



**Deaconess
Illinois**

2024-2025

**EMPLOYEE
BENEFITS GUIDE**

October 1, 2024 – September 30, 2025

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Contacts

Benefits Section of Human Resources

Heartland: (618) 998-7775 | Crossroads: (618) 241-8762
Red Bud: (618) 282-5100 | Union: (618) 833-4511 x4297
BenefitQuestions1@deaconess.com
Office Hours: 7:00 am to 4:00 pm

Leave of Absence Section of Human Resources

(812) 450-8258 | HRLOA@deaconess.com
Office Hours: 7:00 am to 3:00 pm



Deaconess OneCare (844) 378-7103
deaconessonecare.com
OneCare Provider Directory: onecarecollaborative.com



Optum Rx (800) 506-4605
optumrx.com



Deaconess Wellness Department
(812) 450-1FIT(1348)
wellness@deaconess.com
MyWellness Portal Help Desk
(800) 581-9910

Deaconess Employee Assistance Program (EAP)

Deaconess EAP (812) 471-4611 or (800) 874-7104
deaconess.com/EAP



SupportLinc by CuraLinc (EAP)
(888) 881-LINC (5462)
supportlinc.com
Group Code: deaconess



Paramount Dental (800) 727-1444
insuringsmiles.com



VSP Vision Care (800) 877-7195
vsp.com



Employee Benefits Corporation
Flexible Spending (FSA), Dependent Care (DCAP), Health Reimbursement (HRA)
(800) 346-2126
ebcflex.com



The Hartford
Life and Accidental Death & Dismemberment
(888) 563-1124
Short-Term Disability, Long-Term Disability, FMLA
(888) 277-4767
thehartford.com/employee-benefits/employees
Critical Illness, Accident & Hospital Indemnity
(866) 547-4205
myhealthhub.app/thehartford
Policy # 402724



Fidelity (800) 343-0860
fidelity.com/atwork



Nationwide Pet Insurance (800) 540-2016
benefits.petinsurance.com/deaconess



tuition.io (855) 353-9395
deaconess.tuition.io

DEACONESS ILLINOIS | TOTAL REWARDS PROGRAM

Deaconess Illinois offers a total rewards program to employees. Below is a summary of the rewards currently offered to **NON-SUPERVISORY EMPLOYEES**. Coverage for benefits begins on the first of the month, following one full month of employment, unless otherwise noted (for example, an employee becomes benefit eligible on August 2nd, coverage will begin on October 1st).

***DSS Employees are eligible for the items marked with an asterisk**

***This document provides summary information only. In the event of any conflict, the official Plan documents and Policies and Procedures will govern.**

BENEFIT OPTIONS		
Benefit	Features and Eligibility	Who Pays
Medical Insurance 2 Plans (Pre-Tax)	Coverage for employees (and dependents) authorized to work at least 40 hours per two-week pay period. A Health Reimbursement Account (HRA) and biweekly incentives can also be received through our Wellness program to offset medical plan costs.	Deaconess And Employee
Medical Premium Assistance Program (MPA)	The Medical Premium Assistance Program provides financial assistance to Deaconess full-time employees by providing those who qualify with a 20% savings on their medical premiums.	Deaconess
Dental Insurance 2 Plans (Pre-Tax)	Coverage for employees (and dependents) authorized to work at least 40 hours per two-week pay period.	Deaconess And Employee
Vision Insurance 2 Plans (Pre-Tax)	Coverage for employees (and dependents) authorized to work at least 40 hours per two-week pay period.	Employee
Short Term Disability	Receive 60% of base salary when disabled for more than 8 days for employees authorized to work at least 40 hours per two-week period. 90 day waiting period from hire date.	Deaconess
Long Term Disability	Receive 60% of base salary when disabled for more than 180 days for employees authorized to work at least 40 hours per two-week period. 90 day waiting period from hire date.	Deaconess
Basic Life Insurance	One times your annual base salary with a \$20,000 minimum up to certain limits for employees authorized to work at least 40 hours per two-week pay period.	Deaconess
Short Term Disability Buy-Up	Receive an additional 10% of base salary when disabled for more than 8 days for employees authorized to work at least 40 hours per two-week pay period. 90 day waiting period from hire date.	Employee
Optional Life Insurance	Additional coverage available at 100%, 200% or 300% your annual base salary with a \$500,000 max for employees authorized to work at least 40 hours per two-week pay period.	Employee
Dependent Life Insurance	Employee may purchase coverage for spouse and eligible dependent children if employee is authorized to work at least 40 hours per two-week pay period.	Employee
Health Care Flexible Spending Account (Pre-Tax)	Employee may elect to direct an annual minimum of \$100 to annual maximum of \$3,200 into a non-taxable reimbursement account for eligible medical expenses. Debit Card available.	Employee
Dependent Care Flexible Spending Account (Pre-Tax)	Employee may elect to direct an annual minimum of \$100 to annual maximum of \$5,000 into a non-taxable reimbursement account for eligible dependent care expenses.	Employee
Health Reimbursement Account	Employee and Spouse can each earn \$400 (\$800 annually) into this account through the completion of wellness activities. The money can only be used for medical expenses and will rollover each plan year until \$6,000 cap. Employee and Spouse must be enrolled in the health plan.	Deaconess
Voluntary Benefits	Coverage for employees (and dependents) authorized to work at least 40 hours per two-week pay period. Includes accident, hospital indemnity, critical illness, and pet insurance policies.	Employee

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OTHER BENEFITS		
Benefit	Features and Eligibility	Who Pays
*Deaconess Employee Assistance Program	Free short-term counseling and referral for employees and member of their household.	Deaconess
*Continuing Education	Several courses and conferences offered with CE available.	Deaconess
*Health Services	Pre-employment physical exam, health screenings, immunizations, and Wellness Program	Deaconess
*Leave of Absence	Available for Medical, Family, Military, and Educational purposes.	Deaconess
Military 2-Week Leave	Difference in military pay and regular base rate if authorized 60-80 hours in a two-week pay period.	Deaconess
*Pay Check Deposit	Pay checks are automatically deposited in a checking or savings account as authorized. The first check will be mailed to the employee's address for all new hires or following a change in banking institution; with subsequent checks being direct deposited.	Deaconess
*Payactiv	Payactiv gives you access to the money you have worked for, but haven't been paid yet. The money that you access is then deducted from your next paycheck along with a small processing fee.	Employee
*Rest Period	Fifteen-minute rest period during each shift of at least 8 hours.	Deaconess
*Social Security	Monthly retirement/disability benefits	Deaconess and Employee
*Retirement Savings Plan	Employees may direct salary up to the federal maximum contribution limits into 401(k). Deaconess will match 100% of the first 1% of contributions plus 50% of the next 5% of contributions after 12 months of service.	Deaconess and Employee
*Transfer	Opportunity for advancement after introductory period of six months.	Deaconess
Educational Assistance	Financial assistance up to \$5,250 per year for educational training if authorized at least 40 hours per two-week pay period. Employees can participate as soon as employed. Reimbursement will be held until employee satisfactorily completes the first six months of employment.	Deaconess
Step-Up Program	Receive normal wages for the time spent in enrolled class hours/clinical hours up to a maximum of 18 hours per week. Specific programs only.	Deaconess
*Tuition.IO Student Loan Wellness Program	Tuition.IO offers access to a full suite of tools to help manage student loans and education expenses for employees and their families.	Deaconess
*Unemployment Compensation	Coverage as determined by the State for loss of income when out of work.	Deaconess
*Uniforms	Uniforms furnished for designated departments.	Deaconess
*Worker's Compensation	On-the-job accident/illness coverage for loss of income and medical expenses according to State Law.	Deaconess

ADDITIONAL SERVICES AND BENEFITS		
Benefit	Features and Eligibility	
*Wellness Program	Variety of online activities	
*Deaconess RN OnCall:	For questions regarding an acute illness or injury, call 812-450-7681 or 1-800-967-6795, 24 hours a day, 365 days a year, to speak with an RN.	
Deaconess Clinic Urgent Care Video Visits	Convenient video visits for minor illnesses if enrolled in the Deaconess Health Plan. Go to www.deaconess.com/DHSLIVE to go directly to the free page for employees. Available 365 days a year from 8:00 am-8:00 pm.	

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COMPENSATION																																																		
Benefit	Features and Eligibility	Who Pays																																																
Bereavement Pay	An excused paid absence of up to 24 hours may be granted to full time employees, authorized 40-80 hours, for a death in the immediate family (includes step family members): spouse, child, parent, guardian, brother, sister, mother-in-law or father-in-law, grandparent, great grandparent, grandchild, great grandchild, miscarriage/stillbirth by employee or spouse. An employee will receive full pay, at regular rate, for absence from scheduled workdays. Generally, must be used within two weeks following the death.	Deaconess																																																
Jury Duty	Difference in jury pay and regular base pay if authorized 40-80 hours per two-week pay period.	Deaconess																																																
Paid Time Off (PTO)	<p>Full Time and Part time (non-DSS) Employees accrue PTO based on hours paid and length of service. Employees must use PTO for a scheduled or non-scheduled absence. Employees authorized 40 or more hours a pay period must use PTO during the first seven days before Short-Term Disability will begin to pay.</p> <p>PTO is ONLY paid out upon termination if any one of the following criteria are met:</p> <ul style="list-style-type: none">• Seniority date prior to 10/1/2022• At least two years of seniority• Employed in the state of Illinois <p>An employee reducing authorized hours from Full time (>60 hours) to Part time will be paid out available PTO in excess of their part time annual authorized hours accrual.</p> <p>See chart below.</p> <table><tr><td>Years of Service:</td><td>0-4 years</td><td>4-14 years</td><td>14+ years</td></tr><tr><td>Accrual Rate Per Hour:</td><td>.0692</td><td>.0885</td><td>.1078</td></tr><tr><td>Max. Bank Accrual:</td><td>288</td><td>368</td><td>448</td></tr><tr><td>Paid Hours ↓</td><td colspan="3">Accrual per Pay Period* (Annual Accrual)</td></tr><tr><td></td><td>↓</td><td>↓</td><td>↓</td></tr><tr><td>80</td><td>5.54 (144)</td><td>7.08 (184)</td><td>8.62 (224)</td></tr><tr><td>40</td><td>2.77 (72)</td><td>3.54 (92)</td><td>4.31 (112)</td></tr></table> <p><i>*Hours will vary based on actual hours worked</i></p> <table><tr><th colspan="4">BREAK DOWN OF HOURS per YEAR WORKED AT FULL TIME 80 HOURS</th></tr><tr><td>HOURS</td><td>0-4 years</td><td>4-14 years</td><td>14+ years</td></tr><tr><td>Holiday Time</td><td>6 days (48hrs)</td><td>6 days (48hrs)</td><td>6 days (48hrs)</td></tr><tr><td>Personal/Sick/Vacation Time</td><td>12 days (16hrs)</td><td>17 days (16hrs)</td><td>22 days (16hrs)</td></tr><tr><td>TOTALS per year</td><td>18 days (144hrs)</td><td>23 days (184hrs)</td><td>28 days (224hrs)</td></tr></table> <p><i>*Hours worked less than 80 are pro-rated on hours worked</i> <i>*All days are figured on an 8-hour day</i></p>	Years of Service:	0-4 years	4-14 years	14+ years	Accrual Rate Per Hour:	.0692	.0885	.1078	Max. Bank Accrual:	288	368	448	Paid Hours ↓	Accrual per Pay Period* (Annual Accrual)				↓	↓	↓	80	5.54 (144)	7.08 (184)	8.62 (224)	40	2.77 (72)	3.54 (92)	4.31 (112)	BREAK DOWN OF HOURS per YEAR WORKED AT FULL TIME 80 HOURS				HOURS	0-4 years	4-14 years	14+ years	Holiday Time	6 days (48hrs)	6 days (48hrs)	6 days (48hrs)	Personal/Sick/Vacation Time	12 days (16hrs)	17 days (16hrs)	22 days (16hrs)	TOTALS per year	18 days (144hrs)	23 days (184hrs)	28 days (224hrs)	Deaconess
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Illinois Paid Leave (IPL)	All employees (full time, part time and DSS) accrue IPL based on hours worked. Hours are not available until an employee has met a 90-day waiting period and accrued at least 2 hours. IPL may be used for a scheduled or non-scheduled absence. IPL is NOT paid out at separation of employment. Employees accrue 1 hour of IPL for every 40 hours worked to a maximum of 40 hours per calendar year. Up to 40 hours of IPL can be carried over but only 40 hours can be used in any calendar year. Hours in excess of 80 in IPL bank on 12/31 will be forfeited.																																																	

Benefit Eligibility Information

The Deaconess Employee benefits program offers you the flexibility to choose the options that best suit your needs.

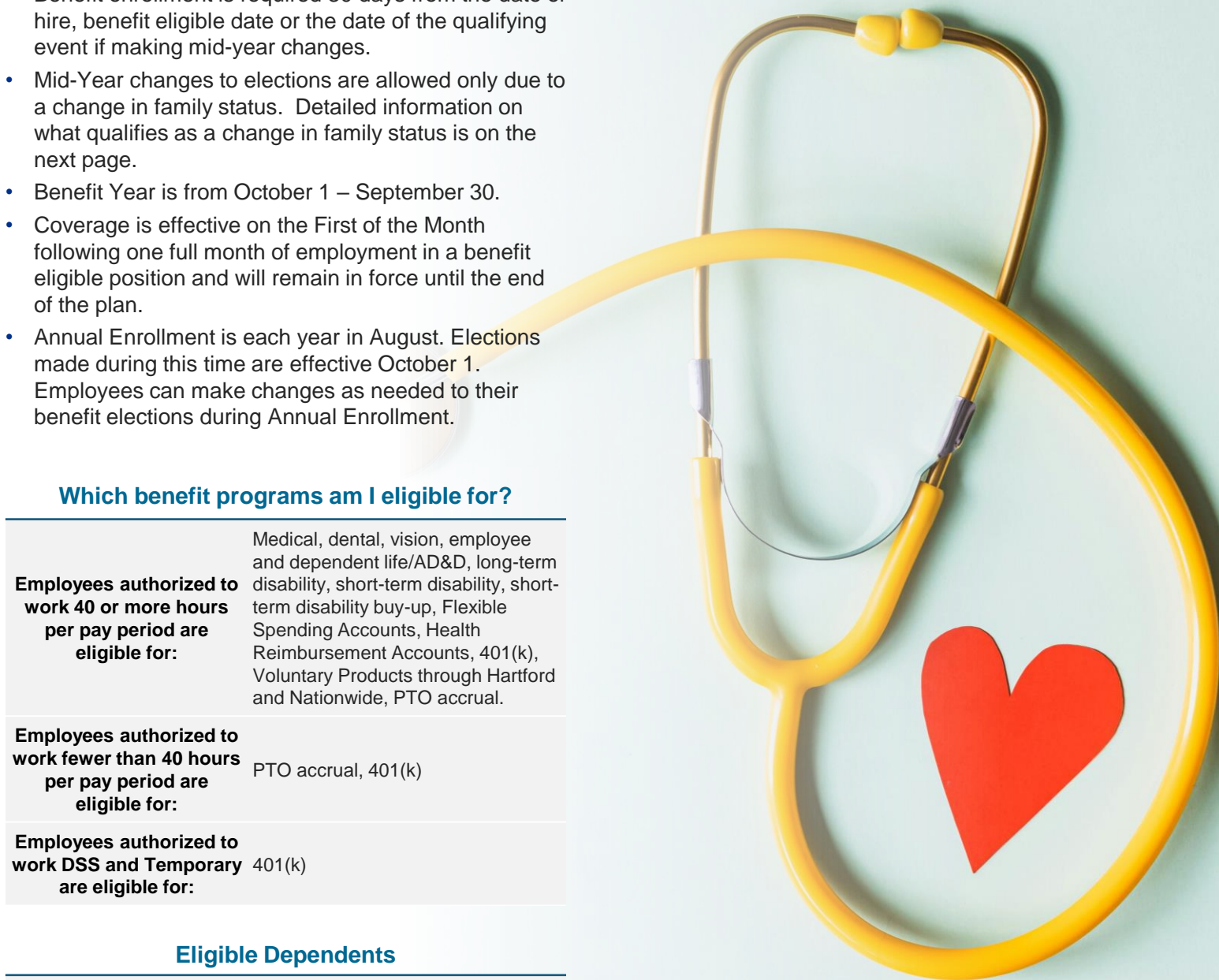
- Benefit enrollment is required 30 days from the date of hire, benefit eligible date or the date of the qualifying event if making mid-year changes.
- Mid-Year changes to elections are allowed only due to a change in family status. Detailed information on what qualifies as a change in family status is on the next page.
- Benefit Year is from October 1 – September 30.
- Coverage is effective on the First of the Month following one full month of employment in a benefit eligible position and will remain in force until the end of the plan.
- Annual Enrollment is each year in August. Elections made during this time are effective October 1. Employees can make changes as needed to their benefit elections during Annual Enrollment.

Which benefit programs am I eligible for?

Employees authorized to work 40 or more hours per pay period are eligible for:	Medical, dental, vision, employee and dependent life/AD&D, long-term disability, short-term disability, short-term disability buy-up, Flexible Spending Accounts, Health Reimbursement Accounts, 401(k), Voluntary Products through Hartford and Nationwide, PTO accrual.
Employees authorized to work fewer than 40 hours per pay period are eligible for:	PTO accrual, 401(k)
Employees authorized to work DSS and Temporary are eligible for:	401(k)

Eligible Dependents

Spouse	Someone you are currently, legally married to in accordance with state law recognized in Indiana. It does not include common law marriage, domestic partner, roommate, etc.
Child	Natural born children, stepchildren, legally adopted children and children for whom you are a legal guardian up to age 26 regardless of student, marital or job status

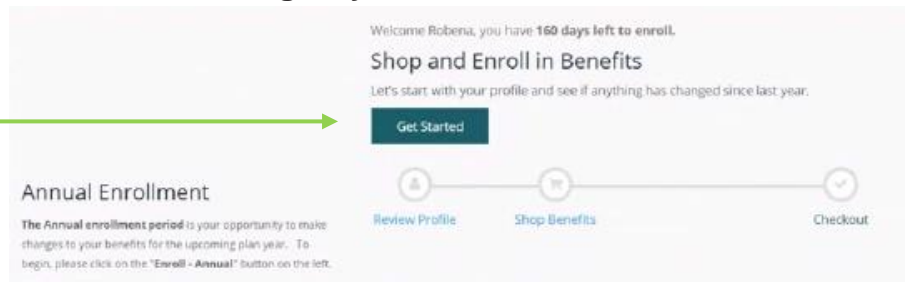


UKG Benefit Enrollment Instructions

Once logged into UKG...

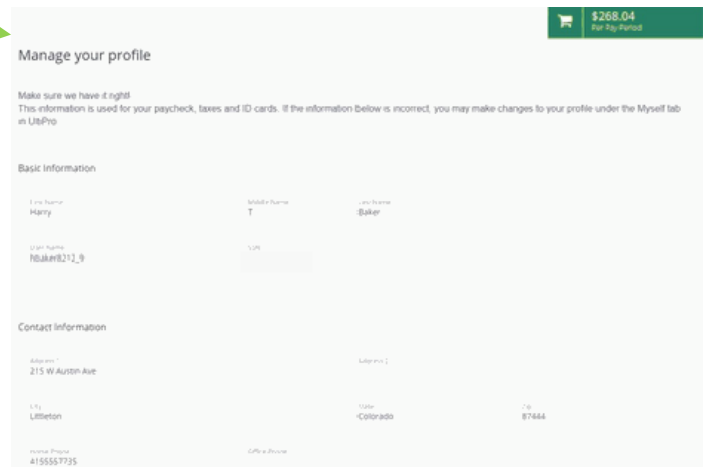
Step 1: Navigation: Menu > Myself > Benefits > Manage My Benefits

Select **Get Started** to begin the benefits selections process.



The **My Profile** page appears.

Step 2: From the **My Profile** page, review and verify that all of your profile information is correct.



Step 3: Scroll to the bottom of the page and select **Next: Review My Family**.

The **Dependent Information** page appears. At the **Current Family Members** section, you can:

- Review or edit the dependent information on file for current family members.
- Remove a family member from receiving benefits through your plan.
- Add a family member as a dependent.

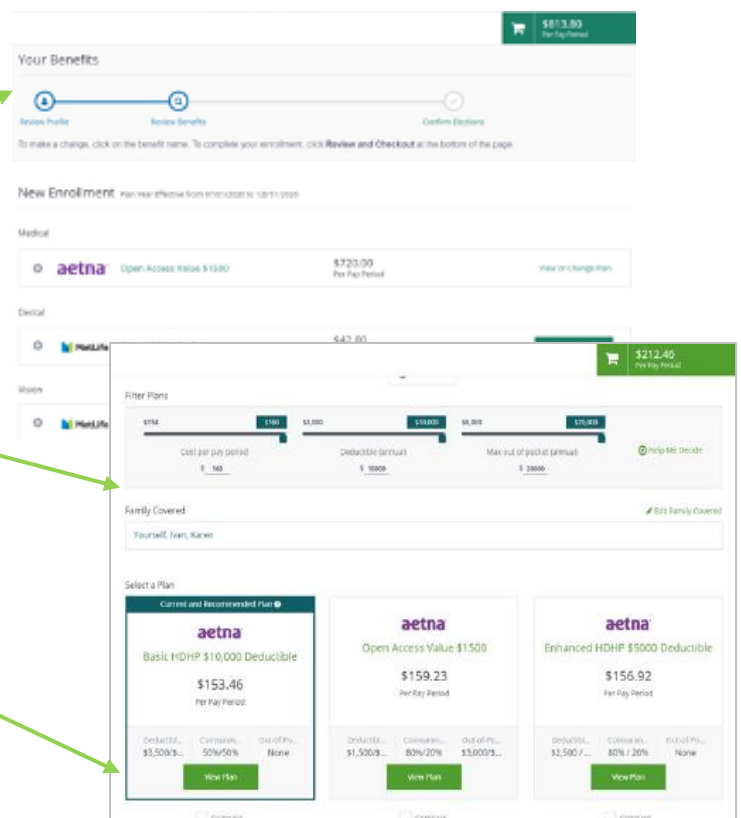
Step 4: Select **Next: Shop for Benefits**.

The **Current Benefit Elections** page appears.

- In the **New Enrollment** section, select the **Shop Plans** button for each of the benefit plans available to you (for example, Medical, Dental, Vision), as applicable.

The **Shop for Plan** page appears.

- Additional information for the selected benefit type appears. Select **View More** to expand the information. Additional Content, when available, provides additional general information.



UKG Benefit Enrollment Instructions (cont'd)

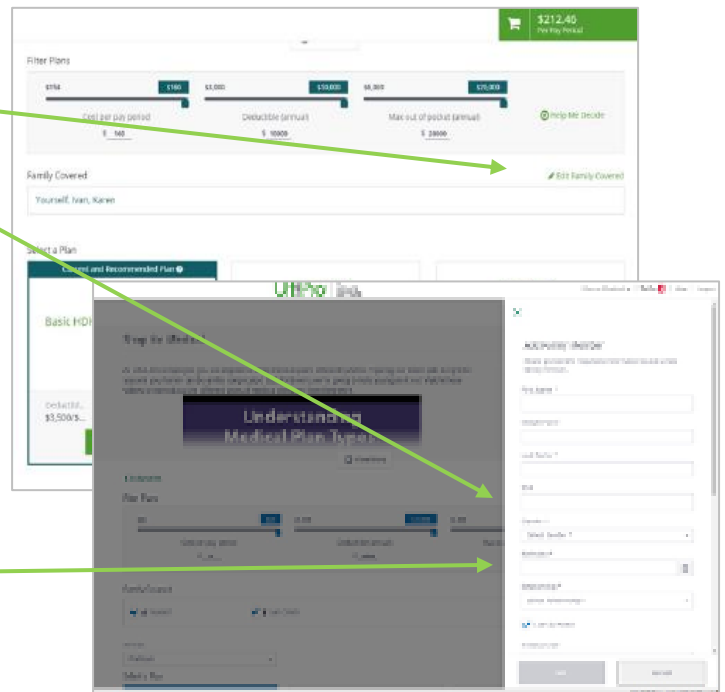
- In order to add a family member directly from the plan page, select Add Family Member link.
- A card appears on the right-hand side of the page.

Note When adding a family member, the change only applies to the selected coverage. However, the family member is available for selection, if applicable, on other coverages.

For example, if you select a family member while viewing the medical plan, this election does not automatically apply to your dental plan. Regardless, you can select the added family member to the dental plan by following the same process.

- Enter the family member's First Name, Middle Name, Last Name, and SSN.
- Select Gender from the drop-down list.
- Enter the birth date.
- Select relationship from drop-down list.

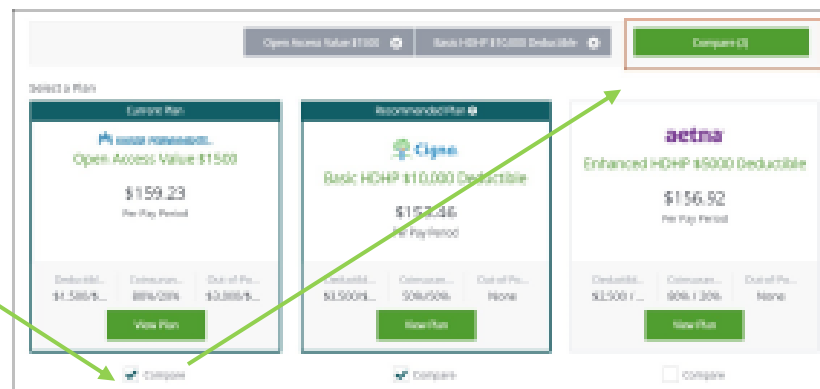
Note Additional information may be required. Complete as applicable.



- Select **Add**. The family member appears in the Family Covered section.
- Shop for a benefit plan by viewing available plans in the **Filter Plans** section.
- View plans by:
 - Adjusting the available filters to view the benefit plans available to you that match the filtered criteria.
 - Selecting **Help Me Decide** to navigate through questions to help you select a benefit plan. This feature is only available when you have three or more benefit plans available for selection.

Note For benefits that require a beneficiary, select one or more Primary Beneficiaries. A beneficiary can be a current dependent or you can add a new beneficiary, as needed. The total allocation amount for Primary Beneficiaries must add up to 100%.

- When you have the choice of more than one plan, each plan displays on a separate card that summarizes key parts of the plan. Select a plan to view details, such as coverage levels and per pay period amounts and to access benefits and coverage information.
 - Check the **Compare** box below two or more benefit plans to review the details of the selected plans.
 - Select **Compare**. The **Compare Plan Benefits** page displays the selected plans.
 - Select **View Plan** to review a plan in more detail.
- From the selected plan details page, select **Update Cart** to add a benefit plan to your Annual Enrollment cart. You must select or decline all coverages to complete the Annual Enrollment process.



UKG Benefit Enrollment Instructions (cont'd)

Step 5a: From the **Current Benefits Elections** page, select **Review and Checkout**.

Step 5b: The **Confirm Your Benefit Elections** page appears. Each benefit election you selected is listed.

Step 5c: Select **Checkout** to confirm benefit plans selections.

Step 5d: The **Enrollment Complete** page displays your benefits enrollment information.

Step 6: From the **Documents** menu, select **My Documents** to review documents regarding your benefits or any documents required for benefits enrollment.

When documents are required, a red exclamation mark displays next to the **Documents** menu.

Making Mid-Year Changes to Benefits

Outside of your initial benefit enrollment and the Annual Enrollment period, you may make changes your benefit package within **30-days** following a family status event, including one of the following:

- Adoption
- Birth of Child
- Establish Legal Guardianship
- Death of Dependent
- Dependent Gains/Loses Other Coverage
- Divorce/Legal Separation
- Employee Gains/Loses Other Coverage
- Enrollment in Health Exchange
- Gain of CHIPRA Coverage
- Marriage
- Spouse Gains/Loses Other Coverage

All information you need to know to make an informed decision is in the Forms & Plan Documents Section of Benefits in UKG or on D-Web under Human Resources, in Benefits.

TYPES OF REQUIRED DOCUMENTS	
SPOUSE	
You will need to submit the item from List A and one item from List B. The document from List B must be dated within the last 6 months & have the dependent's name on it.	
List A	List B
Marriage Certificate	Bank or Credit Card Statement with a Common Address
	Mortgage or Lease Statement with a Common Address
	Motor Vehicle Statement with a Common Address
	Current Federal Tax Return w/ Spouse Listed (you can hide any financial information)
	Utility Bill with a Common Address
CHILD	
You will need to submit the item from List A. If your Child is a stepchild, you will need to submit your marriage certificate with Spouse listed as well as an item from List B for spouses.	
List A	
Adoption Certificate or Adoption Placement Agreement	
Birth Certificate with Parent's Name Listed	
Documentation of Legal Custody	
Documentation of Legal Guardianship	
Hospital Birth Record (within 90 Days of Birth)	
Qualified Medical Child Support Order	

Employee Benefits Corporation will notify the dependent regarding the Consolidated Omnibus Budget Reconciliation Act. Under COBRA, coverage may be continued for dependent children up to 36 months if they no longer qualify as the employee's dependent under the insurance plan.

How to submit a Life Event: To begin your enrollment, you will need to access the benefits section in UKG, and then select Life Event. You will use the **date of the event** as the effective date. This event will go to a pending status until the required documentation is submitted.

Documentation: For mid-year events, you will need to submit documentation showing the loss or gain of coverage with the effective date of change. If you are adding dependents, you will need to provide the documentation listed on this page.

All mid-year events and applicable dependent changes will remain in a pending status until all verification documents are received by Dependent Verification Services. If all documents are not received within 30 days from when the event is declared, your elected changes will be denied.

If you do not experience one of the above events during the plan year, you may **NOT** make changes to your benefit elections. The next opportunity to make changes to your benefit elections will be the following August for an effective date of October 1. If you have any questions as to what constitutes a family status change or what written proof is required, please contact the Benefits Office at 812-450-2025.

Important Notes:

- The Provider Network is location based on primary residence of the employee; all dependents need to have the address they generally reside written under their information in UKG.
- Once enrollment is complete, the Benefits Office recommends that a copy of the summary confirmation page be saved for your personal records.
- Wellness Program - Be sure to mark your calendar to complete your Annual Wellness Visit with your Primary Care Provider.
- If you are unable to enroll online, please contact the Benefits Office at 450-2025 before your 30-day deadline!
- In the event of separation of employment or reduction in hours to a non-benefit eligible status, all insurance coverage ends at midnight the last day physically worked.
- **Any change in coverage elections shall be effective as of the date of the change in status, change in coverage, or change in cost; unless otherwise required by law.**

Documentation is required within 30 days of the family status change in order to fulfill the Consolidated Omnibus Budget Reconciliation Act (COBRA) requirements.

Medical Insurance

Why the OneCare Network

Deaconess values the ability to provide employees and their families with competitive benefits, including access to a network of high-quality providers. In a climate where the cost to provide employee benefits continues to rise for employers nationwide, our partnership with the OneCare Network has enabled Deaconess to continue to provide competitive benefits at competitive rates. As we remain committed to the health and wellbeing of our employees and their families, we remain committed to the Deaconess OneCare Network.

Across a participating provider network, improved coordination of care helps ensure that patients receive the right care at the right time. What does that mean for our employees? Better care, better health outcomes, and a reduced overall cost of care. By participating in the network it enables Deaconess to offer employees and their families access to high quality providers who work together to improve the coordination of care for employees.

Deaconess offers two options of in-network coverage. The first option is the Preferred Network, Deaconess OneCare which includes IUH and Vanderbilt. The Preferred Network (tier 1) provides members the highest level of coverage allowing less out of pocket expenses. The secondary in-network option is HealthLink (tier2). This option allows coverage outside the preferred network, Deaconess OneCare, and involves higher out of pocket expenses. Should you require care from a non-OneCare network provider due to not having coverage available based on specialty or other factors, your services could be paid at the preferred network level (tier 1). However, those non-OneCare services must be pre-approved.

Notice for covered Dependents that live outside the Employee's primary network coverage area:

Dependents that are covered and live outside of the Employee's primary network service area will be allowed to access the Employee's travel network located on the back of the ID card. If services are obtained while the dependent is away from home or traveling, services will be applied to the employee's primary or secondary network. These services will be based upon the Employee's network level of coverage(s).

Emergency coverage while traveling: Employee's and their covered dependents will have access to the plan's travel network located on the back of the ID card when traveling outside the primary network coverage if emergency care is required. Should you require emergency care, services rendered will be paid at the highest network tier of coverage for you and your covered dependents.



Definitions:

Copay: a fixed amount you pay for a covered health service, usually when you receive the service. The amount can vary by the type of covered health care service.

Deductible: the dollar amount (for individual or family) a Participant is responsible to pay each year before the Plan begins to pay for certain services.

Co-insurance: the percentage of the cost of covered expenses a Participant must pay after meeting any applicable deductible.

Out-of-pocket maximum: the maximum amount a participant pays for covered medical expenses (including expenses for covered dependents, if applicable) in a Benefit Period. When the out-of-pocket maximum is reached, the Plan pays 100% of eligible covered expenses for the rest of the Benefit Period.



How to Find a Provider in Your Network:



onecarecollaborative.com

Phone: 1.812.426.9402

1. Go to 'For Patients'
2. Select 'Find a Provider/Facility'
3. Start your search

For Patients ▾

Find a Provider/Facility



Indiana University Health

iuhealth.org/find-providers

1. Search by city, condition, or name
2. You can also click on 'View all providers' for a complete list of providers

Find Providers

Search by city, condition, or name

Example: Primary Care in Avon

[View all providers](#)



VANDERBILT
HEALTH

vanderbilthealth.com

1. Select 'Find a Doctor'
2. Start your search

Find a Doctor



www.healthlink.com/ipf

Phone: 1.800.624.2356

1. Select either 'People', 'Places', 'Tests/Imaging' or 'All Providers'.
2. Select 'Type' of provider (such as Primary Care, Hospital or Lab Tests).
3. Select your 'HealthLink' from the drop-down menu, then select the 'HealthLink Open Access III' Network.
4. Finally, pick the location you want to search in by entering a 'Zip Code' and 'Mile Radius' or a 'City and State'.

FIND A DOCTOR

PEOPLE PLACES TESTS/IMAGING ALL PROVIDERS

PRIMARY CARE SPECIALISTS

SELECT YOUR NETWORK
Select your Health Plan and network from the dropdown list.
Health Plan:
Network:

LOCATED NEAR
Choose to search by either zip code radius or by city/state.
Zip: Within a Distance of: Miles
City: State:

OPTIONAL SEARCH CRITERIA
Include additional information to limit your search results. Select from the options shown for additional needs.
Type of Specialist: Last Name:

Medical & Pharmacy Plan Premiums

Full Time Employees

Authorized to work 60+ hours per pay period

	Advantage Plan Bi-Weekly Rates (26)	Standard Plan Bi-Weekly Rates (26)
Employee	\$116.61	\$71.81
Employee + Spouse	\$261.91	\$161.56
Employee + Child(ren)	\$186.58	\$114.89
Family	\$349.83	\$215.42

Part Time Employees

Authorized to work 40-59 hours per pay period

	Advantage Plan Bi-Weekly Rates (26)	Standard Plan Bi-Weekly Rates (26)
Employee	\$149.32	\$109.01
Employee + Spouse	\$335.97	\$245.26
Employee + Child(ren)	\$241.93	\$181.50
Family	\$447.98	\$326.98

Wellness Incentives (see below)

	Bi-Weekly Earning (26) to offset Medical/Pharmacy Premiums
Employee Incentive	\$33.93
Spouse Incentive	\$11.30

Employee Wellness Program & Incentives

In an effort to promote a healthy lifestyle, all employees and spouses enrolled in a medical option for health insurance coverage have the option of participating in the Deaconess Wellness Incentive Program.

The **Wellness Incentive** is a biweekly incentive credit that is used to offset medical insurance premiums. It is not a discount. You will see the full premium rate deducted from each of your paychecks, and the credit(s) are added as an earning. To receive the Wellness Incentive you must complete the following items by August 1, 2025:

- **Annual Wellness Visit with your Primary Care Provider** (August 1, 2024 – July 31, 2025)
 - *Must contain height, weight, blood pressure, cholesterol, and glucose for all; and A1C for those who have diabetes.*

For more information, please contact the Wellness Department at wellness@deaconess.com or **812-450-1FIT (1348)**.

Medical Premium Assistance (MPA)

The Medical Premium Assistance Program provides financial assistance to Full-Time employees by providing those who qualify with a **20% savings on their medical premiums**.

Family income less than **400% of 2023 Federal Poverty Guidelines**:

Family Size*	1	2	3	4	5	6
Max Income	\$58,320	\$78,880	\$99,440	\$120,000	\$140,560	\$161,120

**As determined by number of dependents and income on your 2023 federal tax return*

Full-Time employees (authorized 60+ hours/pay period) will be eligible to apply during enrollment (Annual Enrollment, New Hire Enrollment, Life Event Enrollment, and Authorized Hours Changes Part Time to Full Time).

For more information on the **Medical Premium Assistance Program**

Call: **1.812.450.2025** or email: MedicalPremiumAssistanceProgram@deaconess.com.

Medical Plan Summary

Subscribers Residing **outside** the **OneCare Service Area**
(and their Dependents)

Medical Plan Summary	Advantage Plan			Standard Plan		
	OneCare	HealthLink	Out-of-Network	OneCare	HealthLink	Out-of-Network
Annual Deductible						
Per Covered Person	\$800		Not Covered	\$1,200		Not Covered
Family Limit	\$1,600			\$2,400		
Out-of-Pocket Maximum						
Per Covered Person	\$3,000	\$5,100	Not Covered	\$3,500	\$5,100	Not Covered
Family Limit	\$6,000	\$10,200		\$7,000	\$10,200	
Office Visit						
Primary Care (PCP) Office Visit	\$20 Copay	\$40 Copay	Not Covered ¹	25%*	35%*	Not Covered ¹
Primary Care Services (Diagnostic & Procedures)	20%	30%				
Specialist (SPC) Office Visit	\$35 Copay	\$55 Copay				
Specialist Services (Diagnostic & Procedures)	20%	30%				
Urgent Care Office Visit	\$35 Copay	30%*				
Urgent Care Services (Diagnostic & Procedures)	20%	30%*				
Preventive Health Benefits (PHB)						
Wellness Benefit (PHB Guidelines)	Covered in Full		Not Covered	Covered in Full		Not Covered
Routine Eye Exam	Covered in Full			Covered in Full		
Inpatient/Outpatient Services						
Emergency Room Services (True Emergency)	20%*			25%*		
Ambulance	20%*			25%*		
Emergency Room Services (Non-Emergent)	\$300 Copay +20%* Coins.	\$300 Copay +30%* Coins.	Not Covered	\$300 Copay +25%* Coins.	\$300 Copay +35%* Coins	Not Covered
Inpatient Hospital / Facility / Physician Services	20%*	30%*	Not Covered	25%*	35%*	Not Covered
Outpatient Hospital / Facility Services	20%					
Outpatient Physician Services	20%*					
Therapy Services						
Occupational Therapy^ ^Benefit Period Maximum: 30 Visits per Condition.	20%*	30%*	Not Covered	25%*	35%*	Not Covered
Physical Therapy^ ^Benefit Period Maximum: 30 Visits per Condition.						
Speech Therapy^ ^Benefit Period Maximum: 30 Visits per Condition.						
Chiropractic Office Visit & Manipulation* *Benefit Period Maximum: 20 Visits.						
	\$35 Copay	\$55 Copay				
Mental Health/Substance Abuse						
Office Visit	\$20 Copay	\$20 Copay	Not Covered	25%*	25%*	Not Covered
Intensive Outpatient (IOP)	20%	20%				
Inpatient	20%*	20%*				
Other Services						
Diabetes Training Program* *Copayment is waived if part of a Deaconess Wellness Care Plan.	\$35 Copay	Not Covered	Not Covered	\$20 Copay	Not Covered	Not Covered
Durable Medical Equipment (DME); Prosthetics; Orthotics; Home Health Care	20%*	30%*		25%*	35%*	

* After Deductible

¹ Urgent Care Center services are covered at the Other HealthLink benefit level for required Urgent Care while traveling in an area where there is not a OneCare Provider or an HealthLink Network Provider.

October 1, 2024 – September 30, 2025

Prescription Drug Benefits Advantage and Standard Medical Options

The Prescription Drug benefits which follow apply to both the Advantage and the Standard options.

	Deaconess Family Pharmacy	Optum Network Pharmacy	Optum Home Delivery/Specialty
Maximum Out-of-Pocket	\$2,200 Per Covered Person \$4,400 Family Limit		
30 Day Supply or Less			
Generic	10%: \$7 Min to \$35 Max	20%: \$15 Min to \$50 Max	Use Optum network pharmacy
Preferred Brand ¹	20%: \$45 Min to \$60 Max	30%: \$60 Min to \$80 Max	
Non-Preferred Brand ¹	25%: \$70 Min to \$85 Max	30%: \$95 Min to \$120 Max	
Generic Specialty Medication	25%: \$175 Max	Not Covered ²	25%: \$175 Max
Branded Specialty Medication	25%: \$275 Max	Not Covered ²	25%: \$275 Max
Smoking Cessation Medications ^{1, 3}	\$0	\$0	Use Optum network pharmacy
Contraceptives ¹	\$0	\$0	
Infertility Medication ⁴	50% - subject to annual max	50% - subject to annual max	
Over 30 Day, Up to 90 Day Supply			
Generic	10%: \$20 Min to \$75 Max	Not Covered--You pay 100%	10%: \$20 Min to \$75 Max
Preferred Brand ¹	20%: \$110 Min to \$150 Max		20%: \$110 Min to \$150 Max
Non-Preferred Brand ¹	25%: \$175 Min to \$210 Max		25%: \$175 Min to \$210 Max
Specialty Medication	Not Covered		Not Covered
Smoking Cessation Medications ^{1, 3}	\$0		\$0
Contraceptives ¹	\$0		\$0
Infertility Medication ⁴	50% - subject to annual max		50% - subject to annual max
Diabetic testing supplies are covered under the prescription drug benefit.			
Excluded drugs approved via clinical override will process at 100% member responsibility			

¹ If a Generic equivalent is available and either a Preferred Brand or Non-Preferred Brand drug is dispensed, the Covered Person pays the applicable cost share plus the difference in cost between the Generic version and the drug received.

² Fills of designated Specialty Medications will only be covered by the Plan if filled by the Optum Specialty pharmacy or Deaconess Family Pharmacy. However, for Members who are COBRA beneficiaries, Retirees or Eligible Dependents of a Retiree and who reside in a state outside the Deaconess Family Pharmacy's service area, fills of designated Specialty Medications will be covered, with the Deaconess Family Pharmacy member cost-sharing applied, if filled through Optum Specialty pharmacy.

³ All FDA-approved tobacco cessation medications, when prescribed by a physician, are covered, including over-the-counter medications. A Covered Person may obtain up to two 90-day treatment regimens per year; quantity limits may apply.

⁴ Infertility medications are subject to a \$5,000 annual maximum combined for 30 Day Supply or Less and Over 30 Day, Up to 90 Day Supply. Out-of-pocket contributions incurred under the infertility benefit do not apply to out-of-pocket limits for non-infertility benefits.

⁵ Walgreens is excluded from the Deaconess network.

OptumRx Website

You may find additional information about your prescription benefit at www.optumrx.com. You must first create an account, as follows:

1. For new accounts, click on the "Register or Login" button.
2. To create your Healthsafe ID account, enter the required information from your Prescription card.
3. Create your user credentials.

Once your account has been created you will have access to the following information:

- Overview of your plan and benefits
- Drug coverage and pricing, including co-pays
- Direct member reimbursement form
- Prescription history
- Order Status
- Participating pharmacies

If you have any questions regarding your prescription benefit or to find an Optum Network pharmacy, do not hesitate to call the Optum Customer Service Help Desk at 800-506-4605.

Deaconess Family Pharmacy Quick Facts

Deaconess Family Pharmacy operates three full-service outpatient pharmacy locations for your convenience:

<p><u>Deaconess Family Pharmacy Midtown</u> Located within Deaconess Hospital Midtown 600 Mary Street, Evansville Quickest access is via the West Entrance; follow the signs to the pharmacy. Access and parking are also available at the rear of the building along Edgar Street.</p>	<p><u>Pharmacy Hours for Midtown:</u> Monday-Friday 7:00 AM – 7:30 PM Saturday 10:00 AM – 4:00 PM Sunday Closed</p>
<p><u>Deaconess Family Pharmacy Gateway</u> Located at 4209 Gateway Boulevard, Newburgh, on the first floor or Gateway MOB2. Drive-thru service is available.</p>	<p><u>Pharmacy Hours for Gateway:</u> Monday-Friday 7:00 AM – 7:30 PM Saturday 10:00 AM – 4:00 PM Sunday Closed</p>
<p><u>Deaconess Family Pharmacy Henderson</u> Located on the ground floor of the South Tower inside Deaconess Hospital Henderson at 1305 N. Elm Street, Henderson, KY.</p>	<p><u>Pharmacy Hours for Henderson:</u> Monday to Friday 6:00 AM – 6:00 PM Saturday 10:00 AM – 4:00 PM Sunday Closed <i>Prescription processing is Monday through Friday 8:00 AM – 4:30 PM</i></p>

You may contact Deaconess Family Pharmacy at 812-450-DRUG (450-3784.)
 Follow the prompts to select the desired pharmacy location.

Mail Order, 90-Day Supplies

Mail service for 90-day supplies is available from Optum Home Delivery (phone 800-506-4605) or the Deaconess Family Pharmacy at Deaconess Midtown Hospital. If supplied by DFP, prescriptions for a 90-day supply can be mailed at no additional cost to addresses in Indiana, Kentucky and Illinois. Prescriptions for less than a 90-day supply will incur a \$5 mailing charge per shipment. Contact the Deaconess Pharmacy staff for more information.

Step Therapies/Quantity Limits/Formulary Exclusions

Prior authorization is required for certain medications. Quantity limits apply to certain medications. For some medications, you may need to try another therapeutically equivalent drug before the prescribed medication will be covered. Items excluded from formulary will require a change to an equivalent alternative.

Specialty Pharmacy

There are certain complex medications that have special storage and handling requirements. These include costly injectable and oral medications and select chemotherapeutic medications. They are considered specialty medications.

If you are taking a specialty medication, you must fill your prescription with Optum Specialty Pharmacy (phone 855-427-4682). Effective March 20, 2023, you must participate in the manufacturer's copay support program that applies to your medication. The amount covered by the copay card will not count towards your deductible or OOP maximum. Only your OOP cost will be applied to your deductible and OOP maximum.

Important Notes

- 90-day supplies are available via mail order only.
- Excluded (non-formulary) drugs approved via clinical override will process at 100% member responsibility.
- Pre-authorization is required for certain medications. Quantity limits apply to certain medications. Before some medications are covered, certain criteria must be met or another drug in the same therapeutic class must have been tried. Formulary exclusions will require a change to an equivalent alternative.

Annual Wellness Screening

The purpose of the wellness screening is to provide awareness and understanding of your health risks and offer ways to improve your overall health. *If you are a diabetic, an A1C is required to obtain any free supplies.*

All employees and spouses **MUST** complete a wellness screening with their primary care provider in order to earn the incentive.

Earning Your Incentive

You must complete an annual visit with your Primary Care Physician (must include all tests listed below) between August 1, 2024 to July 31, 2025 (*submission form will be on deaconess.com/For-You/Employees/Employee-Benefit-Services/Employee-Wellness or D-Web Wellness Department Page*).

Education and Resources

Deaconess offers many health promotion and management programs to employees and their spouses through the Deaconess Wellness Solutions Department. For online education & opportunities to obtain HRA credit, please go to your MyWellness Portal.

Wellness Screenings through PCP - What to Expect

1. What tests will be performed? Your PCP should:

- Measure your height and weight
- Calculate your body mass index
- Blood pressure reading
- Obtain your lipid profile consisting of total cholesterol, HDL, LDL, triglycerides, and blood glucose levels
- *Additionally, an A1C must be completed if you are diabetic*

2. Results entered for incentive

After your PCP appointment, you should then fill out the submission form through D-Web. It should take 1-2 weeks to get your results entered into the system and your wellness incentive to be uploaded. Once your results are uploaded, you will see a green check mark next to your incentive box on the home page of your wellness portal. The incentive box will be at the bottom of your Wellness Portal. If you are wanting to check please go to deaconess.ezonlineregistration.net to log-in to your MyWellness portal.

Answers to Questions We've Received

Q. What tests should be conducted during the wellness screening?

A. Your PCP should obtain total cholesterol, HDL-cholesterol, LDL-cholesterol, triglycerides, blood glucose levels. If diabetic, an A1C will be performed. They will also take your blood pressure and measure your height, weight and BMI. They will not test for hepatitis, HIV or illegal drugs.

Q. I'm pregnant. Should I get my wellness screening with my PCP now or wait until I have my baby?

A. To participate in wellness incentives, you must complete an annual visit with your PCP during the current benefit year. You will need a minimum of a blood pressure entered by your PCP. **Your OBGYN visits will not count for the incentive, it must be with a PCP.**

Q. I'm post-partum. Do I still need to complete a wellness screening with my PCP? What if I am breastfeeding?

A. To participate in wellness incentives, you must complete an annual PCP (not OBGYN) visit during the current benefit year. The screening will include blood work. If you see your PCP, you are still required to get labs. Fasting is highly recommended for best results. Please refer to the question below in regards to fasting. If you are breastfeeding, we recommend that you fast, if possible.

Q. Do I need to fast before my annual PCP visit?

A. Yes, for the best results, you should only drink water and do not eat at all during the twelve hours prior to your screening appointment. Fasting means no food, gum, mints, or liquids other than water. Please drink plenty of water and take any medications as long as no food is required.

Q. Are my wellness screening results confidential?

A. Only you and the healthcare professionals who assist you with your programming will have access to your personal results in order to provide the advice necessary for you to understand your health status and the steps you can take to improve it. You may request a release of information if you would like to send your results to another clinician assisting with your care.

Q. Does my spouse need to complete an annual wellness exam with a PCP?

A. Yes, if your spouse is on the insurance and you are wanting the incentive for them as well, they will need to complete this.

Q. If I cover my spouse under my Deaconess medical plan, will I get a bigger incentive if my spouse also gets a wellness screening?

A. You will both receive a Wellness Incentive if you both (employee and spouse) complete the wellness incentive requirements.

Q. If I don't have medical coverage through Deaconess Hospital, am I required to get a wellness screening? Can I get a screening if I want one?

A. If you do not participate in a Deaconess medical plan, you are not required to get a wellness screening.

Q. Will I still receive my insurance even if risk factors are identified at my screening?

A. All employees eligible for medical insurance will receive coverage regardless of any risk factors identified during their annual exam.



NOTICE REGARDING WELLNESS PROGRAM

Deaconess Wellness Program

Deaconess Employee Wellness is a voluntary wellness program available to all beneficiaries including spouses. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. The labs needed include a blood test for Blood Glucose, Total Cholesterol, HDL, LDL, Triglycerides, and Diabetes. The blood tests are conducted to check for areas of improvement for Hypertension, Glucose, Tobacco, BMI, Cholesterol, Diabetes, and Asthma. There is an option for you to submit an annual physical exam with a Primary Care Provider to count for your wellness incentive. You are not required to complete or submit information regarding your annual PCP exam. Employees that submit proof of an annual physical with a Primary Care provider will receive dollars in their biweekly paycheck to help off-set medical insurance premium costs.

The Health Risk Assessment is also an available option through earnings of an HRA (Health Reimbursement Account). The health risk assessment or "HRA" will ask a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., cancer, diabetes, or heart disease). Employees and spouses are also eligible to receive up to \$400 each by completing wellness activities for their Health Reimbursement Account. All incentives and dollars earned will be used for the following benefit year.

You are not required to complete the Health Risk Assessment (HRA) or to participate in the blood test or other medical examinations. If you are unable to participate in any of the health-related activities, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting **Employee Wellness** at (812) 450-1348 or wellness@deaconess.com

The information from your HRA and PCP annual exam will be used to provide you with information to help you understand your current health and potential risks, and may also be used to offer you services through the wellness program, such as Tobacco Cessation, Medication Management, Diabetes Education, nutrition education, and one-on-one or general wellness coaching sessions. You are also encouraged to share your results or concerns with your own doctor.

Protections from Disclosure of Medical Information

We are required by law to maintain the privacy and security of your personally identifiable health information. Although Wellness Solutions may use aggregate information it collects to design a program based on identified health risks in the workplace, Wellness Solutions will never disclose any of your personal information either publicly or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for the purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individuals who will receive your personally identifiable health information are the staff employed by Wellness Solutions and individuals employed by the services you authorize. These services may include but are not limited to Deaconess MTM Clinic, and OneCare Care Advisor. In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs that involves information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact the Wellness Solutions Practice Manager at (812) 450-1348.

Deaconess Immediate Care Options

Deaconess Clinic | On-Demand Video Visits

Deaconess Clinic On-Demand Video Visits provide consultation, diagnosis and/or treatment for patients ages 0 and older.

Patients receive the same level of care as they would at an in-person visit at a walk-in clinic. During an On-Demand Video Visit, a patient can be at home, in their office or anywhere else and receive on-demand, quality, telehealth services, via the internet using their computer, tablet or smartphone.

Providers are available to treat and diagnose non-emergency medical issues 24/7 in all 50 United States. And if prescriptions are necessary, they can be sent right to your pharmacy of choice.

You will communicate directly with a KeyCare provider by secure, live and interactive video conference. This is a convenient option to diagnose and treat minor illnesses from anywhere in the United States.



Symptoms/Conditions to use On-Demand Video Visits

- | | | | |
|------------------------|----------------|----------------------------|----------------------------|
| ✓ Allergies | ✓ Colds | ✓ Minor Allergic Reactions | ✓ Sprains and Strains |
| ✓ Back Pain | ✓ Constipation | ✓ Pink Eye | ✓ Tooth Pain |
| ✓ Bites or Stings | ✓ Coughs & Flu | ✓ Rash | ✓ Urinary Tract Infections |
| ✓ Bumps, Cuts & Scraps | ✓ Fevers | ✓ Sinus Infection | ✓ Vomiting |
| ✓ Burns - Minor | ✓ Headaches | ✓ Sore Throat | |
| | ✓ Nausea | | |

On-Demand Video Visits are available 24 hours a day, 7 days a week, in all 50 states.

Start a Deaconess Clinic On-Demand Video Visit here: deaconess.com/urgentcare or in your MyChart Account.

Deaconess Clinic | Urgent Care video visits

Deaconess Clinic Urgent Care Video Visit provides consultation, diagnosis and/or treatment for **patients ages 2 and older** via smartphone or tablet.

Communicate directly with a Deaconess Clinic Urgent Care or Pediatric Urgent Care provider by secure, live, interactive video conference. This is a convenient option for diagnosing and treating minor illnesses from anywhere in Indiana or Kentucky.

Symptoms/Conditions to use Urgent Care Video Visits

- | | | |
|----------------------|----------------------|-------------|
| ✓ COVID-19 Exposures | ✓ Diarrhea | ✓ Pink Eye |
| ✓ Sinus Infection | ✓ Seasonal Allergies | ✓ Bug Bites |
| ✓ Cough & Flu | ✓ Rashes | ✓ Head Lice |
| ✓ Sore Throat | ✓ Sunburn | ✓ Ear Pain |
| ✓ Nausea | ✓ UTI in Adult Women | |

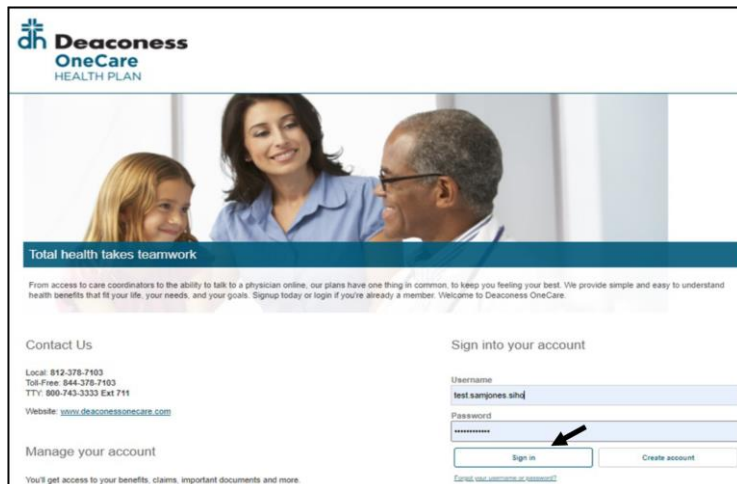
Urgent Care Video Visits are available every day 8 AM - 8 PM.

Schedule a Deaconess Clinic Urgent Video Visit here:
deaconess.com/DHSLive





Accessing Your Member Portal



Visit deaconessonecare.com to access the member portal.

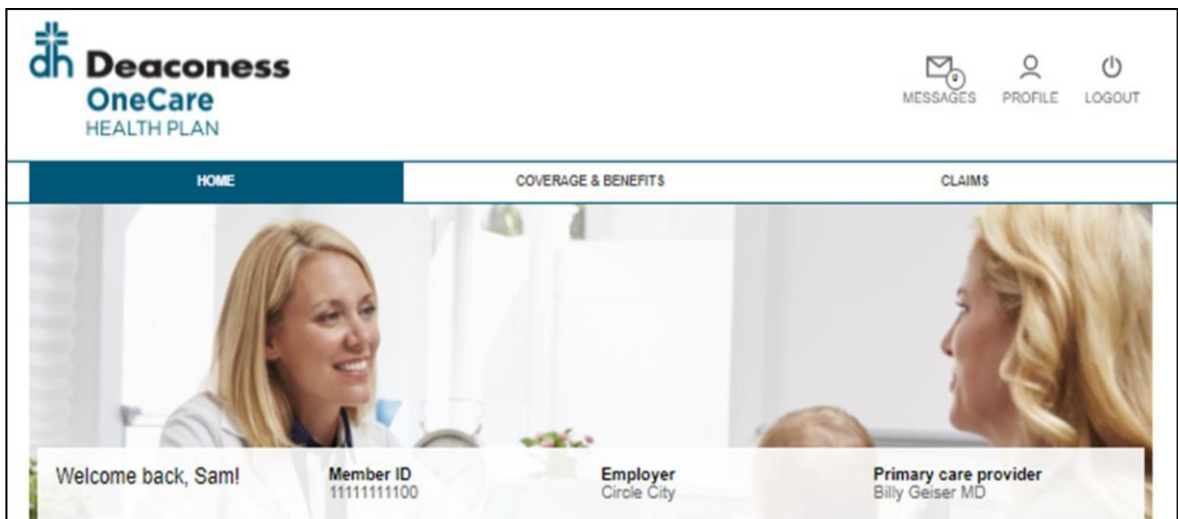
Existing users, click “Sign in”. If you are a new user, click “Create account”.

You may be directed to select a specific health plan when creating your account. If you are unsure which plan you should select, please contact us.

Member Services
Member.Services@DeaconessOneCare.com
 (844) 378-7103

As a feature of your health care benefits, we provide secure internet access to give you information you need anytime you need it.

Some of the following features.



Claims

We provide quick access to your claims status and eligibility information. You can track your medical claims as they move through the claims processing system.

Utilization

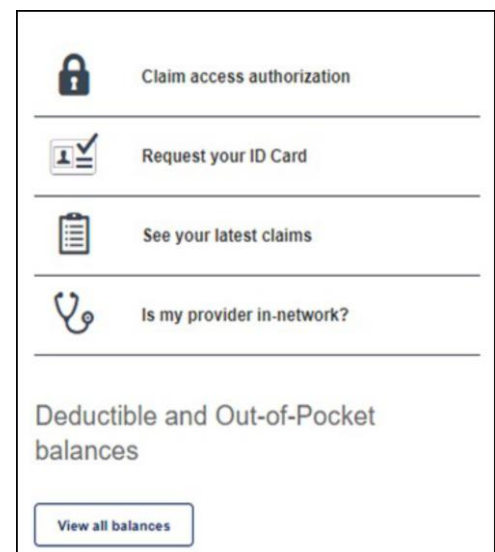
View up-to-date information on Deductibles, Out-of-Pocket Limits & Preventive Health Benefits usage.

Provider Lookup

Search for healthcare providers in your network by Specialty, Name or Location.

Plan Documents

Verify benefits related to your current plan.





How to Access:

Deaconess EAP counselors are available when you need them.

For your convenience, day and evening appointments may be arranged.

In an emergency, you can reach an EAP counselor 24-hours a day, 7 days a week.

Call: **1.812.471.4611** or **1.800.874.7104**.

Click Here to schedule an appointment:

[Schedule your appointment online](#)



Deaconess EAP Video Visit:

Schedule a confidential video visit appointment with a licensed therapist by a secure, live and interactive video conference. This convenient option offers day and evening appointments, and can be used in any U.S. location.

Click here to Schedule an EAP Video Visit:

[EAP VIDEO VISIT >](#)



Available to:

All employees and members of their households.



Cost:

The services of Deaconess EAP are an employee benefit at no cost to you.

If you and your counselor decide that additional services are required by an outside resource, you will be responsible for any costs not covered by insurance.

Deaconess Employee Assistance Program (EAP)

Deaconess EAP is an employee assistance program offering assessment, short-term counseling, referral (if necessary) and follow-up services to employees and members of their household who want help dealing with life changes or personal problems.

Often, the stress caused by life changes, conflict or trouble at home or at work may make it difficult for you to do your job or to be happy in other areas of your life. When this happens, it is best to seek assistance.

Many times, short-term counseling is all you need to get back on the right track. That's why we offer Deaconess EAP. The service can help you deal with problems before they become too large for you to handle and before your personal life and/or your job performance begin to suffer.

EAP counselors are trained to deal with a wide variety of employee problems. They will offer you professional support and direction toward resolving the problem.

Those wanting to use EAP are allowed **five (5) sessions** per topic addressed.

Although Deaconess EAP can help you through a crisis, it is primarily designed to help you manage the life changes we all experience in such areas as:

- Family or marital relationships
- Legal or financial problems
- Death in the family
- Alcohol or drug problems
- Emotional or psychological adjustment
- Depression
- Stress
- Parenting
- Anxiety
- Retirement

For more information visit the EAP page on [D-Web](#).



SupportLinc | Employee Assistance Program

New Program Available Starting October 1, 2024

In addition to the Deaconess Employee Assistance Program, Employees will soon have access to additional emotional wellbeing and work-life balance resources from **SupportLinc**.

SupportLinc offers expert guidance to help address and resolve everyday issues

In-the-moment support

Reach a licensed clinician by phone 24/7/365 for immediate assistance.

Short-term counseling

Access in-person or video counseling sessions to resolve concerns such as stress, anxiety, depression, relationship issues, work related pressures, or substance abuse.

Web portal and mobile app

- The one-stop shop for program services, information and more.
- Discover on-demand training to boost wellbeing and life balance.
- Find search engines, financial calculators and career resources.
- Explore thousands of articles, tip sheets, self-assessments and videos.

Legal consultation

By phone or in-person with a local attorney.

Financial expertise

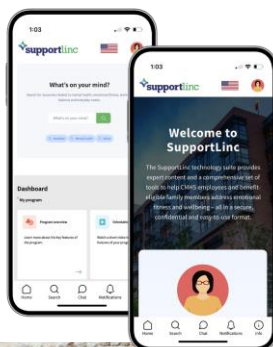
Planning and consultation with a licensed financial counselor.

Convenience resources

Referrals for child and elder care, home repair, housing needs, education, pet care and so much more.

Confidentiality

SupportLinc ensures no one will know you have accessed the program without your written permission except as required by law.



Convenient, on-the-go support

- **Textcoach®** Personalized coaching with a licensed counselor on mobile or desktop
- **Animo** Self-guided resources to improve focus, wellbeing and emotional fitness
- **Virtual Support Connect** Moderated group therapy sessions on an anonymous, chat-based platform



How to Access:

All assistance is available 24 hours a day, seven days a week with confidential support, guidance, and resources.

Call (888) 881-LINC (5462) or
Visit supportlinc.com (Group Code: **deaconess**).

Download the SupportLinc eConnect® App.



Available to:

All Deaconess Illinois employees and their family members.



Cost:

Calling our EAP is **Free**, including **up to six (6) counseling sessions and access to online content**.

Occasionally, services beyond those covered by the EAP will have a cost, and any costs associated with a service will be fully explained.

Dental Insurance

Using the Plan

You and your family have the opportunity to enroll in a dental plan through Paramount Dental.

Paramount Dental members enjoy:

- No deductibles.
- No claim forms.
- No pre-existing conditions.
- No balance billing.
- Large provider network.
- Dependents covered up to age 26.
- Routine cleanings, exams, X-rays and fluoride covered.
- High annual maximum.

Visit insuringsmiles.com to see if your dentist is a part of our [network](#).

Every time you use Dental Health Options, you will receive an Explanation of Benefits that confirms claim status. You may also request your dentist to submit a [Pre-Treatment estimate](#) prior to treatment so that you may know exactly how much your out-of-pocket expenses may be. This is a free service.

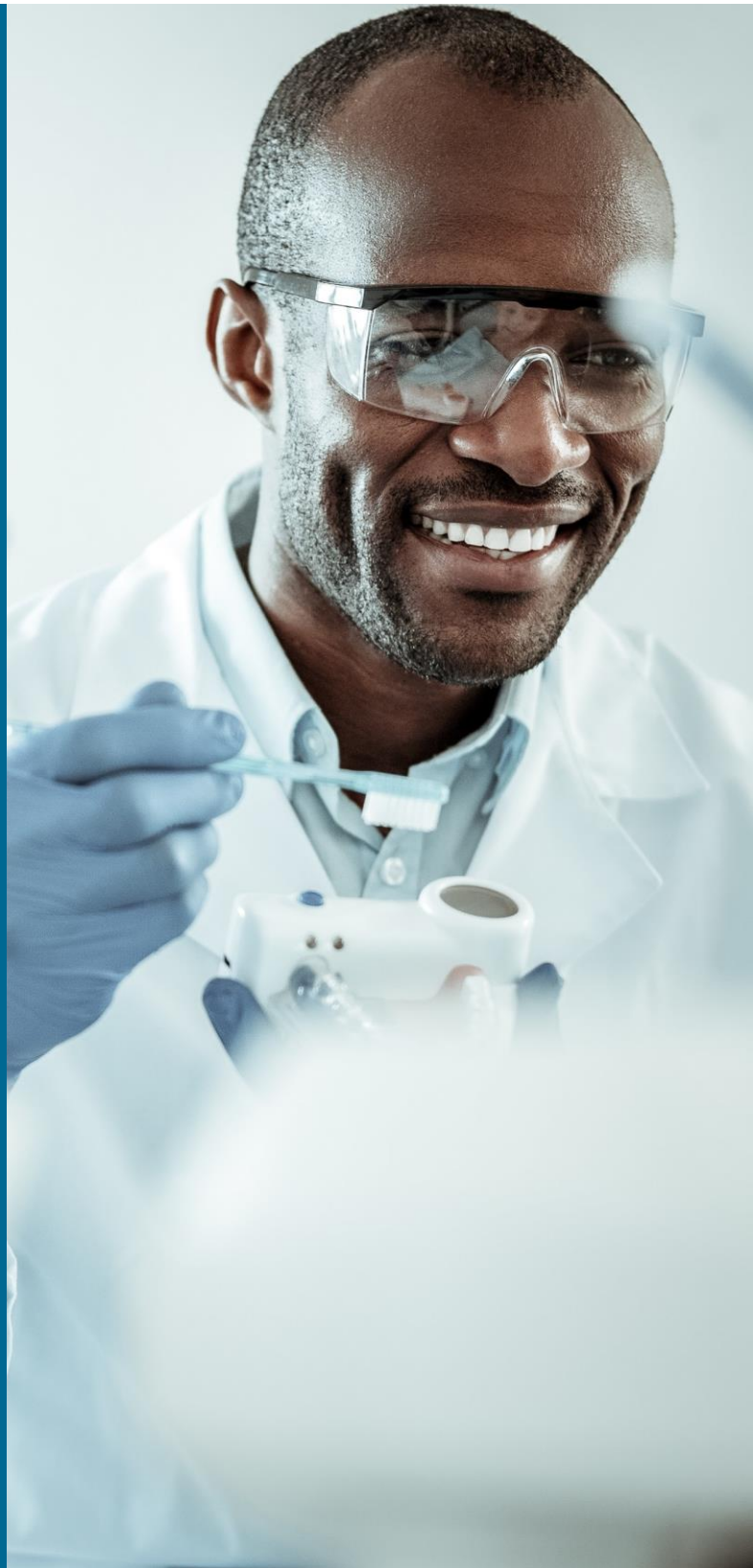
Other Benefits include:

- Dependents covered up to age 26, regardless of student status
- High Annual Maximum – that amount is per person per contract year
- Orthodontic services are payable at 50% up to the lifetime maximum benefit of \$2,000* on the Prime Plan

**Once an individual has exhausted his/her lifetime maximum benefit under any Paramount Dental plan, additional charges will be excluded. This includes benefits received from employers outside of Deaconess.*



Learn more about
Paramount Dental &
Dental Benefits



DENTAL – Paramount Dental
Phone: 1.800.727.1444
www.insuringsmiles.com

Dental Insurance



Affiliate of ProMedica

Plan Annual Maximum Benefit	Prime Plan (DHO 4)		Basic Plan (DHO 6)	
	\$2,000		\$1,000	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Diagnostic & Preventive				
Exams (periodic, limited, comprehensive)	100%	100%	100%	100%
Radiographs (full mouth series, panoramic, bitewings)	100%	100%	100%	100%
Fluoride	100%	100%	100%	100%
Routine teeth cleaning	100%	100%	100%	100%
Sealants	100%	100%	100%	100%
Restorative & Prosthodontics				
Core build ups	80%	80%	50%	50%
Crowns (porcelain, ceramic, stainless steel)	80%	80%	50%	50%
Filings (silver or white) <i>anterior and posterior teeth</i>	80%	80%	50%	50%
Protective restorations	80%	80%	50%	50%
Removable dentures	50%	50%	50%	50%
Endodontics & Periodontics				
Root canal therapy (anterior, posterior)	80%	80%	50%	50%
Root canal therapy (retreatment)	80%	80%	50%	50%
Scaling and root planning	80%	80%	50%	50%
Full mouth debridement	50%	50%	50%	50%
Periodontal maintenance	50%	50%	50%	50%
Oral Surgery				
Frenectomy	80%	80%	50%	50%
Simple extractions	80%	80%	50%	50%
Impactions	80%	80%	50%	50%
Surgical extractions	80%	80%	50%	50%
Miscellaneous				
Emergency palliative treatment	50%	50%	50%	50%
Anesthesia (general and IV sedation)	50%	50%	50%	50%
Athletic mouth guards	50%	50%	50%	50%
Orthodontia				
Lifetime Orthodontic benefit (adult/dependent)	Included (\$2,000 Lifetime Maximum)		Not Included	

View your benefit summary for a list of complete benefits.

Coverage for some procedures is limited by age, frequency, or specific teeth.

Cost Per Paycheck (Bi-Weekly)	Prime Plan (DHO 4)	Basic Plan (DHO 6)
Employee	\$8.91	\$6.87
Employee + Spouse	\$19.42	\$15.00
Employee + Children	\$19.42	\$15.00
Family	\$29.21	\$22.57

Vision Insurance

Using the Plan

Deaconess Illinois provides Vision coverage is through the **VSP Choice network**. Enroll in VSP® Vision Care to get personalized care from a VSP network doctor at low out-of-pocket costs.

Using Your Benefit Is Easy!

Create an account on vsp.com to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with exclusive member extras. At your appointment, just tell them you have VSP.

Value and Savings You Love.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras for additional savings.

Provider Choices You Want.

It's easy to find a nearby in-network doctor. Maximize your coverage with bonus offers and savings that are exclusive to Premier Program locations—including thousands of private practice doctors and over 700 Visionworks retail locations nationwide.

Quality Vision Care You Need.

You'll get great care from a VSP network doctor, including a WellVision Exam®. This comprehensive eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

TruHearing Hearing Aid Discount Program

VSP® Vision Care members can save up to 60% on the latest brand-name prescription and over-the-counter hearing aids. Dependents and even extended family members are eligible for exclusive savings too.

Contact TruHearing. Learn more about this VSP Exclusive Member Extra at truhearing.com/vsp or call **877.396.7194** with questions.

Cost Per Paycheck (Bi-Weekly)

	Premier	Base
Employee	\$5.31	\$2.66
Employee + Spouse	\$10.61	\$5.31
Employee + Children	\$11.35	\$5.69
Family	\$18.15	\$9.09



VISION - VSP

Phone: 1.800.877.7195

Website: www.vsp.com

vsp
vision care

Vision Insurance

Premier Plan

with a VSP Choice Network Provider

Benefit	Description	Copay
WellVision Exam®	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness <i>Every plan year*</i>	\$10
Prescription Glasses		\$25
Frame*	<ul style="list-style-type: none"> \$150 frame allowance \$200 featured frame brands allowance 20% savings on the amount over your allowance \$80 Walmart®/Sam's Club®/Costco® frame allowance <i>Every plan year*</i>	Included in Prescription Glasses
Lenses	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children <i>Every plan year*</i>	Included in Prescription Glasses
Lens Enhancements	<ul style="list-style-type: none"> Standard progressive lenses Premium progressive lenses Custom progressive lenses <i>Average savings of 30% on other lens enhancements</i> <i>Every plan year*</i>	\$0 \$95-\$105 \$150-\$175
Contacts <i>(Instead of Glasses)</i>	<ul style="list-style-type: none"> \$130 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) <i>Every plan year*</i>	Up to \$60
Essential Medical Eye Care	<ul style="list-style-type: none"> Retinal screening for members with Diabetes Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more. Coordination with your medical coverage may apply. Ask your VSP doctor for details. <i>Available as Needed</i>	\$0 per screening \$20 per exam
VSP EasyOptions <i>(members can choose one of these upgrades)</i>	<ul style="list-style-type: none"> Additional \$100 frame allowance, or Progressive lenses, or Light-reactive lenses, or Anti-glare coating, or Additional \$70 contact lens allowance. <i>Every plan year*</i>	

Base Plan

with a VSP Choice Network Provider

Benefit	Description	Copay
WellVision Exam®	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness <i>Every plan year*</i>	\$10
Prescription Glasses		\$25
Frame*	<ul style="list-style-type: none"> \$150 frame allowance \$200 featured frame brands allowance 20% savings on the amount over your allowance \$80 Walmart®/Sam's Club®/Costco® frame allowance <i>Every other plan year*</i>	Included in Prescription Glasses
Lenses	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children <i>Every plan year*</i>	Included in Prescription Glasses
Lens Enhancements	<ul style="list-style-type: none"> Standard progressive lenses Premium progressive lenses Custom progressive lenses <i>Average savings of 30% on other lens enhancements</i> <i>Every plan year*</i>	\$0 \$95-\$105 \$150-\$175
Contacts <i>(Instead of Glasses)</i>	<ul style="list-style-type: none"> \$130 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) <i>Every plan year*</i>	Up to \$60
Essential Medical Eye Care	<ul style="list-style-type: none"> Retinal screening for members with Diabetes Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more. Coordination with your medical coverage may apply. Ask your VSP doctor for details. <i>Available as Needed</i>	\$0 per screening \$20 per exam

vsp
vision care

Your Coverage with Out-of-Network Providers

Get the most out of your benefits and greater savings with a VSP network doctor. Call Member Services for out-of-network plan details.

• Exam..... up to \$45	• Lined Bifocal Lenses up to \$50	• Progressive Lenses..... up to \$50
• Frameup to \$70	• Lined Trifocal Lenses up to \$65	• Contacts up to \$105
• Single Vision Lensesup to \$30		

*Plan year begins in October

Flexible Spending Accounts (FSA)

A flexible spending account (FSA) is a spending account that lets you set aside money on a pre-tax basis to pay for qualified expenses. With an FSA, a portion of your paycheck is deposited in one or more account on a pre-tax basis. You can then use these funds to pay for out-of-pocket eligible expenses.



FSA/HRA - Employee Benefits Corporation
Phone: 1.800.346.2126
Website: www.ebcflex.com

Health Care FSA

- Used for healthcare expenses not covered by insurance.
- The annual minimum election is \$100 and the plan maximum \$3,200.
- Debit card for pharmacy, dental and vision expenses. A debit card will be mailed to the employees' home address.
- If enrolled in the medical plan, medical claims will be auto-substantiated and reimbursement is sent to you for all eligible claims.
- If not enrolled in the medical plan, employees will need to submit all medical claims manually to receive reimbursement.

Dependent Care FSA

- Used for Child Care and Adult Care Expenses.
- The annual minimum elections is \$100 and the plan maximum \$5,000.
- Licensed and private sitters may be used as long as a receipt, with the sitter's Tax ID Number or Social Security Number clearly listed, is turned in with the claim form.
- For dependent care expenses, there is also a dependent care tax credit, which, for some people, may provide greater savings than the flexible spending account. Please consult an independent financial or tax advisor for which dependent care option best fits your needs.

Eligible FSA Expenses can be found at ebcflex.com/eligibleexpenses

Health Reimbursement Account (HRA)

Deaconess medical insurance plans include a Health Reimbursement Account (HRA) through EBC. The HRA is a tax-free account funded by wellness activities that allow EBC to reimburse qualified, eligible medical expenses incurred by you and your covered dependents. Once an individual covered on the health plan incurs \$700 in medical expenses including copayments, deductible and coinsurance, reimbursement will occur. Families will also receive reimbursement if their combined medical expenses exceed \$1,400. An employee and spouse can each earn \$400 HRA dollars annually (\$800 maximum per year). Any unused funds will roll over at the end of each plan year up to a maximum of \$6,000.

HRA & FSA Medical Claim Reimbursement

If you are enrolled in one of the two Deaconess medical plans, all medical claims reimbursed from the HRA or the Health Care FSA will be automatically processed. The automated process should be disabled on your FSA if you are covered on more than one insurance policy or if you want to use the full balance of your FSA for a nonmedical expense. All medical claims must be submitted manually if the automated process is turned off or if you are not enrolled in the Deaconess medical insurance.

A Coordination of Benefits needs to be completed with EBC for your HRA account if you have more than one insurance policy.

Get to know your EBC HRASM and your BESTflex PlanSM

Q. If I have both FSA & HRA, then in what order shall I receive reimbursement for medical expenses?

A. The Health Care FSA funds will be used for pre-deductible medical expenses. Once you met \$700 in out-of-pocket medical expenses, your HRA will be used next. After you have exhausted all of your HRA funds, the claims will be processed from your remaining Health Care FSA for payment.

Any expense reimbursed through the HRA cannot also be claimed to the FSA. If you do not have an HRA, your health care claims will be sent to EBC for automatic payment from your FSA account.

If you do not want medical claims automatically paid out of your Health Care FSA, you will need to contact EBC at 1-800-346-2126. You cannot stop automatic payments from coming out of the HRA.

Q. How do I view balances and claims for my HRA and Health Care FSA?

A. You can view current balances and submitted claims, file new claims, and more by going to the EBC Website: ebcflex.com, link in UKG Benefits portal. The UKG Benefits login page can be found on deaconess.com/employees.

Q. Where do I find a manual claim form?

A. The Health Care and Dependent Care FSA use the same claim form. Manual claim form can be found on My EBC Account, D-Web and www.deaconess.com/employees.

HRA pays automatically and claims are not filed manually.

Q. What if I have multiple medical insurance plans? How will I receive the correct reimbursement?

A. You need to contact EBC to set up coordination of benefits. EBC can be reached at 1-800-346-2126.

Q. How do I get reimbursed for my Dependent Care FSA? Does it work the same as my Health Care FSA?

A. You cannot use your EBC Benefits Card to pay for dependent care expenses. You must pay for your dependent care expenses up front and submit a claim form with documentation of the expense to EBC to receive reimbursement. Employees can receive reimbursement via paper checks or bank direct deposit.

Q. Is there an App that I can download to submit my claims?

A. Yes, you can search for the Employee Benefits Corporation "EBC Mobile" in your App Store.

Q. Can you have a Healthcare FSA & Deaconess HRA?

A. Yes.

Q. What if I have neither account, but am interested in having one?

A. Employees can elect a Health Care and Dependent Care FSA each year during Annual Enrollment in August.

Important Note about FSA Balances after the Plan Year Ends:

You have through December 31 to submit old claims to EBC for expenses incurred prior to October 1. The claims are submitted manually to receive reimbursement. All FSA funds that are not claimed for the Plan Year from October 1 through September 30 will be forfeited after December 31.

However, HRA funds will rollover every plan year until the max of \$6,000 is met.

EBC Mobile: Your Benefits, Anytime, Anywhere

Download EBC Mobile in the App Store or Google Play for on-the-go access to everything you need to manage your EBC administered benefit accounts, all in one place.



Life and AD&D Insurance

Basic Employee Life and Accidental Death and Dismemberment (AD&D)

Deaconess Illinois provides, at no cost to you, basic life insurance and accidental death and dismemberment (AD&D) insurance.

The AD&D benefit provides a payment in the same amount as the employee's basic life coverage if there is loss of life in an accident. It also provides a benefit for a debilitating injury due to a covered accident.

	Life Coverage	AD&D Coverage
Benefit ²	1 times your annual earnings Maximum \$500,000 (Rounded to the next higher \$1,000)	AD&D; Included

² Percentage by which original amount of coverage will be reduced 35% at age 70; 45% at age 80

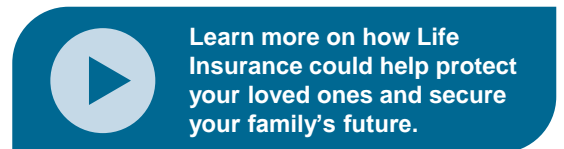
Optional Employee Life and Accidental Death and Dismemberment (AD&D) and Dependent Life Insurance

	Life Coverage	AD&D Coverage
Employee	Benefit ² : 1, 2 or 3 times Your annual Earnings Maximum: The lesser of 3x earnings or \$500,000 (Rounded to the next higher \$1,000)	AD&D; Included
Spouse	Benefit ² : Increments of \$5,000 Maximum: The lesser of 50% of Employee Basic & Supplemental coverage or \$50,000	AD&D; Included
Child(ren)	Benefit: \$10,000	AD&D; Included

² Percentage by which original amount of coverage will be reduced 35% at age 70; 45% at age 80

Optional Life & AD&D Rates Per \$1,000 (26 pay periods)

EE Age (Oct 1 st)	Employee	Spouse
<25	\$0.022	\$0.038
25-29	\$0.022	\$0.038
30-34	\$0.026	\$0.048
35-39	\$0.035	\$0.064
40-44	\$0.048	\$0.091
45-49	\$0.073	\$0.139
50-54	\$0.106	\$0.219
55-59	\$0.150	\$0.333
60-64	\$0.258	\$0.438
65-69	\$0.402	\$0.697
70-74	\$0.666	\$1.217
75+	\$1.174	\$2.206
Child(ren)	\$0.29 / pay period regardless of the number of children covered. Children are covered to age 26.	



LIFE and AD&D INSURANCE – The Hartford
 Phone: 1.888.563.1124
 Policy #: 402724
 Website: thehartford.com/employee-benefits/employees

Short & Long-Term Disability

Employees authorized 40 or more hours a pay period are automatically enrolled in Short-term disability and Long-term disability coverage at no charge. **There is a 90-day waiting period for newly benefit eligible employees.**

**Salaried supervisor and physician disability benefits are outlined in the Income Continuation Guidelines or physician contract.*

Contact the Benefits Office with any questions regarding salaried supervisor or physician disability benefits.



SHORT-TERM DISABILITY & LONG-TERM DISABILITY – The Hartford

Phone: 1.888.277.4767

Policy #: 402724

Website: thehartford.com/employee-benefits/employees

Short-Term Disability (STD)

In the event of a short-term disability (STD), you have financial protection paid for by Deaconess Illinois. Our Short-term disability benefit provides 60% of your base rate of pay starting on the 8th day after your injury or sickness. You are automatically enrolled in Basic STD coverage at no cost to you.

You can choose more STD coverage with the Buy-up STD plan that's paid by you through payroll deductions.

STD Coverage Level	Benefit Percentage (Percent of your earnings)	Maximum	Sickness Benefit Starts	Injury Benefit Starts	Benefit Duration
Core	60%	\$1,500	On the 8 th day	On the 8 th day	26 weeks
Buy-Up	70%	\$2,500	On the 8 th day	On the 8 th day	26 weeks

Long Disability (STD)

Long-term disability benefit provides 60% of your base rate of pay when disabled more than 180 days.

Benefit Percentage (Percent of your earnings)	Maximum	Minimum (Based on Monthly income loss before the deduction of other income benefits)	Benefit Starts	Benefit Duration
60%	\$10,000	The greater of \$100 or 10% of the benefit	After 180 days disabled	Disabled before: Age 63 <u>Benefit Duration:</u> as long as you are disabled <u>Benefit Duration maximum:</u> The greater of your Social Security normal retirement age or 3.5 years

Additional Coverage

Optional benefits available for purchase

Hospital indemnity insurance pays a benefit when you are hospitalized to pay out-of-pocket expenses and extra bills. The benefit is paid directly to you in a lump sum based on the length and level of care needed. Read full benefits highlights located on the D-Web or [here](#).

Hospital Indemnity Cost Per Paycheck (Bi-Weekly)	High	Low
Employee	\$9.35	\$6.17
Employee + Spouse	\$17.78	\$11.27
Employee + Children	\$14.31	\$9.59
Family	\$23.42	\$14.78



Hospital Indemnity can help you pay for everyday expenses along your road to recovery.

Accident insurance pays specific amounts for expenses related to nonwork-related accidents and injuries. Hospitalization, physical therapy, intensive care, transportation and lodging are some of the out-of-pocket expenses covered. Read full benefits highlights located on the D-Web or [here](#).

High	Low	Accident Insurance Cost Per Paycheck (Bi-Weekly)
\$5.09	\$2.98	Employee
\$8.01	\$4.66	Employee + Spouse
\$8.18	\$5.00	Employee + Children
\$13.01	\$7.85	Family



See how this Accident Insurance coverage can help when you need it most.

Critical illness insurance works with medical insurance by helping you pay the direct and indirect costs of a critical illness or event. Conditions covered include heart attack, stroke, major organ transplant, end stage renal failure, paralysis and some types of cancer. The premiums will be determined by a number of factors including demographics and the amount of coverage. Read full benefits highlights located on the D-Web or [here](#).



You never know if a serious illness might happen. Protect your future finances with Critical Illness Insurance.



CRITICAL ILLNESS, ACCIDENT & HOSPITAL INDEMNITY – The Hartford
Phone: 1.866.547.4205
Policy #: 402724
Website: myhealthhub.app/thehartford



Pet Insurance

Nationwide[®] pet insurance

My Pet Protection[®] coverage highlights: My Pet Protection offers a choice of reimbursement options so you can find coverage that fits your budget. All plans have a \$250 annual deductible and \$7,500 maximum annual benefit. Coverage includes*:

- Accidents
- Hereditary and congenital conditions
- Dental diseases
- Rx therapeutic diets and supplements
- Illnesses
- Cancer
- Behavioral treatments
- And more

Plus, every My Pet Protection policy includes these additional benefits to maximize your value:

- Lost pet advertising and reward
- Emergency boarding and kenneling fees
- Lost pet due to theft
- Mortality benefit

Included with every policy

VetHelpline[®]

- Unlimited, 24/7 virtual pet care in an app
- Advice from licensed veterinary professionals
- Support for any pet health concern

PetRxExpressSM

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



Nationwide[®]

Get a fast, no-obligation quote today.

PET INSURANCE – Nationwide

Phone: 1.877.738.7874

Website: benefits.petinsurance.com/deaconess

Payactiv

Work today, Get paid tomorrow

Access Anytime

- Get up to 50% of earned wages
- Transfer to your bank or card
- Get cash at Walmart[®]¹
- Use Uber[®] rides, Amazon Cash[®]
- Pay bills directly from the app

Spend Smarter

- Easily track earnings, bills, and spending in one place
- See what's safe to spend now
- Be alerted of low balance
- Auto transfer from earned wages

Save As You Go

- See what you can set aside safely
- Achieve your savings goals with every paycheck
- Talk to financial coaches for advice

How it works

1. Create a Payactiv account with your employee ID.
2. Enjoy free unlimited access with direct deposit to the Payactiv Visa[®] Card*.
3. For everyone else without direct deposit to the Payactiv card, the program fee is \$1 for single or multiple transactions on the day you access funds, capped at \$5 for a bi-weekly pay period (\$3 for weekly pay periods).

*This is a Payactiv Visa[®] Prepaid Card issued by Central Bank of Kansas City, Member FDIC, pursuant to a license from Visa[®] U.S.A. Inc.

¹ \$1.99 processing fee for cash pick up at Walmart[®] or instant deposit to a card other than the Payactiv Card.

The Payactiv Visa[®] Prepaid Card is issued by Central Bank of Kansas City, Member FDIC, pursuant to a license from Visa U.S.A. Inc. Certain fees, terms, and conditions are associated with the approval, maintenance, and use of the Card. You should consult your Cardholder Agreement and the Fee Schedule at [Payactiv.com/card411](https://payactiv.com/card411). If you have questions regarding the Card or such fees, terms, and conditions, you can contact us toll-free at 1(877) 747-5862, 24 hours a day, 7 days a week.



Scan QR code to learn more at
bit.ly/payactiv-deaconess-health

payactiv

EARNED WAGE ACCESS – Payactiv

Phone: 1.877.937.6966

Website: bit.ly/payactiv-deaconess-health

Download the Payactiv app



Deaconess Illinois

Summary of 401(k) Employee Benefits

Under a 401(k) plan, as an employee, you can contribute a percentage of your pay into one or more funds on a menu of investment options, which includes a wide variety risk/return profiles. Employees can direct 1% to 75% of their paycheck into the 401(k) on a pretax or after tax basis. Fidelity Investments will mail an enrollment packet to your home address 2-4 weeks after your hire date.

Important Notice – Please Read

Employees will be automatically enrolled into the 401(k) plan at a 3% pretax contribution into the appropriate target date fund. If you do not wish to participate in the 401(k) plan, then you will need to contact Fidelity Investments to waive your contributions within the first 10 days of hire. Contact information is below.

Employer Match

Deaconess will match 50% of the employee's first 6% of contributions. You are eligible to receive the matching contribution when you have completed 12 months of continuous employment and you have been credited with 1,000 hours of service during the plan year (January 1 to December 31).

Employer Match Deposits

Employer contributions are deposited into accounts annually in the spring after the end of the calendar year. Full vesting occurs after completing three years of service (at least 1,000 hours worked per calendar year). If you terminate employment before you are fully vested, you forfeit all of the employer money that is in your account. Employee is 100% vested after three years of employment.

After-Tax Contributions and Roth 401(k) In-Plan Conversion

This option lets the employee contribute to the after tax account in excess of the 401(k) individual contributions limit (\$23,000 for 2024). Then these contributions can convert to the Roth source within the plan, which allows them to grow tax free going forward. Employees can direct 1-10% of their pay and you must contact Fidelity to setup this option.

Total limit of employee and employer contributions is \$69,000 for 2024.

Automatic Deferral Increases

Deaconess utilizes the Annual Increase Program through Fidelity which automatically increases your contributions to your 401(k) account each year. If employees are enrolled in the 401(k) Plan, Deaconess will increase your deferral by 1% every year in January until you are contributing 6%.



How to Access the Accounts, Make Changes, or Ask Questions

Employees can make changes to the 401(k) plan at any time by contacting Fidelity, making changes online, or through the NetBenefits app that can be downloaded to any device. **Beneficiary designations for the 401(k) are separate from the designations made in UKG and need to be listed in Fidelity.**

Fidelity offers the services of a Retirement Planner who can meet individually to discuss retirement options:

Tony Davis
email: tony.davis@fmr.com
Phone: 1.502.322.0806

Fidelity Investments
website: www.fidelity.com/atwork
Phone: 1.800.343.0860

Important Notices:

*For full plan details, reference the Deaconess Illinois 401(k) Plan Summary Plan Description.
Last Reviewed: 3/7/2023 KS

Deaconess Illinois Employee Services

MEDICATION ASSISTANCE PROGRAM

The Medication Assistance Program works with drug companies and foundations that can help you get your medications at no or reduced cost when you need help.

Call **1.812.450.2319** for more information.



GLUCOMETER

If you have health insurance through Deaconess, you or your eligible dependents who are diabetic can receive a Contour Next meter at no cost.

Simply call **1.800.401.8440** and provide code **CTR-OPX**. Ascensia will take care of the rest.

DEACONESS RN ON CALL

Offered to all Deaconess employees and immediate family. Registered nurses are available 24 hours a day to answer your questions about any acute illness or injury.

Call **1.812.450.7681** or **1.800.967.6795**.



DEACONESS EMPLOYEE WELLNESS

The employee wellness department offers online education and HRA credit.

Please call **1.812.450.1348** and press **#2** if you have any questions.

EMPLOYEE SPECIAL DISCOUNTS

Tickets at Work – This page provides discounts on tickets, hotel rooms, rental cars, as well as other things like movie tickets and sporting events both locally and nationally.

Visit ticketsatwork.com and choose “Become a Member”. On the next page, choose “Company Code” and complete the form to create an account with “Deaconess” as the company code.



FREE BREAST PUMPS

Each breastfeeding mother qualifies for one Medela or Spectra breast pump per plan year covered at 100%!

Call Deaconess Home Medical Equipment at Gateway, **1.812.842.3789**, for more information.

Employees not on Deaconess medical insurance, please check with your insurance provider.



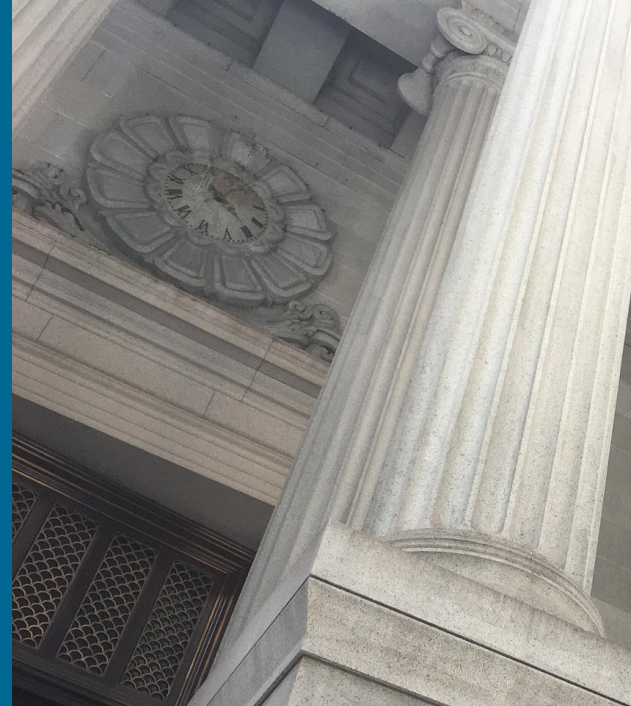
Educational Assistance

Student Loan Wellness Program

Deaconess knows student loan debt and college expenses also affect many of our employees, whether related to their own education or for current or future needs of their family members. That's why Deaconess provides a **Student Loan Wellness Program** from [Tuition.io](https://tuition.io).

This service is free for every Deaconess employee and includes:

- Personalized, live, 1-on-1 student loan coaching (via email, chat or calls), helping families set goals for paying off debt or saving for college—or both!
- Information and assistance with public service loan forgiveness programs related to employment at a non-profit organization (like Deaconess)
- A marketplace for refinancing existing student loans
- A clean dashboard of information, displaying all current student debt, loan payoff projection options, repayment tools, recent transactions and more
- Detailed information about 529 savings plans and other college finance options for children in your family



EDUCATIONAL ASSISTANCE - Tuition.IO
Phone: 1.855.353.9395
Website: deaconess.tuition.io

When you sign up with Tuition.io, you'll have access to a full suite of tools to help you manage and ultimately eliminate your student loan debt. If you're the parent of college-bound children, Tuition.io will help you find ways to save and pay for their education.

Start your journey by setting up an account at deaconess.tuition.io. Contact [Tuition.io](https://tuition.io) at **1.855.353.9395** with questions.

Student Loan Forgiveness

Deaconess is pleased to offer its employees a special student loan forgiveness program. This program, along with other educational assistance programs, can help Deaconess employees reduce their student loan burden.

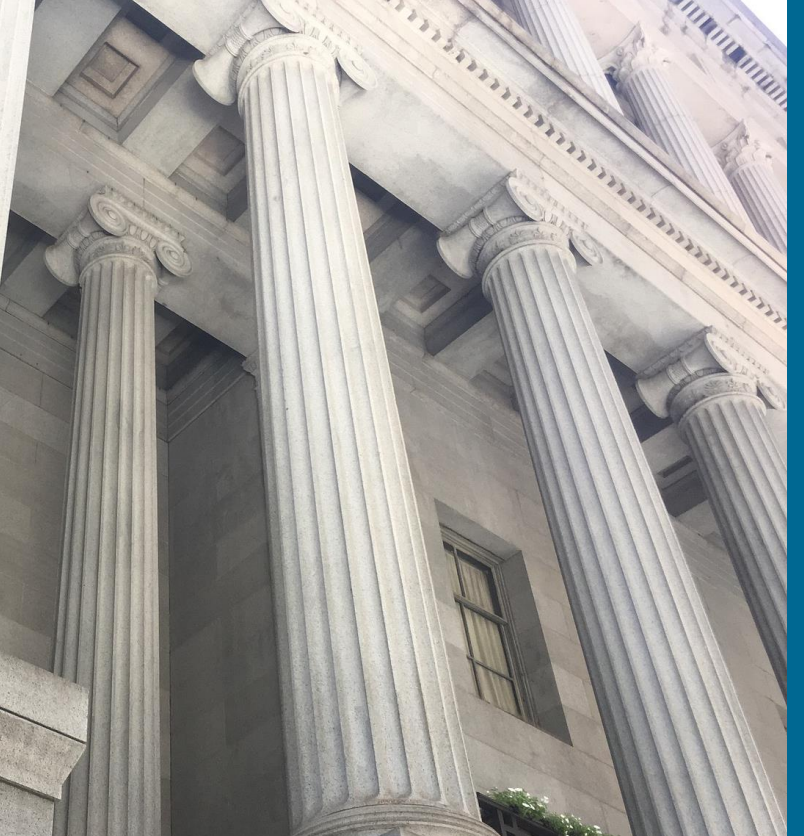
- Full-time employees receive \$100/month (those working at least 30 hours per week).
- Part-time employees receive \$50/month (those working at least 20 hours per week).
- At this time, only student loans taken out as part of an undergraduate program are eligible for this program.
- New hires are eligible the month following completion of the Tuition.io enrollment process.
- Payments are made directly to your student loans through the tuition.io site. A notification is sent to you each time a payment is made by Deaconess.
- Employees are eligible for payments until loans are paid off (or a maximum of 10 years).
- This program is based on current employment status and requires a commitment of three years from the first payment.
- Payments stop if the employee moves to an ineligible position within the health system, but the employee will not have to pay back funds if they remain at Deaconess.
- Employees are ineligible for loan forgiveness payments for six months following any warning notice.
- Deaconess employees within the following professions may be eligible for student loan repayment.
 - Medical Technologists and other Laboratory Professionals
 - Medical Imaging Professionals
 - Radiation Therapy
 - Inpatient/Bedside Registered Nurses
 - Certified Surgical Techs
 - Pharmacists
 - Respiratory Therapists

For example, if you participate but then leave Deaconess within three years, the payback plan is as follows:

- <1 year = 100% payback
- >1 year but <2 years = 67% payback
- >2 years but <3 years = 33% payback

Next step for eligible employees: Please register with Tuition.io at deaconess.tuition.io/register. Enter your current student loan information. Once this process is complete, payments will begin the following month.

If you have questions, please call Deaconess Human Resources - Benefits Department at 812-450-2025 or email BenefitQuestions1@deaconess.com



Educational Assistance

Tuition Reimbursement

Explore the opportunities at Deaconess and learn how to advance your career.

- All full-time and part-time employees authorized to work at least 40 hours per pay period are eligible to receive
- \$5,250 per calendar year while enrolled in undergraduate or graduate level classes.
- Employees pay for classes up front and are reimbursed when they complete the class with the required grade.
- Employees must upload his/her final grade(s) AND an itemized bill showing the semester's charges in Tuition.io. The employee will receive payment as a nontaxable earning on his/her regular payroll check within six weeks of submission of the documentation.
- The amount of tuition assistance received by employees is considered by the hospital to be an interest-free loan and is to be repaid through continued active employment.

Go to [Tuition.io](https://tuition.io) or call **1.855.353.9395** for more information.

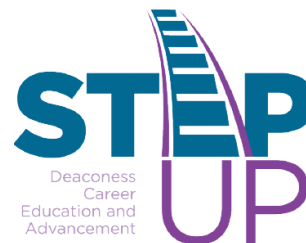
You can also email questions to:

_HRTuitionReimbursement@deaconess.com

Step-Up Program

Employees can apply for Step-Up and, if selected, will be paid their normal wages for the time spent in enrolled class hours/clinical hours up to a maximum of 18 hours per week. Prior to participation in the program, employees must be accepted and enrolled into an accredited program as defined by Deaconess and agree to pursue course work designed to achieve the necessary licensure or accreditation.

The Step-Up Program is open to employees enrolled in the following programs:



- | | | |
|---|-----------------------------------|---------------------------------|
| • Certified Medical Assisting/Registered | • Certified Surgical Technologist | • Certified Coding Specialist |
| • Medical Assisting <i>(please contact HR regarding qualified programs)</i> | • Respiratory Therapy | • Paramedic |
| • Licensed Practical Nurse | • Registered Nurse | • Medical Technologist |
| | • Echo Sonography | • Nuclear Medicine Technologist |
| | • Rad Tech | • Diagnostic Medical Sonography |

Managers will try to reasonably accommodate each employee's schedule so the employee may attend his/her enrolled class/clinical hours each week. The employee will continue working at Deaconess for the balance of his/her authorized hours.

Upon completion of course requirements, the employee must achieve the necessary license or certification and be in good standing in order to be placed in an available position. The employee must agree to repay the program costs by remaining employed full-time at Deaconess for three years after the licensure or accreditation is obtained.

You can find more information and the Step-Up Application on D-Web.

For more information you can email: _HRStepUpProgram@deaconess.com

Notes

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Notes

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This Benefit Guide provides a brief description of plan benefits. For more information on plan benefits, exclusions, and limitations, please refer to the Plan documents or contact the carrier/administrator directly. If any conflict arises between this Guide and any plan provisions, the terms of the actual plan document or other applicable documents will govern in all cases. Benefits are subject to modification at any time.