## Transcript: Estefania Acevedo-4504459571412992-4769856472268800

## **Full Transcript**

Your call- Yeah, you're really still- ... may be monitored or recorded for quality assurance purposes. Man, stop telling me this. Thank you for calling Benefits in a Card. My name is Stephanie. How can I assist you? Oh, I don't know, I just received a text to call this number. Okay. Um, so we're the healthcare administrators for staff and agencies. What does your text say? You're probably within your personal open enrollment period or within company open enrollment, which makes you eligible for healthcare benefits through whatever staff and agency that you work for. Um, what does the text say though? I'm not going to read it right now. It says, "Welcome to Hamilton Records card benefit inquiry," then it has a number, "To enroll in health issue benefit before your window closes." Yes. Okay. So- Are we paying for this feature? So yeah, it sounds like you're within your personal open enrollment period. Did you just start working with them? Yes, ma'am. Okay. Yeah, so it sounds like you're within your first 30 days of receiving your first check, which means that you could qualify to enroll into healthcare benefits through that staff and agency depending on how many plans you select, such as like dental, vision, a preventative plan, um, a term life, any plans like that. Depending on how many, how many you select, also depending if you add dependents with those plans has a lot to do with how much the weekly deductions are for the selected plans from your paycheck. Um, so they do have their weekly deductions to them for them to be active. Um, it's something completely optional, it's not mandatory so if you don't want to do it, you don't have to. But you will be getting reminders letting you know that you're within your personal open enrollment period, which means you could qualify to enroll to healthcare benefits through them. And then the weekly deductions really just depend on how many plans you select and which ones they are. But, um, for Hamilton Record, they don't have any auto enroll. So it's just in case you don't want to enroll, I don't really have to opt you out of anything since they don't auto enroll their members into any of the plans. But if you do want to enroll, this would be the time to do so. Yeah. I, I, I would like to. Okay. Um, what is the last four of your Social? 3943. Okay. And then your first and last name? Jarrod Johnson. J-A-R-R-O-D. Okay. And then for security purposes, could you verify the address that I have on file as well as your date of birth? 15 Woodmont Drive Number three, 521 1993. And then what's the city and, and state? Jackson, Tennessee. Okay. 731-274-9595 is your phone number still? No, ma'am. I, they got another number. Okay. What is it? 731-343-2690. That's my, that's my actual phone number. Okay. And then I have jdotson18@gmail.com? Mm-hmm. Yeah, j.dustin. Okay. So it looks like you currently have the, the vision plan for \$1.99 for employee. So it looks like right now, you are eligible to add new plans since you're within your personal open enrollment and the company's within company open enrollment also. Um, so you currently have vision. You could add additional plans. Mm-hmm. But so they, uh, I ain't even know I have, um, vision. Yeah. You have the vision plan and that's \$1.99 a week, \$1.99. Man. All right. So I can, so that mean

I could go to the, um, the eye doctor and stuff? Yeah. And it looks like it actually starts 'cause we, you don't have active coverage for this week, but it actually starts in the week of the 27th. Oh. That's the first day of active coverage. All right. So can I, um, like if, if I go back to him to write this, can I add like dental stuff and, and it, uh, it'll start around the same time? So it actually takes, um, it'll probably take one or two weeks, um, for that new... If you do, let's say you add dental with me today, like right now in the call, it typically takes like one or two weeks for your staff and agency to start making that deduction for the new selected plans. Once you see that very first deduction of whatever the amount is of the plans that you selected, the following Monday of that deduction is when your coverage becomes active for those plans. So if they don't start right away, so I don't think it's gonna start, um, like whenever your vision-Oh. ... starts. But if you do want to add new plans, this would be the time to do it 'cause let me see when's the last day, 'cause only one in two periods you're eligible to add new plans. For the first period is within your personal open enrollment which are the first 30 days of you receiving your first check which the last day of that for you is February the 14th.... so on Valentine's Day. And then the second period that you're eligible to add new plans is within the company's company open enrollment, which for the staff and agency that you work for, the last day of their enrollment is on the 31st. So, in other words, that would be your last day 'cause, um... Well, no. Actually, on February 14th would be your last day. I would just go with based off your personal open enrollment, 'cause their company open enrollment ends on the 31st, but your personal open enrollment, your 30 days are up on the 14 of February. So, that would be the last day that you would have to add any plans if you wish. Because if you pass February 14th, then you would have to wait for the next company open enrollment, which for them it's in the month of December. So, technically in a year. Um, but your last day for you to enroll into any additional plans would be on the 14th of February. That's the deadline for your personal open enrollment period. So, did you wanna add den- Hey. Yes, ma'am. I, I would like to add dental. Do, like would they cover like if I was going like to get my teeth cleaned and whitened? Yeah. So if you want, I can go over the plans with you. Yes, ma'am. Did you want me to also send you the benefit guide? So, while I go over the plans, I can send you this guide and you can visually look at what I'm talking about? Because they do have different plans and I feel like if I just talk it might be a lot to-Yes, ma'am. ... remember. So I'll go ahead and send you that so that while I'm reviewing it, you could look at it. Um, let me send it to that email. Give me one second. And then is that a good email to send it to? Yes, ma'am. Okay. Okay. Um, do you mind verifying to see if you've received that email that I just sent you with the benefit guide? It should come from an email that says info@benefitsinacar.com. Hm, it might be in my spam. I would check your spam and then your junk also, 'cause sometimes it sends it to those too. All right. Got it. It say, "Thank you. Contact Benefitsinc for your request. Attached is a PDF." Yes, sir. All right. Okay. So, if you want I can go ahead and just go over all the plans and then you can just let me know which one that you would be interested into enrolling. So, the first one that I'm gonna go over is it looks like they actually offer four medical plans. The first plan that I'm gonna go over is called the Stay Healthy MUC Enhanced. So, this plan is the only plan that they offer that covers both your preventative services, meaning like a physical visit, some vaccinations, some STD and cancer screenings, as well as your hospital indemnity services, meaning doctor visits if sick, hospital visits if injured, urgent care, emergency room and surgeries. So, this plan is the only plan that offers both of those benefits. The other three either offer just your preventative or just your hospital indemnities.

So, this plan is the only one that covers those benefits, but it does require you f- to stay within the network. Okay. And only use their preferred provider. Okay. Is that \*\*\*\*\*\*? With, with, with the Stay Healthy, you are required co-pays. So, for the area of your primary care visits- It say on there. ... a \$10 co-pay per visit's required and you will be limited to four visits annually per person or 10 per family. For specialty care visits, you would also be limited to four visits annually per person or 10 per family and a \$50 co-pay would be required. For urgent care visits you would be limited to four visits annually per person or 10 per family and a \$60 co-pay would be required. With the Stay Healthy MUC Enhanced, you get prescription benefits for your preventative prescriptions through Alexar and that one does require you... Hello. A \$5 co-pay. For the pharmacy option, you will have a 30-day supply and for the mail order option, you would have a 90-day supply and a \$15 co-pay would be required. You also get prescription benefits through Pharmacoville which you can pay up to \$10, \$20, \$30 for your generic medications. And for the non-generic, you would receive a discount. This plan does also include virtual urgent care which offers medical assistance virtually with medical providers and it covers a flat fee towards your hospital indemnity services. So, for example, for hospital confinement benefit, it would cover \$100 per day for a max of 30 days and it also covers group accidents such as hospital emergency room, a flat fee of \$250, emergency dental work, flat fee of \$50. If you were to select the Stay Healthy MUC Enhanced for employee, that would be a weekly deduction of \$42.68 weekly. Then the second medical plan that I'm gonna go over, it's called the Stay Healthy MUC TeleRx. Yes. Can I say, can I, um... Can I say something? Yes. Is, is, is that plan right there that you just said, that's the best one? So, well-That's the only plan that would cover, like, your preventatives, such as, like, your channuals and it would also cover your doctor visits if you go to the doctor because you get sick. The other three, like for example, the Stay Healthy, and you see Okay. ... tell our rep, that one would only cover your preventative services, so such as, like- All right. ... a physical, but it doesn't cover any doctor visits if you actually get sick. Then the other two, which are the VIPs, the VIP Standard and the VIP Classic, those only cover doctor visits if sick, but they wouldn't cover, like, a physical. The only one that covers both benefits would be the one that I just went over. All right. So, that one... I, I would like that one, the one that- Okay. ... covers everything, like if I, if I do get sick or something. Okay. And then, uh, this one does require you to stay within the network, but you do get the list of the... it's called the Multi-Plan. That's the number that you would contact to find a list of preferred providers, though they do let you know where you can go and stuff. Um, so that one is the one that only cove- that does cover both benefits. The other ones only cover one thing or the other. So you want the one that covers both benefits? Yes, ma'am. Okay. And then I was gonna tell you, so that's for their medical plan. That one, for employees, \$42.68. And then they also offer additional benefit options which are add-ons that you could add to your coverage, and they do have their separate deductions. So for example, the dental plan, for a preventative visit, that's covered at 100%. A basic visit would be considered like a cleaning of the teeth. That would be covered at 80%. Basic restorative, so if they're cleaning your teeth and they find a cavity and gotta fill it, that's also covered at 80%. X-rays are also covered at 80%, and your annual maximum is \$500. For your dental plan, you would have to give a one-time deductible of either \$50 if you choose the individual plan, or of \$150 if you choose the family plan. So that deductible, you only have to give once, once you go to that visit. So for the employee plan, that would be \$3.38 weekly for that dental plan. Then they also offer term life. So for the term life, employees to age 64, they

receive \$20,000. Spouse, \$2,500. Children six months up to age 26, \$2,500. Children 14 days up to six months, \$500. If you get this for employee, that would be \$1.96 weekly. Then they also offer short-term disability available for all active employees 20 hours or more per week. You have an elimination period of seven days, meaning those first seven days they don't pay them, but after those seven days, the benefit period is 90 days and the benefit amount is \$650 per month. For employee, that would be \$3.66 weekly. They also offer critical illness with cancer benefit. The benefit amount is \$5,000. From those full \$5,000, if you have a heart attack, 100% would be covered. Coronary artery bypass surgery, 25% would be covered from those \$5,000. Permanent damage due to stroke, 100% would be covered from those \$5,000. Major organ failure, 100% would be covered from those \$5,000. If you choose the... this one for employee, that would be \$2.33 weekly. They also have 24-hour group accident. For employee, that would be \$1.80. Behavior health for employee would be \$1.38. Identity protection for employee, that would be \$1.80. Did you want to add any of these? 'Cause you already had vision. Um, nah, I don't... Uh, just, uh, the, the one we talked about and then dental. Okay. Okay, so I have dental for \$3.38. The MEC Enhanced, which is your medical plan, for \$42.68. And then, did you still want vision on there? Yes, ma'am. Okay. And then vision for \$1.99, all under employee. That would be a weekly deduction from your paycheck of \$48.05. Do you allow Hamilton Record Group to make the weekly deduction of \$48.05 from your paycheck for these three selected plans? Yes, ma'am. Okay. Please allow one or two weeks for your staffing agency to start making that new deduction. Once you see that they made that, that new deduction of the \$48.05 from your paycheck, the following Monday from that first deduction is when your coverage becomes active for your dental plan and then your MEC Enhanced plan. Um, so, so once you see that they've made that first deduction of the \$48.05 from your check, the following Monday is when that coverage becomes active. And then by that first week- Okay. ... or your activation week, you should be receiving three cards, which are gonna be your dental, vision, and then your preventative. I'm sorry, for your MEC Enhanced. Um, and then if for some reason you have a doctor's appointment coming up once you become active and you still don't have your cards, you're welcome to give this number a call and we can email them to you via email. So now you really don't have to wait- All right. ... for your staffing agency to s- do that first deduction. Once you see it, the following Monday is when your coverage becomes active. Yes. All right. Thank you. You're welcome. And I was gonna tell you, just in case you did wanna add any additional plans or change the level of your coverage, for example, like add dependents... Um, the only time that you would be able to do that is nothing passing February 14, okay? Because if you wait- Okay. ... after the 14th of February, you're gonna have to wait till the month of December to add new plans or add dependents. Yes, ma'am. Okay. Well, I hope you have a great day. Thank you for your time. You too. Thank you. Thank you.

## **Conversation Format**

Speaker speaker\_0: Your call-

Speaker speaker\_1: Yeah, you're really still-

Speaker speaker\_0: ... may be monitored or recorded for quality assurance purposes.

Speaker speaker\_1: Man, stop telling me this.

Speaker speaker\_0: Thank you for calling Benefits in a Card. My name is Stephanie. How can I assist you?

Speaker speaker\_1: Oh, I don't know, I just received a text to call this number.

Speaker speaker\_0: Okay. Um, so we're the healthcare administrators for staff and agencies. What does your text say? You're probably within your personal open enrollment period or within company open enrollment, which makes you eligible for healthcare benefits through whatever staff and agency that you work for. Um, what does the text say though?

Speaker speaker\_1: I'm not going to read it right now. It says, "Welcome to Hamilton Records card benefit inquiry," then it has a number, "To enroll in health issue benefit before your window closes."

Speaker speaker\_0: Yes. Okay. So-

Speaker speaker\_1: Are we paying for this feature?

Speaker speaker\_0: So yeah, it sounds like you're within your personal open enrollment period. Did you just start working with them?

Speaker speaker 1: Yes, ma'am.

Speaker speaker\_0: Okay. Yeah, so it sounds like you're within your first 30 days of receiving your first check, which means that you could qualify to enroll into healthcare benefits through that staff and agency depending on how many plans you select, such as like dental, vision, a preventative plan, um, a term life, any plans like that. Depending on how many, how many you select, also depending if you add dependents with those plans has a lot to do with how much the weekly deductions are for the selected plans from your paycheck. Um, so they do have their weekly deductions to them for them to be active. Um, it's something completely optional, it's not mandatory so if you don't want to do it, you don't have to. But you will be getting reminders letting you know that you're within your personal open enrollment period, which means you could qualify to enroll to healthcare benefits through them. And then the weekly deductions really just depend on how many plans you select and which ones they are. But, um, for Hamilton Record, they don't have any auto enroll. So it's just in case you don't want to enroll, I don't really have to opt you out of anything since they don't auto enroll their members into any of the plans. But if you do want to enroll, this would be the time to do so.

Speaker speaker\_1: Yeah. I, I, I would like to.

Speaker speaker\_0: Okay. Um, what is the last four of your Social?

Speaker speaker\_1: 3943.

Speaker speaker\_0: Okay. And then your first and last name?

Speaker speaker\_1: Jarrod Johnson. J-A-R-R-O-D.

Speaker speaker\_0: Okay. And then for security purposes, could you verify the address that I have on file as well as your date of birth?

Speaker speaker\_1: 15 Woodmont Drive Number three, 521 1993.

Speaker speaker\_0: And then what's the city and, and state?

Speaker speaker\_1: Jackson, Tennessee.

Speaker speaker\_0: Okay. 731-274-9595 is your phone number still?

Speaker speaker\_1: No, ma'am. I, they got another number.

Speaker speaker\_0: Okay. What is it?

Speaker speaker\_1: 731-343-2690. That's my, that's my actual phone number.

Speaker speaker\_0: Okay. And then I have jdotson18@gmail.com?

Speaker speaker\_1: Mm-hmm. Yeah, j.dustin.

Speaker speaker\_0: Okay. So it looks like you currently have the, the vision plan for \$1.99 for employee. So it looks like right now, you are eligible to add new plans since you're within your personal open enrollment and the company's within company open enrollment also. Um, so you currently have vision. You could add additional plans.

Speaker speaker\_1: Mm-hmm. But so they, uh, I ain't even know I have, um, vision.

Speaker speaker\_0: Yeah. You have the vision plan and that's \$1.99 a week, \$1.99.

Speaker speaker\_1: Man. All right. So I can, so that mean I could go to the, um, the eye doctor and stuff?

Speaker speaker\_0: Yeah. And it looks like it actually starts 'cause we, you don't have active coverage for this week, but it actually starts in the week of the 27th.

Speaker speaker\_1: Oh.

Speaker speaker\_0: That's the first day of active coverage.

Speaker speaker\_1: All right. So can I, um, like if, if I go back to him to write this, can I add like dental stuff and, and it, uh, it'll start around the same time?

Speaker speaker\_0: So it actually takes, um, it'll probably take one or two weeks, um, for that new... If you do, let's say you add dental with me today, like right now in the call, it typically takes like one or two weeks for your staff and agency to start making that deduction for the new selected plans. Once you see that very first deduction of whatever the amount is of the plans that you selected, the following Monday of that deduction is when your coverage becomes active for those plans. So if they don't start right away, so I don't think it's gonna start, um, like whenever your vision-

Speaker speaker\_1: Oh.

Speaker speaker\_0: ... starts. But if you do want to add new plans, this would be the time to do it 'cause let me see when's the last day, 'cause only one in two periods you're eligible to add new plans. For the first period is within your personal open enrollment which are the first 30 days of you receiving your first check which the last day of that for you is February the 14th.... so on Valentine's Day. And then the second period that you're eligible to add new plans is within the company's company open enrollment, which for the staff and agency that you work for, the last day of their enrollment is on the 31st. So, in other words, that would be your last day 'cause, um... Well, no. Actually, on February 14th would be your last day. I would just go with based off your personal open enrollment, 'cause their company open enrollment ends on the 31st, but your personal open enrollment, your 30 days are up on the 14 of February. So, that would be the last day that you would have to add any plans if you wish. Because if you pass February 14th, then you would have to wait for the next company open enrollment, which for them it's in the month of December. So, technically in a year. Um, but your last day for you to enroll into any additional plans would be on the 14th of February. That's the deadline for your personal open enrollment period. So, did you wanna add den-

Speaker speaker\_1: Hey. Yes, ma'am. I, I would like to add dental. Do, like would they cover like if I was going like to get my teeth cleaned and whitened?

Speaker speaker\_0: Yeah. So if you want, I can go over the plans with you.

Speaker speaker\_1: Yes, ma'am.

Speaker speaker\_0: Did you want me to also send you the benefit guide? So, while I go over the plans, I can send you this guide and you can visually look at what I'm talking about? Because they do have different plans and I feel like if I just talk it might be a lot to-

Speaker speaker\_1: Yes, ma'am.

Speaker speaker\_0: ... remember. So I'll go ahead and send you that so that while I'm reviewing it, you could look at it. Um, let me send it to that email. Give me one second. And then is that a good email to send it to?

Speaker speaker\_1: Yes, ma'am.

Speaker speaker\_0: Okay. Okay. Um, do you mind verifying to see if you've received that email that I just sent you with the benefit guide? It should come from an email that says info@benefitsinacar.com.

Speaker speaker\_1: Hm, it might be in my spam.

Speaker speaker\_0: I would check your spam and then your junk also, 'cause sometimes it sends it to those too.

Speaker speaker\_1: All right. Got it. It say, "Thank you. Contact Benefitsinc for your request. Attached is a PDF."

Speaker speaker\_0: Yes, sir.

Speaker speaker\_1: All right.

Speaker speaker\_0: Okay. So, if you want I can go ahead and just go over all the plans and then you can just let me know which one that you would be interested into enrolling. So, the first one that I'm gonna go over is it looks like they actually offer four medical plans. The first plan that I'm gonna go over is called the Stay Healthy MUC Enhanced. So, this plan is the only plan that they offer that covers both your preventative services, meaning like a physical visit, some vaccinations, some STD and cancer screenings, as well as your hospital indemnity services, meaning doctor visits if sick, hospital visits if injured, urgent care, emergency room and surgeries. So, this plan is the only plan that offers both of those benefits. The other three either offer just your preventative or just your hospital indemnities. So, this plan is the only one that covers those benefits, but it does require you f- to stay within the network.

Speaker speaker\_1: Okay.

Speaker speaker\_0: And only use their preferred provider.

Speaker speaker\_1: Okay.

Speaker speaker 2: Is that \*\*\*\*\*?

Speaker speaker\_0: With, with, with the Stay Healthy, you are required co-pays. So, for the area of your primary care visits-

Speaker speaker\_1: It say on there.

Speaker speaker\_0: ... a \$10 co-pay per visit's required and you will be limited to four visits annually per person or 10 per family. For specialty care visits, you would also be limited to four visits annually per person or 10 per family and a \$50 co-pay would be required. For urgent care visits you would be limited to four visits annually per person or 10 per family and a \$60 co-pay would be required. With the Stay Healthy MUC Enhanced, you get prescription benefits for your preventative prescriptions through Alexar and that one does require you...

Speaker speaker\_2: Hello.

Speaker speaker\_0: A \$5 co-pay. For the pharmacy option, you will have a 30-day supply and for the mail order option, you would have a 90-day supply and a \$15 co-pay would be required. You also get prescription benefits through Pharmacoville which you can pay up to \$10, \$20, \$30 for your generic medications. And for the non-generic, you would receive a discount. This plan does also include virtual urgent care which offers medical assistance virtually with medical providers and it covers a flat fee towards your hospital indemnity services. So, for example, for hospital confinement benefit, it would cover \$100 per day for a max of 30 days and it also covers group accidents such as hospital emergency room, a flat fee of \$250, emergency dental work, flat fee of \$50. If you were to select the Stay Healthy MUC Enhanced for employee, that would be a weekly deduction of \$42.68 weekly. Then the second medical plan that I'm gonna go over, it's called the Stay Healthy MUC TeleRx.

Speaker speaker\_1: Yes. Can I say, can I, um... Can I say something?

Speaker speaker 0: Yes.

Speaker speaker\_1: Is, is, is that plan right there that you just said, that's the best one?

Speaker speaker\_0: So, well-That's the only plan that would cover, like, your preventatives, such as, like, your ch- annuals and it would also cover your doctor visits if you go to the doctor because you get sick. The other three, like for example, the Stay Healthy, and you see

Speaker speaker\_3: Okay.

Speaker speaker\_0: ... tell our rep, that one would only cover your preventative services, so such as, like-

Speaker speaker\_3: All right.

Speaker speaker\_0: ... a physical, but it doesn't cover any doctor visits if you actually get sick. Then the other two, which are the VIPs, the VIP Standard and the VIP Classic, those only cover doctor visits if sick, but they wouldn't cover, like, a physical. The only one that covers both benefits would be the one that I just went over.

Speaker speaker\_3: All right. So, that one... I, I would like that one, the one that-

Speaker speaker\_0: Okay.

Speaker speaker\_3: ... covers everything, like if I, if I do get sick or something.

Speaker speaker\_0: Okay. And then, uh, this one does require you to stay within the network, but you do get the list of the... it's called the Multi-Plan. That's the number that you would contact to find a list of preferred providers, though they do let you know where you can go and stuff. Um, so that one is the one that only cove- that does cover both benefits. The other ones only cover one thing or the other. So you want the one that covers both benefits?

Speaker speaker\_3: Yes, ma'am.

Speaker speaker\_0: Okay. And then I was gonna tell you, so that's for their medical plan. That one, for employees, \$42.68. And then they also offer additional benefit options which are add-ons that you could add to your coverage, and they do have their separate deductions. So for example, the dental plan, for a preventative visit, that's covered at 100%. A basic visit would be considered like a cleaning of the teeth. That would be covered at 80%. Basic restorative, so if they're cleaning your teeth and they find a cavity and gotta fill it, that's also covered at 80%. X-rays are also covered at 80%, and your annual maximum is \$500. For your dental plan, you would have to give a one-time deductible of either \$50 if you choose the individual plan, or of \$150 if you choose the family plan. So that deductible, you only have to give once, once you go to that visit. So for the employee plan, that would be \$3.38 weekly for that dental plan. Then they also offer term life. So for the term life, employees to age 64, they receive \$20,000. Spouse, \$2,500. Children six months up to age 26, \$2,500. Children 14 days up to six months, \$500. If you get this for employee, that would be \$1.96 weekly. Then they also offer short-term disability available for all active employees 20 hours or more per week. You have an elimination period of seven days, meaning those first seven days they don't pay them, but after those seven days, the benefit period is 90 days and the benefit amount is \$650 per month. For employee, that would be \$3.66 weekly. They also offer critical illness with cancer benefit. The benefit amount is \$5,000. From those full \$5,000, if you have a heart attack, 100% would be covered. Coronary artery bypass surgery, 25% would be covered from

those \$5,000. Permanent damage due to stroke, 100% would be covered from those \$5,000. Major organ failure, 100% would be covered from those \$5,000. If you choose the... this one for employee, that would be \$2.33 weekly. They also have 24-hour group accident. For employee, that would be \$1.80. Behavior health for employee would be \$1.38. Identity protection for employee, that would be \$1.80. Did you want to add any of these? 'Cause you already had vision.

Speaker speaker\_3: Um, nah, I don't... Uh, just, uh, the, the one we talked about and then dental.

Speaker speaker\_0: Okay. Okay, so I have dental for \$3.38. The MEC Enhanced, which is your medical plan, for \$42.68. And then, did you still want vision on there?

Speaker speaker\_3: Yes, ma'am.

Speaker speaker\_0: Okay. And then vision for \$1.99, all under employee. That would be a weekly deduction from your paycheck of \$48.05. Do you allow Hamilton Record Group to make the weekly deduction of \$48.05 from your paycheck for these three selected plans?

Speaker speaker\_3: Yes, ma'am.

Speaker speaker\_0: Okay. Please allow one or two weeks for your staffing agency to start making that new deduction. Once you see that they made that, that new deduction of the \$48.05 from your paycheck, the following Monday from that first deduction is when your coverage becomes active for your dental plan and then your MEC Enhanced plan. Um, so, so once you see that they've made that first deduction of the \$48.05 from your check, the following Monday is when that coverage becomes active. And then by that first week-

Speaker speaker\_3: Okay.

Speaker speaker\_0: ... or your activation week, you should be receiving three cards, which are gonna be your dental, vision, and then your preventative. I'm sorry, for your MEC Enhanced. Um, and then if for some reason you have a doctor's appointment coming up once you become active and you still don't have your cards, you're welcome to give this number a call and we can email them to you via email. So now you really don't have to wait-

Speaker speaker\_3: All right.

Speaker speaker\_0: ... for your staffing agency to s- do that first deduction. Once you see it, the following Monday is when your coverage becomes active.

Speaker speaker\_3: Yes. All right. Thank you.

Speaker speaker\_0: You're welcome. And I was gonna tell you, just in case you did wanna add any additional plans or change the level of your coverage, for example, like add dependents... Um, the only time that you would be able to do that is nothing passing February 14, okay? Because if you wait-

Speaker speaker\_3: Okay.

Speaker speaker\_0: ... after the 14th of February, you're gonna have to wait till the month of December to add new plans or add dependents.

Speaker speaker\_3: Yes, ma'am.

Speaker speaker\_0: Okay. Well, I hope you have a great day. Thank you for your time.

Speaker speaker\_3: You too. Thank you.

Speaker speaker\_0: Thank you.