



2016 Open Enrollment Guide

October 19 -30, 2015

Benefit Guide Disclaimer: This benefit guide highlights key features of the Premier Health benefits program and does not include all plan rules and details. The terms of your benefit plans are governed by legal documents, including insurance contracts. Should there be any inconsistencies between this guide and the legal plan documents, the plan documents are the final authority. Premier Health reserves the right to change or discontinue its benefit plans at any time without prior advance notice. Participation in any of the plans is not a contract of employment.



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Welcome

Welcome to your Premier Health 2016 Open Enrollment Guide. In this interactive guide you will find an overview of the new and changing benefits available to you for the 2016 Plan Year, with links to additional information about the benefits that interest you.

Open Enrollment for our benefit programs will be held October 19 - 30, 2015 for the employees of Atrium Medical Center, Good Samaritan Hospital, Miami Valley Hospital, Upper Valley Medical Center and Upper Valley Physicians Corp. Open Enrollment is your opportunity to review and make changes to your benefit elections for the plan year beginning January 1, 2016.

Because benefits are an important part of your total compensation package, Premier Health strives to offer benefits that protect your lifestyle and financial security. We encourage you to prepare for Open Enrollment by carefully reviewing this benefit guide. Additional information about your benefits and how to enroll is available to you on Lawson Employee Self-Service under MVH GSH AMC UVMC Benefits → 2016 Benefits. Click [here](#) for instructions on how to log in to Lawson ESS remotely.

What's New for 2016

New Medical Plan Option: Premier Health will offer a new medical plan option called Premier Health Employee Plan – HSA. This is a high deductible health plan (HDHP) associated with a Health Savings Account (HSA). Some of the features of the new plan include:

- Uses the same provider networks (Tier I and Tier II) as the current medical plan.
- Provides 100% coverage for preventive services.
- Has an integrated deductible, which means the prescription drug costs apply to the same deductible as the medical costs. After you reach the deductible, the plan pays a percentage of your costs (coinsurance) for both medical services and prescription drugs.
- Associated with an HSA which allows you to save for future medical expenses by making voluntary tax-free contributions through payroll deductions.

For a more complete summary of the HSA medical plan, click [here](#).

Premier Health Employee Plan – HRA: Premier Health will continue to offer the current medical plan option with a Health Reimbursement Account (HRA) with some changes:

- CVS clinics and University Health clinics will be covered at the Tier I benefit level with a PCP copay. Employees communicated concerns about their dependents who are away at school; we listened and responded.
- Copays for physician office visits, emergency and urgent care have increased.
- Added a preferred generic prescription drug category (Level 1) that offers a \$4 copay at Premier Health pharmacies and a \$10 copay at other network retail pharmacies. Copays for other prescription drug levels have increased slightly.

For a more complete summary of the HRA medical plan, click [here](#).

New Voluntary Benefits: You now have the opportunity to enhance your benefit package with new voluntary benefit options, including Accident Insurance, Critical Illness Insurance, and Long Term Disability Insurance (LTD) for part-time employees. (Note: Full-time employees receive LTD insurance as an employer paid benefit.) Enrollment in these plans occurs only during the Open Enrollment period and is completely voluntary. This means you choose whether or not to purchase coverage and you pay 100% of the premiums, through payroll deduction, for the plans you elect.

Enrollment Process

New for this year, professional benefit counselors will be available on site and over the phone to conduct confidential one-on-one meetings with each benefit-eligible employee. During these educational sessions, the benefit counselor will review your benefit options, help you understand the choices available to you, provide assistance so you can select the benefits that best meet your needs, and help you complete the enrollment process online.

Please check with your manager to see if a benefit counselor will be visiting your department. If you are unable to meet with the counselor when they are in your department or if a time has not been set for your department, you have the option of scheduling an appointment at your facility or a Premier Health facility convenient to you. You may also choose to schedule a phone appointment. All employees are strongly encouraged to speak with a benefit counselor.

How to Schedule Your Appointment With a Counselor

**Schedule
Appointment**

Scheduling your appointment is easy!

Online. Click [here](#) to schedule your appointment. Choose your location from the drop down menu, select the date and time that best fits your schedule, and fill out the form with your information. You will receive a confirmation email. If you selected an in-person meeting, your confirmation will provide your meeting location. If you selected a telephonic meeting, a benefit counselor will call the number you provided when you completed the form.

Call. (866) 738-0386 Monday – Friday, 8 a.m. – 7 p.m. Eastern to schedule an appointment.

Attend a walk-in session. Dates and times for general walk-in sessions will be posted at your location. Walk in sessions are first come, first served; so we recommend scheduling an appointment, if possible.

Enrollment Checklist - Be Prepared

- Review your Enrollment Worksheet and the benefit information available to you in this Benefit Guide and on Lawson Employee Self-Service.
- Collect information such as full name, date of birth, and social security number for eligible dependents you want to cover for the first time.
- Your password for the benefits enrollment website will be reset for Open Enrollment. Your new password will be your two-digit month and two-digit date of your birth. (For example, if your birth date is March 5, your password is 0305.) If you log on to the website and change your password, remember to bring it with you when you meet with the benefit counselor.
- Do you have questions about the new medical plan or new voluntary benefits? Be sure to meet with a benefit counselor in person or by phone and ask your questions before enrolling in the plans.
- After you have completed the online enrollment process, review the benefits you elected. You must click the “submit” button for your elections to be saved. Your enrollment is not complete unless you receive a confirmation number after you submit your elections.
- Review the confirmation statement that is mailed to your home to verify your 2016 benefit elections.



Eligibility

Regular, full-time employees budgeted 72 or more hours per pay period and part-time employees budgeted 32 or more hours per pay period are eligible for benefits. Your dependents are eligible for coverage in most plans you elect.

Important Note: Spouses who are employed and have access to medical coverage through an employer other than Premier Health will not have access to medical coverage through Premier Health.

The Affordable Care Act (ACA) requires Premier Health to provide medical coverage for support and other non-benefit eligible employees who meets the ACA Eligibility requirements. For more information about ACA Eligibility classification, click [here](#).

Making Careful Choices

Open enrollment is your annual opportunity to enroll, make changes, or waive coverage in the various benefit plans for benefits effective January 1, 2016 through December 31, 2016, so please choose your benefits carefully. No other benefit changes may be made during the plan year, unless you experience a Qualified Life Event (such as a birth, death, marriage, divorce, adoption, gain or loss of outside coverage). If you have a Qualified Life Event, you must complete the Life Event Change Form located in Lawson Employee Self-Service and submit it to the Benefits Department within 31 days of the event to change your benefit elections.

Your Medical Plans

As of January 1, 2016, you have the option to enroll in a new medical plan. In addition to the existing Premier Health Employee Plan - HRA, you now have the opportunity to elect the Premier Health Employee Plan - HSA. Below is a comparison of your medical plan options.

Medical Benefits

	HRA Plan			HSA Plan		
	Tier I	Tier II	OON	Tier I	Tier II	OON
Deductibles						
Type	Embedded	Embedded	N/A	Aggregate	Aggregate	N/A
Individual	\$2,000	\$4,000		\$2,000	\$4,000	
Family	\$4,000	\$8,000		\$4,000	\$6,550	
Coinsurance						
	0%	30%	100%	10%	30%	100%
Medical and Pharmacy Out-of-Pocket Maximum per Calendar Year						
Type	Embedded	Embedded	N/A	Embedded	Embedded	N/A
Individual	\$4,000	\$6,550		\$4,000	\$6,550	
Family	\$8,000	\$13,100		\$8,000	\$13,100	
Hospital Services						
Inpatient	0% AD	30% AD	Not covered	10% AD	30% AD	Not covered
Outpatient	0% AD	30% AD	Not covered	10% AD	30% AD	Not covered
Physician Services						
Preventive	Covered in full	Covered in full	Not covered	Covered in full	Covered in full	Not covered
PCP	\$20 copay	30% AD	Not covered	10% AD	30% AD	Not covered
Specialist	\$40 copay	30% AD	Not covered	10% AD	30% AD	Not covered
Urgent Care and Emergency Services						
Urgent Care	\$50 copay	\$50 copay	\$50 copay	10% AD	10% AD	10% AD
ER Visit	\$350 copay	\$350 copay	\$350 copay	10% AD	10% AD	10% AD
Premier Contributions						
Base	\$250/\$500			N/A		
Wellness	\$500/\$1,000			\$500/\$1,000		

Pharmacy Benefits

	HRA Plan		HSA Plan	
	Tier I	Tier II	Tier I	Tier II
Tier 1: Preferred Generic	\$4	\$10	10% AD	15% AD
Tier 2: Non-preferred Generic	\$15	\$20	10% AD	15% AD
Tier 3: Preferred	\$45	\$55	20% AD	30% AD
Tier 4: Non-preferred	\$80	\$90	35% AD	45% AD
Tier 5: Specialty	20%	20%	20% AD	20% AD
90-Day Premier Pharmacy Copay	2.5x			
90-Day Mail Order via ESI Copay	3x			

AD = After deductible has been met



Premier Health Employee Plan – HRA

Each year you enroll in the Premier Health Employee Plan – HRA, your employer contributes dollars into a HRA on your behalf. The dollars in your HRA are used to pay for out-of-pocket deductibles and coinsurance costs related to your medical expense.

- HRA dollars do not pay for services requiring a flat dollar co-pay (i.e. ER, Urgent Care, physician office visit co-pays and prescription drug co-pays).
- Preventive care services (such as annual physicals, mammograms, and flu shots) are covered at 100% with your medical plan.

Once you use up the funds in your HRA, you are responsible to pay for deductibles and coinsurance. Any funds remaining in your HRA at the end of a calendar year will roll over and add to the next year's account, as long as you continue to participate in the Premier Health Employee Plan – HRA.

For a summary of the medical coverage under this plan, click [here](#). For a summary of the prescription drug coverage, click [here](#).

Premier Health Employee Plan – HSA

Beginning January 1, 2016, Premier Health will offer this new high deductible health plan that meets certain criteria established by the IRS to allow covered individuals to contribute to a Health Savings Account (HSA). An HSA is an individual account that allows for tax-free contributions by both the employee and the employer. Contributions made to an HSA are managed by the employee and can be used to pay for eligible medical expenses for you, your spouse and your eligible dependents. Only employees who enroll in the Premier Health Employee Plan – HSA are eligible to elect the HSA. In addition to having a qualified HDHP, there are some other eligibility requirements.

- You can't be enrolled in Medicare.
- You can't have any non-permitted coverage.
- You can't be claimed as someone else's tax dependent.

How the Plan Works

The Premier Health Employee Plan – HSA has two key components: an integrated deductible and coinsurance. The integrated deductible means both medical costs **and** prescription drug costs apply to the same deductible. After you reach the deductible, the plan pays a percentage of your costs (coinsurance) for both medical services and prescription drugs. Preventive services are covered at 100%, which means these services are not subject to the deductible and coinsurance. For more information on the medical coverage and plan limitations for the Premier Health Employee Plan – HSA, click [here](#). For a summary of the prescription drug benefit coverage, click [here](#).

When you enroll in the Premier Health HSA Plan, an account will be created for you at PNC Bank. You can elect to deposit pre-tax dollars into your HSA through convenient payroll deduction. **When you participate in Premier Healthy Living and earn your incentive, your employer will deposit money into your HSA account too!** Note: The combined amount of employer and employee contributions per calendar year cannot exceed the annual limit established by the IRS.

For 2016, the annual limit:

- For an employee electing single coverage – \$3,350
- For an employee electing any other coverage level – \$6,750
- Employees age 55 or over may contribute an additional catch up contribution of \$1,000.

Once your HSA is opened at PNC Bank, you will have access to a secure, easy to use web portal where you can track your account balance, view your investment accounts and submit requests for reimbursement. Click [here](#) for more information about the PNC Benefit Accounts Consumer Portal.

In addition, you will receive a convenient benefits card to make it easy to access the money in your HSA. The card contains the value of your HSA and you can use it to pay for deductibles, coinsurance and eligible services and products not covered by the plan. When you use the card, payments are automatically withdrawn from your account, so there are no out-of-pocket costs and you won't have to submit receipts to verify purchase.

Benefits of an HSA

- An HSA is yours. The unused balance in your HSA rolls over from year to year and stays with you, even if you change jobs.
- Contribute tax free. An HSA reduces your taxable income. The money is tax free both when you put it in and when you take it out to cover qualified medical expenses.
- When you maintain a minimum balance, your additional funds may be invested in mutual funds yielding tax-free earnings. If you invest your HSA funds, they remain in the investment account, like an IRA or 401(k). This means that HSAs have the potential for long-term, tax-free savings.
- Spend tax free. Withdrawals used for eligible expenses are tax free.

For more information about HSAs visit www.irs.gov/pub/irs-pdf/p969.pdf.

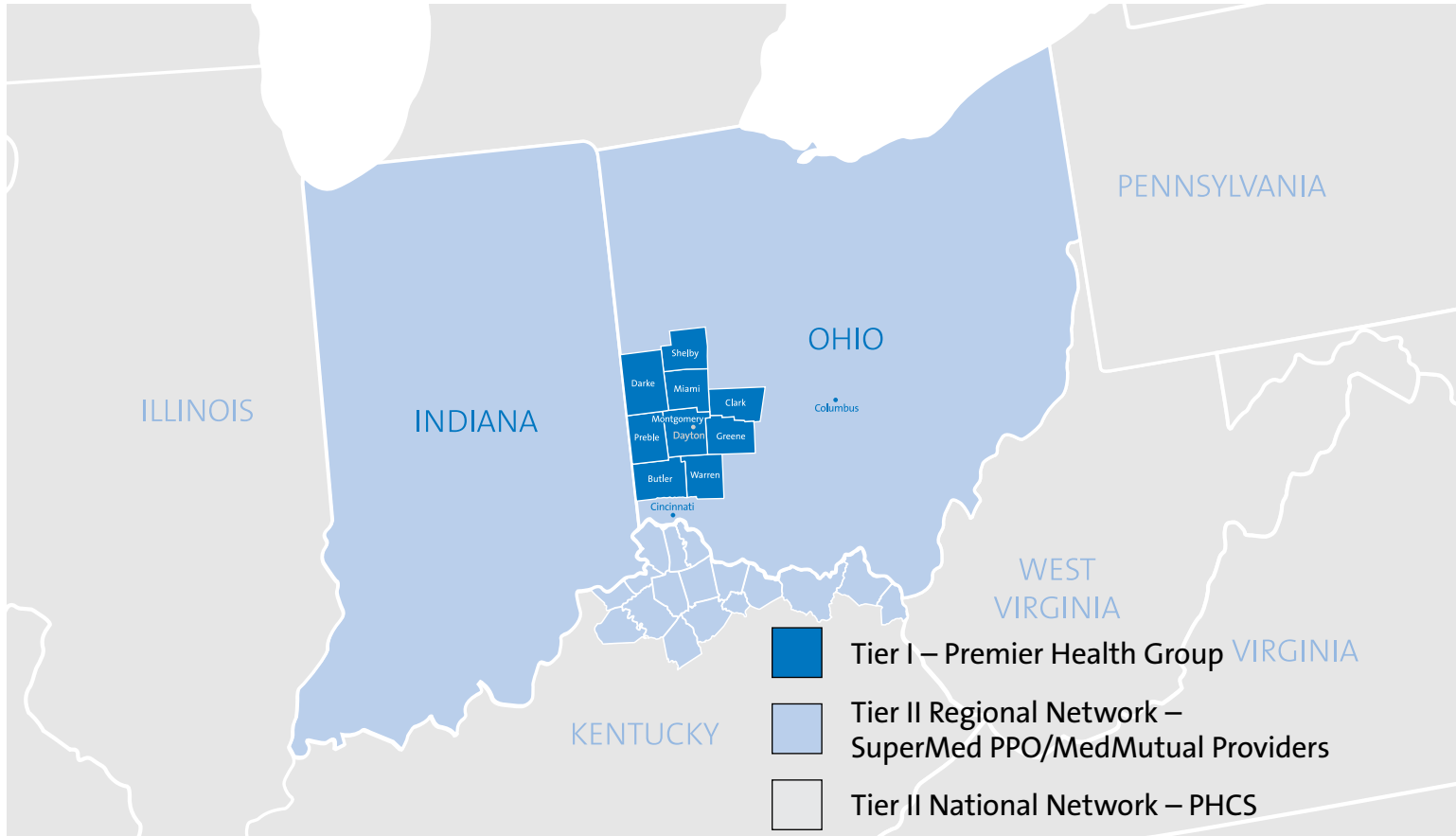
Evaluating Your Plan Options

To see a comparison of how the two medical plan options might cover medical services in certain situations, click [here](#).

You can use these examples to see, in general, how much out-of-pocket costs a patient might incur if they are covered under different plans. These examples do not represent actual costs under the plans. They are estimates used to help you compare the two plan options. The actual care you receive will be different from these examples, and the cost of that care will also be different.

Your Provider Network

Both medical plans use the same provider networks



Tier I - Premier Health Group

Tier I Network includes a local, physician-led network called Premier Health Group (PHG). This will be your local, nine-county Tier I network of doctors, hospitals, facilities, and services. The nine counties include: Butler, Clarke, Darke, Greene, Miami, Montgomery, Preble, Shelby, and Warren. New this year is the addition of CVS Clinics and University Health Clinics to the Tier I Network. These providers were added in response to employee concerns over coverage for non-emergent services for out-of-area dependents. The Behavioral/Mental Health network will be Optum Behavioral Health anywhere within the United States.

Tier II - SuperMed PPO/PHCS

Tier II Network includes the SuperMed PPO network and is available outside of the nine counties but within the rest of the Ohio, Indiana, and northern Kentucky region. SuperMed PPO providers are covered as a Tier II benefit. The national Tier II network will be PHCS. You will access this network outside the PHG and SuperMed PPO areas.

Out of Network

Out of Network (OON) includes services received outside of Tier I and Tier II. There will be no coverage of services received OON, with the exception of emergency room care and urgent care.

To locate a provider, log on to PremierHealthyLiving.org.

The Cost of Your Benefits

The benefits that Premier Health offers are a valuable part of your overall compensation package. On average, Premier Health pays the vast majority of the total costs of the benefits program. The table below shows the per pay period (bi-weekly) employee cost for medical coverage.

Full-time Medical Costs

	HRA Plan		HSA Plan	
	Non-Tobacco	Tobacco*	Non-Tobacco	Tobacco*
Employee	\$46.00	\$126.00	\$41.35	\$121.35
Employee + Child	\$127.38	\$207.38	\$114.19	\$194.19
Employee + Children	\$181.31	\$261.31	\$162.50	\$242.50
Employee + Spouse	\$148.35	\$228.35	\$132.77	\$212.77
Employee + Family	\$194.54	\$274.54	\$174.69	\$254.69

Part-time Medical Costs

	HRA Plan		HSA Plan	
	Non-Tobacco	Tobacco*	Non-Tobacco	Tobacco*
Employee	\$126.42	\$206.42	\$42.92	\$122.92
Employee + Child	\$260.19	\$340.19	\$233.27	\$313.27
Employee + Children	\$351.27	\$431.27	\$314.88	\$394.88
Employee + Spouse	\$341.31	\$421.31	\$305.96	\$385.96
Employee + Family	\$401.04	\$481.04	\$359.50	\$439.50

*Tobacco Surcharge

Premier Health is committed to encouraging healthy behaviors. Effective January 1, 2016, the tobacco surcharge will increase to \$80 per pay period. The tobacco surcharge applies when you or anyone living in your household uses tobacco products. The Premier Health Employee Plan and Premier Healthy Living offer resources to help you and your family members to quit smoking.

Note: Spouses who are employed and have access to medical coverage through an employer other than Premier Health are not eligible for medical coverage through Premier Health.



Wellness is not a destination, it's a journey.

As a Premier Health employee, you have access to Premier Healthy Living, a program designed to encourage and support you in achieving a healthy lifestyle. Your healthy living website, **PremierHealthyLiving.org** will lead you to interactive health education, tools to track your healthy activities, and personalized information to help you maintain and improve your health.

Premier Healthy Living Wellness Incentive

This year's wellness incentive is a \$500 (individual)/\$1,000 (family) deposit into your HRA or HSA paid in January 2016.

As an additional bonus this year, if 61% of the Premier Health employees enrolled in the medical plan earn a wellness incentive in 2015, each employee who earns an incentive will receive an extra \$100 deposit into their HRA or HSA for the plan year beginning January 1, 2016!

To earn your Wellness Incentive*, you must complete the following by November 30, 2015:

STEP 1: Complete the Health Risk Appraisal (MyHealth Questionnaire) which is available on the Premier Healthy Living Portal at **PremierHealthyLiving.org** (you must log in).

STEP 2: Earn your 300 points by completing activities such as:

- Visiting your doctor and getting a Comprehensive Preventive Exam (you don't need to wait an entire calendar year from your last exam to schedule one in 2015. You are eligible for a Comprehensive Exam each plan year.)
- Completing additional online assessments
- Taking an online health coaching course
- Participating in Premier-sponsored activities, such as walks/runs, diabetes education, on-site (Premier) classes and programs such as Weight Watchers, Whole Life Challenge, etc., and healthy living challenges such as the Weight Race, Homerun for Health and the Find RELIEF stress management program.

*Note: Employees must be enrolled in the medical plan by November 1, 2015 to be eligible to participate in the wellness incentive.

Need help or have a question? Call Member Services at (855) 869-7139, Monday – Friday, 7 a.m. – 7 p.m. and Saturday, 8 a.m. – 3 p.m.

Healthy Living at Premier



Lifestyle Change
stability, confidence, strength



Physical Activity
excitement, energy, determination



Stress Reduction
wisdom, calm, spirituality



Nutrition
fresh, natural, health

Login to PremierHealthyLiving.org to use your tools and resources:

MyActivity Tracker

Use the MyActivity Tracker as an easy method to log your daily fitness and activity.

MyCommunity

MyCommunity offers discounts for community activities, including gym memberships, yoga classes, dance lessons, and massage services.

Online Assessments

Take an assessment and find personalized resources to help you set and achieve your health goals.

WebMD OnLine Stress Reduction Coaching

Explore expert information from WebMD, one of the most trusted online names in health and wellness.

Your Premier Healthy Living Coach is Just a Call Away

Work with a health coach— Coach on Call—to help set and achieve your health goals.

Call **(855) 869-7138** to speak confidentially with a Coach on Call about your health questions and receive additional healthy support. Premier Health Employee Plan members can work with a health coach to successfully eat healthier, manage stress, lose weight, increase physical activity or capably manage a health condition like asthma or diabetes. Health coaches educate, offer resources and help motivate you to make healthy changes.

Coaches are available Monday through Friday, from 7 a.m. to 7 p.m. and Saturday, from 8 a.m. to 3 p.m. For more information, visit **PremierHealthyLiving.org**.

Keep an eye out throughout the year for more Healthy Living activities across Premier Health.

24/7 Nurse Line

(855) 242-4873

24 hours a day/seven days a week, Premier Health Employee Plan members have immediate access to healthcare advice through the Nurse Line. Experienced registered nurses are available around the clock to provide you with prompt and efficient service. If you have questions about a new diagnosis or medication or need advice about an urgent symptom or illness, nurses are available.

Premier Health Employee Plan members can talk to a registered nurse in the middle of the day or night about:

- Medication side effects or dosing questions
- Pains, cramps or upset stomachs
- Fevers and common colds
- Cuts or bruises
- Your doctor's advice or treatment plans
- Determining the need to call a doctor or go to the emergency room
- Finding the closest in-network after hours clinic
- Locating providers when you are out of town

Introducing Your Personal Approach to Health (PATH)

If you or a member of your family is managing a difficult health condition, Premier Health Employee Plan offers a coordinated, personal approach that will provide you with care, support, and resources to help you reach your healthy living goals. PATH comes at no additional cost beyond your regular expenses for office visit copayments and deductibles.

PATH is about making sure you get the right level of support:

- If you only need support for short-term solutions, such as finding a primary care doctor, you will work one-on-one with a nurse (RN) Care Advisor to meet your goals.
- If you cope with a long-lasting disease and need some help getting it better under control, Care Advisors are there to help you take charge of your health over time.
- If you struggle with multiple conditions and health issues, your Care Advisor and doctor will work together to help you create a personalized care plan to help you manage your health, and your costs.

If you meet the qualifications for PATH, you might receive a call from your physician or a Care Advisor inviting you to participate.

Condition Care

If you are living with a health condition, our Condition Care programs can support you with education and self-management tools. Currently, we have programs available for diabetes, heart failure, coronary artery disease (CAD), chronic obstructive pulmonary disease (COPD), and asthma.

To learn more about our Condition Care programs or request educational materials, please call (855) 859-1734, Monday to Friday, 9 a.m. to 5 p.m. EST. TTY users: (855) 250-5604.

Transition Care

Our Transition Care program helps you decrease your chances of going back to the hospital once you've been admitted. When you're in the hospital, you can work with a Care Advisor and talk about making the adjustment home and the next steps. You will leave with a printed plan, including any medications you're taking and a list of your follow-up appointments.

After you get home, your Care Advisor will make sure to follow up with you to make sure you have everything you need.

Flexible Spending Accounts – What Are They and How Do They Work?

Healthcare Flexible Spending Account (FSA)

A Healthcare FSA allows you to set aside pre-tax dollars to pay for qualified medical expenses. The money deposited into your spending account is deducted from your paycheck before taxes are withheld, which lowers your taxable income and increases your spending power. The annual maximum contribution is \$2,500.

Before you enroll in a Healthcare FSA, you should evaluate what your out-of-pocket medical, dental, and vision expenses will be for the coming year. Remember, the key to effective use of the flexible spending accounts is planning ahead. Any money left in the FSA at the end of the plan year will be forfeited. This is called the **Use It or Lose It** provision.

Medical

Deductibles \$ _____
 Copayments \$ _____
 Doctor visits \$ _____
 Prescriptions \$ _____
 Other \$ _____
 Total \$ _____

Vision

Exams \$ _____
 Eye surgery \$ _____
 Lenses/frames \$ _____
 Contacts \$ _____
 Other \$ _____
 Total \$ _____

Dental

Routine checkups \$ _____
 Fillings/crowns \$ _____
 Orthodontics \$ _____
 Other \$ _____
 Total \$ _____

Total (add Medical, Vision, and Dental totals) \$ _____

Important Note: You may have either an FSA or an HSA, but not both.

Daycare Spending Account

The Daycare Spending Account allows you to set aside pre-tax dollars to pay for qualified daycare expenses for a dependent under the age of 13 or for care of a disabled spouse or parent while you work. Eligible expenses include things like payments to a licensed daycare provider or nursery school, before and after school care, a summer day camp program, or elder care. The annual maximum contribution is \$5,000 (\$2,500 if your compensation is over \$110,000).

The Daycare Spending Account is subject to the same **Use It or Lose It** provision as the FSA. Any money left in the account at the end of the plan year will be forfeited.

Fill out the table below to estimate how much you should contribute to your account.

Dependent Day Care Expenses

Children \$ _____
 Adults \$ _____
 Total \$ _____



Accident Insurance

Since accidents can happen at any time, 24 hours a day, 7 days a week, it's important to be prepared. That is why we are happy to introduce a new voluntary Accident Insurance program from Lincoln Financial Group!

This policy can help cover the out-of-pocket costs associated with an accident (on and off-the-job), by paying you a benefit depending on the injuries you suffer and the treatment you receive. You can use the money as you see fit, whether to pay for expenses associated with your accident, like an emergency room copay, or to pay for childcare so you can get to the doctor for a follow up visit.

The policy does not coordinate with any other coverage, so you can still receive benefits on top of what your medical plan provides. Plus, the plan includes a \$50 wellness benefit per year per insured when a defined health assessment is completed. Click [here](#) for a quick video that explains how Accident Insurance works.

Below is an example of how the plan might work if you or a loved one suffered a leg fracture.*

Benefit	Amount
Ambulance	\$150
Emergency Room Visit	\$150
Fractured Leg	\$1,500
Crutches	\$25
Two Physical Therapy Sessions	\$100
Follow Up Visit	\$50
Total	\$1,975

**This example is for illustrative purposes only; your actual benefits may differ. For a more complete summary of the Accident Insurance Coverage, click [here](#).*

Critical Illness Insurance

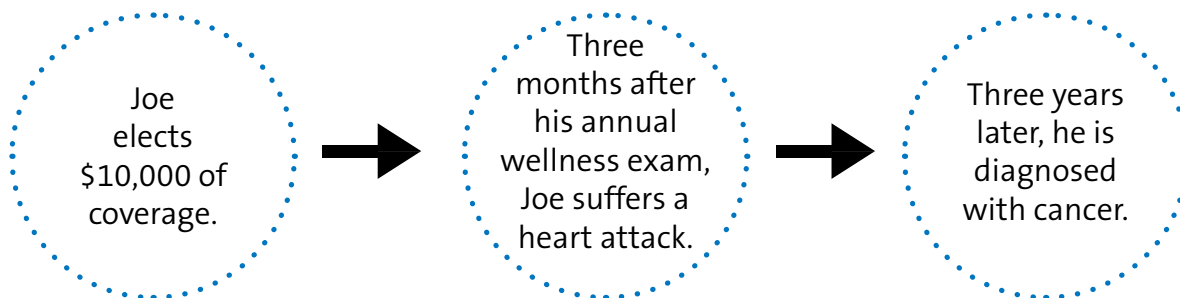
We are happy to introduce a voluntary Critical Illness program from Lincoln Financial Group. This policy provides you with a lump sum cash benefit in the event you or a loved one is diagnosed with a covered condition such as cancer, heart attack, or stroke. It can help provide financial protection so you can focus on what's really important — getting better.

You pick the level of coverage that provides the right protection for your family. For this enrollment period only, you will have the opportunity to select up to \$30,000 in coverage for yourself, up to \$15,000 for your spouse, and up to \$15,000 for your child(ren) without answering any medical questions. Plus, the policy will also pay you a \$50 wellness benefit when you complete a qualified health assessment.

How the Plan Works

Critical Illness Insurance offers peace of mind when a critical illness diagnosis occurs. Click [here](#) to see a summary of benefits for Critical Illness Insurance.

Below is an example of how benefits might be paid.*



Joe's Critical Illness policy provided the following benefits:

Wellness Benefit:	\$50
Heart Attack Benefit:	\$10,000
Cancer Benefit:	\$10,000
Total Benefits:	\$20,050

[Schedule an appointment to speak with a benefit counselor for more information.](#)

**This example is for illustrative purposes only; your actual benefits may differ.*



Life Insurance

Basic Life Insurance and Accidental Death and Dismemberment Insurance (AD&D) is available at no cost to you and is paid for by Premier Health. Full-time employees are eligible for coverage in the amount of \$20,000 or one times annual salary, whichever is greater. Part-time employees are eligible for \$7,500 of coverage. Note: Coverage amounts are reduced at age 65. Refer to your Life Insurance Benefits booklet for details on age reduction.

Supplemental Life Insurance and AD&D is available for purchase in addition to your Premier Health-provided basic coverage. You may purchase one times your annual salary per year during open enrollment, up to a maximum coverage amount of five times your annual salary (basic plus supplemental coverage).

Dependent Life Insurance is available for purchase. You may choose coverage for your spouse only, children only, or your whole family. Important note for part-time employees: the amount of dependent life insurance for your spouse/children cannot be greater than the total value of your own life insurance amount.

Disability Insurance

Short Term Disability (STD) Insurance provides eligible employees with a portion of your income for up to 26 weeks if you become disabled due to an injury or illness. The policy pays a benefit of 60% of your pre-disability earnings. Benefits begin after you have been disabled for seven calendar days. This benefit is paid for by Premier Health and is provided at no cost to you. It is the employee's responsibility to request to use this benefit.

Long-Term Disability (LTD) Insurance is available for full-time employees. Premier Health pays for this plan, which provides income replacement of 60% of your monthly base pay. Benefits are payable after the 180-day elimination period has been exhausted. It is the employee's responsibility to file a claim for this benefit.

Voluntary Long-Term Disability (LTD) Insurance is now available for part-time employees. The plan provides income replacement of 60% of your monthly base pay, up to \$5,000 per month. Benefits are payable after a 180-day elimination period has been exhausted. Rates are based on your age band and compensation. Enrollment in this plan is only available during open enrollment. For more information about Voluntary LTD, click [here](#).

Dental and Vision

This is not a year to elect dental and/or vision coverage. All dental and vision elections are a two-year election; current elections remain in effect through December 31, 2016. During this enrollment period you may add or remove dependents. You may also make changes during the plan year within 31 days of a qualified life event.

Highlights of your dental and vision plans can be found below.

Dental Benefits

Features	Low	High
Deductibles and Maximums		
Deductible	No deductible	\$50 per person
Annual Max	None	\$2,000
Orthodontia Lifetime Max	No coverage	\$1,000
Treatment and Services		
Preventive Care	100%	100%
Fillings	50%	80% after deductible
Orthodontia	No coverage	60% for children under the age of 19
All Other Services	No coverage	80% after deductible

Vision Benefits

Features	Frequency	Copayment	In-Network	Out-of-Network
Eye Exam	Once a year	\$15.00	Covered in full	Up to \$50
Lenses	Once a year	\$25.00 (covers lenses and frames)	Covered in full: single vision, lined bifocals, lined trifocals	Single vision up to \$50 Bifocal lenses up to \$75 Trifocal lenses up to \$100
Frames	Once every two calendar years if not buying contacts	See above	Covered up to \$145	Up to \$70
Contact Lenses	Once every year if you are not buying glasses	None	Covered up to \$120; Allowance applies to the cost of your lenses and fitting evaluation and exam	Up to \$105

This is not a year to elect dental and/or vision. You may add/remove dependents during open enrollment.

Benefit Guide Link Directory

Topic	Website
ACA FAQ	http://mybenefitslibrary.com/Premier/ACA-EligibilityFAQ.pdf
Accident Summary	http://mybenefitslibrary.com/Premier/AccidentSummary.PDF
Accident Video	https://www.youtube.com/watch?v=ErxWDW-D7Ek
Critical Illness Summary	http://mybenefitslibrary.com/Premier/Critical-IllnessSummary.PDF
ESS Remote Access	http://mybenefitslibrary.com/Premier/ESS-RemoteAccess.pdf
HRA - Medical Benefit Summary	http://mybenefitslibrary.com/Premier/HRA-MedicalBenefitSummary.pdf
HRA - Pharmacy Summary	http://mybenefitslibrary.com/Premier/HRA-PharmacySummary.pdf
HSA - Medical Benefit Summary	http://mybenefitslibrary.com/Premier/HSA-MedicalBenefitSummary.pdf
HSA - Pharmacy Summary	http://mybenefitslibrary.com/Premier/HSA-PharmacySummary.pdf
HSA - Additional Information from the IRS	https://www.irs.gov/pub/irs-pdf/p969.pdf
Medical Coverage Comparison	http://mybenefitslibrary.com/Premier/MedicalCoverageComparison.pdf
PNC Benefit Accounts Consumer Portal	http://mybenefitslibrary.com/Premier/PNC-BenefitPortal.pdf
Scheduling an Appointment	www.premierhealth.schedapple.com
Voluntary LTD Summary	http://mybenefitslibrary.com/Premier/VoluntaryLTDSummary.pdf

