



# Your Employee Benefits

2023



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**NOTE:** This guide is designed to provide general information about benefit plans and contains only a brief summary of the plans. While this guide will help assist in better understanding the basic elements of the plans, it does not replace the summary plan description, which contains the full plan provisions and details about your rights and obligations under the plan(s). Every effort has been made to include all of the important points and benefits and to be as accurate as possible. If anything in this guide inadvertently conflicts with the text of the legal documents or policies, the documents and policies govern. To review the summary plan description, please visit the Employee Benefits page on the Hub or the bswift library. The benefits and this Guidebook are subject to change at the discretion of Meritus Health.

## INTRODUCTION

At Meritus Health, we know that employment decisions and team member satisfaction are impacted by many things - pay, benefits, work environment, relationships, career development, etc., -and we are committed to ensuring that we provide competitive, meaningful, and comprehensive benefit programs. Our benefits program is designed to provide flexibility and choice, protect team members and their family members from catastrophic financial loss and hardship, promote continuous learning, and generally provide you comfort, knowing that Meritus Health is dedicated to our most valuable asset - our team members.

We are pleased to offer our full-time and eligible part-time team members a wide menu of benefits. Meritus Health has carefully selected all of the companies that will service your benefits. We have asked each company to provide the same high level of service to you that you provide to our patients and clients.

We strongly encourage you to read this material carefully as you consider your benefit options for you and your family members. You have the option of meeting with a representative from Team Member Services if you need further clarification about your benefit options. We hope that you find these benefits valuable and meaningful. Welcome to the Meritus Health family.

## Team Member Eligibility

The table below indicates the benefits that you are eligible for based on your budgeted hours (FTE) per bi-weekly pay period. \*Note: Meritus EAP is available to **ALL** team members, regardless of hours status.

Benefit	Full Time (72-80 hours)	Part Time (40-71 hours)	Part Time (32-39 hours)	School Health	Benefit Effective Date
Medical Insurance	√	√	√	√ (min. 16 hrs./wk.)	1st of the month following 30 days of employment
Dental Insurance	√	√	√	√ (min. 16 hrs./wk.)	1st of the month following 30 days of employment
Vision Insurance	√	√	√	√ (min. 16 hrs./wk.)	1st of the month following 30 days of employment
Flexible Spending Accounts	√	√	√	√ (min. 16 hrs./wk.)	1st of the month following 30 days of employment
Short Term Disability (STD)	√	n/a	n/a	√ (min. 36 hrs./wk.)	1st of the month following 180 days of employment
Paid Parental Leave	√	n/a	n/a	√ (min. 36 hrs./wk.)	1st of the month following 180 days of employment
Long Term Disability (LTD)	√	√	n/a	√ (min. 20 hrs./wk.)	180 day elimination period
Paid Time Off (PTO)	√	√	√ (min. 12 hr./wk.)	√ (min. 12 hrs./wk.)	Accrual starts 1st paycheck for use after probationary period
Life Insurance/AD&D (Basic & Supplemental)	√	√	n/a	√ (min. 20 hrs./wk.)	Basic: 1st day of eligible employment; Supplemental: 1st of the month following 30 days of employment
Education Assistance	√	√	n/a	√ (min. 20 hrs./wk.)	After 90 day probationary period
Voluntary Benefits	√	√	n/a	√ (min. 20 hrs./wk.)	Can apply starting the enrollment period following date of hire
Travel/Accident Insurance	To ensure the protection of team members whose position requires travel, the health system carries this insurance at no cost				
401(k)	√	√	√ (min. 8 hrs./pay)	√ (min. 8 hrs./pay)	Auto-deferral starts after 30 days of eligible employment

## Dependent Eligibility

In addition to yourself, dependents are eligible for coverage under the following benefits:

- Medical Insurance
- Dental Insurance
- Vision Insurance
- Supplemental Life and AD&D Insurance
- Flexible Spending Accounts (FSA)
- Health Savings Account (HSA)
- Employee Assistant Program (EAP)



**\*NOTE:** You are required to submit a copy of appropriate dependent documentation to the Benefits Department for any dependent that is being covered for the first time under the medical, dental, vision and/or supplemental life/AD&D plans. The dependent’s benefit elections and coverage will “pend” until the necessary verification is received. Dependent verification will not be accepted after the effective date of the benefit.

<u>Eligible Dependents Are Defined as:</u>	<u>Examples of Acceptable Dependent Documentation</u> (copies are accepted)
Lawful spouse of team member	Marriage Certificate and cover page of recent tax return
Children until the end of the month in which they turn 26 years old, including:	
Biological child	Birth Certificate on which team member is listed as parent
Step-child	Birth Certificate on which spouse is listed as parent and a copy of the marriage certificate to listed parent
Adopted child	Adoption decree or birth certificate on which team member and/or legal spouse is listed as the parent(s)
Legal Custody	Paperwork from the court on which the team member or legal spouse of team member is granted legal custody

## Effective Date & Life Events

You will make all benefit elections and benefit changes in bswift, the online benefit management system. Bswift can be accessed through a link on your MySource homepage or directly at [www.meritushealth.bswift.com](http://www.meritushealth.bswift.com).

- **New Hire or Newly Eligible:** Basic benefit elections for new hire/newly eligible status will be effective the first of the month after 30 days of eligible employment.
- **Employment/FTE Status Changes:** Elections and changes to applicable payroll deductions due to an employment FTE status change will be effective the first of the month following the effective date of the FTE status change .
- **Mid-Year Changes (Life Events):** IRS regulations allow for mid-year benefit changes within **30 calendar days** of a life event. Examples of a life event are:
  - Marriage/divorce
  - Birth/death/adoption/legal custody
  - Spouse/eligible dependent loses/gains other health benefits

For birth/adoption/legal custody, benefits and applicable payroll deductions are effective as of the date of the event. For all other life events, benefits and applicable payroll deductions are effective the first of the month after the event.

Within 30 calendar days of a life event, you must make corresponding benefit election changes in bswift. If you do not make changes within 30 days of the life event, the team member will not be given another opportunity to elect or change benefits until the next open enrollment period or after experiencing another life event.

**NOTE:** All benefit elections and coverage will “pend” until documentation of the life event has been provided to the Meritus Benefits staff. Documentation must be received within 30 calendar days of the life event.

- **Open Enrollment:** Typically held in the fall of each year, team members may enroll or change coverage elections, including adding or dropping dependents, during this period. All changes are effective January 1 following the open enrollment period.

Meritus Health offers three medical plan options referred to as Platinum, Gold, and the Qualified High Deductible Health Plan (QHDHP) with HSA. All plans are offered to regular full-time and part-time team members budgeted to work 32 bi-weekly hours or more.

For more coverage information and details on each of the medical plans, please refer to the [Summary of Benefits and Coverages \(SBC\)](#) and carrier Summary Plan documents located on the Benefits Health and Wellness page of the Meritus HUB and in the library on bswift.



**Summary of Benefits and Coverage:** What this Plan Covers & What You Pay for Covered Services

**Coverage Period:** 01/01/2022-12/31/2022



MERITUS HEALTH, INC., Aetna Open Access® Aetna SelectSM - HDHP

**Coverage for:** EE Only; EE+ Family | **Plan Type:** EPO

The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share



**Summary of Benefits and Coverage:** What this Plan Covers & What You Pay for Covered Services

**Coverage Period:** 01/01/2022-12/31/2022



MERITUS HEALTH, INC., Aetna Open Access® Aetna SelectSM - Platinum Plan (IDS)

**Coverage for:** Individual + Family | **Plan Type:** EPO



The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, visit [www.HealthReformPlanSBC.com](http://www.HealthReformPlanSBC.com) or by calling 1-

**Summary of Benefits and Coverage:** What this Plan Covers & What You Pay for Covered Services

**Coverage Period:** 01/01/2022-12/31/2022



MERITUS HEALTH, INC., Aetna Open Access® Aetna SelectSM - Gold Plan (IDS)

**Coverage for:** Individual + Family | **Plan Type:** EPO



The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, visit [www.HealthReformPlanSBC.com](http://www.HealthReformPlanSBC.com) or by calling 1-

The payroll deduction is based on your annualized base salary, FTE status, and enrollment tier. Salary banding allows for a more proportioned approach to team member contributions with generally those in lower salary bands contributing a lower percentage of the total monthly premium while those in the higher salary bands will pay a higher percentage.

The bi-weekly payroll deduction costs in 2023 are as follows. Please note that Team Members who work for School Health have the premiums collected over 20 pays, instead of 26, to account for the Summer break.

**Team Member Contributions - Salary Band A (Less than \$50,000)**

Full Time (72-80 hrs.)	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$60.94	\$95.94	\$40.16	\$75.16	\$33.56	\$68.56
Team Member & Child	\$91.91	\$126.91	\$58.66	\$93.66	\$47.84	\$82.84
Team Member & Children	\$131.93	\$166.93	\$83.47	\$118.47	\$66.71	\$101.71
Team Member & Spouse	\$121.88	\$156.88	\$80.32	\$115.32	\$67.12	\$102.12
Family	\$152.35	\$187.35	\$100.40	\$135.40	\$83.90	\$118.90
Part Time (56-71 hrs.)	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$95.93	\$130.93	\$62.27	\$97.27	\$50.35	\$85.35
Team Member & Child	\$157.40	\$192.40	\$99.26	\$134.26	\$78.47	\$113.47
Team Member & Children	\$238.14	\$273.14	\$149.35	\$184.35	\$116.23	\$151.23
Team Member & Spouse	\$208.24	\$243.24	\$135.06	\$170.06	\$100.70	\$135.75
Family	\$268.13	\$303.13	\$175.64	\$210.64	\$125.88	\$160.88
Part Time (32-55 hrs.)	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$130.89	\$165.89	\$84.37	\$119.37	\$67.14	\$102.14
Team Member & Child	\$223.59	\$258.59	\$140.32	\$175.32	\$109.51	\$144.51
Team Member & Children	\$343.61	\$378.61	\$214.77	\$249.77	\$166.16	\$201.16
Team Member & Spouse	\$296.34	\$331.34	\$191.34	\$226.34	\$134.36	\$169.36
Family	\$386.90	\$421.90	\$252.56	\$287.56	\$179.71	\$214.71
School Health	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$124.69	\$159.69	\$80.95	\$115.95	\$65.45	\$100.45
Team Member & Child	\$204.61	\$239.61	\$129.04	\$164.04	\$102.01	\$137.01
Team Member & Children	\$309.58	\$344.58	\$194.15	\$229.15	\$151.10	\$186.10
Team Member & Spouse	\$270.71	\$305.71	\$175.59	\$210.59	\$130.90	\$165.90
Family	\$348.56	\$383.56	\$228.32	\$263.32	\$163.63	\$198.63

Team Member Contributions - Salary Band B (\$50,000 - \$99,999)						
Full Time (72-80 hrs.)	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$67.77	\$102.77	\$41.36	\$76.36	\$33.56	\$68.56
Team Member & Child	\$102.22	\$137.22	\$60.42	\$95.42	\$47.84	\$82.84
Team Member & Children	\$146.73	\$181.73	\$85.98	\$120.98	\$66.71	\$101.71
Team Member & Spouse	\$135.54	\$170.54	\$82.72	\$117.72	\$67.12	\$102.12
Family	\$169.43	\$204.43	\$103.40	\$138.40	\$83.90	\$118.90
Part Time (56-71 hrs.)	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$106.68	\$141.68	\$64.14	\$99.14	\$56.71	\$91.71
Team Member & Child	\$175.05	\$210.05	\$102.24	\$137.24	\$88.38	\$123.38
Team Member & Children	\$264.84	\$299.84	\$153.83	\$188.83	\$130.92	\$165.92
Team Member & Spouse	\$231.59	\$266.59	\$139.12	\$174.12	\$108.76	\$143.76
Family	\$298.20	\$333.20	\$180.91	\$215.91	\$141.57	\$176.57
Part Time (32-55 hrs.)	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$145.57	\$180.57	\$86.90	\$121.90	\$75.63	\$110.63
Team Member & Child	\$248.66	\$283.66	\$144.53	\$179.53	\$123.35	\$158.35
Team Member & Children	\$382.15	\$417.15	\$221.22	\$256.22	\$187.15	\$222.15
Team Member & Spouse	\$329.58	\$364.58	\$197.08	\$232.08	\$151.33	\$186.33
Family	\$430.30	\$465.30	\$260.14	\$295.14	\$202.41	\$237.41
School Health	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$138.67	\$173.67	\$83.38	\$118.38	\$73.72	\$108.72
Team Member & Child	\$227.56	\$262.56	\$132.91	\$167.1	\$114.89	\$149.89
Team Member & Children	\$344.30	\$379.30	\$199.97	\$234.97	\$170.18	\$205.18
Team Member & Spouse	\$301.07	\$336.07	\$180.86	\$215.86	\$141.37	\$176.37
Family	\$387.66	\$422.66	\$235.18	\$270.18	\$184.05	\$219.05

Team Member Contributions - Salary Band C (\$100,000 - \$149,999)						
Full Time (72-80 hrs.)	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$73.19	\$108.19	\$47.15	\$82.15	\$40.82	\$75.82
Team Member & Child	\$110.40	\$145.40	\$68.88	\$103.88	\$58.19	\$93.19
Team Member & Children	\$158.47	\$193.47	\$98.02	\$133.02	\$81.14	\$116.14
Team Member & Spouse	\$146.38	\$181.38	\$94.30	\$12.30	\$78.29	\$113.29
Family	\$182.98	\$217.98	\$117.88	\$152.88	\$97.86	\$132.86
Part Time (56-71 hrs.)	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$115.21	\$150.21	\$73.12	\$108.12	\$61.25	\$96.25
Team Member & Child	\$189.05	\$224.05	\$116.55	\$151.55	\$95.45	\$130.45
Team Member & Children	\$286.03	\$321.03	\$175.37	\$210.37	\$141.39	\$176.39
Team Member & Spouse	\$250.12	\$285.12	\$158.60	\$193.60	\$117.46	\$152.46
Family	\$322.06	\$357.06	\$206.24	\$241.24	\$152.90	\$187.90
Part Time (32-55 hrs.)	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$157.22	\$192.22	\$99.07	\$134.07	\$81.68	\$116.68
Team Member & Child	\$268.55	\$303.55	\$164.76	\$199.76	\$133.22	\$168.22
Team Member & Children	\$412.72	\$447.72	\$252.19	\$287.19	\$202.12	\$237.12
Team Member & Spouse	\$355.95	\$390.95	\$224.67	\$259.67	\$163.44	\$198.44
Family	\$464.72	\$499.72	\$296.56	\$331.56	\$218.60	\$252.60
School Health	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$149.76	\$184.76	\$95.05	\$130.05	\$79.62	\$114.62
Team Member & Child	\$245.76	\$280.76	\$151.52	\$186.52	\$124.08	\$159.08
Team Member & Children	\$371.84	\$406.84	\$227.97	\$262.97	\$183.79	\$218.79
Team Member & Spouse	\$325.16	\$360.16	\$206.18	\$241.18	\$152.68	\$187.68
Family	\$418.67	\$453.67	\$286.11	\$321.11	\$198.77	\$233.77

**Team Member Contributions - Salary Band D (\$150,000 and above)^**

Full Time (72-80 hrs.)	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$79.05	\$114.05	\$52.81	\$87.81	\$44.09	\$79.09
Team Member & Child	\$119.23	\$154.23	\$77.14	\$112.14	\$62.85	\$97.85
Team Member & Children	\$171.15	\$206.13	\$109.78	\$144.78	\$87.63	\$122.63
Team Member & Spouse*	\$158.09	\$193.09	\$105.62	\$140.62	\$84.55	\$119.55
Family*	\$197.62	\$232.62	\$132.02	\$167.02	\$105.69	\$140.69
Part Time (56-71 hrs.)	Platinum Plan\$		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$124.43	\$159.43	\$81.89	\$116.89	\$66.15	\$101.15
Team Member & Child	\$204.18	\$239.18	\$130.54	\$165.54	\$103.09	\$138.09
Team Member & Children	\$308.91	\$243.91	\$196.41	\$231.41	\$152.71	\$187.71
Team Member & Spouse*	\$270.13	\$305.13	\$177.63	\$212.63	\$126.85	\$161.85
Family*	\$347.82	\$382.82	\$230.99	\$265.99	\$165.13	\$200.13
Part Time (32-55 hrs.)	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$169.79	\$204.79	\$110.95	\$145.95	\$88.21	\$123.21
Team Member & Child	\$290.04	\$325.04	\$184.54	\$219.54	\$143.88	\$178.88
Team Member & Children	\$445.74	\$480.74	\$282.45	\$317.45	\$218.29	\$253.29
Team Member & Spouse*	\$384.42	\$419.42	\$251.63	\$386.63	\$176.51	\$211.51
Family*	\$501.90	\$536.90	\$332.15	\$367.15	\$236.09	\$271.09
School Health	Platinum Plan		Gold Plan		QHDHP	
	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit	Wellness Credit	No Well. Credit
Team Member	\$161.74	\$196.74	\$106.46	\$141.46	\$85.99	\$120.99
Team Member & Child	\$265.43	\$300.43	\$169.70	\$204.70	\$134.01	\$169.01
Team Member & Children	\$401.59	\$436.59	\$255.32	\$290.32	\$198.50	\$233.50
Team Member & Spouse*	\$351.17	\$386.17	\$230.92	\$265.92	\$164.90	\$199.90
Family*	\$452.17	\$487.17	\$300.28	\$335.28	\$214.68	\$249.68

^Designated members of the Senior Executive Team should refer to the Benefits Addendum for more information.

\*Team Members in Salary Bands C and D who wish to cover their spouse on the medical plan will be asked if the spouse is employed full-time, and if so, is the spouse offered medical insurance that is affordable and offers minimum essential coverage as defined under ACA. If the answer is “yes” to all of those questions and the spouse remains on the Meritus medical plan, the team member will have a \$100/month (Salary Band C) or \$200/month (Salary Band D) surcharge to cover the spouse.



Meritus offers a voluntary wellness program. Those enrolled in the medical insurance who choose to participate and complete all of the wellness program requirements can earn the Wellness Credit on the medical insurance deduction the following year.

Completion of the 2023 wellness program requirements will determine your eligibility to receive the wellness credit on your medical payroll deduction in 2024. New hires/new enrollees can receive the wellness credit upon initial enrollment in the medical insurance if “Option 1” is elected under “Wellness Program” **AND** the (\$35) “Wellness Credit” are selected when making the medical plan election in bswift.

Requirements more details on the Wellness Program can be found on the Employee Wellness page of the Hub under Employee Resources.



Benefit Term	Definition	How Does this Apply to Meritus Medical Plans?
<b>Co-Pay</b>	A fixed dollar amount that you pay for certain services.	Office visits are flat-copays, as are Urgent Care, Emergency Room visits, and prescriptions. (QHDHP—copays for non-preventive care/prescriptions apply after deductible is satisfied)
<b>Deductible—Platinum and Gold</b>	The dollar amount that you pay before the co-insurance is applied to certain types of services. Each January 1, the amount that you have paid towards the deductible resets to \$0.	For certain services, such as lab work, radiology, outpatient procedures, and hospital stays, you must pay the deductible before the co-insurance is applied to the cost of the service(s). For family coverage, no one person pays more than the individual deductible before the co-insurance is applied for that member.
<b>Deductible - QHDHP plan</b>	The dollar amount that you pay before the plan design is applied to any non-preventive medical and prescription costs. Each January 1, the amount that you have paid towards the deductible resets to \$0.	The deductible must be met before the plan design is applied to any non-preventive medical care or prescriptions. For family coverage, the entire deductible can be met by one or a combination of people and must be satisfied before the plan design applies to any family member.
<b>Co-Insurance</b>	You and the insurance plan share the cost of the service with you paying a smaller percentage of the cost and the insurance plan paying more.	After the deductible has been met for the year, you will be responsible for a small percentage of the cost of the services for the rest of the year.
<b>Out-of-Pocket Maximum (OOP) – Platinum and Gold</b>	The most amount of money that you will have to pay for services received in a calendar year. Copays, deductibles, co-insurance, and prescriptions are applied to the OOP. Excludes fertility treatments, your payroll deductions, balance billing or office fees (such as a fee to pay for FMLA paperwork to be completed). Each January 1, the amount that you have paid towards the out-of-pocket maximum resets to \$0.	This helps to limit how much you will have to pay if you incur a catastrophic condition, accident, recurring treatments, etc. After the out-of-pocket max is met for the year, the insurance plan pays 100% of the covered benefits (you pay \$0) for the remainder of the year. For family coverage, no one person pays more than the individual out-of-pocket maximum.
<b>Out-of-Pocket Maximum (OOP) – QHDHP</b>	The most amount of money that you will have to pay for services received in a calendar year. Copays, deductibles, co-insurance, and prescriptions are applied to the OOP. Excludes fertility treatments, your payroll deductions, balance billing or office fees (such as a fee to pay for FMLA paperwork to be completed). Each January 1, the amount that you have paid towards the out-of-pocket maximum resets to \$0.	This helps to limit how much you will have to pay if a catastrophic condition, accident, recurring treatments, etc. is incurred. After the out-of-pocket max is met for the year, the insurance plan pays 100% of the covered benefits (you pay \$0) for the remainder of the year. For family coverage, the entire out-of-pocket maximum can be met by one or a combination of family members.
<b>In-Network / Out-of-Network</b>	The facilities and providers throughout the country that are contracted with our insurance plan are considered “in-network”.	“Network” or “Area” have NOTHING to do with geography. “In-Network” means the provider and/or facility accepts our insurance; “out-of-area” or “out-of-network” means they don’t accept our insurance.



Tier 1, Tier 2, Tier 3—Platinum, Gold, and QHDHP plans  
(Meritus Provider, THP Affiliated Provider, All Other In-Network Providers)

Any provider or facility in the country that accepts our insurance plan (Aetna Select Open Access ) is “in-network”.

**Tier 1**

Meritus providers and facilities can offer greater cost savings to you !

Designated in Aetna as:  
“Employer Preferred Network” /  
“Maximum Savings”

**Tier 2**

A small number of in-network community providers; may have a slightly higher cost sharing from you.

Designated in Aetna as:  
“Standard Plus Savings”

**Tier 3**

All other in-network providers/facilities; may have higher cost sharing from you.

Designated in Aetna as:  
“Standard Savings”

Effective May 1, 2022, the Tier 1 pharmacy is the Meritus Pharmacy located in the lobby of the Hospital  
11116 Medical Campus Rd; Hagerstown, MD 21742  
(phone) 301-790-9281

You can set the Meritus Pharmacy as your preferred pharmacy in your Meritus MyChart under Medications > Manage My Pharmacies

Examples of Care Tier 1, Tier 2, & Tier 3 — in Gold Plan

	Tier 1 – What You Pay	Tier 2 – What You Pay	Tier 3 – What You Pay
Annual Preventive Check-up	\$0 copay	\$0 copay	\$0 copay
Visit to PCP – knee pain	\$15 copay	\$15 copay	\$25 copay
X-Ray at Radiology Facility	20% co-insurance after deductible	20% co-insurance after deductible	40% co-insurance after deductible
Visit to Orthopedist (specialist)	\$30 copay	\$30 copay	\$50 copay
MRI	20% co-insurance after deductible	20% co-insurance after deductible	40% co-insurance after deductible
Inpatient Hospital stay	20% co-insurance after deductible	N/A – no Tier 2 hospitals	40% co-insurance after deductible + \$500 co-pay
Pain Medication (generic)	\$5	Not Covered	Not Covered

\*You can “cross tiers” when obtaining care. The cost of an outpatient claim, such as lab work or radiology, depends on where you incur the service and not based on the doctor who ordered it.

Platinum	Tier 1 / Meritus	Tier 2 / THP	Tier 3 / All Other Aetna	Out-of-Network
Annual Deductible	\$500 Individual / \$1,00 Family			N/A
Annual Out-of-Pocket Maximum	\$5,000 Individual \$10,000 Family	\$5,000 Individual \$10,000 Family	\$7,500 Individual \$15,000 Family	N/A
Preventive Care	Plan pays 100%	Plan pays 100%	Plan pays 100%	Not Covered
Office Visits—PCP/Specialist	Member Pays \$15 / \$30	Member Pays \$15 / \$30	Member Pays \$20 / \$40	Not Covered
Co-insurance	Member pays 10% after deductible	Member pays 10% after deductible	Member pays 40% after deductible	Not Covered
Emergency Room	Member pays \$150	Member pays \$150	Member pays \$150	Member pays \$150
Urgent Care	Member pays \$35	Member pays \$50	Member pays \$50	Not Covered
Diagnostic Radiology & Lab work / Outpatient Procedure	Member pays 10% after deductible	Member pays 10% after deductible	Member pays 40% after deductible	Not Covered
Inpatient Hospital	Member pays 10% after deductible	Member pays 10% after deductible	Member pays 40% after Deductible and \$500 copay	Not Covered
Prescriptions—Generic / Preferred / Non-Preferred	\$5 / \$30 / \$60 (Meritus)	Not Covered-30-Day Retail \$25/\$150/\$300-90-Day Retail/\$10/\$60/\$120-90-Day Mail		Not Covered
<b>Gold</b>	<b>Tier 1 / Meritus</b>	<b>Tier 2 / THP</b>	<b>Tier 3 / All Other Aetna</b>	<b>Out-of-Network</b>
Annual Deductible	\$600 Individual / \$1,200 Family			N/A
Annual Out-of-Pocket Maximum	\$5,500 Individual \$11,000 Family	\$5,500 Individual \$11,000 Family	\$8,000 Individual \$16,000 Family	N/A
Preventive Care	Plan pays 100%	Plan pays 100%	Plan pays 100%	Not Covered
Office Visits—PCP/Specialist	Member Pays \$15 / \$30	Member Pays \$15 / \$30	Member Pays \$25 / \$50	Not Covered
Co-insurance	Member pays 20% after deductible	Member pays 20% after deductible	Member pays 40% after deductible	Not Covered
Emergency Room	Member pays \$150	Member pays \$150	Member pays \$150	Member pays \$150
Urgent Care	Member pays \$35	Member pays \$50	Member pays \$50	Not Covered
Diagnostic Radiology & Lab work / Outpatient Procedure	Member pays 20% after deductible	Member pays 20% after deductible	Member pays 40% after deductible	Not Covered
Inpatient Hospital	Member pays 20% after deductible	Member pays 20% after deductible	Member pays 40% after Deductible and \$500 copay	Not Covered
Prescriptions—Generic / Preferred / Non-Preferred	\$5 / \$30 / \$60 (Meritus)	Not Covered-30-Day Retail \$25/\$150/\$300-90-Day Retail/\$10/\$60/\$120-90-Day Mail		Not Covered
<b>QHDHP</b>	<b>Tier 1 / Meritus</b>	<b>Tier 2 / THP</b>	<b>Tier 3 / All Other Aetna</b>	<b>Out-of-Network</b>
<b>All non-preventive medical and prescription care is subject to deductible before the plan design is applied</b>				
Annual Deductible	\$1,600 Individual / \$3,200 Family			N/A
Annual Out-of-Pocket Maximum	\$5,500 Individual / \$11,000 Family		\$7,500 Individual/\$15,000 Family	N/A
Preventive Care	Plan pays 100% (no deductible)	Plan pays 100% (no deductible)	Plan pays 100% (no deductible)	Not Covered
Office Visits—PCP/Specialist	Member Pays \$20 / \$35 after deductible	Member Pays \$40 / \$50 after deductible	Member Pays \$40 / \$50 after deductible	Not Covered
Co-insurance	Member pays 20% after deductible	Member pays 20% after deductible	Member pays 20% after deductible	Not Covered
Emergency Room	Member pays \$150 after deductible	Member pays \$150 after deductible	Member pays \$150 after deductible	Member pays \$150 after deductible
Urgent Care	Member pays \$35 after deductible	Member pays \$50 after deductible	Member pays \$50 after deductible	Not Covered
Diagnostic Radiology & Lab work / Outpatient Procedure	Member pays 20% after deductible	Member pays 20% after deductible	Member pays 40% after deductible	Not Covered
Inpatient Hospital	Member pays 20% after deductible	Member pays 20% after deductible	Member pays 40% after Deductible and \$500 copay	Not Covered
Prescriptions—Generic / Preferred / Non-Preferred	\$5 / \$30 / \$60 (Meritus) after deductible	Not Covered-30-Day Retail \$25/\$150/\$300-90-Day Retail/\$10/\$60/\$120-90-Day Mail		Not Covered
<b>All non-preventive medical care and prescriptions is subject to deductible before the plan design is applied</b>				

Medical: Aetna  
 Group# 0835028  
 866-894-9933  
 www.aetna.com  
  
 Pharmacy: Meritus  
 Pharmacy  
 TPA: Capital Rx  
 888-832-2779

## What is a QHDHP and HSA?

The Qualified High Deductible Health Plan (QHDHP) is a medical insurance plan that covers the same services and has the same network as the Meritus Platinum and Gold medical plans, but there is a higher deductible that must be met before the plan pays towards any non-preventive medical or prescription claims. Preventive care is still covered at 100% by the plan with no deductible.



As with the other medical plans, the QHDHP has an out-of-pocket dollar maximum that limits how much you will pay in a plan year towards claims, including what you pay as the deductible, copays, and co-insurance for both medical care and prescriptions. Once the out-of-pocket maximum is met, any claims incurred during the remainder of the plan year are covered at 100% by the insurance.

The QHDHP has a different type of deductible than the other medical plans. In the QHDHP, for all coverage tiers other than team member-only, the deductible is an aggregate family deductible, meaning when one family member or a combination of family members meet the deductible, the plan begins paying towards the cost of the claims for the member.

In exchange for the higher deductible, the payroll deduction is less than the other plans and there is the opportunity to participate in the Health Savings Account (HSA).

An HSA is a individually owned bank savings account that offers a triple tax savings:

1. Deductions are taken pre-tax from your paycheck, lowering your taxable income.
2. Withdrawals from the HSA for eligible expenses are not subject to federal (and in most cases, state) taxes.
3. Any interest on the money in the account or investments is tax-free.

You can elect to have money deducted from your paycheck pre-tax and deposited into your HSA account. Meritus will also contribute to your open, eligible HSA account in an amount depending on the level of enrollment in the QHDHP.

HSA funds can be used to pay for the you and your eligible family member's eligible expenses incurred as of the date that the HSA is established; and any unused funds remain in the account to build-up and save for use in the future, even into retirement. Any unused funds, even the Meritus contribution, don't "expire" and it is not a "use-it-or-lose-it" account.

Benefit Term	Definition	When Does it Apply?
<b>Health Savings Account (HSA)</b>	A type of savings account that is owned by the team member and allows the team member to defer money from paychecks on a pre-tax basis. The funds can be used to pay for qualified health care expenses for the team member and eligible family members.	To be eligible to open and receive contributions into an HSA, a team member must be enrolled in a QHDHP. Please refer to the material available on the Meritus Intranet or in bswift regarding other eligibility criteria that must be met in order to contribute to a HSA.

### Things to Consider When Selecting a Health Plan

- Review your typical medical and prescription drug expenses in a calendar year.
- Are you planning on having a child in 2022 or having surgery?
- Are you looking for options to put money away tax free?
- What is the difference in payroll deductions between the three plans?



askEMMA

If you need help determining which plan may be best for you, the askEMMA tool in bswift may be able to help. This is an interactive decision support tool which is fully integrated into the enrollment platform. AskEMMA guides you through the selection process by asking a few simple questions about the family's health and expected health care services. Based on those answers, askEMMA provides a comparison of the estimated annual out-of-pocket cost of each of the medical plans.

### Dental Plan Options

Meritus Health offers two (2) dental plan options through Delta Dental of Pennsylvania, referred to as the Gold and Silver plans.

Both dental plan options use the Delta Dental PPO plus Premier network program, which offers access to two different Delta Dental networks – Delta Dental PPO and Delta Dental Premier. The two-tier network of the PPO plus Premier program is a cost-saving feature that is rarely available in the industry, and gives you access to the largest dentist network in the U.S. while offering protection from the higher out-of-pocket costs that are likely when you visit non-Delta Dental dentists.

Delta Dental dentists agree to accept Delta Dental’s allowances in the PPO and the Premier networks as payment in full for covered services. This means lower out-of-pocket costs for you. You’ll likely save the most if you visit a Delta Dental PPO network provider; and you’ll save moderately if you visit a dentist who participates in the larger Premier network. However, as a PPO plan, you may also visit dentists who do not participate with Delta Dental. Services rendered by non-Delta Dental dentists are reimbursed on the basis of the Premier allowances, and you are responsible for the difference between Delta Dental’s payment and the non-Delta Dental dentist’s actual charge.

### ID Cards

An ID card is not required in order to obtain dental care. Let your dental office know that you're covered by Delta Dental of Pennsylvania and the provider will ask for the policyholder’s (you, as the team member) information to verify the benefit of the covered member(s). You can also access your policy information, obtain a temporary ID card, or request an ID card to be sent to you on [www.DeltaDentalins.com](http://www.DeltaDentalins.com).

<b>Eligibility</b>	Primary enrollee, spouse and eligible dependent children to the end of the month dependent turns age 26			
<b>Deductibles</b>	\$50 per person / \$150 per family each calendar year			
Deductibles waived for Diagnostic & Preventive (D & P) and Orthodontics, if applicable?	Yes			
<b>Maximums</b>	Silver Plan: \$1,000 per person each calendar year Gold Plan: \$1,500 per person each calendar year			
D & P counts toward maximum?	No			
<b>Waiting Period(s)</b>	Basic Benefits None	Major Benefits None	Prosthodontics None	Orthodontics None

Benefits and Covered Services*	Silver Plan		Gold Plan	
	Delta Dental PPO dentists**	Non-Delta Dental PPO dentists**	Delta Dental PPO dentists**	Non-Delta Dental PPO dentists**
<b>Diagnostic &amp; Preventive Services (D &amp; P)</b> Exams, cleanings, x-rays and sealants	100 %	100 %	100 %	100 %
<b>Basic Services</b> Fillings, denture repair/reline/rebase and stainless steel crowns	50 %	50 %	80 %	80 %
<b>Endodontics</b> (root canals) Covered Under Basic Services	50 %	50 %	80 %	80 %
<b>Periodontics</b> (gum treatment) Covered Under Basic Services	50 %	50 %	80 %	80 %
<b>Oral Surgery</b> Covered Under Basic Services	50 %	50 %	80 %	80 %
<b>Major Services</b> Crowns, inlays, onlays and cast restorations	0 %	0 %	50 %	50 %
<b>Prosthodontics</b> Bridges, dentures and implants	0 %	0 %	50 %	50 %
<b>Orthodontics Benefits</b> Adult and dependent children	0 %	0 %	50 %	50 %
<b>Orthodontics Maximums</b>	Not applicable	Not applicable	\$1,500 Lifetime	\$1,500 Lifetime

	Full-time Team Member (72-80 bi-weekly hours)		Part-time Team Member (32-71 biweekly hours)		School Health Team Member (32-80 bi-weekly hours)	
	Gold Plan	Silver Plan	Gold Plan	Silver Plan	Gold Plan	Silver Plan
Dental Bi-weekly Payroll Deductions						
Team Member	\$5.92	\$4.00	\$8.94	\$6.00	\$7.70	\$5.20
Team Member + Child	\$15.39	\$10.32	\$23.24	\$15.47	\$20.01	\$13.41
Team Member + Children	\$15.39	\$10.32	\$23.24	\$15.47	\$20.01	\$13.41
Team Member + Spouse	\$11.72	\$7.87	\$17.70	\$11.80	\$15.24	\$10.23
Family	\$23.31	\$15.60	\$35.20	\$23.40	\$30.31	\$20.28

## Vision Plan Options

Meritus Health offers two (2) vision plan options, referred to as the Gold and Silver plans, through VSP/Ameritas. The vision plan provides access to nationwide providers, which include private practice optometrists and ophthalmologists, as well as conveniently located retail stores. An ID card is not issued and is not required in order to use the vision insurance. Let your vision provider know that you're covered by VSP, the provider should be familiar that VSP does not issue ID cards. Any covered dependent(s) will also provide the policyholder's (team member) details to the vision provider.

	Gold Plan	Silver Plan
<b>Deductible</b>	\$0 Eye Exam \$0 Eye Glass Lenses or Frames	\$10 Eye Exam \$25 Eye Glass Lenses or Frames
<b>Annual Eye Exam</b>	Covered in Full	Covered in Full after deductible
<b>Lenses (per pair) - Single, Bifocal, Trifocal, Lenticular</b>	Covered in Full	Covered in Full
<b>Lenses (per pair) - Progressive</b>	Up to provider's contracted fee for Lined Bifocal Lenses. The member is responsible for the difference between the base lens and the Progressive Lens charge.	Up to provider's contracted fee for Lined Bifocal Lenses. The member is responsible for the difference between the base lens and the Progressive Lens charge.
<b>Contacts</b>		
<b>Fit &amp; Follow up Exams</b>	15% Discount	15% Discount
<b>Elective</b>	Up to \$180	Up to \$130
<b>Medically Necessary</b>	Covered in Full	Covered in Full
<b>Frames</b>	\$180	\$130
<b>Frequency (months) Exam/Lenses/Frames</b>	12/12/12 Based on Date of Service	12/12/24 Based on Date of Service

Vision Bi-weekly Payroll Deductions Coverage	Full-Time & Part-Time Team Member (32-80 bi-weekly hours)		School Health Team Member (32-80 bi-weekly hours)	
	Gold Plan	Silver Plan	Gold Plan	Silver Plan
Team Member	\$5.46	\$4.30	\$7.10	\$5.59
Team Member + Child	\$7.96	\$6.22	\$10.34	\$8.09
Team Member+ Children	\$8.95	\$7.05	\$11.64	\$9.17
Team Member+ Spouse	\$10.58	\$8.31	\$13.75	\$10.80
Family	\$14.03	\$11.02	\$18.24	\$14.33

## Flexible Spending Account (FSA) - Health Care and/or Dependent Care

### Flexible Spending Accounts

Flexible Spending Accounts - or FSAs - allow you to set aside a portion of your earnings on a pre-tax basis to pay for qualified expenses as defined by the IRS. Money deducted from your pay for an FSA is not subject to federal income tax, Social Security or Medicare and most states' income tax, which can result in a substantial tax savings to you. Meritus Health offers team members the opportunity to contribute to two types of FSAs—a Health Care and/or a Dependent Care.



A Health Care FSA has a maximum deposit limit of \$2,850 in 2023. Team Members are permitted to rollover a maximum of \$570 in unused health care FSA funds from 2023 to 2024. Please see IRS guidelines and/or WEX for what is considered an eligible expense under this account. Examples of eligible expenses are:

- Deductible
- Prescriptions
- Dental Work
- Prescription eye glasses

A Dependent Care FSA has a maximum deposit limit of \$5,000 per year and is for eligible **day care** related expenses. Due to IRS regulation, highly compensated team members may be limited on the dollar amount they can contribute due to annual discrimination reporting. Examples of eligible expenses are:

- After school care
- Day care
- Summer camp
- Nanny

**You are required to sign up for and/or re-elect a Flexible Spending Accounts each year during open enrollment.**

	HSA	Health Care FSA
Annual Limits (2023)	<ul style="list-style-type: none"> <li>\$3,850 (if enrolled in team member-only HDHP) / \$7,750 (all other tiers) / if age 55+, can contribute up to \$1,000 over max (opening a HSA mid-year will prorate the annual limit based on the number of months remaining in year)</li> <li>Can voluntarily change / stop payroll contribution amount through the year</li> <li>Make changes during open enrollment</li> </ul>	<ul style="list-style-type: none"> <li>\$2,850</li> <li>Can change election amount if experience certain qualifying life events (ex.: having a baby) or during open enrollment for the next year</li> </ul>
Restrictions on Eligibility	<ul style="list-style-type: none"> <li>Must be in a QHDHP medical plan</li> <li>Cannot contribute if in Medicare, covered under a non-QHDHP, have a general-use FSA, or are claimed as a dependent on someone's tax return</li> </ul>	<ul style="list-style-type: none"> <li>Cannot have a HSA</li> <li>No restriction or requirements related to medical plan enrollment</li> </ul>
Use of Account Funds	<ul style="list-style-type: none"> <li>Keep receipts and documentation in case ever asked by IRS to prove funds were used for eligible expenses</li> <li>Can use funds that are currently available in the account</li> </ul>	<ul style="list-style-type: none"> <li>May need to substantiate eligibility of use to avoid possible suspension of FSA card by vendor or to avoid funds being treated as taxable income</li> <li>Can use the full annual election before the funds are deposited (annual election is "front-loaded")</li> </ul>
Eligible Expenses	<ul style="list-style-type: none"> <li>Qualified health care expenses as described in IRS publication 502</li> <li>Can be used for the following insurance premiums:                             <ul style="list-style-type: none"> <li>Long term care insurance</li> <li>COBRA</li> <li>Health coverage while receiving unemployment compensation under federal or state law</li> <li>Medicare (other than for a Medicare supplemental policy such as Medigap)</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Qualified health care expenses as described in IRS publication 502</li> </ul>
What Happens When Leave Employment	<ul style="list-style-type: none"> <li>Can keep money in account or can rollover into another HSA</li> <li>Money stays in account indefinitely until used for eligible expenses in future</li> </ul>	<ul style="list-style-type: none"> <li>Can submit claims for 90 days from last day of employment for services incurred before last day</li> <li>Unused funds are forfeited</li> </ul>
Investment Options	Yes – once hit minimum balance threshold in account	No
Sources of Funds	<ul style="list-style-type: none"> <li>Pre-tax deductions from team member paychecks</li> <li>Employer contribution</li> <li>Contributions from other third parties</li> </ul> 	<ul style="list-style-type: none"> <li>Pre-tax deductions from team member paychecks</li> </ul> 

**Basic Life Insurance/AD&D**

If eligible, Basic Life insurance is a term life insurance policy automatically provided to you by Meritus; Accidental Death & Dismemberment (AD&D) insurance provides an additional benefit in the same amount as the Basic Life insurance if you pass away due to/in an accident or provides specified benefit payments if you should happen to become dismembered.

Hourly (Non-Exempt) team members receive:

- One-time annualized, budgeted-base salary basic life insurance benefit up to the benefit maximum.
- One-time annualized, budgeted-base salary AD&D benefit up to the benefit maximum.

Salaried (Exempt) team members receive:

- Two-times annualized, budgeted-base salary basic life insurance benefit up to benefit maximum.
- Two-times annualized, budgeted-base salary AD&D benefit up to the benefit maximum.

The maximum basic life insurance benefit and maximum basic AD&D insurance benefit is \$500,000. Your annual base salary is rounded to the next highest \$1,000 increment if not already a multiple of \$1,000.

This benefit does not require the completion of an application and is at no cost to you, and it is recommended that you designate a beneficiary in case a benefit needs to be paid. The amount of benefits set forth above will decrease by 33% at age 70 and 50% at age 75.

**Supplemental Life Insurance/AD&D**

If eligible, you have the option to purchase additional life insurance for yourself, your spouse, or your child(ren). Below are details of the options and underwriting requirements.

- You may elect additional amounts of life insurance in \$10,000 increments to a maximum of \$500,000 or 5x annual base earnings (whichever is less). The guarantee issue (GI) amount of life insurance for newly eligible team member is \$250,000.
- Spouse supplemental life insurance elections can be in increments of \$5,000 to a maximum of \$250,000. The guarantee issue (GI) amount of life insurance for newly eligible spouses is \$30,000. You must have supplemental life coverage in order for a spouse to be covered; spouse coverage cannot exceed 50% of your supplemental life coverage.
- Child(ren) may have supplemental life insurance in a flat amount of \$10,000. You must have supplemental life coverage in order for child(ren) to be covered; child(ren) coverage cannot exceed 50% of your supplemental life coverage.

Applications for amounts in excess of the guarantee issue for team members and spouse will require an Evidence of Insurance (EOI) form to be submitted for review by the life insurance carrier. Any request above the GI will be considered pending until the EOI is approved by the carrier. Additional AD&D coverage can also be elected for the team member, spouse, and children) in the same amount as the supplemental life insurance election.

**Company Provided Short Term Disability & Long Term Disability / Paid Parental Leave****Short Term Disability (STD) - self-managed and self-insured (Salary Continuation benefit)**

Full-time team members are eligible for Short Term Disability after six (6) months of eligible employment provided at no cost. The benefit applies when you are unable to work due to your own non-work related illness or injury. The benefit pays 60% of the your base salary to a maximum benefit payment of \$1,500 per week. Payments begin after a 14 calendar day elimination period that starts on the date of disability and is paid for a maximum of 180 calendar days after the elimination period. Any accrued, available PTO is used to pay the elimination period and also to supplement the STD payment. Please refer to the Short Term Disability policy HR-IV-20 located on the Hub. \*Members of SET and physicians who are a 0.5 FTE higher should refer to their Benefits Addendum for more information

**Long Term Disability (LTD) – managed by a Third Party Administrator**

Long Term Disability is provided at no cost to team members who are budgeted for at least 20 hours per week (0.5 FTE). After 180 calendar days of a leave of absence due to your own non-work related illness or injury, you are eligible for LTD. LTD pays 60% of your pre-disability base salary, up to a maximum of \$14,000 per month.

**Paid Parental Leave—self-managed and self-insured**

Full-time team members are eligible for Paid Parental Leave after six (6) months of eligible employment. As the non-birth parent, you can request Paid Parental Leave due to the birth/adoption of a child. The benefit pays 60% of the your base salary to a maximum benefit payment of \$1,500 per week. Payments begin after a 14 calendar day elimination period that starts on the date of birth/adoption and is paid for 4 weeks after the elimination period. Any accrued, available PTO is used to pay the elimination period and also to supplement the paid parental leave payment. Please refer to the Leave of Absence policy HR-IV-13 located on the Hub.

**Employee Assistance Program (EAP)****Employee Assistance Program (EAP)**

Meritus Health has an Employee Assistance Program which covers a wide range of personal problems, including marriage and family problems, alcoholism, substance abuse, financial, and emotional problems. The EAP is available to **ALL** team members and anyone in their household at no cost. The EAP can be reached at 301-766-7600 and appointments are available same day or within 24 hours of the request for an appointment. All calls and appointments with the EAP are completely confidential.





Nothing is more important for your health and well-being than some time away from work. The challenge of balancing work and personal responsibilities is different for each team member. Whatever your need, interest, or responsibility, our approach to time off provides the flexibility to best plan your work and personal life.

If eligible, you begin earning leave on your first paycheck and may use the time after successfully completing the probationary period. School health team members follow a different PTO plan. Please ask your coach and/or Team Member Services if you have questions. Members of SET, physicians, and Advanced Practice Professionals should refer to their Benefits Addendum for more information

regarding PTO.

PTO pays for time away from work due to illness, vacation, personal time, and any holiday that is not worked due to the holiday. Meritus recognizes the following holidays: New Year's Day, Martin Luther King Jr. Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day.

For new hires after July 1, 2022, accrued, unused PTO is paid out to a team member who separates service or reduces hours only if the team member has been employed for at least 3 consecutive years at the time of separation or reduction of hours.

NON-EXEMPT (Hourly) TEAM MEMBER PER PAY ACCRUAL SCHEDULE (effective 7/1/2022)								
FTE	Length of Service 0-3 Years		Length of Service 4-9 Years		Length of Service 10-18 Years		Length of Service 19+ Years	
	Biweekly Accrual	Max PTO Bank	Biweekly Accrual	Max PTO Bank	Biweekly Accrual	Max PTO Bank	Biweekly Accrual	Max PTO Bank
0.3	2.21	86	2.59	101	3.23	126	3.69	144
0.4	2.95	115	3.45	134	4.31	168	4.92	192
0.5	3.69	144	4.31	168	5.39	210	6.16	240
0.6	4.43	173	5.17	202	6.46	252	7.39	288
0.7	5.17	201	6.03	235	7.54	294	8.62	336
0.8	5.90	230	6.90	269	8.62	336	9.85	384
0.9	6.64	259	7.76	303	9.69	378	11.08	432
1.0	7.38	288	8.62	336	10.77	420	12.31	480

EXEMPT (Salaried) TEAM MEMBER PER PAY ACCRUAL SCHEDULE						
FTE	Length of Service 0-5 Years		Length of Service 6-15 Years		Length of Service 16+ Years	
	Biweekly Accrual	Max PTO Bank	Biweekly Accrual	Max PTO Bank	Biweekly Accrual	Max PTO Bank
0.3	2.59	101	3.23	126	3.69	144
0.4	3.45	134	4.31	168	4.92	192
0.5	4.31	168	5.39	210	6.16	240
0.6	5.17	202	6.46	252	7.39	288
0.7	6.03	235	7.54	294	8.62	336
0.8	6.90	269	8.62	336	9.85	384
0.9	7.76	303	9.69	378	11.08	432
1.0	8.62	336	10.77	420	12.31	480

DIRECTORS/EXECUTIVE DIRECTOR PER PAY ACCRUAL SCHEDULE						
FTE	Length of Service 0-4 Years		Length of Service 5-13 Years		Length of Service 14+ Years	
	Biweekly Accrual	Max PTO Bank	Biweekly Accrual	Max PTO Bank	Biweekly Accrual	Max PTO Bank
0.5	4.61	180	5.38	210	6.15	240
1.0	9.23	360	10.77	420	12.31	480



**Retirement Information** *Note: This plan is not available to FST, Relief, Temporary, or team members of Diagnostic Imaging Services (DIS). DIS offers its own retirement plan to eligible team members. If you are a DIS team member, please speak with your coach to obtain more information.*

Team Members who are budgeted for 8 hours per pay (0.1 FTE) or higher are eligible to contribute into the 401k plan. The plan is set up that upon eligibility, you are auto-enrolled with a 3% deferral to begin approximately 30 days after date of eligibility. You can change the deferral percentage from 0% to 75% before or after the automatic enrollment deferral begins. If the deferral is changed within the first 30 days, it is effective as soon as administratively practical. Funds and contributions will automatically be deposited into the appropriate Target Retirement Date Fund unless you otherwise change it. If you continue the auto-enrollment contribution, your contribution percentage will automatically increase each December in 1% increments to a max contribution of 10% of pay. However, if you change your payroll deferral at any time, you will need to elect the auto-increase feature if you want that to continue. The 401k plan offers a Roth option that you can elect as well. You are able to elect the Roth option, decline or make changes to the automatic enrollment percentage and the automatic increase percentage and date, and change the investment fund selection at any time by contacting the retirement plan directly.

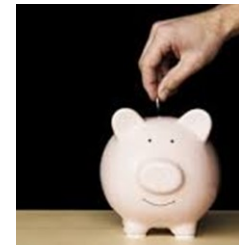
The maximum annual contribution dollar limit that you can defer for the calendar year is set by the IRS . For 2023, the maximum contribution is \$22,500. If you reach at least age 50 by the end of 2023, you may contribute an additional \$6,500 in 2023.

To help advise team members on retirement planning, Meritus provides financial planning consultations with Serafini Financial Services. Appointments with a certified financial planner can be arranged through Team Member Services at 301-790-8500 and are at no-cost to the team member.

### Employer Matching Contributions

Meritus Health makes employer contributions to your 401(k) account by matching all or part of your deferral contribution. Meritus matches 100% of your contribution up to your first 3%; and matches 50% of your contribution between 3% and 6%. Matching contributions are immediately 100% vested.

<u>Team Member Deferral</u>	<u>Company Match</u>
Up to 3%	100%
Over 3 up to 6%	50%
Over 6% up to 75%	0%



## Education Assistance

Meritus Health offers two different education assistance benefits for full and part-time team members (budgeted 40 hours or more per pay) - Tuition Reimbursement and Academic Assistance. Meritus Health encourages team members to seek opportunities to acquire new skills or enhance their present level of occupational preparedness. To support this initiative, an annual allotment is budgeted each fiscal year for reimbursement of eligible coursework. This benefit is available to team members who have completed their probationary period, who are budgeted to work at least 40 hours per bi-weekly pay period (0.5 FTE), and are in good standing. Reimbursement amounts do not cover books or fees, vary depending on degree track, and are prorated based on FTE.

There are requirements for certain grades (GPA), content of coursework, and a service commitment to the organization. For both of the benefits, there is an application form on the Hub and an approval process that begins prior to the start of the coursework . Team Members are advised to review the Education Assistance policy on the Hub before applying.

## Team Member Activities

Meritus Health sponsors many activities throughout the year in which team members and their families are welcome and encouraged to participate. Activities include an annual team member picnic, holiday luncheon, special sales (books, gifts, uniforms, and jewelry), holiday activities, and a variety of trips.

Team Members can also join the Employee Activities Committee to help organize and facilitate these events. To become a volunteer on the committee, please email EAC@meritushealth.com.

## Employee Health

Employee Health offers certain immunizations, vaccines, and lab tests without charge to Meritus Health team members. Team Members must also visit Employee Health when returning from a leave of absence. Please call 301-790-8319 to speak to the Employee Health Nurse.



In addition to the basic benefits where Meritus Health pays a substantial portion of all of the costs, and voluntary benefits which allow you to upgrade your benefits, Meritus Health also offers other products and services that allow you to receive discounts and other privileges. The products and services on the following pages can be purchased online or directly from the companies listed by identifying yourself as a team member of Meritus Health when requesting the service.

### Computer Services and Purchasing Programs

#### Dell Computer Purchase Program

Meritus Health offers you the benefit of purchasing computers through Dell at a discount. Information on the program is available at [www.dell.com/mpp/meritus](http://www.dell.com/mpp/meritus). All discounts are built into the site.

### Purchasing Programs

#### Office Depot

Use the Store Purchasing Card while shopping in any Office Depot or OfficeMax store to receive custom-discounted prices and discounts on printing and copying services. Employees can access the Store Purchasing Card on the Meritus Employee Perks intranet page.

#### Premier GPO Member Discounts

Access coupons and discount codes on a variety of purchases and services, such as appliances and related products, flooring products and services, paint and related sundries, and rental car services. More information, including the coupons and/or discount codes

### Entertainment Savings

Welcome to Ticket Monster Perks!

Ticket Monster Perks is our new entertainment benefit platform that offers you exclusive discounts on hotels, sports, concerts, theater, movie tickets, and theme park tickets nationwide. Follow the easy steps below and start saving today!

1. Go to [ticketmonsterperks.com](http://ticketmonsterperks.com)
2. Sign up and save \$5 on your first order and earn cash back with each purchase!
3. Start browsing discount sports, concert, movie and theme park tickets nationwide!

\*If prompted, enter your company identifier: **MeritusTix1**  
Feel free to contact the Ticket Monster team at any time by calling 1-866-217-4777 or emailing [service@ticketmonster.com](mailto:service@ticketmonster.com). Enjoy using Ticket Monster Perks for all of your event ticket needs!

Bulls & Bears Restaurant wishes to extend appreciation to the health care professionals at Meritus Health by offering a 20% discount every Tuesday and Thursday. To review the menu, visit [bullsandbears.biz](http://bullsandbears.biz).

In order to receive the 20% discount, you must present your Meritus Health ID badge to your server.

### Health Products

#### Equipped for Life

Mon, Tue, Thur, Fri: 8:30 am - 5:30 pm Wed: 9:30 am - 5 pm  
525 Dual Highway, Hagerstown, MD 21740  
301-714-0200

With more than 25 years of experience, Equipped for Life offers a wide range of medical equipment and products to help you remain independent. Call or stop in to the Equipped for Life retail showroom to learn how to make life easier, more comfortable, and more active. Meritus Health employees receive a 10% discount off all non-discounted medical products not billable to insurance at Equipped for Life. View the Equipped for Medical Supply Resource guide at [Meritushealth.com/Resourceguide](http://Meritushealth.com/Resourceguide).

### Home Buying

Dan Ryan Builders is pleased to offer a Meritus Health employees:

- Up to \$1,500\* in discounts available in addition to Dan Ryan's already great incentives;
  - Friends make the best neighbors! Learn about Dan Ryan's referral program;
  - Closing Cost assistance available
  - Amazing investment opportunities
- Visit [danryanbuilders.com](http://danryanbuilders.com) today.

Homes for Heroes® is an organization that was formed after the tragic events of 9/11 as a way to say "Thank You" to the heroes of our nation. This program allows us to give back to our local community heroes by giving them discounts and rebates when they buy or sell with an affiliated Homes for Heroes Realtor and Lender. We also have other professional affiliates that are willing to give back to our local heroes, creating a well-rounded savings package for our community heroes that continues to give back to them even after they close on a house.

For more information about this program, contact your Homes for Heroes Realtor:

Lisa Teach, Realtor, CDPE,  
RE/MAX Results

Cell: 301-514-3785 Office: 240-707-3200

[lisateachsells@verizon.net](mailto:lisateachsells@verizon.net)

[4yourmdhomes.com](http://4yourmdhomes.com)

RE/MAX Platinum Club & Hall of Fame

Locations in Washington and Frederick counties

1219 Mt. Aetna Road, Hagerstown

7210 Corporate Court, Frederick

## Sports and Fitness

### CrossFit

583 Northern Avenue, Hagerstown, Md. 21742

CrossFit has been embraced by communities, the military, police and fire departments. Why? Because CrossFit is based on fundamental, functional movements used in everyday life. Men and women are seeing life-changing results!

CrossFit offers

- Month-to-Month, three-month, six-month and 12-month memberships
- Discounts are available for military, law enforcement, EMT, firefighters, medical workers and students

Contact: Tim Kellinger, co-owner and head trainer at 301-788-8863

Hagerstown Sports Club and Fitness located at 20321 The Gardens, Hagerstown, is pleased to offer Meritus Health employees a discount of 20% off the regular monthly membership rate on an annual term membership.

Visit Monday – Friday from 10 a.m.-6 p.m. or call to arrange a personal tour at 240-625-9474.

### Regenerate

Employees receive 10% off all non-discounted products and services. Located at 20 W. Washington St., Hagerstown. For information on services, call 301-992-4249.

### Tax Service

Liberty Tax Service offers employees a special tax preparation rate of \$99. Liberty Tax Service will prepare and file federal and state(s) tax returns for this special flat rate of \$99 regardless of the complexity of the return.

To take advantage, please bring your employee badge, most recent pay stub or W2 to your appointment.

Hagerstown Locations:

- 1073 Maryland Ave. (South End Shopping Center)  
301-582-2528
- 122 N. Burhans Blvd. (Beside Roy Rogers) 301-733-6990
- 53 Eastern Blvd. (Weis Shopping Center) 301-714-1040
- 1521 East Main St., Waynesboro, Pa. (Wayne Heights Mall)  
717-749-7396

*Note: Most offices are independently owned and operated. This discount may not be offered at all locations or may vary by location.*

## Wireless Services

AT&T users - Save 25% on qualifying AT&T services.

In addition to the AT&T Sponsorship Program discount, you'll also enjoy these benefits:

- Unlimited usage on the AT&T national Wi-Fi® network at no additional charge
- Simultaneous use of voice and data on the AT&T Mobile Broadband Network
- Keep unused minutes from month to month with Rollover®, only from AT&T
- Share data on up to 10 devices and save with AT&T Mobile Share Plans

To purchase online, visit

Att.com/wireless/meritushealth or to find the AT&T store closest to you, visit: att.com/find-a-store

If you visit a local AT&T store, please have proof of eligibility (employee badge, pay stub or student ID).

Mention FAN: **2388060**



*Vendors are independent of Meritus\* and Meritus does not endorse any vendor, product, or service who offers discounts\*. Programs, products, and services may change without notice.*

*\*Excludes Equipped for Life*



	Phone	Email
Team Member Services Main Line / Seyda Wagner, Department Assistant	301-790-8500	humanresources@meritushealth.com / Seyda.Wagner@meritushealth.com
Benefits		Benefits@meritushealth.com
Jena Judd, Director of HR Operations	301-790-8616	Jena.Judd@meritushealth.com
Micha Whitsel, Sr. HRBP, Talent Management	301-790-8502	Micha.Whitsel@meritushealth.com
Tabitha Koons Manager, Benefits & Leave Administration	301-790-8510	Tabitha.Koons@meritushealth.com
Becky Crum, Compensation/Retirement Plan Analyst	301-790-8659	Rebecca.Crum@meritushealth.com
Leave Line for FMLA or Leave Of Absence	301-790-9201 or 888-803-1523	Follow the prompts on the automated message
Sara Stottlemeyer, Leave of Absence Specialist	301-790-8503	Sara.Stottlemeyer@meritushealth.com
Jenny Shingleton, Director, Benefits, HRIS , Training/ Org. Dev. & Employee Health	301-790-8538	Jennifer.Shingleton@meritushealth.com
Amy Faircloth, HR Assistant	301-790-8647	Amy.Faircloth@meritushealth.com
Sherri Schindel, HRIS Specialist	301-790-8526	Sherri.Schindel@meritushealth.com
Lynne Waldron, Training & Org. Dev.	301-790-8348	Lynne.Waldron@meritushealth.com
Matt Hast, Instructional Design and Training Spec.	301-790-8621	Matthew.Hast@meritushealth.com
Employee Health	301-790-8319	EmployeeHealth@meritushealth.com
Payroll (Taxes and Direct Deposit)	301-790-8870	Payroll@meritushealth.com

In addition, below you will find contact information for your benefit carriers.

Benefit Type	Carrier/Vendor	Phone	Website
Medical & Prescription	Aetna Capital Rx	866-894-9933 888-832-2779	www.aetna.com www.cap-rx.com
Dental	Delta Dental of PA	800-932-0783	www.deltadentalins.com
Vision	VSP/Ameritas	800-877-7195	www.ameritas.com / www.vsp.com
FSA	WEX	866-451-3399	www.wexinc.com
HSA	HSABank	800-357-6246	www.myhsabankaccount.com
Employee Assistance Program (EAP)	Confidential counseling and resources pertaining to personal growth, healthy lifestyles, & family matters	301-766-7600 or 800-635-2774	www.meritushealth.com
Retirement Plan	Empower	866-467-7756	EmpowerMyRetirement.com
Voluntary Benefits	Select Benefits	888-711-4478, ext. 2	
Employee Benefits Portal	bswift		www.meritushealth.bswift.com or via link on MySource homepage
Policies and Procedures	Intranet / HUB - Policy Manager		

