

2026 DRIVER BENEFIT GUIDE

June 2026 – May 2027

***Your* benefits, *your* story**

Benefits to fit your unique situation.

F & W TRANSPORTATION INC.
AUGUSTA GA.



A NOTE FROM LEADERSHIP:

We strive to provide you and your family with a comprehensive and valuable benefits package that enables you to have a better life. We invite you to review the information in this booklet to gain a better understanding of how these benefits can support you and your family.

BENEFIT ELIGIBILITY & ENROLLMENT

- What's Changing This Enrollment
- Eligibility
- Enrollment Blueprint

PHYSICAL & MENTAL HEALTH

- Medical & Prescription Drug
- Dental
- Vision
- Employee Assistance Program (EAP)
- Life and AD&D
- Disability

RESOURCES

- Contact Information
- TrueAdvocate Team
- Important Notices Regarding Your Medical Plan

Disclaimer

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 always 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. ***The information provided in this summary is for comparative purposes only. Actual claims paid are subject to the specific terms and conditions of each contract. This benefit summary does not constitute a contract.*** *The information in this booklet is proprietary. Please do not copy or distribute to others.*

Created by TrueNorth Companies, LC for F&W Transportation



WHAT'S CHANGING?

Every year, F&W Transport reviews the benefit package offering to ensure you and your family have access to benefits that best fit your needs. Changes listed below will be in effect June 1, 2026 through May 31, 2027.

Medical & Rx:

- Moving to Gravie

Dental

- Moving to Reliance Standard

Vision:

- Moving to Reliance Standard

FSA:

- Moving to WEX

Life:

- Staying with Greater Georgia Life

Disability:

- Staying with Greater Georgia Life



BENEFITS ELIGIBILITY

Who is eligible to participate?

- Full-time employees working an average of 30 hours per week
- Your legal spouse
- Your unmarried dependent child (natural, adopted or step) up to age 26

When does coverage start?

- New Hire coverage starts 1st of the month following your date of hire.

When can I enroll in or make changes to benefits?

- **New Hires:** Must submit your elections within 30 days of hire date
- **Qualified Life Events:** Must notify Human Resources with 30 days of the event. Coverage goes into effect on the date of event. Some examples of qualified events include:
    - Gain or loss of eligibility for another employer's coverage
    - Marriage
    - Divorce or legal separation
    - Birth of your child, adoption or placement for adoption
    - Death
    - Change in employment status that impacts your eligibility for benefits
    - Child support order
    - New entitlement or loss of Medicare or Medicaid (60 days to notify HR)
- **Open Enrollment**: Occurs annually with an effective date of June 1st



YOUR ENROLLMENT BLUEPRINT

Here are some last-minute reminders:

STEP 01

EVALUATE YOUR OPTIONS

- Review available benefit options for the year.
- Use carrier resources and tools to make decisions.

STEP 02

ENROLL IN YOUR BENEFITS

- **https://flimp.live/fandw_drivers**
- Be mindful of your enrollment deadline!

STEP 03

NEED HELP DECIDING?

Contact TrueNorth's TrueAdvocate Team

Phone: 888-655-9980

Email: trueadvocate@truenorthcompanies.com

MEDICAL & RX

Administered by Gravie

The medical insurance benefit that uses a network of providers, hospitals, and pharmacies to provide employees and their families access to quality healthcare and protection against the cost of illness or injury.

Use In-Network Providers for the best value! Visit www.gravie.com to search for providers.

IN-NETWORK BENEFITS	Plan 1 – ComfortFit $7,900	Plan 2 – Copay $1,600	Plan 3 – Copay $6,500
Deductible	N/A for No Cost Services	$1,600 Single $3,200 Family	$6,500 Single $8,500 Family
Coinsurance	N/A	20/80%	20/80%
Out of Pocket Maximum	$7,900 Single $15,800 Family	$6,000 Single $12,000 Family	$8,500 Single $17,000 Family
Office Visit Copay	No Cost	$30 PCP $50 Non-PCP $75 Urgent Care	$30 PCP $50 Non-PCP $75 Urgent Care
Preventive Office Copay	Covered at 100%	Covered at 100%	Covered at 100%
Emergency Room Copay	$950 copay	$500 copay	$500 copay
Prescription Drug			
Deductible	Included with Medical	Included with Medical	Included with Medical
Tiers 1-5	$0 / $75 / $100 / $150 / $200 / Cost share with SaveOn	$10 / $20 / $50 / $100 / $200 / Cost share with SaveOn	$10 / $20 / $50 / $100 / $200 / Cost share with SaveOn
Weekly Rates	PLAN 1	PLAN 2	PLAN 3
Employee	$84.00	$96.05	$45.00
Employee + Spouse	$283.00	$304.02	$253.37
Employee + Child(ren)	$198.00	$227.30	$173.81
Employee + Family	$494.16	$508.78	$430.01

gravie



Decode Your Copay Plan Benefits

Your employer partners with Gravie to bring you our Copay plan that you can use to access healthcare services. With a Copay plan, you typically have to pay a copay for certain services or meet your deductible and/or out-of-pocket maximum before the health plan begins paying for eligible services. However, any costs for out-of-network services will not count towards your out-of-pocket maximum.

No-cost services

- Preventive services
- Routine maternity care in a doctor's office
- Teladoc virtual general medicine visits
- Specialty prescriptions with SaveOn
- Teladoc mental health visits
- Sword Thrive

OTHER SERVICES
(Cost sharing may vary by service)

- Primary visit
- Specialist visit
- Urgent care
- Emergency room
- Generic and preferred brand prescriptions

How it works

Choose the plan with the monthly premium and annual out-of-pocket maximum that works for you. Then, get care when you need it. Our Copay plan covers select in-person and many virtual healthcare services at no cost, empowering you to prioritize your health. We're here to support you in maximizing the benefits of your plan so you can focus on preventive care, early diagnosis, and ongoing maintenance.

See how a Copay plan may work throughout your year:

- Taylor has a **$0 annual checkup** as part of their preventive care.
- Later, they **visit a dermatologist and pay their copay.**
- Then, they go to **urgent care** a few months later **after they've met their deductible**, and **the visit is covered**.

Because we really do care

Every member gets Gravie Care® — support from a dedicated team of experts available to help you navigate the complexities of health benefits and make the most of your plan year-round. Need help understanding your coverage options? Finding a new doctor or specialist? Reading claims and EOBs? Gravie Care has you covered.

> Once you've enrolled, access your plan resources at member.gravie.com

Frequently asked questions

What are my plan options?

Your employer may offer additional Gravie health plans alongside our Copay plan. Review the Plan Options flyer from your employer for a detailed breakdown of your coverage options. If you have questions about which plan to choose, Gravie Care can help you compare them.

When can I enroll?

Your employer will establish an annual **open enrollment period**. During this time, eligible employees can enroll in health benefits coverage or make changes. Employees who become eligible mid-year will have an opportunity to enroll during onboarding. Employees can also enroll in coverage or make changes within 30 days of experiencing a qualifying life event. Common examples of life events include losing other group coverage, exhausting COBRA, marriage, birth or adoption of a child. If you have questions about qualifying life events, contact Gravie Care.

How do I pay for my health plan?

Your monthly premium payments are paid automatically via payroll deduction.

How do I check if my provider is in-network?

During the enrollment process, you can check which providers are in-network using a specific provider directory link for each plan you review.

GRAVIE care

Visit: gravie.com/gravie-care

Do I have to enroll in a plan through Gravie?

It's up to you! If you have access to health benefits through a spouse, parent, or other means, you can waive coverage. Your employer or Gravie Care can provide you with the waiver form.

Can my spouse and/or family be covered?

Yes! You can add your spouse and/or dependents under the age of 26 to your health plan.

Ready to get started?

- Your employer will tell you when your enrollment period is.
- During that time, choose your health plan and complete enrollment.
- Access your plan resources at member.gravie.com.

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comfortfit™

Health benefits you can actually use

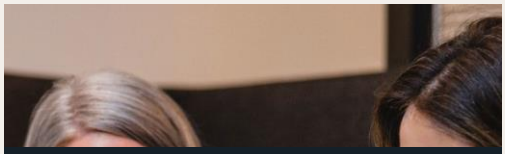
Your employer partners with Gravie to bring you ComfortFit, giving you access to the healthcare services and support you need to live a healthier, happier life. From comprehensive coverage to personalized virtual care, this plan is designed with you in mind.

No hidden costs. No surprise bills.

Preventive care is no-cost per ACA guidelines. The following services are also no-cost when accessed in a clinic or doctor's office.

Preventive care	No cost
Specialist visit	No cost
Urgent care visit	No cost
Generic prescriptions	No cost
Virtual services	No cost
Mental health care	No cost
Physical therapy	No cost
Specialty prescriptions with SaveOn	No cost
Speech therapy	No cost
Emergency room visit	$950 copay
Brand prescriptions	If no generic equivalent exists, $75 (30-day) or $150 (90-day); if generic exists, full price until OOPM
Non-preferred brand prescriptions	If no generic equivalent exists, $100 (30-day) or $200 (90-day); if generic exists, full price until OOPM.
Basic labs & imaging (X-rays & ultrasounds)	No cost
Advanced labs and imaging	No cost after OOPM

And more



How it works

You choose your out-of-pocket maximum and get care when you need it. With ComfortFit, you are able to prioritize your health so you can focus on maintenance, prevention, and getting diagnosed earlier.

$0

Taylor hurts his ankle on a run. He visits an orthopedic specialist in a doctor's office for a checkup.

Because we really do care

Every member gets Gravie Care®, which includes support from a dedicated team of experts available to help you navigate the complexities of health benefits and make the most of your plan year round. Need help understanding your coverage options? Finding a new doctor or specialist? Reading claims & EOBs? Gravie Care has you covered.

Once you've enrolled, access your plan resources at member.gravie.com.

Connect with Gravie Care.

Visit gravie.com/gravie-care

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When can I enroll?

Your employer will establish an **annual open enrollment period** when eligible employees can enroll in coverage or make changes. Employees who become eligible mid-year will have an opportunity to enroll during onboarding. Employees can also enroll in coverage or make changes within 30 days of experiencing a qualifying life event. Common examples of life events include losing other group coverage, exhausting COBRA, marriage, birth, or adoption of a child. If you have questions about qualifying life events, contact Gravie Care.

How do I pay for my health plan?

Any premium responsibility after your employer's contribution will be deducted via payroll.

How do I check if my provider is in-network?

You'll have access to provider search links during the enrollment process to confirm that your providers are in network.

Do I have to enroll in a plan through Gravie?

It's up to you! If you have access to health benefits through a spouse, parent, or other means, you can waive coverage. Your employer or Gravie Care can provide you with the waiver form.

Can my spouse and/or family be covered?

Yes! You can add your spouse and/or dependents under the age of 26 to your health plan.

Ready to get started?

1. Your employer will communicate your enrollment period.
2. During that time, choose your health plan and complete enrollment.
3. Access your plan resources at member.gravie.com

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Talking about your health plan with providers

Regardless of if you're a new patient or are using your benefits for the first time, your provider may not be familiar with Gravie yet. **Review our tips to help you discuss your new health plan and navigate using your ID card with your provider.**

Who is Gravie?

We process and pay your medical claims. Gravie Administrative Services LLC is a licensed third-party administrator (TPA) that manages self-funded health plans for employers across the U.S.

The network

To ensure you have access to care no matter where you are, we've partnered with **Aetna Signature Administrators**, which provides the primary network for your health plan.

If your provider accepts **Aetna Signature Administrators**, then you can go ahead and use your Gravie benefits!

Does your provider need help?

You have several options to help resolve any issues your provider may have working with Gravie:

1. **You can request help with a provider directly in the member portal and app.**
   - Contact Gravie Care® directly in our app or in the member portal.
   - Simply add your provider's information to the submission form, alongside the description of their request.
   - Gravie Care will reach out to your provider on your behalf to resolve the issue.

Scan the QR code to submit a provider help request in the Gravie app.

2. **Providers can work with Gravie through Availity.**

   Availity allows providers to verify benefits, submit claims, check claim status, and view coverage and remittance details in the Availity portal.

3. **Your provider can verify your eligibility at gravie.com/providers/eligibility 24/7.**

   Our search tool lets your provider verify your eligibility and benefit details in real time. We recommend sharing this website with your provider before your appointment or when you visit their office to help prevent any delays.

4. **Scan the QR code on the back of your membership card.**

   If you or your provider would like to see a breakdown of your exact plan benefits and health network, use your smartphone camera to scan the QR code on the back of your membership card. This is a great resource to share with a curious provider.

Navigating your ID card

Your provider will use your membership card to verify benefits and submit claims for processing. **Have it on hand when you access care.**

Forget your card? No problem. You can easily view or download a digital version from your Gravie account or the Gravie mobile app at any time.



1. **Plan information**
   This section identifies some basic details, like who sponsors your health plan (your employer), and when it starts.

2. **Who's covered**
   As the subscriber (employee), your name and unique 9-digit member ID number appear first, ending in 00. Any enrolled dependents appear below.

3. **Network logos**
   Your primary and secondary network logos appear here.

4. **Pharmacy information**
   Express Scripts® is Evernorth's pharmacy benefit manager (PBM) for your health plan. The Rx numbers are used by pharmacists to verify your prescription coverage and submit pharmacy claims.

View your Gravie account to discover more plan resources.

Log in at member.gravie.com or through the Gravie mobile app.

- Search for in-network providers
- Confirm how medications are classified
- Find quick-reference materials or detailed plan documents
- Review claims and EOBs to see how your benefits are being applied
- And more!

GRAVIE care

Have questions?

Gravie Care has you covered!

Visit:
gravie.com/gravie-care

Secure message:
member.gravie.com/contact

Preventive Care 101

One of the best ways to stay healthy and save on healthcare costs is to take advantage of preventative care services, available to you at no additional charge when received in-network.



With Gravie, your access to preventive care services goes beyond an annual wellness exam, to include select health screenings, vaccinations, select counseling services, and more.

General health

- Common preventive services, often received as part of an annual physical or wellness exam
- Tobacco use screening and counseling
- Blood pressure and cholesterol screenings
- Fall risk screen (for adults 65+ in a community setting)
- Obesity screening and counseling
- Low-dose statins for adults
- Sexually transmitted infection (STI) prevention counseling
- HIV acquisition prevention
- Hepatitis C infection Screening
- Latent tuberculosis infection screening
- Diabetes screening
- Hepatitis B screening
- HIV testing

Women's care

- Annual well-woman exam
- Contraception (FDA-approved contraceptive methods, sterilization procedures, and patient education and counseling)
- Bone density screenings

Pregnancy care

- Routine prenatal care
- Breastfeeding support and counseling
- Folic acid supplements
- Gestational diabetes screening
- Preeclampsia prevention and screening
- Intimate partner violence screening

Vaccinations

- Chickenpox (Varicella)
- Diphtheria
- Flu (influenza)
- Hepatitis A
- Hepatitis B
- Human Papillomavirus (HPV)
- Measles
- Meningococcal
- Mumps
- Whooping Cough (Pertussis)
- Pneumococcal
- Rubella
- Shingles
- Tetanus
- Respiratory Syncytial Virus
- COVID
- Rotovirus
- Polio

Preventive Care 101,

continued



Children's care

- Well-baby and well-child exams
- Recommended childhood immunizations (chickenpox/varicella, diphtheria, tetanus, measles, mumps, RSV, rubella, etc.)
- Autism screening
- Behavioral assessments
- Blood pressure screening
- Healthy diet and obesity counseling
- Hearing and vision screenings
- Lead screening
- Phenylketonuria (PKU) screening for newborns

Cancer prevention

- Colorectal cancer screening
- Lung cancer screening
- Breast cancer screening
- Breast cancer genetic test counseling (BRCA)
- Cervical cancer screening

Mental health and drug abuse

- Alcohol misuse screening and counseling
- Depression screening
- Maternal depression screening for mothers at well-baby visits

Expanded preventive care

(not required by the ACA, but still covered at 100% in-network for certain conditions):

- Prostate-Specific Antigen (PSA) blood tests and digital rectal examinations
- Retinopathy screening
- Hemoglobin A1c testing
- International Normalized Ratio (INR) testing
- Low-density Lipoprotein (LDL) testing

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Now there are even more reasons to love your health plan

With Gravie, **you get access to best-in-class virtual care** that empowers you to lead a healthier life.

sword thrive

Gravie health plan members (13+) have access to Sword Thrive. Thrive's clinical-grade digital physical therapy program helps members overcome musculoskeletal (MSK) pain through personalized care from licensed physical therapists and innovative sensor-based technology. Unlike traditional physical therapy, members can access treatment wherever and whenever it's convenient.

Teladoc HEALTH

Gravie health plan members have access to virtual care including general medicine and mental health (18+) through Teladoc Health, the world leader in whole-person virtual care. Mental health care includes clinical services such as psychiatry and therapy visits.

Cost sharing may apply depending on plan type. Check your benefits summary for more information.

Gravie partners with industry leaders to give you access to a suite of digital services that aim to **enhance your health and wellness journey.**

For many Gravie health plan members, these services are included at **no additional cost**. Check your benefits summary for more information.

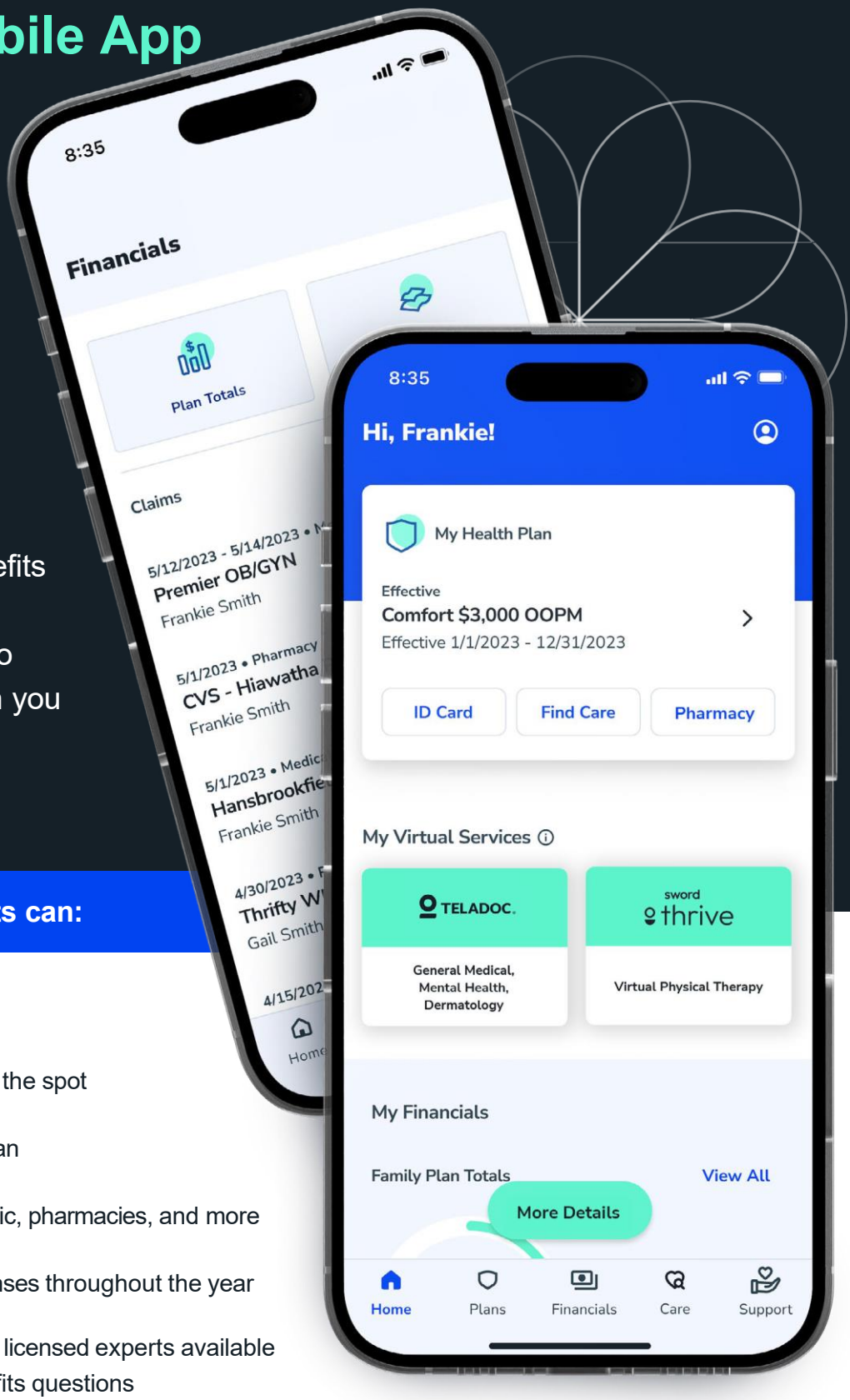
Sign up for these services by logging in to your Gravie account at member.gravie.com or on the Gravie mobile app.

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MORE BENEFITS. FEWER ASTERISKS.

The Gravie Mobile App



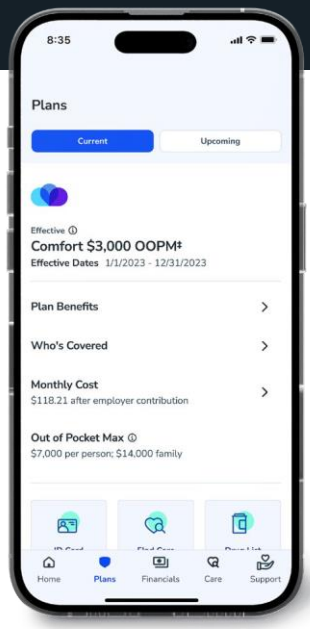
All your favorite Gravie benefits in one simple place. Use the Gravie app from anywhere to get the care you need, when you need it.

You and your dependents can:

- **Access your digital ID card** on the spot
- **See what's covered** by your plan
- **Find in-network** providers, clinic, pharmacies, and more
- **Review claims** and track expenses throughout the year
- **Connect with Gravie Care®** — licensed experts available to answer all your health benefits questions

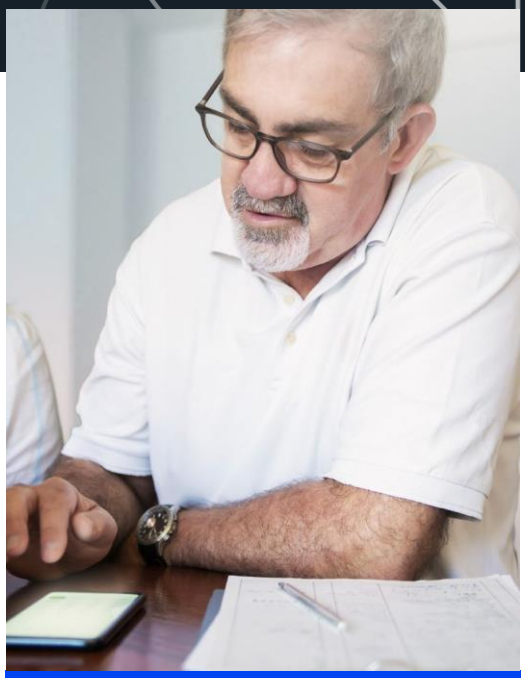
What you'll find in the Gravie app

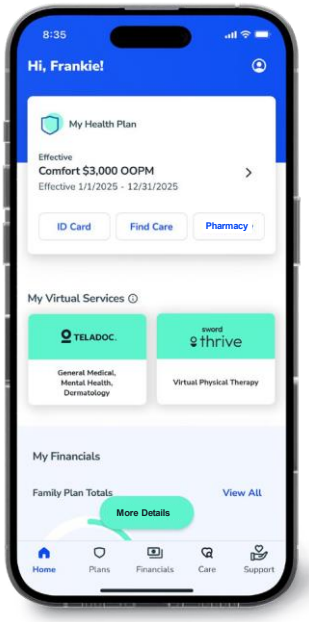
App features may vary based on a variety of eligibility and enrollment factors.



comfort

Members and their dependents enrolled in Comfort® can view the list of no-cost services — including primary care, mental health care, specialist visits, labs & imaging, generic drugs and more.





Best-in-class virtual care that meets you where you are

- General medical, dermatology and mental health care through Teladoc
- Clinical-grade digital physical therapy for treatment of back, joint, and muscle pain through Sword Thrive

Teladoc HEALTH sword thrive

Download the app by visiting the App Store or Google Play. You will be prompted to log in using your **member.gravie.com** credentials, or create your account if you haven't logged into Gravie before.

Download on the App Store GET IT ON Google Play

Use the QR codes to visit either the App Store or Google Play store.

If you need help:

Visit: gravie.com/gravie-care

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MORE BENEFITS. FEWER ASTERISKS.

GRAVIE pay

Just another way we're improving how people purchase and access healthcare.

Gravie Pay improves access to healthcare by allowing you to pay for out-of-pocket medical expenses at your own pace.



Simple, streamlined, flexible

- No cost to you
- No interest
- No credit check
- Available through Gravie's member site
- Powered by Paytient
- Supported by Gravie Care™

Get care

Get the care you need, including medical procedures and prescriptions that are subject to your out-of-pocket responsibility.

Initiate Gravie Pay

Access Gravie Pay through your member account and use Gravie Pay to pay your portion of bills you receive from your provider.

Repayment

Select a monthly repayment plan that works for you, paying at your own pace without fees or interest.

Questions? Call 866.863.6232 or send a secure message at member.gravie.com/contact

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GRAVIE care.

Sometimes you have questions about your health benefits. That's why there's Gravie Care.

Gravie Care isn't just another customer call center. Our trained Gravie Care advocates are on your side, ready to answer questions big and small.

Have questions?

Visit: gravie.com/gravie-care

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FLEXIBLE SPENDING ACCOUNTS

Administered by WEX

AN FSA CAN HELP YOU

use pretax money to pay for certain out-of-pocket health expenses or dependent care expenses.

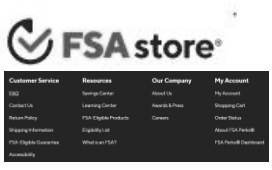
HEALTH CARE FLEXIBLE SPENDING ACCOUNT (FSA)

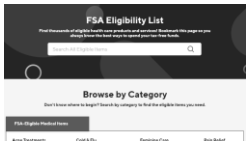
Eligibility rules	If you are **enrolled in a High-Deductible Health Plan** (HDHP) you can only enroll in a **Limited Flexible Spending Account**		
Maximum contributions	Healthcare: $3,400 Dependent Day Care: $7,500		
Pre-tax contributions?	Yes		
Eligible Expenses Beyond your plan coverage	• Medical • Dental • Vision • Prescription • Dependent care	For **Health Care and Limited FSAs** download a full list from the IRS - Publication 502.	For information on **Child and Dependent Day Care Expenses** download the IRS Publication 503
Availability of funds	Healthcare and Limited: Available on day 1 Dependent Day Care: Funds must accumulate before using		
Use it or lose it?	Yes.		
Can take it with you if you leave the company?	No		

START WITH THE RIGHT TOOLS:

FSAstore.com provides lists of eligible purchases using your account, as well as help to understand, manage and use this great benefit!

GETTING STARTED





FSAstore.com/FSA-Eligibility-List.aspx

DENTAL

Administered by Reliance Standard

Dental care is an important part of your overall health. This plan provides you with no-cost, in-network preventive care, as well as coverage for basic care and major procedures.

Use In-Network Providers for the best value! Visit www.reliancestandard.com to search for providers.

SERVICES	LOW PLAN	HIGH PLAN
Preventive Services	100% covered	100% covered
Deductible	$50 Single / $150 Family applies to Basic & Major services	$50 Single / $150 Family applies to Basic & Major services
Annual Maximum	$1,000 per person per year	$1,200 per person per year
Basic Services	You pay 20% coinsurance (after deductible), plan pays 80%	You pay 20% coinsurance (after deductible), plan pays 80%
Major Services *	You pay 50% coinsurance (after deductible), plan pays 50%	You pay 50% coinsurance (after deductible), plan pays 50%
Orthodontic For dependent children up to age 19	You pay 50% coinsurance (after deductible), plan pays 50% coinsurance, up to a lifetime maximum of $1,000	You pay 50% coinsurance (after deductible), plan pays 50% coinsurance, up to a lifetime maximum of $1,250

Weekly Rates	Low	High
Employee	$4.54	$5.33
Employee + Spouse	$9.10	$10.67
Employee + Child(ren)	$12.63	$14.81
Employee + Family	$17.19	$20.15

* 12 month waiting period applies
Refer to the plan certificate to determine if a procedure is considered Basic or Major

VISION

Administered by Reliance Standard

Enroll in vision coverage to save money on eligible vision care expenses, such as eye exams, glasses and contact lenses.

Use In-Network Providers for the best value!
Visit www.reliancestandard.com to search for providers.

SERVICES	IN-NETWORK
Exam 1 every 12 months	$10
Eyeglasses	
Frames 1 every 24 months	$130 allowance and 20% discount off the balance
Lenses 1 every 12 months	Single Lined-$20 Bifocal Lined-$20 Trifocal-$20 Lenticular-$20
Contacts	**Please note:** Contact lenses are in place of lenses and frame.
Elective Contacts 1 every 12 months	$130 allowance and 15% discount off the balance
Medically Necessary 1 every 12 months	100% Covered

Weekly Rates	
Employee	$1.44
Employee + Spouse	$2.82
Employee + Child(ren)	$2.43
Employee + Family	$3.81

LIFE / AD&D

Administered by Greater Georgia Life

Life insurance provides your named beneficiary(ies) with a benefit in the event of your death. Accidental Death and Dismemberment (AD&D) insurance provides specified benefits to you in the event of a covered accidental bodily injury that directly causes death or dismemberment (i.e., the loss of a hand, foot or eye).



Designate Your Beneficiary(ies)

Designate your beneficiary(ies) and review them annually to ensure they are up to date.

BASIC LIFE / AD&D (COMPANY-PAID)

This benefit is provided at **NO COST** to you.

LIFE AND AD&D BENEFIT	
Life and AD&D	$15,000
Age Reduction	By 35% at age 65 50% at age 70. All coverage terminates at retirement.

DISABILITY (COMPANY-PAID)

Long-term disability insurance provides you benefits to replace part of your lost income when you become unable to work due to a covered injury or illness.

LONG – TERM DISABILITY BENEFIT	
Benefits Begin	180-day Elimination Period
Benefits Payable	Social Security Normal Retirement Age (SSNRA)
Monthly Percentage of Income Replaced	50%
Maximum Benefit	Monthly Maximum of $1,000

Evidence of Insurability (EOI): If you are a late enrollee or requested coverage over the Guaranteed Issue amount, your coverage may require an additional approval from the insurance company. Please note you are considered a late enrollee if you did not elect coverage when initially offered.



ADDITIONAL PROTECTION

EMPLOYEE ASSISTANCE PROGRAM (EAP)

You have access to easy, **convenient and confidential** experienced clinicians and professional staff **24 hours a day**.

The Employee Assistance Program (EAP) is **available to all employees and members of your household**, whether you are enrolled in a medical plan or not.

The EAP can help with challenges like:

- mental wellness
- financial planning
- retirement planning
- stress & anxiety
- substance abuse
- and more

100% CONFIDENTIAL SUPPORT:

- Addictive Behaviors
- Alcohol Abuse
- Anger Management
- Anxiety
- Caregiver Support
- Dependent Care Issues
- Depression
- Drug Use and Abuse
- Family/Marital Problems
- Financial Issues
- Grief and Loss
- Legal Problems
- Organization Change
- Relationship Concerns
- Stress-Related Concerns
- Work-Life Balance

CONTACT THE EMPLOYEE ASSISTANCE PROGRAM:

Phone: 888-209-7840
Website: www.resourceadvisor.anthem.com

RESOURCES

Coverage	Carrier/Plan Sponsor	Phone & Website
Physical & Mental Health		
Medical & Prescription Drugs	Gravie	844-540-8701 www.gravie.com
Spending Accounts	Wex	833-225-5939 www.one.wexinc.com
Dental	Reliance Standard	800-497-7044 www.reliancestandard.com/dental-and-vision/
Vision		
Life Insurance	Greater Georgia Life	800-813-5682 www.anthem.com
Disability Insurance		
Employee Assistance Program	Resource Advisor	888-209-7840 www.resourceadvisor.anthem.com

BENEFITS VOCABULARY

WELCOME TO YOUR BENEFITS!

To better understand your coverage, it's helpful to be familiar with **benefits vocabulary**. Take a moment to review these terms, which may be referenced throughout this guide.

Balance Bill – When a health care provider bills a patient for the difference between what the patient's health insurance chooses to reimburse and what the provider chooses to charge.

Copay – A fixed dollar amount you pay the provider at the time of service; for example, a $25 copay for an office visit or a $10 copay for a generic prescription.

Coinsurance – The percentage paid for a covered service, shared by you and the plan. Coinsurance can vary by plan and provider network. Review the plans carefully to understand your responsibility. You are responsible for coinsurance until you reach your plan's out-of-pocket maximum.

Deductible – The amount you pay each calendar year before the plan begins paying benefits. Not all covered services are subject to the deductible; for example, the deductible does not apply to preventive care services.

Emergency Room Care – Care received at a hospital emergency room for life- threatening conditions.

In-Network Care – Care provided by contracted doctors within the plan's network of providers. This enables participants to receive care at a reduced rate compared to care received by out-of-network providers.

Out-of-Network Care – Care provided by a doctor or at a facility outside of the plan's network. Your out-of-pocket costs may increase and services may be subject to balance billing.

Out-of-Pocket Maximum – The maximum amount you pay per year before the plan begins paying for covered expenses at 100%. This limit helps protect you from unexpected catastrophic expenses.

Premium – The complete cost of your plans. You share this cost with your employer and pay your portion through regular paycheck deductions.

Preventive Care – Routine health care including annual physicals and screenings to prevent disease, illness, and other health complications. In-network preventive care is covered at 100%.

Urgent Care – Urgent care is not the same as emergency care. Visit urgent care for sudden illnesses or injuries that are not life-threatening.

Urgent care centers are helpful when care is needed quickly to avoid developing more serious pain or problems.

Preferred generic drugs – Generic drugs have the same active ingredients and work the same way as the brand-name drugs they copy. They usually cost less than the brand-name versions.

Preferred brand drugs – These drugs are included in a plan's list of covered drugs and may not have a generic version. They cost more than generic drugs but less than non-preferred brand drugs.

Specialty drugs – These drugs are used to treat ongoing health conditions and can be costly. They often require special handling and may have to be ordered through a specialty pharmacy.

MEC Plan – Minimum Essential Coverage. A MEC plan is health insurance that meets the federal government's standard for coverage.

BENEFITS 101

Deductible

Amount you pay for healthcare **BEFORE** your insurance starts to pay.

Coinsurance (aka Cost Share)

A **percentage** of the cost of care you are responsible to pay for **AFTER** you have met the deductible.

Co-Payment (aka Copay)

Fixed amount of money you pay each time you or your dependents receive care.

Out of Pocket Maximum (OPM)

Greatest amount of money you can spend on healthcare for the year.

- Does not include premiums or costs that your insurance plan does not cover.



DEDUCTIBLE

COINSURANCE

COPAYMENT

Out of Pocket Maximum



DO YOU HAVE QUESTIONS ABOUT YOUR BENEFIT PROGRAMS AND AREN'T SURE WHO TO CONTACT?

THE TRUENORTH TRUEADVOCATE TEAM IS HERE TO HELP!

You can contact one of our Advocates
Monday – Friday from 7:30 am – 5:00 pm CT

Our team can assist with:

- Benefit coverage questions
- Ordering an ID card
- Claim questions and explanation of benefits
- Finding a form
- Provider search
- Choosing a plan that works for you

(888) 655-9980

trueadvocate
@truenorthccompanies.com

F & W TRANSPORTATION INC.
AUGUSTA GA.

TRUE NORTH
Insurance and Financial Strategies



REQUIRED ANNUAL NOTICES

IMPORTANT NOTICES FROM F&W TRANSPORTATION REGARDING THE GROUP HEALTH PLAN

In compliance with insurance regulations, we provide information regarding the health benefits we offer and what options you have as an employee.

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