



Colonial Life Voluntary Insurance

To Help Protect What
You Value Most.

■ Accident Insurance*

People First Benefit
Plan Code 5002

■ Cancer Insurance*

People First Benefit
Plan Code 6601

■ Disability Insurance*

People First Benefit
Plan Code 5020

*Offered with guaranteed issue underwriting.
That means no health questions will be asked.



State of Florida Employee Benefits Booklet

Serving State of Florida Employees for over 60 years.



VisitYouville.com/StateofFL



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Map of Colonial Life’s Regional Officesback cover

My Current Colonial Life Benefit Elections are:

My New Colonial Life Benefit Elections are:

Accident Insurance - Plan Code 5002

- ___ Employee Only \$18 Monthly Rate
- ___ Employee & Spouse \$24 Monthly Rate
- ___ Employee & Children \$30 Monthly Rate
- ___ Employee & Family \$36 Monthly Rate

Short-Term Disability - Plan Code 5020

- \$ _____ Monthly Benefit
- ___ / ___ Elimination Period-Acc/Sick
- _____ Benefit Period (Months)
- \$ _____ Monthly Rate

Cancer Insurance - Plan Code 6601

- ___ Employee Only \$12.50 Monthly Rate
- ___ Employee & Family \$20.90 Monthly Rate

Serving State of Florida Employees for over 60 years.

Dear State of Florida Employee,

Thank you for taking the time to review Colonial Life's important benefit choices. Colonial Life's coverage has important features:

- **With most plans, you can continue coverage with no increase in premium when you retire or change jobs.**
- Benefits are paid directly to you, unless you specify otherwise, to use as you see fit.
- Most plans pay benefits regardless of any other insurance you may have with other companies.
- Most plans offer coverage for your spouse and dependent children.

The People First enrollment website communicates the **PRE-TAX DEDUCTIONS ONLY** - please check your paystub <https://apps.fldfs.com/EIC/EmployeeInfoCenter/> before enrolling to see which coverage you already have in place.

ENROLLING, CHANGING OR CANCELLING YOUR COVERAGE IS A TWO STEP PROCESS:

- 1) **Complete the enrollment process online through the People First (<https://peoplefirst.myflorida.com>; 866-663-4735) (Refer to important information below for online procedures.)**
- 2) **Meet with a Colonial Life benefits counselor (contact information is listed on the last page of this brochure) as a Colonial Life application may be required.**

NOTE: Prior plan codes 5000, 5010, 6600 and 7500 can only be stopped in their entirety. Elections for these plan codes cannot be modified, even if a QSC occurs.

It is in your best interest to meet with a Colonial Life benefits counselor to ensure you understand all relevant factors related to your insurance decisions.

A Colonial Life application may be required for new or replacement coverage. The Colonial Life benefits counselor will submit the application to Colonial Life's home office and also answer any questions you may have regarding prior plan codes.

IMPORTANT NOTE ABOUT ONLINE PROCEDURES - The link to Colonial Life on the People First enrollment website is for informational purposes only. If you attempt to enroll, change or cancel any Colonial Life coverage by going online, Colonial Life is not aware of what you are attempting to do. What you may be doing is starting or stopping your payroll deduction.

If you enroll, change or cancel your coverage People First will send you a pre-tax Benefits Confirmation statement. Please be sure that your coverage is CORRECTLY reflected on the statement.

THANK YOU FOR CHOOSING COLONIAL LIFE INSURANCE!
Serving State of Florida Employees for over 60 years.

Visit the web site at VisitYouville.com/StateofFL

You may elect to purchase coverage as part of the State of Florida Flexible Benefits Plan. If so, your Flexible Benefits Plan elections will remain in effect and cannot be revoked or changed during the Plan Year unless the revocation and new election are on account of and consistent with a qualified status change (e.g. marriage, divorce, death of spouse or child, birth or adoption of child and termination of employment of spouse).

Colonial Life's Accident Insurance

People First Benefit Plan Code 5002

Accidents happen. You can't pick when or where accidents will strike, but you can choose to help protect yourself from financial loss when they do.

Colonial Life's accident insurance offers you:

- **24-hour** coverage for accidents that occur **on- and off-the-job**.
- Benefit payments regardless of workers' compensation or any other insurance you may have with other insurance companies.
- Optional spouse and dependent coverage.
- **Portability** — you can take your coverage with you if you change jobs or retire.
- **Worldwide Coverage**

Initial Care

When an accident happens, you don't want to worry about how you will pay for the initial care, especially if you have to go to the emergency room or ride in an ambulance.

Ambulance	\$500 per trip
Air Ambulance	\$1500 per trip
Emergency Room Treatment	\$200 per accident
Initial Doctor's Office Visit	\$120 per accident

Accident Hospital Care

Traditional health insurance policies may have per admission deductibles and copayments that must be satisfied prior to covering benefits related to hospital stays. Your Colonial Life policy provides benefits to help with these costs.

Hospital Admission	\$2,000 per admission, per accident
Hospital Confinement	\$300 per day up to 365 days
Hospital Intensive Care	\$600 per day up to 15 days

Follow-up Care

You may require follow-up care once you are discharged from the emergency room, hospital or doctor's office. You may have to undergo physical therapy, use crutches or a wheelchair or even require the use of an artificial limb.

Accident Follow-Up Treatment	\$120 (Limit of three visits per covered accident, payable after Emergency Treatment or Initial Doctor's Office Visit)
Appliances	\$150 (wheelchair, crutches)
Physical Therapy	\$50 per treatment, up to six treatments
Prosthetic Devices	\$500 to \$1,000

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This product has limitations and exclusions that may affect benefits payable. This brochure is not complete without the outline of coverage, form number ACCPOL-O-FL-Rev-2. For more information ask your Colonial Life Benefits Counselor or visit: VisitYouville.com/StateofFL.

Common Accidental Injuries

Fractures and dislocations are frequent injuries common in both adults and children.

Dislocation (Separated Joint)	Closed Reduction (Non-Surgical)	Open Reduction (Surgical)
Hip	\$3,000	\$6,000
Knee	\$1,500	\$3,000
Ankle – Bone or Bones of the Foot	\$1,200	\$2,400
Collarbone (Sternoclavicular)	\$750	\$1,500
Lower Jaw, Shoulder, Elbow, Wrist	\$450	\$900
Bone or Bones of the Hand	\$450	\$900
Collarbone (Acromioclavicular and Separation)	\$150	\$300
One Toe or Finger	\$150	\$300

Fracture (Broken Bone)	Closed Reduction (Non-Surgical)	Open Reduction (Surgical)
Skull, Depressed Skull	\$3,750	\$7,500
Skull, Simple Non-Depressed	\$1,500	\$3,000
Hip, Thigh	\$2,250	\$4,500
Body of Vertebrae, Pelvis, Leg	\$1,200	\$2,400
Bones of Face or Nose	\$525	\$1,050
Upper Jaw, Maxilla	\$525	\$1,050
Upper Arm between Elbow and Shoulder	\$525	\$1,050
Lower Jaw, Mandible, Kneecap, Ankle, Foot	\$450	\$900
Shoulder Blade, Collarbone, Vertebral Processes	\$450	\$900
Forearm, Wrist, Hand	\$450	\$900
Rib	\$375	\$750
Coccyx	\$300	\$600
Finger, Toe	\$75	\$150

Your Colonial Life policy also provides benefits for the following injuries received as a result of a covered accident:

Burn (based on size and degree)	\$750 to \$10,000
Concussion	\$100
Emergency Dental Work	\$50 to \$150
Eye Injury	\$500
Torn Knee Cartilage	\$100 to \$500
Lacerations (based on size)	\$25 to \$400
Ruptured Disc	\$400
Tendon/Ligament/Rotator Cuff	\$400 to \$600

Colonial Life's Accident Insurance continued

Dependents

Dependent children will be covered until they reach age 26.

Surgical Care

If your covered accidental injury is serious enough to require surgical care or a transfusion, your Colonial Life policy provides you benefits.

Surgery (open abdominal or thoracic)	\$1,500
Exploratory	\$150
Blood/Plasma/Platelets	\$300

Transportation/Lodging Assistance

If a covered person requires treatment 100 miles away from his home, your Colonial Life policy provides benefits to help with transportation and lodging costs.

Transportation	\$300 per trip, up to 3 trips
Lodging (family member or companion)	\$100 per night, up to 30 days

Accidental Death and Dismemberment

For injuries received as the result of a covered accident that lead to an accidental death or dismemberment, this plan provides benefits that can help see you and your family through the loss.

Loss of Finger/Toe/Hand/Foot/Sight of Eye	\$750 to \$15,000
	Accidental Death Common Carrier
Named Insured	\$75,000 \$100,000
Spouse	\$75,000 \$100,000
Child(ren)	\$15,000 \$20,000

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EXCLUSIONS

We will not pay benefits for losses that are caused by or are the result of: hazardous avocations; felonies or illegal occupations; racing; semi-professional or professional sports; sickness; suicide or self-inflicted injuries; war or armed conflict; in addition to the exclusions listed above, we also will not pay the Catastrophic Accident benefit for injuries that are caused by or are the result of: birth; intoxication.

Catastrophic Accident

The severity of some accidents can result in life-changing losses. Colonial Life can help with such severe losses by providing a benefit for a catastrophic loss that results from a covered accident. Catastrophic loss is an injury that within 365 days of the covered accident results in the total and irrecoverable:

- loss of both hands or both feet
- loss of sight of both eyes
- loss or loss of use of both arms or both legs
- loss of hearing of both ears
- loss of the ability to speak
- loss or loss of use of one arm and one leg
- loss of one hand and one foot

The Catastrophic Accident benefit is payable after a 365 day elimination period. The elimination period refers to the period of 365 days after the date of the covered accident.

Accident Occurs:	Covered	Benefit Amount
<i>Prior to age 65*</i>	Person	Per Lifetime
	Named Insured	\$100,000
	Spouse	\$ 100,000
	Child(ren)	\$ 50,000

*Amounts are reduced for insureds who are over the age of 65.

Coverage	Monthly Rate
Employee Only	\$18.00
Employee & Spouse	\$24.00
Employee & Children	\$30.00
Employee & Family	\$36.00

Colonial Life's Short-Term Disability Income Protection Insurance

People First Benefit Plan Code 5020

Help protect your most valuable asset – your income.

Your income is the financial security that helps protect your family and lifestyle.

This plan is available to Employees only.

Colonial Life's Short-Term Disability Income Protection insurance replaces a portion of your income if you become unable to work because of a covered illness or injury. This income can help you continue paying:

- Mortgage or rent payments.
- Utility bills and other household expenses.
- Food, clothing and other necessities.
- Co-payments.
- Medical costs not covered under other plans.
- Travel and lodging expenses for treatment.

Benefit Features (On/Off Job Benefits Available):

- ✓ You're guaranteed to be issued coverage not to exceed 66 $\frac{2}{3}$ % of your income, up to a maximum of \$3,480 a month.
- ✓ Monthly benefit amounts available: \$580 - \$3,480 - based upon income.
- ✓ Benefit Periods: 3 months, 6 months or 12 months with choices of elimination periods.
- ✓ Partial Disability available.

With Colonial Life's Short-Term Disability Income Protection Insurance:

1. You're paid regardless of any other insurance you may have with other insurance companies.
2. Benefits are paid directly to you unless you specify otherwise.
3. You may choose an amount not to exceed 66 $\frac{2}{3}$ % of your income as your disability benefit.

For example:

Your Annual Income Requirement Example	Maximum Disability Amount Available
\$0 - \$20,999	\$580
\$21,000 - \$31,399	\$1,160
\$31,400 - \$41,799	\$1,740
\$41,800 - \$52,199	\$2,320
\$52,200 - \$62,799	\$2,900
\$62,800 and above	\$3,480

4. If you change jobs, retire or leave your employer, you can take your coverage with you at no additional cost.

5. Pre-existing conditions have a 12 month exclusion. Pregnancy is covered under the disability benefit and is treated like any other sickness and is subject to the policy's preexisting condition exclusion. Giving birth within the first nine months after the effective date of the policy as a result of a normal pregnancy, including Cesarean is not covered by the policy. Complications of pregnancy will be covered to the same extent as any other covered sickness.

A pre-existing condition is when you have a sickness or physical condition that during the 12 months immediately preceding the effective date of the policy had manifested itself in such a manner as would cause an ordinarily prudent person to seek medical advice, diagnosis, care or treatment or for which medical advice, diagnosis, care, or treatment was recommended or received. If you become disabled because of a pre-existing condition, we will not pay for any disability period if it begins during the first 12 months the policy is in force.

This page highlights the benefits of policy form DIS 1000-FL. This is not an insurance contract and only the actual policy provisions will control. The policy sets forth in detail the rights and obligations of both you and us. It is, therefore, important that you READ YOUR POLICY CAREFULLY.

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Monthly Rates

Disability – Plan 5020

Elimination period means the period of time during which no benefits are payable, as shown in the Policy Schedule.

Elimination Period Acc/Sick	Age Bands	Benefit Period (Months)	Monthly Benefit					
			\$580	\$1,160	\$1,740	\$2,320	\$2,900	\$3,480
0/7	17-49	3	\$17.50	\$35.00	\$52.50	\$70.00	\$87.50	\$105.00
7/7	17-49	3	\$15.75	\$31.50	\$47.25	\$63.00	\$78.75	\$94.50
0/14	17-49	3	\$12.75	\$25.50	\$38.25	\$51.00	\$63.75	\$76.50
14/14	17-49	3	\$11.25	\$22.50	\$33.75	\$45.00	\$56.25	\$67.50
0/7	17-49	6	\$22.75	\$45.50	\$68.25	\$91.00	\$113.75	\$136.50
7/7	17-49	6	\$20.00	\$40.00	\$60.00	\$80.00	\$100.00	\$120.00
0/14	17-49	6	\$17.75	\$35.50	\$53.25	\$71.00	\$88.75	\$106.50
14/14	17-49	6	\$15.00	\$30.00	\$45.00	\$60.00	\$75.00	\$90.00
0/30	17-49	6	\$14.25	\$28.50	\$42.75	\$57.00	\$71.25	\$85.50
30/30	17-49	6	\$10.50	\$21.00	\$31.50	\$42.00	\$52.50	\$63.00
0/7	17-49	12	\$31.25	\$62.50	\$93.75	\$125.00	\$156.25	\$187.50
7/7	17-49	12	\$27.50	\$55.00	\$82.50	\$110.00	\$137.50	\$165.00
0/14	17-49	12	\$24.00	\$48.00	\$72.00	\$96.00	\$120.00	\$144.00
14/14	17-49	12	\$19.75	\$39.50	\$59.25	\$79.00	\$98.75	\$118.50
0/30	17-49	12	\$18.00	\$36.00	\$54.00	\$72.00	\$90.00	\$108.00
30/30	17-49	12	\$14.25	\$28.50	\$42.75	\$57.00	\$71.25	\$85.50
0/7	50-69	3	\$20.25	\$40.50	\$60.75	\$81.00	\$101.25	\$121.50
7/7	50-69	3	\$19.00	\$38.00	\$57.00	\$76.00	\$95.00	\$114.00
0/14	50-69	3	\$15.25	\$30.50	\$45.75	\$61.00	\$76.25	\$91.50
14/14	50-69	3	\$13.75	\$27.50	\$41.25	\$55.00	\$68.75	\$82.50
0/7	50-69	6	\$28.25	\$56.50	\$84.75	\$113.00	\$141.25	\$169.50
7/7	50-69	6	\$26.50	\$53.00	\$79.50	\$106.00	\$132.50	\$159.00
0/14	50-69	6	\$22.00	\$44.00	\$66.00	\$88.00	\$110.00	\$132.00
14/14	50-69	6	\$19.75	\$39.50	\$59.25	\$79.00	\$98.75	\$118.50
0/30	50-69	6	\$18.75	\$37.50	\$56.25	\$75.00	\$93.75	\$112.50
30/30	50-69	6	\$14.75	\$29.50	\$44.25	\$59.00	\$73.75	\$88.50
0/7	50-69	12	\$37.50	\$75.00	\$112.50	\$150.00	\$187.50	\$225.00
7/7	50-69	12	\$34.25	\$68.50	\$102.75	\$137.00	\$171.25	\$205.50
0/14	50-69	12	\$29.75	\$59.50	\$89.25	\$119.00	\$148.75	\$178.50
14/14	50-69	12	\$25.25	\$50.50	\$75.75	\$101.00	\$126.25	\$151.50
0/30	50-69	12	\$22.75	\$45.50	\$68.25	\$91.00	\$113.75	\$136.50
30/30	50-69	12	\$19.00	\$38.00	\$57.00	\$76.00	\$95.00	\$114.00

Note: On the job disability income benefits are reduced by 50% and are paid in addition to worker's compensation benefits.

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Colonial Life's Cancer Insurance

People First Benefit Plan Code 6601

Help protect yourself and your family from the high cost of cancer treatment with **Colonial Life's Cancer Insurance.**

Cancer coverage from Colonial Life offers the protection you need to concentrate on what is most important — your care.

Features of Colonial Life's Cancer Insurance:

- 1 Offered with guaranteed issue underwriting. That means no health questions will be asked.**
- 2 Pays regardless of any other insurance you have with other insurance companies.**
- 3 Benefits paid directly to you unless you specify otherwise.**
- 4 Flexible coverage options for employees and their families.**

Coverage	Monthly Rate
Employee Only	\$12.50
Employee & Family	\$20.90

If you have been diagnosed with cancer and as a result of your treatment you are already receiving benefits under Plan Code 6600 or 7500, it is in your best interest to keep your current insurance.

If you intend to replace or terminate your existing Colonial Life cancer insurance (Plan Code 6600 or 7500), you may wish to secure the advice of a Colonial Life benefits counselor regarding your existing policy. Meeting with a Colonial Life benefits counselor is not required, but it is in your best interests to make sure you understand all the relevant factors involved in replacing your present coverage including exclusions, limitations and other coverage changes.

Pre-existing Condition means a sickness or physical condition for which any covered person was treated, had medical testing, received medical advice or had taken medication within 6 months before the effective date of coverage shown on the Certificate Schedule and which is not excluded by name or specific description in the policy or this certificate.

To clarify, benefits can be paid after a six month waiting period if a pre-existing condition does apply.

Routine follow-up care during the 6 months immediately preceding the effective date of coverage to determine whether a breast cancer has recurred in a covered person who has been previously determined to be free of breast cancer does not constitute medical advice, diagnosis, care, or treatment for purposes of determining pre-existing conditions, unless evidence of breast cancer is found during or as a result of the follow-up care.

This page highlights the benefits of certificate form GCAN-C-FL. This is not an insurance contract and only the actual certificate provisions will control. The certificate sets forth in detail the rights and obligations of both you and us. It is, therefore, important that you READ YOUR CERTIFICATE CAREFULLY.

This product has limitations and exclusions that may affect benefits payable. This brochure is not complete without the outline of coverage, form number GCAN-C-O-FL. For more information ask your Colonial Life Benefits Counselor, or visit: VisitYouville.com/StateofFL.

Cancer Screening Benefit

We will pay a \$50 benefit if any covered person has one of the following cancer screening tests performed while coverage is in force. This benefit is payable once per calendar year for each covered person.

Tests that qualify:

Bone Marrow Aspiration/Biopsy	Hemoccult stool analysis
Biopsy of Skin Lesion	Mammography
Breast ultrasound	Pap smear
CA 15-3 (blood test for breast cancer)	PSA (blood test for prostate cancer)
CA 125 (blood test for ovarian cancer)	Serum protein electrophoresis (blood test for myeloma)
CEA (blood test for colon cancer)	Thermography
Chest x-ray	ThinPrep pap test
Colonoscopy	Virtual colonoscopy
Flexible sigmoidoscopy	

Applicable to certificate form GCAN-C-FL. Coverage may vary by state and may not be available in all states. This is not an insurance contract and only the actual certificate provisions will control. The certificate contains exclusions and limitations which may affect benefits payable.

To file a claim for a Cancer Screening Benefit test, it is not necessary to complete a claim form. Call our toll-free Customer Service number, 1-800-325-4368, with the medical information.

Benefit description	Benefit amount
Cancer Screening/Wellness Benefit, per calendar year	\$50
Hospital Confinement/Hospital Intensive Care Unit Confinement	
per day for first 30 days of hospital confinement in a calendar year	\$200
per day after first 30 days of hospital confinement in a calendar year	\$400
per day for hospital intensive care unit confinement	\$400
maximum of 180 days per calendar year for hospital and hospital intensive care unit confinement combined	
Hospital Confinement/Hospital Intensive Care Unit Confinement in a US Government Hospital	
per day for first 30 days of hospital confinement in a calendar year	\$200
per day after first 30 days of hospital confinement in a calendar year	\$400
per day for hospital intensive care unit confinement	\$400
maximum of 180 days per calendar year for hospital and hospital intensive care unit confinement combined	
Private Full-Time Nursing, per day	\$100
Radiation/Chemotherapy, per day	\$150
calendar year maximum	\$5,000
Antinausea Medication, per day	\$50
calendar year maximum	\$200
Blood/Plasma/Platelets/Immunoglobulins, per day	\$150
calendar year maximum	\$5,000
Supportive or Protective Care Drugs and Colony Stimulating Factors, per day	\$100
calendar year maximum	\$800
Bone Marrow Stem Cell Transplant, per lifetime	\$10,000
Peripheral Stem Cell Transplant, per lifetime	\$5,000
Transportation (per mile) up to 700 miles per round trip	\$0.40
Transportation for Companion (per mile) up to 700 miles per round trip	\$0.40
Lodging, per day, up to 70 days per calendar year	\$50
Surgical Procedures-Unit Value	\$60
maximum per procedure	\$3,000
Anesthesia	
General Anesthesia % of surgical procedure	25%
local anesthesia per procedure	\$50
Second Medical Opinion, per malignant condition	\$300
Reconstructive Surgery-Unit Value	\$60
maximum per procedure including anesthesia, limit 2 per site	\$3,000
Outpatient Surgical Center, per day	\$500
calendar year maximum	\$1,500
Waiver of Premium	Yes
Ambulance, per trip, limit 2 trips per confinement	\$100
Attending Physician, per day, max 180 days per calendar year	\$50
Experimental Treatment, per treatment	\$300
lifetime maximum	\$10,000
Hair, External Breast, Voice Box Prosthesis, per calendar year	\$200
Prosthesis, Artificial Limb per device, limit 1 per site, \$4,000 lifetime maximum	\$2,000
Skilled Nursing Care Facility, per day up to days confined	\$300
Hospice, per day, no lifetime limit	\$300
Home Health Care Services, per day, up to greater of 30 days/calendar year or 2x days confined	\$300

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Claims procedure for Colonial Life products

Obtain a claim form:

- Visit www.VisitYouville.com/StateofFL. Click on the “Resource” section to locate and download a claim form.

How to file a claim:

NOTE: To file a claim for a covered wellness screening benefit or a wellness rider, all you have to do is call 1-800-325-4368 when you have one of the specified wellness tests. (Please note: benefit is payable once per calendar year per covered person.)

- Please include your social security number on each page of the claim form.
- Please be sure the claim form is completed in full and that supporting documentation, such as an itemized bill, is attached before you send in the claim form to Colonial Life.
- Please sign and date the HIPAA form in case we need to obtain any information from your doctor.
- Be sure to initial any specific services that you want to authorize, such as sending payments by overnight delivery, or discussing your claim with your local sales representative, etc.

Fax or mail the completed claim form:

1. Fax to 1-800-880-9325
2. Mail to Colonial Life, PO Box 100195, Columbia, SC 29202

You will receive a telephone call within two to three days after your claim is received.

If you select the electronic messaging option, you will also receive a telephone call when the claim is paid.

Looking for a claim’s status?

Visit ColonialLife.com or call 1-800-325-4368.

An automated service is available 24 hours per day, 7 days per week.

Customer Service representatives are available from 8:00 a.m. until 8:00 p.m., ET.

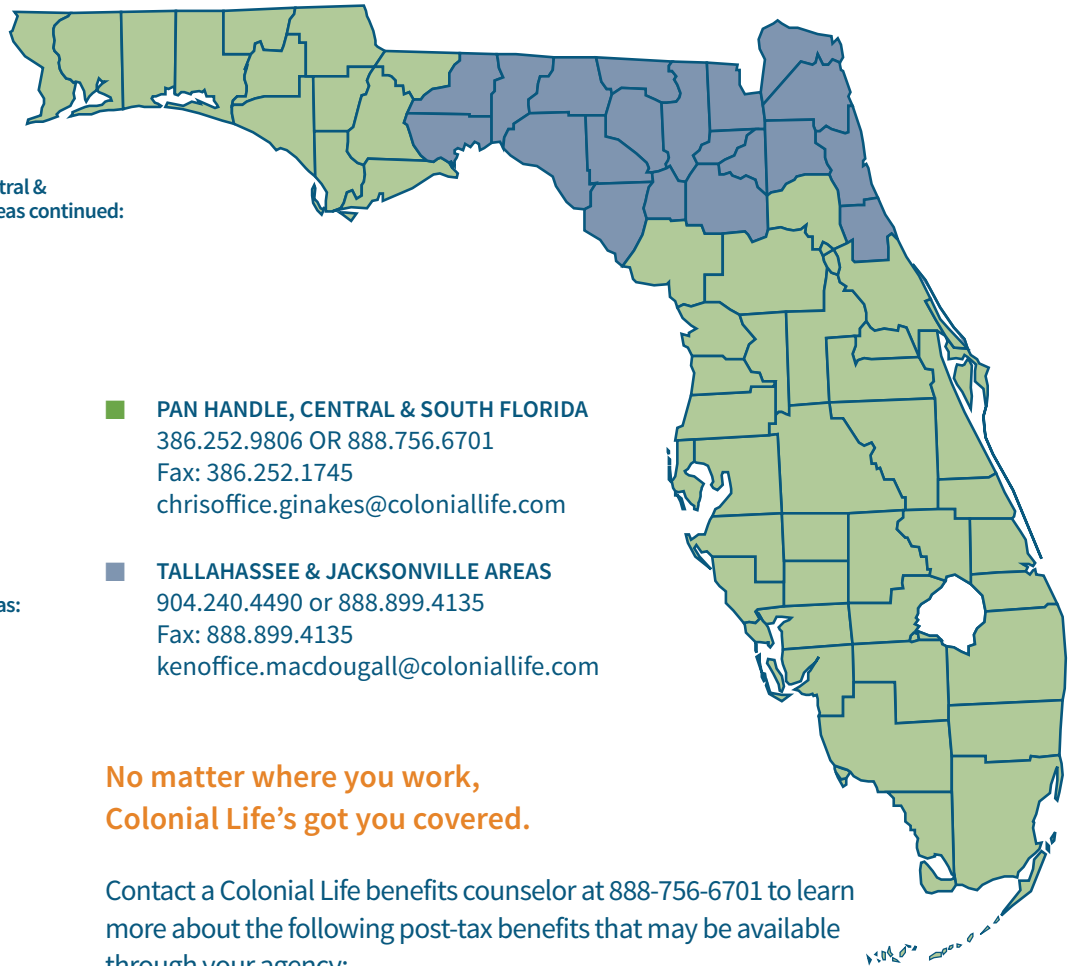
Feel free to contact us if we can be of assistance.

How to Apply for Colonial Life's Accident, Cancer and Disability Coverage

ENROLLMENT IS A TWO STEP PROCESS:

- 1) Complete the enrollment process online through the People First (<https://peoplefirst.myflorida.com>; 866-663-4735)
- 2) Meet with a Colonial Life benefits counselor as a Colonial Life application may be required.

Visit the website: For additional information on your State of Florida voluntary insurance benefit offerings, go to VisitYouville.com/StateofFL. On the website you will find the information contained in this booklet, answers to frequently asked questions and other helpful information.



Pan Handle, Central & South Florida areas:

- Bay
- Brevard
- Broward
- Calhoun
- Charlotte
- Citrus
- Collier
- Desoto
- Escambia
- Franklin
- Gadsden
- Glades
- Gulf
- Hardee
- Hendry
- Hernando
- Highlands
- Hillsborough
- Holmes
- Indian River
- Jackson
- Lake
- Lee
- Levy
- Liberty
- Manatee
- Marion
- Martin
- Miami-Dade
- Monroe
- Okaloosa
- Okeechobee
- Orange
- Osceola
- Palm Beach

Pan Handle, Central & South Florida areas continued:

- Pasco
- Pinellas
- Polk
- Putnam
- Santa Rosa
- Sarasota
- Seminole
- Sumter
- St. Lucie
- Volusia
- Walton
- Washington

Tallahassee & Jacksonville areas:

- Alachua
- Baker
- Bradford
- Clay
- Columbia
- Dixie
- Duval
- Flagler
- Gilchrist
- Hamilton
- Jefferson
- Lafayette
- Leon
- Madison
- Nassau
- St. Johns
- Suwannee
- Taylor
- Union
- Wakulla

■ PAN HANDLE, CENTRAL & SOUTH FLORIDA

386.252.9806 OR 888.756.6701
Fax: 386.252.1745
chrisoffice.ginakes@coloniallife.com

■ TALLAHASSEE & JACKSONVILLE AREAS

904.240.4490 or 888.899.4135
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