

Your
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2007

Annual Enrollment Guide

Special points of interest:

The information in this Enrollment Guide is presented for illustrative purposes and is based on information provided by the employer. The text contained in this Guide was taken from various summary plan descriptions and benefit information. While every effort was taken to accurately report your benefits, discrepancies or errors are possible. In case of discrepancy between the Guide and the actual plan documents, the actual plan documents will prevail. /all information is confidential, pursuant to the Health Insurance Portability and Accountability Act of 1996. If you have any questions about your Guide, contact Human Resources.

What's Inside

Enrollment Procedures	2
Section 125 & Benefit Election	2
Additional Benefits	2
Medical Benefits	3
Dental Benefits	3
Flexible Spending Account	4
Contacts	4

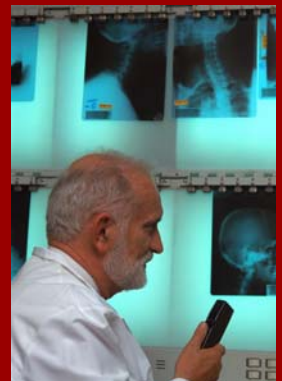
Introduction

Our company offers a comprehensive benefits program to help better prepare you for planned and unplanned life events. We are excited to provide you with the 2007 benefit package. We will continue to provide medical coverage and dental coverage affordable for our employees.

Our benefit package is designed with the understanding that each employee has different needs. That is why we offer you:

- Choice to select the benefits that best fit your needs
- Value to give you the option to purchase only the levels of coverage you need at economical group rates
- Tax advantages to pay for many of your benefits and eligible out-of-pocket expenses with tax free dollars.

Please review this guide to enhance your understanding of the benefit options available to you.



Eligibility

All full-time employees working 30+ hours per week will be eligible effective the first of the month following 90-days.

You may also elect coverage for your dependents including:

- Your legal spouse
- Your unmarried children are:
 - Less than 19 years old
 - 19 years old but less than 25 years and enrolled in school as a full-time student or residing with and fully dependent on parents (proof of their ages and status as students must be submitted)
 - 19 years old but less than 25 years who are incapable of self-sustaining employment by reason of mental or physical handicap and supported primarily by you (proof of their ages and dependence must be submitted)



Enrollment Procedures

The following steps will guide you through the enrollment process.

1. Carefully review the plan information in this benefit enrollment guide and all other plan materials included in your enrollment packet. The insurance carriers' websites also provide important information and tools that can help you make enrollment decisions.
2. Consider the needs of any dependents you may have. If you are married, review any coverage currently offered through your spouse's employer to avoid costly duplicate coverage.
3. If you decide to change your benefit elections, complete and submit the appropriate enrollment form(s) to Human Resources. As a new hire should you decline coverage, you will still need to complete the enrollment form(s) indicating your choice to waive coverage.

Section 125 and Benefit Election Changes

Under Section 125 of the Internal Revenue Service (IRS) code, you are allowed to pay for certain group insurance premiums with tax-free dollars.

However, you must make your benefit elections carefully, including the choice to waive coverage. Your pretax elections will remain in effect until the next annual open enrollment period unless you experience an IRS approved qualifying change in status.

Qualifying change in status events include, but are not limited to:

- Marriage, divorce, or legal separation
- You or your spouse experience a change in work hours that affects benefit eligibility
- Death of spouse or other dependent
- Relocation into or outside of your plan's service area
- Birth or adoption of a child
- A spouse's employment benefits or ends
- A dependent's eligibility status changes due to age, student status, marital status, or employment

Additional Benefits

Basic Group Life Insurance and AD&D

The company provides eligible full-time employees with Group Life and Accidental Death & Dismemberment (AD&D) insurance at one(1) times salary up to \$150,000.

Short-Term Disability

In the event you become disabled from a non work-related injury or sickness, disability income benefits are provided as a source of income.

Benefit % - 60% of salary

Max Weekly Benefit—\$500

Elimination Period: 15th day of accident or sickness

Benefit Duration—24 weeks

Employee Assistance Program (EAP)

This program offers toll free telephone assessments, referrals and counseling, Life Management Services (childcare, eldercare, financial, and pre-retirement). Up to 4 sessions per issue/incident with a licensed counselor.

Medical Benefits Overview

	Plan 1	Plan 2
Doctor Office Visit In-Network	\$25 copay	\$10 copay
Prescription Drugs In Network 30 Day Supply	\$10 generic \$30 brand \$50 non-formulary	\$20 generic \$40 brand \$60 non-formulary
Mail Order Copay 90 Day Supply	\$25 generic \$75 brand \$125 non-formulary	\$30 generic \$85 brand \$135 non-formulary
Urgent Care In-Network	\$50 copay	\$50 copay
Emergency Room In-Network	\$150 copay	\$100 copay
Out Patient Surgery In-Network	10% after calendar year deductible	20% after calendar year deductible
Lab Tests/X-rays In-Network	20% after calendar year deductible	20% after calendar year deductible
Hospital Charges In-Network	Subject to Deductible & Coinsurance \$0 copay	Subject to Deductible & Coinsurance \$10 copay
Calendar Year Deductible In-Network	Individual/Family \$1,000/\$2,000	Individual/Family \$500/\$1,000
Co-Insurance In-Network	80%	90%
Out-of-Pocket Maximum In-Network	Individual/Family \$4,000/\$8,000	Individual/Family \$2,000/\$4,000
Lifetime Maximum Benefits	Unlimited	Unlimited

Dental Benefits Overview

	Plan 1	Plan 2
Preventive Service	Office Visit, Exams, Cleanings In: 0% Out: 10%	Office Visit, Exams, Cleanings In: 0% Out: 10%
Basic Services	In: 0% after CYD Out: 20% after CYD	In: 10% after CYD Out: 30% after CYD
Major Services	In: 75% after CYD Out: No Benefit	In: 40% after CYD Out: 50% after CYD
Deductible: Individual/Family	In: \$50/\$150 (basic & major services) Out: \$100/\$300 (basic & major services)	In: \$50/\$100 (basic & major services) Out: \$50/\$150 (basic & major services)
Annual Maximum	\$1,000	\$1,000
Late Entrants Waiting Period	If you do not elect coverage when you first become eligible after the waiting period and you elect at a later date, you will be subject to a waiting period for basic services (6 months) and major services (12 months).	

Flexible Spending Accounts (FSA)

The company provides you the opportunity to pay for out-of-pocket medical, dental, vision, and dependent care expenses with pre-tax dollars through the Flexible Spending Account. You must enroll/re-enroll in the plan to participate for each plan year. You can save approximately 25% of each dollar spent on these expenses when you participate in the FSA. Health Reimbursement Account expenses are limited to \$1,000 per plan year. Dependent Care Reimbursement Account expenses are limited to \$5,000 per plan year, or \$2,500 if married and filing separately. The following chart lists some of the items eligible and will help you calculate your annual reimbursable expenses for the upcoming plan year.

Health Reimbursement Account Expenses

Medical		Vision		Dental		Dependent Care	
Deductibles	\$	Exams	\$	Routine Exam	\$	Children	\$
Copays	\$	Eye Surgery	\$	Fillings/Crowns	\$	Adults	\$
Prescriptions	\$	Lenses/Frames	\$	Orthodontics	\$		
Other	\$	Contacts/Solutions	\$	Other	\$		
Total	\$	Total	\$	Total	\$	Total	\$

Estimated Annual Expenses & Tax Savings

Total Medical, Vision, & Dental Expenses	\$
Total Dependent Care Expenses	+ \$
Total Expenses	\$
Tax Bracket Percentage (see right)	x %
Annual Tax Savings	\$
Number of Pay Periods	÷
Estimated Savings Amount Per Pay Check	\$

Tax Estimate Table

Annual Household Earnings	Estimated Tax Rate
< \$30,000	25%
\$30,000—\$40,000	29%
\$40,000—\$70,000	31%
> \$70,000	33%
* Based on Social Security, federal, and state income taxes. Rates are estimates based on national averages and may not reflect your actual tax rate.	

Contacts

Medical	800-555-1212	Policy #	website
Dental	800-555-2323	Policy #	website
Additional Coverages	800-555-3434	Policy #	website
Flexible Spending Account	800-555-4545	Policy #	website
Human Resources	813-555-5656	Contact Name	Email address/website