

Transcript: Estefania

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Full Transcript

I can't see. Your call may be monitored- No. ... and be recorded for quality assurance purposes. You know? Thank you for calling Benefits at Heart. My name's Stephanie, how can I assist you? I'm sorry? Yeah. Hi, I'd like to enroll in benefits for the medical. Okay. What staffing agency do you work for? Partners Personnel. Yeah, and then what are the last four of your social? 3498. Okay, thank you. No smoking is *****. And then, could I please get your first and last name? Kristine with a K. Okay, and then the last name- My last name is Tuantong, T-U-A-N-T-O-N-G. Thank you. Um, for security purposes, I do need you to verify your address as well as your date of birth. Um, 3327 Jeanette Ct, Tracy, California 95376. And then a date of birth of June 20th, 1994. Um, did you recently move by any chance? Um, I live, uh, under 2181 North Tracy Boulevard. Okay. Would you like- 95376. Would you like me to update that address for you? Uh, no, it's fine you can leave it at that. Okay. Um, I have the phone number as 209-687-1267. Is that still a good number? Yes. And then- ... I have janetha95376@Gmail.com? Yes. Okay. All right, um, do you know already what you wanna enroll into or would you like me to go over the plans? Um, do you guys have Kaiser? I'm sorry? So the only thing health care- Do you guys have Kaiser? The only healthcare benefits that they offer is, uh, four, five different plans, um, one of them being a preventative plan which is called the Stay Healthy MEC TelA Rep. The other three being VIPs which is the standard- Yeah. ... plus and prime, and then another one that's called MEC Enhanced. ME- What is the cheapest healthcare? Um, so that would be your preventative, but for the preventative plan, which is that Stay Healthy MEC, for that one it only- Mm-hmm. ... covers your preventative services. So like one physical visit a year, some vaccinations, some ST screenings, some cancer screenings, and even some counseling. But for your Stay Healthy plan, that one will not cover, like doctor visits if you were to get sick, no hospital visits, no urgent care visits, no emergency room visits, nor surgeries. So that one would be the cheapest, but it's only a preventative plan. Um, that plan does have preventative benefits with your prescriptions through Aleve Farm, and it also offers something called VRS, which gives you access to over 800 of the top 90% generic drugs prescribed in the US for like a cheaper price. It also includes Walmart Health Virtual Care, which gives you medical assistance virtually. But like I said earlier, it's only for preventative services. Um, if you were to get- And what was the next one after that? Um, so the one after that- The Stay Healthy? So that would be a weekly deduction of \$16.80. That's for your preventative. Then there's three other plans called the VIPs. There's the standard, the plus, and the prime. Those are your hospital indemnity plans, meaning that those will cover your doctor visits if you were to get sick, hospital visits, urgent care, emergency room, and even some surgeries. The three of them- Mm-hmm. ... also have preventat- The three of them also have prescription benefits through Pharmacoville which you can pay up to \$10, \$20, \$30 for your generic prescriptions. And for

your non-generic, they do offer somewhat of a discount. It also includes the Walmart Health Virtual Care which I had said earlier. It gives you medical assistance virtually with medical providers. With the VIPs, you're not required to just use their preferred providers. You could use providers outside of the network or in the network and with your MEC's Tela Reps, so your preventative one, that one you do have to stay within the network and only use their providers. But with the VIPs, you can be in or out of the network. Um, these, however, don't cover your preventative services, so they will only cover, like, your doctor visits, hospital visits, urgent care, emergency rooms, and surgeries. So it's vice versa than the Stay Healthy. Um, with the stan- with the VIP- Okay. ... plus and prime, those cover a flat fee towards whatever service you go for. Out of the three other one, out of the three of them, the most basic one would be your VIP standard because that one wouldn't cover intensive care, rehabilitation, nor any preventive surgery that you may inquire. And the VIP plus and the prime do cover those four areas. However, out of the three hospital indemnity plans, the prime is the one that will cover a little bit more within, like, a dollar amount. So for example, if you were to go to have a surgery in the hospital, for the VIP standard which is the- Mm-hmm.... one. That one covers a flat fee of \$250 per day, for a map up to one day. The VIP Plus would cover \$1,000 per day for a map up to one day. And then the VIP Prime would cover \$2,000 per day for a map up to two days. Another example is for an emergency room visit, the standard would cover \$50 per day for a map up to two days, the VIP Plus would cover \$100 per day for a map up to two days, and then the VIP Prime would cover \$150 per day for a map up to two days. If you were to select between those three plans, the standard for employee would be a weekly deduction of \$17.66. For the VIP Plus, it would be a weekly deduction of \$31.61. And then for the VIP Prime, it would be a weekly deduction of \$43.28. So, those are four, and there is a fifth one that includes both your preventative pre- preventative, um, services, so that would be what the Stay Healthy covers, like one physical a year, your immunizations, some cancer, STD screenings, and it also covers your hospital indemnity services. This one's called the MEC Enhanced, so this one covers both benefits. Um, however, you do have to stay within the network with the MEC Enhanced. This one also requires co-pays, like in the area of primary care visits, you would be limited to four visits annually per person, or 10 per family. And the copay for the MEC Enhanced in that area is \$10. For your specialty care visits, it's limited to four visits annually per person, or 10 per family, and the copay in that area is of \$50. For your urgent care visits, you would be limited to four visits annually per person, or 10 per family, and the copay in that area would be of \$60. And since you have both benefits with your preventative services as well as your hospital indemnity, you have pr- prescription benefits through ELECSA as well as through PharmaBill. But for your preventative prescriptions, you would be required to pay a co-payment with the MEC Enhanced . So, for your generic ones, pharmacy option, you would have a nine- a 30-day supply, and the copay in that area is of \$5. For your mail-order option, it would be a 90-day supply and that co-payment would be of \$15. This one also covers hospital admission benefit, \$1,000 per day for a map up to one day, hospital confinement benefit, \$100 per day for a map up to 30 days, surgery in hospitals, surgery and physician, medical imaging tests, advanced study, hospity- hospital emergency room, physician office. If you were to get the MEC Enhanced for employee only, it would be a weekly deduction of \$43.76. So, those are the five medical plans, so your preventative, which is the Stay Healthy MEC, your three VIPs, which are the standard, the plus, and the prime, and then your MEC Enhanced, which has both benefits with the preventative services as well

as your hospital indemnity. So, those are the five medical plans, and then they also offer additional plans that you would have to add in addition. If you do so at, like, one of the medicals and let's say you want dental, vision, something like that, um, they have their separate deductions. Mm-hmm. So, for dental, for employee only, it would be a weekly deduction of \$3.63. For the preventative pro- for the preventative visit, it covers you 100%. Anything basic, like a cleaning, it would cover you 80%. Basic restorative, so they have to put, like, fill in a cavity or something like that, that would be covered at 80%. Any x-rays that they may take would be covered at 80%. Your annual maximum is of \$500, and then for the dental plan, you would be required a one-time deductible. So, if you select the employee plan, it would be of \$50, and if you were to select the family plan, it would be of 150, but that's just a one-time deductible. They also offer vision for employee. That would be a weekly deduction of \$2.15. That area, there's co-pays, so the co-pay for an eye exam would be of \$10. The co-pay for lenses and frames would be of 25, and your frame allowance is of 130. They also offer term life, critical illness with cancer benefits, 24-hour group accident, short-term disability, and those all have their separate deductions that you would add in addition if you were looking into adding one of the medical plans. Okay. Um, can I do... What was the standard for the, uh, weekly for the standard? The standard for employee, or did you wanna add dependents? For employee, for now. So, the VIP- Can I add dependents later? Um, so there's only two periods where you could add any new plans or make changes in the level of the dependents, meaning, like, the plan's a standalone, or employee and spouse, or employee and child, or the family plan. The only time that you can do any changes is within your first 30 days of receiving your first check, which I can check to see. It looks like for you, that would be, I believe, December 18th- Oh, 'cause of the company that I'm working for, um, they told me after 90 days they might hire me on to their company. Mm-hmm. So, right now I'm at the temp- temp- temp agency, but I'll be getting hired on to the company after 90 days. Um-... and I think they offer benefits as well too. I'm not sure- Gotcha. ... if it's the same thing as your guys'. Yeah. So, that's why I just wanted to add just me for right now on there. Oh, okay. Gotcha. So, you would have till, like- 'Cause I got sick yesterday. It... Oh, gotcha. So, you have till December 18 to, like, make any changes. I was gonna tell you that, um, all of the medical plans, so the three VIPs, the standard, the plus and the prime, as well as the two MECS, the stay healthy, which is the preventative one, and then the one that offers both benefits, which is the MEC enhanced dental and vision, are under a IRS regulation that's called Section 125. So, what Section 125 is, it allows you to pay those particular plans that fall under that regulation with pre-taxed dollars. However, to make any changes or any changes in the level of your dependents, you would have to be within your first 30 days, meaning nothing past December 19- Hmm. ... to either cancel that plan or add dependents. Because if you call after that date, they're gonna tell you that you have to wait whenever the company's in their company open enrollment. Um, but since you- Right. ... said that you're only gonna be with them for so long, let's say that you do get hired on and you wanna continue to have, like, let's say this insurance, you're allowed to make- Uh-huh. ... up to four direct payments because these are deductions from your paycheck specifically. So, let's say you stop working with them- Hmm. ... or whatever, but you still want to keep your insurance, you can call us and make up to four direct payments. By the fifth week that they don't specifically get a deduction out of your paycheck, you go into something that's called COBRA enrollment, which allows you to continue having those particular plans that fall under COBRA even after you're not hired with

them. Okay? Mm-hmm. Or let's say that you're like- Oh. ... "I don't want this insurance anymore." Um, by the fifth week that they don't get a deduction specifically out of your paycheck, it cancels it out. Oh. Well, can I just get the- Yeah. Thank you. I, I think I'm just gonna get the standard one, the one that you had mentioned for 17. Okay. Yeah, ma'am. For employee only? Yeah, just for employee only. Okay. And then, that's under the IRS regulations. So, just remember, if you want to cancel it or make changes in the level of your dependents, you have till December 18 to do that. Mm-hmm. Okay? Okay. And then did you want to add another one, or just the standard? Just the standard. Okay. Please allow one or two weeks for your employer to start making that deduction. Once you see the very first deduction from your paycheck of \$17.66, the following Monday of that deduction is when you would have active coverage in that first week of your activation week. Um, I w-... You're welcome to give us a call just in case you have, like, a doctor's appointment or anything and we can send you your card via email probably by that Wednesday. Um, because I was gonna tell you that normally for your VIP plans, they don't ever send those out to the member. So, you're welcome to give us a call that Monday of your activation week so that we can go ahead and put in a request for a physical one. But you would have to be active. Okay. Um, so I would just put a little reminder just in case you do want a physical copy of that card. You're welcome to give us that call that Monday and we'll go ahead and submit that request. Okay. All right, thank you. You're welcome. Um, do you have any more questions? No, that'll be it. Okay. I hope you have a great day. So, all the information will- ... a nice day in Hawaii. So, the... All the information is gonna be through the email or through a text message for the, for that, uh, for the embo- employer? Like, the card? Yeah. So, you're welcome to give us a call 'cause... You're welcome to give us a call once you see that, that your... You got that first deduction the following Monday. Mm-hmm. You can give us a call and, um, go ahead and put in that request for your physical card to be sent out to you. And then normally that first week that you have active coverage, by that Wednesday or Thursday, we have the cards ready via email. So, you're welcome to give us a call and we can send it to you. Oh, okay. Um, but I would call that Monday, that first Monday that you see that you have active coverage just in case you do- Hmm. ... want a physical one. And then that Wednesday or Thursday, um, we should have your policy number and information ready to be sent out to your email. Okay. All right, thank you. You're welcome. Have a nice day. All right, you too. Bye-bye.

Conversation Format

Speaker speaker_0: I can't see.

Speaker speaker_1: Your call may be monitored-

Speaker speaker_0: No.

Speaker speaker_1: ... and be recorded for quality assurance purposes.

Speaker speaker_2: You know?

Speaker speaker_3: Thank you for calling Benefits at Heart. My name's Stephanie, how can I assist you?

Speaker speaker_0: I'm sorry? Yeah. Hi, I'd like to enroll in benefits for the medical.

Speaker speaker_3: Okay. What staffing agency do you work for?

Speaker speaker_0: Partners Personnel.

Speaker speaker_3: Yeah, and then what are the last four of your social?

Speaker speaker_0: 3498.

Speaker speaker_3: Okay, thank you.

Speaker speaker_0: No smoking is *****.

Speaker speaker_3: And then, could I please get your first and last name?

Speaker speaker_0: Kristine with a K.

Speaker speaker_3: Okay, and then the last name-

Speaker speaker_0: My last name is Tuantong, T-U-A-N-T-O-N-G.

Speaker speaker_3: Thank you. Um, for security purposes, I do need you to verify your address as well as your date of birth.

Speaker speaker_0: Um, 3327 Jeanette Ct, Tracy, California 95376. And then a date of birth of June 20th, 1994.

Speaker speaker_3: Um, did you recently move by any chance?

Speaker speaker_0: Um, I live, uh, under 2181 North Tracy Boulevard.

Speaker speaker_3: Okay. Would you like-

Speaker speaker_0: 95376.

Speaker speaker_3: Would you like me to update that address for you?

Speaker speaker_0: Uh, no, it's fine you can leave it at that.

Speaker speaker_3: Okay. Um, I have the phone number as 209-687-1267. Is that still a good number?

Speaker speaker_0: Yes.

Speaker speaker_3: And then- ... I have janetha95376@Gmail.com?

Speaker speaker_0: Yes.

Speaker speaker_3: Okay. All right, um, do you know already what you wanna enroll into or would you like me to go over the plans?

Speaker speaker_0: Um, do you guys have Kaiser?

Speaker speaker_3: I'm sorry? So the only thing health care-

Speaker speaker_0: Do you guys have Kaiser?

Speaker speaker_3: The only healthcare benefits that they offer is, uh, four, five different plans, um, one of them being a preventative plan which is called the Stay Healthy MEC Tela Rep. The other three being VIPs which is the standard-

Speaker speaker_0: Yeah.

Speaker speaker_3: ... plus and prime, and then another one that's called MEC Enhanced.

Speaker speaker_0: ME- What is the cheapest healthcare?

Speaker speaker_3: Um, so that would be your preventative, but for the preventative plan, which is that Stay Healthy MEC, for that one it only-

Speaker speaker_0: Mm-hmm.

Speaker speaker_3: ... covers your preventative services. So like one physical visit a year, some vaccinations, some ST screenings, some cancer screenings, and even some counseling. But for your Stay Healthy plan, that one will not cover, like doctor visits if you were to get sick, no hospital visits, no urgent care visits, no emergency room visits, nor surgeries. So that one would be the cheapest, but it's only a preventative plan. Um, that plan does have preventative benefits with your prescriptions through Aleve Farm, and it also offers something called VRS, which gives you access to over 800 of the top 90% generic drugs prescribed in the US for like a cheaper price. It also includes Walmart Health Virtual Care, which gives you medical assistance virtually. But like I said earlier, it's only for preventative services. Um, if you were to get-

Speaker speaker_0: And what was the next one after that?

Speaker speaker_3: Um, so the one after that-

Speaker speaker_0: The Stay Healthy?

Speaker speaker_3: So that would be a weekly deduction of \$16.80. That's for your preventative. Then there's three other plans called the VIPs. There's the standard, the plus, and the prime. Those are your hospital indemnity plans, meaning that those will cover your doctor visits if you were to get sick, hospital visits, urgent care, emergency room, and even some surgeries. The three of them-

Speaker speaker_0: Mm-hmm.

Speaker speaker_3: ... also have preventat- The three of them also have prescription benefits through Pharmacoville which you can pay up to \$10, \$20, \$30 for your generic prescriptions. And for your non-generic, they do offer somewhat of a discount. It also includes the Walmart Health Virtual Care which I had said earlier. It gives you medical assistance virtually with medical providers. With the VIPs, you're not required to just use their preferred providers. You could use providers outside of the network or in the network and with your MEC's Tela Reps, so your preventative one, that one you do have to stay within the network and only use their providers. But with the VIPs, you can be in or out of the network. Um, these, however, don't cover your preventative services, so they will only cover, like, your doctor visits, hospital visits,

urgent care, emergency rooms, and surgeries. So it's vice versa than the Stay Healthy. Um, with the stan- with the VIP-

Speaker speaker_0: Okay.

Speaker speaker_3: ... plus and prime, those cover a flat fee towards whatever service you go for. Out of the three other one, out of the three of them, the most basic one would be your VIP standard because that one wouldn't cover intensive care, rehabilitation, nor any preventive surgery that you may inquire. And the VIP plus and the prime do cover those four areas. However, out of the three hospital indemnity plans, the prime is the one that will cover a little bit more within, like, a dollar amount. So for example, if you were to go to have a surgery in the hospital, for the VIP standard which is the-

Speaker speaker_0: Mm-hmm.

Speaker speaker_3: ... one. That one covers a flat fee of \$250 per day, for a map up to one day. The VIP Plus would cover \$1,000 per day for a map up to one day. And then the VIP Prime would cover \$2,000 per day for a map up to two days. Another example is for an emergency room visit, the standard would cover \$50 per day for a map up to two days, the VIP Plus would cover \$100 per day for a map up to two days, and then the VIP Prime would cover \$150 per day for a map up to two days. If you were to select between those three plans, the standard for employee would be a weekly deduction of \$17.66. For the VIP Plus, it would be a weekly deduction of \$31.61. And then for the VIP Prime, it would be a weekly deduction of \$43.28. So, those are four, and there is a fifth one that includes both your preventative pre-preventative, um, services, so that would be what the Stay Healthy covers, like one physical a year, your immunizations, some cancer, STD screenings, and it also covers your hospital indemnity services. This one's called the MEC Enhanced, so this one covers both benefits. Um, however, you do have to stay within the network with the MEC Enhanced. This one also requires co-pays, like in the area of primary care visits, you would be limited to four visits annually per person, or 10 per family. And the copay for the MEC Enhanced in that area is \$10. For your specialty care visits, it's limited to four visits annually per person, or 10 per family, and the copay in that area is of \$50. For your urgent care visits, you would be limited to four visits annually per person, or 10 per family, and the copay in that area would be of \$60. And since you have both benefits with your preventative services as well as your hospital indemnity, you have pr- prescription benefits through ELECSA as well as through PharmaBill. But for your preventative prescriptions, you would be required to pay a co-payment with the MEC Enhanced . So, for your generic ones, pharmacy option, you would have a nine- a 30-day supply, and the copay in that area is of \$5. For your mail-order option, it would be a 90-day supply and that co-payment would be of \$15. This one also covers hospital admission benefit, \$1,000 per day for a map up to one day, hospital confinement benefit, \$100 per day for a map up to 30 days, surgery in hospitals, surgery and physician, medical imaging tests, advanced study, hospity- hospital emergency room, physician office. If you were to get the MEC Enhanced for employee only, it would be a weekly deduction of \$43.76. So, those are the five medical plans, so your preventative, which is the Stay Healthy MEC, your three VIPs, which are the standard, the plus, and the prime, and then your MEC Enhanced, which has both benefits with the preventative services as well as your hospital indemnity. So, those are the five medical plans, and then they also offer additional plans that you would have to add in

addition. If you do so at, like, one of the medicals and let's say you want dental, vision, something like that, um, they have their separate deductions.

Speaker speaker_4: Mm-hmm.

Speaker speaker_3: So, for dental, for employee only, it would be a weekly deduction of \$3.63. For the preventative pro- for the preventative visit, it covers you 100%. Anything basic, like a cleaning, it would cover you 80%. Basic restorative, so they have to put, like, fill in a cavity or something like that, that would be covered at 80%. Any x-rays that they may take would be covered at 80%. Your annual maximum is of \$500, and then for the dental plan, you would be required a one-time deductible. So, if you select the employee plan, it would be of \$50, and if you were to select the family plan, it would be of 150, but that's just a one-time deductible. They also offer vision for employee. That would be a weekly deduction of \$2.15. That area, there's co-pays, so the co-pay for an eye exam would be of \$10. The co-pay for lenses and frames would be of 25, and your frame allowance is of 130. They also offer term life, critical illness with cancer benefits, 24-hour group accident, short-term disability, and those all have their separate deductions that you would add in addition if you were looking into adding one of the medical plans.

Speaker speaker_4: Okay. Um, can I do... What was the standard for the, uh, weekly for the standard?

Speaker speaker_3: The standard for employee, or did you wanna add dependents?

Speaker speaker_4: For employee, for now.

Speaker speaker_3: So, the VIP-

Speaker speaker_4: Can I add dependents later?

Speaker speaker_3: Um, so there's only two periods where you could add any new plans or make changes in the level of the dependents, meaning, like, the plan's a standalone, or employee and spouse, or employee and child, or the family plan. The only time that you can do any changes is within your first 30 days of receiving your first check, which I can check to see. It looks like for you, that would be, I believe, December 18th-

Speaker speaker_4: Oh, 'cause of the company that I'm working for, um, they told me after 90 days they might hire me on to their company.

Speaker speaker_3: Mm-hmm.

Speaker speaker_4: So, right now I'm at the temp- temp- temp agency, but I'll be getting hired on to the company after 90 days. Um-... and I think they offer benefits as well too. I'm not sure-

Speaker speaker_3: Gotcha.

Speaker speaker_4: ... if it's the same thing as your guys'. Yeah. So, that's why I just wanted to add just me for right now on there.

Speaker speaker_3: Oh, okay. Gotcha. So, you would have till, like-

Speaker speaker_4: 'Cause I got sick yesterday.

Speaker speaker_3: It... Oh, gotcha. So, you have till December 18 to, like, make any changes. I was gonna tell you that, um, all of the medical plans, so the three VIPs, the standard, the plus and the prime, as well as the two MECS, the stay healthy, which is the preventative one, and then the one that offers both benefits, which is the MEC enhanced dental and vision, are under a IRS regulation that's called Section 125. So, what Section 125 is, it allows you to pay those particular plans that fall under that regulation with pre-taxed dollars. However, to make any changes or any changes in the level of your dependents, you would have to be within your first 30 days, meaning nothing past December 19-

Speaker speaker_4: Hmm.

Speaker speaker_3: ... to either cancel that plan or add dependents. Because if you call after that date, they're gonna tell you that you have to wait whenever the company's in their company open enrollment. Um, but since you-

Speaker speaker_4: Right.

Speaker speaker_3: ... said that you're only gonna be with them for so long, let's say that you do get hired on and you wanna continue to have, like, let's say this insurance, you're allowed to make-

Speaker speaker_4: Uh-huh.

Speaker speaker_3: ... up to four direct payments because these are deductions from your paycheck specifically. So, let's say you stop working with them-

Speaker speaker_4: Hmm.

Speaker speaker_3: ... or whatever, but you still want to keep your insurance, you can call us and make up to four direct payments. By the fifth week that they don't specifically get a deduction out of your paycheck, you go into something that's called COBRA enrollment, which allows you to continue having those particular plans that fall under COBRA even after you're not hired with them. Okay?

Speaker speaker_4: Mm-hmm.

Speaker speaker_3: Or let's say that you're like-

Speaker speaker_4: Oh.

Speaker speaker_3: ... "I don't want this insurance anymore." Um, by the fifth week that they don't get a deduction specifically out of your paycheck, it cancels it out.

Speaker speaker_4: Oh. Well, can I just get the-

Speaker speaker_3: Yeah. Thank you.

Speaker speaker_4: I, I think I'm just gonna get the standard one, the one that you had mentioned for 17.

Speaker speaker_3: Okay. Yeah, ma'am. For employee only?

Speaker speaker_4: Yeah, just for employee only.

Speaker speaker_3: Okay. And then, that's under the IRS regulations. So, just remember, if you want to cancel it or make changes in the level of your dependents, you have till December 18 to do that.

Speaker speaker_4: Mm-hmm.

Speaker speaker_3: Okay?

Speaker speaker_4: Okay.

Speaker speaker_3: And then did you want to add another one, or just the standard?

Speaker speaker_4: Just the standard.

Speaker speaker_3: Okay. Please allow one or two weeks for your employer to start making that deduction. Once you see the very first deduction from your paycheck of \$17.66, the following Monday of that deduction is when you would have active coverage in that first week of your activation week. Um, I w-... You're welcome to give us a call just in case you have, like, a doctor's appointment or anything and we can send you your card via email probably by that Wednesday. Um, because I was gonna tell you that normally for your VIP plans, they don't ever send those out to the member. So, you're welcome to give us a call that Monday of your activation week so that we can go ahead and put in a request for a physical one. But you would have to be active.

Speaker speaker_4: Okay.

Speaker speaker_3: Um, so I would just put a little reminder just in case you do want a physical copy of that card. You're welcome to give us that call that Monday and we'll go ahead and submit that request.

Speaker speaker_4: Okay. All right, thank you.

Speaker speaker_3: You're welcome. Um, do you have any more questions?

Speaker speaker_4: No, that'll be it.

Speaker speaker_3: Okay. I hope you have a great day.

Speaker speaker_4: So, all the information will-

Speaker speaker_3: ... a nice day in Hawaii.

Speaker speaker_4: So, the... All the information is gonna be through the email or through a text message for the, for that, uh, for the embo- employer?

Speaker speaker_3: Like, the card?

Speaker speaker_4: Yeah.

Speaker speaker_3: So, you're welcome to give us a call 'cause... You're welcome to give us a call once you see that, that your... You got that first deduction the following Monday.

Speaker speaker_4: Mm-hmm.

Speaker speaker_3: You can give us a call and, um, go ahead and put in that request for your physical card to be sent out to you. And then normally that first week that you have active coverage, by that Wednesday or Thursday, we have the cards ready via email. So, you're welcome to give us a call and we can send it to you.

Speaker speaker_4: Oh, okay.

Speaker speaker_3: Um, but I would call that Monday, that first Monday that you see that you have active coverage just in case you do-

Speaker speaker_4: Hmm.

Speaker speaker_3: ... want a physical one. And then that Wednesday or Thursday, um, we should have your policy number and information ready to be sent out to your email.

Speaker speaker_4: Okay. All right, thank you.

Speaker speaker_3: You're welcome. Have a nice day.

Speaker speaker_4: All right, you too. Bye-bye.