



# EMPLOYEE BENEFITS

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Benefit plans effective  
January 1, 2021–December 31, 2021

HONORHEALTH®



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## THE HONORHEALTH BENEFITS PACKAGE

Benefits are an integral part of the overall total rewards package provided by HonorHealth. Within this Benefits Guide, you will find important information on the benefits available to you for the 2021 plan year (January 1, 2021, through December 31, 2021). Please take a moment to review the benefits HonorHealth offers to determine which plans are best for you.

This guide contains only general and summary information; it should not be considered a replacement for master plan documents. Every care is taken to ensure the accuracy of the information in this guide; however, in the event of any conflict, certificates of coverage or master plan documents will govern.

## BENEFITS ELIGIBILITY

Full-time and part-time employees are eligible for benefits. Full-time employees must work between 60–80 hours per pay period, and part-time employees must work between 32–59 hours per pay period.

The date you become eligible for coverage is listed below. Your first day of work refers to the first day you are actively at work in a benefits-eligible position, whether you are newly hired or your work hours were increased.

### **Available on your first day of work:**

- Auto and home insurance
- Pet insurance
- Employee assistance program (EAP)
- Employee discounts
- Paid time off/paid sick time
- 403(b) retirement security plan

### **Available on the first day of the month following your first day of work:**

- Medical
- Dental
- Vision
- Flexible spending accounts (FSAs)
- Health savings account (HSA)
- Life and AD&D insurance
- Voluntary critical illness insurance
- Voluntary accident insurance
- Prepaid legal services
- Hospital indemnity insurance
- Identity theft insurance
- Voluntary life and whole life insurance
- Financial Planning

### **Available after six months of employment:**

- Tuition assistance

### **Available on the first day of the month following one year of employment:**

- Company paid short- and long-term disability insurance
- Voluntary long-term buy-up insurance
- Purchasing Power

## DEPENDENT ELIGIBILITY

### **Many of the plans offer coverage for eligible dependents, including:**

- Your legal spouse or domestic partner\*.
- Your children to age 26, regardless of student, marital, or tax-dependent status (including a stepchild, legally-adopted child, a child placed with you for adoption, or a child for whom you are the legal guardian).
- Your dependent children of any age, if the disability began prior to age 26, who are physically or mentally unable to care for themselves.

\*Both you and your domestic partner must sign an affidavit stating that you meet the qualifying criteria, and you must provide proof of qualification. Download the appropriate forms from the Employee Benefits site at [honorhealthbenefits.com](https://honorhealthbenefits.com). **HonorHealth contributions toward the premium for a domestic partner are a taxable benefit to the employee.**

**You are required to provide proof of your dependents' eligibility, such as a birth certificate or marriage license, within 30 days of your benefit eligibility date in order for your dependents to have coverage.**

## ENROLLMENT

**You can sign up for benefits or change your benefits elections at the following times:**

- Within 30 days of your initial eligibility date (as a newly-hired employee).
- During the annual benefits open enrollment period.
- Within 30 days of experiencing a qualifying life event.

**The choices you make at this time will remain the same through December 31, 2021.** If you do not sign up for benefits during your initial eligibility period or during the open enrollment period, you will not be able to elect coverage until the following plan year.

**If you are a new hire, log into the [Staff Member Self-Service portal](#) to enroll in benefits.**

## CHANGING YOUR BENEFITS DURING THE YEAR

HonorHealth allows you to pay your portion of the medical, dental, and vision plan costs, and contribute to the FSAs and/or HSA, on a pre-tax basis. Due to IRS regulations, once you have made your elections for the plan year, you cannot change these benefits until the next annual open enrollment period. The only exception is if you experience a qualifying life event. Election changes must be consistent with your life event.

**Qualifying life events include, but are not limited to:**



**Marriage, divorce, or legal separation.**



**Birth or addition of an eligible child.**



**Death of your spouse or covered child.**



**Change in your spouse's work status that affects his or her benefits.**



**Change in your child's eligibility for benefits.**



**Qualified Medical Child Support Order.**

**If you experience a qualifying life event, please download a qualifying life event enrollment form at [honorhealthbenefits.com/eligibility-enrollment/enrollment/](https://honorhealthbenefits.com/eligibility-enrollment/enrollment/).**

**To request a benefits change, please download a qualifying life event form at [honorhealthbenefits.com/eligibility-enrollment/enrollment/](https://honorhealthbenefits.com/eligibility-enrollment/enrollment/), notify a benefit educator, or email [employee.benefits@honorhealth.com](mailto:employee.benefits@honorhealth.com) within 30 days of the qualifying life event.** Change requests submitted after 30 days cannot be accepted. You may be required to provide proof of the life event such as a birth certificate, marriage license, or other proof of qualifying life event.

# MEDICAL INSURANCE

HonorHealth offers three medical plan options. Before you enroll in medical coverage, take some time to review how each plan option works.

The table below summarizes the key features of the medical plan options. Please refer to the tables on page 6 for additional plan details.

Summary of Covered Benefits	Coordinated Care Plan	Standard Plan	Health Savings Account Plan (HDHP)
<b>Network coverage</b>	<p>You will pay less by choosing an HonorHealth network provider. Services provided by BlueCross BlueShield of Arizona (BCBSAZ) are also covered but may be limited by plan choice. There is no out-of-network coverage unless you are traveling or living outside of Arizona or if you experience a life- or limb-threatening emergency.</p> <p>If you are enrolled in the Coordinated Care Plan, most services must be rendered with an HonorHealth or an ICP provider to be covered</p>		
<b>Traveling or living outside of Arizona</b>	You have access to the Private Healthcare Systems (PHCS) Healthy Directions Network. The plan pays the <b>HonorHealth</b> rate for the service provided.	You have access to the PHCS Healthy Directions Network. The plan pays the <b>BCBSAZ</b> rate for the service provided.	
<b>HonorHealth contributes money into an account to help you pay for out-of-pocket expenses</b>	No.	No.	Yes, HonorHealth will match your HSA contribution up to \$500 for employee-only coverage or \$1,000 for all other coverage levels.
<b>Pay for health care with pre-tax dollars</b>	You can fund a health care flexible spending account (FSA).	You can fund a health care flexible spending account (FSA).	You can fund a health savings account (HSA) and <b>limited purpose</b> health care FSA.
<b>Plan has a deductible</b>	Yes. However, most services have a set copay amount that you pay for services.	Yes. However, most services have a set copay amount that you pay for services.	Yes. You must meet the plan's deductible before most services are covered.
<b>How you pay for your portion of services</b>	<p>You pay copays for most services within the HonorHealth Network.</p> <p>For all inpatient and outpatient hospital services, you pay coinsurance (a percentage of the total cost) after you meet your deductible.</p>		After you meet your deductible, you pay coinsurance (a percentage of the total cost) for all services in the HonorHealth network.
<b>Plan pays 100% for preventive care<sup>1</sup></b>	Yes, as long as you see a HonorHealth Provider.	Yes, as long as you see a HonorHealth or BCBSAZ provider.	

(1) For services listed as A or B rated on the U.S. Preventative Services Task Force list.

# MEDICAL INSURANCE

The coinsurance amounts listed reflect the amount you pay. Refer to the official plan documents for additional information on coverage and exclusions.

	Coordinated Care Plan		Standard Plan		Health Savings Account Plan (HDHP)	
Summary of Covered Benefits	Innovation Care Partners Network/ HonorHealth	BlueCross BlueShield of Arizona	Innovation Care Partners Network/ HonorHealth	BlueCross BlueShield of Arizona	Innovation Care Partners Network/ HonorHealth	BlueCross BlueShield of Arizona
Plan Year Deductible Individual/Family	\$500/\$1,000		\$500/\$1,000		\$2,800/\$5,600	
Out-of-Pocket Max Individual/Family	Includes deductible, copays, and coinsurance					
	\$5,000/\$10,000		\$6,450/\$12,900		\$6,450/\$12,900	
Preventive Care	Plan pays 100%	Not covered <sup>1</sup>	Plan pays 100%	Plan pays 100%	Plan pays 100%	Plan pays 100%
Physician Services Primary Care Physician Specialist Urgent Care	\$20 copay \$50 copay \$35 copay	Not covered <sup>1</sup> Not covered <sup>2</sup> \$60 copay	\$20 copay \$60 copay \$35 copay	\$40 copay \$125 copay <sup>3</sup> \$60 copay	10% after ded. 10% after ded. 20% after ded.	20% after ded. 20% after ded. 20% after ded.
Outpatient Lab/X-Ray Laboratory Services X-Ray, Ultrasound MRI, MRA, CT, PET	\$10 copay \$10 copay \$150 copay	\$10 copay 50% Not covered	\$15 copay \$15 copay \$200 copay	\$15 copay 25% \$200 copay, then 50%	10% after ded. 10% after ded. 10% after ded.	10% after ded. 10% after ded. 50% after ded.
Hospital Services Inpatient Outpatient	20% after ded. 20% after ded.	Not covered Not covered	15% after ded. 15% after ded.	50% after ded. 50% after ded.	10% after ded. 10% after ded.	50% after ded. 50% after ded.
Emergency Room <sup>4</sup>	\$250 copay		\$300 copay		20% after ded.	
Physical and Occupational Therapy Prior authorization required after 20 visits	\$20 copay	\$20 copay	\$20 copay	\$20 copay	20% after ded.	20% after ded.
Alternative Care I.E. Chiropractic and Acupuncture. Refer to Plan Document for full list of services.	75% up to \$1,000, then Plan pays 10% All services combined		75% up to \$1,000, then Plan pays 10% All services combined		75% after deductible up to \$1,000, then Plan pays 10% All services combined	
30-Day Prescription Generic Maintenance Tier 1 Tier 2 Tier 3 Specialty	\$0 copay \$10 copay (member pays lesser of cost or copay) 30% (\$30 min up to \$80 max) 60% (\$100 min; no max) 30% (\$50 min up to \$100 max)		\$0 copay \$15 copay (member pays lesser of cost or copay) 35% (\$40 min up to \$100 max) 60% (\$125 min; no max) 30% (\$60 min up to \$150 max)		Ded., then \$0 copay \$15 copay (member pays lesser of cost or copay) 35% (\$40 min up to \$100 max) 60% (\$125 min; no max) 30% (\$60 min up to \$150 max)	
90-Day Prescription <sup>5</sup> Generic Maintenance Tier 1 Tier 2	\$0 copay \$25 copay 30% (\$75 min up to \$200 max)		\$0 copay \$37.50 copay 35% (min \$100 up to \$250 max)		Ded., then \$0 copay \$37.50 copay 35% (\$100 min up to \$250 max)	

(1) Except pediatric primary care. (2) Must obtain approval for care outside HonorHealth and ICP. (3) Tier 1 copay if specialty not in HonorHealth network. (4) In the case of life- or limb-threatening emergencies, out-of-network emergency room services will be covered at the in-network level. Copay waived if admitted, then inpatient deductible and coinsurance will apply. (5) All 90-day maintenance medications must be filled at a Walgreens pharmacy or through Optum mail order. Maintenance medications will not be covered if filled at any other pharmacy.

# MEDICAL INSURANCE

## Medical Insurance Costs

Listed below are the per pay period costs for medical insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis.

Full-Time Employees (60 to 80 hours)	Coordinated Care Plan	Standard Plan	Health Savings Account Plan (HDHP)
	Biweekly	Biweekly	Biweekly
Employee Only	\$35.50	\$166.00	\$35.50
Employee + Spouse	\$176.00	\$372.00	\$176.00
Employee + Child(ren)	\$74.00	\$175.00	\$74.00
Employee + Family	\$230.00	\$457.00	\$230.00

Part-Time Employees <sup>1</sup> (32 to 59 hours)	Coordinated Care Plan	Standard Plan	Health Savings Account Plan (HDHP)
	Biweekly	Biweekly	Biweekly
Employee Only	\$114.00	\$374.00	\$114.00
Employee + Spouse	\$391.00	\$776.00	\$391.00
Employee + Child(ren)	\$190.00	\$392.00	\$190.00
Employee + Family	\$496.00	\$942.00	\$496.00

(1) If you are a part-time employee and have not worked enough hours to deduct premium amounts due, an invoice will be sent to you to pay for your premium costs.

Note: Premiums withheld from 24 pay periods.

## Understanding the Networks

To get the most value out of your medical plan, it is important to know if your provider is in the network.

Innovation Care Partners HonorHealth Network	BCBSAZ Network Coverage for Some Services Only	Private Healthcare Systems (PHCS) Healthy Directions Network
<p>Includes all HonorHealth hospitals, facilities, practices, and urgent care centers. It also includes physicians within the network, Innovation Care Partners.</p> <p>You will pay less out of your pocket when you choose an HonorHealth provider.</p> <p><b>For a list of HonorHealth physicians, go to <a href="https://innovationcarepartners.com/physiciansearch">innovationcarepartners.com/physiciansearch</a>.</b></p>	<p>The BCBSAZ network includes physicians and facilities throughout Arizona.</p> <p>You will pay more out of your pocket when you choose a BCBSAZ provider.</p> <p><b>To find a BCBSAZ physician or facility, visit <a href="https://azblue.com/chsnetwork">azblue.com/chsnetwork</a>.</b></p>	<p><b>Coverage for this network is only available if you are traveling or living outside Arizona.</b></p> <p><b>Find a provider at <a href="https://multiplan.com/search">multiplan.com/search</a>.</b></p>

For pre-certification, please contact Innovation Care Partners Network at 800-250-6647.

## Prescription Drug Benefit

When you enroll in an HonorHealth medical plan, prescription drug coverage is automatically provided through OptumRx. You can fill your 30-day prescriptions at participating pharmacies such as Safeway, Walgreens, Wal-Mart, CVS, and Target, or you may choose to use mail order.

To order by mail through OptumRx, please visit [optumrx.com](https://optumrx.com), or download the Mail Order form at [honorhealthbenefits.com](https://honorhealthbenefits.com).

### Dispense as Written

A dispense as written (DAW) penalty may be applied to your prescription cost if you fill a preferred or non-preferred drug that has an available generic substitute. You will pay the difference in cost between the two drugs along with the applicable coinsurance.

Register at [optumrx.com](https://optumrx.com) to find your actual out-of-pocket cost for your preferred and non-preferred brand medications.

### HonorHealth OptumRx Walgreens90 Program

The HonorHealth OptumRx Walgreens90 program saves you money by requiring that you fill maintenance medications in a 90-day supply. Maintenance medications must be filled through OptumRx mail order or at a Walgreens retail pharmacy. 90-day maintenance medications filled at any other pharmacies and 30-day maintenance medications will not be covered. To fill your 90-day prescriptions, visit your local Walgreens or go to [walgreens.com](https://walgreens.com) to find the location closest to you. Or try OptumRx mail order. Visit [optumrx.com](https://optumrx.com) or call 844-368-9854, TTY 711 to get started.

### Generic Maintenance Preventive Prescriptions

HonorHealth covers generic preventive prescriptions for four critical disease states: cardiac, asthma, hypertension, and diabetes. Generic maintenance medications for these disease states are covered 100% under all plans. Remember, the Health Savings Account plan requires you to meet your deductible first before these generic prescriptions are covered 100%. Anti-depressants are also covered 100% through this Generic Maintenance Preventive list.

## Behavioral Health Services

Magellan Health provides in-network services and coordination of care for all behavioral health benefits. To get started, call a Magellan Health care manager at 800-424-4138. The care manager coordinates and guides all of your care. You may be referred to a network provider for mental health or substance abuse services. Visit [honorhealthbenefits.com](https://honorhealthbenefits.com) for more benefit information.

## Employee Assistance Program

The employee assistance program (EAP) through ComPsych provides help for everyday issues that may affect you and your family like job pressures, relationships, retirement planning, or personal impact of grief, loss, or a disability. The EAP offers valuable benefits, including:

- Confidential access to trained counselors and work-life specialists
- Referrals to resources and community services, including child and elder care
- Self-assessment tools through interactive web services
- Legal and financial counseling

Services include up to three face-to-face counseling sessions. For assistance 24 hours a day, seven days a week, call 866-676-3524 (TTY: 800-697-0353) or visit [guidanceresources.com](https://guidanceresources.com) (company web ID: HonorHealth).



# HEALTH SAVINGS ACCOUNT

If you enroll in the Health Savings Account Plan (HDHP), you may be eligible to open and fund a health savings account (HSA) through HealthEquity. An HSA is a personal savings account that you can use to pay out-of-pocket health care expenses with pre-tax dollars.

**If you contribute to an HSA, HonorHealth will help you save by matching your contribution up to the following amounts:**

- Employee-only coverage: \$500
- All other coverage tiers: \$1,000

HonorHealth contributions are deposited on each pay day (up to 24 pay periods), provided you are also contributing.

## 2021 IRS HSA Contribution Maximums

**Contributions to an HSA (including the HonorHealth contributions) cannot exceed the IRS allowed annual maximums.**

- Individual: \$3,600
- All other tiers: \$7,200

If you are age 55+ by December 31, 2021, you may contribute an additional \$1,000.

## HSA Eligibility

**You are eligible to contribute to an HSA if:**

- You are enrolled in the Health Savings Account Plan (HDHP).

**You are NOT eligible to contribute to an HSA if:**

- You are covered by a non-HSA eligible medical plan, health care FSA, or health reimbursement account.
- You are enrolled in Medicare, TRICARE, or TRICARE for Life.
- You are eligible to be claimed as a dependent on someone else's tax return.
- You have received Veterans Administration Benefits in the last three months (unless the condition for which you received care was service related).

Refer to **IRS Publication 969** for details. Note: You cannot use your HSA dollars for your domestic partner's expenses unless that individual is your tax-code dependent. HSA dollars can be used for all tax-code dependents even if they are not covered on a HonorHealth medical plan.

## Get a Discount on Health Care Expenses

When you spend your HSA dollars, it's like using a 20% off coupon for your health care expenses.\* That is because you don't pay taxes on your HSA contributions. For example, when you receive a \$400 bill from your primary care provider and you pay with your HSA, you are saving between \$80 and \$100 dollars based on your tax rate.

\*Percentage varies based on your tax bracket.

## Maximize Your Tax Savings with an HSA



### USE HSA DOLLARS TODAY

Use your HSA dollars today to pay for qualified medical expenses such as: deductibles, doctor's office visits, dental expenses, eye exams, and prescription expenses.



### SAVE HSA DOLLARS FOR TOMORROW

Use your HSA to prepare for the unexpected. An HSA allows you to save and roll over money from year to year. The money in the account is always yours, even if you change health plans or jobs.



### INVEST HSA DOLLARS FOR RETIREMENT

The money in your HSA can be invested and grown tax-free. After you reach age 65, your HSA dollars can be spent penalty free on any expense.

# DENTAL INSURANCE

HonorHealth offers four dental insurance plans.

- The **Delta Dental Base Plan**, **Delta Dental Buy-Up Plan**, and **Delta Dental Enhanced Plan** offer in- and out-of-network benefits, providing you the freedom to choose any provider. However, you will pay less out of your pocket when you choose a network provider. Locate a Delta Dental network provider at [deltadentalaz.com](https://deltadentalaz.com).
- The **EDS HMO Plan** offers in-network coverage only. You must designate a primary dentist to oversee your care. Any in-progress treatment you or your dependents are currently receiving, such as orthodontia, is not covered. To find a provider in the EDS network, visit [mydentalplan.net](https://mydentalplan.net) (plan: 300N).

The table below summarizes the key features of the dental plans. The amounts listed below reflect the percentages covered by the dental plans.

Summary of Covered Benefits	Delta Dental Base Plan		Delta Dental Buy-Up Plan		Delta Dental Enhanced Plan		EDS HMO Plan
	PPO Dentist	Premier Dentist	PPO Dentist	Premier Dentist	PPO Dentist	Premier Dentist	In Network Only
<b>Plan Year Deductible</b> Individual/Family	\$50/\$150		\$50/\$150		\$50/\$150		\$0/\$0
<b>Plan Year Benefit Max</b>	\$1,500		\$2,000		\$4,000		N/A
<b>Preventive Care</b> Two exams and cleanings per year	Plan pays 100% (deductible waived)	80% (deductible waived)	Plan pays 100% (deductible waived)	80% (deductible waived)	Plan pays 100% (deductible waived)	80% (deductible waived)	You pay a copay for each covered procedure. Refer to the official plan documents for more information.
<b>Basic Services</b> Fillings, extractions, root canals	80%	50%	80%	50%	100% after deductible	80% after deductible	
<b>Major Services</b> Bridges, inlays, onlays, dentures	50%	Not covered	50%		80% after deductible	80% after deductible	
<b>Orthodontia Services</b>	Not covered		50%		Not covered		
<b>Orthodontia Lifetime Max</b>	N/A		\$2,500		N/A		

## Dental Insurance Costs

Listed below are the per pay period costs for dental insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis.

Dental Coverage Level	Delta Dental Base Plan		Delta Dental Buy-Up Plan		Delta Dental Enhanced Plan		EDS Dental Plan	
	Full-Time (60 to 80 hours)	Part-Time (32 to 59 hours)	Full-Time (60 to 80 hours)	Part-Time (32 to 59 hours)	Full-Time (60 to 80 hours)	Part-Time (32 to 59 hours)	Full-Time (60 to 80 hours)	Part-Time (32 to 59 hours)
<b>Employee Only</b>	\$8.18	\$10.63	\$15.22	\$17.67	\$17.68	\$24.73	\$2.17	\$2.87
<b>Employee + Spouse</b>	\$17.25	\$22.43	\$32.12	\$40.85	\$41.64	\$54.56	\$4.32	\$6.12
<b>Employee + Child(ren)</b>	\$17.58	\$22.85	\$32.74	\$42.57	\$43.38	\$55.61	\$5.64	\$8.13
<b>Employee + Family</b>	\$29.23	\$38.00	\$54.42	\$75.96	\$77.43	\$92.43	\$6.52	\$9.47

Note: Premiums withheld from 24 pay periods.



## VISION INSURANCE

HonorHealth offers two vision insurance plans. Both plans offer in- and out-of-network benefits. However, you will maximize the plan benefits when you choose a network provider. Locate a VSP provider at [vsp.com](https://vsp.com) or a UnitedHealthcare provider at [myuhcvision.com](https://myuhcvision.com).

The table below summarizes the key features of the vision plans. Refer to the official plan documents for additional information on coverage and exclusions.

Summary of Covered Benefits	VSP Vision Plan		UnitedHealthcare Vision Plan	
	In Network	Out of Network	In Network	Out of Network
<b>Eye Exam</b> (every 12 months)	\$25 copay	Plan pays up to \$45	\$10 copay	Plan pays up to \$40
<b>Standard Plastic Lenses</b> (every 12 months)	\$30 copay	Plan pays up to \$30	\$30 copay	Plan pays up to \$40
<b>Frames</b> (every 12 months)	Plan pays up to \$130 <sup>1</sup> + 20% discount on balance	Plan pays up to \$70	Plan pays up to \$130 + 20% discount on balance	Plan pays up to \$45
<b>Contact Lenses</b> (every 12 months in lieu of standard plastic lenses)	Up to \$60 copay, then plan pays up to \$130	Plan pays up to \$105	\$30 copay, then plan pays up to \$130	Plan pays up to \$105

(1) Plan pays up to \$150 for featured frame brands.

## Vision Insurance Costs

Listed below are the per pay period costs for vision insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis.

Vision Coverage Level	VSP Vision Plan	UnitedHealthcare Vision Plan
<b>Employee Only</b>	\$3.46	\$2.89
<b>Employee + Spouse</b>	\$6.92	\$5.37
<b>Employee + Child(ren)</b>	\$7.42	\$6.71
<b>Employee + Family</b>	\$11.85	\$9.38

Note: Premiums withheld from 24 pay periods.



# FLEXIBLE SPENDING ACCOUNTS

HonorHealth offers three flexible spending account (FSA) options—the health care FSA, the limited purpose health care FSA, and the dependent care FSA—which allow you to pay for eligible expenses with pre-tax dollars. You decide how much to contribute to each FSA on a calendar year basis up to the maximum allowable amounts. FSAs are administered by Wex (formerly Discovery Benefits). Log into your account at [wexinc.com](https://wexinc.com).



## **Health Care FSA** (not allowed if you contribute to an HSA)

The health care FSA allows you to set aside money to pay for eligible out-of-pocket expenses, such as copays and other health-related expenses that are not paid by the medical, dental, or vision plans.

**Roll over  
\$550!**

**The health care FSA maximum contribution is \$2,750 for the 2021 calendar year.**



## **Limited Purpose Health Care FSA** (if you contribute to an HSA)

If you contribute to an HSA, you are not eligible to contribute to a health care FSA. However, you can contribute to a limited purpose health care FSA which can only be used to reimburse dental and vision expenses.

**Roll over  
\$550!**

**The limited purpose health care FSA maximum contribution is \$2,750 for the 2021 calendar year.**



## **Dependent Care FSA**

The dependent care FSA allows you to set aside money from your paycheck for day care expenses to allow you and your spouse to work or attend school full time. Eligible dependents are children under 13 years of age, or a child over 13, spouse, or elderly parent residing in your house who is physically or mentally unable to care for himself or herself. Examples of eligible expenses are day care facility fees, before- and after-school care, and in-home babysitting fees (income must be reported by care provider).

**Use it or  
lose it!**

**You may contribute up to \$5,000 to the dependent care FSA for the 2021 calendar year if you are married and file a joint return or if you file a single or head of household return.** If you are married and file separate returns, you can each elect \$2,500 for the 2021 calendar year.

## THINGS TO CONSIDER BEFORE CONTRIBUTING TO AN FSA:

- For the health care FSA, at the end of the plan year, you can roll over \$550 from your health care FSA to use in future years. Any amount in excess of \$550 on January 1, 2022, will be forfeited. This also applies to limited purpose health care FSA.
- Dependent care FSA dollars are use it or lose it (no roll over allowed).
- You cannot take income tax deductions for expenses you pay with your FSA(s).
- You cannot stop or change your FSA contribution(s) during the plan year unless you experience a qualifying life event.
- If you leave HonorHealth, your FSA ends on the last day of your employment.

# LIFE AND AD&D INSURANCE

Life and accidental death and dismemberment (AD&D) insurance is an important element of your income protection planning, especially for those who depend on you for financial security. For your peace of mind, HonorHealth provides basic life and AD&D insurance to all benefits-eligible employees **at no cost**. You have the option to purchase additional voluntary life insurance.

## BENEFICIARY DESIGNATIONS

Please be sure to keep your beneficiary information up to date.

## Basic Life and AD&D Insurance

HonorHealth automatically provides basic life and AD&D insurance through Excess Risk to all benefits-eligible employees **at no cost**. If you die as a result of an accident, your beneficiary would receive both the life benefit and the AD&D benefit.

- **Employee benefit:** 1x base annual salary up to a maximum of \$200,000 (minimum of \$25,000)

## Voluntary Life and AD&D Insurance

HonorHealth provides you the option to purchase voluntary life and AD&D insurance for yourself, your spouse, and your dependent children through The Hartford. You must purchase additional coverage for yourself in order to purchase coverage for your spouse and/or dependents. Voluntary life and AD&D rates are age-banded (listed below). Benefits will reduce to 50% at age 70, to 30% at age 75, and to 20% at age 80.

If you elect coverage when first eligible, you may purchase up to the guarantee issue amount(s) without completing a statement of health (evidence of insurability). If you do not enroll when first eligible, you will be required to submit evidence of insurability for any amount of coverage. Coverage will not take effect until approved by Reliance Standard.

- **Employee:** 1, 2, 3, 4, or 5x your base annual salary up to the guarantee issue of \$500,000
- **Spouse or domestic partner\*:** \$10,000 increments, not to exceed \$50,000 or 100% of the employee's election, whichever is less
- **Dependent children:** \$5,000 or \$10,000, not to exceed 100% of the employee's election

\*If your spouse/domestic partner is also a benefits-eligible employee of HonorHealth, you cannot make a life insurance coverage election for him or her.

## Voluntary Life and AD&D Insurance Costs

Listed below are the rates for voluntary life and AD&D insurance. The amount you pay for voluntary life and AD&D insurance is deducted from your paycheck on a post-tax basis.

Voluntary Life and AD&D Rates			
Age	Employee Biweekly Rate Per \$1,000 of coverage	Spouse Biweekly Rate Per \$1,000 of coverage	Child Per Pay Period Rate
<30	\$0.021	\$0.033	Per \$5,000 of coverage: \$0.38 per pay period Per \$10,000 of coverage: \$0.75 per pay period
30-34	\$0.024	\$0.048	
35-39	\$0.027	\$0.053	
40-44	\$0.039	\$0.060	
45-49	\$0.054	\$0.085	
50-54	\$0.076	\$0.125	
55-59	\$0.126	\$0.225	
60-64	\$0.190	\$0.340	
65-69	\$0.328	\$0.645	
70+	\$0.580	\$0.655	

Note: Premiums withheld from 24 pay periods.

# **DISABILITY INSURANCE**

## Short-Term Disability Insurance

HonorHealth provides short-term disability (STD) insurance through Matrix/Reliance Standard to all benefits-eligible employees **at no cost** the first of the month following 12 months of employment in a benefit eligible position. STD insurance is designed to help you meet your financial needs if you become unable to work due to an illness or injury. Benefits will be reduced by other income, including state-mandated short-term disability plans.

- **Benefit:** 60% of base weekly pay
- **Elimination period:** 7 days for sickness or injury
- **Benefit duration:** Up to 180 days in a rolling 12-month period

## Long-Term Disability Insurance

HonorHealth automatically provides long-term disability (LTD) insurance through Matrix/Reliance Standard to all benefits-eligible employees **at no cost**. LTD insurance is designed to help you meet your financial needs if your disability extends beyond the short-term disability period. Staff employees are eligible for LTD benefits the first of the month following one year of service in a benefit eligible position.

- **Benefit:** 60% of base monthly pay up to \$15,000
- **Elimination period:** 180 days
- **Benefit duration:** Social security normal retirement age or defined in insurance certificate dependent upon age at inception
- **Pre-existing condition exclusion:** 3/12; benefits will not be paid for any disability for which you received medical treatment, care, or consultation for during the 3 months preceding your effective date until you have been covered under the policy for 12 months

## Voluntary LTD Insurance

HonorHealth provides you the option to purchase voluntary LTD insurance through Matrix/Reliance Standard. Staff employees are eligible to purchase voluntary LTD benefits after one year of service.

- **Benefit:** An additional 6<sup>2/3</sup>% of base monthly pay up to \$15,000 (for a combined LTD benefit equal to 66<sup>2/3</sup>% of base monthly pay)
- **Elimination period:** 180 days
- **Benefit duration:** Social security normal retirement age or defined in insurance certificate dependent upon age at inception
- **Pre-existing condition exclusion:** 3/12; benefits will not be paid for any disability for which you received medical treatment, care, or consultation for during the 3 months preceding your effective date until you have been covered under the policy for 12 months



# FINANCIAL PROTECTION BENEFITS

## Accident Insurance

Designed to supplement your medical plan coverage, accident insurance pays specific benefit amounts for expenses resulting from covered non-work-related injuries or accidents. Hospitalization, physical therapy, intensive care, and emergency transportation are some of the out-of-pocket expenses that are covered by this plan. Coverage is available for you, your spouse, and/or your child(ren).

Biweekly rates are shown in the chart below.

Accident Insurance Coverage Level	Accident Insurance Biweekly Rates*
<b>Employee Only</b>	\$6.65
<b>Employee + Spouse</b>	\$9.91
<b>Employee + Child(ren)</b>	\$12.55
<b>Employee + Family</b>	\$15.81

Note: Premiums withheld from 24 pay periods.

## Critical Illness Insurance

Critical illness insurance provides cash benefits if you are diagnosed with a covered critical illness, such as cancer, a heart attack, or a stroke. More importantly, the plan helps you focus on recuperation instead of the costs of medical and personal bills. Cash benefits are paid directly to the insured upon diagnosis of a covered critical illness. Coverage is available for you, your spouse, and/or your child(ren).

Biweekly rates are shown in the chart below.

Critical Illness Insurance Biweekly Rates*									
Age	Employee Rate			Spouse Rate			Child Rate		
	\$10,000	\$20,000	\$30,000	\$10,000	\$20,000	\$30,000	\$5,000	\$10,000	\$20,000
<b>&lt;25</b>	\$2.45	\$4.25	\$6.05	\$2.45	\$4.25	\$6.05	\$0.70	\$1.40	\$2.80
<b>25-29</b>	\$2.70	\$4.75	\$6.80	\$2.70	\$4.75	\$6.80			
<b>30-34</b>	\$3.00	\$5.35	\$7.70	\$3.00	\$5.35	\$7.70			
<b>35-39</b>	\$3.60	\$6.55	\$9.50	\$3.60	\$6.55	\$9.50			
<b>40-44</b>	\$5.25	\$9.85	\$14.45	\$5.25	\$9.85	\$14.45			
<b>44-49</b>	\$7.90	\$15.15	\$22.40	\$7.90	\$15.15	\$22.40			
<b>50-54</b>	\$11.90	\$23.15	\$34.40	\$11.90	\$23.15	\$34.40			
<b>55-59</b>	\$17.95	\$35.25	\$52.55	\$17.95	\$35.25	\$52.55			
<b>60-64</b>	\$24.80	\$48.95	\$73.10	\$24.80	\$48.95	\$73.10			
<b>65-69</b>	\$32.05	\$63.45	\$94.85	\$32.05	\$63.45	\$94.85			
<b>70+</b>	\$42.05	\$83.45	\$124.85	\$42.05	\$83.45	\$124.85			

Note: Premiums withheld from 24 pay periods.

## Whole Life Insurance

Whole life insurance protects your family for an entire lifetime. Whole life insurance can build cash value that you can use while you are still alive. You can have the added financial protection that you and your family may need during times of uncertainty at an affordable premium. The policy is owned by you, so you can keep your coverage even when you retire or change jobs. As long as the premium continues to be paid, your rate is guaranteed never to increase and your benefit can never decrease! Coverage is available for you, your spouse, and/or your child(ren).

# FINANCIAL PROTECTION BENEFITS

## Hospital Indemnity Insurance

Hospital indemnity insurance provides financial assistance to enhance your current coverage. It helps you avoid utilizing your savings or having to borrow to cover out-of-pocket costs that health insurance was never intended to cover. Hospital indemnity insurance can help with expenses, such as transportation, meals for family members, and childcare, or with time away from work during a hospital stay. Coverage is available for you, your spouse, and/or your child(ren). Biweekly rates are shown in the chart below.

Hospital Indemnity Insurance Coverage Level	Hospital Indemnity Insurance Biweekly Rates*
<b>Employee Only</b>	\$11.40
<b>Employee + Spouse</b>	\$23.46
<b>Employee + Child(ren)</b>	\$17.41
<b>Employee + Family</b>	\$29.47

Note: Premiums withheld from 24 pay periods.

For additional information regarding accident insurance, critical illness insurance, whole life insurance or hospital indemnity, call 480-583-4588 or visit a benefit educator at your campus.

## Identity Theft Insurance

Identity Theft insurance can provide peace of mind with proactive monitoring for the most damaging types of fraud. Allstate Identity Protection monitors your credit through TransUnion, Equifax, and Experian and also monitors things like financial transactions and social media reputation. It will also send you a monthly credit score and a credit report each year from TransUnion. Allstate Identity Protection has a generous Under Roof/Under Wallet definition of eligibility, meaning that anyone living under your roof (Under Roof) or anyone you support financially (Under Wallet) is eligible for coverage.

Identity Theft Insurance Coverage Level	Identity Theft Insurance Biweekly Rates*
<b>Employee Only</b>	\$4.97
<b>Employee + Family</b>	\$8.97

Note: Premiums withheld from 24 pay periods.

## Prepaid Legal Services

MetLife Legal Plan is your provider for prepaid legal and financial services. Through the MetLife Legal program, you can receive telephone and office consultations for a variety of matters with any MetLife Legal attorney. The cost is \$19.50 per month.

### Legal representation includes such matters as:

- Real estate advice
- Family law
- Traffic offenses
- Consumer protection
- Juvenile matters
- Legal document preparation and review
- Estate planning and other financial issues

For additional information, contact MetLife Legal Plans' Client Service Center at 800-821-6400.

## OTHER BENEFITS

### Auto and Home Insurance

The auto and home insurance plans offer low group rates through Liberty Mutual Group. You may elect this benefit at any time and you may pay its premiums through payroll deductions. Contact Liberty Mutual at 800-699-2723 or visit [libertymutual.com/honorhealth](https://libertymutual.com/honorhealth).

### Pet Health Care Coverage

United Pet Care (UPC) offers health care coverage for dogs, cats, birds, rabbits, ferrets, pocket pets, and reptiles. For more information, visit [unitedpetcare.com](https://unitedpetcare.com).

- No exclusions due to animal's age, pre-existing conditions, hereditary/genetic conditions
- No waiting period
- No deductibles
- No claim forms
- No annual dollar maximum limitations

### Financial Planning Benefit

Blakely Walters offers a financial planning benefit for you and your family. Receive three (3) meetings in person or remotely per year. Get help with setting financial goals, retirement planning, budgeting, college savings, and more. This benefit includes your own secure planning website to help you organize and analyze your finances in one place. For more information, contact Blakely Walters at 480-776-5897 or visit [blakelywalters.com](https://blakelywalters.com).

### Childcare and Learning Centers

HonorHealth provides outstanding care and learning opportunities for employees' children. HonorHealth provides access to two centers Monday through Friday.

- If you would like more information about the childcare center located near Scottsdale Shea Medical Center or a tour of the building, call 480-323-4630.
- If you would like more information about the learning center located near John C. Lincoln Medical Center or a tour of the building, call 602-943-3731.

## EDUCATION BENEFITS

HonorHealth encourages all employees to participate in continuing education programs. Many programs are coordinated through the Workforce Development Department and are related to patient care, skill improvement, safety, management development, and career planning.

### Tuition Assistance

If you are interested in returning to school, consider applying for the tuition assistance benefit. For more information, including program eligibility, please see the tuition assistance program policy (#HR1369) or contact the tuition assistance program team at 480-587-5360.

## PAID TIME OFF AND PAID SICK TIME

All regular and seasonal, full- and part-time employees (exclusive of temporary and per diem staff) are eligible to earn paid time off (PTO) based on length of service and regular hours paid.

Each pay period, all eligible employees will accrue PTO hours. This accrued time may be used for holidays, vacation, personal business, short-term personal illness, and family needs. Accrued PTO hours may be utilized as the employee elects, subject to departmental staffing requirements and supervisory approval.

Note: For further information regarding the HonorHealth PTO and PST policy, please refer to policy #HR1324.

Length of Service	Earned PTO	2021 Max Accrual
0-2 years	0.069/5.52 hours a pay period	240 hours
3-6 years	0.088/7.04 hours a pay period	260 hours
7-9 years	0.100/8.00 hours a pay period	280 hours
10-14 years	0.108/8.64 hours a pay period	300 hours
15+ years	0.115/9.20 hours a pay period	320 hours

Amounts represent estimates based on 80 accruable hours per pay period throughout the year. Part-time employees' PTO accruals are pro-rated based on hours worked per pay period. PTO will stop accruing until the accrued hours fall below the maximum cap level.

Employees will also be eligible to receive up to 40 hours of paid sick time (PST) per accrual cycle.

Length of Service	Earned PST	2021 Max Accrual
All	0.0333/2.664 hours per pay period	40 hours

Note: PST is earned on hours worked only. For further information regarding the HonorHealth's PTO and PST, please refer to policy HR#1324.



## **403(b) RETIREMENT SECURITY PLAN**

The earlier you start saving, the larger your nest egg will be when you are ready to retire. Putting a little away with each paycheck with pre-tax dollars will help you reach your retirement goals without feeling the pinch on your budget.

### With the 403(b) Retirement Security Plan

- As a new hire, you are auto-enrolled at 2%. Please allow up to two pay periods for deductions to start.
- You can change your contribution elections any time.
- You can cancel or resume your contribution at any time.
- You have a variety of investment options.
- You are vested 100% from day one.
- You may also “roll in” money from another “qualified” retirement plan at any time.

### How the 403(b) Retirement Security Plan Works

- You contribute to the 403(b) retirement security plan through convenient payroll deductions.
- You contribute pre-tax money—that is, money you invest before taxes are calculated on your pay. This means you’ll owe less to the IRS.
- Your contributions and their earnings grow tax-free until you withdraw your money from the plan. Because you have more money working for you, it grows faster—specifically because you won’t pay taxes on your investments every year like you would with other types of accounts.
- At the time you begin contributing, HonorHealth will match dollar-for-dollar up to 4% of your eligible compensation.
- It’s easy to save. When you enroll, you decide how much you want to save, as little as 2% or as high as 50% of your base earnings, up to the maximum set by the IRS.

### How to Get Started in the 403(b) Retirement Plan

Quick Join, a mobile optimized tool, allows employees to enroll into retirement planning from their smart phone or tablet. For individuals on the go, Quick Join allows users to skip the registration step and simply enroll by providing their social security number, date of birth and zip code.

Visit [retirement.prudential.com/quickjoin](https://retirement.prudential.com/quickjoin) to enroll.

Note: If you are a new hire, you are auto-enrolled at 2%.

# IMPORTANT CONTACT INFORMATION

If you have any questions regarding your benefits or the material contained in this guide, please contact the Employee Benefits Department.

## HonorHealth Benefits Educators

Phone: 480-583-4588 (8 a.m. to 5 p.m. MST)

Fax: 480-882-5802

Email: [employee.benefits@honorhealth.com](mailto:employee.benefits@honorhealth.com)

Website: [honorhealthbenefits.com](http://honorhealthbenefits.com)

Provider/Plan	Contact Number	Website
<b>Medical</b> –AmeriBen	602-231-8855	<a href="http://myameriben.com">myameriben.com</a>
<b>Medical Networks</b> – HonorHealth Physicians BlueCross Blue Shield of Arizona PHCS Healthy Directions Network (out-of-state network)		<a href="http://innovationcarepartners.com/physiciansearch">innovationcarepartners.com/physiciansearch</a> <a href="http://azblue.com/chsnetwork">azblue.com/chsnetwork</a> <a href="http://multiplan.com/search">multiplan.com/search</a>
<b>Prescription Drugs</b> –OptumRx	844-368-9854	<a href="http://optumrx.com">optumrx.com</a>
<b>Behavioral Health Services</b> – Magellan Health Services	800-424-4138	<a href="http://magellanassist.com">magellanassist.com</a>
<b>Employee Assistance Program</b> –ComPsych	866-676-3524	<a href="http://guidanceresources.com">guidanceresources.com</a> (ID: HonorHealth)
<b>Health Savings Account</b> –HealthEquity	866-346-5800	<a href="http://healthequity.com/">healthequity.com/</a>
<b>Dental</b> – Delta Dental of Arizona Employers Dental Services (EDS)	602-938-3131 602-248-8912	<a href="http://deltadentalaz.com">deltadentalaz.com</a> <a href="http://mydentalplan.net">mydentalplan.net</a>
<b>Vision</b> – VSP UnitedHealthcare (Spectera) Vision Plan	800-877-7195 800-638-3120	<a href="http://vsp.com">vsp.com</a> <a href="http://myuhcvision.com">myuhcvision.com</a>
<b>Flexible Spending Accounts</b> – Wex (formerly Discovery Benefits)	866-451-3399	<a href="http://wexinc.com">wexinc.com</a>
<b>Life Insurance</b> –The Hartford	866-223-1674	<a href="http://thehartfordatwork.com">thehartfordatwork.com</a>
<b>Disability Insurance</b> – Matrix/Reliance Standard	877-202-0055	<a href="http://matrixabsence.com">matrixabsence.com</a>
<b>Financial Protection Benefits</b> –Voya Critical Illness, Accident, and Hospital Indemnity Insurance Whole Life Insurance	877-236-7564 888-238-4840	<a href="http://voya.com">voya.com</a> claims: <a href="http://voya.com/claims">voya.com/claims</a>
<b>Identity Theft Insurance</b> – Allstate Identity Protection	800-789-2720	<a href="http://myaip.com/honorhealth">myaip.com/honorhealth</a>
<b>Prepaid Legal Services</b> –MetLife Legal Plan	800-423-0300 or 800-821-6400	<a href="http://legalplans.com">legalplans.com</a> (password: metlaw)
<b>Auto and Home Insurance</b> –Liberty Mutual	800-699-2723	<a href="http://libertymutual.com/honorhealth">libertymutual.com/honorhealth</a>
<b>Pet Insurance</b> –United Pet Care	602-266-5303	<a href="http://unitedpetcare.com">unitedpetcare.com</a>
<b>Financial Planning</b> –Blakely Walters	480-776-5897	<a href="http://blakelywalters.com">blakelywalters.com</a>
<b>403(b) Retirement Security Plan</b> – Prudential Financial	877-778-2100	<a href="http://prudential.com/quickjoin">prudential.com/quickjoin</a>

This summary of benefits is not intended to be a complete description of the terms and HonorHealth insurance benefit plans. Please refer to the plan document(s) for a complete description. Each plan is governed in all respects by the terms of its legal plan document, rather than by this or any other summary of the insurance benefits provided by the plan. In the event of any conflict between a summary of the plan and the official document, the official document will prevail. Although HonorHealth maintains its benefit plans on an ongoing basis, HonorHealth reserves the right to terminate or amend each plan, in its entirety or in any part at any time. Images © 2020 Getty Images. All rights reserved.