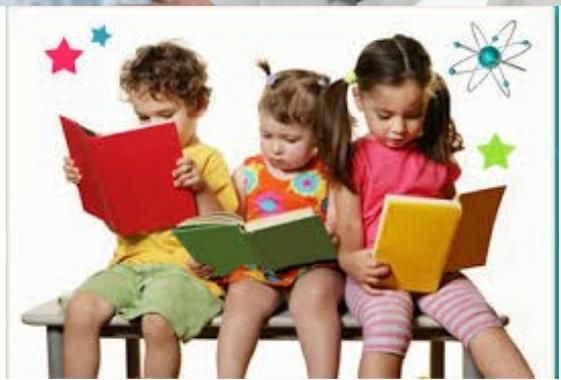




**Employee
Benefits
Guide**



**Together We Make
A Difference**



2016



Welcome to Your 2016 Benefits

Getting Started with your Employee Benefits

Endeavor Schools believes our faculty and staff are the cornerstones of the quality learning culture we bring to our students. We strive to ensure your experience at Endeavor is equally rewarding to you by providing you with a comprehensive benefits program that helps provide solutions to meet your needs and the needs of your family.

Our Benefit Plans

- ◆ Maintain a program that considers your individual needs;
- ◆ Provide competitive and comprehensive benefit options that allow you to choose your own plan based on your needs;
- ◆ Offer plans that provide long-term financial security for you and your family.

Wellness... Take it on

Our employees' overall health is crucially important to us—we depend on you! Our group's health also directly impacts the cost of all of our health insurance. We can help keep our healthcare more affordable for everyone and minimize future increases by taking a pro-active approach when it comes to our health. Take on the responsibility and challenge of committing to a healthy lifestyle.

We thank you for being a part of the Endeavor School family. We invite you to look through these benefit plans and take advantage of all Endeavor Schools has to offer.

Choose Well Tip

When deciding what medical plan option is best for you, start by considering the cost:

- ◆ Your cost of coverage - this is your premium or payroll deduction; and
- ◆ Your cost of care - copays, deductible, and coinsurance.

Generally, the higher your cost of coverage, the lower your cost for care - and vice versa. In addition to looking at your individual costs for care, you'll also want to think about your current health - are you relatively healthy and don't expect high out of pocket costs for medical care? Or do you or your covered dependents use health services often throughout the year? Answering these questions will help you with determining which health plan best meets your/your family's needs.



Your Employee Benefits

Endeavor School strives to provide our employees with the most comprehensive benefit package in the industry. Our employees are our greatest resource and we take pride in being able to offer comprehensive and affordable benefits for all our employees and their families.

This Employee Benefits Guide provides a summary of your benefit options. Your cost can be viewed when you log on to your personal enrollment portal at www.explainmybenefits.biz/es.

For additional information on the enrollment process and specific details of your plan, log on to Explain My Benefits website or contact your Explain My Benefits counselor at 321-296-8060; Option 1

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Who Is Eligible?

You are eligible for coverage if you are a permanent full-time employee working 30 hours per week. Your coverage begins on the first of the month following 60 days of employment, provided you successfully complete your probation period. The following family members are eligible for medical, dental, vision, optional life and applicable voluntary supplemental benefits insurance if you enroll for benefits:

- ◆ Your legal spouse
- ◆ Natural, adopted or step-children up to age 26; for employees residing in Florida, child(ren) may be covered up to age 30 for medical;
- ◆ Children under your legal guardianship;
- ◆ Any child who is named in a Qualified Medical Support Order (QMCSO) as defined under federal law; and
- ◆ Disabled children who have reached the maximum age and who are (or become) physically or mentally incapable of self-support (medical certification required).

Making Changes

Because certain benefit elections are part of a Section 125 plan, the IRS rules determine what changes are permitted outside of the normal enrollment period. Approved qualified change in status events include, but are not limited to:

- ◆ Marriage, divorce or legal separation;
- ◆ Birth or adoption of a child;
- ◆ Change in dependent eligibility, as defined by the plan;
- ◆ Death of your spouse, or other benefits eligible dependent; and
- ◆ Change in employment status for you, your spouse or eligible dependent.

Changes to your benefits must be consistent with the qualified event. In addition, you must make your election within 30 days following the status change, or you will not be able to make changes until the next Open Enrollment period. Except for the birth or adoption of a child, changes in coverage will be effective on the 1st of the month following timely notification of the change.



Choose Well Tip: In-Network Preventive Care is Free. Partner with your doctor to live and work at your healthy best. Get the immunizations, screenings, and check-ups you and your family need. Endeavor’s Medical/Rx plans cover these services at 100% when they meet preventative care guidelines and are performed in network.

	Aetna / American Public Life		Aetna
100%	BRONZE with MedLink		GOLD
Benefits Highlights	In-Network	Supplemental Benefit	In-Network
Physician Services			
PCP Office Visits	\$30		\$35
Specialist Visits	\$75		\$60
Pre natal maternity care	Covered at 100%		Covered at 100%
Preventive Care			
Well Child Care	Covered at 100%		Covered at 100%
Routine Adult Physical Exam	Covered at 100%		Covered at 100%
Well Woman/GYN Exam	Covered at 100%		Covered at 100%
Mammograms	Covered at 100%		Covered at 100%
Hospital Services			
Inpatient	30% after deductible	\$2,500/person/year; \$7,500 Max/family/year*	\$100
Outpatient	30% after deductible	up to \$500/person/calendar day*	0% after Deductible
Emergency Services			
Emergency Room	30% after deductible	up to \$500/person/calendar day*	\$300
Urgent Care Center	30%, Deductible waived	up to \$500/person/calendar day*	\$75
Walk in Clinics	\$30		\$35
Diagnostic X-ray/Lab			
Diagnostic Lab Facility	Covered at 100%		\$35
Diagnostic X-ray Facility*	Covered at 100%		\$35
Major Services - PET Scans, MRI, CT Scans	30% after deductible	up to \$500/person/calendar day*	\$100
Deductible			
Single	\$5,000		\$1,500
Family	\$10,000		\$3,000
Out-of-Pocket Limit			
Single	\$6,850		\$4,500
Family	\$13,700		\$9,000
Out-of-Pocket Includes	Deductible, Coinsurance, Copays		Deductible, Coinsurance, Copays
Prescription Drugs			
Retail—30 day supply			
Tier 1	\$15		Tier 1A-\$3/Generic \$10
Tier 2	\$35		\$35
Tier 3	\$65		\$60
Tier 4 (Specialty Drugs)	30% up to \$250 max copay		30% up to \$250 max copay
Mail Order - 90 day supply	2.5x retail (Tiers 1-3)		2.5x retail (Tiers 1-3)
	Out of Network		Out of Network
Deductible			
Single		\$12,000	\$3,000
Family		\$24,000	\$6,000
Coinsurance		40%	30%
Out-of-Pocket Limit			
Single		\$15,000	\$13,000
Family		\$30,000	\$26,000
Emergency Services			
Emergency Room	30% after deductible		\$300 copayment

NOTE: Both Aetna plans (Bronze and Gold) have an Open Access feature that allows members to see specialists without a referral.

*Please refer to the medical benefit coverage details. The MedLink gap plan covers \$500 out of pocket per person per day for all covered outpatient services. Benefits are payable only if the member has a financial responsibility from a deductible and/or coinsurance in or out of network.

A full listing of medical services that are subject to deductible and coinsurance are available on the Aetna Benefit Summary sheet. The above chart is for illustrative purpose only; actual benefits described in the Certificates of Coverage will prevail.

Aetna Online Tools at Your Fingertips



Secure Member Account

Our member website lets employees:

- Get member ID cards
- Track a claim
- See who's covered by their plan
- Manage health and dependent care spending accounts
- Contact member Service—and more



And our virtual online assistance, Ann, helps you register, log in and find information and tools they're looking for on any page of the website.

Talk with Member Services

Our Member services Call center is open 8 a.m. to 9 p.m. EST. We're ready to:

- Review the claims process, so your employees don't have to contact you or their doctor
- Help callers understand their benefit plan

Get help 24/7 by calling 1.800.203.9978

Our interactive choice-response phone system lets your employees:

- Check the status of claims, order member IDs and more
- Reach a customer service representative

It even transfers caller information to the customer service representative, so your employees won't have to repeat their plan information.

The Aetna Mobile app puts our most popular online features at your fingertips.

It's available for iPhone and android mobile device. You can visit www.aetna.com/mobile

Our mobile app gives you access to your secure member information, anytime, anywhere. Use it to:

- Search for a doctor, dentist, or facility
- Use the Urgent Care Finder to find urgent care centers and walk-in clinics
- Log in to your secure member site, where you can:
 - ⇒ View claims
 - ⇒ View coverage and benefits
 - ⇒ View your Personal Health Record
 - ⇒ View your ID card information
 - ⇒ Contact us by phone or e-mail
 - ⇒ Manage disability/absence benefits
 - ⇒ Speak with a certified doctor via Teladoc
 - ⇒ Use Member Payment Estimator to compare cost estimates
 - ⇒ Look up symptoms on iTriage
 - ⇒ View and reply to secure messages
 - ⇒ Complete a health assessment and enroll in an online health coaching program



Find What you Need - Wherever, Whenever - with Aetna Mobile: Text Apps to 23862 to download now.

Discount Programs - Start Saving Today. You can save on everything listed below and so much more. It's easy. To get started: Log into your secure member website at www.aetna.com once you're an Aetna member, choose "Health Programs", then "See the discount". Follow the steps for each discount you want to use.



- ◆ Hearing Discounts
- ◆ Weight Management Discounts
- ◆ Natural Products and Services Discounts
- ◆ Vision Discounts



Fitness Discounts - Get your guaranteed lowest rates at your choice of over 10,000 gyms (and growing) in the GlobalFit network. This offer is only for new gym members only. If you belong to a gym now, or belonged recently, call GlobalFit at **1.800.298.7800** to see if discount applies. Do you prefer to exercise in the privacy of your home? Get discounts on elliptical trainers, treadmills and strength equipment, and start building your home gym today. Visit www.globalfit.com/fitness.

Additional Information

Primary Care Physicians - the care you deserve

PCP's typically work in the fields of family medicine, internal medicine or general pediatrics. PCP's provide an efficient way to access care, and having a PCP can help minimize trips to the emergency room and urgent care centers. In addition, having a PCP means you have chosen a health care professional with whom you are comfortable. From prevention to diagnosis, to specialty care, and rehabilitation, your PCP will advocate your personal needs and coordinate your care. Should you need to see a Specialist, know that you do not need a referral.



Choose Well Tip: 24 Hour Informed Health Line

Access registered nurses who are experienced in providing information on a variety of health topics. This trusted source of information and support lets you speak directly with an experienced nurse 24-hours, every day of the year. Simply register online at www.aetna.com or call **1.855.456.9126**. The nurse can help you learn self-care techniques and understand what symptoms might mean. You also can get information that can help you choose appropriate care for your needs.

When beginning the journey of complete health care, it is important to have a guide. A guide that knows you, your medical history, your best interests and your need for care. You can look to your primary care physician (PCP) to be your guide.



Endeavor Schools has enhanced the Aetna Bronze Plan by building in supplemental benefits thru American Public Life. Your insurance coverage will cover a portion of your overall medical expenses, but the MedLink medical gap plan is designed to help cover your out-of-pocket expenses. By supplementing the Bronze plan with MedLink medical gap insurance, it will help you pay for expenses, such as:

- Deductibles
- Co-payments
- Co-insurance

The MedLink medical gap benefits can be paid directly to you or assigned to a chosen hospital, treatment facility or physician.

Coverages included:

- Inpatient Benefits
- Outpatient Benefits
- Cancer Outpatient Treatment
- Ambulance
- Physical Therapy

Benefits are payable up to the benefit limit as per the medical plan to help cover your financial responsibility that result from the deductible, copayments and out of pocket expenses incurred by each covered member. More information is available on the enrollment portal.

Important Tips for Your Medical Plan



Make sure you're always seeing Contracted Providers

How do I locate an Aetna provider:

Online:

Register on www.aetna.com

- 1) Once in the site, click on "Find a Doctor" button located in the center of the page under Helpful links for members.
- 2) Member Log In appears, click on "Register Now".
- 3) Click on "Find a Doctor, Dentist or Facility" under I want to...
- 4) Narrow your results by clicking on the available filter options.

Phone

- 1) **1.888.266.5519**

Make sure you always review your "Aetna "Explanation of Benefits" (EOB)



What if I receive an invoice from a provider or a facility and I verified they were contracted with Aetna?

- 1) Retrieve your EOB from Aetna for that specific claim/date of service.
- 2) If the amount that you owe on the EOB is equal to the amount on the invoice, then the Invoice should be paid.
- 3) If the amount that you owe on the EOB is less than the amount on the invoice (the invoice is greater) and you're certain you went to a contracted Aetna provider, send a copy of your EOB with the invoice and the amount that Aetna states you owe to your Aetna contracted provider/facility.



When your Doctor orders lab work, please ensure that you're visiting a contracted Quest Diagnostic facility ONLY. If your Doctor performs lab work in their office, remind them to send it to Quest Diagnostic.



When you visit your Contracted Aetna provider for your Annual Physical/Exam make sure you're stating that this is your "Preventive Visit" so that you're not charged. (Remember if you're treated for an illness during this visit it will no longer be considered a preventive visit and you will be charged the applicable copay/coinsurance.



If your Doctor orders an MRI, CT Scan or an Ultrasound, remember that an Independent Testing Facility is much more cost effective than a hospital.

****Remember you can call Aetna or log in to www.aetna.com to get an estimate on how much services will cost.****



If you DO NOT have a life threatening emergency then remember to visit an Urgent Care Center or a Contracted Convenience Care Center for Medical services. (You will only be charged your Primary Copay when you visit a Contracted Minute Clinic or Walgreen's Take Care Clinic).

CVS Minute Clinics



Walgreens Take Care Clinics



Don't forget about the Generic Drug Discount programs that are available at most retail chains. (Publix-free antibiotics, WalMart, Target)





Dental Benefits that Keep You Smiling

Strong teeth and gums are an important part of good health, which is why Endeavor School offers you and your eligible dependents comprehensive dental coverage through Aetna. To help you and your family prevent the incidence of higher cost treatments, the dental plans cover preventive exams at 100%.

Choose Well Tip: Be a Smart Dental Consumer

1. Establish a relationship with a dentist you trust and is participating as an in-network dentist.
2. Schedule regular dental cleanings and exams to reduce the risk of tooth decay and gum disease.
3. Request a pre-determination of benefits before you have major services to help you project your costs.

Aetna				
	Silver		Platinum	
Summary of Services	In-Network	Out-of-Network	In-Network	Out-of-Network
Annual Deductible				
Individual	\$50	\$50	\$50	\$50
Family	\$150	\$150	\$150	\$150
Preventive Services				
Oral Exams	100%	100%	100%	100%
Bitewing X-rays				
Cleanings, Fluoride Treatment, Sealants				
Basic Services				
Root canal therapy, with x-rays, molar teeth	80%	80%	80%	80%
Osseous surgery				
Surgical removal of impacted tooth				
General anesthesia / intravenous sedation				
Crown Lengthening				
Crown Build-Ups				
Implants				
Major Services				
Root canal therapy, with x-rays, molar teeth	50%	50%	50%	50%
Osseous surgery				
Surgical removal of impacted tooth				
General anesthesia / intravenous sedation				
Crown Lengthening				
Crown Build-Ups				
Implants				
Orthodontic Services (Child Only)				
Orthodontic Deductible	None		None	
Orthodontic Lifetime Maximum	\$1,000		\$1,500	
Annual Benefit Maximum	\$1,000		\$1,500	

The above chart is for illustrative purpose only; actual benefits described in the Certificate of Coverage will prevail.



Keep An Eye On Your Vision Coverage

Wellness is also about keeping your eyes healthy. That’s why everyone should get regular vision checkups by qualified doctors. Endeavor School offers a vision plan from Vision Service Plan (VSP) which provides coverage for eye exams, prescription lenses and frames, or contact lenses for you and your eligible family members. Although you may select any licensed provider, you receive the highest level of benefits when you see a network provider.

Vision Plan Highlights		
Summary of Services	In-Network	Out-of-Network Reimbursement
Eye Exams (once every 12 months)	\$10 copay	Up to \$45
Lenses (once every 12 months) ◆ Single Vision ◆ Bifocal ◆ Trifocal	\$25 copay then 100% \$25 copay then 100% \$25 copay then 100%	Up to \$30 Up to \$50 Up to \$65
Frames (once every 24 months)	Up to \$130 allowance	Up to \$70
Contact Lenses - Elective (once every 12 months)	\$130 allowance	Up to \$105 reimbursement
Contact Lenses Medically Necessary	\$25 copay then 100%	Up to \$210 reimbursement

Choose Well Tip: Consider using VSP providers for eye care needs to help save on out-of-pocket expenses. You want the best possible care, so on your next visit to your eye doctor be sure to:

- ◆ Take your list of medications - prescriptions and non prescriptions, including vitamins - and share this information with your doctor.
- ◆ Tell your doctor about any vision problems and share your family health history. If you have medical conditions such as high blood pressure or diabetes, let your doctor know.
- ◆ Talk about your daily habits and hobbies, such as how often you use a computer each day or whether you do a lot of close-up work or work outdoors. Hobbies like sports, reading and needlework can impact eye care suggestions, so share this information too

The above chart is for illustrative purpose only; actual benefits described in Certificate of Coverage will prevail.



Voluntary Benefits for When Life Takes an Unexpected Turn



What are Voluntary Benefits?

These benefits are to strengthen your overall benefits package.

You can customize your benefits based on need and affordability. You are eligible to participate in these benefits even if you do not participate in the company sponsored medical plan.

OWNERSHIP - Policies are fully portable and belong to you if you leave your employer, same price and same plan.

SPECIAL UNDERWRITING FOR NEWLY ELIGIBLE EMPLOYEES

ONE TIME OFFER ONLY - Guaranteed Issue for Newly Benefit Eligible Employees

- Benefits are payroll deducted
- These benefits begin at as little as a few dollars per week.
- Cash benefits are paid directly to you, not to a hospital or to a doctor
- Cash benefits are above and beyond and completely separate from medical insurance and other benefits
- Designed to provide additional cash flow to assist with out of pocket medical costs and other bills

Allstate Accident Semi-Monthly Employee Cost	Employee Only	Employee & Spouse	Employee & Child(ren)	Employee & Family
	\$9.01	\$16.94	\$18.44	\$22.45

Allstate Accident: If you were suddenly injured in an accident, how would you manage the expenses of life during your recovery? Allstate's Voluntary Accident is designed to cover unexpected expenses that result from an accident.

- Covers you and your family 24 hours a day/7 days a week
- Family coverage available - sports injuries are covered except for professionally paid athletes
- Cash Benefits are paid directly to YOU
- Pays a defined benefit for doctor's visits, surgery to repair fractures, hospitalization, burns and dislocations resulting from an accident
- Fully portable



Short Term Disability - Short Term Disability gives you a source of income when you cannot go to work due to a covered sickness or off the job injury.

- A guaranteed issue monthly benefit from a minimum of \$400 up to \$5,000 (*based on 60% of monthly income*)
- Benefits begin accruing on the 14th calendar day
- Benefits will be paid out for up to 6 months.
- Fully Portable

Life Insurance – Term to Age 100 - Designed to change the way you think about term insurance by offering coverage that will be with you until age 100.

- Pays a lump-sum cash benefit when you die before age 100
- Provides long term financial security as you pay the same rate to age 100.
- Guaranteed coverage for you, your spouse and dependent
- Fully Portable

Rates are age and tobacco based. Please see Human Resources for rate information.

Glossary of Terms



Brand Name Drugs: Drugs that have trade names and are protected by patents. Brand name drugs are generally the most costly choice.

Coinsurance: The percentage of a covered charge paid by the plan.

Consumer Driven Health Plan (CDHP): A medical plan used in conjunction with a health reimbursement account (HRA) or a health savings account (HSA).

Copayment (Copay): A flat dollar amount you pay for medical or prescription drug services regardless of the actual amount charged by your doctor or health care provider.

Deductible: The annual amount you and your family must pay each year before the plan pays benefits.

Generic Drugs: Generic drugs are less expensive versions of brand name drugs that have the same intended use, dosage, effects, risks, safety and strength. The strength and purity of generic medications are strictly regulated by the Federal Food and Drug Administration.

High Deductible Health Plan (HDHP): A medical plan that may be used in conjunction with a health reimbursement account (HRA) or a health savings account (HSA).

Health Reimbursement Account (HRA): A fund you can use to help pay for eligible medical costs not covered by your medical plan. Funds are contributed to the HRA by your employer.

Health Savings Account (HSA): A fund you can use to help pay for eligible medical costs not covered by your medical plan. Both employers and employees may contribute to this fund; employees do so through pre-tax payroll deductions. Equity partners can have monthly contributions charged against their monthly draw account.

In-Network: Use of health care provider that participates in the plan's network. When you use providers in the network, you lower your out-of-pocket expenses because the plan pays a higher percentage of covered expenses.

Inpatient: Services provided to an individual during an overnight hospital stay.

Out-of-Network: Use of health care provider that does not participate in a plan's network.

Mail Order Pharmacy: Mail order pharmacies generally provide 90-day supply of a prescription medication for the same cost as a 60-day supply at a retail pharmacy. Plus, mail order pharmacies offer the convenience of shipping directly to your door.

Outpatient: Services provided to an individual at a hospital facility without an overnight hospital stay.

Out-of-Pocket Maximum: The maximum amount you and your family must pay for eligible expenses each plan year. Once your expenses reach the out-of-pocket maximum, the plan pays benefits at 100% of eligible expenses for the remainder of the year.

Primary Care Physician (PCP): Physician (generally a family practitioner, an internist or pediatrician) who provides ongoing medical care. A primary care physician treats a wide variety of health-related conditions and refers patients to specialists as necessary.

Specialist: A physician who has specialized training in a particular branch of medicine (e.g. a surgeon, gastroenterologist or neurologist).

Contact Us

When you have questions,
we're here to help.



Important Benefit Resources

Insurance Carriers and Customer Service Contact Information

Provider	Coverage	Member Services	Website
Aetna	Medical Plans Member Services	1.888.266.5519	www.aetna.com
Aetna	Informed Nurse Line	1.800.556.1555	www.aetna.com
Aetna	Behavioral Health	1.866.230.9951	www.aetnabehavioralhealth.com
Aetna RX	Prescription Drugs	1.800.238.6279	www.aetna.com
Aetna	Fitness Discounts	1.800.298.7800	www.globalfit.com/fitness
Aetna	Dental Plan Member Services	1.877.238.6200	www.aetna.com
Allstate	Short Term, Accident & Life Insurance	EMB Service 321.296.8060 Option 2	Email: service@explainmybenefits.biz
American Public Life (MedLink)	Supplemental Benefit	1.800.256.8606	www.ampublic.com
VSP (Vision Service Plan)	VSP	1.800.877.7197	www.VSP.com



**If you have any questions about your Employee Benefits Guide,
please contact your Explain My Benefits counselor.**

About This Guide.

This overview guide shows only highlights of your Endeavor benefits. This is not a complete detailed description, nor is it a contract of employment or guarantee of benefits. More detailed information is contained in the relevant Certificates of Coverage provided by your insurance carrier.

Great care has been taken to ensure that this overview is accurate. However, oversights can occur or condensed summaries can be misinterpreted. If there is a difference between this overview guide or the Certificates of Coverage, Summary Plan Description and the official plan documents or contracts that govern the plan, the plan documents or contracts will be followed. Endeavor does not intend to terminate the plans described in this guide, however, the organization reserves the right to amend or terminate the program in whole or in part at any time.