



The American Maritime Officers Plans (AMOP)

Benefits Connection Newsletter

American Maritime Officers Plans, P.O. Box 35, Dania Beach, FL 33004 Ph.: (800) 348-6515

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GOODBYE 2020, WELCOME 2021!

MERRILL LYNCH INVESTMENT & RETIREMENT PLANNING WEBINARS

Our Investment Advisors at Merrill Lynch will continue to provide resourceful webinars, also known as online presentations, that address a wide variety of topics including, but not limited to, retirement planning, investment strategies, and fixed income.

Quarterly live webinars will be available on:

January 22, 2021

July 23, 2021

April 23, 2021

October 22, 2021

Merrill Lynch will also provide pre-recorded webinars that will be available online on the following topics:

- Target Date Funds

We would appreciate your valuable feedback. If you find that there are more topics regarding your retirement accounts that you would like specifically addressed in a webinar, please inform the Plans office.

You can obtain access to the online webinar resource materials by visiting the AMO Plans website at www.amoplans.com. Also, if you would like a customized outlook of your retirement portfolio, please feel free to call the Plans office at 1-800-348-6515, ext. 14 or send an email to amopen-sion@amoplans.com and we will refer you to a Merrill Lynch advisor.

ELECTRONIC DISCLOSURE BY EMPLOYEE BENEFIT PLANS UNDER ERISA

The U.S. Department of Labor has approved for employee benefit plan administrators to use electronic media, as a default, to furnish information to participants and beneficiaries of plans. The rule allows plan administrators who satisfy specified conditions to provide participants and beneficiaries with a notice that certain disclosures will be made available on a website, or to furnish disclosures via email. Individuals who prefer to receive disclosures on paper can request paper copies of disclosures and opt out of electronic delivery entirely. Please note that the new option is not approved for delivery of health and welfare plan disclosures at this time.

The American Maritime Officers Plans office will be implementing this new method of communication, which will not only allow participants immediate access to plan changes, but will also generate additional cost-savings due to the elimination of postage. We ask that all plan participants and beneficiaries complete the Consent to Receive Electronic Documents/Notices form, which will be provided on the Plans website.

If you have any questions regarding this form, please contact the AMO Medical Department at 1-800-348-6515, ext. 12.

AMO MEDICAL PLAN NOW OFFERS DIRECT DEPOSIT FOR DIRECT MEMBER REIMBURSEMENT CLAIMS

The AMO Medical Plan now allows direct member reimbursement claim payments that are processed by the Plan office to be issued via direct deposit. A Method of Payment Authorization form is required, along with bank support, which will be kept on file and processed with each applicable claim. Please note that the bank information provided must confirm that the claimant is an account owner. The form is available online at www.amoplans.com. If you have any questions regarding this new feature, please contact the AMO Medical Department at 1-800-348-6515, ext. 12.

SPECIAL INTEREST ARTICLES INSIDE THIS ISSUE...



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Same Great Service, New Name

ENVISIONRx



elixir
CRAFTED Rx SOLUTIONS

**EnvisionRx has changed their name to Elixir
as of September 1, 2020.**

The pharmacy benefits and services you rely on will continue as always.

NO NEED TO TAKE ACTION



Continue using your Medical ID card which contains the Prescription ID information that is needed to process your prescriptions without interruption. For Medicare primary retirees, continue using your current Medicare prescription ID card previously issued from Envision Rx.



Access your benefits and services on our new site www.elixirsolutions.com.

If you have questions, contact Elixir Customer Care at 800-361-4542 or the AMO Medical Plan at 800-348-6515 Ext. 12.

Visit our new website elixirsolutions.com

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elixir
CRAFTED Rx SOLUTIONS

COVID-19: Safety Tips & Guidelines

Stay Healthy. Stay Calm. Stay Informed.



The best way to prevent illness is avoid to being exposed to this virus.

Wear a mask over your nose and mouth

- Masks help prevent you from getting or spreading the virus.
- You could spread COVID-19 to others even if you do not feel sick. Everyone should wear a [mask](#) in public settings and when around people who don't live in your household, especially when other [social distancing](#) measures are difficult to maintain. Masks should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

Stay 6 feet away from others

- **Inside your home:** Avoid close contact with people who are sick.
- If possible, maintain 6 feet between the person who is sick and other household members.
 - **Outside your home:** Put 6 feet of distance between yourself and people who don't live in your household.
 - **Avoid crowds:** Being in crowds like in restaurants, bars, fitness centers, or movie theaters put you at higher risk for COVID-19.
 - **Avoid poorly ventilated spaces:** Avoid indoor spaces that do not offer fresh air from the outdoors as much as possible. If in doors, bring in fresh air by opening windows and doors, if possible.

Wash your hands often

- [Wash your hands](#) often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
- If soap and water are not readily available, **use a hand sanitizer that contains at least 60% alcohol**. Cover all surfaces of your hands and rub them together until they feel dry.
- **Avoid touching your eyes, nose, and mouth** with unwashed hands.

Monitor Your Health Daily

- **Be alert for symptoms.** Watch for fever, cough, shortness of breath, or [other symptoms](#) of COVID-19 and **take your temperature** if symptoms develop.

Clean AND disinfect frequently touched surfaces daily.

You can obtain more information regarding COVID-19 guidelines at the CDC website: <https://www.cdc.gov>.

COVID-19 Vaccine Distribution

On December 11, 2020, the U.S. Food and Drug Administration (FDA) issued an emergency use authorization (EUA) allowing the Pfizer-BioNTech COVID-19 Vaccine to be distributed in the U.S. and on December 18, 2020 the same EUA was issued for the Moderna COVID-19 Vaccine.

Now that the FDA has granted emergency use authorization, the vaccines have first become available to high-risk populations based on guidance from the CDC. In Phase 1, COVID vaccinations have been focused on healthcare workers, long-term care facilities and people over 65 with chronic health conditions and **are not widely available to the general public**.

Additional guidance is expected as vaccines become more widely available. As supply of the vaccine increases, broader access will become available and can be obtained through the pharmacy network. The Plan's Pharmacy Benefit Manager, Elixir (formerly known as Envision Rx Options), is prepared to allow vaccinator pharmacies to process the administration fees that will be covered under the AMO Medical Plan for administration of these COVID-19 vaccines and **there will be no cost share to the participants**.

Please contact the Plan office at 1-800-348-6515, ext. 12 for any questions.

Financial Wellness Center

PREPARING FOR LIFE'S FINANCIAL CHALLENGES

If thinking about your finances raises your blood pressure, understand that you are not alone. 60% of workers cite financial matters as their top cause of stress.*

Newport is excited to introduce the all-digital Financial Wellness Center (FWC), as part of your retirement and benefit plan experience, to help you on your financial journey. Seamlessly integrated within your website and mobile experiences, you get real-time access to an interactive library of multi-media financial wellness resources.

The FWC addresses key financial topics, such as:

- Retirement Planning
- Education Funding
- Investment Strategies
- Health Care and Insurance
- Debt and Credit Management
- And much more

You create a profile by answering a few simple questions, and the FWC customizes your experience based on your age, learning style, goals/needs, interests, and usage behaviors. The FWC is also highly searchable across various criteria such as life stage, topic, and media type.

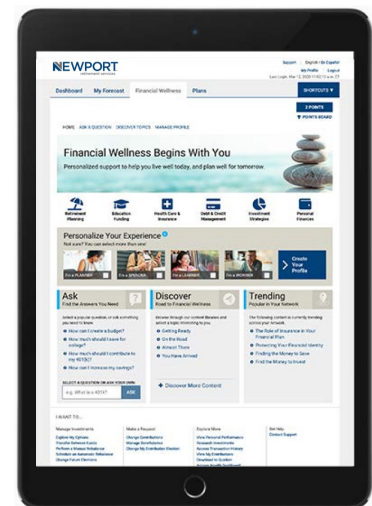
The FWC serves up a personalized experience with relevant content for you that evolves based on your site usage. Dynamic “calls-to-actions” bring together the FWC with core features of your retirement and benefit accounts and encourages you to take your next best step.

Have questions about paying down debt, saving for college, or applying for a mortgage? The FWC can help you—through articles, videos, calculators, and tutorials—you can start exploring the financial topics most important to you today.

Login to your account on newportgroup.com to get started!

**PWC's 8th Annual Employee Financial Wellness Survey (2019)*

Newport Group, Inc. and its affiliates provide recordkeeping, plan administration, trust and custody, consulting, fiduciary consulting, insurance and brokerage services.



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VISIT NEWPORTGROUP.COM

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RETIREMENT BENEFITS



NOTICE REGARDING DEFAULT INVESTMENTS

If you did not provide investment instructions to the Plans with respect to some or all of the assets in your Newport accounts, those assets have been automatically invested in the default investment for your 401(k), DC and/or MPB accounts respectively. You may at any time elect to transfer your assets invested in the default to any of the other investment options available, including Target Date Funds under the Plans by logging in to your Newport account at www.newportgroup.com.

PARTICIPANT FEES

The AMO Plans continuously review the retirement benefits to ensure that employees have access to quality investments and services. The Plans have chosen the lowest fee share class available to the Plans, so that no matter which investment option you select, you achieve the maximum investment return for that investment option. If you would like information on these fees and investment funds, please call the Newport Group Participant Call Center at 1-800-650-1065.



American Maritime Officers 401(k) Plan

The AMO 401(k) Plan is one of the best and easiest ways to save for your future. Make your future a priority now. If you can't save the maximum amounts shown below then consider gradually increasing your contributions over time. You'd be surprised how much even a small contribution adds up.

You can **save up to 75%** of your pay from your employer payroll and/or AMO vacation pay on a pre-tax basis, which lowers your taxable income and therefore, lowers your taxes. You can also contribute on an after-tax basis.

The Plan offers both traditional pre-tax contributions and Roth 401(k). If elected, the Roth 401(k) option requires after-tax contributions, but allows for tax free growth and distribution, provided you have had the account at least five years and are age 59 ½.

The 401(k) elective deferral limit for 2021 is \$19,500 or \$26,000 (if over 50 years old) on a tax deferred basis. These limits remained unchanged from last year.

Saving for your retirement is simple - just complete the AMO 401(k) enrollment form located on the AMO Plans website at www.amoplans.com.

American Maritime Officers Money Purchase Benefit (MPB)

The AMO MPB is a defined contribution benefit, which is solely funded by participating employer contributions. These contributions are placed into a personal retirement account for each member, which can also grow tax-deferred until retirement age. This benefit does not allow employee contributions or loans.

American Maritime Officers Defined Contribution (DC) Plan

The AMO DC Plan is a defined contribution benefit in which the participant does not make the contributions. It offers eligible participants the opportunity to prepare for their retirement with a wide range of investment options. The key to successfully planning for the future is learning the basic principles of a disciplined investment program.

TARGET DATE FUNDS (TDFs)

The American Maritime Officers Defined Contribution, 401(k) and MPB retirement accounts allow participants to choose how to invest their funds. The Vanguard Target Date Funds are now available as an investment option.

Target Date Funds (TDFs) mix several **different types of stocks, bonds and other investments**, which are designed to allow you to take more risks at an early age, while gradually shifting to a more conservative investment mix over time.

TDFs provide participants with automatic adjustments to asset allocations as they approach retirement age. This can serve as an easy option, allowing participants to remain in TDFs through their careers.

When you are investing for retirement, your investment goals at age 30 may be very different from your investment goals at age 60. After all, if your retirement is many years away, your focus might be on building assets. But as you approach retirement, your focus may shift to preserving your accumulated assets.

To learn more about Vanguard TDFs, a set of Frequently Asked Questions are available on the Plans website at www.amoplans.com. Also, to access your Newport account or obtain information on the investment funds offered by the Plan, including any restrictions, fees, or expenses associated with a change in investments, you can contact the Newport Group Participant Call Center at 1-800-650-1065 for assistance.

MEDICAL PLAN REMINDERS

*"Happiness is the new rich.
Inner peace is the new suc-
cess. Health is the new
wealth. Kindness is the new
cool.."*

~ Syed Balkhi



Your Annual Wellness Benefits

The AMO Medical Plan provides a Wellness Benefit to you and your eligible dependents without paying a co-payment or coinsurance when provided by an in-network provider. This 100% coverage applies regardless of whether your annual deductible or out-of-pocket maximum is met. These services include: **Mammogram - Baseline age 40, Pelvic Exam and Pap Smear - No Baseline age, Colonoscopy - Baseline age 50, and PSA Test - Baseline age 50.** This benefit applies to the first service per calendar year. Any service thereafter in the same calendar year is payable as any other sickness or injury.

Coordination of Benefits Form

If you are an Active participant under the AMO Medical Plan and you have a dependent spouse and/or dependent children covered under the Plan, then you are required to complete a Coordination of Benefits (COB) Form on an annual basis. The form is due one year from the date of the last COB form on file with the Plan. If the AMO Medical Plan is the primary coverage for your dependent(s) and we do not have a current COB form on record, then your dependents' claims may be denied until a completed COB form is received.

Please make sure to include all requested information when completing the form. You are required to notify the Plan office immediately if any change in dependent status occurs or if any changes occur that may change your dependents' coverage.

Please note that if a dependent spouse is employed full time, the Rules and Regulations of the AMO Medical Plan require that the Plan consider group medical coverage offered through a dependent spouse's full time employment first and the AMO Medical Plan will be secondary. **If group medical coverage is rejected by a dependent spouse, the AMO Medical Plan will pay none of the otherwise eligible benefit.**

For the purposes of determining full time employment status, 30 hours or more per week will be considered full time, and if the employer does not provide group medical coverage, documentation from the employer on company letterhead will be required as proof that no coverage is provided.

Pensioner Earnings Limitation Form

All non-Medicare Pensioners with medical eligibility under the AMO Medical Plan were recently mailed notices regarding the Affidavit of Pensioner's Medical Benefits Earnings Limitation. **This form is required on an annual basis until you (and your eligible dependent spouse, if you are married) turn age 65 and/or become eligible for Medicare, whichever comes first.** If your form is not received in the Plan office by **April 30, 2021**, medical eligibility will be terminated for the Pensioner and the Pensioner's dependents and will result in permanent forfeiture of eligibility for medical benefits.

Please note that if you are a non-Medicare Pensioner whose medical eligibility was previously terminated due to exceeding the annual Pensioner Earnings Limitations, you are still required to return this form.

Non-Medicare Pensioners with medical benefits who have not received this notification can contact the AMO Medical Plan office at 1-800-348-6515, ext. 12 to request a copy.



HEALTH CARE REFORM



KEEPING YOU
Informed

As changes arise with Health Care Reform, the Plans will remain diligent in keeping you up to date on the latest developments.

We have covered the current requirements (in the article to the right) in an easy to understand way. You will be provided with your yearly tax form(s) by the deadline with instructions included.

If you have any questions, once you have received your tax forms, please contact the Plan office at 1-800-348-6515, ext. 12.



Reporting Health Coverage on IRS Tax Forms

In 2019 Congress eliminated the penalty on individual taxpayers for not having ACA-compliant health coverage by reducing the penalty to \$0 beginning in calendar year 2019. This effectively ended the individual coverage requirement, also known as the individual mandate or the individual responsibility requirement. The IRS noted that individuals do not need to report whether they had coverage or not when filing their federal tax returns. Despite these changes, all AMO Medical Plan participants received Form 1095-B from the Plan with regard to health coverage during the 2019 calendar year and will continue to receive the forms for the 2020 calendar year.

There were no changes to the employer mandates and all AMO Medical Plan participants should receive Form 1095-C from their respective employer(s) (if actively working).

The deadline to furnish these forms to individuals was extended from January 31, 2021 to March 2, 2021 and you should receive these forms by the deadline.

Because of these extensions, individuals may not receive their Forms 1095-B and 1095-C by the time they are ready to file their 2020 individual tax return. While information on these forms may assist in preparing a return, the forms are not required to file. Taxpayers can use other information about their health coverage to prepare and file their returns and do not have to wait for Forms 1095-B or 1095-C to file.

Form 1095-C - Employer-Provided Health Insurance Offer and Coverage

If you worked in AMO covered employment during 2020 and contributions were made to the AMO Medical Plan on your behalf by an AMO participating employer, then you will receive a Form 1095-C from your employer. If you worked for more than one employer, you should receive a separate form from each employer. Since your employer participates in a multiemployer plan and does not directly make the offer of health coverage, special codes have been designated specifically for multiemployer arrangements and will be reflected on the form for each month that a contribution was made to the Plan on your behalf, with no regard to whether you were eligible for coverage in that month. For multiemployer plans, employers are exempt from completing Part III (Covered Individuals) of the form. This information will be contained on Form 1095-B which will be furnished by the Plan as indicated below.

Form 1095-B - Health Coverage

If you were eligible for health coverage under the Plan at any time during the calendar year 2020, then you will receive Form 1095-B from the Plan. This form will indicate the months that you and/or your eligible dependents were covered under the Plan. Although the form is no longer needed to show compliance with the individual mandate, the Plan will continue to furnish these forms until further notice.

Pediatric Dental and Vision Benefits

The AMO Medical Plan's dental and optical benefits will remain unchanged for the 2021 plan year. Accordingly, yearly dollar limits on pediatric dental and optical benefits will still apply.

If you have access to a plan that does not have a yearly dollar limit on pediatric dental and optical benefits and wish to enroll any eligible dependents in such plan, you may opt out of these benefits for your dependents under the AMO Medical Plan.

Please contact the Plan office at 1-800-348-6515, ext. 12 for any questions related to the above Health Care Reform topics.

VACATION PLAN BENEFITS

“Time well spent results in more money to spend, more money to save, and more time to vacation.”

~ Zig Ziglar

File Your Vacation Claim in 3 Easy Steps

Step 1

A Vacation Application can be downloaded online at the following website:

<https://www.amoplans.com/VacationForms>

Please Note: There is a separate form for Deep Sea and Great Lakes members.

Step 2

Complete the Vacation Application in its entirety and verify that you have the appropriate documentation required to submit with your application.

Step 3

Submit your application (e-mail, fax, or regular mail).

In Person: Due to the ongoing COVID-19 public health emergency - and for the health and safety of our members and employees - the AMO Plans campus will not allow walk-ins into the Benefits Department, while continuing to maintain services via phone, mail, e-mail and through online resources.

Email: amovacation@amoplans.com

Fax: 954-926-7274

Mail In: AMO Vacation Plan
P.O. Box 35, Dania Beach, FL 33004

Reminder for AMO members filing for Great Lakes vacation pay:

In order to avoid delays in receiving a vacation check from the AMO Vacation Plan, when filing for a specific period of shipboard employment, ALL time sheets and ALL discharges and the most recent pay stub must be included with the application filed with the AMO Vacation Plan.

Direct Deposit is Available for Your Vacation Check

You can complete a **Method of Payment Authorization** form that provides authorization to deposit your vacation benefit checks directly into your bank account. This form will be kept on file and all future vacation payments will be processed via direct deposit. Benefit payments will only be processed if the applicant is named on the bank account. If any banking information changes, please complete a new **Method of Payment Authorization** form so we may update our records and process benefit payments accurately. Once you authorize direct deposit, this will be your primary method of payment until withdrawn. A **Method of Payment Authorization** form can be located on the website listed in Step 1 above.



PLANS NOTIFICATIONS

HIPAA NOTICE OF PRIVACY PRACTICES

In April 2005, legislation was implemented affecting the privacy sections in the Health Insurance Portability and Accountability Act (HIPAA). This legislation concerns your rights as a consumer and the health care privacy practices that protect your rights. It affects not only how your personal medical information is handled, but also how you and your confidential information are treated when working with your healthcare professionals and your health insurance carrier.

If you were a member of the AMO Plans in December 2008, you were mailed a copy of the Notice of Privacy Practices (NPP) that discusses the rights you have under the HIPAA legislation. If you became a member after December 2008, then a Notice was mailed to you as part of the enrollment confirmation process.

The federal HIPAA requirements include that we remind you periodically about the Notice of Privacy Practices (NPP). A copy is available for you to review anytime by visiting the AMO Plans website at www.amoplans.com.

WOMEN'S HEALTH AND CANCER RIGHTS

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 ("WHCRA"). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for: (a) All stages of reconstruction of the breast on which the mastectomy was performed, (b) Surgery and reconstruction of the other breast to produce a symmetrical appearance, (c) Prostheses, and (d) Treatment of physical complications of the mastectomy, including lymphedemas.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under the American Maritime Officers (AMO) Medical Plan.

If you would like more information on WHCRA benefits, you can reach the AMO Medical Benefits Services Department at 1-800-348-6515, ext. 12 or 2 W Dixie Highway, Dania Beach, FL 33004.

NEWBORNS' AND MOTHERS' HEALTH PROTECTION ACT

The AMO Medical Plan complies with Federal law (the Newborns' and Mothers' Health Protection Act of 1996) that prohibits restricting benefits for a mother's or newborn child's hospital length of stay because of childbirth to less than 48 hours following a normal delivery, or less than 96 hours following cesarean section. The AMO Medical Plan does not require a physician to obtain authorization (pre-certification) for prescribing a length of stay not in excess of those periods.

However, federal law generally does not prohibit the mother's or newborn's attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours if applicable).

Also, under federal law, plans and issuers may not set the level of benefits or out-of-pocket costs so that any later portion of the 48-hour (or 96-hour) stay is treated in a manner less favorable to the mother or newborn than any earlier portion of the stay. In addition, a plan or issuer may not, under federal law, require that a physician or other health care provider obtain authorization for prescribing a length of stay of up to 48 hours (or 96 hours). However, to use certain providers or facilities, or to reduce your out-of-pocket costs, you may be required to obtain precertification. For information on precertification, please contact the AMO Medical Benefit Services Department at 1-800-348-6515, extension 12 or 2 W Dixie Highway, Dania Beach, FL 33004.

PENSION PLAN STATEMENTS

At anytime during the year, you may request a pension statement that shows your estimated accrued pension benefit. To request a statement, please call the Retirement Services Department at 1-800-348-6515, ext. 14 or send an email to amopen-sion@amoplans.com. Please note that the Pension Plan has been frozen since January 1, 2010.

FREQUENTLY ASKED QUESTIONS

MEDICAL FAQs

Q. How do I establish or re-establish medical eligibility?

To establish initial medical eligibility you must complete 90 days of covered employment (30 days must be aboard a vessel) within a 182 consecutive day period. To re-establish medical eligibility you must complete 30 days aboard a vessel within a 182 consecutive day period. Please contact the AMOP Benefits Services Department to confirm if you have established or re-established eligibility. The AMOP Benefits Services Department will verify your employment and let you know what documentation is required to have you and your dependents covered under the AMO Medical Plan.

Q. How do I add dependents to my AMO Medical Plan?

Please contact the AMOP Benefits Services Department. An AMOP Representative will let you know what documentation is required. Newborn children are not automatically covered under the medical plan. You must notify the AMOP Benefits Services Department to have your newborn child added to the AMO Medical Plan.

Q. Who do I call for precertification?

Your physician's office should call American Health Holdings (AHH) at 1-866-343-6416 located on the back of your BC/BS ID card. Please note that members are responsible for complying with the pre-certification requirements. If you are not certain that your physician has obtained a precertification, you can call AHH directly or the AMOP Benefits Services Department.

Q. Where do I submit my dental and optical claims?

These claims should be sent directly to the AMO Plans office along with proof of payment for direct reimbursement. You can submit your claim via email, fax, or regular mail. See inside this newsletter for contact information.

BENEFICIARY AND POWER OF ATTORNEY FAQs

Q. How do I update my beneficiary forms?

You can download the forms from the AMO Plans website or contact the AMOP Benefits Services Department. The following Plans have beneficiary forms: *AMO Medical Plan*, *AMO 401(k) Plan*, *AMO DC Plan*, and *Money Purchase Benefit (MPB)*.

Q. What is a Power of Attorney (POA)?

A Power of Attorney is an authorization to act on someone else's behalf in a legal or business matter. Please seek advice from a legal professional regarding the uses of a Power of Attorney.

Q. Can my spouse sign a Plans benefit form on my behalf?

You may submit a Power of Attorney (POA) to the Plans office authorizing your spouse or anyone else you want to sign documents on your behalf. All Power of Attorney documents must be reviewed and accepted by the AMO Plans before your representative can act on your behalf.

RETIREMENT SERVICES FAQs

Q. Can I fax or email my 401(k), MPB, or DC Distribution forms?

Yes, unless notarization is required, then the original form must be mailed in.

Q. What is the maximum percentage that I can contribute to my 401(k) account?

You can save up to 75% of your pay on a pre-tax or tax deferred basis from your employer payroll and/or AMO Vacation Plan pay.

Q. How can I make investment changes to my 401(k), MPB, or DC plan accounts?

You can log on to the Newport Group website at www.newportgroup.com.

Q. Where can I apply for a 401(k) loan? Who can I call for assistance?

You can log on to the Newport Group website at www.newportgroup.com. See inside this newsletter for instructions and contact information.

Q. How can I check my 401(k), MPB, or DC account balances?

By logging into the Newport Group website: www.newportgroup.com. If you have trouble accessing your account, please call the Newport Group at 1-800-650-1065.

Q. Will I receive a 401(k), MPB, or DC account statement?

You will receive a quarterly statement from the Newport Group.

Q. I've been sailing for quite some time now. How do I know if I'm vested and what is my monthly pension benefit?

You will need to call the AMO Plans Retirement Services Department at 1-800-348-6515, extension 14 and speak to a Representative about your retirement.

VACATION FAQs

Q. What is the processing time for Vacation Pay?

It is five business days after receipt of the completed application via mail, email, or fax.

Q. How can I get a drug card without applying for Vacation Benefits?

Please email a request for a drug card to amovacation@amoplans.com and include your most recent discharge. If you meet the eligibility requirements, we will email one back to you accordingly.



AMOP CONTACT INFORMATION

AMOP BENEFITS SERVICES DEPARTMENT CONTACT INFORMATION

Business Hours: **Monday through Friday from 8 a.m. to 4 p.m. EST**

Mailing Address: **P.O. Box 35, Dania Beach, FL 33004**

Contact Number: **1-800-348-6515**

Plan Name	Direct No.	Fax Number	Email Address
Medical	Extension 12	954-920-9482	amomedical@amoplans.com
Pension	Extension 14	954-922-7539	amopension@amoplans.com
401(k)	Extension 14	954-922-7539	amo401k@amoplans.com
MPB	Extension 14	954-922-7539	amopension@amoplans.com
DC	Extension 14	954-922-7539	amopension@amoplans.com
Vacation	Extension 15	954-926-7274	amovacation@amoplans.com

HEALTH AND WELLNESS PROGRAM

**For more information regarding the Health and Wellness Program,
please call 1-800-348-6515, ext. 7305, Monday through Friday from 8 a.m. to 4 p.m. EST**

STAY INFORMED BY USING OUR PLANS WEBSITES

Plan Updates: <http://www.amoplans.com>

Access the BC/BS Provider Directory: <http://provider.bcbs.com>

You have the ability to search for a provider in the BC/BS network.

Access Your NEWPORT GROUP Account: <http://www.newportgroup.com>

This site contains account information regarding your 401(k), MPB, and DC benefits.

To create an account or for account information, please call the Newport Group at (800) 650-1065.



American Maritime Officers Plans
P.O. Box 35
Dania Beach, FL 33004



YOUR BEST SOURCE FOR INFORMATION

This newsletter was prepared by your AMOP Benefits Services Department.

We are your **best** source for information. If you have any questions that have not been answered or have suggestions for information you would like to see in future newsletters, please contact us. The contact information is located on the previous page.