

Transcript: Estefania

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Full Transcript

Your call may be monitored or recorded for quality assurance purposes. Good afternoon. I'm calling from Benefits in a Card on behalf of TRC. I'm looking to speak with Mr. Demetrious. One moment. Okay. Hello? Hello? Hey. Good afternoon. I'm calling from Benefits in a Card on behalf of TRC. Um, I was calling because we're processing an enrollment form that you filled out on the 4th of this month. Um, you selected to be enrolled into the dental plan for \$14 for family, life, or employee plus spouse, and vision for employee plus spouse. However, um, you didn't provide the dependents' information. Um, did you still wanna add your family to that dental plan as well as your spouse to term life and vision, or did you- Oh. ... want to change the plans to employee only? Yeah, employee only. I didn't, um, I- I thought I was going too fast. Okay. Um, and then, okay, so I have dental for \$3.51 weekly for the employee plan, term life at \$2.09 weekly for the employee plan, and vision for \$2.15 weekly for the employee plan. That would be a weekly deduction of \$7.75. Um, did you want me to go over what those plans cover? Yes, you can. Okay, so let's see. Okay, so for dental, uh, preventive visits covered at 100%. Something basic like a cleansing of the teeth is covered at 80%. Basic restorative, so if they got a fill in a cavity, something simple like that, 80% is covered. X-rays, 80% is covered. And you have an annual maximum of \$500 with your dental plan. For example, you would have to give a one-time deductible of \$50 if you're choosing the employee plan. But that one-time deductible, you only provide once. Then for vision, you have copays. The copay for an eye exam that you would have to pay is only \$10. Copay for lenses and frames is \$25, and you have a frame allowance of \$130. So if you get frames that are a little bit more, they would cover \$130 and you would be responsible for the remaining balance. Then for term life and accidental death and dismemberment, employees to age 64 receive \$20,000, spouse, \$2,500, children six months up to the age of 26, \$2,500, and children 14 days up to six months, \$500. On the employee plan, that would be \$2.09 weekly, so it looks like your weekly deduction would be \$7.75. Um, were those the only plans that you wanted to add? Dental, term life, and vision? Yes. I did want to add my kids, but I gotta... I gotta, um, you know, get they- their social security numbers and everything so I can just, um- Mm-hmm. ... enroll them later. Okay, um- When that's all right. Go ahead. Um, so I was gonna tell you that only in two periods you're allowed to make changes like add dependents- Mm-hmm. ... or enroll in general. The first period is within the first 30 days of receiving your first check, or within company open enrollment. So if you pass the 30 days and you wanna add your kids and you call after the 30 days, they're gonna tell you that you have to wait for the next company open enrollment to be able to add them. So let me see what month that is in just in case you do pass the date. And I was also gonna tell you, though, that, um, if you don't have their socials, that's not an issue. We can put zeros for now, and once you have a hold of them, you're welcome to call back and add them. Um, but let me give you that date of their company open

enrollment. So for TRC, it's held in the month of September up until Dec- October. So if you still don't want to add your kids right now, um, and you... I- if you're within your first 30 days of receiving your check, you can add them, but if you pass those 30 days, you would have to wait for the company to be within company open enrollment, which is held in the month of September, okay? But like I said, if you do want to add them, you can. We can put zeros for now for their socials. But it's totally your option. Okay. Yeah, I mean, uh, I can just wait. Okay, that's fine. So it looks like for now your weekly deduction from your paycheck is gonna be \$7.75 weekly. Um, please allow one or two weeks for TRC to start making that very first deduction. Once you see the first deduction of the \$7.75 come out of your paycheck, the following Monday of this first deduction is when your plan becomes active. And by that first week of activation week, either Thursday or Friday, um, you're gonna receive your dental card and your vision card. Um, and if you have, like, a dentist appointment or eye doctor appointment and you still don't have your cards, you're welcome to give us a call and we can email them to your email as well. So now you really just have to play the waiting game and, um, be checking on your pay stubs to see when they finally do the first deduction. Once they deduct it the first time out of your check, the following Monday is when your plan becomes effective. And, um, since you added term life, who do you want to put down as your beneficiary if something was to happen? Um, I- I'm gonna put my son. Okay. What's your son's first and last name? Josiah. Josiah? J- oh, yeah. J- J-O-S-I-A-H. Uh-huh. And then the last name? Hicks. H-I-C-K-S. Okay. All right. I got Josiah down as your beneficiary. Did you have any other questions for me? No. Did I, did I get the medical, um, insurance too? O- or I just got the vision and a dental? You j- you just got, um, vision, dental and term life. Oh, can I get the medical too? Oh, I'm sorry. Yeah. So it says... Yeah. I'm sorry. Yeah, you're fine. Um, so I'm gonna have to go over the medical plans, because for those plans, they actually do offer different ones. Um, there's only one, um, vision plan and one dental. But when it comes to medical, they do have to choose from. So let me go over those. Give me one second. Let me pull that up. Okay. So for medical plans, it looks like they offer four different medical plans. The first plan that I'm gonna go over is the only one out of the four that covers your preventative services, as well as your actual hospital visits and doctor visits. Um, so when I mean preventatives, preventatives are considered anything like a physical, some yearly checkups, um, STD and cancer screenings. Those are your preventative services. And when I mean hospital indemnity, I mean your actual doctor visits when you get sick, your urgent care, emergency room, and even some surgeries. So this first plan that I'm about to go over is the only one that would cover those two areas. The other three either only cover your annual checkups and your preventative services, or just your actual doctor visits. So this first one covers both benefits. It does require, however, for you to stay within the network and only use their doctors and clinics to receive coverage. So they do provide access to, um, Clarita, which you can find, um, medical providers through them that take that insurance. When it comes to your primary care visits, you would be required co-pay of \$10 per visit, and you would be limited to four visits annually per person or 10 per family. When it comes to specialty care visits, a \$50 co-pay per visit is required, and you would be limited to four visits annually per person, or 10 per family. When it comes to urgent care, a \$60 co-pay per visit is required, and you would be limited to four visits annually per person, or 10 per family. You get two different, um, carriers when it comes to your prescriptions. So your pr- for your preventative prescriptions, pharmacy option, you have the 30-day supply and a \$5 co-pay would be

required. For mail-order option, you have a 90-day supply and a \$15 co-payment required. You also receive prescription benefits through Med Impact and Pharmacoville. Depending on the generic medication that it is, really depends on how much you pay. You can pay up to \$10, 20 or 30. And for the non-generic, they do offer you a discount. This plan includes something called Virtual Urgent Care, which offers medical assistance via telephone or video call with medical providers. And they cover a flat fee towards your hospital indemnity services. So for example, for surgery and hospital, they cover a flat fee of fi- \$500 per day for a max of one day. So that means if your bill is \$1,000, they'll cover 500, and you would be responsible for the remaining balance. This plan also covers group accident. If you choose this plan called the Stay Healthy NEC Enhanced, again, which is the one that requires co-pays for you to stay within the network and the only one that covers your preventative and hospital indemnity services. For the employee plan, that's \$36.23 weekly. Employee plus spouse is \$66.54 weekly. Employee and children is \$63.93 weekly. Where the family plan at \$94.18 weekly. So that's for the one that covers preventative and hospital indemnity. Then the second one that I'm gonna go over... The second two are called the VIPs. There's two different ones. There's the standard and the plus. The VIP standard and the plus don't require you to stay within network, so you can actually use clinics and doctors out of the network and still receive coverage as long as they accept that insurance. They do offer prescription benefits through Pharmacoville. Depending on the generic medication that you get, you can pay up to 10, 20 or \$30. And for the non generics, they offer you a discount. These two plans include virtual urgent care as well, which offers medical assistance virtually with medical providers. And they cover a flat fee towards your hospital indemnity services. So again, if, for example, surgery or hospital, the standard covers 250 per day for a max of a day, while the VIP plus covers \$1,000 per day for a max of one day. Um, out of the two, the standard is the most basic because it doesn't cover intensive care, rehabilitation, nor preventive surgery, while the VIP plus does. Um, the VIPs however only cover your actual doctor visits, let's say urgent care, emergency room, some surgeries and hospitalization if injured. But they don't cover your preventative services, which are a physical, um, STD and cancer screenings, some vaccines. That's not covered with the VIPs. Only your actual hospital indemnity services. Okay? Then the last plan is called the Stay Healthy NEC Tele-RS. This plan is only a preventative plan, so it's not gonna cover doctor visits, let's say hospital visits, urgent care, emergency room, nor surgeries. It only covers your preventative visits, which are like a physical, some vaccines, some STD and cancer screenings, but no doctor visits. Um, it does require you to stay within the network just like the NEC Enhanced.... for you to receive coverage. Um, that however, it does offer prescription benefits with Med Impact and it also includes the virtual urgent care and a membership with Free RS which gives you access to top 90% generic drugs prescribed in the US. But like I said earlier, the Stay Healthy plan is only a preventative plan. So, if you select the Stay Healthy for employee only, that's \$7.95. Employee and spouse, \$11.01. Employee and child, \$11.47 and the family plan for \$14.16. But that's only for your preventative services. Then the VIP Standard which only covers doctor visits and not preventative visits, for the employee plan it's \$17.73 weekly, employee and spouse, \$33.50. Employee and child, \$27.42 and the family f- plan, \$46.40. And for your VIP+, the, the other one that's only doctor visits, um, the employee plan is \$31.71 or employee and child is \$51.46. So, those are your medical plans. Did you have an idea of which one maybe you wanted to enroll into? Well, uh, this the one for me. I ain't worrying about the spouse or the kids right

now. Um, so one- Okay. So, your two VIPs only cover your doctor visits, but not your preventative, which are like a physical, your annuals and stuff and then the MDP, the Stay Healthy only covers preventative. Yeah. A- which one? The one... The VIP one that covers the doctor visits. Okay. Yeah. When I go to the doctor, yeah. Okay, so, uh, which one? There's two. There's the Standard and the Plus. The difference between the Standard and the Plus is that the Standard does not cover intensive care, rehabilitation, nor preventative surgery and the Plus does cover those four areas as well as- And how much is the Plus? Um, the Plus for employee is \$31.71 and the V- and the other one, the Standard is \$17.73. I'll do Standard. Th- that's- Okay. And just keep in mind that the Standard only covers your actual hospital indemnity services. So, they cover a flat fee towards it. Mm-hmm. Um, so for example, like, it says for emergency room, they'll cover \$50 per day for a max of th- two days. So, that means, like, let's say your bill's \$100, they'll cover \$50 and then you would be responsible for the other \$50. Mm-hmm. Okay? Um... No problem. And they only cover those hospital indemnity services, not your, like, physical, nor vaccines, nor STD and cancer screening, no preventative services, okay? Just hospital indemnity. Y- yeah. Okay. Yeah. No problem. Okay? So, once I add the VIP Standard to your plan, uh, dental, term life and vision, um, your new weekly deduction is \$25.48 weekly from your paycheck. Do you allow me to select this? Yes. Okay. And same thing, please allow one or two weeks for your staffing agency to start making this first deduction. Once you see the first deduction of th- the \$25.48 come out of your paycheck, the following Monday of that first deduction is when your plans become effective. Mm-hmm. And by that first week of active coverage, Thursday or Friday, you're gonna get your dental, vision card and then for your medical card which is your VIP plan, normally they don't send that card out to the members. So, if you do want a physical card, you're welcome to call this number and we can request it. But you're definitely gonna get dental and vision first. And if you were to need a physical one for your VIP plan, you can call us and we can put in a request. Um, I was also gonna tell you that if you have, like, an appointment coming up and you still don't have your cards, you can call us and we can email you your cards as well so that you can have them via email. Okay. Okay. Okay? So, now you just have to, um, be observing your pay stub to see when they finally deduct that. Since we don't have access to it, I wouldn't be able to tell you, but typically it takes, like, one or two weeks. Okay then. All right. Did you have any questions? No, that's it. All right. Well, thank you for your time. I hope you have a great day. You too. Hold on. Bye. Bye.

Conversation Format

Speaker speaker_0: Your call may be monitored or recorded for quality assurance purposes.

Speaker speaker_1: Good afternoon. I'm calling from Benefits in a Card on behalf of TRC. I'm looking to speak with Mr. Demetrius.

Speaker speaker_2: One moment.

Speaker speaker_1: Okay.

Speaker speaker_2: Hello? Hello?

Speaker speaker_1: Hey. Good afternoon. I'm calling from Benefits in a Card on behalf of TRC. Um, I was calling because we're processing an enrollment form that you filled out on the 4th of this month. Um, you selected to be enrolled into the dental plan for \$14 for family, life, or employee plus spouse, and vision for employee plus spouse. However, um, you didn't provide the dependents' information. Um, did you still wanna add your family to that dental plan as well as your spouse to term life and vision, or did you-

Speaker speaker_2: Oh.

Speaker speaker_1: ... want to change the plans to employee only?

Speaker speaker_2: Yeah, employee only. I didn't, um, I- I thought I was going too fast.

Speaker speaker_1: Okay. Um, and then, okay, so I have dental for \$3.51 weekly for the employee plan, term life at \$2.09 weekly for the employee plan, and vision for \$2.15 weekly for the employee plan. That would be a weekly deduction of \$7.75. Um, did you want me to go over what those plans cover?

Speaker speaker_2: Yes, you can.

Speaker speaker_1: Okay, so let's see. Okay, so for dental, uh, preventive visits covered at 100%. Something basic like a cleansing of the teeth is covered at 80%. Basic restorative, so if they got a fill in a cavity, something simple like that, 80% is covered. X-rays, 80% is covered. And you have an annual maximum of \$500 with your dental plan. For example, you would have to give a one-time deductible of \$50 if you're choosing the employee plan. But that one-time deductible, you only provide once. Then for vision, you have copays. The copay for an eye exam that you would have to pay is only \$10. Copay for lenses and frames is \$25, and you have a frame allowance of \$130. So if you get frames that are a little bit more, they would cover \$130 and you would be responsible for the remaining balance. Then for term life and accidental death and dismemberment, employees to age 64 receive \$20,000, spouse, \$2,500, children six months up to the age of 26, \$2,500, and children 14 days up to six months, \$500. On the employee plan, that would be \$2.09 weekly, so it looks like your weekly deduction would be \$7.75. Um, were those the only plans that you wanted to add? Dental, term life, and vision?

Speaker speaker_2: Yes. I did want to add my kids, but I gotta... I gotta, um, you know, get they- their social security numbers and everything so I can just, um-

Speaker speaker_1: Mm-hmm.

Speaker speaker_2: ... enroll them later.

Speaker speaker_1: Okay, um-

Speaker speaker_2: When that's all right. Go ahead.

Speaker speaker_1: Um, so I was gonna tell you that only in two periods you're allowed to make changes like add dependents-

Speaker speaker_2: Mm-hmm.

Speaker speaker_1: ... or enroll in general. The first period is within the first 30 days of receiving your first check, or within company open enrollment. So if you pass the 30 days and you wanna add your kids and you call after the 30 days, they're gonna tell you that you have to wait for the next company open enrollment to be able to add them. So let me see what month that is in just in case you do pass the date. And I was also gonna tell you, though, that, um, if you don't have their socials, that's not an issue. We can put zeros for now, and once you have a hold of them, you're welcome to call back and add them. Um, but let me give you that date of their company open enrollment. So for TRC, it's held in the month of September up until Dec- October. So if you still don't want to add your kids right now, um, and you... I- if you're within your first 30 days of receiving your check, you can add them, but if you pass those 30 days, you would have to wait for the company to be within company open enrollment, which is held in the month of September, okay? But like I said, if you do want to add them, you can. We can put zeros for now for their socials. But it's totally your option.

Speaker speaker_2: Okay. Yeah, I mean, uh, I can just wait.

Speaker speaker_1: Okay, that's fine. So it looks like for now your weekly deduction from your paycheck is gonna be \$7.75 weekly. Um, please allow one or two weeks for TRC to start making that very first deduction. Once you see the first deduction of the \$7.75 come out of your paycheck, the following Monday of this first deduction is when your plan becomes active. And by that first week of activation week, either Thursday or Friday, um, you're gonna receive your dental card and your vision card. Um, and if you have, like, a dentist appointment or eye doctor appointment and you still don't have your cards, you're welcome to give us a call and we can email them to your email as well. So now you really just have to play the waiting game and, um, be checking on your pay stubs to see when they finally do the first deduction. Once they deduct it the first time out of your check, the following Monday is when your plan becomes effective. And, um, since you added term life, who do you want to put down as your beneficiary if something was to happen?

Speaker speaker_2: Um, I- I'm gonna put my son.

Speaker speaker_1: Okay. What's your son's first and last name?

Speaker speaker_2: Josiah.

Speaker speaker_1: Josiah?

Speaker speaker_3: J- oh, yeah. J- J-O-S-I-A-H.

Speaker speaker_1: Uh-huh. And then the last name?

Speaker speaker_3: Hicks. H-I-C-K-S.

Speaker speaker_1: Okay. All right. I got Josiah down as your beneficiary. Did you have any other questions for me?

Speaker speaker_3: No. Did I, did I get the medical, um, insurance too? O- or I just got the vision and a dental?

Speaker speaker_1: You j- you just got, um, vision, dental and term life.

Speaker speaker_3: Oh, can I get the medical too? Oh, I'm sorry.

Speaker speaker_1: Yeah. So it says... Yeah.

Speaker speaker_3: I'm sorry.

Speaker speaker_1: Yeah, you're fine. Um, so I'm gonna have to go over the medical plans, because for those plans, they actually do offer different ones. Um, there's only one, um, vision plan and one dental. But when it comes to medical, they do have to choose from. So let me go over those. Give me one second. Let me pull that up. Okay. So for medical plans, it looks like they offer four different medical plans. The first plan that I'm gonna go over is the only one out of the four that covers your preventative services, as well as your actual hospital visits and doctor visits. Um, so when I mean preventatives, preventatives are considered anything like a physical, some yearly checkups, um, STD and cancer screenings. Those are your preventative services. And when I mean hospital indemnity, I mean your actual doctor visits when you get sick, your urgent care, emergency room, and even some surgeries. So this first plan that I'm about to go over is the only one that would cover those two areas. The other three either only cover your annual checkups and your preventative services, or just your actual doctor visits. So this first one covers both benefits. It does require, however, for you to stay within the network and only use their doctors and clinics to receive coverage. So they do provide access to, um, Clarita, which you can find, um, medical providers through them that take that insurance. When it comes to your primary care visits, you would be required co-pay of \$10 per visit, and you would be limited to four visits annually per person or 10 per family. When it comes to specialty care visits, a \$50 co-pay per visit is required, and you would be limited to four visits annually per person, or 10 per family. When it comes to urgent care, a \$60 co-pay per visit is required, and you would be limited to four visits annually per person, or 10 per family. You get two different, um, carriers when it comes to your prescriptions. So your preferred for your preventative prescriptions, pharmacy option, you have the 30-day supply and a \$5 co-pay would be required. For mail-order option, you have a 90-day supply and a \$15 co-payment required. You also receive prescription benefits through Med Impact and Pharmacoville. Depending on the generic medication that it is, really depends on how much you pay. You can pay up to \$10, 20 or 30. And for the non-generic, they do offer you a discount. This plan includes something called Virtual Urgent Care, which offers medical assistance via telephone or video call with medical providers. And they cover a flat fee towards your hospital indemnity services. So for example, for surgery and hospital, they cover a flat fee of fi- \$500 per day for a max of one day. So that means if your bill is \$1,000, they'll cover 500, and you would be responsible for the remaining balance. This plan also covers group accident. If you choose this plan called the Stay Healthy NEC Enhanced, again, which is the one that requires co-pays for you to stay within the network and the only one that covers your preventative and hospital indemnity services. For the employee plan, that's \$36.23 weekly. Employee plus spouse is \$66.54 weekly. Employee and children is \$63.93 weekly. Where the family plan at \$94.18 weekly. So that's for the one that covers preventative and hospital indemnity. Then the second one that I'm gonna go over... The second two are called the VIPs. There's two different ones. There's the standard and the plus. The VIP standard and the plus don't require you to stay within network, so you can actually use clinics and doctors out of the network and still receive coverage as long as they accept that insurance. They do

offer prescription benefits through Pharmacoville. Depending on the generic medication that you get, you can pay up to 10, 20 or \$30. And for the non generics, they offer you a discount. These two plans include virtual urgent care as well, which offers medical assistance virtually with medical providers. And they cover a flat fee towards your hospital indemnity services. So again, if, for example, surgery or hospital, the standard covers 250 per day for a max of a day, while the VIP plus covers \$1,000 per day for a max of one day. Um, out of the two, the standard is the most basic because it doesn't cover intensive care, rehabilitation, nor preventive surgery, while the VIP plus does. Um, the VIPs however only cover your actual doctor visits, let's say urgent care, emergency room, some surgeries and hospitalization if injured. But they don't cover your preventative services, which are a physical, um, STD and cancer screenings, some vaccines. That's not covered with the VIPs. Only your actual hospital indemnity services. Okay? Then the last plan is called the Stay Healthy NEC Tele-RS. This plan is only a preventative plan, so it's not gonna cover doctor visits, let's say hospital visits, urgent care, emergency room, nor surgeries. It only covers your preventative visits, which are like a physical, some vaccines, some STD and cancer screenings, but no doctor visits. Um, it does require you to stay within the network just like the NEC Enhanced.... for you to receive coverage. Um, that however, it does offer prescription benefits with Med Impact and it also includes the virtual urgent care and a membership with Free RS which gives you access to top 90% generic drugs prescribed in the US. But like I said earlier, the Stay Healthy plan is only a preventative plan. So, if you select the Stay Healthy for employee only, that's \$7.95. Employee and spouse, \$11.01. Employee and child, \$11.47 and the family plan for \$14.16. But that's only for your preventative services. Then the VIP Standard which only covers doctor visits and not preventative visits, for the employee plan it's \$17.73 weekly, employee and spouse, \$33.50. Employee and child, \$27.42 and the family f- plan, \$46.40. And for your VIP+, the, the other one that's only doctor visits, um, the employee plan is \$31.71 or employee and child is \$51.46. So, those are your medical plans. Did you have an idea of which one maybe you wanted to enroll into?

Speaker speaker_4: Well, uh, this the one for me. I ain't worrying about the spouse or the kids right now. Um, so one-

Speaker speaker_1: Okay. So, your two VIPs only cover your doctor visits, but not your preventative, which are like a physical, your annuals and stuff and then the MDP, the Stay Healthy only covers preventative.

Speaker speaker_4: Yeah.

Speaker speaker_1: A- which one?

Speaker speaker_4: The one... The VIP one that covers the doctor visits.

Speaker speaker_1: Okay.

Speaker speaker_4: Yeah. When I go to the doctor, yeah.

Speaker speaker_1: Okay, so, uh, which one? There's two. There's the Standard and the Plus. The difference between the Standard and the Plus is that the Standard does not cover intensive care, rehabilitation, nor preventative surgery and the Plus does cover those four

areas as well as-

Speaker speaker_4: And how much is the Plus?

Speaker speaker_1: Um, the Plus for employee is \$31.71 and the V- and the other one, the Standard is \$17.73.

Speaker speaker_4: I'll do Standard. Th- that's-

Speaker speaker_1: Okay. And just keep in mind that the Standard only covers your actual hospital indemnity services. So, they cover a flat fee towards it.

Speaker speaker_4: Mm-hmm.

Speaker speaker_1: Um, so for example, like, it says for emergency room, they'll cover \$50 per day for a max of th- two days. So, that means, like, let's say your bill's \$100, they'll cover \$50 and then you would be responsible for the other \$50.

Speaker speaker_4: Mm-hmm.

Speaker speaker_1: Okay? Um...

Speaker speaker_4: No problem.

Speaker speaker_1: And they only cover those hospital indemnity services, not your, like, physical, nor vaccines, nor STD and cancer screening, no preventative services, okay? Just hospital indemnity.

Speaker speaker_4: Y- yeah. Okay. Yeah. No problem.

Speaker speaker_1: Okay? So, once I add the VIP Standard to your plan, uh, dental, term life and vision, um, your new weekly deduction is \$25.48 weekly from your paycheck. Do you allow me to select this?

Speaker speaker_4: Yes.

Speaker speaker_1: Okay. And same thing, please allow one or two weeks for your staffing agency to start making this first deduction. Once you see the first deduction of th- the \$25.48 come out of your paycheck, the following Monday of that first deduction is when your plans become effective.

Speaker speaker_4: Mm-hmm.

Speaker speaker_1: And by that first week of active coverage, Thursday or Friday, you're gonna get your dental, vision card and then for your medical card which is your VIP plan, normally they don't send that card out to the members. So, if you do want a physical card, you're welcome to call this number and we can request it. But you're definitely gonna get dental and vision first. And if you were to need a physical one for your VIP plan, you can call us and we can put in a request. Um, I was also gonna tell you that if you have, like, an appointment coming up and you still don't have your cards, you can call us and we can email you your cards as well so that you can have them via email.

Speaker speaker_4: Okay. Okay.

Speaker speaker_1: Okay? So, now you just have to, um, be observing your pay stub to see when they finally deduct that. Since we don't have access to it, I wouldn't be able to tell you, but typically it takes, like, one or two weeks.

Speaker speaker_4: Okay then.

Speaker speaker_1: All right. Did you have any questions?

Speaker speaker_4: No, that's it.

Speaker speaker_1: All right. Well, thank you for your time. I hope you have a great day.

Speaker speaker_4: You too. Hold on.

Speaker speaker_1: Bye.

Speaker speaker_4: Bye.