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# Employee Benefits Program

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## A Summary of Your Employee Benefits Effective September 1, 2009

### Benefits Include:

- Medical Insurance
- Basic Term Life/AD&D Insurance
- Voluntary Term Life/AD&D Insurance
- Financial Planning
- Contact Information

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BENEFIT SUMMARY	HSA Plan MH2	
	<u>In-Network</u>	<u>Out of Network</u>
<b>CALENDAR YEAR DEDUCTIBLE (CYD)</b>		
Individual	\$3,000	\$6,000
Family	\$6,000	\$12,000
	<b>Embedded</b>	
<b>PLAN COINSURANCE</b> <i>(After Copay/ Deductible)</i>	100%	70%
<b>OUT-of-POCKET MAXIMUM</b> <i>(Includes Deductible)</i>		
Employee	\$3,000	\$12,000
Family	\$6,000	\$24,000
<b>OFFICE VISIT</b>	Ded	Ded + 30%
<b>SPECIALIST VISIT</b>	Ded	Ded + 30%
<b>HOSPITAL</b>		
In-Patient	Ded	Ded + 30%
Out-Patient (Surgery)	Ded	Ded + 30%
<b>EMERGENCY ROOM (Facility Only)</b>	Ded	Ded + 30%
		<i>(Waived If Admitted)</i>
<b>URGENT CARE</b>	Ded	Ded + 30%
<b>RETAIL PRESCRIPTIONS</b>		<b><u>30-Day Supply</u></b>
Generic		Ded
Brand Name		Ded
Non-Preferred Brand Name		Ded
<b>MAIL ORDER PRESCRIPTIONS</b>		<b><u>3x Copay (90 Day Supply)</u></b>
<b>LIFETIME MAXIMUM</b>	\$5,000,000	

\*There is a \$10 per week employer contribution to the HSA account for each employee on the HSA MH2 Plan.



BENEFIT SUMMARY		PPO Plan M22	
	<u>In-Network</u>	<u>Out of Network</u>	
<b>CALENDAR YEAR DEDUCTIBLE (CYD)</b>			
Individual		\$2,500	
Family		\$7,500	
		*HRA Reimburses \$1,500 of deductible	
<b>PLAN COINSURANCE</b> <i>(After Copay/ Deductible)</i>			
	80%	60%	
<b>OUT-of-POCKET MAXIMUM</b> <i>(Includes Deductible)</i>			
Employee	\$5,500	\$8,500	
Family	\$16,500	\$25,500	
<b>OFFICE VISIT</b>	\$25 Copay	Ded + 30%	
<b>SPECIALIST VISIT</b>	\$25 Copay	Ded + 30%	
<b>HOSPITAL</b>			
In-Patient	Ded + 20%	\$250 + Ded + 40%	
Out-Patient (Surgery)	Ded + 20%	Ded + 40%	
<b>EMERGENCY ROOM</b> <i>(Facility Only)</i>		\$100 Copay + 20% <i>(Waived If Admitted)</i>	
<b>URGENT CARE</b>	\$50 Copay	Ded + 30%	
<b>RETAIL PRESCRIPTIONS</b>			
Generic		<b><u>30-Day Supply</u></b> \$10 Copay	
Brand Name		\$40 Copay	
Non-Preferred Brand Name		\$60 Copay	
<b><i>MAIL ORDER PRESCRIPTIONS</i></b>			
		<b><u>3X Copay (90 Day Supply)</u></b>	
<b>LIFETIME MAXIMUM</b>		\$5,000,000	

\* See Page 4 for more details regarding the HRA reimbursement.

## \*HRA

The deductible is \$2,500 of which the employee is responsible for paying \$1,000. Century Mechanical will pay the remaining balance of \$1,500.



## Basic Term Life and AD&D

Benefit Amount	\$30,000
Age Reduction Scale:	
Age 65	Reduced to 65% of original amount
Age 70	Reduced to 50% of original amount



## Voluntary Life and AD&D

Employees and their eligible dependents may elect to purchase additional Life Insurance in increments of \$10,000. Employees may select up to \$500,000 or 5x annual salary with a guarantee issue of \$150,000. Spouses may elect up to \$250,000 but cannot exceed 50% of the employee's amount. The guarantee issue for a spouse is \$20,000. Children can be covered up to \$10,000 in increments of \$2,000. The guarantee issue amount for children is \$10,000

## **The Gus Bates Company Financial Planning**

Included in your benefit package is a free consultation with a financial representative of The Gus Bates Company. We can shop rates and compare benefits for you on Individual Life Insurance, Long-Term Care, Investments, Medicare Supplemental Programs, and much more.

In order to set up this free consultation, please contact:

Paul Faidley at (817) 529-5337 or [pfaidley@jhnetwork.com](mailto:pfaidley@jhnetwork.com)

# Contact Information

Provider Information	
Blue Cross Blue Shield	www.bcbstx.com
Medical	(800) 521-2227
Prudential	www.prudential.com
Life	(800) 842-1718



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The Gus Bates Company	
Mailing Address	2409 Forest Park Blvd. Fort Worth, TX 76110
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Agents / Account Managers:	
Sales Consultant Matt Morris	matt@gusbates.com (817) 529-5325
Account Manager Sylvia Uranga	sylvia@gusbates.com (817) 529-5314
Customer Service Colleen Medlock Paula Byrd	customerservice@gusbates.com (817) 529-5316 (817) 529-5340



This booklet is a summary of plan highlights only. Please consult the carrier's contract for full information on covered charges, limitations, and exclusions. This is not a binding contract. In the event of a discrepancy, the carrier's contract will prevail.

If you have further questions, please contact your Human Resources representative or The Gus Bates Company.

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*Specializing in Employee Benefits*