



North Carolina
Total Retirement Plans



Dale R. Folwell, CPA
STATE TREASURER OF NORTH CAROLINA
DALE R. FOLWELL, CPA

2022

SUPPLEMENTAL BENEFITS ENROLLMENT

Enroll within 60 days of receiving your first retirement benefit.



DENTAL
INSURANCE



IDENTITY THEFT
PROTECTION



VISION
INSURANCE

Administered by:



PIERCE INSURANCE

Supplemental Benefits Specialists Since 1955



North Carolina Total Retirement Plans



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Dear North Carolina retirement benefit recipient,

Welcome to your retirement! We are pleased to offer the following benefits to you as a North Carolina Retirement Systems retiree:

- UnitedHealthcare: Dental
- UnitedHealthcare: Vision
- LifeLock: Identity Theft Protection



The Department of State Treasurer (DST) consistently works toward cost-effective options for our retirees. The great news is that in June 2020, we negotiated a one-time reduction in dental premiums resulting in a **savings of nearly \$2.3 million for retirees**. For plan year 2021, we negotiated a reduction in dental and vision premiums **saving our members \$1.7 million**.

It is now my pleasure to announce that for plan year 2022, dental and vision premiums will remain **the same**, premiums for identity theft protection will be **lower**, and additional plan features will be added to the identity theft protection plan.

I encourage you to review the enclosed materials from Pierce Insurance Agency, Inc., and carefully consider these options. If you choose to participate, these payments can be deducted directly from your monthly retirement benefit, direct billed, or paid by bank draft.

To participate in dental, vision, and/or identity theft protection, you must complete your enrollment process within 60 days upon receiving your first retirement benefit payment.

For additional details or specific questions, please contact Pierce Insurance Agency, Inc., at 855-627-3847 or online at www.ncretiree.com.

Thank you for serving the citizens of North Carolina.

Sincerely,

Dale R. Folwell, CPA

Treasurer Dale R. Folwell, CPA



North Carolina Retiree Benefits Overview

Table of Contents

Dental	4-6
Vision	7-9
Identity Theft Protection	10-13
Tips to Enroll.....	14
Enrollment Form	15-16
Who to Contact.....	17

Resources

NC Retiree Supplemental Benefits:
www.ncretiree.com

Pierce Insurance Agency:
www.pierceins.com

NC Retirement Systems:
www.myNCRetirement.com

ORBIT- Retirement Account Access:
ORBIT.myNCRetirement.com

State Health Plan:
www.shpnc.org

Supplemental Retirement Plans:
www.NCPlans.prudential.com

There is no association fee required to enroll in these supplemental benefits.

Pierce Insurance is the trusted partner for the North Carolina Retirement Systems.

Benefits offered are:

Dental | Vision | Identity Theft Protection

- Enroll within 60 days of receiving your first retirement benefit. We have a special hotline exclusively for NC retirees to enroll or ask questions. Just call toll free 855-627-3847. You can also visit www.ncretiree.com for up-to-date information.
- If you have supplemental benefits (dental, vision, and identity theft protection) and do not wish to make any changes, no action is needed.

Detailed FAQ can be found at:

www.ncretiree.com/frequently-asked-questions/

How are the monthly premiums collected?

- Pension deduction (deductions shown in ORBIT under View Payments)
- Direct bill (paid monthly, quarterly, semi-annually by check or bank draft)
- Firefighters and Rescue Squad Workers, National Guard or Register of Deeds Pension Funds' benefit recipients qualify for direct bill only

Do you have dual coverage?

Remember to perform a dual coverage double check to make sure you are choosing coordinating options and receiving the benefits you need with the right level of financial commitment for your specific life situation.

Dual coverage for Dental, Vision and Identity Theft may create duplicate benefits causing claims to not be paid as expected. If you have questions about deductions for these benefits, please call Pierce Insurance at 855-627-3847.



About This Guide

This guide describes benefits offered through the North Carolina Retirement Systems. In the event of any discrepancy between what is written here and what is written in the plan document and insurance certificates, the plan document and insurance certificates will govern. Changes in the tax laws or other requirements might cause changes in the plan.





Enroll within 60 days of receiving your first retirement benefit.

Call: 855.627.3847

Dental Coverage



Dental Plan Features

- Preventive and Diagnostic Services covered at 100% of UCR*
- Basic and restorative covered at 50% of UCR*
- Major services covered at 50% of UCR*
- \$1,000 calendar year maximum and no waiting period
- Visit any dentist or dental specialist of your choice. Save money by seeing a network dentist.

*Please note - Percentage is of Usual, Customary and Reasonable charges, based upon zip codes by geographic regions.

Consumer MaxMultiplier

This feature encourages you to seek preventive and diagnostic care through an awards-based program.

- There is a calendar year maximum award balance that can be carried forward each year so that accumulated funds are available when you need them. Each family member is eligible to earn his or her own awards.
- This special feature increases benefits at the same low premium.
- Paid claims must be less than \$500 to earn award amount.
- You must use your dental benefit at least once between January 1, 2022, and December 31, 2022, to be eligible for this benefit.
- This award amount is available each year until you have reached a total combined regular calendar year maximum of \$1,000.00, plus \$1,250.00 award, for a maximum total of \$2,250.00.

* REASONABLE AND CUSTOMARY PLAN: A dental benefit plan that determines benefits based only on "Reasonable and Customary" fee criteria. USUAL FEE: The fee that an individual dentist most frequently charges for a given dental service. CUSTOMARY FEE: The fee level determined by the administrator of a dental benefit plan from actual submitted fees for a specific dental procedure to establish the maximum benefit payable under a given plan for that specific procedure. REASONABLE FEE: The fee charged by a dentist for a specific dental procedure that has been modified by the nature and severity of the condition being treated and by any medical or dental complications or unusual circumstances, and therefore may differ from the dentist's "usual" fee or the benefit administrator's "customary" fee.

Summary of Dental Plan Benefits

- No deductible for diagnostic and preventive services
- A \$25.00 deductible, per member per plan year, applies to basic restorative and major services
- Please see the certificate of coverage on the website at www.ncretiree.com/dental for complete benefit information, including exclusions and limitations

Access Your Benefits & Claim Filings

Register at: www.myuhc.com

- View and print explanation of benefits and ID cards
- Look up and nominate providers from the PPO National Network
- Obtain claim information
- Print claim forms
- View certificate of coverage
- View eligibility



HEALTH TIP

Simple ways to care for your teeth and health:

- Don't Smoke
- See your dentist regularly
- Eat a well-balanced diet and drink plenty of water
- Daily routine: Brush teeth at least twice daily and floss daily to prevent bacteria build up



Who is eligible?

- Retirees, spouses, and unmarried children (eligible until the day they turn 26).
- Handicapped children with disabilities are eligible for dental and vision insurance, regardless of age.
- As a surviving spouse, you must enroll in the plan through the normal enrollment process. You must complete a new enrollment form and submit to Pierce Insurance Agency or call 855-627-3847. (For detailed explanation on eligibility go to: <https://ncretiree.com/frequently-asked-questions/>).
- Member must notify Pierce Insurance Agency when dependents no longer meet eligibility requirements.



Dental Coverage



DIAGNOSTIC & PREVENTIVE SERVICES Covered at 100% of UCR*	BASIC RESTORATIVE Covered at 50% of UCR*	MAJOR SERVICES Covered at 50% of UCR*
<p><i>This includes:</i></p> <p>DIAGNOSTIC</p> <ul style="list-style-type: none"> Initial Oral Exam Periodic Oral Exam Emergency Exams for Pain Relief Full Mouth X-Rays (1 procedure every 60 months) Bitewing X-Rays (once every 12 months) Single Tooth X-Rays <p>PREVENTIVE</p> <ul style="list-style-type: none"> Prophylaxis (2 per calendar year) Fluoride Treatments for children under age 19 (eligible until the day they turn 19) Sealants for children under age 16 (eligible until the day they turn 16) 	<p><i>This includes:</i></p> <p>RESTORATIVE</p> <ul style="list-style-type: none"> Amalgam Fillings (Silver Fillings) Composite Fillings (White Fillings) - Anterior (front) Teeth Only Temporary Fillings Space Maintainers for children under age 14 (eligible until the day they turn 14) <p>ORAL SURGERY</p> <ul style="list-style-type: none"> Simple Extraction Surgical Extraction General Anesthesia <p>PERIODONTICS</p> <ul style="list-style-type: none"> Periodontal Surgery Scaling and Root Planing <p>ENDODONTICS</p> <ul style="list-style-type: none"> Root Canal Treatment Pulpotomy <p>PROSTHETIC MAINTENANCE</p> <ul style="list-style-type: none"> Bridge or Denture Repair Rebase or Reline of Dentures Re-cement of Crowns and Onlays 	<p><i>This includes:</i></p> <p>GOLD/CAST RESTORATIONS</p> <ul style="list-style-type: none"> Gold or Cast Restorations Crowns (when teeth cannot be restored with amalgam, composite, or plastic restorations) <p>PROSTHODONTICS</p> <ul style="list-style-type: none"> Dentures Bridges Partials <p><small>*Please note - Percentage is of Usual, Customary, and Reasonable charges, based upon zip codes by geographic regions.</small></p>

Monthly Premiums

Plan Coverage	Retiree	Retiree + 1	Retiree + Family
Monthly Premiums	\$37.00	\$87.60	\$122.82

New enrollees will receive identification card(s) prior to the effective date of their coverage.



Enroll within 60 days of receiving your first retirement benefit.

Call: 855.627.3847

Dental Coverage



3 Easy Ways to Enroll

1

Enroll online: www.ncretiree.com/enroll

2

Complete the attached enrollment form on page 15 and return it to Pierce Insurance via postage-paid envelope inserted on page 10.

3

Enroll by phone: 855-627-3847

Frequently Asked Questions

If my spouse is still working and has a dental plan, can that spouse still be enrolled under the Retirees' dental plan?

Yes, your spouse can be enrolled through the Retirees' dental plan and have dual coverage. Coordination of benefits will apply.

Where are my claims processed?

Dentists will usually submit claims on behalf of our members. Should you need to submit claims, please send the claim form and bills to: UnitedHealthcare Dental, Attn: Claims Unit, P.O. Box 30567, Salt Lake City, UT 84130-0567.

If I have questions about my claims, eligible benefits and plan coverage, who do I call?

Questions regarding your UnitedHealthcare Dental Policy and Claims can be answered by calling Customer Care at 877-905-0659.

Must I choose between Diagnostic and Preventive, Basic or Major Restorative Services?

No, all three types of coverage are included in your dental plan.

What is the \$25 deductible?

The deductible is per person, per calendar year for Basic or Major Services. This deductible does not apply to Preventive and Diagnostic Services (such as exams and cleanings).

How do I know if my provider participates with UnitedHealthcare Dental?

To verify if your provider participates with UnitedHealthcare Dental, ask your provider or contact UnitedHealthcare Dental at 877-905-0659 before services are performed. You may also nominate your provider by calling UnitedHealthcare Dental, 877-905-0659 or myuhc.com and completing a Provider Nomination Form.

If I am enrolled in another plan and I want to enroll in this plan, will the other plan be automatically canceled or replaced?

No. New enrollees are responsible for **canceled** other coverage even if the other coverage is pension-deducted from your retirement benefit. The new plan coverage will not automatically cancel or replace any other coverage you may have that is provided by other organizations or associations.

What is a pre-determination?

When you are anticipating expensive dental charges over \$500, have your provider submit a pre-determination estimate to UnitedHealthcare. The response to this will tell you what the plan will pay for certain procedures and what charges you may have out of pocket.

How do I terminate coverage after a life changing event?

If there is a life event where coverage needs to be terminated, please notify Pierce Insurance at 855-627-3847 no later than 180 days after the event. Please note: Failure to report life changing events within the allotted time frame will result in overpayment of premium and premium refund cannot be issued beyond 180 days per UnitedHealthcare policy.

The dental product is underwritten by UnitedHealthcare Insurance Company. Our dental product is administered by Dental Benefit Providers, Inc. *Pierce Insurance Agency, Inc. is a licensed insurance agent in North Carolina that has been authorized to arrange this coverage, but it is not part of the North Carolina State Government or its Retirement Systems.



Vision with Hearing Aid Discount



Who is Eligible?

- Retirees, spouses and unmarried children (eligible until the day they turn 26).
- Handicapped children with disabilities are eligible for dental and vision insurance, regardless of age.
- As a surviving spouse, you must enroll in the plan through the normal enrollment process. You must complete a new enrollment form and submit to Pierce Insurance Agency or call 855-627-3847. (For detailed explanation on eligibility go to: <https://ncretiree.com/frequently-asked-questions/>).
- Member must notify Pierce Insurance Agency when dependents no longer meet eligibility requirements.

Save on Hearing Aids

- Convenient ordering
- Custom-programmed hearing aids
- Name-brand and private-label hearing aids at significant savings
- More than 5,000 credentialed hearing provider locations



Call: 866-926-6632

Promo code UHC MYVISION for discounted pricing.

Visit: www.uhc hearing.com

* Included in the vision plan, hearing aid discount program.

Vision Plan Features

- Visit www.myuhcvision.com to find the vision network providers near you.
- Save the most money by using a network provider. You can choose where to have an exam and where to purchase glasses or contacts.
- No waiting period.
- \$130 frame allowance for frames available at a retail or private practice provider.
- Hearing Aid Discount Program: Learn more www.uhc hearing.com or call 866-926-6632, TTY 711, 8 a.m. to 8 p.m. CT, Monday through Friday. Use promo code UHC MYVISION for discounted pricing.

Frequency of Services

Exam:	Once every 12 months
Lenses:	Once every 12 months
Frame:	Once every 24 months
Contact Lenses:	Once every 12 months

(contacts in lieu of lenses and frame)

Access Your Benefits & Claim Filings

Register at: www.myuhcvision.com

- Look up providers
- View eligibility
- View benefit summary
- Obtain claim information and provider nomination forms
- Print vision cards

Health4Me Mobile App

Get UnitedHealthcare benefit and provider info on the go with **UnitedHealthcare Health4Me®** — a mobile application designed to help you save time managing your health care.



Enroll within 60 days of receiving your first retirement benefit.

Call: 855.627.3847

Summary of Vision Plan Benefits

Information	Plan 1 Exam & Materials Plan		Plan 2 Materials Only Plan	
	In Network ¹	Out of Network ²	In Network ¹	Out of Network ²
Copayments	\$10.00 Exam Copay \$10.00 Materials Copay	Not Applicable	\$10.00 Materials Copay	Not Applicable
Comprehensive Exam by an Ophthalmologist (MD) or Optometrist (OD)	Covered in Full (after copay)	Up to \$64.00	Not Applicable	Not Applicable
Standard Lenses (per pair)				
• Single Vision	Covered in Full (after copay)	Up to \$40.00	Covered in Full (after copay)	Up to \$40.00
• Lined Bifocal	Covered in Full (after copay)	Up to \$60.00	Covered in Full (after copay)	Up to \$60.00
• Lined Trifocal	Covered in Full (after copay)	Up to \$80.00	Covered in Full (after copay)	Up to \$80.00
• Lenticular	Covered in Full (after copay)	Up to \$80.00	Covered in Full (after copay)	Up to \$80.00
Frames - Standard	Up to \$130.00 (after copay) ³	Up to \$50.00	Up to \$130.00 (after copay) ³	Up to \$50.00
Contact Lenses (in lieu of lenses and frame)	Up to \$125.00 (after copay) ⁴	Up to \$125.00	Up to \$125.00 (after copay) ⁴	Up to \$125.00
• Cosmetic – Elective	Covered in Full (after copay) ⁵	Up to \$210.00	Covered in Full (after copay) ⁵	Up to \$210.00
• Necessary				
Patient Lens Options	Covered in Full (after copay)	No Coverage	Covered in Full (after copay)	No Coverage
	<ul style="list-style-type: none"> • Standard Scratch Coating • Tints • UV Protective Lenses • Standard Progressives • Deluxe Progressive Lenses • Polycarbonate Lenses 		<ul style="list-style-type: none"> • Standard Scratch Coating • Tints • UV Protective Lenses • Standard Progressives • Deluxe Progressive Lenses • Polycarbonate Lenses 	
Laser Vision Correction	Discounts available through network providers. For additional information contact 1-800-980-2965 or visit www.myuhcvision.com	No Coverage	Discounts available through network providers. For additional information contact 1-800-980-2965 or visit www.myuhcvision.com	No Coverage

Exam and Materials Plan / Materials Only Plan

1. Network Benefits: Materials copays and patient options are paid to the network provider by the plan participant.

2. Out-of-Network Benefits: The plan participant pays full fee to the provider and UnitedHealthcare Vision reimburses the retiree for services rendered up to maximum allowance. There are no copays or deductibles.

3. Frame Benefit: UnitedHealthcare Vision's frame benefit applies to virtually all of the frames on the market today, and most of those are covered in full, with no additional cost to the retiree, other than applicable co-pay. With UnitedHealthcare Vision's frame benefit, plan participants receive a \$130.00 retail or private practice frame allowance for frames purchased at retail chain or private practice providers, and for any frame above \$130.00, the retiree will only pay the difference.

4. Contact Lens Benefit: Contact lenses are provided in lieu of eyeglasses (lenses and frame). UnitedHealthcare Vision's contact lens benefit covers in-full (after applicable copayment) the fitting/evaluation fees, contacts (including up to four boxes of disposables, depending on prescription), and up to two follow-up visits. An allowance is applied toward the fitting/evaluation fees and purchase of contact lenses outside of UnitedHealthcare Vision's covered-in-full contacts (materials copay does not apply). Toric, gas permeable and bifocal contact lenses are all examples of contacts that are outside of our covered-in-full selection.

5. Necessary contact lenses are determined at the eye care provider's discretion for one or more of the following conditions: Following cataract surgery without intraocular lens implant; To correct extreme vision problems that cannot be corrected with spectacle lenses; With certain conditions of anisometropia; With certain conditions of keratoconus. If an out-of-network provider considers contacts necessary, retirees should ask their out-of-network provider to contact UnitedHealthcare Vision concerning the reimbursement that UnitedHealthcare Vision will make before they purchase such contacts.



Vision with Hearing Aid Discount



Monthly Premiums

Plan Coverage/ Monthly Premiums	Retiree	Retiree + 1	Retiree + Family
Plan 1 Exam & Materials Plan	\$7.17	\$14.51	\$16.30
Plan 2 Materials Only	\$5.00	\$10.15	\$11.34

New enrollees will receive identification card(s) prior to the effective date of their coverage.

3 Easy Ways to Enroll

1

Enroll online: www.ncretiree.com/enroll

2

Complete the attached enrollment form on page 15 and return it to Pierce Insurance via postage-paid envelope inserted on page 10.

3

Enroll by phone: 855-627-3847

Frequently Asked Questions

How do I identify myself as a UnitedHealthcare Vision member utilizing a network provider?

When contacting a network provider to make your appointment, simply give the provider the subscriber's unique identification number, the patient's name and date of birth and identify yourself as a member of the UnitedHealthcare Vision Plan. The network provider will verify your eligibility and coverage with UnitedHealthcare Vision prior to your scheduled appointment.

What if my provider is not in-network?

If your provider is not in-network, please call UnitedHealthcare Vision customer service at 800-980-2965. Your Customer Service Representative will assist you with finding a UnitedHealthcare Vision in-network provider.

How do I know if my provider participates in UnitedHealthcare Vision?

To verify if your provider participates with UnitedHealthcare Vision, ask your provider or contact UnitedHealthcare Vision at 800-980-2965 before services are performed. You may also nominate your provider by calling UnitedHealthcare Vision at 800-980-2965, or by visiting the UnitedHealthcare Vision website at www.myuhcvision.com and completing a Provider Nomination Form.

How do I file my out-of-network claims?

For all out-of-network vision claims you will need to send your itemized paid receipts, with the primary insured's unique identification number, and the patient's name and date of birth to the address below. You do not need a claim form to submit receipts for reimbursement.

UnitedHealthcare Vision, P.O. Box 30978, Salt Lake City, UT 84130 or Fax to: 248-733-6060.

How do I terminate coverage after a life changing event?

If there is a life event where coverage needs to be terminated, please notify Pierce Insurance at 855-627-3847 no later than 180 days after the event. Please note: Failure to report life changing events within the allotted time frame will result in overpayment of premium and premium refund cannot be issued beyond 180 days per UnitedHealthcare policy.

www.ncretiree.com/vision



North Carolina
Total Retirement Plans

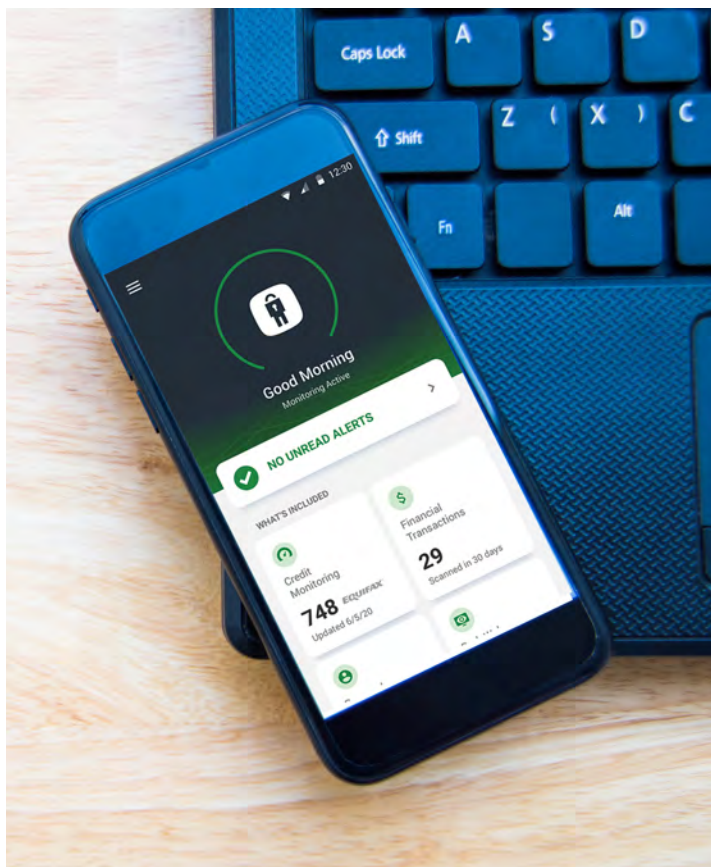


FACT SHEET

LifeLock Benefit Elite Premium

LifeLock Benefit Elite Premium helps provide peace of mind with comprehensive identity theft protection. It helps protect 401(k) and other investment accounts from fraudulent withdrawals and balance transfers. Enhanced services include bank account application and takeover alerts¹, One-Bureau Annual Credit Report & Credit Score¹, Monthly One-Bureau Credit Score Tracking¹, and Three-Bureau Credit Monitoring¹. If a potential threat is detected, members are notified via email, text, phone^{2†} or mobile app alerts.³ Should you become a victim of identity theft while a LifeLock member, LifeLock provides a dedicated, U.S.-based Identity Restoration Specialist and helps protect you with our Million Dollar Protection™ Package^{1††} including coverage for experts and lawyers, if needed.

The credit scores provided are VantageScore 3.0 credit scores based on data from Equifax, Experian and TransUnion respectively. Any One-Bureau VantageScore mentioned is based on Equifax data only. Third parties use many different types of credit scores and are likely to use a different type of credit score to assess your creditworthiness.



FEATURES

Home Title Monitoring



Your home is likely your biggest asset, but how often do you monitor the title to your home? Someone could take out a loan and lien against your home ^Δ without your knowledge. We will monitor and notify you if we detect changes made at the county recorder's office ^Δ related to your home's title so you can take necessary action to protect your home.

Credit, Bank & Utility Account Freezes**



Criminals can steal your identity to open credit cards, bank accounts or utilities in your name. We provide easy instructions and quick access so you can freeze credit, bank and utility files with each consumer reporting company to help protect against criminals using your information to open new accounts or take out loans in your name.

Identity Verification Monitoring***



Your identity may be verified when opening a new credit card or similar activities by asking you security questions. We monitor our network and alert[†] you if we detect a company is trying to verify your identity so you can take action to help protect your identity.

Phone Takeover Monitoring[†] NEW



Identity thieves can take over your phone number and then use your phone number to send one-time passcodes to gain control of your financial, email, social, and other account passwords to commit fraud. Phone Takeover Monitoring helps protect against phone number takeovers. We monitor your mobile phone number and notify you of potential takeovers such as phone port-out or carrier changes, SIM card changes, and number disconnections.

Fictitious Identity Monitoring[†] NEW



Could someone use your Social Security number with someone else's name and address to commit identity theft? Yes, it's called synthetic identity theft. Criminals can use fake personal information connected to your identity to open accounts or commit fraud. We help protect your identity by scanning for names and addresses connected with your Social Security number.

ENROLL ONLINE AT www.ncretiree.com
OR CALL 855-627-3847

No one can prevent all identity theft or cybercrime.
SEE OTHER SIDE OF THIS FLYER FOR ALL REFERENCED DISCLAIMERS.

FEATURES (CONT.)



LifeLock Identity Alert™ System†

It's the foundation for all LifeLock services. We monitor for fraudulent use of your Social Security number, name, address, or date of birth in applications for credit and services. The patented system sends alerts by text, phone††, email, or mobile app.



LifeLock Privacy Monitor™

Privacy Monitor helps reduce public exposure of your personal information. We scan common public people-search websites to find your personal information and help you opt-out.



USPS Address Change Verification

Identity thieves try to divert mail to get important financial information. LifeLock lets you know of change in address requests at the U.S. Postal Service linked to your identity.



Reduced Pre-Approved Credit Card Offers

Pre-approved credit card offers can provide important information to identity thieves. LifeLock will request your name be removed from many pre-approved credit card mailing lists.



Stolen Wallet Protection

A stolen wallet could lead to a stolen identity. Call us if your wallet is stolen and we'll help cancel or replace credit cards, driver's licenses, Social Security cards, insurance cards and more.



24/7 Live Member Support

We have live Identity Protection Agents available to answer your questions.



U.S.-based Identity Restoration Specialists

If your identity is compromised, an Identity Restoration Specialist will personally handle your case and help restore your identity.



Data Breach Notifications

Your identity is virtually everywhere. Doctors, insurance companies, employers, even your favorite retailers. We'll let you know about large-scale breaches so you can help protect your personal information.



Bank & Credit Card Activity Alerts†**

Help protect your finances against fraud with alerts that notify you of cash withdrawals, balance transfers and large purchases.



401K & Investment Account Activity Alerts†**

Investment and retirement accounts are often the lifeline for financial growth. We'll help protect your nest egg from fraudulent cash withdrawals and balance transfers.



Million Dollar Protection™ Package†††

If you become a victim of identity theft, we help protect you with our Million Dollar Protection™ Package. This includes reimbursement for stolen funds and coverage for personal expenses, each with limits up to \$1 million, and coverage for lawyers and experts if needed up to \$1 million, to help resolve your case.



Checking and Savings Account Application Alerts†**

Continuously searches for your personal information in new bank account applications at national banks, local banks and credit unions from coast to coast.



Prior Identity Theft Remediation*

If you are a victim of a Prior Stolen Identity Event that involves the unauthorized use of your stolen Personally Identifiable Information for opening of new accounts† with banks, merchants and lenders, a LifeLock restoration specialist will review the case and determine what steps, if any, can be taken to remediate the issue.

This feature is separate from our Million Dollar Protection™ Package and does not provide coverage for lawyers and experts, reimbursement of stolen funds or compensation for personal expenses for events occurring during the 12 months prior to enrollment. See disclaimer for details.



Sex Offender Registry Reports

Receive notifications if your name and personal information appear in a sex offender registry.



File-Sharing Network Searches

Many children use file-sharing networks to download music, photos and more. LifeLock actively searches these networks for exposure of your child's personal information.



Three-Bureau Credit Monitoring†**

We monitor key changes to your credit file at the three leading credit bureaus and alert you to help detect fraud.



One-Bureau Annual Credit Report & Credit Score†**

Online access to your annual credit report and credit score from a major credit bureau, so you can see details of your credit history.

The credit score provided is a VantageScore 3.0 credit score based on Equifax data. Third parties use many different types of credit scores and are likely to use a different type of credit score to assess your creditworthiness.



One-Bureau Monthly Credit Score Tracking†**

This monthly one-bureau credit score tracker helps you identify important changes and see how your credit is trending over time.

The credit score provided is a VantageScore 3.0 credit score based on Equifax data. Third parties use many different types of credit scores and are likely to use a different type of credit score to assess your creditworthiness.



Norton Password Manager**

Passwords written on a sticky note or the same password used for every account may make your personal information vulnerable. Norton Password Manager provides the tools you need to create, store, and manage every password, your credit card information and other credentials online – safely and securely in your very own encrypted, cloud-based vault.



Dark Web Monitoring**

Identity thieves can sell your personal information on hard-to-find dark web sites and forums. LifeLock patrols the dark web and notifies you if we find your information.



LifeLock Skill for Amazon Alexa**

This feature provides access to your LifeLock account information through Alexa, allowing you to easily find your credit score, recent transactions or respond to alerts.

† If your plan includes credit reports, scores, and/or credit monitoring features ("Credit Features"), two requirements must be met to receive said features: (i) your identity must be successfully verified with Equifax; and (ii) Equifax must be able to locate your credit file and it must contain sufficient credit history information. IF EITHER OF THE FOREGOING REQUIREMENTS ARE NOT MET YOU WILL NOT RECEIVE CREDIT FEATURES FROM ANY BUREAU. If your plan also includes Credit Features from Experian and/or TransUnion, the above verification process must also be successfully completed with Experian and/or TransUnion, as applicable. If verification is successfully completed with Equifax, but not with Experian and/or TransUnion, as applicable, you will not receive Credit Features from such bureau(s) until the verification process is successfully completed and until then you will only receive Credit Features from Equifax. Any credit monitoring from Experian and TransUnion will take several days to begin after your successful plan enrollment. Please note that in order to enjoy all features in your chosen plan, such as bank account alerts, credit monitoring, and credit reports, it may require additional action from you and may not be available until completion. No one can prevent all identity theft or cybercrime.

‡ Home Title Monitoring feature includes your home, second home, rental home, or other properties where you have an ownership interest.

§ In your state, the office that maintains real estate records could be known as a county recorder, registrar of deeds, clerk of the court, or some other government agency.

* The LifeLock alert network includes a variety of product features and data sources. Although it is very extensive, our network does not cover all transactions at all businesses, so you might not receive a LifeLock alert in every single case.

† Subject to eligibility requirements defined in Terms & Conditions at <https://www.lifelock.com/legal/prior-id-theft-remediation>. Symantec reserves the right to change and/or cease services at any time.

†† These features are not enabled upon enrollment. Member must take action to get their protection.

††† Phone alerts made during normal local business hours.

†††† Reimbursement and Expense Compensation, each with limits of up to \$1 million for LifeLock Benefit Elite Premium; and up to \$1 million for coverage for lawyers and experts if needed, for all plans. Benefits under the Master Policy are issued and covered by United Specialty Insurance Company (State National Insurance Company, Inc. for NY State members). Policy terms, conditions and exclusions at [lifelock.com/legal](https://www.lifelock.com/legal).

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Your Retiree Benefit can help protect your identity.

Everyday activities put our personal information at risk.

In today's world, we are more connected than ever before. In the age of online everything, and giving out Social Security numbers as a form of ID, our personal information can be exposed. Unfortunately, free credit monitoring simply alerts you to credit issues. LifeLock not only detects a range of identity threats[†], but if you do have an identity theft problem, our U.S.-based team of Identity Restoration Specialists can help fix it.



North Carolina
Total Retirement Plans





ENROLL ONLINE AT www.ncretiree.com
OR CALL 855-627-3847

No one can prevent all identity theft or all cybercrime.
[†] We do not monitor all transactions at all businesses.

LifeLock Benefit Elite Premium Features + **NEW** Lower Monthly Rates



 Retiree Only (18+ Years Old)	\$8.00
 Retiree + Family ^a	\$14.00

LIFELOCK IDENTITY THEFT PROTECTION	Home Title Monitoring	●
	LifeLock Skill for Amazon Alexa**	●
	Credit, Bank & Utility Account Freezes**	●
	NEW Phone Takeover Monitoring [†]	●
	LifeLock Identity Alert™ System [†]	●
	• Payday - Online Lending Alerts [†]	●
	• Credit & Social Security Alerts [†]	●
	NEW Fictitious Identity Monitoring [†]	●
	Identity Verification Monitoring [†]	●
	LifeLock Mobile App (Android™ & iOS)** <small>Downloading the app does not provide protection until enrollment has been completed.</small>	●
	Dark Web Monitoring	●
	LifeLock Privacy Monitor™**	●
	USPS Address Change Verification	●
	Stolen Wallet Protection	●
	Reduced Pre-Approved Credit Card Offers	●
	Data Breach Notifications	●
	Bank & Credit Card Activity Alerts***	●
	Checking & Savings Account Application Alerts***	●
	Bank Account Takeover Alerts***	●
	401K & Investment Account Activity Alerts***	●
	File-Sharing Network Searches	●
	Sex Offender Registry Reports	●
	Prior Identity Theft Remediation[§] <small>This feature is separate from our Million Dollar Protection™ Package and does not provide coverage for lawyers and experts, reimbursement of stolen funds or compensation for personal expenses for events occurring during the 12 months prior to enrollment. See disclaimer for details.</small>	●
	U.S.-based Identity Restoration Specialists	●
	24x7 Live Member Support	●
	Million Dollar Protection™ Package*** • Stolen Funds Reimbursement • Personal Expense Compensation • Coverage for Lawyers and Experts	Up to \$1 Million each
	Credit Application Alerts***	One-Bureau ²
	Credit Monitoring ^{1**}	Three-Bureaus ¹
	Annual Credit Report & Credit Score^{1**} <small>The credit scores provided are VantageScore 3.0 credit scores based on data from Equifax, Experian and TransUnion respectively. Any one bureau VantageScore mentioned is based on Equifax data only. Third parties use many different types of credit scores and are likely to use a different type of credit score to assess your creditworthiness.</small>	One-Bureau ¹
	Monthly Credit Score^{1**} Tracking <small>The credit score provided is a VantageScore 3.0 credit score based on Equifax data. Third parties use many different types of credit scores and are likely to use a different type of credit score to assess your creditworthiness.</small>	One-Bureau ¹
NORTON SECURITY	Password Manager**	●

¹ If your plan includes credit reports, scores, and/or credit monitoring features ("Credit Features"), two requirements must be met to receive said features: (i) your identity must be successfully verified with Equifax; and (ii) Equifax must be able to locate your credit file and it must contain sufficient credit history information. IF EITHER OF THE FOREGOING REQUIREMENTS ARE NOT MET YOU WILL NOT RECEIVE CREDIT FEATURES FROM ANY BUREAU. If your plan also includes Credit Features from Experian and/or TransUnion, the above verification process must also be successfully completed with Experian and/or TransUnion, as applicable. If verification is successfully completed with Equifax, but not with Experian and/or TransUnion, as applicable, you will not receive Credit Features from such bureau(s) until the verification process is successfully completed and until then you will only receive Credit Features from Equifax. Any credit monitoring from Experian and TransUnion will take several days to begin after your successful plan enrollment. Please note that in order to enjoy all features in your chosen plan, such as bank account alerts, credit monitoring, and credit reports, it may require additional action from you and may not be available until completion.

² If your plan includes One Bureau Credit Application Alerts, two requirements must be met to receive said features: (i) your identity must be successfully verified with TransUnion; and (ii) TransUnion must be able to locate your credit file and it must contain sufficient credit history information. IF EITHER OF THE FOREGOING REQUIREMENTS ARE NOT MET YOU WILL NOT RECEIVE ONE BUREAU CREDIT APPLICATION ALERTS. One Bureau Credit Application Alerts will take several days to begin after your successful LifeLock plan enrollment.

³ Norton Cloud Backup, Norton SafeCam and Norton Family Parental Control features are not supported on Mac.

[†] The LifeLock alert network includes a variety of product features and data sources. Although it is very extensive, our network does not cover all transactions at all businesses, so you might not receive a LifeLock alert in every single case.

^{***} Reimbursement and Expense Compensation, each with limits of up to \$1 million for LifeLock with Norton Benefit Elite Premium. And up to \$1 million for coverage for lawyers and experts if needed, for all plans. Benefits under the Master Policy are issued and covered by United Specialty Insurance Company (State National Insurance Company, Inc. for NY State members). Policy terms, conditions and exclusions at: LifeLock.com/legal.

^{**} These features are not enabled upon enrollment. Member must take action to activate this protection.

[§] Subject to eligibility requirements defined in Terms & Conditions at <https://www.lifelock.com/legal/prior-identity-theft-remediation>. NortonLifeLock reserves the right to change and/or cease services at any time.

No one can prevent all identity theft or cybercrime.

The LifeLock Brand is part of NortonLifeLock Inc.

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Enroll within 60 days of receiving your first retirement benefit.

Call: 855.627.3847

Identity Theft Protection



3

Easy Ways to Enroll

1

Enroll online: www.ncretiree.com/enroll

2

Complete the attached enrollment form on page 16 and return it to Pierce Insurance via postage-paid envelope inserted on page 10.

3

Enroll by phone: 855-627-3847

Tips to Enroll: Dental, Vision & Identity Theft Protection

- **If you are currently enrolled, you do not need to re-enroll. Your coverage will remain the same.**
- You may enroll online at www.ncretiree.com or by phone at 855-627-3847. A paper enrollment form is not required.
- If you would like to make changes to your benefits, you should call us at 855-627-3847.
- To check the status of your benefits, you can call us at 855-627-3847, chat with us at www.ncretiree.com or e-mail us at info@pierceins.com.
- To prevent delays in processing, all fields for your personal information on the enrollment form must be completed. Your full Social Security number, and your date of birth are required.
- When enrolling dependents, their information must also be completed.
 - Dependents with incomplete information cannot be enrolled.
 - For identity theft protection, Social Security numbers are required for all enrolled eligible dependents. Also, a unique email is required for each dependent 18 and over.

Checklist for Paper Enrollment

- **Complete your personal information.**
- **Select your benefits.** Check Yes for each benefit that you want to enroll in.
- **Select the plan and who is to be covered on each benefit.**
 - For Vision indicate Plan 1 or Plan 2.
 - For all benefits indicate who is to be covered.

RETIREE, RETIREE + ONE (1) or RETIREE + FAMILY

- **Complete dependent information.**
- **Select billing method.**
 - Most retirees are pension deducted. If no selection is made, you will be set up on pension deduction.
 - Please note that Firefighters and Rescue Squad Workers, National Guard or Register of Deeds Pension Funds' benefit recipients do not qualify for pension deduction and will be direct billed.
- **Sign and date your enrollment form.**

Enrollment Forms are Located on the Following Pages



PIERCE
INSURANCE
Since 1955
Pierce Insurance Agency, Inc.
Phone: 855-627-3847

Complete form and mail, fax
or email to:

ATTN: NCRS
P.O. Box 727
Farmville, NC 27828
Email: info@pierceins.com
Fax: 252-753-5941

AUTHORIZED USE ONLY

Policy Group Numbers: **708788**

☐ PVRC 0001-0001 ☐ PVRC 0002-0002
☐ PVRC 0003-0003 ☐ PVRC 0004-0004
☐ PVRC 0005-0005 ☐ PVRC 0006-0006

Dental Plan Code: **P3271**

Effective Date:

DENTAL AND VISION ENROLLMENT FORM

SOCIAL SECURITY NUMBER:		DATE OF RETIREMENT / / (Month/Day/Year)		<input type="checkbox"/> ENROLL <input type="checkbox"/> CANCEL <input type="checkbox"/> CHANGE <input type="checkbox"/> ADDRESS CHANGE <input type="checkbox"/> NAME CHANGE
LAST NAME:		FIRST NAME:	M.I.:	DATE OF BIRTH: / / (Month/Day/Year)
ADDRESS:		CITY:		
STATE:	ZIP:	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		TELEPHONE NUMBER: ()
EMAIL ADDRESS:				

DENTAL COVERAGE Underwritten by United Healthcare Insurance Company	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, CHECK COVERAGE:	<input type="checkbox"/> RETIREE	<input type="checkbox"/> RETIREE + ONE (1)	<input type="checkbox"/> RETIREE + FAMILY
PLAN 1: VISION EXAM & MATERIALS PLAN Underwritten by United Healthcare Insurance Company	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, CHECK COVERAGE:	<input type="checkbox"/> RETIREE	<input type="checkbox"/> RETIREE + ONE (1)	<input type="checkbox"/> RETIREE + FAMILY
PLAN 2: VISION MATERIALS ONLY PLAN Underwritten by United Healthcare Insurance Company	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, CHECK COVERAGE:	<input type="checkbox"/> RETIREE	<input type="checkbox"/> RETIREE + ONE (1)	<input type="checkbox"/> RETIREE + FAMILY

Dependent Coverage – spouse and unmarried dependent children only. (Include Date of Birth)

For court-ordered dependents, documentation must be attached.

First Name	M.I.	Last Name (if different)	M/F	Date of Birth (Month/Day/Year)	Relationship	If child is over age 26, please indicate status	Enroll in:	Change or Cancel	Other Dental Coverage
			<input type="checkbox"/> M <input type="checkbox"/> F	/ /	<input type="checkbox"/> Wife <input type="checkbox"/> Husband <input type="checkbox"/> Child	<input type="checkbox"/> Handicapped	<input type="checkbox"/> Dental <input type="checkbox"/> Vision	<input type="checkbox"/> Change <input type="checkbox"/> Cancel	Other Dental Insurance: CARRIER NAME
			<input type="checkbox"/> M <input type="checkbox"/> F	/ /	<input type="checkbox"/> Wife <input type="checkbox"/> Husband <input type="checkbox"/> Child	<input type="checkbox"/> Handicapped	<input type="checkbox"/> Dental <input type="checkbox"/> Vision	<input type="checkbox"/> Change <input type="checkbox"/> Cancel	Other Dental Insurance: CARRIER NAME
			<input type="checkbox"/> M <input type="checkbox"/> F	/ /	<input type="checkbox"/> Wife <input type="checkbox"/> Husband <input type="checkbox"/> Child	<input type="checkbox"/> Handicapped	<input type="checkbox"/> Dental <input type="checkbox"/> Vision	<input type="checkbox"/> Change <input type="checkbox"/> Cancel	Other Dental Insurance: CARRIER NAME

I confirm that the information I have provided on this form is complete and accurate. Any person who knowingly and with intent to injure, defraud or deceive any insurer, files a statement of claim or an application containing any false, incomplete or misleading information may be prosecuted as allowed by appropriate state law.

THIS SECTION MUST BE SIGNED AND DATED TO RECEIVE BENEFIT.

☐ **PENSION DEDUCTION AUTHORIZATION** - I hereby authorize the North Carolina Retirement Systems to deduct my identity theft, dental and/or vision premiums from my retirement benefit. To the best of my knowledge, I confirm that the information I have provided on this form is complete and accurate. Firefighters and Rescue Squad Workers, National Guard or Register of Deeds Pension Funds' benefit recipients do not qualify for pension deduction. Please select the Direct Bill option.

☐ **DIRECT BILL OPTION** - Please place the benefits that I have applied for on direct bill. Firefighters and Rescue Squad Workers, National Guard or Register of Deeds Pension Funds' benefit recipients do not qualify for pension deduction. Please select the Direct Bill option.

SIGNATURE
NCRS-01 (REV 5-2018)

DATE

The UnitedHealthcare Dental plan is administered by Dental Benefit Providers, Inc.
The UnitedHealthcare Vision plan is administered by Spectera, Inc.

Direct Bill Clients: Do not send checks to Pierce Insurance Agency.
You must wait for your bill to arrive from UnitedHealthcare.

See reverse side to enroll in LifeLock identity theft protection



Identity Theft Protection Enrollment Form

The purpose of this enrollment form is for obtaining accurate data for enrolling a new member in LifeLock identity theft protection. Once you provide this form to Pierce Insurance via mail, email or fax, they will then securely transmit your enrollment data to LifeLock to begin your membership.

Social Security Number _____ Date of Retirement _____ / _____ / _____
MONTH DAY YEAR
☐ Enroll ☐ Cancel ☐ Change
☐ Address Change ☐ Name Change
 Last Name _____ First Name _____ MI _____ Date of Change _____ / _____ / _____
MONTH DAY YEAR
 Address _____ Date of Birth _____ / _____ / _____
MONTH DAY YEAR
 City _____ State _____ Zip _____ Gender ☐ M ☐ F
 Phone (_____) _____ - _____ Email _____

IDENTITY THEFT PROTECTION ☐ YES ☐ NO _____ If YES, check coverage ☐ RETIREE ☐ RETIREE + ONE (1) ☐ RETIREE + FAMILY

ENROLLING DEPENDENTS – spouse and unmarried dependent children only. (Include Date of Birth & SSN) For court-ordered dependents, documentation must be attached.

Enroll in ☐ Identity Theft —OR— ☐ Cancel ☐ Change

I understand that credit features in LifeLock plans require an additional validation process and until that process is complete, those dependents indicated below will be enrolled in a membership without credit features.

Last Name _____ First Name _____ MI _____ Date of Birth _____ / _____ / _____
MONTH DAY YEAR
 Social Security Number _____ Relationship ☐ Husband ☐ Wife ☐ Child Gender ☐ M ☐ F
 If child is over 26, please indicate status ☐ Handicapped Email _____

Enroll in ☐ Identity Theft —OR— ☐ Cancel ☐ Change

Last Name _____ First Name _____ MI _____ Date of Birth _____ / _____ / _____
MONTH DAY YEAR
 Social Security Number _____ Relationship ☐ Husband ☐ Wife ☐ Child Gender ☐ M ☐ F
 If child is over 26, please indicate status ☐ Handicapped Email _____

Enroll in ☐ Identity Theft —OR— ☐ Cancel ☐ Change

Last Name _____ First Name _____ MI _____ Date of Birth _____ / _____ / _____
MONTH DAY YEAR
 Social Security Number _____ Relationship ☐ Husband ☐ Wife ☐ Child Gender ☐ M ☐ F
 If child is over 26, please indicate status ☐ Handicapped Email _____

ALL LIFELOCK ENROLLEES WHO SIGN BELOW ACKNOWLEDGE AND AGREE AS FOLLOWS

I agree to the License & Service Agreement and acknowledge the Global Privacy Statement, both located at <https://www.nortonlifelock.com/us/en/legal/>.

I authorize NortonLifeLock Inc., its successors and assigns, in accordance with these written instructions under the Fair Credit Reporting Act to obtain my credit data from any consumer reporting agency as needed to confirm my identity, disclose my credit data to me, and deliver the services and features as available in the plan I have selected. I understand if NortonLifeLock is unable to validate or verify my identity, I will be enrolled into a plan without credit features.

▶ Retiree Signature _____ Date _____ / _____ / _____
MONTH DAY YEAR

Retiree Printed Name _____

▶ Spouse Signature _____ Date _____ / _____ / _____
MONTH DAY YEAR

Spouse Printed Name _____

▶ Adult Dependent Signature _____ Date _____ / _____ / _____
MONTH DAY YEAR

Adult Dependent Printed Name _____

I am the parent or legal guardian of the minor(s) named above and I authorize NortonLifeLock Inc., its successors and assigns, in accordance with these written instructions under the Fair Credit Reporting Act to obtain credit data from any consumer reporting agency as needed to disclose my this minor's credit data to me, and deliver the services and features as available in the plan I have selected.

▶ Signature on behalf of Minor(s) _____ Date _____ / _____ / _____
MONTH DAY YEAR

Printed Name of Signer _____

☐ PENSION DEDUCTION AUTHORIZATION

I hereby authorize the North Carolina Retirement Systems to deduct my identity theft, dental and/or vision premiums from my retirement benefit. To the best of my knowledge, I confirm that the information I have provided on this form is complete and accurate. Firefighters and Rescue Squad Workers, National Guard or Register of Deeds Pension Funds' benefit recipients do not qualify for pension deduction. Please select the Direct Bill option.

☐ DIRECT BILL OPTION

Please place the benefits that I have applied for on direct bill. Firefighters and Rescue Squad Workers, National Guard or Register of Deeds Pension Funds' benefit recipients do not qualify for pension deduction. Please select the Direct Bill option.

Bank Name: _____

Routing Number: _____

Account Number: _____

☐ Checking Account ☐ Savings Account

I authorize Selman & Company to make electronic debits or other forms of preauthorized withdrawals from my checking or savings accounts at the financial institution as indicated above, and, if necessary, initiate adjustments for any transactions credited or debited in error. I understand that if a debit or withdrawal is not honored by the financial institution, LifeLock will consider the payment unpaid. Any debit or withdrawal returned due to insufficient funds may be re-deposited by Selman & Company at its sole discretion. This authorization will remain in effect until written notice of revocation is received by Selman & Company at least five (5) business days prior to the scheduled payment date. I hereby acknowledge and agree that such preauthorized withdrawal will occur on the 15th of the month or the last business day preceding the 15th of the month if that date falls on a weekend.

I further agree that if any such debit or withdrawal is not honored, whether with or without cause, Selman & Company shall be under no liability whatsoever even though such dishonor results in the lapse of LifeLock services.

Signature of Depositor _____

GPPM11144





Contact Information

Pierce Insurance Agency | Enroll or Ask Questions About Your Benefits

Call: 855-627-3847 | **E-mail:** info@pierceins.com | **Fax:** 252-753-5941 | **Visit:** www.ncretiree.com

Write to: Pierce Insurance, Attn: NCRS | PO Box 727 | Farmville, NC 27828



UnitedHealthcare Dental | Dental Claim Questions

Call: 877-905-0659 | **Visit:** www.myuhc.com

Write to: UnitedHealthcare Dental, Attn: Claims Unit | PO Box 30567 | Salt Lake City, UT 84130



UnitedHealthcare Vision | Vision Claim and Provider Network Questions

Call: 800-980-2965 | **Fax:** 248-733-6060 | **Visit:** www.myuhcvision.com

Write to: UnitedHealthcare Vision | PO Box 30978 | Salt Lake City, UT 84130



LifeLock Identity Theft Protection, Member Services

Membership questions / Profile Updates / Alert Responses / Identity Theft Incidences

Call: 877-349-2966 | **Fax:** 1-888-244-9823 (Attn: Document Dept.)

Write to: NortonLifeLock Inc., Attn: Member Services | 60 E. Rio Salado Pkwy, Suite 1000 | Tempe, AZ 85281



Featured Services on www.ncretiree.com

- Enroll online
- Print claim and service forms
- Access benefit videos
- Review frequently asked questions
- Access ORBIT to change address
- View brochures and certificates



REMEMBER Don't wait. Enroll Today!



North Carolina
Total Retirement Plans



Dale R. Folwell, CPA
STATE TREASURER OF NORTH CAROLINA
DALE R. FOLWELL, CPA

**Time
Sensitive**

ENROLL WITHIN 60 DAYS



DENTAL INSURANCE

IDENTITY THEFT PROTECTION

VISION INSURANCE

To enroll, call 855.627.3847 or visit www.ncretiree.com.



PIERCE INSURANCE

Supplemental Benefits Specialists Since 1955