

Employee/Dependent/Waiving/Enrollment Acknowledgment

I hereby represent that all information provided for the eligible employees and dependents listed on the **Employee Enrollment Template** (form 1133-5) is accurate. **The list includes newly hired and employees in the waiting period.** I certify that the information provided can be verified. Upon request, I agree to provide the documentation requested to prove eligibility.

I further represent that all employees and dependents listed on the **Employee Enrollment Template** have been given the opportunity to elect the group coverage available to them and that no employee or dependent was pressured or induced into waiving coverage.

All eligible employees have been provided the "Important Notice" attached.

☐ Yes, my employee(s) that have provided an email address, agree to receive employee benefit documents, including but not limited to: plan documents, summary plan descriptions, summary of benefits and coverage, policies, contracts, agreements, letters and notices through electronic media using a computer with internet access. Access to our electronic email system is an integral part of our employee(s) duties. My employee(s) understand he or she can receive printed documents at no cost after notifying Star Marketing and Administration, Inc. of a change in preference.

I understand that these representations can be verified, upon request.

BY SIGNING THIS DOCUMENT, I AGREE THIS IS THE FINAL ENROLLMENT FOR THIS PLAN YEAR. ANY ELIGIBLE EMPLOYEE AND/OR DEPENDENT WHO WAIVED OR DID NOT ENROLL FOR COVERAGE AT THIS TIME WILL NOT BE PERMITTED TO ENROLL FOR COVERAGE UNTIL THE ANNUAL OPEN ENROLLMENT PERIOD. THE ANNUAL OPEN ENROLLMENT PERIOD IS THE MONTH PRIOR TO THE START OF THE NEXT NEW PLAN YEAR. NOTE: SPECIAL GUIDELINES APPLY FOR SPECIAL ENROLLMENTS.

Signature of Authorized Company Officer (Employer)

Title

Date

NOTE: It is the employer's responsibility to ensure that their self-funded Plan does not discriminate in favor of highly compensated individuals (within the meaning of Section 105(h) of the Internal Revenue Code) with respect to benefits under, or eligibility to participate in, their self-funded Plan.

Self-funded plans are administered by Star Marketing and Administration, Inc., and stop-loss insurance and ancillary coverage are provided by Trustmark Life Insurance Company

Important Notice To Eligible Employees: Please Read and Retain

Special Enrollments

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance coverage, you may, in the future, be able to enroll yourself or your dependents in this health benefit plan, provided that you request enrollment within 31 days after coverage was terminated as a result of loss of eligibility for the coverage or termination of employer contribution (60 days for special enrollees who have lost their Medicaid or State Children's Health Insurance Program coverage). In addition, if you have a life-changing event, such as marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and your dependents, provided that you request enrollment within 31 days after the qualifying event. Coverage will become effective on the date of the qualifying event.

Annual Open Enrollment Period

Eligible employees may enroll themselves and their eligible dependents during the annual open enrollment period, which is the month prior to the start of the new plan year.

The following notice applies to preventive care coverage plans:

This plan does not provide comprehensive major medical coverage. Benefits are limited. This preventive benefits plan fulfills an individual's requirement under the Affordable Care Act to maintain minimum essential coverage, subject to revision of applicable law, regulation and regulatory interpretation.

ID Cards

ID cards are generally received 7 to 10 business days following enrollment and the activation of the employer-sponsored health benefit plan. For added convenience, if a need arises prior to receiving the ID card, covered employees can access a duplicate version of the ID card electronically after registering at **TrustmarkSB.com/login**. The digital ID card can be saved locally, to a mobile phone or tablet (as a photo image or to the Wallet); printed, and/or uploaded to the provider's portal in advance of any appointment.

Access to Electronic Plan Documents and EOBs

By choosing to go paperless, you'll receive email notifications when important plan documents and an Explanation of Benefits (EOB) become available through our secure portal, **TrustmarkSB.com/login**.

- Reducing paper consumption is a simple way to have a huge impact on the environment.
- It's easier to search digital plan documents. No need to store paper files.
- You decide when to view, save or print your plan documents or EOBs.
- Documents available round the clock at your convenience. Don't wait for the USPS.

To eliminate receiving paper documents, **register at TrustmarkSB.com/login** and select "I agree" for both paperless plan documents and EOBs.