

BENEFITS GUIDE 2016

Welcome to our 2016 Benefit Enrollment

This guide outlines a comprehensive overview of your benefits package and what enrollment choices you have. Please take some time to read it carefully and share this information with family members who may also be eligible for some of the benefits described here.

Because we understand that everyone has diverse health and wellness needs and goals, we are providing you and your family with a broad range of options to include:

- Comprehensive medical, dental and vision coverage
- Health Savings Account (HSA) funded with pre-tax contributions that can be used to pay for health care expenses
- Flexible Spending Accounts (FSAs) for health care, dependent care, transit and parking expenses
- Short-term and long-term disability coverage
- Basic life and AD&D insurance for you, and the opportunity to purchase supplemental coverage for yourself and your family.

Making Your Elections

If you are a new employee, enroll within 30 days of becoming eligible. Your benefits will be effective the first of the month following your date of hire. If you are a current employee, you must enroll during the annual open enrollment period. If you do not actively enroll when first eligible, you will not have medical, dental, vision or additional life or AD&D insurance coverage for you or your family until the next calendar year, unless you experience a qualified life status change. You must elect your benefits if you wish to have coverage. If you are already enrolled and are making decisions for the upcoming year, your current elections will roll over from the previous year, with the exception of the Flexible Spending Account, which must be re-elected each year.

Once you are ready to make your elections, you can enroll online:

- To enroll by phone, call the Liberty Benefits Helpline at 800-782-3596
- To enroll online, visit the benefits website at www.iElect.com and follow the prompts.



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This is a summary of benefits and does not include all plan rules and details. Detailed provisions are contained in each providers plan document. If there is a discrepancy between what is presented here and the official plan documents, the plan documents will govern. Benefit plans may be changed or discontinued at any time without prior or advanced notice. Participation in any plan is not a contract of employment.

Eligibility

WHO YOU CAN COVER

YOU, if you are a...

Your SPOUSE/DOMESTIC PARTNER, if you are...

Your CHILDREN or those of your domestic partner, up to age 26, if they are...

Your (or your domestic partner's) UNMARRIED CHILDREN of any age who are...

■ Full-time equivalent employee working at least 30 hours or more per week. Benefits are eligible on the first day of the month following date of hire or first of the month following change in eligible status.

Legally married or qualified as domestic partners.

Marriage Certificate, or signed Declaration of Domestic Partnership with two forms of verification required.

- Your biological child,
- Your legally adopted child or a child you are in the process of adopting (with proper documentation),
- Your stepchild,
- A foster child who has been placed with you by an authorized placement agency or an order of a court, or
- A child you are legally required to cover under a Qualified Medical Child Support Order.
- Disabled before reaching age 26, and
- Dependent on you for support due to a mental or physical disability.

*Under IRS regulations, the value of your domestic partner's coverage may be considered taxable income to you, resulting in additional income tax withholding – called "imputed income". This is shown on your pay stub and reported in the "other compensation" section of your W-2. IRS rules generally require that you pay for domestic partner coverage on an after-tax basis. Coverage for legal same-sex spouse is paid on a pre-tax basis, and the imputed income rules do not apply.



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