



EGYPTIAN AREA SCHOOLS EMPLOYEE BENEFIT TRUST SUPPLY ORDER FORM






Date: _____

Please complete this form and return to Krista Gotto via fax 888.525.2799 or email Krista.Gotto@meritain.com.



Attention: _____ Email: _____




School and Address: _____

Enrollment Guide  2014-2015 Year	Teladoc (previously Consult A Doctor. New name, new look same great service!)  Teladoc Poster
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Schedule of Benefits effective January 1, 2015									
	Plan A		Plan B		Plan C		HDHP		Plan E

The following supplies have NOT been revised.

Plan Documents  Plans A, B, C & E Eff 9/1/13	 Plan HDHP Eff 9/1/13
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Coordinated Health/Care CHC Magnet 	CHC Tear-off Pad 	CHC Poster 
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LabCard LabCard Stickers 	LabCard Brochure 	LabCard Poster 	Gazelle Mobile App 
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Lincoln Financial Travel Connect Brochure 	Healthcare Blue Book HCBB Magnet 	Life Keys Brochure 	HCBB Poster 
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Note: You may also print the Schedules of Benefits, the Enrollment Guide, newsletters and much more directly from www.egtrust.org.