2026 Benefits Guide

>>>>>>



HONORHEALTH®

What's inside

1 >> How benefits work

Benefits for a healthy future3
Eligibility4
Enrollment5
Changing your benefits6
Key terms to know6
2 \rangle Health plans
Medical benefits7
Dental benefits14
Vision benefits15
3 >>> Tax savings
Budgeting for your care16
Health savings account17
Flexible spending accounts18
4 >> Financial security
Life and AD&D benefits19
Disability benefits20
Financial protection benefits21
Other benefits24
Education benefits24
Paid time off and paid sick time25
Retirement benefits26
5 >> Additional information
Your path to better mental health27
Contacts28



Use this guide as a tool to help you make the best benefits decisions for you and your family for the 2026 plan year (January 1-December 31, 2026). The information inside this guide can help you review your health coverage options, discover tax savings opportunities, and learn about voluntary benefit offerings.



Benefits for a healthy future

HonorHealth is a company who cares. We recognize that what makes us strong is our employees. That's why we've put together a benefits package that values you and your family's total health.

We have handpicked benefits we believe will strengthen your physical, emotional, and financial wellbeing. Carefully review the benefits offered and choose the plans that fit your personal situation.

A few benefit highlights



Lyra therapy or coaching sessions

All employees, their spouse/domestic partner, and dependents have access to six free therapy or coaching sessions through Lyra.



Paid time off

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



Tuition assistance

If you are interested in returning to school, consider applying for the tuition assistance benefit.



403(b) retirement security plan

HonorHealth will contribute \$1 to your account for every \$1 you contribute (up to 4% of your eligible pay).

Eligibility

Full-time and part-time employees are eligible for benefits. Full-time employees must work a minimum of 30 hours per week, and part-time employees must work between 16-29.50 hours per week.

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.

If you are a new hire, you will be contacted by a Benefits Educator within your first 30 days to review benefits and assist with enrollment.

Available on your first day of work:

- · Auto and home insurance
- Pet insurance
- · Behavioral health support
- Employee discounts

- Paid time off/paid sick time
- 403(b) retirement security plan (please allow up to two pay periods for deductions to start)

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

- Prepaid legal services
- Voluntary life insurance
- · Financial planning
- Identity theft insurance (benefit active 24 hours after enrollment)

Available on the first day of the month following one month of employment:

- Voluntary critical illness insurance
- Voluntary accident insurance

- Hospital indemnity insurance
- Whole life insurance

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

As you become eligible for benefits, so do your eligible dependents. In general, eligible dependents include:

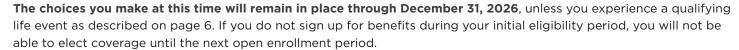
- Your spouse or partner: This includes your legal spouse, civil union partner, or domestic partner.
- Your child(ren): This includes your children to age 26, regardless of student, marital, or tax-dependent status (including a stepchild, legally-adopted child, a child placed with you for adoption, or a child for whom you are the legal guardian) as well as disabled children of any age who are physically or mentally unable to care for themselves. The disability must have begun prior to age 26 and the dependent must have been on the plan before reaching age 26. 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. 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. Visit honorhealthbenefits.com/health-wellness for a full list of eligible documents.

Enrollment

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

- Within 30 days of joining HonorHealth as a new employee.
- During the annual benefits enrollment period.
- Within 30 days of a qualifying life event.



If you are a new hire, log into Team Member Self Service (Workday) to enroll in benefits.

How to enroll



Self-enroll in your benefits.

Review the available plan options and log into **Team Member Self Service (Workday)** to enroll in benefits. If you have questions about your benefits, connect with an HonorHealth Benefits Educator by calling 480-583-4588 (8 a.m. to 5 p.m. MST) or emailing **employee.benefits@honorhealth.com**.



Have important documentation ready.

You will be asked questions regarding you and your family, including birth dates, Social Security numbers, and phone numbers.



Compare your plan options and choose the best plan for you and your family.

Once you have finalized your selections, print your confirmation statement or send it to yourself via email and keep for your records.

For questions, contact the Employee Benefits Department at employee.benefits@honorhealth.com or 480-583-4588.

Changing your benefits

Due to IRS regulations, once you have made your elections for the 2026 plan year, you cannot change your 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:

- Birth or adoption of an eligible child.
- Marriage, divorce, or legal separation.
- Spouse's work status changed affecting their benefits.
- Death of your spouse or covered child.
- Child's eligibility for benefits changed.
- Qualified Medical Child Support Order.

If you experience a qualifying life event, please submit your qualifying life event in **Team Member Self Service** (Workday).

To request a benefits change, please submit your qualifying life event in **Team Member Self Service (Workday)**, notify a benefit educator, or email **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.

Key terms to know

Take the first step to understanding your benefits by learning these four common terms.



Copay

A fixed dollar amount you may pay for certain covered services. Typically, your copay is due at the time of service.



Deductible

The amount you must pay each year for certain covered health services before your insurance plan will begin to pay.



Coinsurance

After you meet your deductible, you may pay coinsurance, which is your share of the costs of a covered service.



Out-of-pocket maximum

This includes copays, deductibles, and coinsurance. Once you meet this amount, the plan pays 100% of covered services for the rest of the year.

UMR | umr.com | 866-868-6744

Before you enroll in medical coverage, take some time to understand how each plan works.

HonorHealth offers three medical plan options.

The table below summarizes the key features of the medical plan options. See pages 9 and 10 for an overview of the plan benefits.

Overview of benefits	Coordinated Care Plan	Standard Plan	Health Savings Account Plan (HDHP)				
Network coverage	You will pay less by choosing an HonorHealth and Innovation Care Partners (ICP) provider. Services provided by UnitedHealthcare (UHC) Choice Plus national network providers may be covered but are limited by plan choice. There is no out-of-network coverage unless you experience a life- or limb-threatening emergency. If you are enrolled in the Coordinated Care Plan or Health Savings Account Plan (HDHP), most services must be rendered with an HonorHealth or ICP provider to be covered.						
	Behavioral health services	s are provided by a UHC Choice Plus E See page 12 for more details.	Behavioral Health provider.				
	To find an provider, go to	icphealth.com/honorhealthemploy	eeplanphysiciansearch.				
	Traveling outside of Arizona: In the event of an emergency you have access to the UHC Choice Plus nation network of providers.						
Traveling or living		e is a specific out-of-state medical pla ce Plus national network. Refer to the	·				
outside of Arizona	Dependents living outside of Arizona: You must complete a form if you have an enrolled dependent (child or spouse) permanently residing or attending school outside of Arizona in order for them to access UHC's Choice Plus national network outside of Arizona. This form must be completed each year during open enrollment or before the member moves out of Arizona. The form can be found on honorhealthbenefits.com.						
HonorHealth contributes money into an account to help you pay for out-of-pocket expenses	Yes, HonorHealth will provide \$600 for employee-only coverage or \$1,200 for all other coverage levels of Health Reimbursement Arrangement (HRA) funding. You are eligible for this contribution if you make less than \$22.57 per hour and are enrolled in the Coordinated Care Plan and a dental plan.	No.	Yes, HonorHealth will match your health savings account (HSA) contribution up to \$600 for employee-only coverage or \$1,200 for all other coverage levels. If you make \$150,000 or more base salary, you are not eligible for an HSA match.				
Pay for health care with pre-tax dollars	You can fund a health care flexible spending account (FSA).	3000					
Plan has a deductible	Yes. There are some services where there is a set copay amount you pay for services.	Yes. There are some services where there is a set copay amount you pay for services.	Yes. You must meet the plan's deductible before most services are covered.				
Plan pays 100% for preventive care ¹	Yes, as long as you see an HonorHealth/ICP provider.	Yes, as long as you see an HonorHealth/ICP provider or UHC provider.	Yes, as long as you see an HonorHealth/ICP provider.				

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

Medical 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, which means you on't pay taxes on the amount you pay for coverage.

	Coordinated Care Plan		Standard Plan		Health Savings Account Plan (HDHP)	
Level of coverage	Full-Time Employees Biweekly	Part-Time Employees¹ Biweekly	Full-Time Employees Biweekly		Full-Time Employees Biweekly	Part-Time Employees Biweekly
Employee only	\$52	\$156	\$254	\$545	\$28	\$86
Employee + spouse	\$242	\$535	\$570	\$1,061	\$132	\$293
Employee + child(ren)	\$110	\$260	\$269	\$600	\$59	\$142
Employee + family	\$317	\$679	\$701	\$1,391	\$173	\$372

Note: Premiums withheld from 24 pay periods. Full-time employees who make less than \$22.57 per hour (\$46,950 annually) are eligible for a Health Reimbursement Account (HRA) if they are enrolled in the Coordinated Care plan and a dental plan. Full-time and part-time employees with salaries of \$150,000 or more will pay an additional \$40 per pay period.

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.

The HonorHealth Employee Benefit Plans offer benefits in the following networks:

- Primary Network: HonorHealth/ICP network
- Secondary and Behavioral Health Network: UnitedHealthcare (UHC) Choice Plus national network

There is no coverage for services outside of the Primary and Secondary networks, unless it is an emergency.

For medical prior-authorizations, please contact UMR at 866-868-6744.

Primary Network HonorHealth/ICP Network	Includes all HonorHealth hospitals, facilities, practices, and urgent care centers. It also includes all physicians within the ICP network. You will pay less out of your pocket when you choose an HonorHealth or ICP provider. For a list of HonorHealth and ICP physicians and locations, go to icphealth.com/ honorhealthemployeeplanphysiciansearch or call the UMR Plan Advisor team at 866-868-6744
Secondary and Behavioral Health Network UHC Choice Plus National	The UHC Choice Plus national network includes physicians and facilities nationwide. On all plans you may utilize the UHC Choice Plus national network for behavioral health services and specialty care not available through the Primary Network. All other coverage through this network is limited for the CCP and HDHP plans. On the Standard plan, you may access providers and facilities in this network but will pay more out of your pocket than you would if utilizing a Primary Network provider or facility, except for behavioral health or specialties not available through the Primary Network.
Network	To find a UHC Choice Plus national network physician, facility or behavioral health provider, visit icphealth.com/honorhealthemployeeplanphysiciansearch or call the UMR Plan Advisor team at 866-868-6744.

Coordinated Care Plan and Health Savings Account Plan (HDHP): Services are only covered if you see a Primary Network provider, unless you need to see a specialty provider not available through the Primary Network (i.e. pediatrics, perinatologists, physical, occupational and speech therapists, alternative care providers, and a few others). In these cases, you will be able to access specialty providers in the Secondary Network at the same copay or coinsurance amount as the Primary Network. Pediatric care: Your dependent MUST visit a pediatric provider for services to be covered. For a full list of specialty providers, please visit honorhealthbenefits.com.

HonorHealth offers three medical insurance plan options.

The table below summarizes the benefits of each medical plan. Where copays are noted, there may be additional coinsurance that applies. The coinsurance amounts listed reflect the amount you pay. Please refer to the official plan documents for additional information on coverage and exclusions.

Summary of	Coordinated Care Plan		Standard Plan		Health Savings Account Plan (HDHP)		
covered benefits	Primary Network	Secondary Network	Primary Network		Primary Network	Secondary Network	
Plan year deductible Individual/family	\$500/	\$1,000	\$500/	′ \$1,000	\$3,400/	(\$6,800	
HonorHealth HSA contribution	N,	/A	N	N/A		Employee-only: Up to \$600¹ All other coverage levels: Up to \$1,200¹	
Out-of-pocket maximum		Inc	ludes deductible, co	pays, and coinsurance	ce		
Individual/family	\$5,000/	′ \$10,000	\$6,450/	[/] \$12,900	\$6,450/	\$12,900	
Preventive care	Plan pays 100%	Not covered ²	Plan pays 100%	Plan pays 100%	Plan pays 100%	Not covered ²	
Physician services Primary care physician	\$25 copay	Not covered ³	\$25 copay	\$40 copay	20% after ded.	Not covered ³	
Specialist	\$50 copay	Not covered ³	\$60 copay	\$125 copay ⁴	20% after ded.	Not covered ³	
Virtual care	\$25 copay	Not covered ³	\$25 copay	\$40 copay	20% after ded.	Not covered	
Urgent care	\$35 copay	\$60 copay	\$35 copay	\$60 copay	20% after ded.	20% after ded. ³	
Outpatient lab/X-ray Lab services X-Ray/ultrasound	\$25 copay \$25 copay	\$25 copay \$25 copay⁵	\$25 copay \$25 copay	\$25 copay	20% after ded. 20% after ded.	20% after ded. 20% after ded. ⁵	
MRI, MRA, CT, PET	20% after ded.	20% after ded. ⁵	20% after ded.	30% after ded.	20% after ded.	20% after ded. ⁵	
Hospital services Inpatient Outpatient	20% after ded. 20% after ded.	Not covered Not covered	20% after ded. 20% after ded.	30% after ded. 30% after ded.	20% after ded. 20% after ded.	Not covered Not covered	
Emergency room ⁶	20% af	ter ded.	20% after ded.		20% after ded.		
Behavioral health Inpatient Outpatient	20% after ded. \$25 copay		20% after ded. \$25 copay		20% after ded. 20% after ded.		
Occupational, speech, and physical therapies	\$25 copay		\$25 copay		20% after ded.		
Alternative care ⁷ 20 visits per year (combined)	\$25 copay		\$25 copay		20% after ded.		
Infertility care Lifetime max medical coverage Lifetime pharmacy benefit		o to \$10,000 o to \$10,000	, , ,	o to \$10,000 o to \$10,000	Plan pays up to \$10,000 Plan pays up to \$10,000		

⁽¹⁾ Based on employee contributions. If you make \$150,000 or more, you are not eligible for the HonorHealth HSA match. (2) Except pediatrics, outpatient lab/x-ray, and gap providers. These services will be covered at the HonorHealth/ICP benefit level. (3) Except pediatrics and gap providers. These services will be covered at the HonorHealth/ICP benefit level. (4) HonorHealth/ICP copay if specialty not in HonorHealth network. (5) Only at free-standing facilities (non-hospital), otherwise not covered. (6) 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. (7) This includes chiropractic and acupuncture services. Please refer to the official plan documents for a full list of services.

OptumRx | optumrx.com | 844-368-9854

Prescription benefits

When you enroll in an HonorHealth medical plan, prescription drug coverage is automatically provided through OptumRx.

Fill your 30-day prescriptions at participating pharmacies such as Safeway, Walgreens, Walmart, CVS, and Target, or use mail order through OptumRx. Visit **optumrx.com**, or download the mail order form at **honorhealthbenefits.com**.

The table below summarizes the benefits of each medical plan. The coinsurance amounts listed reflect the amount you pay. Please refer to the official plan documents for additional information on coverage and exclusions.

Summary of covered benefits	Coordinated Care Plan OptumRx Network	Standard Plan OptumRx Network	Health Savings Account Plan (HDHP) OptumRx Network
30-day prescription			Deductible, then:
Generic maintenance ¹	\$0 copay	\$0 copay	\$0 copay
Tier 1 (Generic)	\$10 copay (member pays lesser of cost or copay)	\$15 copay (member pays lesser of cost or copay)	\$15 copay (member pays lesser of cost or copay)
Tier 2 (Preferred brand)	30% (\$30 min. up to \$80 max)	35% (\$40 min. up to \$100 max)	35% (\$40 min. up to \$100 max)
Tier 3 (Non-preferred brand)	60% (\$100 min.; no max)	60% (\$125 min.; no max)	60% (\$125 min.; no max)
Tier 4 (Specialty)	\$250 copay	\$250 copay	\$250 copay
QQ day procerintion?			Deductible, then:
90-day prescription ² Generic maintenance ¹	\$0 copay	\$0 copay	\$0 copay
Tier 1	\$25 copay	\$37.50 copay	\$37.50 copay
Tier 2	30% (\$75 min. up to \$200 max)	35% (\$100 min. up to \$250 max)	35% (\$100 min. up to \$250 max)
Tier 3	100%	100%	100%
Tier 4	Not covered	Not covered	Not covered

(1) HonorHealth covers generic preventive prescriptions for anti-depressants and four critical disease states: cardiac, asthma, hypertension, and diabetes. (2) All 90-day maintenance medications must be filled at a Walgreens pharmacy or through OptumRx mail order. Maintenance medications will not be covered if filled at any other pharmacy.

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** 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 pharmacy and 30-day maintenance medications will not be covered. To fill your 90-day prescriptions, visit your local Walgreens or go to walgreens.com to find the location closest to you. Or try OptumRx mail order. Visit 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.

Injectable fertility prescriptions

Injectable fertility treatment prescriptions (i.e. Follistim, Ganirelix, Lupron, Menopure, and Pregnyl)* must be dispensed through the HonorHealth Specialty Pharmacy in order to be covered. Your provider should contact OptumRx to request prior authorization if applicable.

*Please note that covered prescriptions may change throughout the year. Confirm with your doctor and OptumRx which prescriptions are covered.

Are you covering your spouse and/or children?

If you elect employee + spouse, employee + child(ren), or family coverage, the individual deductible and out-of-pocket maximum apply to each covered member of the family (capped at family amount). An individual within the family will need to meet his/her individual deductible before the plan begins to pay; the same rule applies to the out-of-pocket maximum.



Preventive care

Preventive care is covered 100% through the Primary Network on the HDHP and Coordinated Care plan and 100% through either network on the Standard plan.

You won't have to pay anything out of your pocket when you receive in-network preventive care. Practice preventive care and reap the rewards of a healthier future.

Some services are generally not considered preventive if you get them as part of a visit to diagnose, monitor, or treat an illness or injury. Please be aware that you will be responsible for the cost of any non-preventive care services you receive at your preventive care exam based on your plan design.

Learn more about preventive care at umr.com.



Preventive care helps keep you healthier long-term.

An annual preventive exam can help **IDENTIFY FUTURE HEALTH RISKS** and treat issues early when care is more manageable and potentially more effective.



Preventive care helps keep your costs low.

With a preventive care exam each year, you can **TARGET HEALTH ISSUES EARLY** when they are less expensive to treat. You can also effectively manage chronic conditions for better long-term health.



Preventive care keeps your health up to date.

Yearly check-ins with your doctor keeps your health on track with AGE- AND GENDER-SPECIFIC EXAMS, VACCINATIONS, AND SCREENINGS that could save your life.

Behavioral health services (for medical plan members)

UMR umr.com

As a medical plan member, you and your enrolled dependents have access to UHC's Choice Plus Behavioral Health network where you can seek in-person and virtual care.

UMR behavioral health specialties include:

- Addiction counselors
- Nurses
- Psychiatrists

- Psychologists
- Clinicians with master's degrees in areas such as counseling and social work

Looking for help? Start with Lyra.

All HonorHealth employees and

to six free therapy or coaching

sessions through Lyra.

See page 27 for details.

•

Find an in-network behavioral health provider easily



Top-rated providers, who meet high standards for quality and efficiency, are designated with two stars next to their names. Providers who meet standards for quality are designated with one star on the online provider directory.

You can also find a provider on-the-go using the UMR app.

Gym discount program: One Pass Select (for medical plan members)

When you enroll in One Pass Select, you and your eligible family members (18 years or older) gain access to a large nationwide network of gym brands and local fitness studios all under one convenient membership. From strength training and swimming, to yoga and spin classes, you can try new things and push yourself physically and mentally.

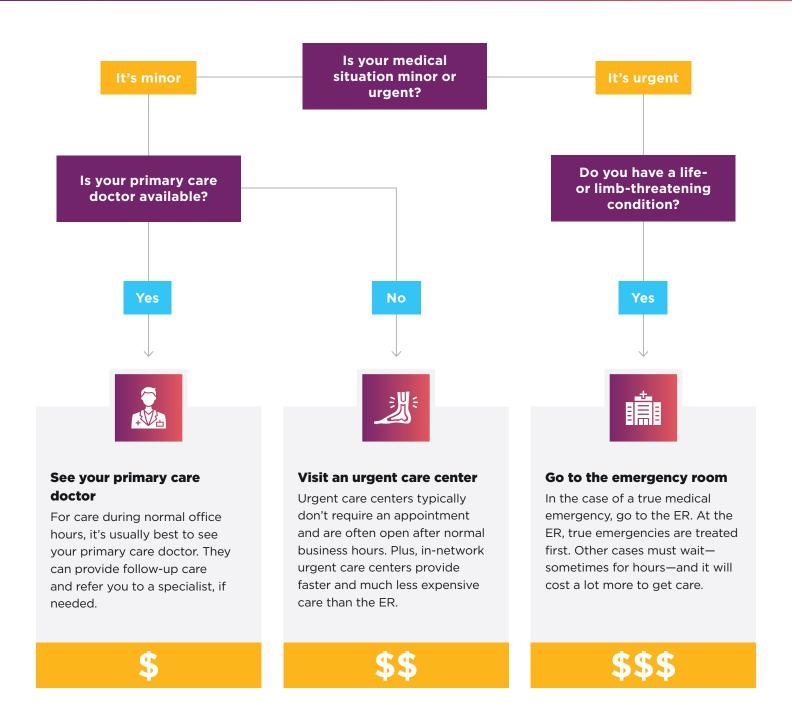
All membership tiers include grocery and home essentials delivery at no extra cost.

Visit onepassselect.com to review plan options, rates, and get started.

Note: An enrollment fee may apply.

Know where to go for care.

Where you go for medical services can make a big difference in how much you pay and how long you wait to see a health care provider. Use the chart below to help you choose where to go for care.



Dental benefits

Delta Dental of Arizona | deltadentalaz.com | 602-938-3131

HonorHealth offers three dental insurance plan options through Delta Dental.

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 PPO network provider. Locate a Delta Dental network provider at **deltadentalaz.com**.

The table below summarizes key features of the dental plans. The coinsurance amounts listed reflect the amount you pay. Please refer to the official plan documents for additional information on coverage and exclusions.

Summary of covered benefits	Delta Dental Base Plan PPO Dentist Premier Dentist		Delta Dental Buy-Up Plan PPO Dentist Premier Dentist		Delta Dental Enhanced Plan PPO Dentist Premier Dentist		
Plan year deductible Individual/family	\$50/\$150		\$50/\$150		\$50/\$150		
Plan year benefit maximum	\$1,500		\$2,0	\$2,000		\$4,000	
Preventive care (Two exams/cleanings per year)	Plan pays 100%	20% after ded.	Plan pays 100%	20% after ded.	Plan pays 100%	20% after ded.	
Basic services (Fillings, extractions, root canals)	20% after ded.	50% after ded.	20% after ded.	50% after ded.	Plan pays 100% after ded.	20% after ded.	
Major services (Bridges, crowns [inlays/onlays], dentures [full/partial])	50% after ded.	Not covered	50% after ded.		20% after ded.		
Orthodontia services ¹	Not covered		50%		Not covered		
Orthodontia lifetime maximum	N/A		\$2,500		N/A		

(1) Delta Dental will pay your orthodontic provider in two payment installments; the 1st payment at banding and the 2nd approximately 12 months later if the member still has eligibility in the Buy Up plan. Members enrolled in the Buy Up plan should remain in the same plan until orthodontic treatment has been completed and Delta Dental has made the 2nd payment installment to the orthodontic provider (this is approximately 1 year from the banding date).

Dental 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, which means you don't pay taxes on the amount you pay for coverage.

Level of coverage	Delta Dental Base Plan Full-Time Part-Time		Delta Dental Full-Time	Buy-Up Plan Part-Time	Delta Dental Enhanced Plan Full-Time Part-Time		
Employee only	\$11	\$14	\$20	\$22	\$25	\$26	
Employee + spouse	\$24	\$31	\$43	\$47	\$53	\$55	
Employee + child(ren)	\$24	\$31	\$43	\$48	\$53	\$56	
Employee + family	\$39	\$51	\$74	\$80	\$87	\$92	

Note: Premiums withheld from 24 pay periods.

Vision benefits

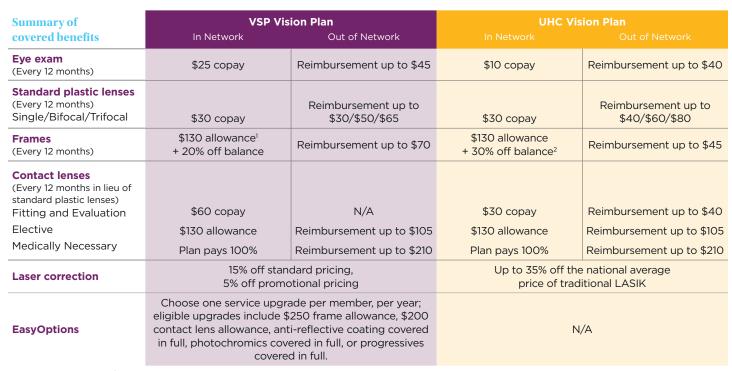
VSP | vsp.com | 800-877-7195

UHC | myuhcvision.com | 800-638-3120

HonorHealth offers two vision insurance plans through VSP and UHC.

You have the freedom to choose any vision provider. However, you will maximize the plan benefits when you choose a network provider.

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



⁽¹⁾ Plan pays up to \$150 for featured frame brands. (2) An additional 30% discount may apply over balance. See the UHC benefit summary for more information.

Vision 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, which means you don't pay taxes on the amount you pay for coverage.

Level of coverage	VSP Vision Plan	UHC Vision Plan
Employee only	\$4.27	\$3.02
Employee + spouse	\$8.54	\$5.61
Employee + child(ren) \$9.15		\$7.01
Employee + family	\$14.62	\$9.80

Note: Premiums withheld from 24 pay periods.

Budgeting for your care

HonorHealth offers two types of pre-tax accounts: a health savings account (HSA) and flexible spending accounts (FSAs).

When you put money into a pre-tax account, you can save up to 20%* on your care and increase your take home pay. This is because you don't pay tax on your contributions.

Enrolled in the Health Savings Account Plan (HDHP)?

Enrolled in the Coordinated Care Plan or Standard Plan? **Enrolled in the Health Savings Account Plan** (HDHP)?

Paving for child or elder care expenses?



Health savings account

Consider funding a health savings account (HSA).

- HonorHealth contributes up to (see below)**:
 - » Individual-\$600
 - » Family-\$1,200
- Roll over all funds each year
- Invest funds for longterm savings
- Spend funds penaltyfree after age 65



Health care flexible spending account

Consider funding a health care flexible spending account (FSA). If you fund an HSA, you cannot fund a health care FSA.

- No HonorHealth contribution
- Roll over up to \$680 each year; any unused funds over \$680 will be forfeited



Limited purpose health care flexible spending account

Consider funding a limited purpose health care flexible spending account (FSA). You can choose to fund both a limited purpose FSA and an HSA.

- No HonorHealth contribution
- Roll over up to \$680 each year; any unused funds over \$680 will be forfeited
- Dental and vision expenses only



Dependent care flexible spending account

Consider funding a dependent care flexible spending account (FSA).

- No HonorHealth contribution
- No rollover allowed
- Dependent care expenses only



















^{*}Percentage varies based on your tax bracket.

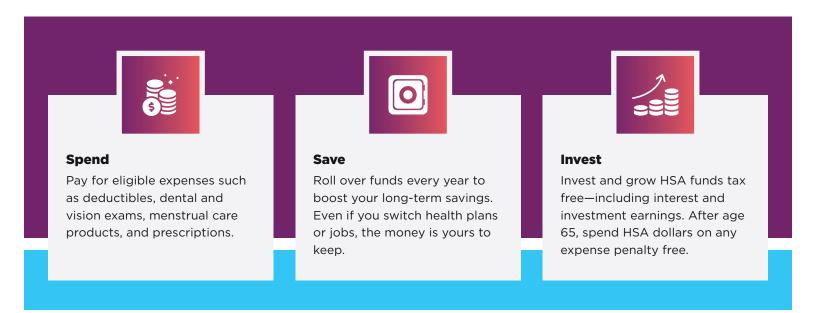
^{**}If you make \$150,000 or more, you are not eligible for the HonorHealth HSA match.

Health savings account

HealthEquity | healthequity.com | 866-346-5800

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 savings account that you can use to pay out-of-pocket health care expenses with pre-tax dollars.



HonorHealth contribution

If you enroll in the Health Savings Account Plan (HDHP), HonorHealth will help you save by contributing to your account.*

• Employee-only: \$600 per year

• All other coverage levels: \$1,200 per year

Note: HonorHealth contributions are deposited on each pay day (up to 24 pay periods), provided you are also contributing. *If you make \$150,000+, you are not eligible for the HonorHealth HSA match.

2026 IRS HSA contribution maximums

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

• Individuals: \$4,400

• All other coverage levels: \$8,750

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

HSA eligibility

You are eligible to fund an HSA if:

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

You are NOT eligible to fund an HSA if:

- You are covered by a non-HSA eligible medical plan, health care FSA, or health reimbursement arrangement.
- You are eligible to be claimed as a dependent on someone else's tax return.
- You are enrolled in Medicare, TRICARE, or TRICARE for Life.

Refer to IRS Publication 969 for eligibility details. If you are over age 65, please contact Human Resources.

Flexible spending accounts

WEX | wexinc.com | 866-451-3399

HonorHealth offers three flexible spending account (FSA) options through WEX.

Health care FSA (not allowed if you fund an HSA)

Pay for eligible out-of-pocket medical, dental, and vision expenses with pre-tax dollars. **The health care FSA maximum** contribution is \$3,400 for the 2026 calendar year.

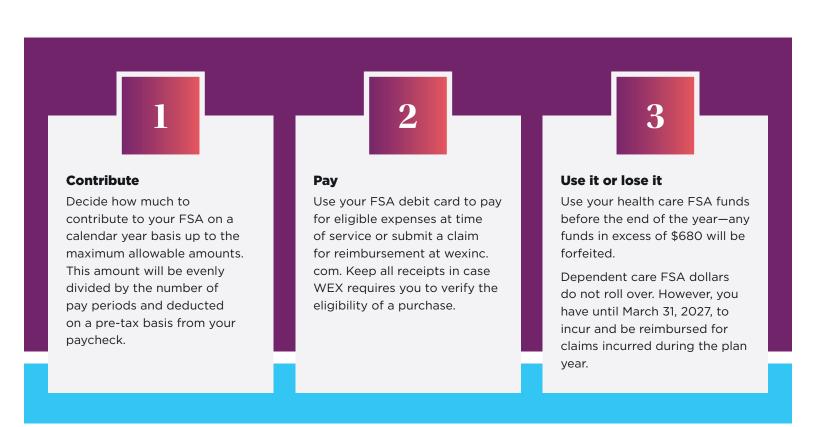
Limited purpose health care FSA (allowed if you fund an HSA)

If you fund an HSA, you can also fund a limited purpose health care FSA. The limited purpose health care FSA can only be used for dental and vision expenses. **The limited purpose health care FSA maximum contribution is \$3,400 for the 2026 calendar year.**

Dependent care FSA

The dependent care FSA allows you to pay for eligible dependent day care expenses with pre-tax dollars. Eligible dependents are children under 13 years of age, or spouse, a child over 13, or elderly parent residing in your home who is physically or mentally unable to care for him or herself.

You may contribute up to \$7,500 to the dependent care FSA for the 2026 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 \$3,750 for the 2026 calendar year.



Life and accidental death & dismemberment (AD&D) benefits

The Hartford | thehartford.com | 866-223-1674

HonorHealth's comprehensive benefits package includes financial protection for you and your family in the event of an accident or death. You have the option to purchase additional voluntary life insurance.

Basic life and AD&D insurance

HonorHealth automatically provides basic life and AD&D insurance 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.

It is important to keep your beneficiary information up to date. For instructions on how to update your beneficiary information, visit honorhealthbenefits.com/financial/insurance. Please make sure your address and beneficiaries are also up to date in Staff Member Self Service.

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

Voluntary life and AD&D insurance

HonorHealth provides you the option to purchase voluntary life and AD&D insurance for yourself, your spouse, and/or your dependent children through The Hartford.

You must purchase voluntary coverage for yourself in order to purchase coverage for your spouse and/or dependents. Voluntary life rates are age-banded. Benefits will reduce to 50% at age 70, 30% at age 75, and 20% at age 80.

Note: 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 The Hartford.

- 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 Insurance	
Age	Employee Biweekly Rate Per \$1,000 of coverage	Spouse Biweekly Rate Per \$1,000 of coverage	Child Biweekly Rate Per \$1,000 of coverage
< 30	\$0.019	\$0.033	
30-34	\$0.022	\$0.048	
35-39	\$0.025	\$0.053	
40-44	\$0.035	\$0.060	
45-49	\$0.049	\$0.085	\$0.075
50-54	\$0.068	\$0.125	\$0.075
55-59	\$0.112	\$0.225	
60-64	\$0.166	\$0.340	
65-69	\$0.290	\$0.645	
70+	\$0.512	\$0.655	

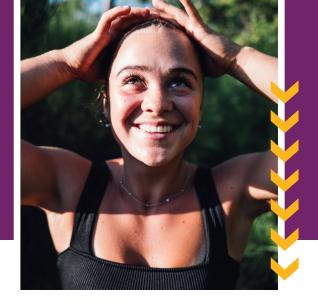
Note: Premiums withheld from 24 pay periods. Rate increase will become effective the month in which you move to a new age bracket.

^{**}The maximum age for dependent children is 26, with coverage ending at the end of the month in which they turn 26. Disabled dependents may continue to be covered over the age of 26, but a form must be completed and sent to The Hartford within 30 days of coverage terminating.

Disability benefits

Reliance Matrix | matrixabsence.com | 877-202-0055

Disability insurance keeps you and your family financially protected if you become unable to work due to an illness or injury.



You are eligible for these benefits the first of the month following one year of service in a benefits-eligible position.

You may use disability benefits to pay for your necessary expenses while you are unable to work, such as mortgage payments, medical expenses, childcare, and more.

Short-term disability insurance

HonorHealth automatically provides short-term disability (STD) insurance through Reliance Matrix to all benefits-eligible employees **AT NO COST**. 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 STD 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 Reliance Matrix 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 STD period.

- Benefit: 40% of base monthly pay up to \$20,000
- 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 long-term disability insurance

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

- **Benefit:** An additional 20% of base monthly pay up to \$20,000 (for a combined LTD benefit equal to 60% 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

Voya | voya.com | 877-236-7564

HonorHealth offers the following voluntary benefits to support your financial wellbeing.

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.

Level of coverage	Voya Accident Insurance Biweekly Rates
Employee only	\$6.65
Employee + spouse	\$9.91
Employee + child(ren)	\$12.55
Employee + family	\$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.

Voya Critical Illness Insurance Biweekly Rates

Age	Employee			Spouse			Dependent Children		
	\$10,000	\$20,000	\$30,000	\$10,000			\$5,000	\$10,000	\$20,000
<25	\$2.45	\$4.25	\$6.05	\$2.45	\$4.25	\$6.05			
25-29	\$2.70	\$4.75	\$6.80	\$2.70	\$4.75	\$6.80			
30-34	\$3.00	\$5.35	\$7.70	\$3.00	\$5.35	\$7.70			
35-39	\$3.60	\$6.55	\$9.50	\$3.60	\$6.55	\$9.50			
40-44	\$5.25	\$9.85	\$14.45	\$5.25	\$9.85	\$14.45			
45-49	\$7.90	\$15.15	\$22.40	\$7.90	\$15.15	\$22.40	\$0.70	\$1.40	\$2.80
50-54	\$11.90	\$23.15	\$34.40	\$11.90	\$23.15	\$34.40			
55-59	\$17.95	\$35.25	\$52.55	\$17.95	\$35.25	\$52.55			
60-64	\$24.80	\$48.95	\$73.10	\$24.80	\$48.95	\$73.10			
65-69	\$32.05	\$63.45	\$94.85	\$32.05	\$63.45	\$94.85			
70+	\$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.

Level of coverage	Voya Hospital Indemnity Insurance Biweekly Rates		
Employee only	\$11.40		
Employee + spouse	\$23.46		
Employee + child(ren)	\$17.41		
Employee + family	\$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.

Financial protection benefits

Identity theft insurance

Identity theft insurance can provide peace of mind with proactive monitoring for the most damaging types of fraud.

Allstate Scam Protection

- The full suite of scam protection features for end-to-end digital defense including scam alerts and education, phone and text scam blocking, URL blocking, scam takedowns, and more
- \$50,000 of scam reimbursement for scams, digital crimes, data recovery, and more

Identity and financial fraud protection

- · Identity, financial, credit, and high-risk transaction monitoring with Identity Health Status
- Data removal, dark web and credit monitoring, alerts, and annual credit report

Cyber protection for up to 10 devices per member

- · Top-rated anti-malware and threat detection with minimal impact on device performance
- Military-grade VPN, network protection, and password manager

Identity restoration

- Up to \$5 million reimbursement for identity theft expenses and stolen funds
- Full-service identity restoration with a dedicated restoration specialist
- U.S.-based support and 24/7 customer care

Upgrage to the family plan

- · Protection for you and all family "under roof or under wallet", as well as any family member 65 or older
- Mobile and desktop device protection for up to 10 devices per person
- Award-winning family and digital safety tools from Bark
 - » Monitor 30+ apps and websites, screen-time management, track loved ones, get access to Talkspace Go, and more
- Up to \$100,000 in cyberbullying coverage

Level of coverage	Allstate Identity Theft Insurance Biweekly Rates*		
Employee only	\$4.97		
Employee + family	\$8.97		

Note: Premiums withheld from 24 pay periods. This benefit is active 24 hours after enrollment.

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 \$9.75 per pay period (biweekly).

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.

Pet health care coverage

MetLife offers customizable health care coverage for dogs, cats, birds, rabbits, ferrets, pocket pets, and reptiles. For more information and to enroll in pet insurance, visit **metlife.com/info/honorhealth**.

- · Access tele-vet visits
- No exclusions due to animal's age, hereditary/genetic conditions
- No claim forms

- No waiting period
- Customizable deductibles
- Customizable 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. The cost for this benefit is \$10 per pay period (biweekly).

For more information, contact Blakely Walters at 480-776-5897 or visit 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 Professional 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 (PolicyStat ID# 16288134) or contact the tuition assistance program team at **tuitionassistance@honorhealth.com**.



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 PolicyStat ID# 18735937, 18338331.

Length of service	Earned PTO	2026 Maximum Accrual
O-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.

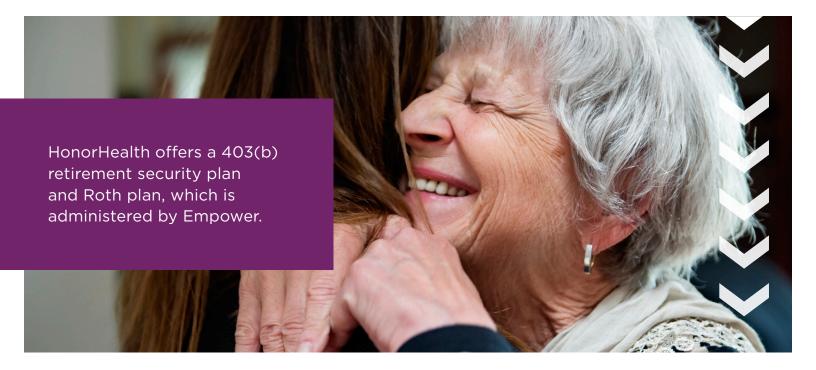
Employees will also be eligible to receive up to 40 hours of paid sick time (PST) per accrual cycle.

Length of service	Earned PST	2026 Maximum 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 PolicyStat ID# 18735937, 18338331.

Retirement benefits

Empower | empower.com/honorhealth | 877-778-2100



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 pretax and/or post-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% in the 403(b) plan. Please allow up to two pay periods for deductions to start.

If you do not want to contribute to your 403(b) you will need to log into your account at **empower.com/honorhealth**, click on Register Now and create an ID and password. Once logged in, go to Quick Actions-Change Contributions to change your contribution to 0%. You must complete this action within 30 days of hire date or you will be auto-enrolled.

- HonorHealth will contribute \$1 to your account for every \$1 you contribute (up to 4% of your eligible pay).¹
- 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 may also "roll in" money from another "qualified" retirement plan at any time.

How the 403(b) retirement security and Roth plans work

- You contribute to the 403(b) retirement security plan through convenient payroll deductions.
 - » 403(b): 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.
- » Roth: You contribute post-tax money.
- Your contributions and their earnings grow taxfree until you withdraw your money from the plan (excluding Roth as this is already taxed). 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.
- If you are an HonorHealth employee hired January 1, 2022, or later, the employer contribution will be vested after completion of 3 years of service with HonorHealth.
- It's easy to save. 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.

(1) The match on the 403(b) plan and Roth plan is 4% combined.

Your path to better mental health

Lyra | honorhealth.lyrahealth.com | 833-511-0967 | Download the Lyra Health app

Lyra provides care for your emotional and mental health where and when you need it. Meet with mental health coaches or therapists via live video, live messaging, phone, or in-person care.

Lyra is a free, strictly confidential service. All HonorHealth employees, their spouse/domestic partner, and dependents have access to six total therapy or coaching sessions, per person, per year, AT NO COST.

Care options

Lyra helps you find the right care, no matter where you are on your mental health journey:

- Lyra essentials: Build healthy habits with an on-demand self-care library featuring research-backed videos, articles, and meditations within the app.
- Lyra self-guided care: Lyra will craft a personalized six-week digital care plan with activities that directly address your goals at your own pace.
- Lyra coaching: Meet regularly with a certified mental health coach to help you with challenges such as anxiety, stress, relationship issues, or parenting challenges.
- Lyra therapy: Lyra's high-quality therapists use evidence-based techniques proven to help develop new skills and strategies for dealing with problematic thoughts, emotions, and behaviors. Providers specialize in working with adults, couples, families, adolescents, and children so you are better equipped for whatever challenges you may face.
- Lyra renew: Lyra can help you change your relationship with alcohol—whether you want to drink less or stop drinking.

Start your path to better mental health by visiting honorhealth.lyrahealth.com, downloading the Lyra Health app to your phone, or calling 833-511-0967.

Meet the Lyra team

Lyra's Care Team is available 24/7 to assist and support you with finding a provider. If you need support for autism spectrum disorder or finding rehabilitation facilities, the care team can help you access options matched to your unique needs. For members experiencing self-harm or suicidal thoughts, Lyra provides immediate support and safety planning. Available for kids 2-13, teens, and adults.

Work-life services

Lyra offers work-life services to help you and your family during challenging times:

- Financial: Talk with a financial advisor or CPA.
- Legal: Access an attorney or mediator, 24/7 emergency services, and an online legal library.
- · Identity theft: Consult with a fraud resolution specialist to restore your identity and good credit.
- Child, elder, and pet care: Access childcare, eldercare, and/or pet care resources and referrals.

Cancellation/no show fee: Prior to booking a session with a Lyra provider, the member will be asked to agree to the provider's cancellation policy (in most instances, this is 24 hours). Sessions canceled within 24 hours of the appointment start time or sessions that are not joined within 15 minutes of the start time will be subject to a missed session fee.

Missed session fee: Members can call/email the care team for support/questions about a missed session fee. Lyra's billing team will send a form link to dispute the missed session. Alternatively, a provider may dispute a session on behalf of a member and advocate for their fee/session to be reversed.

For questions, contact the Employee Benefits Department at employee.benefits@honorhealth.com or 480-583-4588.

Contacts

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

employee.benefits@honorhealth.com

honorhealthbenefits.com — Access plan documents such as Summary Plan Descriptions, compliance notices, and more.

Provider/plan	Phone Number	Website/Email
Medical UMR	866-868-6744	umr.com
Medical networks HonorHealth/ICP Physicians UHC Choice Plus Network	N/A 866-868-6744	icphealth.com/ honorhealthemployeeplanphysiciansearch/ umr.com
Prescription drugs OptumRx	844-368-9854	optumrx.com
Behavioral health support (for medical plan members) UHC Behavioral Health	866-868-6744	icphealth.com/ honorhealthemployeeplanphysiciansearch/
Wellbeing services Lyra	833-511-0967	honorhealth.lyrahealth.com Download the Lyra Health app
Dental Delta Dental of Arizona	602-938-3131	deltadentalaz.com
Vision VSP	800-877-7195	vsp.com
UHC (Spectera) Vision Plan	800-638-3120	myuhcvision.com
Health savings account HealthEquity	866-346-5800	healthequity.com
Flexible spending accounts WEX	866-451-3399	wexinc.com
Life insurance The Hartford	866-223-1674	thehartford.com
Disability insurance Reliance Matrix	877-202-0055	matrixabsence.com
Financial protection benefits Voya Accident, critical illness, and hospital indemnity insurance Whole Life Insurance	877-236-7564 888-238-4840	voya.com Claims: voya.com/claims
Identity theft insurance Allstate Identity Protection	800-789-2720	myaip.com/honorhealth
Legal services MetLife	800-423-0300	legalplans.com (password: metlaw)
Auto and home insurance Liberty Mutual	800-699-2723	libertymutual.com/honorhealth
Pet Insurance MetLife	800-GET-MET8	metlife.com/info/honorhealth
Financial planning Blakely Walters	480-776-5897	blakelywalters.com
403(b) retirement savings plan Empower	877-778-2100	empower.com/honorhealth

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.