

Submitted!

Congratulations! Your enrollment has been submitted.



After leaving this page, you will no longer be able to see these next steps. Please print if you would like to retain a copy.

Thank you for enrolling in Spreetail/Buy Box Expert's benefits! Your enrollment has been submitted and will be approved within one week.

You will receive your insurance cards within 2-3 weeks (if applicable). It will take 1-2 weeks for your elections to be processed with the respective carriers. Once processed, you can register your accounts on each Member Website. Please bookmark the following Member Websites if you are enrolled in the respective plan:

Medical: https://members.nebraskablue.com/

Dental & Vision: https://www.sunlife.com/account

FSA & HSA: https://app.naviabenefits.com/participants/

• Employer Code: RTA

If you elected to enroll in Life Insurance for yourself or your spouse and are required to submit an Evidence of Insurability (EOI), please do so HERE.

Your Selections

Medical - BCBS

BCBS PPO - Employee Only

Your Est. Bundled Cost:

\$0.00

Bundled Plans

BCBS PPO - Employee Only

Effective from 4/1/2025

Your Cost: \$0.00

Employer Cost: \$609.45

Every Pay

98Point6 - Virtual Healthcare

Effective from 4/1/2025

Healthcare FSA Waive Healthcare FSA 2025

Effective from 4/1/2025

Your Annual Contribution: \$0.00

Limited Purpose FSA Waive Limited Purpose FSA 2025

Effective from 4/1/2025

Your Annual Contribution: \$0.00

Dependent Care FSA Waive Dependent Care FSA 2025

Effective from 4/1/2025

Your Annual Contribution: \$0.00

Dental - SunLife Waive Dental Coverage

Bundled Plans

Waive Dental Coverage

Effective from 4/1/2025

Vision - SunLife Waive Vision Coverage

Bundled Plans

Waive Vision Coverage

Effective from 4/1/2025

Basic Group Life

Basic Group Life - Employee

Effective from 4/1/2025

Your Coverage is preset at: \$50,000.00

Beneficiaries

• Feihuan Peng (Self)

• Primary Beneficiary, Allocation: 100.00%

Employer Cost: \$1.50

Your Cost: \$0.00

Every Pay

Voluntary Life -Employee Waive Employee Voluntary Life

Effective from 4/1/2025

Coverage Amount: \$0.00

Basic Group AD&D

Basic Group AD&D - Employee

Effective from 4/1/2025

Your Coverage is preset at: \$50,000.00

Beneficiaries

• Feihuan Peng (Self)

• Primary Beneficiary, Allocation:

100.00%

Your Cost: \$0.00

Employer Cost: \$0.75

Every Pay

Voluntary AD&D -Employee Waive Employee Voluntary AD&D

Effective from 4/1/2025

Coverage Amount: \$0.00

Voluntary Long Term
Disability

Voluntary Long Term Disability

Effective from 4/1/2025

Coverage Amount: \$1,154.00

Your Cost: \$6.75

Every Pay

Voluntary Short Term Disability Waive Voluntary Short Term Disability

Coverage Amount: \$0.00

Effective from 4/1/2025

Voluntary Life -Spouse/Domestic Waive Spouse/Domestic Partner

Voluntary Life

Partner Effective from 4/1/2025

Coverage Amount: \$0.00

Voluntary AD&D -Spouse/Domestic

Partner

Waive Spouse/Domestic Partner

Voluntary AD&D

Effective from 4/1/2025

Coverage Amount: \$0.00

Voluntary Life -Children Waive Child Voluntary Life

Effective from 4/1/2025

Coverage Amount: \$0.00

Voluntary AD&D -Children Waive Child Voluntary AD&D

Effective from 4/1/2025

Coverage Amount: \$0.00

Accident Life Insurance

Waive Accident Life

Effective from 4/1/2025

Coverage Amount: \$0.00