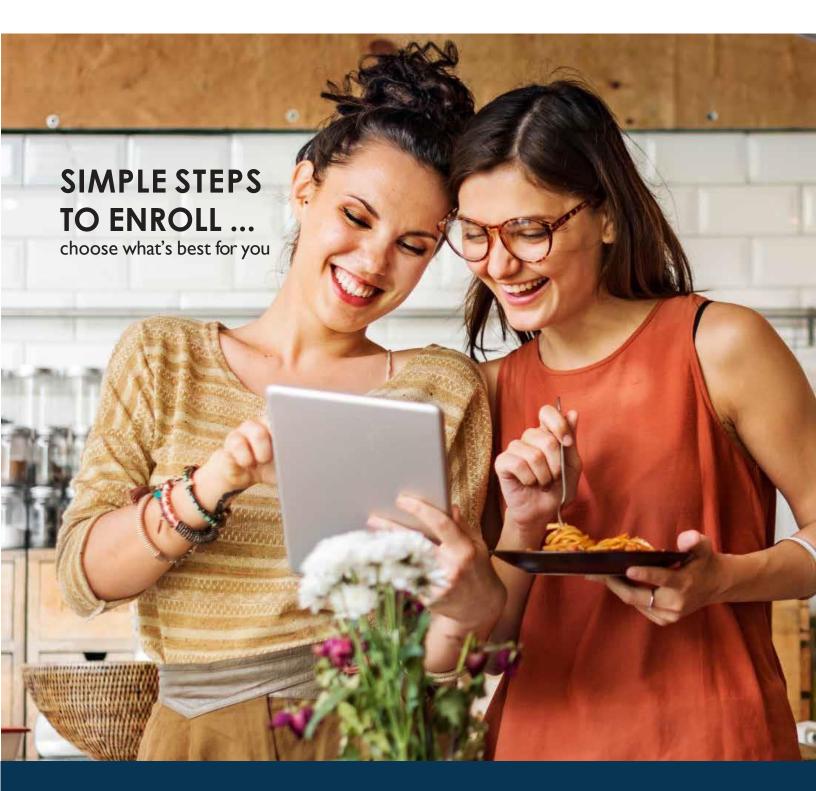
# 2025 **BENEFITS GUIDE** designed with YOU in mind





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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 <a href="http://www.grhtotalrewards.com">www.grhtotalrewards.com</a> for more details.

#### What's New in 2025?

#### New Decision Support Tool

• GRH is thrilled to introduce Alex- a personalized benefits guide from Jellyvision. Alex is designed to help employees better understand their benefits and make more informed decisions that align with their individual needs. With Alex's assistance, employees can navigate their benefits with ease and confidence.

https://start.myalex.com/great-river-health-systems-inc

#### **Enhanced Fertility Benefits**

- GRH is removing the lifetime maximum on fertility services. This means that eligible employees can now access fertility services without any limitations on the number of treatments.
- The co-insurance for fertility services will increase to 70%, making it more affordable for employees seeking these services.

#### **Coverage for Bariatric Surgery**

 In line with our commitment to well-being, GRH will now provide coverage for Bariatric Surgery at Great River Health. Eligible employees who have enrolled in and completed the three-month weight loss program, Operation Transformation <u>Weight Loss</u> | <u>Great River Health</u> may be eligible for coverage. The health plan will cover the surgery at deductible and coinsurance levels for those who meet the eligibility criteria.

#### **New Premium Relief Program**

• To further support our employees, we are introducing the Premium Relief program. This program aims to assist employees in reducing premiums for their medical coverage by providing financial assistance based on total household income. Employees must be a fully-benefits eligible and complete an application for assistance by the required deadline to be considered.

#### New Carriers to Know ...

- UMR will be our new carrier for Medical and COBRA services.\*
- UHC will be our new carrier for Dental services.\*
- CVS/Caremark will be our new pharmacy benefit manager.\*

#### Other Changes to Understand ...

- We have reduced the premiums for family coverage, making it more affordable for employees to extend coverage to their dependents.
- Services for endocrinology and gastroenterology received at UIHC will be covered as tier I benefit
- We are partnering with UMR/United Healthcare to offer expanded telemedicine options through Teladoc. Teladoc will offer General Medicine, Mental Health, and Dermatology services and be billed at Tier 2.

\*Employees who elect medical coverage during open enrollment can expect to receive their UMR/UHC Medical Insurance card by mid-December 2024. New hires who elect medical coverage in 2025 can expect to receive their medical ID cards within 30 days of enrollment. Medical ID cards include both medical and prescription coverage. Employees and new hires who elect dental coverage for 2025 will not receive a physical ID card. ID Cards for dental coverage are available by registering for an account through United Healthcare or is typically electronically accessible by dental providers.

## 2025 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 2025. Elections will NOT carry over from the previous year.

#### **Current Employees**

Your benefit elections must be made during the annual Open Enrollment Period – October 28, 2024 – November 8, 2024.

Any benefits you choose will be in effect from January 1, 2025 to December 31, 2025.

#### **New Hires**

You have 30 days from your date of hire to make your benefit elections. If hired on or before December 1, 2024, you will need to make elections for both 2024 and 2025 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 28 November 8 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 your date of hire, or on day one, if you are hired on the first of the month.

### **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 28 – November 8, 2024

Generally, benefits you elect during Open Enrollment will be effective January I 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

## \* NEW- PREMIUM RELIEF PROGRAM

We are excited to announce the launch of our new "Premium Relief" program, designed to provide eligible employees with reduced premiums for our Health Basic, Value, and Core HDHP options. This program aims to improve affordability and access to health care coverage for our valued employees and their families.

#### How it works:

Through the Premium Relief program, employees have the opportunity to apply for financial assistance based on their total household income. By considering factors such as adjusted gross income, the number of dependents claimed on the 2023 Federal Individual Income Tax Return, and your hourly base rate, we can determine if you and your family are eligible for the Premium Relief reduction.

#### Benefits of the Program:

- 1. Lower Healthcare Costs: The program offers a 50% premium reduction, making it easier for you to afford highquality health insurance for yourself and your family.
- 2. Greater Financial Flexibility: By reducing your out-ofpocket costs for healthcare, you'll have more room in your budget for other essential expenses.
- 3. Improved Access to Care: With more affordable health coverage, you can take care of your health needs without worrying as much about the cost, including preventative services like checkups and screenings.

#### To apply for Premium Relief:

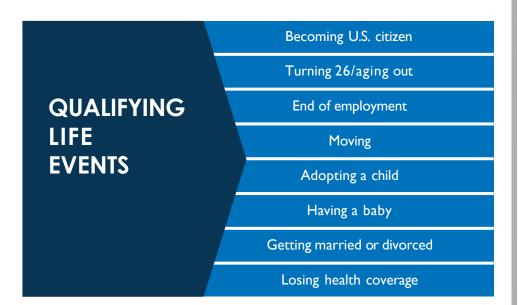
- I. Select My Benefits on our Total Rewards site and then click on the 2025 Premium Relief Application link.
- 2. Print and complete the application and attach a copy of the first two pages of your 2023 Federal Individual Income Tax Return. If you are married, filing jointly, submit one tax return. If you are married, filing single or head of household, or have a common law spouse covered on your medical insurance, you'll need to submit copies of the first two pages of your tax return and your spouse's return.
- Return the application and tax return(s) to askhr@greatriverhealth.org by the close of the Open Enrollment period or within 30 calendar days of your new hire/new eligibility date.

## Note:

If you did not file a 2023 Income Tax Return, you will not be eligible for the 2025 Premium Relief program.

# 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.

	Wha	t 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	x	x	x	Х	х	
Health Savings Account	x	X	X	х	х	х
Health Care FSA	x	X	x	х	X	
Dependent Care FSA	x	Х	x	х		
Voluntary Employee Life/AD&D, Spouse/Dependent Life	x	х	x	х		х
Required Documentation	Marriage certificate, divorce decree, death certificate	Birth certificate, adoption agreement, or death certificate			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

#### **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.

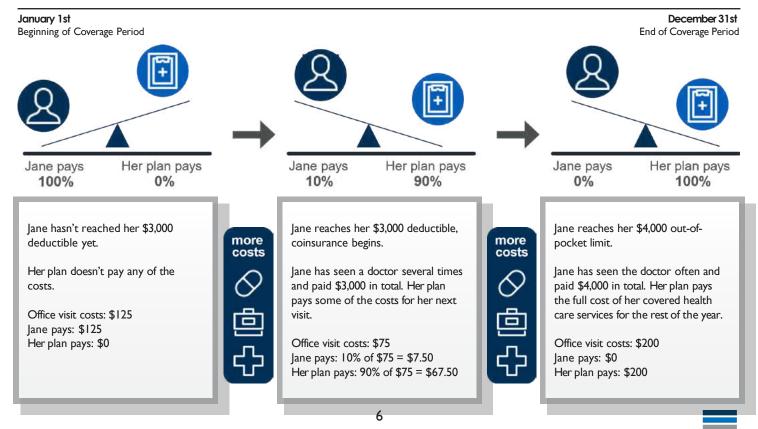
**COINSURANCE:** Your share (percentage) of costs after you've met your deductible.

#### 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.

### You and Your Insurer Share Costs – Example

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



# **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 long- term 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, YOU HAVE OPTIONS.

TELEMEDICINE THROUGH GRH PROVIDERS IS AVAILABLE AS A TIER 1 SERVICE. TELADOC THROUGH UMR/UNITED HEALTHCARE IS AVAILABLE AS A TIER 2 SERVICE.

## **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	Family Medicine of Mt. Pleasant, P.C.	Burlington Neurology & Sleep Clinic, PLC
Henry County Health Center (HCHC)	Davis Radiology	Burlington Ear, Nose and Throat, PC
Advance Physical Therapy – Keokuk location	Forefront Dermatology	

#### **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-UnitedHealthcare Choice Plus Network
- To find a provider: <u>https://www.umr.com/find-a-</u>
- provider/unitedhealthcare-choice-plus-network-english
- 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 (UHC Choice Plus Network)	Out-of- Network ***	Preferred (Affiliated Providers)	In-Network (UHC Choice Plus Network)	Out-of- Network ***	Preferred (Affiliated Providers)	In-Network (UHC Choice Plus Network)	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% (deductble 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% (deductble 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% (deductble 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 ded	recopay indicated; uctible combined edical	Not covered	Combined	with medical	Not covered	Combined	with medical	Not covered
Prescription Drug Out-of-Pocket Maximum	copay out of poor	\$3,000(family) ker; specialty drug primum combined nedical	Not covered	Combined	with medical	Not covered	Combined	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 & OFM 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 2025, 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.

## HOWTHE HDHP WORKS (see page 5 for definitions)

	100% OF ADDITIONAL EXPENSES	
You Pay, Then Plan Pays	OUT-OF-POCKET MAXIMUM	<b>Out-of-Pocket Maximum</b> 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	<b>Coinsurance</b> 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.
Plan Pays	PREVENTIVE CARE (Plan pays 100% for annual physical, well-woman, well-baby, mammograms, certain cancer screenings)	<b>Preventive Care</b> Covered in full; you pay nothing.

\* 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.

### Plan Ahead with Your Health Savings Account

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

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	\$4,300	\$500	\$3,800	
Family	\$8,550	\$1,000	\$7,550	
AGE 55 OR OLDER (until enrol	AGE 55 OR OLDER (until enrolled in Medicare)*			
Employee-only	\$5,300	\$500	\$4,800	
Family	\$9,550	\$1,000	\$8,550	

\*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



\* 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 \$3,200 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.

	HEALTH CARE FSA	LIMITED PURPOSE FSA	DEPENDENT CARE FSA
Who may enroll?	Great River Health- Health Basic participants	All Employees	All Employees
What types of expenses are reimbursable? <sup>1</sup>	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?	\$3,200	\$3,200	\$5,000*
Does the company contribute?	No	No	No
Do leftover funds roll over each year?	Yes, any money between \$150 and \$640 can be rolled over from your 2024 FSA. Anything less than \$150 or more than \$640 will be forfeited.		No, you must use it or lose it – funds remaining at the end of the plan year are forfeited.

## Quick Look: YOUR FSA OPTIONS

\* 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 (\*New carrier for 2025)

#### UHC Basic Plan PPO

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

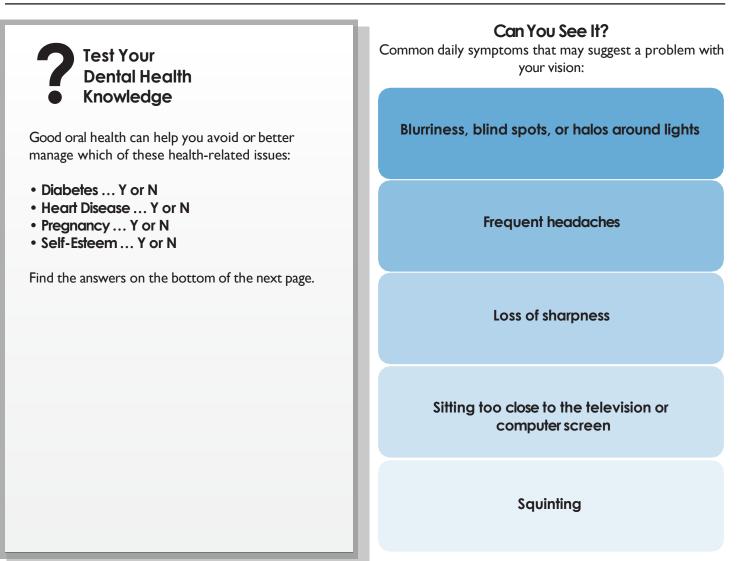
#### **UHC Plus Plan PPO**

- 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



## 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	Y		
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 deductik \$1,500 lifetime maxin		

## **QUICK LOOK AT VISION:**

Vision Care Services	In-Network Cost	Out of Network Reimbursement
Exam Services – once every plan year		
Exam at Plus Provider	<b>\$0</b> 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 every pla	an 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	e 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 I	\$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 I	\$57 copay Up to	
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 сорау	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 visits a	re 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
UVTreatment	\$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.

## **Employee Assistance Program**

- Available to all employees
- 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

### **Great River Health Telemedicine**

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

## **UMR/United Healthcare Teladoc**

- •Available to employees and dependents enrolled in medical coverage through Great River Health at tier 2 costs.
- •See a general medicine provider 24/7, 365
- •Mental Health services are available 7 days a week between 7am and 9pm.
- •Upload photos of skin issues for a dermatologist to review and receive a response within one business day.

#### **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	I x salary not to exceed \$300,000	l x salary not to exceed \$300,000		
Salary	I.5 x salary not to exceed \$300,000I.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 \$500,000	
CWARNs	\$50,000	\$50,000	Increments of \$5,000 up to \$250,000 max. (can't exceed 100% of Employee's	
Spouse	NA	NA	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. **If 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



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.

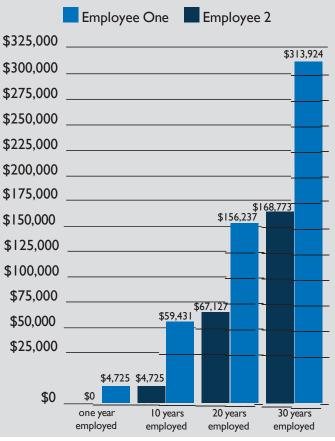
**ROTH** - A Roth contribution functions similarly to a pretax contribution, with one big difference — you make contributions to a Roth 401(k) with after-tax dollars. This type of plan is for anyone who wants to pay taxes now. Then, when you pull money out of the plan during retirement, you won't pay 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 amount 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 <u>www.netbenefits.com/atwork</u> 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. 2025 Limit: \$24,000 (\$32,000 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 pretax 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-CVVA 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.

# TIP:

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.

## RETIREMENT SAVINGS PLANS – HENRY COUNTY HEALTH CENTER EMPLOYEES

## IOWA PUBLIC EMPLOYEE RETIREMENT SYSTEM (IPERS) PROGRAM

Employees of Henry County Health Center will be automatically enrolled in the Iowa Public Employee Retirement System (IPERS) program. IPERS is a state-run plan in which participation is mandatory. Pre-tax contributions are defined by the state of Iowa and are included below.

Worker Classification	Employee Contribution	Employer Contribution
Regular Members	6.29%	9.44%
Protection Occupation	6.21%	9.31%

#### **Vesting in IPERS**

Eligible employees become vested after working for IPERS-covered employers for 7 years (28 quarters), or if you reach age 65 while still working for an IPERS employer. Once you're vested, the benefits you've earned are yours for life, even if you change jobs or stop working for a period of time.

### **457 PLAN**

The 457 plan is an elective pre-tax retirement plan that HCHC employees can contribute to.

• For 2024, the maximum you may contribute in the year is \$23,000. The catch-up contribution is \$7,500 for individuals age 50 year+. The 2025 annual limits have not been released at this time.

## **ENROLLMENT FOR 457 PLAN**

You may enroll in the both the 457 plan at any time during the year by contacting Two Rivers Investment Services.

Nick Bronson LPL Financial Advisor nick.bronson@lpl.com Ph. 319-758-8442





Visit <u>http://ipers.org</u> to view more information on the IPERS program including the IPERS Member handbook. You can also register for an account to view your retirement savings and sign up for education webinars.

## **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 Visi

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

## **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 possiblewithout 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 includes<sup>2</sup>:

- Accidents
- Illnesses
- Hereditary and congenital conditions
- Cancer
- Behavioral treatments
- Rx therapeutic diets and supplements
- Wellness<sup>1</sup> and more

## 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.<sup>3</sup> 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.<sup>4</sup>

## Nationwide offers more than great coverage

## **vet**helpline<sup>®</sup>

- 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

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



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

#### Nationwide PetRxExpress

- 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



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

## **2025 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.

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 + I	\$236.15	\$135.87	\$84.96	Employee + I	\$472.30	\$452.91	\$424.80
Employee + Family	\$354.22	\$200.69	\$125.36	Employee + Family	\$708.44	\$668.95	\$626.78

## MEDICAL PLANS BI-WEEKLY PREMIUMS

## 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 vo		Child Rate	
<25	\$0.043	\$0.054		
25-29	\$0.05 I	\$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	\$7.01	\$1.25
Employee + Spouse	\$24.18	\$13.94
Employee + Child(ren)	\$34.47	\$19.67
Employee + Family	\$61.76	\$38.80

Biweekly rates are based off 24 pay periods.

# 2025 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 + I	\$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	Monthly rate
AD&D insurance	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

Biweekly rates are based off 24 pay periods.

## **IMPORTANT CONTACTS**

BENEFIT	CARRIER	PHONE	WEBSITE			
HEALTH CARE BENEFIT						
Medical Plan Claims Processor	UMR	800-207-3172	www.umr.com			
Pharmacy Claims Processor	CVS/Caremark	833-775-1429	www.caremark.com			
Dental Plan Claims Processor	UnitedHealthcare	800-455-9090	www.myuhc.com			
Vision Plan Benefits	EyeMed	866-939-3633	www.eyemed.com			
WELLNESS RESOURCES						
Employee Assistance Program	Employee & Family Resources	877-883-1387	<u>efr.org/myeap</u>			
SAVINGS AND SPENDING ACCOUNTS						
Health Savings Account (HSA)	Fidelity Investments	800-544-3716	www.netbenefits.com/atwork			
Flexible Savings Account (FSAs)	Fidelity Investments	833-299-5089	www.netbenefits.com/atwork			
	INCOME PROTECTION AI	ND FINANCIAL SECURI	ТҮ			
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			
Iowa Public Employee Retirement System (IPERS) – HCHC Only	IPERS	515-281-0020	ipers.org/members			
457 – HCHC Only	Two Rivers Bank & Trust	319-758-8442	Email: Nick.Bronson@lpl.com			
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			




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.