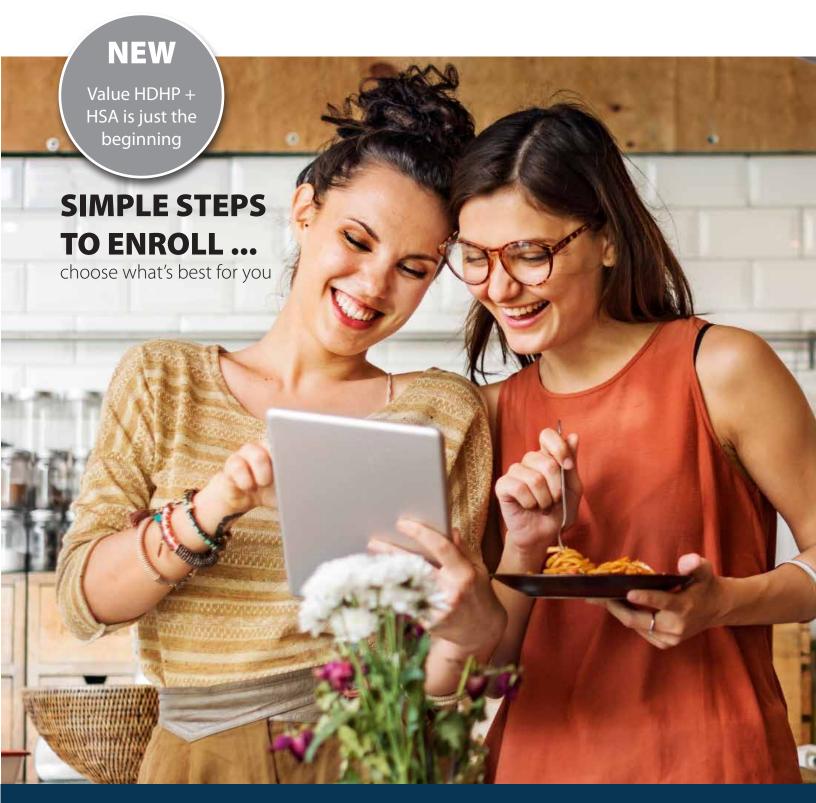
2024

BENEFITS GUIDE



designed with YOU in mind



SPECIAL! New Voluntary Plans to Fit Your Needs. page 23

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BENEFITS DESIGNED WITH YOU IN MIND

At Great River Health we offer a comprehensive benefits package for our valued employees as part of our commitment to you and your family. Our benefit offerings are purposefully designed to meet the needs of our employees. Visit http://www.grhtotalrewards.com for more details.

What's New in 2024?

New Value High Deductible Health Plan

• In 2024, GRH will begin offering our Value High Deductible Health Plan that offers front-loaded HSA contributions, affordable premiums, and 10% coinsurance after deductible.

Increased + Front-loaded Employer-funded HSA Contributions

• GRH will contribute up to \$500 (employee only) and \$1,000 (employee +1 or more) as a front-loaded employer contribution to your HSA.

New Hospital Indemnity Plan

• Hospital Indemnity coverage supplements your health coverage by offsetting the out-of-pocket costs of a hospital stay.

New Paid Parental Leave

• Receive two weeks of paid parental leave for birthing and non-birthing parents.

New Education Assistance Program

- Education Assistance Program providing tax free reimbursement up to \$5,250/year for full-time and \$2,625/year for part-time employees.
- Reimbursement for up to \$500 for approved certifications.

New Carriers to Know...

• Fidelity will be our new carrier for Flexible Spending and Health Savings Accounts allowing for consolidation when it comes to managing financial benefits (retirement and spending accounts). See page 12 for additional information.

Other Changes to Understand ...

- Reduced health insurance premiums.
- Paid Time Off No probationary period for utilizing time off.
- Reduced waiting period for Short-Term Disability from 30 days to 14 days.
- · Reduced premiums for life and disability benefits.

2024 OPEN ENROLLMENT

It's time to choose your benefits and enroll

Great River Health offers a comprehensive package of healthcare, insurance, retirement plans and other programs to safeguard you and your family's well-being.

IMPORTANT: You must take action!

Great River Health is having an active enrollment this year. You will need to actively elect coverage in Workday for benefits for 2024. Elections will NOT carry over from the previous year.

Current Employees

Your benefit elections must be made during the annual Open Enrollment Period – October 23, 2023 – November 3, 2023.

Any benefits you choose will be in effect from January 1, 2024 to December 31, 2024.

New Hires

You have 30 days from your date of hire to make your benefit elections. If hired on or before December 1, 2023, you will need to make elections for both 2023 and 2024 plan years separately.

Life Event

If you experience a life event after you enroll, you have 30 days (60 days for eligibility or loss of Medicaid or CHIP coverage; and 60 days for the birth of a child) to notify Human Resources of any benefit changes you wish to make within the designated timeframe. See page 4 for more details

PRE-ENROLLMENT CHECKLIST

- THINK about how your needs have changed and consider if you may find more value and/or better coverage by selecting a different plan.
- EXPLORE what's new or changing and consider how it might affect your enrollment choices.
- COLLECT the birth date, Social Security number, and address for each dependent you wish to enroll or beneficiary you want to name.
- REVIEW any benefits offered through your spouse's employer to avoid costly duplicate coverage.
- DECIDE how much to contribute to an FSA or HSA.
- SAVE THE DATES of October 23 November 3 to enroll or make benefit changes.

QUESTIONS? askHR Can Help

We are ready to help you understand your benefit options so you can make the right choices for your needs and budget.

Call 319-768-3750, Monday through Friday, 8 a.m. to 4 p.m. CT, or email askHR@greatriverhealth.org.

ENROLLMENT AND ELIGIBILITY

Upon Hire

You become eligible for most benefits on the first day of the month following or coinciding with 30 days of employment.

During Open Enrollment

This is your annual opportunity to enroll for benefits or make changes to your existing benefits.

This year's Open Enrollment period is: October 23 – November 3, 2023

Generally, benefits you elect during Open Enrollment will be effective January 1 through December 31, unless you experience a qualifying life event that lets you change your coverage or makes you ineligible for coverage.

Following a Life Event

If you experience a status change or a qualifying life event during the year that affects your eligibility for benefits, you may enroll for coverage in new plans and make changes to existing coverage. You must notify Human Resources within 30 days of the event to make changes.

Note: If benefit changes are the result of eligibility or loss of coverage for Medicaid or Children's Health Insurance Program (CHIP) coverage, you have 60 days to make changes. You also have 60 days for the birth of a child.

Who's Eligible? Employees

As a Great River Health employee, you are eligible for benefits if you meet the following hour requirements:

- Partially Benefit Eligible (PBE) 20 to 29 hours per week
- Fully Benefit Eligible (FBE) 30 to 40 hours per week

Dependents

When you enroll for benefits, you can also enroll your eligible dependents, including your:

- · Legal spouse as determined by the state in which you reside
- Children up to age 26**
- A disabled child of any age who becomes disabled prior to age 26 and who is dependent on you for financial support

** Includes natural, adopted, legal guardianships, and stepchildren regardless of student, marital, military, or employment status

Use this guide to:

- Review your benefit choices, including any new plans and benefit changes
- Understand how the plans work
- Learn about the tools and resources available with each plan
- Select the benefits that are best for you and your family

QUESTIONS? askHR Can Help

- We are ready to help you understand your benefit options so you can make the right choices for your needs and budget.
- Call 319-768-3750, Monday through Friday,
 7:30 a.m. to 4 p.m. CT, or email askHR@ greatriverhealth.org

QUALIFYING LIFE EVENTS

As life changes, your benefit needs may change too. Qualified life events allow you to make certain changes to your enrollment outside of the annual open enrollment period. In accordance with IRS these include, but aren't limited to, marriage, divorce, legal separation, birth or adoption of a child, or a change to your or your spouse's employment status that affects benefits eligibility.



Non Qualifying Life Events

Failure to pay premiums

Voluntarily dropped coverage

Failure to provide documents

Life Event Key Points

 Benefit changes must be CONSISTENT with the life event ...

Example: Your spouse just gave birth. You can't remove your spouse from your medical coverage when this happens because that isn't consistent with the event. But you could add dependent coverage for the newborn child

 You have 30 DAYS to request changes...

To request a change in benefits, contact askHR and submit changes within 30 days (60 days for the birth of a child, or eligibility or loss of Medicaid or CHIP coverage) of when the event occurred.

	What	Benefits Can	Be Changed V	Vhen		
Benefits that can be changed	Change in marital status (marriage, divorce, death of spouse)	Change in number of dependents (birth, adoption, death of dependent)	Start or end of employment (by spouse or dependent)	Change in your work hours (such as FBE to PBE)	Significant change in health care plan coverage (through your spouse's plan)	Changes allowed anytime during the year (qualifying life event not necessary)
Medical, Dental, Vision	х	х	х	X	х	
Health Savings Account	х	х	х	х	х	х
Health Care FSA	х	х	х	х	х	
Dependent Care FSA	х	х	х	х		
Voluntary Employee Life/AD&D, Spouse/Dependent Life	х	х	х	х		x
Required Documentation	Marriage certificate, divorce decree, death certificate	Birth certificate, adoption agreement, or death certificate	Letter from employer confirming prior coverage termination date and reason for termination		Letter from spouse's employer confirming coverage change and effective date	None

HEALTH BENEFITS

Health insurance exists to help offset the costs of medical events, whether they're planned or happen unexpectedly. The cost of health insurance will vary based on the coverage you select.

Insurance doesn't pay everything, leaving you with outof-pocket costs. In addition to your plan premiums, outof-pocket costs include copayments, deductibles, and coinsurance. Each plan also includes an out-of-pocket maximum. It's important to understand how these costs work before you choose a plan.



LOWER COST

- You have few health issues
- You are only covering yourself



Office visit costs: \$125

Jane pays: \$125

Her plan pays: \$0

HIGHER COST

- You have multiple health issues
- You are covering other dependents on your plan

Important Health Insurance Terms

COPAY: The fixed dollar amount you pay for certain health services or prescription drugs.

DEDUCTIBLE: The amount you pay each year for covered non-preventive care before your health insurance starts to pay.

COINSURANCE: Your share (percentage) of costs after you've met your deductible.

OUT-OF-POCKET (OOP) MAXIMUM: The most you have to pay in copays, deductible, and coinsurance during a single year. Once you reach it, your health insurer typically covers 100% of costs for the rest of the year.

care services for the rest of the year.

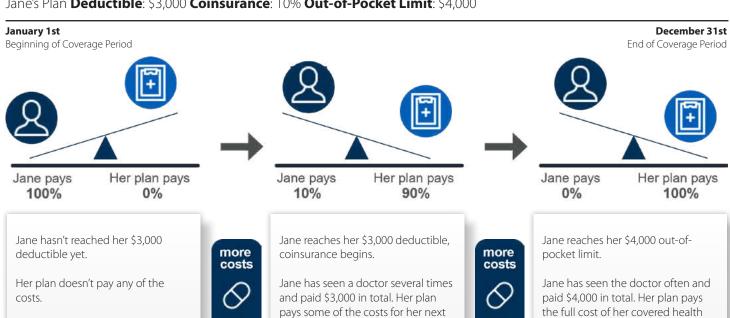
Office visit costs: \$200

Her plan pays: \$200

Jane pays: \$0

You and Your Insurer Share Costs – Example

Jane's Plan **Deductible**: \$3,000 **Coinsurance**: 10% **Out-of-Pocket Limit**: \$4,000



Her plan pays: 90% of \$75 = \$67.50

visit.

Office visit costs: \$75

Jane pays: 10% of \$75 = \$7.50

MEDICAL PLAN OPTIONS

Great River Health offers you the choice of 3 medical plan designs: 2 HDHPs and Health Basic. Use this chart to decide which one is right for you.

How to Pick the Right Plan!

Key Differentiators	Health Basic	Core or Value HDHP
Cost of coverage (Premium)	Highest	Lowest
Cost-sharing for non-preventive services	Lowest	Highest
Must meet the deductible before paying for prescription drugs with a copay	No	Yes
Must meet the deductible before paying for office visit copays	No	Yes
Type of account offered	Flexible spending account	Health savings account and a limited purpose FSA
Health savings account funding by Great River Health	No	Yes
THIS PLAN MAY BE THE RIGHT CHOICE FOR YOU IF YOU	Prefer a plan that has a lower deductible, and you don't mind paying more out of each paycheck for coverage. The Health Basic also gives you peace of mind from not having to save up for larger health care expenses with more fixed costs.	Don't mind the higher deductible in exchange for keeping more of each paycheck in your pocket. Both the Core and Value HDHP provides longterm savings opportunities and puts you in control of your health care spending. You must be willing to plan ahead and keep track of what you spend.

WHEN YOU AND YOUR FAMILY NEED

QUICK CARE FOR MINOR ILLNESSES,
TELEMEDICINE IS A CONVENIENT OPTION.
TELEMEDICINE IS AVAILABLE WITH
Health Basic, Core and Value HDHP
THROUGH GRH PROVIDERS.

MEDICAL PLAN INFORMATION

For all medical plans, the following services (if applicable) must be performed by a Preferred Provider to be covered. If you choose to us a non-Affiliated Provider for any of the services listed below, you will pay 100% of the cost:

- MRIs, CT Scans and Pet Scans
- Physical Therapy
- Durable Medical Equipment
- · Home Health Care

Affiliated Providers		
Southeast Iowa Regional Medical Center	Keokuk Clinic	New London Clinic
Wapello Clinic	Mediapolis Clinic	Universal Therapy Group
Henry County Health Center (HCHC)	Provider Services Billed by HCHC	Burlington Ear, Nose and Throat, PC
Advance Physical Therapy – Keokuk location	Forefront Dermatology	Davis Radiology
Burlington Neurology & Sleep Clinic, PLC	Mt. Pleasant Family Practice	

\$500 Added Deductible

If you choose to have a procedure done at another facility when the services could have been performed at an Affiliated Provider- an added \$500 deductible will be assessed for each date of service.

Maximum additional deductible: \$1,000 Single and \$2,000 Employee + 1 and Family.

Does not apply toward any other plan deductible, co-insurance and/or out-of-pocket expense.

Medical Plan

Each Medical Plan has a network structure. There are different deductibles, co-insurance and out-of-pocket maximums (OPM) depending upon which network your provider falls in. Preferred and In-Network deductibles and OPMs cross accumulate while Out-of-Network has a separate and additional deductible and OPM.

- Preferred- Affiliated providers above
- In-Network- HealthSmart Network HealthSmart Preferred Option To find a provider: https://providerlookup.healthsmart.com
- · Out-of-Network

Wrap Plan

The Wrap plan is a limited supplemental benefit plan. This plan is only available to employees who have primary group coverage under another plan. The Wrap plan will always be considered secondary coverage. The maximum yearly benefit under this plan is \$1,000 per member per calendar year. The plan is intended to cover all or part of another group's medical plan deductible and out-of-pocket payments, physician office co-pays and prescription co-pays. It does not cover dental or vision and it does not cover charges denied by your primary plan. You cannot elect the Wrap plan if you are covered under another GRH plan or if you are covered under Medicare or Medicaid.

QUICK LOOK: GREAT RIVER HEALTH MEDICAL PLANS

		HEALTH BASIC	:	CORE HDHP			VALUE HDHP		
PLAN PROVISION	Preferred (Affiliated Providers)	In-Network (Health Smart Providers)	Out-of- Network ***	Preferred (Affiliated Providers)	In-Network (Health Smart Providers)	Out-of- Network ***	Preferred (Affiliated Providers)	In-Network (Health Smart Providers)	Out-of- Network ***
Employer HSA Contribution (Individual / Family)		n/a			\$500/\$1,000			\$500/\$1,000	
Annual Deductible (Individual / Family)	\$1,000/ \$2,000	\$1,500/ \$3,000	\$,2000/ \$4,000	\$2,500/ \$5,000	\$3,500/ \$6,900	\$3,500/ \$6,900	\$3,000/ \$6,000	\$4,000/ \$8,000	\$5,000/ \$10,000
Out-of-Pocket Maximum (Individual / Family)	\$3,500/ \$7,000	\$4,650/ \$9,300	\$8,150/ \$16,300	\$2,500/ \$5,000	\$3,500/ \$6,900	\$8,150/ \$16,300	\$4,000/ \$8,000	\$4,500/ \$9,000	\$8,150/ \$16,300
Coinsurance - PPO	80% / 20%	70% / 30%	60% / 40%	100%	100%	60% / 40%	90% / 10%	90% / 10%	60% / 40%
Lifetime Maximum		unlimited			unlimited			unlimited	
Routine Preventive Care	100%	100%	Not Covered	100%	100%	Not Covered	100%	100%	Not Covered
Physician Office Visits / Telehealth Visits	80% (deductible waived)	70%*	60%***	100%*	100%*	60%***	90%*	90%*	60%***
Chiropractor (limited to 12 visits)	80%*	70%*	60%***	100%*	100%*	60%***	90%*	90%*	60%***
Inpatient Hospital Services	80% (deductible waived)	70%*	60%***	100%*	100%*	60%***	90%*	90%*	60%***
Outpatient Hospital Services	80% (deductible waived)	70%**	60%***	100%*	100%*	60%***	90%*	90%*	60%***
Outpatient Lab & X-ray Services	80% (deductible waived)	70%*	60%***	100%*	100%*	60%***	90%*	90%*	60%***
Physical Therapy (limited to 30 visits)	80% (deductible waived)	Not Covered	Not Covered	100%*	Not Covered	Not Covered	100%*	Not Covered	Not Covered
Emergency Room Emergency Non-Emergency	80%* ^ 80%* ^	80%* ^ 70%* ^	80%* ^ 60%* ^ ***	100%* ^^ 100%* ^^	100%* ^^ 100%* ^	100%* ^^ 60%* ^ ***	90%* ^^ 90%* ^^	90%* ^^ 90%* ^^	90%* ^^ 60%* ^^ ***
Urgent Care	80% (deductible waived)	70%*	60%***	100%*	100%*	60%***	90%*	90%*	60%***
Prescription Drugs	Heritage Park Pharmacies	Other Participating Pharmacies	Out-of- Network	Heritage Park Pharmacies	Other Participating Pharmacies	Out-of- Network	Heritage Park Pharmacies	Other Participating Pharmacies	Out-of- Network
Prescription Drug Deductible	specialty drug dec	re co-pay indicated; ductible combined edical	Not covered	Combined	with medical	Not covered	Combined v	with medical	Not covered
Prescription Drug Out-of-Pocket Maximum	co-pay out of poc out-of-pocket ma	\$3,000(family) ket; specialty drug eximum combined nedical	Not covered	Combined	with medical	Not covered	Combined v	with medical	Not covered
Generic	\$6	\$10	Not covered	100%*	100%*	Not covered	90%*	90%*	Not covered
Brand Name (Formulary)	\$28	\$50	Not covered	100%*	100%*	Not covered	90%*	90%*	Not covered
Brand Name (Non- Formulary)	\$55	\$80	Not covered	100%*	100%*	Not covered	90%*	90%*	Not covered
Specialty Drugs	80%*	70%*	Not covered	100%*	100%*	Not covered	90%*	90%*	Not covered

^{*} After deductible is met

^{**} After deductible is met, added \$500 deductible may apply

^{***} Preferred and In-Network Deductibles & OPM cross accumulate while Out-of-Network shall have a separate and additional deductible & OPM.

[^] Emergency Room - Health Basic- If service is for an emergency – 80% coinsurance and deductible waived if admitted for all tiers. In an emergency, all tiers will accrue toward the in network deductible and out of pocket maximum. If service is not an emergency standard coinsurance of 80%/70%/60% applies. Out of network benefit does NOT accrue toward the in network deductible and out of pocket maximum.

^{^^} Emergency Room - HDHP - If service is for an emergency – Deductible and 100% coinsurance apply for all tiers. In an emergency, all tiers will accrue toward the in network deductible and out of pocket maximum. If service is not an emergency standard coinsurance of 100%/100%/60% applies. Out of network benefit does NOT accrue toward the in network deductible and out of pocket maximum.

UNDERSTANDING HDHP PLAN + HEALTH SAVINGS ACCOUNT

The Great River Health high deductible health plans have three key features:



Tax-free health savings account with free money from Great River Health

HDHP participants may open a personal health savings account (HSA) to pay for eligible health expenses — including deductibles and coinsurance — with tax-free* dollars. As an added bonus, Great River Health contributes to your account to help you cover costs — in 2024, you'll get up to \$500 if you have employee only coverage or up to \$1,000 if you have family coverage. These funds will be front-loaded to your account after your coverage becomes effective.



Low-premium, high-deductible coverage

HDHP premiums are lower compared to traditional health insurance plans like PPOs, so you keep more of each paycheck. And, while the plan's annual deductible is higher, you can use the tax-free money in your HSA to help cover your out-of-pocket costs. This means you pay less now and more later when you receive care.



Free in-network preventive care

Preventive care is fully covered, so you pay nothing as long as you receive it from in-network providers. Preventive care includes annual physicals, well-child checkups, immunizations, flu shots, well-woman exams, and mammograms and other cancer screenings. When you enroll in an HDHP, you will want to review your options and make thoughtful decisions to obtain the best care while maximizing your HSA dollars.

Health Savings Account (HSA)

Your contributions to the Health Savings Account can cover your deductible and coinsurance.

Preventive Care This plan pays 100%.

Deductible

You pay 100%. Once you meet the deductible, coinsurance kicks in.

Coinsurance

You and the plan share a percentage of the cost of services until you meet the out-of-pocket maximum.

Out-of-Pocket Maximum

Once you reach this, the plan pays 100% of in-network costs.

HOW THE HDHP WORKS (see page 5 for definitions)

	ADDITIONAL EXPENSES	
You Pay, Then Plan Pays	OUT-OF-Pocket MAXIMUM	Out-of-Pocket Maximum You're protected by this annual limit on your out- of-pocket costs. Your deductible and coinsurance both count toward the out-of-pocket maximum. Once you reach the out-of-pocket maximum, the plan pays 100% of any additional covered expenses for the rest of the year.
Shared Cost	COINSURANCE	Coinsurance Once you meet the deductible, you and the plan share the cost of covered services. Each pays a percentage of coinsurance.
You Pay	DEDUCTIBLE	Deductible You pay 100% of expenses up to the annual deductible.

* All tax references are for federal income taxes. State and other taxes vary, depending on your residency. Check with your tax advisor for more details.

PREVENTIVE CARE (Plan pays 100% for annual

physical, well-woman, well-baby,

mammograms, certain cancer

screenings)

Plan Ahead with Your **Health Savings Account**

Plan Pays

You can set aside tax-free* money from your paycheck and receive Great River Health's contributions to help cover your costs — now and in the future.

You can use your HSA to pay eligible out-of-pocket expenses, tax-free.* Great River Health's contributions to your HSA cover part of the in-network deductible in the HDHP/HSA Plan.

Tax Savings x3

Preventive Care

Covered in full; you pay nothing.

When you contribute to an HSA, you can:

- Pay for qualified medical, most prescriptions, dental, and vision expenses with tax-free* funds.
- Save tax-free* funds to use for future expenses, even after you retire or leave Great River Health.
- Roll over any unused dollars and earn taxfree* interest on your account.

HOW THE HSA WORKS

A health savings account lets you pay for current or future health care expenses with tax-free* dollars. And unlike a flexible spending account, there isn't a "use-it-or-lose-it" rule with an HSA. The money is yours and rolls over each year. You never forfeit HSA funds.

Both you and Great River Health can contribute to your HSA, up to the limits set by the IRS. Keep in mind, the contribution limits shown include both your contributions and Great River Health's contributions combined.

	Current HSA Contribution Limits	Great River Health Contribution	Your Maximum Contribution
UNDER AGE 55			
Employee-only	\$4,150	\$500	\$3,650
Family	\$8,300	\$1,000	\$7,300
AGE 55 OR OLDER (until enrolled in Medicare)*			
Employee-only	\$5,150	\$500	\$4,650
Family	\$9,300	\$1,000	\$8,300

^{*}When you are enrolled in Medicaid or Medicare, you and Great River Health will not be able to continue making any further contributions to your HSA.

USING YOUR HSA

START IT

When you enroll in the Great River Health's HDHP/ HSA medical plan, you'll be eligible for the HSA account. Elect how much you want to contribute, anything up to the IRS maximum.

2

BUILD IT

Great River Health will deposit an employer contribution into your account the first payroll of the new calendar year. Throughout the year, you can change how much you contribute, as long as it does not exceed the IRS maximum.

3

USE IT

Use your HSA balance to pay for eligible medical expenses, tax-free, including: deductible, coinsurance, Rx copays, and more. See irs.gov (Publication 502) for a complete list of eligible expenses.

4

GROW IT

Unused money in your HSA automatically rolls over from year to year. You never lose funds in your HSA. They go with you if you change companies, switch plans or retire.

^{*} All tax references are for federal income taxes. State and other taxes vary, depending on your residency. Check with your tax advisor for more details.

WHO IS ELIGIBLE FOR AN HSA?

Because the HSA comes with special tax advantages, the IRS also limits who is eligible to receive an HSA.

In order to take advantage of the tax savings and other benefits of an HSA, you must meet these requirements:

- You must be enrolled in Great River Health's HDHP/HSA medical plan.
- You can't have other health care coverage, including a health care FSA under your spouse's plan, for example.
- You aren't enrolled in Medicare, Medicaid, or TRICARE.
- · No one claims you as a tax dependent.

Get the NetBenefits Mobile App!

Download the free NetBenefits mobile app for use on your smartphone or tablet.





Apple

Android

Remember,
you can't have a full-service
FSA and an HSA
at the same time.

Important Tax Tips

Because your HSA offers significant tax advantages, there are also a few tax-related items you need to be aware of.

Save your receipts in case of an IRS audit. You are responsible for proving that you used your HSA only for qualified medical expenses. If you use your HSA funds for other expenses, you will owe taxes on the withdrawal, as well as a 20% penalty tax. If you use a credit card, personal check, or cash to pay for a qualified expense, you can use your HSA to reimburse yourself, but make sure to keep the receipt as proof.

Disclose all HSA contributions and withdrawals on your taxes. You will need to submit Form 8889 along with your tax return. Fidelity will provide an annual HSA statement you can use when filing your taxes. In addition, your W-2 will display the total amount Great River Health contributed to your HSA.

Don't exceed the IRS contribution limit. If the total contributions to your HSA from you and Great River Health exceed the annual IRS limit, the excess amount is subject to standard income tax plus an excise tax. If you withdraw the excess amount before your tax filing deadline, you can avoid paying the excise tax.

Include your after-tax HSA contributions (if any) on Form 1040 to deduct this amount from your income.

FLEXIBLE SPENDING ACCOUNTS (FSAS)

Now let's take a quick look at the other type of account you may be eligible to receive — a spending account.

Great River Health offers 3 types of flexible spending accounts (FSAs) to help you save on medical, dental, vision, and many daycare expenses: Health Care FSA, Limited Purpose Care FSA and Dependent Care FSA.

Remember, you can't have a full-service health care FSA and an HSA at the same time. You can, however, choose a limited purpose FSA to use for dental and vision expenses only along with an HSA.

FSA Fast Facts

Contribution limit. Set aside up to \$3,050* for eligible health care expenses. Any unused funds except for what's eligible to be rolled over are forfeited at year's end.

Lower your taxable income. Money you set aside is pre-tax dollars, so you pay taxes on a lesser amount.

Take advantage of payroll deduction. Contribute equal amounts each pay period.

Changes not allowed. Unless you experience a qualifying life event, you cannot change your annual contribution amount.

Separate accounts. You cannot use health care FSA funds to pay dependent care expenses, or vice versa.

Use-It-Or-Lose-It Rule

Plan your health care FSA contribution amount carefully. Any unused funds greater than any allowed rollover amount are forfeited. Visit fidelity.com for help estimating expenses. Be sure to keep all receipts for your tax records as you may need to provide proof of eligible expenses.

Ouick Look: YOUR FSA OPTIONS

	HEALTH CARE FSA	LIMITED PURPOSE FSA	DEPENDENT CARE FSA	
Who may enroll?	Great River Health		All Employees	
What types of expenses are reimbursable?1	Eligible medical, dental, vision, and prescription drug expenses (includes deductibles, copays, and coinsurance)	Eligible dental and vision expenses only (includes deductibles, copays, and coinsurance)	Eligible dependent care expenses (includes child care, day camps, after school care, and adult daycare)	
What is the maximum annual contributions?	\$3,050*	\$3,050*	\$5,000²	
Does the company contribute?	No	No	No	
Do leftover funds roll over each year?	Yes, any money between \$100 and \$610 can be rolled over from your 2023 FSA. Anything less than \$100 or more than \$610 will be forfeited.		No, you must use it or lose it – funds remaining at the end of the plan year are forfeited.	

^{*} the 2024 IRS maximums have not been released at the time this guide was put together

² If you're married, reimbursement is limited to the lesser of your earned income, your spouse's earned income, or a maximum of \$2,500. Consult your tax advisor if you're uncertain of your specific tax situation.

DENTAL & VISION INSURANCE

Think about all the ways you use your mouth throughout your day. From eating, drinking, and talking to cheering your favorite sports team. And you rely on your eyes for almost everything else you do.

Great River Health provides both dental and vision insurance for you and your family to help ensure you can continue to enjoy these activities and keep your mouth, teeth, and eyesight healthy.

Dental Plans Highlights

EBS Basic Plan PPO

- Choice of providers
- Preventive services are free
- Negotiated rates for dentists

EBS Plus Plan PPO

- Choice of providers
- Preventive services are free
- Basic Restorative care covered at 100% after deductible
- Orthodontia services covered at 50% to a lifetime maximum of \$1,500

Vision Plan Highlights

EyeMed VISION

- Can use frame and contact allowance in the same benefit year
- Several in-network options for buying eyewear online
- Separate contact lens fitting and follow-up coverage
- Eye360 features a \$0 copay for exam at Plus Provider
- Glasses/contact lens available

Test Your Dental Health Knowledge

Good oral health can help you avoid or better manage which of these health-related issues:

- Diabetes ... Y or N
- · Heart Disease ... Y or N
- Pregnancy ... Y or N
- Self-Esteem ... Y or N

Find the answers on the bottom of the next page.

Can You See It?

Common daily symptoms that may suggest a problem with your vision:

Blurriness, blind spots, or halos around lights

Frequent headaches

Loss of sharpness

Sitting too close to the television or computer screen

Squinting

QUICK LOOK AT DENTAL:

	Basic Plan	Plus Plan				
CALENDAR YEAR DEDUCTIBLE						
Individual	\$25	\$25				
Family	\$75	\$75				
ANNUAL MAXIMUM						
Per Individual	\$750	\$1,500				
COINSURANCE / COPAYS—YOU PA	Υ					
Preventative Care						
Exams, Cleanings, etc.	100% – deductible waived	100% – deductible waived				
Basic Services						
Fillings, Simple Extractions, etc.	80% – after deductible	80% – after deductible				
Major Procedures						
Oral Surgery, Root Canal, etc.	50% – after deductible	50% – after deductible				
ORTHODONTIA						
Adults	Not Covered	Not Covered				
Children	Not Covered	50% – after deductible \$1,500 lifetime maximum				

QUICK LOOK AT VISION:

Vision Care Services	In-Network Cost	Out of Network Reimbursement				
Exam Services – once every plan year						
Exam at Plus Provider	\$0 copay	Up to \$40				
Exam	\$10 copay	Up to \$40				
Frames – once every plan year						
Any available frame at Plus Provider	\$0 copay, 20% discount over \$200 allowance	Up to \$105				
Frame	\$0 copay, 20% discount over \$150 allowance	Up to \$105				
Contact Lenses – (in lieu of lenses) once ever	y plan year	•				
(Contact Lens allowance includes materials only)						
Contacts – Conventional	\$0 copay; 15% discount over \$150 allowance	Up to \$105				
Contacts- Disposable	\$0 copay; \$150 allowance	Up to \$105				
Contacts- Medically Necessary	\$0 copay; paid in full	Up to \$300				
Standard Plastic Lenses- (in lieu of contacts)	once every plan year	•				
Single Vision	\$25 copay	Up to \$300				
Bifocal	\$25 copay	Up to \$50				
Trifocal	\$25 copay	Up to \$70				
Lenticular	\$25 copay	Up to \$70				
Progressive – Standard	\$25 copay	Up to \$50				
Progressive – Premium Tier 1	\$110 copay	Up to \$50				
Progressive – Premium Tier 2	\$120 copay	Up to \$50				
Progressive – Premium Tier 3	\$135 copay	Up to \$50				
Progressive – Premium Tier 4	\$200 copay	Up to \$50				
Lens Options						
Anti reflective Coating- Standard	\$45 copay	Up to \$23				
Anti reflective Coating- Premium Tier 1	\$57 copay	Up to \$23				
Anti reflective Coating- Premium Tier 2	\$68 copay	Up to \$23				
Anti reflective Coating- Premium Tier 3	\$85 copay	Up to \$23				
Polycarbonate- Standard < 19 years of age	\$0 copay	Up to \$20				

Additional Discounts for In-Network	
Discounted Exam Services	
Retinal Imaging	Up to \$39
Contact Lens Fit & Follow-Up (fit and follow-up visit	s are available once comprehensive exam is completed)
Fit and follow-up – Standard	Up to \$40
Fit and follow-up – Premium	10% discount off retail price
Discounted Lens Options	
Photochromic – Non-Glass	\$75
Polycarbonate – Standard	\$40
Scratch Coating – Standard Plastic	\$15
Tint – Solid or Gradient	\$15
UV Treatment	\$15
Other Add-on services and materials	20% discount off retail price

Note: You may be able to receive additional savings on glasses and sunglasses. Additional fees apply for lens enhancements. See your EyeMed Vision Plan Summary for more details.

PLAN MEMBER WELLNESS RESOURCES

The wellness programs and services below are available to either all employees, or to medical plan members based upon your specific plan choice. Use these resources to help you and your family live a healthier lifestyle, remain active and enjoy the best life possible.

Available to All Employees

Employee Assistance Program

- Free & confidential
- 6 sessions per occurrence per year
- No need to share sessions with family members
- Unlimited phone sessions
- Available 24/7
- Call 877-883-1387 or visit Employee & Family Resources at efr.org/myeap

Available to Great River Health Plan Members

Telemedicine – Great River Health

- See a doctor using any mobile device or computer with a webcam
- Board-certified doctors provide diagnosis and order prescriptions, when needed
- Available 24/7
- Behavioral Health Services also available
- Visit Telemedicine | Hospital in West Burlington, IA (greatriverhealth.org)

DID YOU KNOW?

A Personal Meditation Guide is in Your Pocket

Meditation not only reduces daily stress, but it also improves focus, boosts compassionate behavior toward others, and so much more.

Download the app now and use EFR's guided meditations for free. You'll receive instructions for how to create an account or connect your existing one.

The ancient practice of meditation dates back thousands of years and is most often associated with Buddhism.

WEALTH BENEFITS

Great River Health's life and disability insurance programs are designed to help secure your income and provide your family with peace of mind knowing their financial needs will be looked after if something happens to you.

Company-Provided and Employee-Paid Life/AD&D Programs

Fully Benefit Eligible employees automatically receive basic life insurance and basic accidental death and dismemberment (AD&D) insurance — at no cost to you with no enrollment required. If you desire additional coverage beyond what Great River Health provides, you can choose voluntary life and voluntary AD&D, or both, but you will pay 100% of the premiums.

Age Reduction

Your basic life/AD&D coverages are reduced to 65% at age 70, and again to 45% at 75.

Evidence of Insurability

If you enroll outside of your newly eligible window, or if you elect coverage over the guaranteed issue amount, you may be required to submit an EOI form. You'll be asked to provide the insurance company with additional information about your health. Once your benefit event is submitted, you will receive a task in Workday to complete the EOI form. The amounts will be on hold or suspended until the insurance company approves your coverage.

If approved, coverage will start the first of the following month, or as approved by the insurer. You can name a primary and a secondary beneficiary, which you can change at any time in Workday.

What is AD&D insurance?

Quick Look: LIFE/AD&D INSURANCE

Should you lose your life, sight, hearing, speech, or use of your limb(s) in an accident, AD&D provides additional benefits to help keep your family financially secure. AD&D benefits are paid as a percentage of your coverage amount — from 50% to 100% — depending on the type of loss.

Select Your Beneficiary
Beneficiaries are individuals or entities
that you select to receive benefits
from your policy. These can include:

• Person(s) • Trust • Charity

You can change your beneficiary designation at any time.

You may designate a sole beneficiary or multiple beneficiaries to receive payment in the amount you specify.

Select or change your beneficiary in Workday Employee Self-Service.

	COMPANY-PROV	IDED LIFE/AD&D	EMPLOYEE-PAID LIFE AD&D
	BASIC LIFE	BASIC AD&D	Voluntary Life and Voluntary AD&D
Hourly	1 x salary not to exceed \$300,000	1 x salary not to exceed \$300,000	
Salary	1.5 x salary not to exceed \$300,000	1.5 x salary not to exceed \$300,000	Increments of \$10,000 up to 5x salary to \$500,000 max EOI is required for amounts greater than \$300,000
Manager & Above	2 x salary not to exceed \$300,000	2 x salary not to exceed \$300,000	greater than \$300,000
CWA RNs	\$50,000	\$50,000	Increments of \$5,000 up to \$250,000
Spouse	NA	NA	max. (can't exceed 100% of Employee's coverage) EOI required for amounts greater than \$50,000
Children	NA	NA	Flat \$10,000. EOI not required

INCOME PROTECTION: DISABILITY INSURANCE

Disability can be one of the biggest financial risks you face. That's why you shouldn't be too eager to decide disability insurance is one benefit you can do without. **It could be more important than you think.** Even if it's toward the bottom of your "needs list" this Open Enrollment season, be sure to spend a little extra time learning about the disability benefits available to you because there's a chance you might really need them.

Short-Term and Long-Term Coverage

Should you experience a non-work-related illness or injury that prevents you from working, disability coverage acts as income replacement to protect important assets until you can return to work. You have two disability programs available through your benefits program:

Voluntary Short-term Disability (STD) that requires you to enroll to receive benefits.

Employer-Paid Long-Term Disability (LTD) automatically enrolled.

Disability Insurance Highlights

	STD Coverage	LTD Coverage
Who Pays the Premiums	Employee pays 100% of costs	Employer pays 100% of costs
Benefits Percentage	Replaces up to 60% of pay	Replaces up to 60% of pay
Benefit Maximum Available	Up to \$1,500 per week	Up to \$5,000 per month
When Benefits Begin	Following a 14-day waiting period	After 180th day of disability
How Long Benefits are Paid	Up to 24 weeks	Social Security normal retirement age or you return to work, whichever comes first



What the STD and LTD Plans Do Not Cover

The STD and LTD plans don't cover disabilities caused by:

- An accident that occurs on the job
- Self-inflicted injury, whether you are sane or insane
- · War, whether declared or not, or international armed conflict
- Active participation in a riot
- · Disabilities during employment with another employer
- Disability incurred while participating in an illegal act

401(K) & 403(B) RETIREMENT SAVINGS PLANS

Great River Health provides employees who are at least 18 years old with a retirement savings plan to help you prepare financially for retirement. Employees will be automatically enrolled in the employer contribution the first of the month following your anniversary date. This excludes Henry County Health Center associates.*

Pre-Tax vs. Roth Contributions

There are two main types of 401(k) & 403(b) retirement savings plans: pre-tax and Roth. The difference really comes down to a single word: TAXES.

Pre-Tax- This one's for anyone who wants to put off paying taxes. Any money you save or invest isn't taxed until you withdraw it in retirement. Withdrawals are considered income and will be taxed at your current (retirement) federal and state tax rates. A pre-tax contribution also reduces your overall annual income, so you'll pay lower taxes while working.

Example: If your annual salary is \$35,000 and you contribute \$5,000 to a pre-tax 401(k), you'll only pay taxes on \$30,000 for that year.

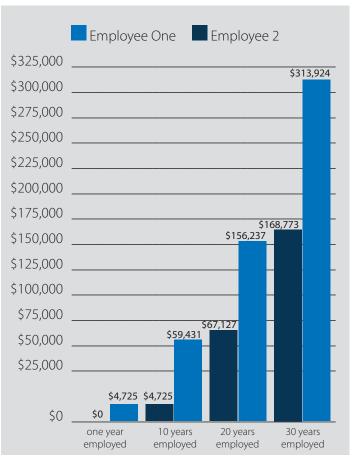
ROTH - A Roth contribution functions similarly to a pretax contribution, with one big difference — you make contributions to a Roth 401(k) with after-tax dollars. This type of plan is for anyone who wants to pay taxes now. Then, when you pull money out of the plan during retirement, you won't pay any taxes on the withdrawal.

Starting Early Pays Off! Compounding Interest Example

Starting your retirement savings journey early can pay off. As your account balance grows, you earn a larger amount due to compounding interest.

Take for example two employees. Employee One begins contributing his first year of employment, while Employee Two waits until his tenth year of employment. Both employees contribute 5% to their401(k) and receive a 4% match from Great River.

When they're ready to retire at age 67, Employee one has almost double the ammount saved for retirement as Employee Two.



Based on both employees receiving the same average rate of return.

^{*}Henry County employees do not participate in the 401k and 403b but are automatically enrolled in IPERS.



You can change your contributions — even the automatic 6% enrollment rate — at any time. To make a change and learn more, visit Fidelity at www.netbenefits.com/atwork and log in or register as a new user.

Pre-Tax 401(k) Highlights

Pros:

Employee-managed

Easy way to save using payroll deductions. Choose from several investment funds.

Contribute more each year

Higher contribution limit and catch-up feature for anyone 50 or older. 2024 Limit:\$23,000 (\$31,000 after the age of 50).

Note: Limits are for traditional and Roth 401(k) contributions combined.

Increased saving potential

Contributions aren't taxed, when deducted from your paycheck, so you save more each pay period. This means more interest earned, and more money in the long run.

Cons:

Taxes at withdrawal

When you take money out at retirement, you'll pay taxes at the current federal and state rates, which could be higher if rates rise each year.

Roth 401(k) Highlights

Pros:

Employee-managed

Easy way to save using payroll deductions. Choose from several investment funds.

Similar contributions

A Roth 401(k) has the same annual contribution limits as a pre-tax 401(k). Note: Limits are for pre-tax and Roth 401(k) contributions combined.

Secure

Again, this type of 401(k) is transferable if you leave the company.

No taxes upon withdrawal

When you retire, the money you see in your Roth 401(k) is what you get — no tax deductions occur.

Cons:

Contributions are not tax deductible

Roth contributions do not allow you to lower your taxable income at the time contributions are withheld from your paycheck.

	401(k) Plan	403(b) Plan
Eligible Employees	All non-CWA eligible employees	Only CWA eligible employees
Match	100% of the first 5% contributed	100% of the first 2%. See bargaining agreement for non-elective details.
Vesting	100% vested right away.	100% vested right away.

All employees who have been employed for one year and worked 520 hours in that year are eligible for the company match. Those employees will start receiving the match on the first of the month following their eligibility date.



Do you have funds remaining in a 401(k) from a previous employer? If so, you can roll them over into your Great River Health Retirement plan.

SELF BENEFITS

Great River Health's voluntary benefits, such as accident, critical illness, and hospital indemnity insurance, provide an added layer of financial protection by paying a cash benefit to help you cover various expenses.

SUPPLEMENTAL MEDICAL PLANS

Accident Insurance

No matter how good your medical insurance plan is, it won't cover everything if you have a serious accident. This means you'll still have out-of-pocket expenses .If you miss work because of an accident, your living expenses such as food, a mortgage, utilities, etc. won't stop. Accident insurance pays you a cash benefit if you have a covered accident outside of work that requires medical care (such as a broken bone, burn, concussion, or ruptured disc). Benefits are paid directly to you, and you decide how to use the money.

Critical Illness Insurance

The treatment to recover from a critical illness is vital, but it can also be expensive. Your medical coverage may only cover some of the costs associated with treatment. You're still responsible for deductibles and coinsurance. And if you have to miss work because of treatments, that only adds to your financial worries.

Critical illness coverage helps provide financial support if you're diagnosed with a covered critical illness. You choose benefits to protect yourself and any family members. Then, if diagnosed with a covered critical illness, you will receive a cash benefit based on a percentage payable for the condition. You decide how to use the cash benefits.

Plan – Critical Illness	Coverage
Employee	You may purchase in increments of \$5,000 up to \$20,000
Spouse	You may purchase in increments of \$5,000 up to \$20,000. You may not exceed 100% of employee amount
Child	Coverage is limited to 25% of employee elected amount

Learn More

Visit www.reliancematrix.com for more information about your accident, critical illness, or hospital indemnity insurance options.

NEW* HOSPITAL INDEMNITY INSURANCE

An unexpected hospital stay can become a financial burden if money is tight and you aren't prepared. But having the right coverage in place before you experience a sickness or injury can help eliminate your financial concerns and provide support at a time when it's needed most.

Hospital indemnity insurance pays a cash benefit for hospital confinements. This benefit is paid directly to you and can keep you from withdrawing money from our personal bank account or your HSA for hospital related expenses. You can use the cash benefits however you wish.

Benefits

Hospital Admission	\$1,250 at GRH Facility \$1,000 All other facilities
Hospital Confinement benefit	\$100/day
Nursery Confinement benefit	\$50/day
Nursery Admission	\$300 in addition to the Hospital admission

PET INSURANCE- NATIONWIDE

Nationwide pet insurance helps you cover veterinary expense so you can provide your pets with the best care possible-without worrying about the cost.

My Pet Protection coverage highlights

My Pet Protection is available in two reimbursement options (50% and 70%) with an optional \$500 wellness benefit so you can find coverage that fits your budget! Base plans have a \$250 annual deductible and \$7,500 annual benefit.

Coverage includes2:

- · Accidents
- Illnesses
- · Hereditary and congenital conditions
- Cancer
- Behavioral treatments
- · Rx therapeutic diets and supplements
- Wellness¹ and more

My Pet Protection includes these additional benefits for cats and dogs:

- · Lost pet advertising and reward expense
- Emergency boarding
- · Loss due to theft
- Mortality benefit

What makes My Pet Protection different?

My Pet Protection is available through your employer's voluntary benefit plan, which includes preferred pricing and is guaranteed issuance.³ It also includes additional benefits like lost pet advertising, emergency boarding and more.

It's no surprise that My Pet Protection is the most paw-pular coverage plan from America's #1 pet insurer.⁴



Did you know? Nationwide is the first provider with coverage plans for birds and exotic pets.

Nationwide offers more than great coverage

vethelpline®

- 24/7 access to veterinary experts
- · Available via phone, chat and email
- Unlimited help for everything from general pet questions to identifying urgent care needs

Nationwide **PetRx**Express

- Save time and money by filling pet prescriptions at participating in-store retail pharmacies across the U.S.
- · Pharmacy submits claims directly to Nationwide
- More than 4,700 pharmacy locations

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Learn more at http://www.petinsurance.com/grhs

2024 EMPLOYEE PREMIUMS

Great River Health is committed to providing high-quality benefits coverage at affordable rates. Find the plans that give you the most value and fit your family's current and anticipated needs.

MEDICAL PLANS BI-WEEKLY PREMIUMS

Fully Benefit Eligible	Health Basic	Core HDHP	Value HDHP	Partially Benefit Eligible	Health Basic	Core HDHP	Value HDHP
Employee Only	\$62.00	\$35.59	\$21.24	Employee Only	\$236.15	\$226.46	\$212.40
Employee +1	\$283.38	\$181.16	\$127.44	Employee +1	\$472.30	\$452.91	\$424.80
Employee + Family	\$425.06	\$267.58	\$188.03	Employee + Family	\$708.44	\$668.95	\$626.78

WRAP PLANS BI-WEEKLY PREMIUMS

	Fully Benefit Eligible	Partially Benefit Eligible
Employee Only	\$32.85	\$66.24
Family	\$87.43	\$144.66

LIFE INSURANCE RATES

Rates Per \$1,000 Of Coverage (after tax)				
	EE supp life	Spouse vol life	Child Rate	
<25	\$0.043	\$0.054		
25-29	\$0.051	\$0.065		
30-34	\$0.068	\$0.077		
35-39	\$0.077	\$0.099		
40-44	\$0.104	\$0.141		
45-49	\$0.143	\$0.226	\$0.18	
50-54	\$0.277	\$0.415		
55-59	\$0.537	\$0.779		
60-64	\$0.804	\$1.216		
65-69	\$1.442	\$2.030		
70+	\$2.587	\$3.888		

DENTAL PLANS BI-WEEKLY PREMIUMS-FULLY BENEFIT ELIGIBLE AND PARTIALLY BENEFIT ELIGIBLE

	Dental Plus	Dental Basic
Employee Only	\$10.04	\$3.33
Employee + Spouse	\$30.08	\$18.12
Employee + Child(ren)	\$42.07	\$24.80
Employee + Family	\$73.90	\$47.10

Biweekly rates are based off 24 pay periods.

2024 EMPLOYEE PREMIUMS

Great River Health is committed to providing high-quality benefits coverage at affordable rates. Find the plans that give you the most value and fit your family's current and anticipated needs.

VISION PLANS BI-WEEKLY PREMIUMS - ALL BENEFIT ELIGIBLE

	Vision Plan
Employee Only	\$4.54
Employee + Spouse	\$8.50
Employee + Family	\$12.47

VOLUNTARY SHORT-TERM DISABILITY MONTHLY PREMIUMS - FULLY BENEFIT ELIGIBLE ONLY

	Vol STD
Employee Per \$10 of coverage	\$0.72

CRITICAL ILLNESS MONTHLY PREMIUMS -FULLY BENEFIT ELIGIBLE ONLY Benefit from \$5,000 to \$20,000

	Rate per \$1,000
0-29	\$0.25
30-39	\$0.32
40-49	\$0.81
50-59	\$1.73
60-69	\$3.69
70+	\$10.26
Child	\$0.54

AD&D MONTHLY PREMIUMS - FULLY BENEFIT ELIGIBLE ONLY

AD&D INSURANCE RATES (all ages)		
Employee supplemental AD&D insurance	Monthly rate per \$1,000 = \$0.02	
Spouse AD&D insurance	Monthly rate per \$1,000 = \$0.02	

HOSPITAL INDEMNITY BI-WEEKLY PREMIUMS - FULLY BENEFIT ELIGIBLE ONLY

	Hospital Indemnity
Employee Only	\$10.04
Employee + Spouse	\$17.12
Employee + Child(ren)	\$14.49
Employee + Family	\$21.42

ACCIDENT PLAN BI-WEEKLY PREMIUMS - FULLY BENEFIT ELIGIBLE ONLY

	Accident
Employee Only	\$5.81
Employee + Spouse	\$9.90
Employee + Child(ren)	\$9.45
Employee + Family	\$13.236

IMPORTANT CONTACTS

BENEFIT	CARRIER	PHONE	WESITE		
HEALTH CARE BENEFIT					
Medical Plan Claims Processor (includes pharmacy benefits)	Employee Benefit System	319-758-8470	www.ebs-tpa.com		
Dental Plan Claims Processor	Employee Benefit Systems	319-758-8447	www.ebs-tpa.com		
Vision Plan Benefits	EyeMed	866-939-3633	www.eyemed.com		
WELLNESS RESOURCES					
Employee Assistance Program	Employee & Family Resources	877-883-1387	efr.org/myeap		
SAVINGS AND SPENDING ACCOUNTS					
Health Savings Account (HSA)	Fidelity Investments	866-402-7610	www.netbenefits.com/atwork		
Flexible Savings Account (FSAs)	Fidelity Investments	866-402-7610	www.netbenefits.com/atwork		
INCOME PROTECTION AND FINANCIAL SECURITY					
Life and AD&D Insurance	Reliance Standard	800-351-7500	www.reliancestandard.com		
Short-Term and Long-Term Disability Insurance	Reliance Standard	800-351-7500	www.reliancestandard.com		
401(k) \$ 403(b) Retirement Savings Plan	Fidelity Investments	800-343-0860	www.netbenefits.com/atwork		
SUPPLEMENTAL MEDICAL AND OTHER VOLUNTARY BENEFITS					
Accident, Critical Illness, and Hospital Indemnity Insurance	Reliance Standard	800-351-7500	www.reliancestandard.com		
HUMAN RESOURCES					
Human Resources		319-768-3750	askhr@greatriverhealth.org		

Notes	



While every effort has been made to ensure the accuracy of the information in this Benefits Guide, the plan documents and contracts will prevail in any discrepancies. In addition, Great River Health and Henry County Health Center reserves the right to modify or terminate any benefit plans at any time. For a copy of the Great River Health or Henry County Health Center summary plan description or other detailed plan documents, contact your Human Resources Department.