2026

BENEFITS GUIDE

designed with YOUin mind

Great River HEALTH

SIMPLE STEPS TO ENROLL ...

choose what's best for you

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BENEFITS DESIGNED WITH YOU IN MIND

At Great River Health we offera comprehensive benefits package for ourvalued employees aspart of our commitment to you and your family. Our benefit offerings are purposefully designed to meet the needs of our employees. Visit www.grhtotalrewards.com for more details.

What's New in 2026?

Short-Term Disability Enhancement

We've partnered with Reliance Standard to enhance our Short-Term Disability plan by removing the 3/12 pre-existing condition clause.

- This improvement ensures employees can access benefits more easily when unexpected health situations occur.
- Removing this clause eliminates prior limitations and provides a smoother, more supportive experience during life's transitions.

Prescription Plan Updates

To stay compliant with new Iowa legislation (Senate File 383), we've updated our prescription plan design to ensure consistent access and fairness for all employees.

- Pharmacy tiers have been adjusted for both the Health Basic and HDHP plans.
- Employees now have the freedom to choose where to fill prescriptions without being limited to specific pharmacy locations.
- These updates help keep our plan compliant while maintaining flexibility and choice for you.

Pet Insurance Update

Beginning January 1, 2026, payroll deductions for Nationwide Pet Insurance will be discontinued.

- Employees currently enrolled may continue coverage directly with Nationwide on a self-pay basis.
- This change allows employees to manage their pet insurance directly with Nationwide for improved flexibility and control.

Your Benefits. Your Choice. Your Guide — Meet Alex!

If you want help understanding how these 2026 updates fit your personal situation, Alex can help!

This easy-to-use tool from Jellyvision walks you through your benefit options step-by-step, helping you make informed choices that work best for you and your family.

Try it today at https://start.myalex.com/great-river-health-systems-inc

2026
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 a passive enrollment this year. If not action is taken in Workday, 2025 elections will carryover to 2026. Please note that Flexible Spending Accounts will not carry over and must be re-elected.

Current Employees

Your benefit elections must be made during the annual Open Enrollment Period – October 27, 2025 – November 7, 2025.

Any benefits you choose will be in effect from January 1, 2026 to December 31, 2026.

New Hires

You have 30 days from your date of hire to make your benefit elections. If hired on or before December 1, 2025, you will need to make elections for both 2025 and 2026 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 askHR 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 27 – November 7 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 27 – November 7, 2025**

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 existingcoverage. 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 Healthemployee, 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**
- Children age 26 and older who are unmarried and a full-time student
- 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 CanHelp

- We are ready to help you understand your benefit options so you can make the right choicesforyour needs and budget.
- Call 319-768-3750, Monday through Friday, 8:00 a.m. to 4 p.m. CT, or email askHR@greatriverhealth.org

PREMIUM RELIEF PROGRAM

We are excited to offer our "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 2024 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 foryou to afford high-quality health insurance for yourself and your family.
2. **Greater Financial Flexibility**: By reducing your out-of-pocket 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:

1. Select My Benefits on our Total Rewards site and then click on the **2026 Premium Relief Application** link.
2. Print and complete the application and attach a copy of the first two pages of your 2024 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.
3. 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 2024 Income Tax Return, you will not be eligible for the 2026 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.

- Becoming U.S. citizen
- Turning 26/aging out
- End of employment
- Moving
- Adopting a child
- Having a baby
- Getting married or divorced
- Losing health coverage

Non Qualifying Life Events

Failure to pay premiums	Voluntarily dropped coverage	Failure to provide documents

Life Event Key Points

- **Benefit changes mustbe CONSISTENT with the life event …**
  Example: Your spouse just gave birth. Youcan't remove your spouse from your medical coverage when this happens because that isn't consistent with theevent. But you could add dependent coverage for the newborn child.
- **You have 30 DAYS to request changes…**
  Torequest a change in benefits, contact askHRand submit changes within 30 days(60 daysforthe birthof a child, oreligibilityorloss of Medicaidor CHIPcoverage) of when the eventoccurred.

What Benefits CanBe Changed When

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 endof employment (by spouse or dependent)	Change in yourwork hours (such as FBE to PBE)	Significant change in health care plan coverage (through your spouse's plan)	Changes allowed anytime duringthe year (qualifying life event not necessary)
Medical, Dental, Vision	X	X	X	X	X	
Health Savings Account	X	X	X	X	X	X
Health CareFSA	X	X	X	X	X	
Dependent Care FSA	X	X	X	X		
VoluntaryEmployeeLife/AD&D Spouse/Dependent Life	X	X	X	X		X
Required Documentation	Marriage certificate, divorce decree, death certificate	Birth certificate, adoption agreement, or death certificate	Letter from employer confirming prior coverage termination date andreasonfor 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 out-of-pocket costs. In addition to your plan premiums, out-of-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.

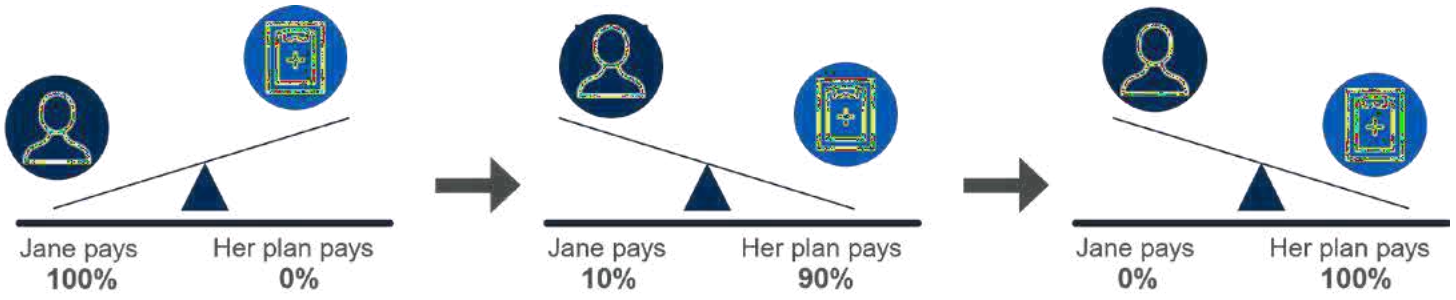
OUT-OF-POCKET (OOP) MAXIMUM: The most you have to pay in copays, deductible, and coinsurance during a single year. Once you reach it, your health insurer typically covers 100% of costs for the rest of the year.

You and Your Insurer Share Costs – Example

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

January 1st
Beginning of Coverage Period

December 31st
End of Coverage Period



Jane hasn't reached her $3,000 deductible yet.

Her plan doesn't pay any of the costs.

Office visit costs: $125
Jane pays: $125
Her plan pays: $0

more costs

Jane reaches her $3,000 deductible, coinsurance begins.

Jane has seen a doctor several times and paid $3,000 in total. Her plan pays some of the costs for her next visit.

Office visit costs: $75

Jane pays: 10% of $75 = $7.50
Her plan pays: 90% of $75 = $67.50

more costs

Jane reaches her $4,000 out-of-pocket limit.

Jane has seen the doctor often and paid $4,000 in total. Her plan pays the full cost of her covered health care services for the rest of the year.

Office visit costs: $200

Jane pays: $0
Her plan pays: $200

MEDICAL PLAN OPTIONS

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

How to Pick the Right Plan!

Key Differentiators	Health Basic	Coreor Value HDHP
Costof coverage(Premium)	Highest	Lowest
Cost-sharingfornon-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
Typeof accountoffered	Flexible spending account	Health savings account and a limited purpose FSA
Health savings account funding by Great River Health	No	Yes
THIS PLANMAY BE THE RIGHT CHOICEFOR YOU IFYOU …	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 careexpenses 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.

WHENYOU ANDYOUR 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 ASATIER 2SERVICE.

MEDICAL PLAN INFORMATION

For all medical plans, the followingservices (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, CTScans and Pet Scans
- Physical Therapy
- Durable Medical Equipment
- Home Health Care
- Bariatric Surgery

Affiliated Providers		
Southeast Iowa Regional Medical Center	Family Medicine of Mt.Pleasant, P.C.	Burlington Neurology & Sleep Clinic, PLC
Henry County Health Center (HCHC)	Heritage Medical Equipment and Supplies	Burlington Ear, Nose and Throat, PC
Advance Physical Therapy – Keokuk location	Forefront Dermatology	

Medical Plan

Each Medical Plan has a network structure. There aredifferent 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: https://www.umr.com/find-a-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 ofanother group's medical plan deductible and out-of-pocket payments, physician office co-pays and prescription co-pays. It doesnot cover dental or vision and it doesnot 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

PLAN PROVISION	HEALTH BASIC			COREHDHP			VALUE HDHP		
	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% (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	90%*	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 Pharmacies and Other In-Network Pharmacies		Out-of-Network	Heritage Pharmacies and Other In-Network Pharmacies		Out-of-Network	Heritage Pharmacies and Other In-Network Pharmacies		Out-of-Network
Prescription Drug Deductible	No deductible where co-pay indicated; specialty drug deductible combined w/ medical		Not covered	Aligned with Tier 2 Deductible $3,500/$6,900 (combined w/ medical)		Not covered	Aligned with Tier 2 Deductible $4,000/$8,000 (combined w/ medical)		Not covered
Prescription Drug Out-of-Pocket Maximum	$1,500 (single) $3,000 (family) co-pay out of pocket; specialty drug out-of-pocket maximum combined with medical		Not covered	Aligned with Tier 2 Deductible $3,500/$6,900 (combined w/ medical)		Not covered	Aligned with Tier 2 Deductible $4,500/$9,000 (combined w/ medical)		Not covered
Generic	$8		Not covered	100%*	100%*	Not covered	90%*	90%*	Not covered
Brand Name (Formulary)	$39		Not covered	100%*	100%*	Not covered	90%*	90%*	Not covered
Brand Name (Non-Formulary)	$68		Not covered	100%*	100%*	Not covered	90%*	90%*	Not covered
Specialty Drugs	75%*		Not covered	100%*	100%*	Not covered	90%*	90%*	Not covered

* After deductible is met

**Family coverage Deductibles and Out-of-Pocket Maximums are aggregates, meaning everyone in your family works toward one shared deductible/OPM. Once that total is met, the plan starts paying for everyone's covered care.

*** 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 admitted for emergency services 80% coinsurance (deductible waived) applies 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 applicable coinsurance applies and 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 coinsurance apply for all tiers and all tiers will accrue toward the in network deductible and out of pocket maximum. If service is not an emergency app licable coinsurance applies and 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:

1

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

HDHP participants may open a personal health savings account (HSA) topay for eligible health expenses — including deductibles and coinsurance — with tax-free* dollars. Asan added bonus, Great River Health contributes toyour account to help you cover costs — in 2026, 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.

2

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.

3

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.

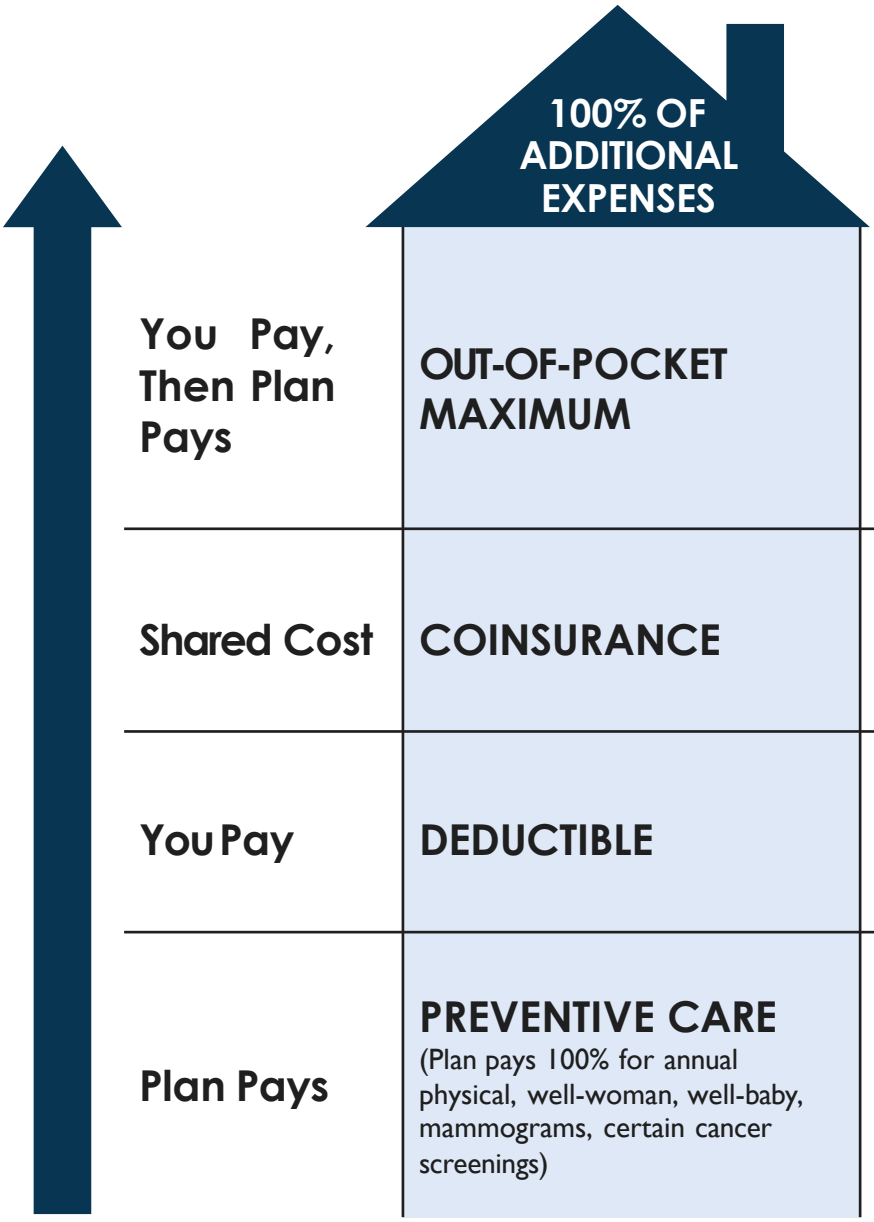
Preventive Care
This plan pays 100%.

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)



Out-of-Pocket Maximum

You're protected by this annual limiton yourout-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.

Coinsurance

Once you meet the deductible, you and the plan share the cost of covered services. Each pays a percentage of coinsurance.

Deductible

You pay 100% of expenses up to the annual deductible.

Preventive Care

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 HSAcover 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 youretireorleave Great River Health.
- Roll over any unused dollarsand earn tax-free* interest on your account.

HOW THE HSA WORKS

A health savingsaccount lets you pay for current orfuture health careexpenses 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
UNDERAGE 55			
Employee-only	$4,400	$500	$3,900
Family	$8,750	$1,000	$7,750
AGE 55 OROLDER(until enrolled in Medicare)*			
Employee-only	$5,400	$500	$4,900
Family	$9,750	$1,000	$8,750

*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

1

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 doesnot 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

GROWIT

Unused money in your HSA automatically rolls over fromyearto year. You never lose funds in your HSA. They go withyou 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**.

GettheNetBenefits Mobile App!

Download the free NetBenefits mobileapp foruse on your smartphone or tablet.

Apple

Android

Remember,
youcan't haveafull-service
FSA and an HSA
atthesametime.

Important Tax Tips

Because your HSAoffers significant tax advantages, there are also a few tax-related itemsyou need to be aware of.

Save your receipts in case of an IRS audit.
You are responsible forproving that you used your HSA only for qualified medical expenses. If you use your HSA funds for other expenses, you will owe taxeson 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. Youwillneed to submit Form 8889 along with yourtax 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 HSAfrom you and Great River Healthexceed 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 HSAcontributions (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 Healthoffers 3 types offlexible 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 FSAand 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 $3,300 for eligible health careexpenses. Any unused funds except forwhat's eligible to be rolled overare forfeited at year's end.

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

Take advantageof payrolldeduction. 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. Youcannotuse health care FSAfundsto pay dependent care expenses, or vice versa.

Use-It-Or-Lose-It Rule

Plan your health care FSA contribution amount carefully. Any unused fundsgreater 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.

***Current FSA Limits are based on 2025 maximums as 2026 maximums are not yet available.**

Quick Look: YOUR FSA OPTIONS

	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?[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?*	$3,300	$3,300	$5,000*
Does the company contribute?	No	No	No
Do leftover funds roll over each year?	Yes, any money between $150 and $660 can be rolled over from your 2025 FSA. Anything less than $150 or more than $660 will be forfeited.		No, you must use it or lose it – funds remaining at the end of the plan year are forfeited.

* 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 Healthprovides 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

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 Restorativecarecoveredat 100%after deductible
- Orthodontiaservicescovered at 50% to a lifetime maximum of $1,500

Vision Plan Highlights

EyeMedVISION
- 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 ofthe next page.

Can You Seeit?

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 PAY		
Preventative Care		
Exams, Cleanings, etc.	100% – deductible waived	100% – deductible waived
Basic Services		
Fillings, Simple/Surgical Extractions, etc.	80% – after deductible	100% – after deductible
Major Procedures		
Oral Surgery, Crowns, etc.	50% – after deductible	50% – after deductible
ORTHODONTIA		
Adults	NotCovered	NotCovered
Children	NotCovered	50% – after deductible $1,500 lifetime maximum

TEST YOUR KNOWLEDGE: Answer is All of Them

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 every 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 visits 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. Usethese resourcesto 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 800-327-4692 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 dependentsenrolled 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 forfree.You'll receive instructions for how to create an account orconnect your existing one.

The ancientpracticeof meditation dates back thousands ofyearsand is most often associated with Buddhism.

WEALTH BENEFITS

Great River Health's life and disabilityinsurance programsare designed to help secure yourincomeand 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 lifeand voluntary AD&D, orboth, but you will pay 100% of the premiums.

Age Reduction

Your basic life/AD&Dcoverages 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 yourhealth. Onceyour benefit event is submitted, you will receivea 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.

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

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

• Person(s) •Trust •Charity

Youcanchangeyour beneficiary designation at any time.

Youmay designate asole beneficiary or multiple beneficiaries to receive payment in the amount youspecify.

Select or changeyour beneficiary in Workday Employee Self-Service.

What is AD&D insurance?

Quick Look: LIFE/AD&D INSURANCE

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

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 youcan do without.**It couldbe more important thanyou 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:

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

2 **Employer-Paid Long-Term Disability (LTD) automaticaly enroled.**

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 towork, 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'sforanyone 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. Apre-tax contribution also reduces your overall annual income, so you'll pay lower taxes while working.

Example: If yourannual salary is $35,000 and you contribute $5,000 to a pre-tax401(k),you'll only pay taxes on $30,000 for that year.

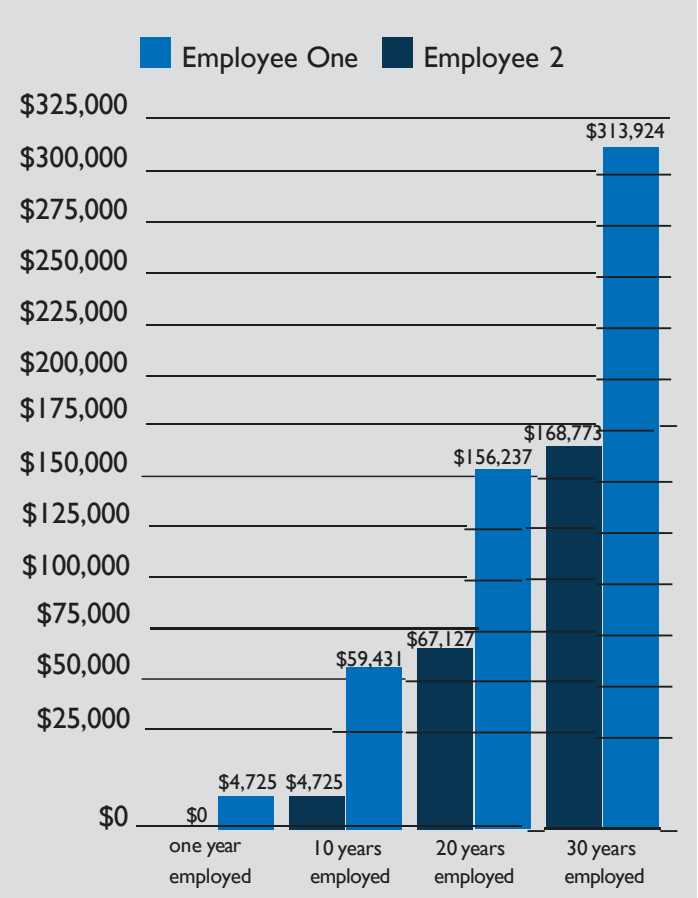
ROTH - ARoth contribution functions similarly to a pre-tax contribution, with one big difference — you make contributions to a Roth 401(k) with after-tax dollars. This type of plan is for anyone who wants to pay taxes now. Then, when you pull money out of the plan during retirement, you won't pay any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

TIP: 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 moreeachyear
Higher contribution limit and catch-up feature for anyone 50 or older. 2026 Limit: $23,500 ($32,000 after the age of 50).

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

Increasedsaving 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 moneyout 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
ARoth 401(k) has the same annual contribution limits asa pre-tax401(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.

Notaxes upon withdrawal
When you retire, the money you see in your Roth 401(k) iswhat you get — no taxdeductions occur.

Cons:

Contributions are not tax deductible
Roth contributions do not allow you to lower your taxable incomeat the time contributions are withheld from your paycheck.

	401(k) Plan	403(b) Plan
Eligible Employees	All non-CWAeligible employees	Only CWAeligible employees
Match	100% of the first 5% contributed	100% of the first 5% contributed
Vesting	100% vested right away.	100% vested right away.

Eligible employees must be employed for one year and worked 520 hours in that year to become eligible for the company match. Employees who meet this criteria 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 2026, the maximum you may contribute in the year is $23,500. The catch up contribution is $7,500 for individuals age 50+.

ENROLLMENT FOR 457 PLAN

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

***Current annual limits are based on 2025 maximums as 2026 maximums are not yet available.**

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

Two Rivers Bank & Trust

TIP: Visit http://ipers.org 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 asaccident, critical illness, and hospital indemnityinsurance, 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 froma critical illness is vital, but it can also be expensive. Your medical coveragemay only cover some of the costsassociated with treatment. You're still responsible fordeductibles 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 yourselfand 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	You may purchase in the amount of $1,000 up to $5,000

Learn More Visit www.reliancematrix.com 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 fromour personal bank account oryour HSAfor hospitalrelated expenses. You can use the cash benefits however you wish.

Benefits

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

2026 EMPLOYEE PREMIUMS

Great River Health is committed to providing high-quality benefits coverageat 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	$67.58	$38.80	$23.15	Employee Only	$281.53	$267.97	$251.21
Employee +1	$257.40	$148.10	$92.61	Employee +1	$563.05	$535.93	$502.42
Employee + Family	$386.10	$218.75	$136.64	Employee + Family	$844.57	$793.48	$743.21

WRAP PLANS BI-WEEKLY PREMIUMS

	Fully Benefit Eligible	Partially Benefit Eligible
Employee Only	$35.81	$71.61
Family	$95.30	$190.60

LIFE INSURANCE RATES

Rates Per $1,000 Of Coverage (after tax)			
	EE supp life	Spouse vol life	Child Rate
<25	$0.043	$0.054	$0.18
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	
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

2026 EMPLOYEE PREMIUMS

Great River Health is committed to providing high-quality benefits coverageat 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 + 1	$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	$13.24

Biweekly rates are based off 24 payperiods

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	800-327-4692	efr.org/myeap
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
INCOMEPROTECTION AND FINANCIAL SECURITY			
Life and AD&D Insurance	Reliance Standard	800-351-7500	www.reliancestandard.com
Short-Termand 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
HUMANRESOURCES			
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 rightto modify or terminateany benefit plans at any time. Fora copy of the Great River Health or Henry County Health Center summary plan description or other detailed plan documents, contact your Human Resources Department.