.90
Employee + 1:	\$49.30	\$73.26	\$95.31
Family:	\$59.59	\$88.99	\$116.06

*Network use is required for Non-Insurance New Benefits Discount Program

IMPORTANT NOTICE

This is a Benefit Plan highlight sheet and is not intended to be a complete or legal description of the program of benefits. Complete information is available immediately upon request before you enroll through your employer and will also be provided to you in the certificate of insurance or member benefit booklets for the various programs in which you may voluntarily choose to participate. This program is not intended to replace, nor do we recommend that it replace any comprehensive program of insurance in which you currently participate, or are considering participation in.

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Open Enrollment for a 2/25/11 or 3/4/11 Effective Date* Begins 2/2/11 and Ends 2/16/11

*Activation of plan coincides with your first payroll deduction.

Enrollment Instructions (Toll-Free 1-866-866-3424):

Please have the following information completed before calling Toll-Free 1-866-866-3424, as you will be asked for this information. The enrollment center is available between the hours of 8:00 AM to 8:00 PM EST Monday through Friday.

1. My Employer is: _____
2. My Employment Location is (Street Address): _____ (State) _____ (Zip) _____
3. My Location Number is: _____
4. I would like to ENROLL or DECLINE coverage (Circle one): ENROLL DECLINE
5. My Name is: _____
6. My Social Security Number is: _____ (If declining coverage, stop here)
7. My Date of Birth is: _____
8. My Home Address is (Street Address): _____ (State) _____ (Zip) _____
9. My Life Insurance Beneficiary is (Legal Name): _____
10. I want to enroll in the Medical Plan (Circle one): BASIC PREFERRED ELITE
11. I want coverage for (Circle one): EMPLOYEE ONLY EMPLOYEE + 1 FAMILY
12. My Dependents are (Use separate sheet if you have more dependants):
(Name) _____ (Social Security) _____ (Birth Date) _____
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(Name) _____ (Social Security) _____ (Birth Date) _____
(Name) _____ (Social Security) _____ (Birth Date) _____



Thank you for taking the time to complete the above form.
Please call 1-866-866-3424 to enroll for coverage.

JDK Management Co. is pleased to offer these benefits
in order to promote the health of our employees.

Enrollment at your fingertips