2014 BENEFITS

PRESCRIPTION

Administered by Florida Blue / Prime Therapeutics • Customer Service Line: 1.800.352.2583 / Prime Mail-Order 1.888.849.7845

Beginning January 1, 2014, Rx copays will be applied to the medical plan out-of-pocket maximum for all three plans.

<table>
<thead>
<tr>
<th>Prime Therapeutics</th>
<th>Retail (30-day supply)</th>
<th>Retail 90 (90-day supply)</th>
<th>Mail-Order (90-day supply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic</td>
<td>$10</td>
<td>$20</td>
<td>$20</td>
</tr>
<tr>
<td>Preferred Brand name (Eff. 1/1/2014)</td>
<td>$50</td>
<td>$100</td>
<td>$100</td>
</tr>
<tr>
<td>Non-Preferred Brand name (Eff. 1/1/2014)</td>
<td>$75</td>
<td>$150</td>
<td>$150</td>
</tr>
</tbody>
</table>

SPECIALTY PHARMACY PROGRAM: Injectable Therapies are used for several chronic disease states such as HIV/AIDS, Rheumatoid Arthritis, Cancer, Hemophilia, Deep Vein Thrombosis, Hepatitis B and C, RSV and Multiple Sclerosis. Injectable Therapy prescriptions are subject to 80/20 coinsurance until the $500 maximum out-of-pocket limit is met. After the maximum is met, normal co-pays apply. Coverage for these therapies are provided through the Caremark SPECIALTY PHARMACY PROGRAM. To begin using Specialty Pharmacy Program, you or your physician should call 1.866.278.5108.

RETAIL 90 PROGRAM: You can now get up to a three-month supply of a covered prescription drug (except Specialty Drugs) purchased at a retail Participating Pharmacy! These participating pharmacies are contracted to provide eligible members an extended supply of most commonly prescribed maintenance medications. Once your doctor has determined a medication to be the appropriate maintenance medication for your diagnosed condition, you should ask your doctor to write the prescription for a 90 day supply with any additional refills. Pharmacies that offer this service in the Duval/St. Johns/Flagler County areas include:

- A-1
- AHF
- Azalea Health
- Baptist
- Baygreen

- Costco
- CVS
- Durbin
- Extended Care
- Flagler Community

- Florida Specialty
- Island Family
- Knart
- Mayhugh Drugs
- Moultrie

- North Florida Pharmacy of Keystone
- Owens
- Park and King
- Publix

- Rite-Mart
- Xpert
- Park and King
- St Johns Smart

- Target
- Wal-Mart
- Saams
- Well Health Rx

- Walgreens
- Winn Dixie

DENTAL

Administered by HUMANA - Customer Service - 1-800-233-4013 - Website: www.humanadental.com

GENERAL PROVISIONS

<table>
<thead>
<tr>
<th>IN-NETWORK BENEFITS</th>
<th>OUT-OF-NETWORK BENEFITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefit Year Deductible</td>
<td>$50 individual/$100 family</td>
</tr>
<tr>
<td>Benefit Year Maximum</td>
<td>$1,000 individual</td>
</tr>
<tr>
<td>Lifetime Maximum</td>
<td>Orthodontic Lifetime Maximum per person - $1,000</td>
</tr>
</tbody>
</table>

COVERED SERVICES*

<table>
<thead>
<tr>
<th>IN-NETWORK BENEFITS</th>
<th>OUT-OF-NETWORK BENEFITS**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive Services</td>
<td>Plan pays 100% of the Allowed Amount</td>
</tr>
<tr>
<td>Basic Services</td>
<td>Plan pays 80% after deductible</td>
</tr>
<tr>
<td>Major Services</td>
<td>Plan pays 50% after deductible</td>
</tr>
</tbody>
</table>

*Deductible is waived for preventive services and not waived for basic or major services.

**Will be balance billed

VISION

Administered by Florida Blue

GENERAL PROVISIONS

- $250.00 per Calendar Year Maximum; Deductible is WAIVED for Vision.
- Employee will be responsible for 20% of the charged amount up to the $250 maximum.
- Employee will be responsible for 100% of any charge over the $250 maximum.

GO ANYWHERE!*

The routine vision plan, offered by Florida Blue, allows it’s members to choose any provider, in- or out-of-network, for their vision needs. If you go out-of-network, you will need to submit a claim form to Florida Blue for reimbursement.

Ask for Vision Discounts!

*By going to a non-participating provider, you may be balance billed.

Please note: Non-prescription sunglasses are not covered.