



## HFM B.O.C.E.S Employees



Find out how AFLAC can pay YOU directly when an accident or illness occurs!!!

For more information, or to review your current policies, please complete and submit the interest Form. 🐥

Either Call your Aflac Consultant Margie (Hicks) Krawec or Send form by fax or e-mail!

### *Great news!!! Benefit program Availability for all employees ...*

AFLAC provides a variety of coverage options protecting over 50 million people worldwide against the financial uncertainty that comes along with accidents and illnesses. Cash paid directly to you in addition to any other insurance with NO coordination of benefits.

Aflac now offers ONE DAY PAY and DIRECT DEPOSIT for your benefit checks!!! 🐥

### Aflac Programs Available

- AFLAC SHORT-TERM DISABILITY – **Guarantee Issue.** Disability is not provided in most School, including HFM B.O.C.E.S. Protect your income in case of an illness or injury, to include maternity leave. Contact your agent for your personal rates! **RATES BASED ON YOUR SELECTION.**
- – SICKNESS/ACCIDENTAL HOSPITAL Plans: **Guarantee Issue.** – This benefit is designed to cover the cost of your hospital deductible. Some of the other benefits are physician visits, ER visits, Short Stay in Hospital, Surgeries, invasive testing and more! **Ages 18– 75 may enroll at the same payroll rate!**
- ACCIDENT INDEMNITY ADVANTAGE PLAN– Accidents happen to all kinds of people every day. Out of pocket expenses associated with an accident are unexpected and often burdensome; the impact on your finances and your well-being can be reduced. **A \$60 wellness benefit has been added.**
- AFLAC CANCER CARE PLAN/CRITICAL ILLNESS PLAN – Cancer, Stroke, Heart Attack, End-Stage Renal Failure (kidney failure) and Organ transplant are some of the major diseases that results in significant out-of-pocket costs.
- LIFE INSURANCE – Are you looking for Life Insurance? Up to \$250,000 of life insurance is available to provide protection. Whole, Term and Juvenile available. **All Rates locked in! NO Physicals or Blood Work Required!!!** Protect those you love against the devastating loss of your income.

Margie (Hicks) Krawec

margaret\_hicks@us.aflac.com, Phone # 518.774.5737/fax: 315.429.9242

**AFLAC NY**  
**New hire/ New participant Interest Form**  
**Participation/waiver of Supplemental Benefits**

Company Name: HFM B.O.C.E.S.

Employee Name: \_\_\_\_\_

Effective Date: \_\_\_\_\_

Contact Number: \_\_\_\_\_ Best time to call: \_\_\_\_\_

E-mail: \_\_\_\_\_

**I would like more information on:**     10 Month Employee     12 Month Employee

Individual     Individual & Spouse     One Parent Family     Two Parent Family

*"Guarantee Issue"* **Short Term Disability**

*"Guarantee Issue"* **Sickness/Accident Hospitalization** Advantage Plan!

**Accident** Advantage     **Life Insurance** - Whole, Term and Juvenile

**Cancer Plans**     Lump Sum **Critical Illness** -  
(Heart Attack, Stroke, etc.)

*Participation in some benefits are subject to AFLAC's Eligibility requirements.*

\_\_\_\_\_  
Employee

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

**Margie A. (Hicks) Krawec** 

[margaret\\_hicks@us.aflac.com](mailto:margaret_hicks@us.aflac.com)

**Phone: 518.774.5737/fax #: 315.429.9242**

Thank you!