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| **Your Benefits Profile**   |  |  | | --- | --- | | Effective 7/1/2015 | [Click here for your Current Benefits](https://www.enrollone.com/v4secure/profile/confirm.asp?mode=&Param=DE13CE73A3A4C19ED4ACD4ACBFEA56BBD0B64B) [Print](javascript:window.print();) |      |  |  | | --- | --- | | William J. Bergen  61 Fairfield Road  Havertown, PA 19083 | SSN: 200-42-\*\*\*\* |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | *Your benefit elections* | | | | | | |  | | | | **Bi-weekly** | | | **Benefit** | **Election** | **Coverage** | **Effective** | **Pre-tax** | **Post-tax** | | Are you covering a dependent | Yes, I am |  | 7/1/2011 |  |  | | Dependent Certification | I certify |  | 7/1/2011 |  |  | | Tobacco Certification | Tobacco Free |  | 7/1/2012 |  |  | | Medical/Rx | [Penn Care PPO - Tobacco Free](http://www.ibx.com) | Self + Spouse | 7/1/2014 | $109.38 |  | | Dental | [Penn Dental Plan](http://www.dental.upenn.edu) | Self + Spouse | 7/1/2011 | $15.63 |  | | Vision | [Davis Premium](http://www.ibx.com) | Self + Spouse | 7/1/2014 | $4.62 |  | | Dependent Care Spending Account | No Coverage | $0.00 | 7/1/2015 | $0.00 |  | | Health Care Spending Account | No Coverage | $0.00 | 7/1/2015 | $0.00 |  | | Spouse Life Insurance | $10,000 | Spouse Only | 5/1/2011 |  | $1.24 | | Child(ren) Life Insurance | No Coverage | N/A | 5/1/2011 |  | $0.00 | | Employee Life Insurance | Core 1x Base Salary | $112,400 | 7/1/2015 | $0.00 |  | | Supplemental Life Insurance | 3x Base Salary | $337,000 | 7/1/2015 |  | $120.23 | | Supplemental AD&D Insurance | 4x Base Salary | Self + Family | 7/1/2015 | $4.56 |  | | Short Term Disability | 60% of Salary | $1,000 | 5/1/2011 |  | $41.08 | | **Totals (Bi-weekly)** | | | | **$134.19** | **$162.55** |  |  | | --- | | https://www.enrollone.com/v4secure/Themes/UPHS_2/images/blank.gif | | If you have questions regarding the Life, AD&D, Flexible Spending Accounts or Disability coverages, please contact your local HR office or UPHS Benefits Office at 215-615-2277. |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | *Your enrolled dependents* | | | | | | **Name** | **SSN** | **Relationship** | **Birth Date** | **Status** | |  | | | | | | Bergen, Sherri A. | 183-54-\*\*\*\* | Wife | 9/7/1963 | Active | | |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | Medical/Rx: | Y |  | | |  | Dental: | Y |  |  | |  | Vision: | Y |  | | |  | Spouse Life Insurance: | Y |  | | |  | Child(ren) Life Insurance: | N |  | | | | | | |  |  | | --- | | *Your beneficiary(ies)* | |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | *Employee Basic and Supplemental Life Insurance and AD&D*       [Print](https://www.enrollone.com/v4secure/profile/BeneficaryPrint.asp?BenefitCode=LIFEMP&ENRID=10878248&BenefitName=Employee+Life+Insurance&Param=DE13CE73A3A4C19ED4ACD4ACBFEA56BBD0B64B) | | | | | | | **Primary Beneficiaries** | | | | | | | **Name / Trustee, Estate** | **SSN** | **Relationship** | **Date of Birth** | **Benefit allocation** |  | | Bergen,Sherri | 18354\*\*\*\* | Wife | 09/07/1963 | 100% |  | | **No Secondary Beneficiaries** | | | | | | |
| |  |  |  | | --- | --- | --- | |  | [Privacy Statement](http://www.adp.com/privacy.aspx) / Copyright ©2012 ADP Benefit Services KY, Inc. |  | |