

Transcript: Estefania

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Full Transcript

Thank you for calling Benefits in a Card. My name is Stephanie. How can I assist you? Hello. Um, I just started with this agency, ADAP, and they offered me the health benefits. But, um, I'm not sure like what each package consist of. Is there any way that, um- Yeah. I can- ... you can provide me? Yeah. Um, you said you're with ADAP and then what are the last four of your social? 8685. And your first and last name? Damon Martin. For security purposes, can you verify your address and date of birth? Um, 1323 West Francisquito Ave, Street, um, Apartment 86, Fort Covina, 91790. You said telephone number? No, um, date of birth. Okay, date of birth. Uh, February 15, 1980. And then I have 213-407-1360 as your phone number? Yes. Okay. And I have damien.martin2200@gmail.com. Is that up to date? Yes, it is. Okay. All right. So, uh, let's see. Okay. So they offer different medical plans. Depending on the one you select, how many you get has a lot to do with how much the weekly deduction is from your paycheck. So, it looks like they offer in total four different medical plans. Three of them only cover like doctor visits, the sick, urgent care, emergency room, and surgeries. They do not cover your preventative services, which is like a physical, your annual check-up, vaccines, STD/cancer screening. Um, and then the other, the last one, the fourth one does cover preventatives, but it doesn't cover your doctor visit. By the looks of it, they don't offer a plan that covers both, both benefits. So, if you did want to be covered in your actual doctor visits as well as your preventatives, which are like your annual check-ups, you would have to get two different medical plans. One being the VIP and the other one being the Stay Healthy, which is only a preventative plan. So, the first one I'm gonna go over is called the Stay Healthy MEC Tele-IRS. That's the preventative plan, that plan is only gonna cover things such as like a physical, some vaccines, some STD and cancer screening. But that plan does not cover any urgent care, any doctor visits. If you go to the doctor's visit, it's not gonna cover hospital visits nor surgeries. Oh, okay. Um, so it's only for your preventative visits, and it does require you to only use, um, the list of their doctors and clinics. So, it does require you to stay within the network and not step out of it, because if you step out of it, you won't be covered. Um, you do receive prescription benefits however through MediImpact, and you also receive, um, a membership with FreeRx! Which FreeRx, it offers you access to the top 90% generic drugs prescribed in the US. Some of those generic medications being free and some of them having their discount. It also adds a service called Virtual Urgent Care which offers medical assistance virtually with medical providers via telephone or video call. Um, if you select this plan, which is your preventative plan called the Stay Healthy, this is one is \$16.18. So, this is the only preventative plan that they offer. They also offer three other plans that are called the VIPs. There's three different ones. There's the standard, VIP Standard, VIP Classic, and the VIP Plus. These are the ones that will cover doctor visits, the sick hospital visits, if injured, urgent care, emergency room, and surgeries. These three don't require you to stay within

network. As long as the provider accepts the insurance, you can use it. Um, you also do receive prescription benefits through Pharmacoville. Depending on the generic medication that it is, depends on how much you spend, so you can pay up to \$20, \$10, \$30. It just depends. And for the non-generics, they offer you a discount. These three plans also do include virtual urgent care, which like I said earlier, it offers medical assistance virtually with medical providers. Um, and they cover a flat fee towards your service. So, out of the three of them, the m- the difference is the dollar amount that they cover. The Plus is gonna cover more than the Classic and the Standard. The Classic covers 100% more than the Plus does, but between the Classic and the Plus, the Plus is gonna cover a little bit more out of pocket. And then the Standard is gonna be the cheaper one because it does not cover your, like, intensive care unit, rehabilitation, nor any preventive surgery, while the VIP Classic and the Plus does. So, a good example is for surgery and hospital, the Standard being the basic one covers a flat fee of \$250 per day for a maximum of a day. While your VIP Classic would cover \$500 per day for a maximum of a day, and your VIP Plus covers \$1,000 per day for a maximum of a day. Another example- Okay. ... for surgery and physician office. Standard, \$125 per day, VIP Classic, \$250 per day for a maximum of two days, as well as the VIP Plus. So, if you select between the three VIPs, the standard one would be a weekly deduction of \$17.66.... the VIP Classic is \$19.57, and then the Plus is \$31.61. Okay. Um, and then- Okay. ... like I said, the VIPs only cover your doctor visits, so if you're looking into also getting preventative care coverage- Mm-hmm. ... you would have to get the Stay Healthy as well. Okay. And you just gotta keep in mind, it is a separate deduction 'cause it is a separate plan. Oh, gotcha. And if I wanted to add my spouse, um, 'cause I had her on my last healthcare- Mm-hmm. Um- ... I mean, right now, um- You... Yeah, you can do that. Um, it just... You, you just gotta keep in mind is, like, the more people you add, a little bit more that deduction is. Yeah. So if you add your spouse into the Stay Healthy, which is a- Mm-hmm. ... preventative plan, that one for employee and spouse is \$21.08. Okay. Then the VIP Standard, which is your basic, like, d- um, hospital indemnity plan, that one's \$33.50. The Classic, which is the one right in the middle, is \$38, and then the VIP Plus is \$66.51. Okay. So what, um, you recommend I get the Plus? Um, due to, um- So- ... she's, um... Excuse me. Um, still to conceive, um, and she still needs to, um, have a couple checkups with her doctor. Mm-hmm. Okay. Um, so I can't really give you recommendations- Mm-hmm. ... due to, like, liability issues. Okay. But if you're looking into the hospital indemnity plans, like I said- All right. ... the VIP Plus covers the most at a dollar amount. Mm-hmm. But the VIP Classic does cover everything that the Classic covers. Just that, let me see how many areas. So it's maybe, like, one, two, three. Three, three, four, five. So yeah, like, so in certain areas, the VIP Plus pays more out of pocket, but like I said, the VIP Classic covers every service that the VIP Plus does. However, in, like, less dollar amount, like surgery, Classic covers up to \$500 per day for a max of a day. VIP Plus covers \$1,000 per day for a max of a day. Um, another example, emergency room. The VIP Classic covers \$50 per day for a max of two days, while the VIP Plus covers \$100 per day for a max of two days. So it's really the dollar amount. Oh, okay. Addictions, speech, or occupational therapy. Classic covers \$30 per day for a max of four days, while your VIP Plus would cover \$60 per day for a max of four days. Oh, okay. If you get the Classic for your spouse and yourself, it's \$38 even, but if you get the VIP Plus, it's \$66.51. Okay. Okay. Okay. So that's good to know. Okay. And then I was gonna tell you that, um, the staffing agency that you're with, they make you pick a virtual restriction. So what that means is if you choose one

plan for employee and spouse, every plan that you choose after has to be with your spouse. If you choose one plan for employee only, every single plan has to be for yourself only. Oh. The only one that that would be an exception is short-term disability, because they only offer that one for employee. Oh, so including, uh, dental and vision, I still have to include my spouse in that? Add your spouse. Yes, sir. 'Cause of that virtual restriction that they- Okay. ... have with their plans. Okay. Um, and then far as, uh, dental, um, just the basic visit. For dental. Yeah, they only offer one. A preventative visit is covered at 100%. Something basic, like a cleansing of the teeth, is covered at 80%. Basic restorative, like if you gotta fill in a cavity, that's covered at 80%. X-rays are also covered at 80%, and your annual maximum is \$500. But the dental plan, you have to pay a one-time deductible, though. Um, you only provide that once. For the individual plan, it's \$50. If you would have selected the family plan, it would have been \$150, but- Okay. ... it would have only been visual. Okay. And that one's \$7.01 for, uh, for employee and spouse. For the spouse. Mm-hmm. \$7. Okay. And then, um, for vision, um, how much does it cover per year? Um, so that one, you have a frame allowance of \$130.00. Oh. Um, a copay for contacts and fittings is \$0.00. Copay for lenses and frames is \$25, and your copay for an eye exam is \$10.00. Okay. And that one, for employee and spouse- Okay. ... it's \$4.35. Wait, \$4.35. Okay. Hmm. Let me know. And let me see when your last date to enroll is, 'cause they give you, um, 30 days from the time that you receive your first check to be eligible- Mm-hmm. ... to enroll into the benefits. After those 30 days are up, they make you wait for the company, to be within company open enrollment. So just in case you're not so sure yet, I can give you your deadline date, just in case. Okay. That'd be perfect. Just in case you want to talk, um, with your- Okay. ... wife about it. Yeah, I- Um... ... know that they'll tell me that once my 90 days is up, um, the company will bring me in permanently and I'll pretty much enroll into their benefits. So, I just actually started here going on three weeks. Gotcha. Okay. So, let's see when your deadline period... Yeah, 'cause if you don't, like, enroll within the... Consider it your personal open enrollment- Mm-hmm. ... which are the first 30 days from the time that you receive your first check. Mm-hmm. They give you that, um, like, window. Okay. And then once you've passed the 30 days, you can still enroll, but you would have to wait for the company to be within enrollment time, which they do it annually during the same month every year. Mm-hmm. Let me see when that's to, 'cause I, I don't- Okay. I can check those two right now. So, they're not within company open enrollment till December. It looks like last year they did it between December 18 up until February the 23rd, and those people that enrolled between that window, their plans became effective January the 1st. Oh, that's super. Um, but let me see. So, it's definitely in December. I don't have the updated dates yet since it's still far out. Mm-hmm. But it looks like the last day that you have to enroll, it's gonna be on the 25th. So, next Friday. Next Friday? Okay. Yes, sir. So, if you do want to enroll, you have to call before Friday, nothing past- Okay. ... Friday. Um, we're open from 8:00 AM up until 8:00 PM Eastern Time. So, I think when we close- Okay. ... it's 5:00 where you live 'cause it's- Yeah. ... 3:35 right here. So, we're- Yeah. ... Eastern Time. Um, so you- Okay. ... would have... I would say call, like, honestly, before Friday, just so that you're in the safe zone. Yeah. Wait, wait, wait. Yeah, yeah, yeah. Before Friday. Um, I would call Thursday. I would make that your deadline date, to be honest, just to be sure that you do enroll if you do want to be enrolled into the benefits. So, if you're not so sure yet what you want to be enrolled into, that's fine, um, 'cause- Okay. ... you're still within your window of your personal open enrollment. But it is important that you call before, um, next Friday because if you wait and call, like, the Monday after,

they're gonna tell you- Mm-hmm. ... that you're outside your period and that you will have to call within enrollment time, which is not till December. So, that's like a- Okay. ... yeah, half a year. Okay. Okay. I'll most likely I'll have, um... I'll make a decision before this week is up and, um, contact you guys when I'm ready to set up a ... a free call? Okay. And then they don't have any type of auto enrollment. So, just in case you didn't want to enroll, you don't have to call or anything. Okay. But if you do want to enroll, you s-... you do have to call to let us- Okay. ... know when. And, um, um, if I enroll, will I be provided with, um, a package that's saying what, um, what providers are, are there any plans or- Yeah. So- ... access? ... once you've, you look at you, we can give you that information and stuff. Mm-hmm. Mm-hmm. Uh, the only one that requires a in-network is the StayHealthy one. Okay. But like I said, uh, the VIPs, which are your actual doctor visits and stuff, they don't require a in-network- Okay. ... but it really does depend on the provider, 'cause I know some of them only take major medical and these are not major medical plans. These are limited, um- Okay. ... so it just depends on the provider if he's like, "Okay, yeah, we can accept his insurance." Or, and if they say no, then you would have to go somewhere else. Gotcha. But once you become active, that following week... Um, so typically, you have to wait one or two weeks for the staffing agency to make the first deduction out of your paycheck. Okay. So, the plans don't become active right away. You gotta wait for them to deduct money out of your check first. Then that following- Okay. ... Monday, the plan becomes active and by that first or second week of your activation being active, you do get your cards mailed out to you. And then- Okay. ... um, those cards have the information of the carrier and then the number to contact to find a list of providers for that specific plan. So, for dental, for vision, um, and then as well as the pharmacy information. So, all of- Okay. ... that is mailed out to you and as well as, I was gonna tell you, if you have, like, an appointment coming up and you're waiting on your card, you can just- Mm-hmm. ... call us and we'll email you the card that you're gonna receive on the mail- Okay. Okay. ... list via email, and then it has those numbers there too. So, we- Oh, okay. ... make it really easy. Great. Yeah. Oh, um, that sounds good. Okay. Hmm. I think that was about it. Okay. Thank you. I- You're welcome. ... appreciate it. I hope you have a great day. You too.

Conversation Format

Speaker speaker_0: Thank you for calling Benefits in a Card. My name is Stephanie. How can I assist you?

Speaker speaker_1: Hello. Um, I just started with this agency, ADAP, and they offered me the health benefits. But, um, I'm not sure like what each package consist of. Is there any way that, um-

Speaker speaker_0: Yeah. I can-

Speaker speaker_1: ... you can provide me?

Speaker speaker_0: Yeah. Um, you said you're with ADAP and then what are the last four of your social?

Speaker speaker_1: 8685.

Speaker speaker_0: And your first and last name?

Speaker speaker_1: Damon Martin.

Speaker speaker_0: For security purposes, can you verify your address and date of birth?

Speaker speaker_1: Um, 1323 West Francisquito Ave, Street, um, Apartment 86, Fort Covina, 91790. You said telephone number?

Speaker speaker_0: No, um, date of birth.

Speaker speaker_1: Okay, date of birth. Uh, February 15, 1980.

Speaker speaker_0: And then I have 213-407-1360 as your phone number?

Speaker speaker_1: Yes.

Speaker speaker_0: Okay. And I have damien.martin2200@gmail.com. Is that up to date?

Speaker speaker_1: Yes, it is.

Speaker speaker_0: Okay. All right. So, uh, let's see. Okay. So they offer different medical plans. Depending on the one you select, how many you get has a lot to do with how much the weekly deduction is from your paycheck. So, it looks like they offer in total four different medical plans. Three of them only cover like doctor visits, the sick, urgent care, emergency room, and surgeries. They do not cover your preventative services, which is like a physical, your annual check-up, vaccines, STD/cancer screening. Um, and then the other, the last one, the fourth one does cover preventatives, but it doesn't cover your doctor visit. By the looks of it, they don't offer a plan that covers both, both benefits. So, if you did want to be covered in your actual doctor visits as well as your preventatives, which are like your annual check-ups, you would have to get two different medical plans. One being the VIP and the other one being the Stay Healthy, which is only a preventative plan. So, the first one I'm gonna go over is called the Stay Healthy MEC Tele-IRS. That's the preventative plan, that plan is only gonna cover things such as like a physical, some vaccines, some STD and cancer screening. But that plan does not cover any urgent care, any doctor visits. If you go to the doctor's visit, it's not gonna cover hospital visits nor surgeries.

Speaker speaker_1: Oh, okay.

Speaker speaker_0: Um, so it's only for your preventative visits, and it does require you to only use, um, the list of their doctors and clinics. So, it does require you to stay within the network and not step out of it, because if you step out of it, you won't be covered. Um, you do receive prescription benefits however through MediImpact, and you also receive, um, a membership with FreeRx! Which FreeRx, it offers you access to the top 90% generic drugs prescribed in the US. Some of those generic medications being free and some of them having their discount. It also adds a service called Virtual Urgent Care which offers medical assistance virtually with medical providers via telephone or video call. Um, if you select this plan, which is your preventative plan called the Stay Healthy, this is one is \$16.18. So, this is the only preventative plan that they offer. They also offer three other plans that are called the VIPs. There's three different ones. There's the standard, VIP Standard, VIP Classic, and the

VIP Plus. These are the ones that will cover doctor visits, the sick hospital visits, if injured, urgent care, emergency room, and surgeries. These three don't require you to stay within network. As long as the provider accepts the insurance, you can use it. Um, you also do receive prescription benefits through Pharmacoville. Depending on the generic medication that it is, depends on how much you spend, so you can pay up to \$20, \$10, \$30. It just depends. And for the non-generics, they offer you a discount. These three plans also do include virtual urgent care, which like I said earlier, it offers medical assistance virtually with medical providers. Um, and they cover a flat fee towards your service. So, out of the three of them, the m- the difference is the dollar amount that they cover. The Plus is gonna cover more than the Classic and the Standard. The Classic covers 100% more than the Plus does, but between the Classic and the Plus, the Plus is gonna cover a little bit more out of pocket. And then the Standard is gonna be the cheaper one because it does not cover your, like, intensive care unit, rehabilitation, nor any preventive surgery, while the VIP Classic and the Plus does. So, a good example is for surgery and hospital, the Standard being the basic one covers a flat fee of \$250 per day for a maximum of a day. While your VIP Classic would cover \$500 per day for a maximum of a day, and your VIP Plus covers \$1,000 per day for a maximum of a day. Another example-

Speaker speaker_1: Okay.

Speaker speaker_0: ... for surgery and physician office. Standard, \$125 per day, VIP Classic, \$250 per day for a maximum of two days, as well as the VIP Plus. So, if you select between the three VIPs, the standard one would be a weekly deduction of \$17.66.... the VIP Classic is \$19.57, and then the Plus is \$31.61.

Speaker speaker_1: Okay.

Speaker speaker_0: Um, and then-

Speaker speaker_1: Okay.

Speaker speaker_0: ... like I said, the VIPs only cover your doctor visits, so if you're looking into also getting preventative care coverage-

Speaker speaker_1: Mm-hmm.

Speaker speaker_0: ... you would have to get the Stay Healthy as well.

Speaker speaker_1: Okay.

Speaker speaker_0: And you just gotta keep in mind, it is a separate deduction 'cause it is a separate plan.

Speaker speaker_1: Oh, gotcha. And if I wanted to add my spouse, um, 'cause I had her on my last healthcare-

Speaker speaker_0: Mm-hmm. Um-

Speaker speaker_1: ... I mean, right now, um-

Speaker speaker_0: You... Yeah, you can do that. Um, it just... You, you just gotta keep in mind is, like, the more people you add, a little bit more that deduction is.

Speaker speaker_1: Yeah.

Speaker speaker_0: So if you add your spouse into the Stay Healthy, which is a-

Speaker speaker_1: Mm-hmm.

Speaker speaker_0: ... preventative plan, that one for employee and spouse is \$21.08.

Speaker speaker_1: Okay.

Speaker speaker_0: Then the VIP Standard, which is your basic, like, d- um, hospital indemnity plan, that one's \$33.50. The Classic, which is the one right in the middle, is \$38, and then the VIP Plus is \$66.51.

Speaker speaker_1: Okay. So what, um, you recommend I get the Plus? Um, due to, um-

Speaker speaker_0: So-

Speaker speaker_1: ... she's, um... Excuse me. Um, still to conceive, um, and she still needs to, um, have a couple checkups with her doctor.

Speaker speaker_0: Mm-hmm. Okay. Um, so I can't really give you recommendations-

Speaker speaker_1: Mm-hmm.

Speaker speaker_0: ... due to, like, liability issues.

Speaker speaker_1: Okay.

Speaker speaker_0: But if you're looking into the hospital indemnity plans, like I said-

Speaker speaker_1: All right.

Speaker speaker_0: ... the VIP Plus covers the most at a dollar amount.

Speaker speaker_1: Mm-hmm.

Speaker speaker_0: But the VIP Classic does cover everything that the Classic covers. Just that, let me see how many areas. So it's maybe, like, one, two, three. Three, three, four, five. So yeah, like, so in certain areas, the VIP Plus pays more out of pocket, but like I said, the VIP Classic covers every service that the VIP Plus does. However, in, like, less dollar amount, like surgery, Classic covers up to \$500 per day for a max of a day. VIP Plus covers \$1,000 per day for a max of a day. Um, another example, emergency room. The VIP Classic covers \$50 per day for a max of two days, while the VIP Plus covers \$100 per day for a max of two days. So it's really the dollar amount.

Speaker speaker_1: Oh, okay.

Speaker speaker_0: Addictions, speech, or occupational therapy. Classic covers \$30 per day for a max of four days, while your VIP Plus would cover \$60 per day for a max of four days.

Speaker speaker_1: Oh, okay.

Speaker speaker_0: If you get the Classic for your spouse and yourself, it's \$38 even, but if you get the VIP Plus, it's \$66.51.

Speaker speaker_1: Okay. Okay. Okay. So that's good to know. Okay.

Speaker speaker_0: And then I was gonna tell you that, um, the staffing agency that you're with, they make you pick a virtual restriction. So what that means is if you choose one plan for employee and spouse, every plan that you choose after has to be with your spouse. If you choose one plan for employee only, every single plan has to be for yourself only.

Speaker speaker_1: Oh.

Speaker speaker_0: The only one that that would be an exception is short-term disability, because they only offer that one for employee.

Speaker speaker_1: Oh, so including, uh, dental and vision, I still have to include my spouse in that?

Speaker speaker_0: Add your spouse. Yes, sir. 'Cause of that virtual restriction that they-

Speaker speaker_1: Okay.

Speaker speaker_0: ... have with their plans.

Speaker speaker_1: Okay. Um, and then far as, uh, dental, um, just the basic visit.

Speaker speaker_0: For dental. Yeah, they only offer one. A preventative visit is covered at 100%. Something basic, like a cleansing of the teeth, is covered at 80%. Basic restorative, like if you gotta fill in a cavity, that's covered at 80%. X-rays are also covered at 80%, and your annual maximum is \$500. But the dental plan, you have to pay a one-time deductible, though. Um, you only provide that once. For the individual plan, it's \$50. If you would have selected the family plan, it would have been \$150, but-

Speaker speaker_1: Okay.

Speaker speaker_0: ... it would have only been visual.

Speaker speaker_1: Okay.

Speaker speaker_0: And that one's \$7.01 for, uh, for employee and spouse.

Speaker speaker_1: For the spouse.

Speaker speaker_0: Mm-hmm.

Speaker speaker_1: \$7. Okay. And then, um, for vision, um, how much does it cover per year?

Speaker speaker_0: Um, so that one, you have a frame allowance of \$130.00.

Speaker speaker_1: Oh.

Speaker speaker_0: Um, a copay for contacts and fittings is \$0.00. Copay for lenses and frames is \$25, and your copay for an eye exam is \$10.00.

Speaker speaker_1: Okay.

Speaker speaker_0: And that one, for employee and spouse-

Speaker speaker_1: Okay.

Speaker speaker_0: ... it's \$4.35.

Speaker speaker_1: Wait, \$4.35. Okay. Hmm. Let me know.

Speaker speaker_0: And let me see when your last date to enroll is, 'cause they give you, um, 30 days from the time that you receive your first check to be eligible-

Speaker speaker_1: Mm-hmm.

Speaker speaker_0: ... to enroll into the benefits. After those 30 days are up, they make you wait for the company, to be within company open enrollment. So just in case you're not so sure yet, I can give you your deadline date, just in case.

Speaker speaker_1: Okay. That'd be perfect.

Speaker speaker_0: Just in case you want to talk, um, with your-

Speaker speaker_1: Okay.

Speaker speaker_0: ... wife about it.

Speaker speaker_1: Yeah, I-

Speaker speaker_0: Um...

Speaker speaker_1: ... know that they'll tell me that once my 90 days is up, um, the company will bring me in permanently and I'll pretty much enroll into their benefits. So, I just actually started here going on three weeks.

Speaker speaker_0: Gotcha. Okay. So, let's see when your deadline period... Yeah, 'cause if you don't, like, enroll within the... Consider it your personal open enrollment-

Speaker speaker_1: Mm-hmm.

Speaker speaker_0: ... which are the first 30 days from the time that you receive your first check.

Speaker speaker_1: Mm-hmm.

Speaker speaker_0: They give you that, um, like, window.

Speaker speaker_1: Okay.

Speaker speaker_0: And then once you've passed the 30 days, you can still enroll, but you would have to wait for the company to be within enrollment time, which they do it annually

during the same month every year.

Speaker speaker_1: Mm-hmm.

Speaker speaker_0: Let me see when that's to, 'cause I, I don't-

Speaker speaker_1: Okay.

Speaker speaker_0: I can check those two right now. So, they're not within company open enrollment till December. It looks like last year they did it between December 18 up until February the 23rd, and those people that enrolled between that window, their plans became effective January the 1st.

Speaker speaker_1: Oh, that's super.

Speaker speaker_0: Um, but let me see. So, it's definitely in December. I don't have the updated dates yet since it's still far out.

Speaker speaker_1: Mm-hmm.

Speaker speaker_0: But it looks like the last day that you have to enroll, it's gonna be on the 25th. So, next Friday.

Speaker speaker_1: Next Friday? Okay.

Speaker speaker_0: Yes, sir. So, if you do want to enroll, you have to call before Friday, nothing past-

Speaker speaker_1: Okay.

Speaker speaker_0: ... Friday. Um, we're open from 8:00 AM up until 8:00 PM Eastern Time. So, I think when we close-

Speaker speaker_1: Okay.

Speaker speaker_0: ... it's 5:00 where you live 'cause it's-

Speaker speaker_1: Yeah.

Speaker speaker_0: ... 3:35 right here. So, we're-

Speaker speaker_1: Yeah.

Speaker speaker_0: ... Eastern Time. Um, so you-

Speaker speaker_1: Okay.

Speaker speaker_0: ... would have... I would say call, like, honestly, before Friday, just so that you're in the safe zone.

Speaker speaker_1: Yeah.

Speaker speaker_0: Wait, wait, wait. Yeah, yeah, yeah. Before Friday. Um, I would call Thursday. I would make that your deadline date, to be honest, just to be sure that you do

enroll if you do want to be enrolled into the benefits. So, if you're not so sure yet what you want to be enrolled into, that's fine, um, 'cause-

Speaker speaker_1: Okay.

Speaker speaker_0: ... you're still within your window of your personal open enrollment. But it is important that you call before, um, next Friday because if you wait and call, like, the Monday after, they're gonna tell you-

Speaker speaker_1: Mm-hmm.

Speaker speaker_0: ... that you're outside your period and that you will have to call within enrollment time, which is not till December. So, that's like a-

Speaker speaker_1: Okay.

Speaker speaker_0: ... yeah, half a year.

Speaker speaker_1: Okay. Okay. I'll most likely I'll have, um... I'll make a decision before this week is up and, um, contact you guys when I'm ready to set up a

Speaker speaker_2: ... a free call?

Speaker speaker_0: Okay. And then they don't have any type of auto enrollment. So, just in case you didn't want to enroll, you don't have to call or anything.

Speaker speaker_1: Okay.

Speaker speaker_0: But if you do want to enroll, you s-... you do have to call to let us-

Speaker speaker_1: Okay.

Speaker speaker_0: ... know when.

Speaker speaker_1: And, um, um, if I enroll, will I be provided with, um, a package that's saying what, um, what providers are, are there any plans or-

Speaker speaker_0: Yeah. So-

Speaker speaker_1: ... access?

Speaker speaker_0: ... once you've, you look at you, we can give you that information and stuff.

Speaker speaker_1: Mm-hmm. Mm-hmm.

Speaker speaker_0: Uh, the only one that requires a in-network is the StayHealthy one.

Speaker speaker_1: Okay.

Speaker speaker_0: But like I said, uh, the VIPs, which are your actual doctor visits and stuff, they don't require a in-network-

Speaker speaker_1: Okay.

Speaker speaker_0: ... but it really does depend on the provider, 'cause I know some of them only take major medical and these are not major medical plans. These are limited, um-

Speaker speaker_1: Okay.

Speaker speaker_0: ... so it just depends on the provider if he's like, "Okay, yeah, we can accept his insurance." Or, and if they say no, then you would have to go somewhere else.

Speaker speaker_1: Gotcha.

Speaker speaker_0: But once you become active, that following week... Um, so typically, you have to wait one or two weeks for the staffing agency to make the first deduction out of your paycheck.

Speaker speaker_1: Okay.

Speaker speaker_0: So, the plans don't become active right away. You gotta wait for them to deduct money out of your check first. Then that following-

Speaker speaker_1: Okay.

Speaker speaker_0: ... Monday, the plan becomes active and by that first or second week of your activation being active, you do get your cards mailed out to you. And then-

Speaker speaker_1: Okay.

Speaker speaker_0: ... um, those cards have the information of the carrier and then the number to contact to find a list of providers for that specific plan. So, for dental, for vision, um, and then as well as the pharmacy information. So, all of-

Speaker speaker_1: Okay.

Speaker speaker_0: ... that is mailed out to you and as well as, I was gonna tell you, if you have, like, an appointment coming up and you're waiting on your card, you can just-

Speaker speaker_1: Mm-hmm.

Speaker speaker_0: ... call us and we'll email you the card that you're gonna receive on the mail-

Speaker speaker_1: Okay. Okay.

Speaker speaker_0: ... list via email, and then it has those numbers there too. So, we-

Speaker speaker_1: Oh, okay.

Speaker speaker_0: ... make it really easy.

Speaker speaker_1: Great.

Speaker speaker_0: Yeah.

Speaker speaker_1: Oh, um, that sounds good. Okay. Hmm. I think that was about it. Okay. Thank you. I-

Speaker speaker_0: You're welcome.

Speaker speaker_1: ... appreciate it.

Speaker speaker_0: I hope you have a great day.

Speaker speaker_1: You too.