



Associates Benefit Frequently Asked Questions

Enrollment, Payroll Deductions and Plan Details

How can I enroll? You are eligible to enroll in the benefit plans within 30 days of your date of hire. You will complete the enrollment process during a personal benefit counseling session. You may pre-schedule your appointment with a counselor by calling 888-723-8980. You may also enroll online at www.elwood.mybenefitslibrary.com.

Why should I enroll now? If you choose not to enroll during your initial enrollment opportunity, you'll have to wait until the next open enrollment period or until you experience a qualifying life event.

When will the benefits I elected begin? The effective date of your coverage will depend on your date of enrollment, but is generally the Monday following your first paycheck deduction after you enroll.

When will payroll deductions begin? The date of your first payroll deduction will depend on your enrollment date. Please speak with a benefit counselor for more information.

When will I have another opportunity to sign up for benefits if I choose to decline all of the options at this time? The annual open enrollment period is the only time during which you can enroll in or change your coverage, unless you experience a qualified life event.

Do I have to elect all the products or can I pick and choose only the ones I want? If you wish to elect the Short Term Disability and or Term Life coverage then you must elect the Hospital Indemnity plan. All other products can be elected on their own.

Who do I contact with questions? If you have any questions regarding the Minimum Essential Coverage (MEC), Hospital Indemnity and Dental plans, please contact The Boon Group at 866-868-4139. For any questions about the Accident and Universal Life plans, please contact Transamerica at 888-763-7474.

How can I be sure these benefits are right for me? While each plan can be elected separately, certain enhancements are only available when you elect other coverage. And, because you can pick and choose the benefits that you want, you can be sure that you are only getting the coverage that you need. Plus, that's what the benefit counselors are there for - to help you make the best choices for you and your family.

Changes and Cancellation

Can I change or cancel my elections at any time throughout the year? The Minimum Essential Coverage (MEC), Hospital Indemnity, Dental and Vision plans are paid for before taxes are taken out of

your paycheck, which means that you may not cancel or change your coverage for these plans outside of the annual open enrollment period or unless you experience a qualifying life event, so please choose your benefits wisely. Because your Accident and Universal Life coverage is paid for after taxes you may cancel or change those at any time.



What happens to my benefits when I am no longer working on assignment for Elwood

Staffing? You may choose to continue coverage even when you are not on assignment with Elwood Staffing. You will receive information from The Boon Group or you may contact them directly at 866-868-4139. Following a qualifying termination event, you will be offered COBRA and Continuation benefits for a period of 18 months.

How do I pay for benefits if I'm not currently receiving a paycheck? Information about missed premium payments is available from The Boon Group. Refer to the sample welcome kit here or contact The Boon Group at 866-868-4139.

Can I keep this coverage if I decide to leave Elwood Staffing? If you leave employment at Elwood Staffing you will be offered COBRA and/or Continuation Coverage for a period of 18 months.

Plan Specific

Will this coverage help me avoid a tax penalty associated with the Affordable Care Act

(Obamacare)? We have chosen to offer the Minimum Essential Coverage (MEC) Plan to help you and your family members satisfy the individual mandate. While choosing additional coverages will provide enhanced financial protection and peace of mind, you must enroll in the MEC plan to avoid the penalty.

Is there a pre-existing conditions exclusion? The Dental and the Short Term Disability option on the Hospital Indemnity plans do have pre-existing condition exclusions. The Dental plan has a 12 month waiting period for any Type 3 Major Restorative Services (such as endodontics, surgery, crowns, dentures, etc.). The Short Term Disability will not pay a benefit until the insured has not received any treatment, taken any medication or received a diagnosis within the past 12 consecutive months and until the insured has been continuously covered under the policy for one year. Please see your plan summaries for more information about pre-existing condition exclusions.

If I want to enroll do I have to answer medical questions? You do not have to answer any medical questions to enroll in the Hospital Indemnity, Minimum Essential Coverage (MEC), Dental, and Vision plans.

Do the plans require me to use a network of providers? To receive benefits under the Minimum Essential Coverage (MEC) plan, you must use a First Health provider. For the Hospital Indemnity plans, you may see any provider you wish, but you will save money when you use a First Health provider. If you utilize the Prescription Discount program available with the Hospital Indemnity Plans you must purchase the prescription at a Caremark pharmacy in order to obtain the discount.