

YOUR BENEFITS. YOUR WAY.

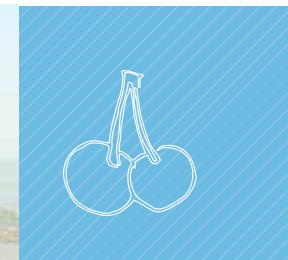


2012 BENEFITS ENROLLMENT GUIDE

Effective January 1, 2012
For Full-Time Puerto Rico Employees

Guía 2012 de Inscripción de Beneficios:

Esta Guía de Inscripción de Beneficios contiene información importante en inglés sobre sus beneficios provistos por Triple-S Salud, MetLife, y Magellan Health Services. Si tiene dificultad para entender cualquier parte de esta guía, contacte a su Departamento de Recursos Humanos al 787-253-3299 para asistencia.



Enterprise Holdings offers a comprehensive package of benefits to our eligible employees. These benefit programs are carefully designed to protect your health and help you balance the needs of your work and family life.

Use this guide to review benefit options available to you and your eligible dependents. When you have made your decisions, log in to Benefits Central at benefits.ehi.com to make your benefits elections.

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HOW TO ENROLL

Benefits Central »

EMPLOYEE SELF-SERVICE WEBSITE

Access Benefits Central online at benefits.ehi.com any time, day or night, 365 days a year. Use it to make or change your benefits elections during annual enrollment; make changes due to life-changing events such as marriage or the birth of a child; and update your life insurance beneficiary designations as you see fit.

To get started, simply:

1. Go to benefits.ehi.com.
2. Enter your employee ID (for example: E12345) and password. New users will create a password the first time they log in.
3. Your personalized home page will appear.
4. Follow the prompts in the Alerts box to start the enrolment process.

NEW USERS

When you first visit Benefits Central, you will need to create a password to begin. Click create or reset your password from the new users or new passwords box near the top right of the screen and follow the instructions. Employees must submit their employee ID, last four digits of their Social Security number, zip code and date of birth to meet Benefits Central's initial logon requirements.

RETURNING USERS

Users who already have a password need only enter their employee ID and password before selecting login to access their benefits.

RESETTING A PASSWORD

Click create or reset your password from the new users or new passwords box that appears near the top right of your screen to create a new one.

CALL CENTER

Customer service representatives can assist you with any questions regarding your benefits or about navigating the Benefits Central website.

TOLL-FREE PHONE NUMBER

855-434-4236
(If you are calling from outside the U.S. dial 858-703-3275.)

CALL CENTER HOURS

Employees may reach a customer service representative Monday through Friday, 8 a.m. to 6 p.m. CST, excluding holidays. Those calling after hours may leave a message for a representative to return their call within the next business day. During annual enrollment, the call center's phone lines will remain open until 8 p.m. CST.

WHAT YOU NEED

When you call Benefits Central, you'll be asked to verify a few things for security purposes:

- Employee ID (for example: E12345).
- The last four digits of your Social Security number.
- Home zip code.
- Date of birth.

WHO IS ELIGIBLE FOR COVERAGE?

Full-time employees are eligible for coverage. You may also elect to cover your eligible dependents under certain benefit plans.

Eligible dependents for medical, prescription drug, dental, and vision coverage include your lawful spouse, your same-sex or opposite-sex domestic partner, your children until their 26th birthday, and your incapacitated children over age 26. If your child is incapacitated, you must notify Benefits Central and provide documentation within 31 days of the child's 26th birthday to continue coverage.

For child life insurance, unmarried dependent children are eligible for coverage through the end of the calendar year in which they reach age 23. For those dependents who have reached age 23 who have been enrolled in the company child life insurance plan and desire to continue coverage, please contact Benefits Central for portability or conversion forms to continue life insurance coverage on your child. Disabled children over the age of 23 are eligible for continued coverage provided they were already enrolled in the company child life insurance plan prior to becoming incapacitated. Upon disabled child's attainment of age 23, you must provide timely medical information satisfactory to MetLife for the child within 31 days of the end of the calendar year in which they reach age 23. Contact Benefits Central for required documentation to continue coverage.

Enterprise Holdings reserves the right to conduct dependent eligibility audits, as it deems appropriate, up to and including requiring employees to provide proof (e.g., marriage licenses, birth certificates, tax returns, etc.) that spouses, children and other covered dependents are eligible for company benefits as defined in the Enterprise Holdings Health and Welfare Benefits Summary Plan Description (SPD), available on Benefits Central, and reserves the right to request such documentation as it determines appropriate to confirm dependent status.

WHEN COVERAGE BEGINS

ANNUAL ENROLLMENT

Benefits elections made during annual enrollment become effective on Jan. 1 of the following year. Changes to payroll deductions begin the first paycheck in January.

LIFE-CHANGING EVENT

If you are adding or dropping coverage midyear due to a qualifying life-changing event (i.e., marriage, divorce, birth), changes to your coverage begins on the date of the event. Changes to payroll deductions begin the first full paycheck after the date of the event.

NEWLY ELIGIBLE FOR BENEFITS

If you are a new employee or newly eligible for benefits, coverage becomes effective on the first day of the third consecutive month following the first day of work as a full-time employee. Payroll deductions for benefit premiums begin the first full paycheck after these benefits go into effect.

COVERAGE DEFAULTS

NEWLY ELIGIBLE FOR BENEFITS

If you are a new employee or newly eligible for benefits and you do not make benefit elections by the due date, the following will occur:

1. Medical/prescription drug/dental coverage will default to employee only coverage in the Triple-S Salud plan at the biweekly rate of \$22.51.
2. You will not be able to take advantage of any healthy behavior incentives that may apply to your plan.
3. Premiums will be deducted from your paycheck until the end of the plan year.
4. Vision and voluntary life insurance benefits will be waived.

DURING THE OCT. 10 – 28 ANNUAL ENROLLMENT

If you do not make any benefits elections by the Oct. 28 deadline:

1. Your current 2011 benefits elections will carry over to the 2012 plan year, based on the level of coverage you had along with any dependents enrolled under your plan as of Dec. 31.
2. You will default to the 2012 premium rates and will not be able to take advantage of any healthy behavior incentives that may apply to your plan. (In order to be eligible for the non-tobacco incentive, you must log in to Benefits Central during annual enrollment to indicate your tobacco usage and that of all dependents (18 years of age or older as of Jan. 1) covered under your medical plan.)
3. You will not be able to change your benefits elections until next year's enrollment period, unless you have a qualifying life-changing event before that time.
4. Your current life insurance beneficiary designations will become null and void on Jan. 1, 2012, if you don't update them online through Benefits Central. In the event of your death, your life insurance policy will be paid according to the plan default (spouse, children and then estate).

When completing your benefits enrollment or other benefits or employment forms, you are attesting to the truth of your statements. Enrolling ineligible dependents, failure to honestly report tobacco usage or making other misrepresentations about your status, claims or misrepresenting other information may subject you to discipline, up to and including termination.

Your Health Care Package ----->

Medical, prescription drug and dental benefits are bundled together into one benefit package thru Triple-S Salud. Below is a brief description of this health care package and the biweekly premium rates for 2012. For more information, please refer to your Triple-S Salud Certificate of Coverage.

MEDICAL

	Copayment, Deductibles and Coinsurance In-Network
Physician's Office Visits	
Generalist	\$5
Specialist	\$15
Subspecialist	\$15
Laboratories, X-Rays and Diagnostic Tests	25% coinsurance
Emergency Room	\$20
General Hospitalization	\$50
Partial Hospitalization	\$50

ID CARDS

If you are enrolling in health care benefits for the first time or making a change, you will receive your ID cards in the mail from Triple-S Salud.

PRESCRIPTION DRUG

Lists of Medications/Mandatory Generic

Prescription Drug Copays	Retail	Mail
Generic	\$5	\$10
Preferred Brand	\$10 or 15%, whichever is higher	\$20 or 12%, whichever is higher
Brand	\$15 or 20%, whichever is higher	\$30 or 15%, whichever is higher
Out of List	\$15 or 25%, whichever is higher	\$45 or 25%, whichever is higher

DENTAL

Basic, preventive and diagnostic services covered with \$0.00 copayment
30% coinsurance for composite and oral surgery
20% coinsurance for space maintainers
50% coinsurance for prosthesis services / 57% for partial removable prosthesis (metal)
57% coinsurance for crowns and high noble retainers
Periodontic services are covered with \$0.00 copayment, up to \$1,000 per policy year
Orthodontic services covered by reimbursement at 100%, (\$1,000 lifetime maximum for children through age 18)

PUERTO RICO EMPLOYEE HEALTH CARE PREMIUM RATES FOR 2012

Includes coverage for medical, prescription drug, and dental benefits. Rates quoted below are bi-weekly and payroll-deducted.

Benefit Choices	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Triple-S Salud	\$37.51	\$82.52	\$67.52	\$116.28

MANAGING YOUR HEALTH

In 2011 Enterprise Holdings rolled out Managing Your Health — a multifaceted and ongoing wellness campaign that encourages employees to take steps to make better choices and live happier, healthier lives. In addition to providing you and your dependents with information, this year Enterprise Holdings is rewarding healthy lifestyles by offering a healthy behavior incentive to reduce your health care premiums.

HEALTHY BEHAVIOR INCENTIVE

BE TOBACCO-FREE OR COMPLETE THE QUIT FOR LIFE TOBACCO CESSATION PROGRAM

Enterprise Holdings offers a non-tobacco incentive to you and your eligible dependents. This incentive is in the form of a reduction to your per pay period medical premiums. Each year during annual enrollment you will be required to indicate tobacco usage status for yourself and all covered dependents (18 years of age or older) in order to receive the non-tobacco incentive for the next plan year.

Non-Tobacco Users: If you and your family members do not use tobacco products, you will receive reduced health care premiums for the plan year.

Tobacco Users: To help tobacco users qualify for the incentive, we provide Quit For Life, a tobacco cessation program offered by Alere Wellbeing.

How The Quit For Life Program Works For Tobacco Users

To receive the non-tobacco incentive, all enrolled tobacco users must register in the Quit For Life tobacco cessation program and complete five coaching calls with a Quit Coach. After all tobacco users have completed the five coaching calls, you will receive a Benefits Enrollment Confirmation in the mail indicating that you have qualified for the non-tobacco incentive and the company will reduce your medical premiums. The reduced premiums will remain in effect until the end of the plan year.

The earliest you can receive your non-tobacco incentive is the first full pay period after the month in which the tobacco user completes the fifth coaching call, after your benefits elections are in effect.

What does the Quit For Life program include?

Your easy-to-follow quitting plan includes:

- Access to Web Coach®
- An easy-to-use printed workbook
- Recommendations on type, dose and duration of nicotine replacement or medication
- Free 8-week supply of nicotine replacement therapy (patch/gum)
- Unlimited toll-free access to Quit Coaches
- A 6-month program survey

Who is eligible for the program and what is the cost?

Enterprise Holdings offers this program at no cost to:

- All benefit-eligible Enterprise Holdings employees, and

- Dependents (18 years of age or older) only if they are enrolled in the company medical plan.

Benefit-eligible employees as well as their dependents (18 years of age or older) enrolled in the medical plan can participate in the Quit For Life program as soon as the benefits eligibility waiting period is met.

How do I register in the Quit For Life program?

Call 866-QUIT-4-LIFE (866-784-8454) or visit www.quitnow.net/ehi and click Enroll Online. A registration specialist will verify your eligibility and transfer you to a Quit Coach to get started.

Non-Tobacco Incentive Per Pay Period Premium Reduction

The non-tobacco incentive reduces your medical premium deductions and the applicable credit appears on your Benefits Enrollment Confirmation:

Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
\$15.00	\$33.01	\$27.01	\$46.51

Other Voluntary Benefits ----->

The company offers full-time employees the opportunity to participate in the voluntary benefits described on pages 6–7. MetLife is the insurer for your Life and AD&D insurance program. The company provides Basic Life Insurance and Accidental Death and Dismemberment Insurance at no cost to you. (See page 8) The purchase of additional employee life insurance or life insurance coverage for a spouse or domestic partner or children – is a voluntary program that is funded through payroll deductions. Please visit Benefits Central at benefits.ehi.com to view the options available to you for 2012 and the associated costs.

OPTIONAL LIFE INSURANCE (EMPLOYEE)

EMPLOYEE LIFE INSURANCE

- Sign up for employee Optional Life Insurance (If Optional Life coverage was waived at initial eligibility, plan entry is limited to 1x annual pay)
- Increase Optional Life Insurance coverage (Increase limited to next coverage level)
- Waive/drop Optional Life Insurance

Optional (Employee) Life Insurance may be purchased at levels of one to six times your annual pay (some enrollment limitations apply). Premiums for optional life are based on age, tobacco usage status, and annual fiscal pay. (See Premium Rates Table below.) Your use of any tobacco product within the past 12 months qualifies you for the tobacco rate. Being enrolled in the Quit For Life tobacco cessation program does not allow you to elect the non-tobacco rates for optional life insurance.

Premiums are payroll deducted on an after-tax basis and coverage cannot be changed or dropped during the plan year. Death benefit amounts are calculated using your actual gross earnings for the preceding calendar year (rounded up to the next \$1,000) and includes base pay, overtime pay, bonuses and commissions.

Your combined company-paid basic life and any employee-paid optional life coverage cannot exceed \$1.5 million.

**OPTIONAL LIFE INSURANCE - PREMIUM RATES TABLE
EMPLOYEE RATES PER \$1,000 - QUOTED BIWEEKLY**

Age Band*	Non-Tobacco Rate	Tobacco Rate**
<25	0.014	0.026
25 - 29	0.014	0.028
30 - 34	0.014	0.037
35 - 39	0.018	0.046
40 - 44	0.026	0.061
45 - 49	0.044	0.110
50 - 54	0.073	0.175
55 - 59	0.110	0.242
60 - 64	0.181	0.378
65 - 69	0.361	0.639
70 - 74	0.679	1.139
75 +	0.679	1.139

*Your rate is based on your "insurance" age as of the plan year. To determine your "insurance" age, take the plan year (2012), then subtract your birth year. The result is your "insurance" age for all of 2012. **Your use of any tobacco product within the last 12 months qualifies you for the tobacco rate.

DEPENDENT LIFE INSURANCE (SPOUSE/CHILD)

SPOUSE LIFE INSURANCE

- Enroll your spouse or domestic partner for Spouse Life Insurance (If Spouse Life coverage was waived at initial eligibility, plan entry is limited to first coverage level)
- Increase Spouse Life Insurance to next coverage level
- Waive/drop Spouse Life Insurance

Note: If you and your spouse or domestic partner are both employed by Enterprise Holdings you may not elect Spouse Life Insurance.

CHILD LIFE INSURANCE

- Enroll your children for Child Life Insurance (If Child Life coverage was waived at initial eligibility, plan entry is limited to first coverage level)
- Increase Child Life Insurance to next coverage level
- Waive/drop Child Life Insurance

Note: If you and your spouse or domestic partner are both employed by Enterprise Holdings only one parent may cover the dependent children.

Your unmarried dependent children are eligible for coverage through the end of the calendar year in which they reach age 23. For those dependents who have reached age 23 who have been enrolled in the company child life insurance plan and desire to continue coverage, please contact Benefits Central for portability or conversion forms to continue life insurance coverage on your child.

Disabled children over the age of 23 are eligible for continued coverage provided they were already enrolled in the company child life insurance plan prior to becoming incapacitated. Contact Benefits Central for required documentation required to continue coverage.

Your selected level of child coverage insures all of your eligible dependent children at the same level. One premium covers all of your eligible dependent children.

Premium rates are payroll deducted on an after-tax basis for the following coverage levels:

Spouse Coverage	Child Coverage
\$25,000/\$.53 biweekly	\$10,000/\$.46 biweekly
\$50,000/\$1.06 biweekly	\$20,000/\$.92 biweekly

Certain life-changing events may qualify for a midyear change in coverage. Please visit Benefits Central at benefits.ehi.com to make benefits elections changes due to a life-changing event. Benefits changes must be made within 31 days of the event date.

Employee Optional Life Insurance

Examples of Employee Optional Life Insurance Premium Rates Depending on Age, Coverage Level, Annual Pay and Your Tobacco Use

Non-Tobacco, age 25, \$30,000 income, your rate per biweekly paycheck would be:	1 x Salary \$.42	2 x Salary \$.84	3 x Salary \$1.26	4 x Salary \$1.68	5 x Salary \$2.10	6 x Salary \$2.52
Tobacco, age 25, \$30,000 income, your rate per biweekly paycheck would be:	1 x Salary \$.84	2 x Salary \$1.68	3 x Salary \$2.52	4 x Salary \$3.36	5 x Salary \$4.20	6 x Salary \$5.04
Non-Tobacco, age 36, \$80,000 income, your rate per biweekly paycheck would be:	1 x Salary \$ 1.44	2 x Salary \$2.88	3 x Salary \$4.32	4 x Salary \$5.76	5 x Salary \$7.20	6 x Salary \$8.64
Tobacco, age 36, \$80,000 income, your rate per biweekly paycheck would be:	1 x Salary \$ 3.68	2 x Salary \$7.36	3 x Salary \$11.04	4 x Salary \$14.72	5 x Salary \$18.40	6 x Salary \$22.08

Examples shown illustrate biweekly pay period rates.

Premiums are deducted per paycheck on an after-tax basis and are approximate due to rounding. Actual deductions may vary slightly.

MetLife is the insurer for your life insurance program and offers the following services to employees:

- Free Will Preparation Service (provided by Hyatt Legal Plans, Inc.). Employees can take advantage of the following will preparation services at no charge: telephone and office consultations to discuss the preparation or updating of the employee's and/or spouse or domestic partner's will, living will and power of attorney; preparation and updating of the will(s), living will(s) and power of attorney; preparation of codicils. For free will preparation services, contact Hyatt Legal Plans at 800-821-6400 and provide the Enterprise Holdings Group Number: 118877.
- Access to online tools at www.metlife.com/mybenefits (key in Enterprise Holdings) to help you evaluate your life insurance needs.
- Access to MetDESK - Information for families of special needs children.

KEEPING INFORMED ABOUT YOUR BENEFITS

Important and date-sensitive benefits information and announcements will be communicated to you via your company email address throughout the year. Since you are responsible for maintaining and updating your benefits elections, it is essential that you keep this email account activated by logging in and checking your emails weekly. After 90 days of non-use, your email password will expire and you will be required to contact the Technical Support Center to reactivate your email account.

Be sure to read your emails and follow instructions for managing your benefits on Benefits Central as outlined in How To Enroll on page 2 of this guide. Failure to respond to enrollment deadlines will impact benefits coverage for you and your dependents as described in Coverage Defaults on page 3 of this guide.

EYEMED VISION CARE

Full-time employees and their eligible dependents can enroll for this voluntary benefit. Rates quoted below are biweekly and payroll-deducted pretax.

Benefit Choices	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
EyeMed	\$2.07	\$3.91	\$4.52	\$7.67

SELECT NETWORK - MEMBER COST

- Annual vision exam: \$10 copay
- Frames: 80% of balance over \$120 (every other calendar year for adults) (every calendar year for children under age 19)
- Plastic Lenses*: \$10 copay
- Conventional Contact Lenses*: 85% of balance over \$115
- Disposable Contact Lenses*: Balance over \$115

*Either plastic lenses or contact lenses once every calendar year

This vision benefit also includes discounts on vision care services and hardware beyond plan coverage, a LASIK and PRK discount, continued eyewear savings plan and contact lens by mail program. EyeMed Vision Care's network of providers includes independent optometrists, ophthalmologists, opticians, and many retail chains, including the nation's leading optical retailer, LensCrafters®. A detailed description of your vision care benefit is available at YouDrive.EnterpriseHoldings.com.

If you are enrolling in the vision plan for the first time, you will receive an ID card from EyeMed Vision Care in the mail. If you are currently enrolled in the vision plan and will be continuing coverage, continue to use your current vision ID card.

Company-Provided Benefits ----->

The company provides the following benefits at no cost to you. No election is required. Eligible full-time employees are automatically enrolled for the benefits described below beginning on the first day of the third month following their first day of work.

BASIC LIFE INSURANCE

The company provides at no cost, the basic life insurance benefit of one and one-half times annual pay, rounded to the next highest \$1,000, for eligible full-time employees. (Annual pay is your actual gross earnings for the preceding calendar year and includes base pay, overtime pay, bonuses and commissions.)

The minimum benefit from this company-paid plan is \$25,000 and the maximum benefit is \$350,000.

ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)

The company provides, at no cost to the employee, AD&D insurance equal to the basic life insurance benefit of one and one-half times annual pay for eligible full-time employees. Accidental death and dismemberment (AD&D) insurance is in addition to the basic life insurance and pays a benefit to your beneficiary(ies) if you die within 365 days of an accident or a benefit to you if you lose a limb, your eyesight, hearing or speech as a direct result of an accident. Unlike life insurance, additional AD&D insurance coverage cannot be purchased by employees through the company group plan.

The maximum benefit is \$350,000 over a lifetime.

LIFE INSURANCE BENEFICIARY DESIGNATIONS

Who will collect your life insurance benefit should you die while working for the company? It is important to name one or more beneficiaries so that your life insurance benefit can be paid quickly according to your wishes.

The beneficiaries you designate for your basic life and AD&D can be different from the beneficiaries you designate for any optional life insurance you choose to purchase for yourself. And you are always the sole beneficiary for any dependent life insurance that you purchase for a spouse/domestic partner or child. Log in at benefits.ghi.com any time to designate or update your life insurance beneficiaries as you see fit.

LIFE INSURANCE MAXIMUM

Overall Life Insurance maximum is \$1.5 million. This includes a combination of your company-paid basic life benefit of one and one-half times annual pay (capped at \$350,000) plus any optional life insurance (one to six times annual pay) that you choose to purchase.

LONG-TERM DISABILITY (LTD)

Long-Term Disability (LTD) coverage is designed to provide a portion of your income if you are disabled and cannot work. After 90 days of disability, you may begin receiving LTD benefits of 60 percent of your pre-disability pay. MetLife administers the LTD plan and the company pays the full cost of this benefit. Employees are taxed on the monthly LTD premium and would, therefore, receive LTD benefits tax free. Employees cannot purchase additional LTD insurance coverage through the company group plan.

LIFEMANAGEMENT — EAP AND WORK/LIFE RESOURCES

Employee Assistance Program (EAP) and Work/Life resources are available through the LifeManagement Program which provides confidential counseling and a wide range of support services to help handle many ordinary as well as unique “real world” situations.

Magellan Health Services administers our LifeManagement Program and the company pays the full cost of this benefit. Employees are responsible for the costs associated with the services they select from any provider or organization beyond those provided under the LifeManagement Program.

This program is designed to help you get the most out of your work, family, and daily life by providing assistance with many of life’s issues. Full-time employees, their eligible dependents and anyone living in the employee’s home can use the LifeManagement Program beginning on the first day of the third month following their first day of work.

LifeManagement professionals provide confidential consultation 24 hours a day, whether you are dealing with a change in the workplace, preparing for the arrival of a new child, or struggling with an emotional concern. One single call or website login to www.magellanhealth.com/member allows you access to both work/life specialists and licensed consultants who can provide specialized resource and referral assistance, in-person counseling, and more.

Be sure to log in to Benefits Central at benefits.ehi.com to complete the enrollment process.

After you enroll, you will receive a Benefits Enrollment Confirmation at your home address. This statement summarizes the benefits elections you made and the associated costs. It also lists your dependent information and life insurance beneficiary designations. If there are any discrepancies, contact Benefits Central at benefits.ehi.com immediately.

Questions?

- Visit Benefits Central online at benefits.ehi.com
- Contact Benefits Central by sending an email via the Message Center link at the top of your Benefits Central screen
- Call Benefits Central call center at 855-434-4236 (If you are calling from outside the U.S. dial 858-703-3275)
- Refer to your Puerto Rico Addendum located on Benefits Central
- Refer to your Certificate of Coverage Medical, Certificate of LTD Coverage, and Certificate of Life Insurance Coverage located on Benefits Central
- Contact the benefits vendors below

Plan	Vendor	Vendor Web Site	Phone Number
Medical, Prescription Drug, Dental	Triple-S Salud	www.ssspr.com	787-774-6060 787-749-4777 877-357-9777
Vision	EyeMed Vision Care	www.eyemedvisioncare.com	800-841-1220
Basic Life, AD&D, Long-Term Disability Insurance	MetLife	www.metlife.com/mybenefits	Basic Life/AD&D 800-638-6420 Option 2 for claims Long-Term Disability 800-638-2242 Option 7 for Spanish
LifeManagement Program	Magellan Health Services	www.magellanhealth.com/member	800-980-2273
Tobacco Cessation Program	Quit For Life	www.quitnow.net/ehi	866-784-8454

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This 2012 Benefits Enrollment Guide presents a brief summary of your choices under the Enterprise Holdings Benefits Program. It is not intended as a complete description of each plan. Although every effort has been made to ensure that information in this enrollment guide is accurate, the provisions of the legal documents that describe the plans should be reviewed and will govern in the case of any discrepancy. The company reserves the right to change the program in any manner and at any time that it determines appropriate, with or without prior notice.

The company is committed to protecting medical information about you and your dependents and operates in compliance with the Health Insurance Portability and Accountability Act (HIPAA). You may obtain a copy of your privacy rights by visiting YouDrive.EnterpriseHoldings.com.