# SPLENDORA ISD 2023-2024 BENEFITS GUIDE







Hayden Price, Account Executive First Financial Group of America 903.352.4016

hayden.price@ffga.com https://ffbenefits.ffga.com/splendoraisd/



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This guide contains a summary of the benefits offered by your employer. If there is a conflict between the terms of this outline of benefits and the actual contracts, the terms of the contracts will prevail.

### EMPLOYEE BENEFITS CENTER

## YOUR ONE-STOP SHOP FOR BENEFIT INFORMATION

Splendora ISD and First Financial are excited to provide you with a custom website filled with information about your benefits. Visit the Employee Benefits Center to see current benefit options for your employer, as well as find claim forms, important phone number, and enrollment information.

There's no need to register for site access. Simply type the URL below into your browser and you will be directed to your Employee Benefits Center.

https://ffbenefits.ffga.com/splendoraisd



### HOW TO ENROLL

#### **ENROLLMENT ASSISTANCE CENTER INSTRUCTIONS**

Call 855-765-4473 and follow the prompts to be connected to your local First Financial branch office. Hours of operation are 8 a.m. to 5 p.m. (local time) Monday through Friday. There is an option to leave a voice message for a representative to call you back. Phone calls will be returned as soon as possible or the next business day if it is after hours.

#### ONLINE ENROLLMENT

To begin online enrollment, visit <a href="https://ffga.benselect.com/Enroll/login.aspx">https://ffga.benselect.com/Enroll/login.aspx</a>.

#### **LOGIN**

- Login: Your Employee ID or Social Security Number (no dashes)
- PIN (first login only): The last four digits of your Social Security Number and the last two digits of the year you were born (six digits total)
- New PIN: The first time you log in you will be required to change to a new PIN. Please note your new PIN because you will use the new PIN from that point forward.

#### VIEW/ADD DEPENDENTS

Click next to view your dependents. It is very important to make sure the social security numbers and birth dates listed are correct. If you plan to add dependents, you will need to enter their social security numbers and birth dates.

#### **BEGIN ELECTIONS**

Click next again to begin making your benefit elections. Remember, no changes to your elections can be made during the plan year unless you have either a qualified mid-year change under Section 125 or a special enrollment event.

### **ELIGIBILITY**

#### **ELIGIBILITY**

Eligible employees must be actively at work on the plan effective date for new benefits to be effective.

#### **NEW EMPLOYEES**

You have 31 days from your actively-at-work date to make benefit elections. Your New Hire Enrollment elections will be made at the <insert location>.

#### **EXISTING EMPLOYEES**

When it's time to enroll in your benefits, your First Financial Account Representative will be available to assist you with making your elections. Your elections can be made anytime during annual enrollment online from your work or home computer. Before enrollment, take time to educate yourself on the available benefits and what options would work best for you and your family by visiting the Employee Benefits Center.

#### MID-YEAR BENEFIT CHANGES

You may add or cancel coverage during the plan year if you have a change in family status. You must notify the benefits department within 31 days of the change.

#### QUALIFYING LIFE EVENTS INCLUDE:

- Changes in household, including marriage, divorce, legal separation, annulment, death of a spouse, birth, adoption, placement for adoption, or death of a dependent child
- Loss of health coverage, attributable to your spouse's employment, losing existing health coverage including job-based, individual & student plans, losing eligibility for Medicare, Medicaid, or CHIP, turning 26 and losing coverage through a parent's plan

#### **DECLINING COVERAGE**

If you are eligible for benefits, but wish to DECLINE coverage, please complete the online enrollment either on your work or home computer. Under each option, you will need to select "waive." **You must still complete the beneficiary information.** 

### SECTION 125 PLANS

#### SECTION 125 PLAN INFORMATION AND RULES

A Section 125 Plan provides a tax-saving way to pay for eligible medical or dependent care expenses. The funds are automatically deducted from your paycheck on a pre-tax basis.

#### HERE'S HOW IT WORKS

A Section 125 Plan reduces your taxes and increases your spendable income by allowing you to deduct the cost of eligible benefits from your earnings before tax. Plus, the plan is available to you at no cost, and you're already eligible – all you must do is enroll.

#### IS IT RIGHT FOR ME?

The savings you may experience with a Section 125 Plan are outlined in the example below. For instance, you could potentially take home about \$70 more each month if you participated in your employer's Section 125 Plan – that's a savings of \$840 a year!

You cannot change your benefit elections for the plan year unless the benefits office receives notification in writing within 31 days of the status change. If the benefits office is not notified within 31 days of the status change, no benefit change can be made until the next annual open enrollment.

IRS specified changes in family status include:

- Change in legal married status
- Change in number of dependents
- Termination or commencement of employment
- Dependent satisfies or ceases to satisfy dependent eligibility requirements
- Change in residence or worksite that affects eligibility for coverage

SECTION 125 PLAN SAMPLE PAYCHECK						
	WITHOUT S125 WITH S125					
Monthly Salary	\$2,000	\$2,000				
Less Medical Deductions	-N/A	-\$250				
Taxable Gross Income	\$2,000	\$1,750				
Less Taxes (Fed/State at 20%)	-\$400	-\$350				
<b>Less Estimated FICA (7.65%)</b> -\$153 -\$133						
Less Medical Deductions	-\$250	-N/A				
Take Home Pay	\$1,197	\$1,267				
YOU COULD SAVE \$70 PER MONTH IN TAXES BY PAYING FOR YOUR RENEETS ON A PRE-TAX BASIS!						

<sup>\*</sup>The figures in the sample paycheck above are for illustrative purposes only.

### **MEDICAL**

#### TEXAS SCHOOLS HEALTH BENEFITS PROGRAM

• The district's medical plans are offered through TSHBP. All plans are designed so members can easily navigate through their health medical needs

#### To Enroll, please visit the HUB.

www.mybenefitshub.com/splendoraisd

TSHBP MONTHLY MEDICAL RATES					
DIRECTED CARE PLANS DIRECTED CARE PLANS AETNA NETWORK PLANS					
	HIGH DEDUCTIBLE	CO-PAY	AETNA SIGNATURE		
EMPLOYEE ONLY	MPLOYEE ONLY \$135.00		\$315.00		
EMPLOYEE + CHILD(REN) \$515.00		\$622.00	\$744.00		
EMPLOYEE + SPOUSE \$891.00		\$1,055.00	\$1,309.00		
EMPLOYEE + FAMILY	\$1,261.00	\$1,490.00	\$1,675.00		

Splendora ISD contributes \$300/month toward the cost of the medical insurance.

Rates shown are the cost for the employee.



### DENTAL INSURANCE

#### Lincoln Financial | www.lfg.com | 1.800.423.2765

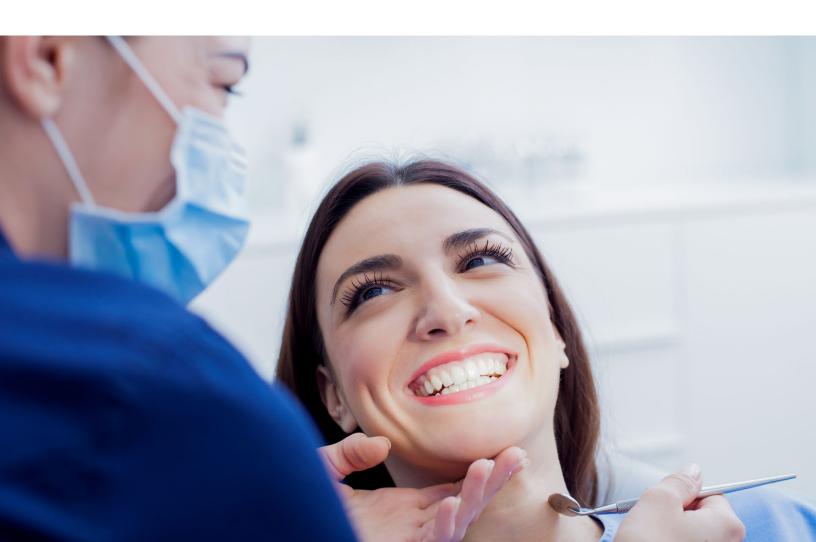
Taking care of your oral health is not a luxury, it is a necessity to long-term optimal health. Dental insurance can greatly reduce your costs when it comes to preventative, restorative, and emergency procedures. Review the plan benefits to see which option is best for you and your family's dental needs. A range of procedures may be covered, such as:

- Comprehensive Exams
- Cleanings
- X-Rays

- Fillings
- Tooth Extractions
- General Anesthesia

- Crowns
- Root Canals

MONTHLY DENTAL PREMIUMS					
DHMO PPO LOW PPO HIGH					
EMPLOYEE ONLY	\$6.14	\$9.91	\$22.86		
EMPLOYEE + SPOUSE	\$16.72	\$31.04	\$55.36		
EMPLOYEE + CHILD(REN)	\$18.50	\$39.17	\$76.24		
EMPLOYEE + FAMILY	\$28.98	\$58.24	\$108.79		



### VISION INSURANCE

#### Superior Vision | www.superiorvision.com | 1.800.507.3800

Proper vision care is essential to your overall well-being. Regular eye exams at any age will help prevent eye disease and keep your vision strong for years to come.

Your employer provides you with a vision plan to take care of you and your family's needs. You must enroll in the vision plan each plan year and premiums are typically paid through payroll deduction. Here are just a few of the areas where you will save money with your plan:

- Eye exams
- Eyeglasses

- Contact lenses
- Eye surgeries

Vision correction

VISION MONTHLY PREMIUMS			
EMPLOYEE ONLY \$8.19			
EMPLOYEE + FAMILY \$19.66			



### FLEXIBLE SPENDING ACCOUNTS

Higginbotham | https://flexservices.higginbotham.net | 1.866.419.3519

To Enroll, please visit the HUB.

www.mybenefitshub.com/splendoraisd

#### MEDICAL FSA

A Medical Flexible Spending Account (Medical FSA) is an IRS-approved program to help you save taxes and pay for out-of-pocket medical expenses not covered under your medical plan. If your plan includes a grace period option, you have additional time to incur and claim against unused funds in the new plan year. Keep in mind that remaining balances after the grace period is exhausted will be forfeited under the use-it-or-lose-it rule.

Your maximum contribution amount for 2023 is \$3,050 and for 2024 the max is \$3,200.

#### **HIGHLIGHTS**

- Contributions are automatically deducted from your paycheck on a pre-tax basis, which helps reduce your taxable income and increase your spendable income.
- Your full election will be available to you at the beginning of the plan year.
- Be conservative any money left in your account at the end of the plan year with be forfeited.
- Use your benefits card to pay for qualified expenses upfront without spending money out of pocket.
- Keep all receipts in case you need to substantiate a claim for tax purposes.

**NOTE:** The IRS requires proof that all expenses are eligible. Keep all receipts in case you need to substantiate a claim for tax purposes. Your receipt must include the date of purchase or service, amount you were required to pay after insurance, description of the product or service, merchant or provider name, and the patient's name.

#### **DEPENDENT CARE FSA**

With a Dependent Care Flexible Spending Account, you can set aside part of your pay on a pre-tax basis to pay for eligible dependent care expenses like childcare, babysitters, and adult day care.

You may allocate up to \$5,000 per tax year for reimbursement of dependent care services. If you are married and file a separate tax return, the limit is \$2,500.

- Eligible dependents must be claimed as an exemption on your tax return.
- Eligible dependents must be children under age 13 or an adult dependent incapable of self-care.
- Funds become available as contributions are made to your account.
- Keep all receipts in case you need to substantiate a claim for tax purposes.
- Balances will be forfeited at the end of the runoff or grace period.

### HEALTH SAVINGS ACCOUNTS

Higginbotham | https://flexservices.higginbotham.net | 1.866.419.3519

To Enroll, please visit the HUB.

www.mybenefitshub.com/splendoraisd

#### **HEALTH SAVINGS ACCOUNTS**

A Health Savings Account (HSA) is a great way to help you control your healthcare costs. It works in conjunction with a qualified High Deductible Health Plan (HDHP) to combine tax-free savings earmarked for qualified medical expenses. An HSA allows you to set aside money to pay for higher deductibles associated with a lower monthly premium HDHP. The money you save in monthly insurance premiums is reserved for eligible medical expenses you incur in the future. Eligible expenses include things like co-pays and deductibles, prescriptions, vision expenses, dental care, therapy and medical supplies.

	2023	2024		
HSA CONTRIBUTION LIMIT	• Self Only: <b>\$3,850</b>	<ul><li>Self Only: \$4,150</li></ul>		
	• Family: <b>\$7,750</b>	• Family: \$8,300		
HDHP MINIMUM DEDUCTIBLES	DEDUCTIBLES• Self Only: \$1,500• Self Only: \$1,600			
• Family: \$3,000 • Family: \$3,200				
\$1,000 catch-up contributions (age 55 or older)				

#### **HIGHLIGHTS**

- Balances roll over from year to year and earn interest along the way.
- Portable you keep it even after you leave employment.
- Tax advantages invest money in mutual funds to grow your tax savings for either future healthcare costs or retirement.
- Pay for expenses with a benefits debit card that gives you immediate access to your money at the time
  of purchase.
- Expenses also can be reimbursed through our online portal, online bill pay directly to your provider or submitting a distribution request form.
- Receipts are not required for reimbursement but be sure to save them for tax purposes.

#### WHO CAN PARTICIPATE IN AN HSA?

- You must be enrolled in a qualified High Deductible Health Plan (HDHP).
- You cannot be enrolled in Tricare or Medicare or covered under your spouse's traditional (non-HDHP) health care plan.
- You cannot participate in a general purpose Flexible Spending Account (FSA) or Health Reimbursement Arrangement.
- Limited Purpose Flexible Spending Accounts are permitted (dental and vision expenses only).
- You cannot participate if your spouse has a general purpose FSA or HRA at their place of employment.
- You cannot participate if you are being claimed as a dependent on another person's tax return.

### VOLUNTARY LIFE & AD&D

Lincoln Financial | www.lfg.com | 1.800.423.2765

#### EMPLOYER-PAID TERM LIFE INSURANCE

Life insurance protects your loved ones. It pays a benefit so they can afford to pay for funeral expenses, pay off debt and maintain their current standard of living. It is one of the best ways to show you care. Your employer provides all eligible employees \$20,000. The cost of this policy is paid for 100% by your employer. This is a term life policy that is in effect while you are employed.

#### **VOLUNTARY TERM LIFE INSURANCE**

Voluntary life insurance is term life coverage you can purchase in addition to the basic life plan provided by your employer. It will cover you for a specific period of time while you are employed. Plan amounts are offered in tiers so you can choose the amount of coverage that works best for you and your family. Because it's a group plan, premiums are typically lower, so it's more affordable to gain the peace of mind that life insurance provides. Limitations apply, please see policy for details. Visit the Employee Benefits Center for more details.

- Cash benefit of \$20,000 in the event of your death, plus a matching \$20,000 if you die in an accident
- Life Keys services, provide access to counseling, financial, and legal support
- Coverage amounts begin to reduce at age 70 and benefits terminate at retirement
- If you suffer an AD&D loss in an accident, you may also receive benefits for the following on top of all your core AD&D benefits: coma, education, child care and more

MONTHLY VOLUNTARY LIFE INSURANCE PREMIUMS					
EMPLOYEE AGE RANGE	\$10,000	\$10,000 \$30,000 \$5			
25-29	\$0.60	\$1.80	\$3.00		
30-34	\$0.80	\$2.40	\$4.00		
35-39	\$1.00	\$3.00	\$5.00		
40-44	\$1.50	\$4.50	\$7.50		
45-49	\$2.50	\$7.50	\$12.50		
50-54	\$4.10	\$12.30	\$20.50		
55-59	\$6.80	\$20.40	\$34.00		

### TEXAS LIFE — PERMANENT LIFE

Texas Life | www.texaslife.com | 1.800.283.9233

#### TEXAS LIFE INSURANCE - PERMANENT, PORTABLE LIFE INSURANCE

The peace of mind voluntary, permanent life insurance provides is unmatched. It is a solid companion to your group life insurance plan. Texas Life provides life insurance that you can keep for a lifetime. The plan is easy to purchase, pay for, and keep through the convenience of payroll deduction. Coverage is affordable and dependable. Plus, Texas Life has over a century of experience protecting families and giving the peace of mind only permanent life insurance can provide.

- You own the policy, even if you change jobs or retire.
- The policy remains in force until you die or up to age 121 if you pay the necessary premium on time.
- It is a permanent, universal life policy which means you can rest easy knowing your loved ones will be well taken care of when you're gone.

TEXAS LIFE NON-TOBACCO MONTHLY PREMIUMS					
EMPLOYEE AGE	\$25,000 \$50,000				
25	\$13.88	\$25.50			
30	\$15.25	\$28.25			
35	\$18.55	\$34.85			
40	\$23.50	\$44.75			
45	\$33.40	\$64.55			
50	\$44.68	\$87.10			

### DISABILITY INSURANCE

One America | www.oneamerica.com | 1.800.553.5318

#### Group #00618620

Have you ever wondered what would happen to your income if you had an accidental injury, sickness, or pregnancy? That is why you need disability coverage. It replaces a portion of income for the period you are unable to work due to those reasons. You can choose the benefit amount, which is the amount of your income to replace, and the waiting period that you begin receiving payments.

How do you decide if you need disability insurance? Consider these questions when making your decision:

- How much employer leave do you have?
- Do you have savings?
- Do you have other income you can rely on, such as from your spouse or from child support?
- How close are you to retirement?
- Could you go on Social Security Disability or take a Disability Retirement?
- What are your other sources of income?

- Combines features of short term and long term disability into one plan
- Select a minimum monthly benefit of \$200 up to a maximum monthly benefit of \$8,000, in increments of \$100\*, not to exceed 66.67% of your monthly pre-disability earnings.
- Elimination periods are waived on the first day of hospital confinement
- Rates vary depending on the elimination period and the benefit amount
- Elimination Period Options: Option 1 7 days Option 2 14 days Option 3 30 days Option 4 60 days

DISABILITY INSURANCE			
ELIMINATION PERIOD MONTHLY PREMIUM*			
7 days	\$2.63		
14 days \$2.21			
30 days \$1.62			
60 days \$1.31			
* Rates are per \$100 of covered benefit			

### CANCER INSURANCE

#### American Fidelity | www.americanfidelity.com | 1.800.662.1113

Thousands of Americans are diagnosed with cancer each day. No doubt, the news is devastating, both personally and financially. It's impossible to anticipate a cancer diagnosis, but it is possible to prepare for it with a cancer insurance plan.

It is likely that your major medical coverage will not cover all the costs associated with a cancer diagnosis. Supplementing your major medical with cancer insurance may help you pay for related expenses, such as copays and deductibles, specialists, experimental treatment, specialty hospitals, travel expenses, in-home care and more.

Premiums are paid through convenient payroll deduction to ensure your policy remains in force if you should need it. Benefits are paid directly to you, so you can choose how to spend the money. Visit the Employee Benefits Center and view policy for more details.

https://ffbenefits.ffga.com/splendoraisd/

- Radiation Therapy/Chemotherapy/ Immunotherapy Benefit: Up to \$15,000
- Benefits per day for Blood, Plasma and Platelets
- Waiver of Premium for Employee after 90 days of continuous Disability
- Internal Cancer Diagnosis Benefit: Up to \$5,000
- Heart Attack or Stroke Diagnosis covered on Enhanced Plus plan

CANCER INSURANCE MONTLY PREMIUMS				
BASIC ENHANCED PLUS				
<b>EMPLOYEE</b> \$15.80 \$31.62				
<b>EMPLOYEE + FAMILY</b> \$26.86 \$53.80				

### CRITICAL ILLNESS INSURANCE

#### UNUM | www.unum.com | 1.800.275.8686

If you've heard of heart attacks, strokes, organ transplants or paralysis, then you're familiar with critical illness. It's likely you or someone you know has experienced one of these life-altering events. Often times, a critical illness has a powerful impact on people's lives, affecting their livelihood and finances.

A critical illness plan can help with the treatment costs of covered illnesses. Benefits are paid directly to you, unless otherwise assigned, giving you the choice of how to spend the money. Plus, there are plans available to provide coverage for you, your spouse and dependent children.

Prepare now for the unexpected with a critical illness insurance plan. The plan helps you focus on getting well rather than worrying about finances. Visit the Employee Benefits Center and view policy for more details.

https://ffbenefits.ffga.com/splendoraisd/

What Critical Illness Conditions are Covered?	Covered Conditions*	Percentage of Coverage Amount
	End Stage Renal (Kidney) Failure	100%
	Invasive Cancer	100%
	Dementia (including Alzheimer's Disease)	100%
	Multiple Sclerosis (MS)	100%
	Coma	100%
	Additional Critical Illnesses for your Children	
	Cerebral Palsy	100%
	Cystic Fibrosis	100%
	Down Syndrome	100%

<sup>\*</sup>Please refer to the policy for complete definitions of covered conditions

	MONTHLY CRITICAL ILLNESS PREMIUMS					
AGE RANGE	EMPLOYEE \$10,000	SPOUSE \$5,000	EMPLOYEE \$20,000	SPOUSE \$10,000	EMPLOYEE \$30,000	SPOUSE \$15,000
25-29	\$4.74	\$3.29	\$7.64	\$4.74	\$10.54	\$6.19
30-34	\$5.94	\$3.89	\$10.04	\$5.94	\$14.14	\$7.99
35-39	\$7.94	\$4.89	\$14.04	\$7.94	\$20.14	\$10.99
40-44	\$10.34	\$6.09	\$18.84	\$10.34	\$27.34	\$14.59
45-49	\$13.54	\$7.69	\$25.24	\$13.54	\$36.94	\$19.39
50-54	\$16.94	\$9.39	\$32.04	\$16.94	\$47.14	\$24.49
55-59	\$22.74	\$12.29	\$43.64	\$22.74	\$64.54	\$33.19
60-64	\$31.54	\$16.69	\$61.24	\$31.54	\$90.94	\$46.39

### MEDICAL TRANSPORT

#### MASA | www.masamts.com | 1.800.423.3226

Americans today suffer from a false sense of security that their medical coverage will pay for all costs associated with emergency or critical care transport. The reality is that a majority of Americans are only partially covered for these high costs.

Most medical plans will only pay a portion of costs leaving you with the remainder of the bill. There is also the possibility of your medical provider denying your claim altogether, which means you would be responsible for paying the entire bill.

With medical transport protection, you will have zero out-of-pocket expenses for any emergent air or ground transport from anywhere in the United States, regardless of who transports you. You will receive medical emergency transportation solutions to help cover your out-of-pocket medical transport costs when your insurance falls short.

- Emergency Air Ambulance Coverage
- Emergency Ground Ambulance Coverage
- Hospital to Hospital Ambulance Coverage
- Non Emergency Transport to Hospital Closer to Home for Recuperation

MEDICAL TRANSPORT MONTHLY PREMIUM		
EMPLOYEE & FAMILY	\$14.00	

### HOSPITAL INDEMNITY INSURANCE

#### Lincoln Financial | www.lfg.com | 1.800.423.2765

Hospital stays are costly. If you or a family member find yourself in the hospital due to a sudden accident or illness, you may struggle financially, even if you have a good medical plan. With a hospital indemnity plan, you can rest assured those extra expenses won't be a financial burden.

Unlike medical plans, there are no deductibles to meet with a hospital indemnity plan. As soon as you incur a qualified event, you can file a claim and start receiving benefits.

The plan pays a lump sum benefit in a previously specified amount. The money can be used for medical costs, insurance deductibles, groceries, transportation, childcare – the choice is up to you!

#### HIGH PLAN HIGHLIGHTS

o Hospital Stay Admission Benefit: \$2,500

o Daily Hospital Stay Benefit: \$200/day

o ICU Daily Hospital Stay Benefit: \$400/day

Newborn Routine Care: \$500ICU Admission Benefit: \$2,500

#### LOW PLAN HIGHLIGHTS

o Hospital Stay Admission Benefit: \$1,500

o Daily Hospital Stay Benefit: \$150/day

o ICU Daily Hospital Stay Benefit: \$300/day

Newborn Routine Care: \$500ICU Admission Benefit: \$1,500

HOSPITAL INDEMNITY INSURANCE PREMIUMS				
	LOW	HIGH		
EMPLOYEE ONLY	\$26.55	\$32.74		
EMPLOYEE + SPOUSE	\$52.29	\$64.67		
EMPLOYEE + CHILDREN	\$43.03	\$53.07		
EMPLOYEE + FAMILY	\$67.29	\$83.06		

### **CONTACT INFORMATION**

SPLENDORA ISD BENEFITS OFFICE
23419 FM 2090 | Splendora, TX 77372
281.689.3128
Brandon Campbell. Splendora ISD Administrator
281.689.4004
bcampbell@splendoraisd.org
www.mybenefitshub.com/splendoraisd

FIRST FINANCIAL GROUP OF AMERICA Hayden Price, Account Executive 903.352.4016 / hayden.price@ffga.com

CONTACTS				
BENEFIT	CARRIER	WEBSITE	PHONE	
Medical	Texas Schools Health Benefits (TSHBP)	www.tshbp.org	888.803.0081	
Dental	Lincoln Financial	www.lfg.com	800.423.2765	
Vision	Superior Vision	www.superiorvision.com	800.507.3800	
Flexible Spending Account (FSA)	Higginbotham	https://flexservices.higginbotham.net	866.419.3519	
Health Savings Account (HSA)	Higginbotham	https://flexservices.higginbotham.net	866.419.3519	
Life & AD&D	Lincoln Financial	www.lfg.com	800.423.2765	
Permanent Life	Texas Life	www.texaslife.com	800.283.9233	
Disability	One America	www.oneamerica.com	800.553.5318	
Cancer	American Fidelity	www.americanfidelity.com	800.662.1113	
Critical Illness	UNUM	www.unum.com	800.275.8686	
Medical Transport	MASA	www.masamts.com	800.423.3226	
Hospital Indemnity	Lincoln Financial	www.lfg.com	800.423.2765	