



2022-2023  
TEAM MEMBER  
BENEFITS GUIDE



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# Welcome to Your Benefits

Sun Health offers a comprehensive benefits package that protects individual health, wellbeing and financial security.

We are committed to all team members and believe that our success is due, in large part, to the efforts of our most valued resource, our team members.

This communication summarizes Sun Health's benefit plans that are effective July 1, 2022 through June 30, 2023.



# Kronos: Now Ultimate Kronos Group (UKG)

The login process hasn't changed, team members are able to log into UKG to submit their new hire, open enrollment, or life event benefits electronically. Team members will also utilize UKG to access and update their personal information, submit direct deposit changes, time off requests, and view/edit timesheets.



WORKFORCE READY

A screenshot of the UKG login interface. It features a light blue background with a white login box. Inside the box, there are two input fields: the first is labeled "Username" with a person icon, and the second is labeled "Password" with a lock icon. Below these fields is a blue "LOGIN" button. At the bottom of the box, there is a link that says "Forgot your password?".

- Register using your Social Security Number and Date of Birth.
- Confirm your address and dependent information.
- Enroll in benefit plans or elect to decline coverage.
- Make sure to add or update your beneficiaries.



## Employee Portal

The Employee Portal is your 24/7 resource page where you are able to access important information from any device at any time such as:

- Benefit Guide & Enrollment Instructions
- Wellness Program Tools, Lunch & Learn classes, & resources
- Policies, Procedures, & Team Member Handbook
- Tuition Reimbursement, Scholarship Opportunities, & more!



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### *The Sun Health Story*

Sun Health is an organization driven by passion—a passion to improve the wellbeing and quality of life of the communities we serve. We demonstrate this through our investment in Life Plan Communities, health and wellness programs, and the local community hospitals.

It's this comprehensive commitment to your wellbeing that distinguishes Sun Health, and it all begins with the heart-felt generosity of people like you who support Sun Health Foundation.



# Open Enrollment

Open Enrollment this year takes place **May 11, 2022 - May 25, 2022**. During open enrollment you have the opportunity to make new benefit plan elections for the upcoming 2022 -2023 plan year for the following benefits:

- |  |                         |
|--|-------------------------|
| ■ Medical  | ■ Supplemental Life     |
| ■ Dental   | ■ Short-Term Disability |
| ■ Vision   | ■ Long-Term Disability  |
| ■ Basic Life & AD&D  | ■ Critical Illness      |
| ■ Flexible Spending Account (Health Care & Dependent Care) - you must make elections each year | ■ Accident Insurance    |

## Who is Eligible

All full-time team members working a minimum of 30 hours per week are eligible for coverage. You can also add coverage for your legal spouse or your dependent children up to age 26. Newly hired team members become eligible for coverage the first of the month following 30 days of full-time employment.

## Qualified Life Event Change

During the year, you are only allowed to make changes to your coverage if you experience a qualified life event change. Examples of these changes in status are:

- |                    |                                      |
|--------------------|--------------------------------------|
| ■ Marriage         | ■ Adoption                           |
| ■ Legal Separation | ■ Legal custody of a child           |
| ■ Divorce          | ■ Death                              |
| ■ Birth of a child | ■ Dependent loss or gain of coverage |

You must submit a qualified life event through UKG and required documentation **within 31 days**.



# Medical Plan



DESCRIPTION OF COVERAGE	AETNA HDHP PLAN		AETNA BASE PLAN		AETNA BUY-UP PLAN	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible (Individual ♦ Family) Family deductible can be met by any combination of the family members.	\$2,800 ♦ \$5,600	\$4,000 ♦ \$8,000	\$3,000 ♦ \$7,500	\$5,000 ♦ \$15,000	\$2,500 ♦ \$5,000	\$3,000 ♦ \$6,000
Coinsurance (on allowed amount)	80% ♦ 20%	50% ♦ 50%	70% ♦ 30%	50% ♦ 50%	80% ♦ 20%	50% ♦ 50%
Out-of-Pocket Maximum (Individual ♦ Family)	\$3,500 ♦ \$6,000	\$6,000 ♦ \$12,000	\$6,000 individual; two member max	\$25,000 individual; two member max	\$4,000 individual; three member max	\$10,000 individual; three member max

Note: Out-of-Network costs may exceed OOP maximum due to billed charges over allowable amount.

	IN-NETWORK	OUT-OF-NETWORK	BANNER IN-NETWORK	OUT-OF-NETWORK	BANNER IN-NETWORK	OUT-OF-NETWORK
Preventive Care	100% Covered	50% after deductible	100% Covered	50% after deductible	100% Covered	50% after deductible
Office Visit Non-Preventive	20% after deductible	50% after deductible	\$30 ♦ \$50	50% after deductible	\$25 ♦ \$40	50% after deductible
98point6 - Virtual Visit	20% after deductible	50% after deductible	\$0	50% after deductible	\$0	50% after deductible
Lab & X-Ray	20% after deductible	50% after deductible	\$20 Copay	50% after deductible	\$20 Copay	50% after deductible
Major Diagnostic (MRI ♦ PET ♦ CT)	20% after deductible	50% after deductible	30% after deductible	50% after deductible	20% after deductible	50% after deductible
Inpatient Hospitalization	20% after deductible	50% after deductible	30% after deductible	50% after deductible	20% after deductible	50% after deductible
Emergency Room Copay waived if admitted	20% after deductible	20% after deductible	\$200 Copay	\$200 Copay	\$150 Copay	\$150 Copay
Urgent Care	20% after deductible	50% after deductible	\$75 Copay	50% after deductible	\$75 Copay	50% after deductible

Please note: The deductibles and out of pocket maximums on each plan are administered on a calendar year basis. Use In-Network providers by going to [www.aetna.com](http://www.aetna.com) and select the Aetna/Banner JV Network.

RATES PER PAYCHECK	AETNA HDHP PLAN	AETNA BASE PLAN	AETNA BUY-UP PLAN
Team Member Only	\$53.39	\$57.45	\$163.43
Team Member + Spouse	\$207.65	\$225.85	\$339.61
Team Member + Child(ren)	\$177.98	\$205.16	\$316.91
Team Member + Family	\$281.81	\$307.92	\$207.65

A wellness incentive is available for those participants that meet the points criteria of the wellness program.

- The wellness credit is \$30 for a team member and \$30 for a spouse per month and is credited to your premiums or into your HSA account for those electing the HDHP plan.
- Team members must meet the wellness criteria and submit documentation to HR by the 20th of each month to begin receiving the premium discount for the Base/Buy-Up medical plans or the employer funds into the Health Savings Account if enrolled in the High Deductible Health plan.
- Team members as well as their spouses must participate in the Wellness Program and earn 30 points each in order to receive medical plan contribution discount (\$30 discount for team member participation & additional \$30 discount for spouse participation can be earned) or employer funded Health Savings Account (HSA) contribution (\$360 deposit for team members only or \$720 for spouses participation annually). Team members and spouses are eligible to participate. Only team members are eligible to receive other program prizes.





# Prescription Plan

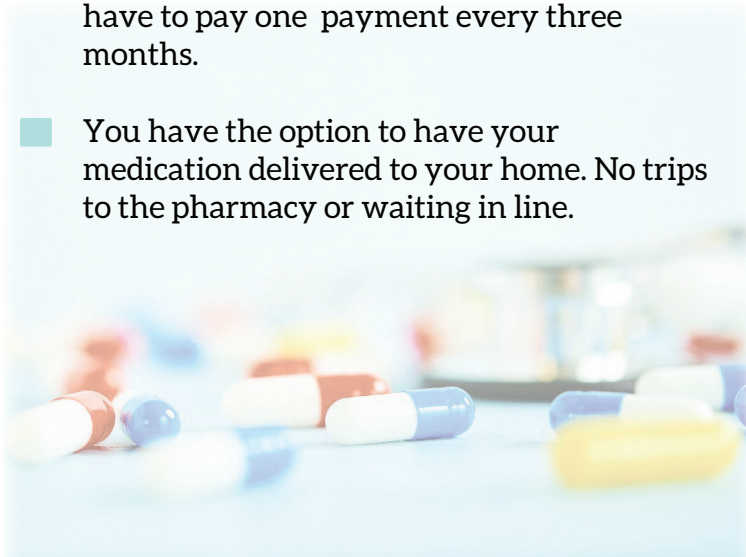
	HDHP PLAN	BASE PLAN	BUY-UP PLAN
Retail	\$5 ♦ \$30 ♦ \$60 after deductible	\$5 ♦ \$30 ♦ \$60	\$5 ♦ \$30 ♦ \$60
Specialty	20% coinsurance with a \$400 maximum per prescription after deductible	20% coinsurance with a \$400 maximum per prescription	20% coinsurance with a \$400 maximum per prescription
Mail Order	\$5 ♦ \$60 ♦ \$120 after deductible	\$5 ♦ \$60 ♦ \$120	\$5 ♦ \$60 ♦ \$120

## How do I start saving on my prescription costs?

Enroll in Smart90 today. You can conveniently fill your prescriptions either through home delivery from the Express Scripts Pharmacy or at a retail pharmacy in the Smart90 network.

## What is Smart90?

- You have the option to receive a 90 day supply of your long term medication.
- By getting a 90 day supply you will only have to pay one payment every three months.
- You have the option to have your medication delivered to your home. No trips to the pharmacy or waiting in line.



To get started, visit:  
[express-scripts.com](https://www.express-scripts.com) or  
download their app



EXPRESS SCRIPTS®

# Dental Plan



Sun Health offers you two dental plan options through Aetna. You can choose from the Base plan or the Buy-Up plan. No ID is required for this benefit, your social security number will be used to identify you when you go for a visit.

DESCRIPTION OF COVERAGE	BASE	BUY-UP
Annual Maximum	\$1,000	\$1,500
Deductible	\$50/\$150	\$50/\$150
Waived for Preventive	Yes	Yes
Preventive	100%	100%
Basic	80%	80%
Major	50%	60%
Orthodontia	Not Covered	No Deductible/ 50%, \$1,500 Lifetime Max

Implants will be covered under major coverage for the Buy-Up plan option.

Please note: The deductibles and out of pocket maximums on each plan are administered on a calendar year basis.

RATES - PER PAYCHECK	BASE	BUY-UP
Team Member Only	\$2.83	\$11.30
Team Member + Spouse	\$20.83	\$28.25
Team Member + Child(ren)	\$19.18	\$28.25
Team Member + Family	\$43.57	\$50.85





# Vision Plan

Sun Health offers a comprehensive vision plan through VSP. This plan provides you and your family coverage for routine eye exams, materials and even contact lenses. See the chart for more details on this plan.

DESCRIPTION OF COVERAGE	VSP IN-NETWORK	OUT-OF-NETWORK
<b>Exam (every 12 months)</b>		
Eyeglass Exam Copay	\$10 Copay	Up to \$45
<b>Frames (every 24 months)</b>		
Standard	\$0 Copay; \$130 allowance; 20% off balance over \$130	Up to \$70
<b>Standard Lenses (12 months)</b>		
Single Vision Lenses	\$10 Copay	Up to \$30
Bifocal Lenses	\$10 Copay	Up to \$50
Progressive Lenses Copay	Standard: \$0; Premium: \$95-\$105; Custom: \$150-\$175	Up to \$50
<b>Contact Lenses (12 months)</b>		
Medically Necessary	100%	Up to \$210
Conventional & Disposable Lenses	\$130 Allowance	Up to \$105
Standard Fitting	Up to \$60	Not Covered

\*The Essential Medical Eye Care Benefit includes additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more for a \$20 copay per exam.

Visit [vsp.com/offers](https://vsp.com/offers) for VSP Exclusive Member Extras

RATES - PER PAYCHECK	
Team Member Only	\$4.38
Team Member + Spouse	\$7.01
Team Member + Child(ren)	\$7.15
Team Member + Family	\$11.53



# WHAT IS AN HSA?



A **Health Savings Account (HSA)** is a tax-advantaged savings account that can be used for your health care expenses. Your contribution comes out of each paycheck on a pre-tax basis, and is deposited into your HSA account for future use.

If you have a high deductible health insurance plan, an HSA can help provide some security for your health care costs and limit out-of-pocket expenses.

## Advantages of an HSA

Health Savings Accounts (HSA's) offer triple tax benefits:

- Your contributions to the savings account are made on a pre-tax basis which lowers your taxable income
- You earn interest tax-free
- You can withdraw funds tax free for any qualified healthcare expenses

### HSA Contribution Limits

INDIVIDUAL	FAMILY
\$3,650	\$7,300

CATCH UP 55+ \$1,000

Sun Health wants to help you get started on saving towards your future healthcare expenses. We will contribute the following amounts annually to your HSA account if you participate in the Wellbeing Program:

- \$360 for an Individual
- \$720 for a Family

The annual contribution limits for 2022 are \$3,650 for an Individual and \$7,300 for those with Family coverage. If you are over the age of 55, you can deposit an additional \$1,000 which is called a "catch up" benefit.



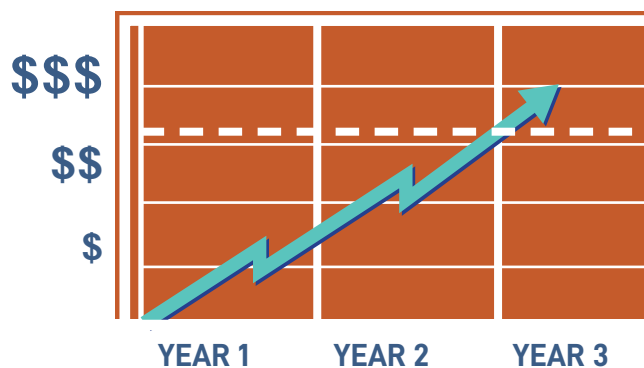


## Build For The Future

HSA's enable you to build an incredible financial resource for health care stability.

The huge tax advantages and rollover policies of an HSA make it ideal for anyone looking to take control of their health care finances.

Consumers who are between the ages of 55 and 65 also have the opportunity to make additional "catch-up" contributions to the fund. Increased access to this fund begins at age 65.

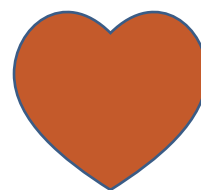


## Is an HSA Right For You?

HSA's can be very cost effective, but it is important to understand how they work.

An HSA is a good option for someone who is looking to save long term. If you have a high deductible health insurance plan and are able to come up with a reasonable estimate of your health care expenses each year, you could potentially save a great deal of money with an HSA.

If you have a chronic condition but know your annual expenses and are able to budget enough money to cover your health care costs, an HSA could also be beneficial.



## Eligibility

You can enroll in an HSA if:

- You are covered under a qualified HDHP and not covered by any other health plan, Medicare, AHCCCS, or TRICARE.
- Contributions to an HSA must stop if you enroll in Medicare. However, you can keep the money in your HSA and use it to pay for medical expenses tax-free.
- You are not claimed as a dependent on someone else's tax return.

# Flexible Spending Accounts

## SELECT YOUR FSA ACCOUNTS



### Health Care Flexible Spending Account

This account enables you to pay medical, dental, vision, and prescription drug expenses that may or may not be covered under your insurance program (or your spouse's) with pre-tax dollars. You can also pay for dependent health care, even if you choose single (vs. family) coverage. The total amount of your annual election is available to you up front, reducing the chance of having a large out-of-pocket expense early in the plan year. If any funds remain in your Health Care FSA at the end of the current plan year, you carry over up to \$570 into the subsequent year.

#### Examples of Eligible Expenses:

- |                                  |  |
|----------------------------------|--|
| ■ Coinsurance and copayments     | ■ Laboratory fees                                      |
| ■ Contraceptives                 | ■ Licensed practical nurses                            |
| ■ Crutches                       | ■ Orthodontia  |
| ■ Dental expenses                | ■ Orthopedic shoes                                     |
| ■ Dentures                       | ■ Oxygen   |
| ■ Diagnostic expenses            | ■ Prescription drugs                                   |
| ■ Eyeglasses, including exam fee | ■ Psychiatric care                                     |
| ■ Handicapped care and support   | ■ Psychologist expenses                                |
| ■ Nutrition counseling           | ■ Routine physical                                     |
| ■ Hearing devices and batteries  | ■ Seeing-eye dog expenses                              |
| ■ Hospital bills                 | ■ Prescribed vitamin supplements (medically necessary) |
| ■ Deductible amounts             |  |



### Dependent Care Expense Account

This account gives you the opportunity to redirect a portion of your annual pay on a pre-tax basis to pay for dependent care expenses. An eligible dependent is any member of your household for whom you can claim expenses on your Federal Income Tax Form 2441, "Credit for Child and Dependent Care Expenses." Children must be under age 13. Care centers which qualify include dependent care centers, preschool educational institutions, and qualified individuals (as long as the caregiver is not a family member and reports income for tax purposes). Before deciding to use the Dependent Care Expense Account, it would be wise to compare its tax benefit to that of claiming a child care tax credit when filing your tax return. You may want to check with your tax advisor to determine which method is best for you and your family. Any unused portion of your account balance at the end of the plan year, will be forfeited.



#### 2022 Maximum Contributions

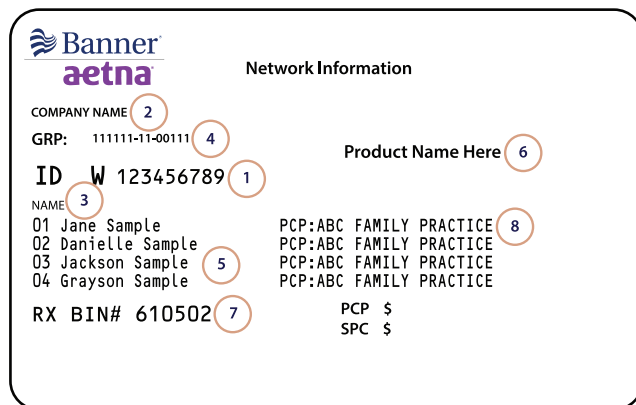
Health Care Flexible Spending Account	\$2,850 max
Dependent Care Expense Account	\$5,000 max



# Aetna ID Cards & Provider Search

## Access Your ID Cards

Your member ID card is your passport to accessing care. Keep it with you and know how to read it. Here is a sample ID card:



- 1 Your member ID
- 2 Company name
- 3 Your two-digit identifier and your name
- 4 Your group number
- 5 Dependents' two-digit identifier(s) and names
- 6 Name of your health plan (use this when searching the provider directory)
- 7 Your pharmacy information, if it applies
- 8 Your PCP information, if you have selected one

## Provider Search

- Go to [www.banneraetna.com](http://www.banneraetna.com)
- Click "Find a Doctor"



- Either search by logging in as a member or continue as a guest by typing in the zip code, city, or state and the range of miles.

The image shows two screenshots of the provider search interface. The left screenshot is titled "Already a member?" and shows a "Login to Secure Site" button and a "Register Now" button. The right screenshot is titled "Continue as a guest" and shows a form to enter location information (zip, city, county or state) and a "Look within" slider (0 to 100 miles) with a "Search" button.



## On-Demand

Whether you're feeling unwell or have a health-related question, simply sign on and start a visit whenever you're ready. No appointment needed.



## Text-Based

Connect with a 98point6 doctor right from your phone. Get treatment for a cough at work or get care for your child's stomach pain while at a weekend barbecue.



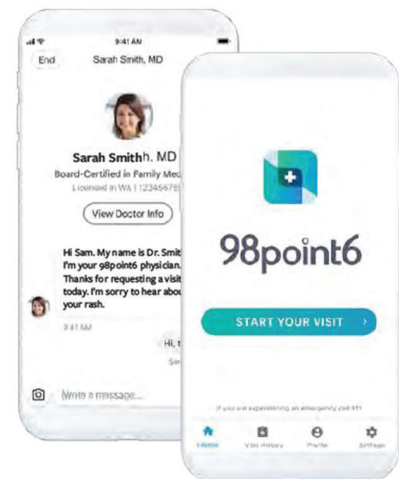
## Quality Care

U.S. based, board certified 98point6 doctors diagnose, treat, prescribe medication, order labs as appropriate and follow up. Audio and video support are also available as needed.



## 24/7

Virus in the middle of the night or itchy rash over the weekend? Get immediate, non-emergency care around the clock — even after hours and on holidays.



To get started, visit [www.98point6.com/banner-aetna-members](http://www.98point6.com/banner-aetna-members)

Conditions commonly treated through a virtual visit:

- |                           |                      |                  |
|---------------------------|----------------------|------------------|
| ■ Bladder infection       | ■ Diarrhea           | ■ Pink eye       |
| ■ Urinary tract infection | ■ Fever              | ■ Rash           |
| ■ Bronchitis              | ■ Migraine/headaches | ■ Sinus problems |
| ■ Cold/flu                |                      | ■ Sore throat    |

Most visits take about 10-15 minutes, and your doctor can write a prescription, if needed, that you can pick up at your local pharmacy.



# Life Insurance / AD&D



## BASIC LIFE AD&D - COMPANY PAID

Sun Health provides Basic Life and AD&D coverage through New York Life at no cost to you! You will receive 1x your annual salary, minimum \$30,000, maximum \$200,000. Any amount over \$50,000 is taxable income. Please reference the chart below for more details.



## SUPPLEMENTAL LIFE AND AD&D AND DEPENDENT LIFE

## REVIEW YOUR LIFE INSURANCE POLICY

It is important that you have a beneficiary on record with Human Resources. If your beneficiary changes due to a life event (e.g., marriage or divorce), please be sure to update your beneficiary information online through UKG.

LIFE BENEFIT	TEAM MEMBER	SPOUSE	DEPENDENT
Life Amount	<ul style="list-style-type: none"> <li>Choice of \$10,000 increments</li> <li>Not to exceed 5 times your annual salary (rounded to the next \$10,000)</li> <li>Team members age 70 maximum benefit is \$50,000</li> </ul>	<ul style="list-style-type: none"> <li>Choice of \$5,000 increments</li> <li>Not to exceed 2.5 times team member's annual salary (rounded to the next \$5,000)</li> <li>Not to exceed 50% of the team member's benefit amount</li> </ul>	<ul style="list-style-type: none"> <li>Birth to 6 months: \$500</li> <li>6 months to age 26: \$10,000</li> </ul>
Minimum Amount	\$10,000	\$5,000	\$500 or \$10,000
Maximum Amount	\$500,000	\$150,000	\$500 or \$10,000
Benefit Reduces	35% at age 65, an additional 25% at age 70, an additional 15% of original amount at age 75.	35% upon team member's attainment of age 65. Benefits terminate at team member's age 70 or retirement, whichever occurs first.	N/A
Guarantee Issue	\$150,000	\$30,000	N/A

### SUPPLEMENTAL LIFE & AD&D

AGE	Per Pay Period Rate per \$1,000	
	EE	SP
<20	\$0.065	\$0.072
20-24	\$0.065	\$0.072
25-29	\$0.065	\$0.072
30-34	\$0.073	\$0.081
35-39	\$0.081	\$0.090
40-44	\$0.130	\$0.144
45-49	\$0.211	\$0.234
50-54	\$0.316	\$0.351
55-59	\$0.470	\$0.522
60-64	\$0.770	\$0.855
65-69	\$1.053	\$1.270
70-74	\$1.669	NA
75+	\$3.129	NA
EE/SP/CH Vol AD&D \$0.020		
Child Life \$0.124		

You and your spouse's premiums are calculated separately and both are based on the team member's age, therefore using the same rate factors from the table.

To calculate your full premium based on your election, find your monthly rate based on your age as of your effective date. Multiply this rate by your desired coverage amount, in units. For example, if you were 25 and wanted to elect \$50,000 in coverage the calculation would be:

$$\$0.065 \times 50 = \$3.25$$

# Disability Insurance



## Short-Term Disability Insurance

Short-Term Disability insurance is offered through New York Life Group Benefit Solutions. The plan benefit is **60% of your base weekly covered earnings** up to a maximum of **\$1,000 per week**.

Benefits begin on the **8th consecutive day of disability** due to accidental injury or sickness. Benefits can continue for up to **13 weeks**.

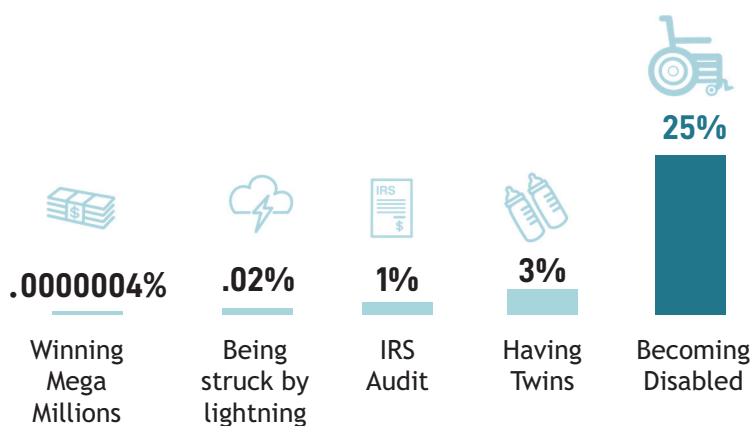


## Long-Term Disability Insurance

Long-Term Disability insurance is offered through New York Life Group Benefit Solutions. The plan benefit is **60% of your base monthly covered earnings** up to a maximum of **\$5,000 per month**. Basic earnings is the average of your gross monthly income for the year immediately prior to the onset of disability and excludes commissions, bonuses, overtime pay, shift differential pay, or any other earnings. The benefits begin after a **90 day waiting period**.

### What's More Likely?

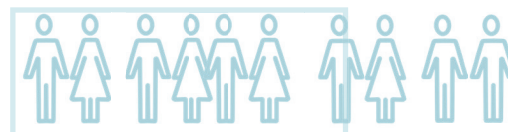
Many workers think these events are more likely than becoming disabled during their careers. But here are the actual odds:



**Could you pay the bills if you weren't working?**

**Less than 1/4 of U.S. consumers have enough emergency savings to cover six months or more of their expenses.**

**Nearly 70% of workers that apply to Social Security Disability Insurance are denied.**





# Disability Insurance



## SHORT-TERM DISABILITY

Monthly Rate:  
Per \$10 of Weekly Benefit  
\$0.430

### How to Calculate Your Short-Term Disability Monthly Cost:

**Step 1:** Divide your annual salary by 52 to calculate your weekly covered earnings.

**Step 2:** Multiply this amount by 60%. For example, 60% would be .60. Now, you have your gross weekly benefit.

**Step 3:** Use the Monthly rate in the corresponding chart. Multiply this rate by your gross weekly benefit, or the maximum gross weekly benefit (\$1,000), whichever is less.

**Step 4:** Divide the total by 10. The result is your Monthly cost.

**Step 5:** Multiply the total by 12 and divide by 24.

$$\begin{aligned} & \$ \frac{\text{weekly covered earnings}}{\text{weekly covered earnings}} \times \frac{.60}{\text{benefits package}} \times \frac{0.430}{\text{premium rate}} / 10 \\ & = \$ \frac{\text{monthly premium}}{\text{monthly premium}} \times 12/24 = \$ \frac{\text{per paycheck}}{\text{per paycheck}} \end{aligned}$$

### How to Calculate Your Long-Term Disability Monthly Cost:

**Step 1:** Divide your annual salary by 12 to calculate your monthly earnings.

**Step 2:** Multiply this amount by 60%. For example, 60% would be .60. Now, you have your gross monthly benefit.

**Step 3:** Find your monthly rate in the corresponding chart. Multiply this rate by your gross monthly benefit or the maximum gross monthly benefit (\$5,000), whichever is less.

**Step 4:** Divide the total by 100. The result is your Monthly cost.

**Step 5:** Multiply the total by 12 and divide by 24.

$$\begin{aligned} & \$ \frac{\text{monthly covered earnings}}{\text{monthly covered earnings}} \times \frac{.60}{\text{benefits package}} \times \frac{\text{premium rate}}{\text{premium rate}} / 100 \\ & = \$ \frac{\text{monthly premium}}{\text{monthly premium}} \times 12/24 = \$ \frac{\text{per paycheck}}{\text{per paycheck}} \end{aligned}$$

## LONG-TERM DISABILITY

AGE	Monthly Rate per \$100 of Monthly Benefit
<29	\$0.316
30-34	\$0.410
35-39	\$0.573
40-44	\$0.714
45-49	\$1.357
50-54	\$2.024
55-59	\$2.703
60-64	\$5.581
65-69	\$4.399
70-74	\$1.697
75+	\$1.837

# Critical Illness Insurance

While it is impossible to prepare for the physical and emotional consequences of being diagnosed with a critical illness, you can prepare for the consequences such an illness may have on your personal finances.

This Critical Illness insurance policy from Aetna can help cover unexpected costs of a covered critical illnesses – such as a heart attack or stroke. More importantly, it can help you focus on recuperation instead of the distraction of out-of-pocket costs.

While major medical insurance may pay for a good portion of the costs associated with critical illness, there are a lot of expenses that are not covered – from deductibles and copays to living expenses.

With the Critical Illness plan, you receive cash benefits directly (unless otherwise assigned) – giving you the flexibility to help pay bills related to treatment or to help with everyday living expenses.



## Examples of Critical Illnesses Include:

- Cancer (including skin and non-invasive)
- Heart attack (myocardial infarction)
- Stroke
- Sudden cardiac arrest
- Coronary artery bypass surgery
- Kidney failure (end-stage renal failure)
- Bone marrow transplant (stem cell transplant)

The benefits will be paid when you are diagnosed with a covered Critical Illness. Unless otherwise indicated.

Employee face amount: \$10,000, \$15,000, \$20,000

Spouse face amount: 50% of EE face amount

Spouse benefit amount: 50% of EE benefit amount

Child(ren) face amount: 50% of EE face amount

Child(ren) benefit amount: 50% of EE benefit amount

## How Critical Illness Coverage Works:



Register on the My Aetna Supplemental app or the member portal at [www.myaetnasupplemental.com](http://www.myaetnasupplemental.com) to view plan documents, submit and track claims, and sign up for direct deposit.



# Critical Illness Insurance



## CRITICAL ILLNESS NON-TOBACCO RATES

	EE	EE+SP	EE+CH	FAM
<b>FACE AMOUNT \$10,000</b>				
<25	\$2.34	\$4.45	\$2.34	\$4.45
25-29	\$2.81	\$5.15	\$2.81	\$5.15
30-34	\$3.67	\$6.43	\$3.67	\$6.43
35-39	\$4.85	\$8.20	\$4.85	\$8.20
40-44	\$6.69	\$10.96	\$6.69	\$10.96
45-49	\$8.78	\$14.10	\$8.78	\$14.10
50-54	\$12.56	\$19.79	\$12.56	\$19.79
55-59	\$17.53	\$27.26	\$17.53	\$27.26
60-64	\$25.55	\$39.31	\$25.55	\$39.31
65-69	\$35.42	\$54.13	\$35.42	\$54.13
70+	\$51.33	\$78.01	\$51.33	\$78.01

## CRITICAL ILLNESS TOBACCO RATES

	EE	EE+SP	EE+CH	FAM
<b>FACE AMOUNT \$10,000</b>				
<25	\$2.47	\$4.64	\$2.47	\$4.64
25-29	\$3.08	\$5.55	\$3.08	\$5.55
30-34	\$4.26	\$7.32	\$4.26	\$7.32
35-39	\$6.10	\$10.09	\$6.10	\$10.09
40-44	\$9.31	\$14.90	\$9.31	\$14.90
45-49	\$13.44	\$21.11	\$13.44	\$21.11
50-54	\$20.96	\$32.42	\$20.96	\$32.42
55-59	\$31.74	\$48.63	\$31.74	\$48.63
60-64	\$49.26	\$74.96	\$49.26	\$74.96
65-69	\$71.68	\$108.64	\$71.68	\$108.64
70+	\$98.26	\$148.60	\$98.26	\$148.60

## FACE AMOUNT \$15,000

<25	\$3.01	\$5.58	\$3.01	\$5.58
25-29	\$3.70	\$6.61	\$3.70	\$6.61
30-34	\$4.96	\$8.50	\$4.96	\$8.50
35-39	\$6.72	\$11.13	\$6.72	\$11.13
40-44	\$9.46	\$15.25	\$9.46	\$15.25
45-49	\$12.58	\$19.92	\$12.58	\$19.92
50-54	\$18.21	\$28.39	\$18.21	\$28.39
55-59	\$25.61	\$39.51	\$25.61	\$39.51
60-64	\$37.57	\$57.47	\$37.57	\$57.47
65-69	\$52.28	\$79.56	\$52.28	\$79.56
70+	\$76.04	\$115.24	\$76.04	\$115.24

## FACE AMOUNT \$15,000

<25	\$3.20	\$5.86	\$3.20	\$5.86
25-29	\$4.11	\$7.21	\$4.11	\$7.21
30-34	\$5.85	\$9.83	\$5.85	\$9.83
35-39	\$8.61	\$13.97	\$8.61	\$13.97
40-44	\$13.39	\$21.16	\$13.39	\$21.16
45-49	\$19.58	\$30.44	\$19.58	\$30.44
50-54	\$30.80	\$47.34	\$30.80	\$47.34
55-59	\$46.93	\$71.57	\$46.93	\$71.57
60-64	\$73.13	\$110.95	\$73.13	\$110.95
65-69	\$106.66	\$161.34	\$106.66	\$161.34
70+	\$146.43	\$221.13	\$146.43	\$221.13

## FACE AMOUNT \$20,000

<25	\$3.68	\$6.71	\$3.68	\$6.71
25-29	\$4.59	\$8.07	\$4.59	\$8.07
30-34	\$6.26	\$10.57	\$6.26	\$10.57
35-39	\$8.60	\$14.07	\$8.60	\$14.07
40-44	\$12.24	\$19.53	\$12.24	\$19.53
45-49	\$16.39	\$25.74	\$16.39	\$25.74
50-54	\$23.86	\$36.99	\$23.86	\$36.99
55-59	\$33.69	\$51.76	\$33.69	\$51.76
60-64	\$49.58	\$75.63	\$49.58	\$75.63
65-69	\$69.13	\$105.00	\$69.13	\$105.00
70+	\$100.74	\$152.46	\$100.74	\$152.46

## FACE AMOUNT \$20,000

<25	\$3.93	\$7.09	\$3.93	\$7.09
25-29	\$5.13	\$8.87	\$5.13	\$8.87
30-34	\$7.44	\$12.34	\$7.44	\$12.34
35-39	\$11.11	\$17.85	\$11.11	\$17.85
40-44	\$17.48	\$27.42	\$17.48	\$27.42
45-49	\$25.71	\$39.77	\$25.71	\$39.77
50-54	\$40.65	\$62.26	\$40.65	\$62.26
55-59	\$62.11	\$94.51	\$62.11	\$94.51
60-64	\$96.99	\$146.93	\$96.99	\$146.93
65-69	\$141.64	\$214.03	\$141.64	\$214.03
70+	\$194.61	\$293.65	\$194.61	\$293.65

# Accident Insurance



It is important to budget for life's unexpected moments, because you never know when you might be on your way to the emergency room. This can leave you with a flurry of unexpected high cost bills.

That's where Accident Insurance can help. In the event of a covered accident, the plan pays you cash benefits quickly to help pay for the costs associated with out-of-pocket expenses and bills, expenses that major medical may not take care of.

## Aetna's Accident Insurance covers expenses for things like:

- Ground Ambulance Rides (\$300)
- Hospital Stay Non ICU Admission (\$2,000)
- Appliances - Major (\$200); Minor (\$100)
- X-Ray/ Lab (\$50)
- Emergency Room/Hospital (Initial Visit \$150)

## Benefits include:

- A Wellness Benefit for covered preventive screenings
- Coverage for certain serious conditions, such as coma and paralysis
- Transportation and Lodging Benefits
- An Accidental-Death Benefit
- An Emergency Room Treatment Benefit
- A Dismemberment Benefit
- A Rehabilitation Unit Benefit

## Features:

- Coverage is guaranteed-issue at FIRST enrollment (which means you may qualify for coverage without having to answer health questions)
- Benefits are paid directly to you (unless you choose otherwise)
- Coverage is available for you, your spouse, and your dependent children
- Coverage is portable (with certain stipulations). That means you can take it with you if you change jobs or retire.
- Fast claims payment. Most claims are processed in about four business days.

The benefits will be paid when you receive covered treatment for a covered Accident. Unless otherwise indicated, all benefits and limitations are per covered person.

RATES - PER MONTH	
Team Member Only	\$9.63
Team Member + Spouse	\$16.83
Team Member + Child(ren)	\$18.69
Team Member + Family	\$25.66

Register on the My Aetna Supplemental app or the member portal at [www.myaetnasupplemental.com](http://www.myaetnasupplemental.com) to view plan documents, submit and track claims, and sign up for direct deposit.

## How Accident Insurance Works:

1

You select Accident Insurance

2

You injure your leg in a covered accident and go to the hospital by ambulance

3

The ER doctor diagnoses a fracture and treats you

4

You hobble out of the hospital on crutches

5

Aetna Financial pays your benefit

# Life Assistance Program (LAP)



Just when you think you've got it figured out, along comes a challenge. Whether your needs are big or small, New York Life Group Benefit Solutions (NYL GBS) is there for you with our NYL GBS Life Assistance Program. It can help you and your family find solutions and restore your peace of mind.

Call us anytime, any day. We're just a phone call away whenever you need us. At no extra cost to you. An advocate can help you assess your needs and develop a solution. He or she can also direct you to community resources and online tools.

Visit a specialist! You have three face-to-face sessions with a behavioral counselor available to you – and your household members.

To get started:

Online: Life Assistance Program 24/7 support  
[www.nylgbs-lap.com](http://www.nylgbs-lap.com)



Call: 800.538.3543

## **NYL GBS Secure Travel®**

New York Life Group Benefit Solutions (NYL GBS) Secure Travel offers pre-trip planning, assistance while traveling, and emergency medical transportation benefits for covered persons traveling 100 miles or more from home (see your plan for details). Service is a phone call away, 24/7/365.

**From the United States and Canada, call (888) 226-4567**

**From other locations, call collect (202) 331-7635**

**Fax: (202) 331-1528**

**Email: [ops@us.generaliglobalassistance.com](mailto:ops@us.generaliglobalassistance.com)**

**Policyholder name: Sun Health Employee Services**

**Policy #: OK 0971227**

## **My Secure Advantage (MSA)**

At New York Life Group Benefit Solutions (NYL GBS) we know that financial issues are one of the leading causes of stress in America. That's why we offer a full-service financial wellness program. My Secure Advantage (MSA) can help support the financial health of your household, at no additional cost to you.

## **Call (888) 724-2262**

All you'll need to give is your name, city, state, zip code and the name of your employer or plan sponsor. You can also visit [nylgbs.mysecureadvantage.com](http://nylgbs.mysecureadvantage.com) for more information, or to register and access online tools and educational resources and create legal documents.



**24/7  
confidential  
access**

**Available to  
your spouse  
and eligible  
dependents**

**Help & advice on  
daycare, substance  
abuse, stress  
and more**



# Retirement Plans



Sun Health believes in investing in your future which is why we participate in auto-enrollment of team members and offer immediate vesting.



## Team Member Contributions

All new team members, age 21 and older, are enrolled in the 401(k) at a pre-tax contribution rate of 5%. The plan allows you to save for retirement through a traditional contribution, which reduces your current taxable income and grows tax-deferred; or a Roth contribution, which is not tax-deductible but allows you to take tax-free withdrawals at retirement.

**2022 401k Contribution Limits**  
**\$20,500**  
If you are 50 or older, you  
can contribute an extra  
\$6,500 for a total of \$27,000



## Employer Contributions

You are eligible to receive an employer match as soon as you begin contributing. The employer contribution is a fully-vested Safe Harbor match \$1.00 per \$1.00 up to the first 3% and \$.50 on the next \$1.00 to 2% of considered compensation. If you contribute 5%, Sun Health will contribute 4%.

## Paid Time Off (PTO)

Sun Health encourages and supports healthy behavior, like taking time off from work to stay well balanced. Our Paid Time Off and Paid Sick Time program helps keep our team members both physically and mentally healthy. Sun Health strongly encourages all team members to utilize their paid time off.

For Exempt Team Members PTO is deposited to a PTO bank of hours based on years of service to applicable members. PTO deposit occurs on the date of hire and at the beginning of each new calendar year. Remaining balances at the end of the year are not rolled over into the following year.

Exempt Staff	Years of Service	PTO
Director Level and Above	All	Unlimited
All Other Exempt Staff	< 2	20 days
	2 to 5	25 days
	5 or more	30 days

Non-Exempt Team Members hired as full-time (FT) or regular part-time (RPT) will accrue PTO hours starting from his or her date of hire. Team Members are able to keep a max of 240 hours in their PTO bank per calendar year.

Years of Service	PTO Accrued Per Hour	PTO Accrued Per Year
0 < 2	0.0538	112 hours/14 days
2 < 5	0.0692	144 hours/18 days
5 < 10	0.0962	200 hours/25 days
10+	0.1154	240 hours/30 days

## Paid Sick Days

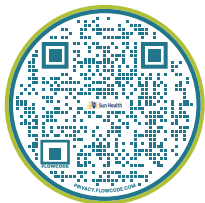
All team members are front loaded paid sick time (PST) according to their employment status on their date of hire and annually on or about January 1st thereafter. Sun Health will deposit up to 40 PST hours per year for Full-Time and Regular Part-Time team members annually. 20 PST hours per year for Non-Benefited Part-Time, PRN, Seasonal and other team members.

# Workplace Wellness



Sun Health offers these amazing wellbeing benefits to all team members:

- Lifestyle Change Programs (*digital Diabetes Prevention Program & Chronic Disease Prevention Program*)
- Diabetes Self-Management Program
- Team Member discounts on Massages
- FREE 6 Nutrition Consultations with a Registered Dietitian
- Prizes and insurance premium incentives for Wellbeing Program participants



Visit the Employee Portal at [Employees.SunHealth.org](https://Employees.SunHealth.org) and click the “Wellbeing” tab or scan the QR Code for more information about these programs.

**Contact your Wellbeing Champion for more information today!**

**Grandview Terrace Champion**  
[Tina.Parra@SunHealth.org](mailto:Tina.Parra@SunHealth.org)

**La Loma Village Champion**  
[Maile.Wilkinson@SunHealth.org](mailto:Maile.Wilkinson@SunHealth.org)

**The Colonnade Champion**  
[Philip.Morin@SunHealth.org](mailto:Philip.Morin@SunHealth.org)

**Administration & Mountain View Office Champion**  
[Teri.Elkins@SunHealth.org](mailto:Teri.Elkins@SunHealth.org)

**Director of Total Compensation**  
[Leilani.Anderson@SunHealth.org](mailto:Leilani.Anderson@SunHealth.org)



# Additional Benefits

## Pet Healthcare

United PetCare offers a pet healthcare program that includes preventive, diagnostic, surgical, emergency and special areas of care. In-office medications are also included. You are able to enroll in this program any time during the year. Please refer to the Team Member Portal or access the link provided to enroll.

## Wellbeing Program

Sun Health is thrilled to continue to offer a comprehensive team member Wellbeing Program in 2022 to team members and their spouse. Remember that you are able to decide which challenges you feel ready, willing, and able to complete. You are able to choose and complete up to 3 challenges per month, and for each completed challenge your name will be entered into the monthly drawing for a gift card. Incentive points can be earned by participation in the wellbeing challenges and activities. The points can be used towards incentive rewards throughout the year. If you have any questions, please don't hesitate to contact the Wellbeing Champions at each of the locations.



## Wellbeing Incentive

Team members as well as their spouses must participate in the Wellness Program and earn 30 points each in order to receive medical plan contribution discount (\$30 discount for team member participation & additional \$30 discount for spouse participation can be earned) or employer funded Health Savings Account (HSA) contribution (\$360 deposit for team members only or \$720 for spouses participation annually). Team members and spouses are eligible to participate. Only team members are eligible to receive other program prizes.

## Healthy Mindsets - No Cost

Healthy Mindsets is a program offered to team members and their family members FREE of cost. The program offers online self-guided protocols, educational videos and treatment modules. Some examples of the programs and resources offered include: Resiliency, Depression, Anxiety/Panic, Anger, Life Stress, Chronic Illness, Smoking, Diet/Exercise, and Addictions. The program is 100% confidential.

## The Employee Association Program

The Employee Association is a nonprofit organization that was formed in 2008 in an effort to aid Sun Health team members in times of need. The concept of the organization began when a team member approached management with a request to hold a bake sale to assist with a fellow team member's medical bills. With more than 400 team members on staff at the time, leaders saw a tremendous opportunity to create a formal plan to support our team members financially in need. As a result, the Employee Association was formed. Over the years, the Association has brought financial relief and support to many team members in need and is sure to positively impact the lives of many more to come. The Employee Association is just one of the ways Sun Health shows its gratitude for our team members' commitment to our mission to champion healthy living, research, and superior health care. More information can be found by clicking the link icon.



# Additional Benefits continued

## Meal Discount Program

Team members are eligible to purchase meals and receive a 30% discount off food items including:

- Grab and Go items
- Bottled beverages

Team members who bring in their own cups have access to free fresh brewed coffee or fountain drinks. Cups may not be more than 16 ounces. The meal and drink discount only applies at the following dining establishments:

Grandview Terrace: The Marketplace & Main Street Café (aka Starbucks in Health and Rehabilitation, drip coffee only)

La Loma Village: The Atrium and the Cups Café

The Colonnade: The Bistro & Club Solé

The following details also apply to this discount:

1. Team members are required to have their ID Badge
2. The discount does not apply to any already discounted meal specials.
3. The discount does not apply to guests of team members.
4. Replacement cups will be available for purchase by team members only at each participating dining establishments at a discounted price of \$2.



## Tuition Reimbursement

We are committed to supporting your personal and professional development. If you qualify, you can receive financial assistance through tuition reimbursement and other scholarship opportunities towards your degree or certification program at an accredited college, university or technical institute. Sun Health is constantly working with education partners in our community to provide our team members with education opportunities. More information can be found by clicking the link icon.

## Sun Health University

This is Sun Health's training portal for ongoing education, powered by Absorb and delivers:

- 5,000+ online training opportunities
- 24/7 learning with any supported mobile device
- 7+ learning formats and much more!

Leadership Development: Sun Health invests in our future through a variety of leadership development programs, including:

- Monthly Leadership Lunch & Learn sessions to include a variety of critical leadership and HR topics
- A comprehensive Leadership Assessment Center to provide high potential leaders with invaluable practice and feedback
- A year-long Leadership Academy for intense development and preparation of high potential leaders for senior and executive leadership positions
- An annual Talent Management Review process where leaders receive in-depth feedback and development plans related to their performance and growth potential within Sun Health

# Resources

Click the play buttons in each section for a short video.

## Medical Plans

- ▶ Preventive Care
- ▶ Primary Care vs. Urgent Care vs. ER
- ▶ HDHP with HSA
- ▶ Prescription Drug Benefit Overview
- ▶ Telehealth (Virtual Care)
- ▶ Medicare
- ▶ COBRA - Loss of Coverage

## Insurance 101

- ▶ Benefits Key Terms Explained
- ▶ What Is A Qualifying Event?

## Tax Advantaged Accounts

- ▶ What Is A Health Savings Account?
- ▶ What Is A Flexible Spending Account?
- ▶ What Is A 401(k) Retirement Plan?

## Ancillary Benefits

- ▶ What Is Dental Insurance?
- ▶ What Is Vision Insurance?
- ▶ What Is a Team Member Assistance Program?
- ▶ What Is Accident Insurance?
- ▶ What Is Critical Illness Insurance?
- ▶ What is Disability Insurance?





# Vendor & HR Contacts

VENDORS			
Open Enrollment	UKG		UKG Login: <a href="https://secure4.saashr.com/ta/6144183.login">https://secure4.saashr.com/ta/6144183.login</a>
Medical	Aetna	1-855-586-6957	<a href="http://www.banneraetna.com">www.banneraetna.com</a>
Benefits Consultant	Jamison Davis Brown & Brown	602-977-3802	<a href="mailto:Jamison.Davis@bbbrown.com">Jamison.Davis@bbbrown.com</a>
Pharmacy	ExpressScripts	1-800-711-5672	<a href="https://express-scripts.com">https://express-scripts.com</a>
Virtual Care	98point6		<a href="http://www.98point6.com/banner-aetna-members/">www.98point6.com/banner-aetna-members/</a>
Health Savings Account	Payflex	1-844-729-3539	<a href="http://www.payflex.com">www.payflex.com</a>
Flexible Spending Accounts- Health and Dependent Care	Basic	1-800-473-0455	<a href="http://www.basiconline.com">www.basiconline.com</a>
Dental	Aetna	1-877-238-6200	<a href="http://www.banneraetna.com">www.banneraetna.com</a>
Vision	VSP	1-800-877-7195	<a href="http://www.vsp.com">www.vsp.com</a>
Life and Disability	New York Life Group Benefit Solutions (NYL GBS)	1-888-842-4462	<a href="http://www.mynylgbs.com">www.mynylgbs.com</a>
Critical Illness Insurance Accident Insurance	Aetna	1-800-607-3366	<a href="http://www.myaetnasupplemental.com">www.myaetnasupplemental.com</a>
Life Assistance Program	New York Life Group Benefit Solutions (NYL GBS)	1-800-538-3543	<a href="http://www.nylgbs-lap.com">www.nylgbs-lap.com</a>
401(k) Retirement Plan	Fidelity - NetBenefits	1-800-421-3844	<a href="https://netbenefits.com">https://netbenefits.com</a>
Tuition Reimbursement & Scholarship Opportunities			<a href="https://employees.sunhealth.org/education-opportunities">https://employees.sunhealth.org/education-opportunities</a>
Team Member Support	Employee Association		<a href="https://employees.sunhealth.org/employee-association">https://employees.sunhealth.org/employee-association</a>
Team Member Discounts	Employee Network	480-768-0837	<a href="https://employeenetwork.com">https://employeenetwork.com</a> CompanyCode: SunHealth
Pet Healthcare	United PetCare		<a href="http://www.unitedpetcare.com/sunhealthsl">www.unitedpetcare.com/sunhealthsl</a>
Sun Health University	myAbsorb		<a href="https://sunhealth.myabsorb.com/#/login">https://sunhealth.myabsorb.com/#/login</a>
HUMAN RESOURCES			
GrandviewTerrace HC	HR Coordinator	623-455-7653	<a href="mailto:HRSupport@sunhealth.org">HRSupport@sunhealth.org</a>
GrandviewTerrace IL	HR Coordinator	623-975-8059	
La Loma Village	HR Coordinator	623-537-7448	
The Colonnade	HR Coordinator	623-236-3751	
Administration	HR Coordinator	623-777-2655	
Human Resources Business Partners		623-975-8041 623-236-3752	<p>About this Booklet. This booklet highlights important features of Sun Health's benefits. While efforts have been made to ensure the accuracy of the information presented, in the event of any discrepancies your actual coverage and benefits will be determined by the legal plan documents and the contracts that govern these plans. Benefit plans may be changed for any reason, to the extent allowed by law. Your participation in these benefits is not a contract of employment and does not guarantee future employment.</p>
Director of Total Compensation		623-777-2604	
Talent Acquisition Manager		623-471-7980	
Benefit & Learning Coordinator		623-777-2602	
Learning & Organizational Development Manager		623-777-2627	



## Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit [www.healthcare.gov](http://www.healthcare.gov).

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or [www.insurekidsnow.gov](http://www.insurekidsnow.gov) to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at [www.askebsa.dol.gov](http://www.askebsa.dol.gov) or call **1-866-444-EBSA (3272)**.

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of January 31, 2022. Contact your State for more information on eligibility –

ALABAMA – Medicaid	FLORIDA – Medicaid
Website: <a href="http://myalhipp.com/">http://myalhipp.com/</a> Phone: 1-855-692-5447	Website: <a href="https://www.flmedicaidtplecovery.com/flmedicaidtplecovery.com/hipp/index.html">https://www.flmedicaidtplecovery.com/flmedicaidtplecovery.com/hipp/index.html</a> Phone: 1-877-357-3268
ALASKA – Medicaid	GEORGIA – Medicaid
The AK Health Insurance Premium Payment Program Website: <a href="http://myakhipp.com/">http://myakhipp.com/</a> Phone: 1-866-251-4861 Email: <a href="mailto:CustomerService@MyAKHIPP.com">CustomerService@MyAKHIPP.com</a> Medicaid Eligibility: <a href="http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx">http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx</a>	HIPP Website: <a href="https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp">https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp</a> Phone: 678-564-1162, Press 1 CHIPRA Website: <a href="https://medicaid.georgia.gov/programs/third-partyliability/childrens-health-insurance-program-re-authorizationact-2009-chipra">https://medicaid.georgia.gov/programs/third-partyliability/childrens-health-insurance-program-re-authorizationact-2009-chipra</a> Phone: (678) 564-1162, Press 2
CALIFORNIA – Medicaid	INDIANA – Medicaid
Website: Health Insurance Premium Payment (HIPP) Program <a href="http://dhcs.ca.gov/hipp">http://dhcs.ca.gov/hipp</a> Phone: 916-445-8322 Email: <a href="mailto:hipp@dhcs.ca.gov">hipp@dhcs.ca.gov</a> Fax: 916-440-5676	Healthy Indiana Plan for low-income adults 19-64 Website: <a href="http://www.in.gov/fssa/hip/">http://www.in.gov/fssa/hip/</a> Phone: 1-877-438-4479 All other Medicaid Website: <a href="https://www.in.gov/medicaid/">https://www.in.gov/medicaid/</a> Phone 1-800-457-4584
COLORADO – Health First Colorado (Colorado's Medicaid Program) & Child Health Plan Plus (CHP+)	IOWA – Medicaid and CHIP (Hawki)
Health First Colorado Website: <a href="https://www.healthfirstcolorado.com/">https://www.healthfirstcolorado.com/</a> Health First Colorado Member Contact Center: 1-800-221-3943/ State Relay 711 CHP+: <a href="https://www.colorado.gov/pacific/hcpf/child-health-plan-plus">https://www.colorado.gov/pacific/hcpf/child-health-plan-plus</a> CHP+ Customer Service: 1-800-359-1991/ State Relay 711 Health Insurance Buy-In Program (HIBI): <a href="https://www.colorado.gov/pacific/hcpf/health-insurance-buy-program">https://www.colorado.gov/pacific/hcpf/health-insurance-buy-program</a> HIBI Customer Service: 1-855-692-6442	Medicaid Website: <a href="https://dhs.iowa.gov/ime/members">https://dhs.iowa.gov/ime/members</a> Medicaid Phone: 1-800-338-8366 Hawki Website: <a href="http://dhs.iowa.gov/Hawki">http://dhs.iowa.gov/Hawki</a> Hawki Phone: 1-800-257-8563 HIPP Website: <a href="https://dhs.iowa.gov/ime/members/medicaid-a-to-z/hipp">https://dhs.iowa.gov/ime/members/medicaid-a-to-z/hipp</a> HIPP Phone: 1-888-346-9562

KANSAS – Medicaid	NEVADA – Medicaid
Website: <a href="https://www.kancare.ks.gov/">https://www.kancare.ks.gov/</a> Phone: 1-800-792-4884	Medicaid Website: <a href="http://dhcfp.nv.gov">http://dhcfp.nv.gov</a> Medicaid Phone: 1-800-992-0900
KENTUCKY – Medicaid	NEW HAMPSHIRE – Medicaid
Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website: <a href="https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx">https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx</a> Phone: 1-855-459-6328 Email: <a href="mailto:KIHIPP.PROGRAM@ky.gov">KIHIPP.PROGRAM@ky.gov</a> KCHIP Website: <a href="https://kidshealth.ky.gov/Pages/index.aspx">https://kidshealth.ky.gov/Pages/index.aspx</a> Phone: 1-877-524-4718 Kentucky Medicaid Website: <a href="https://chfs.ky.gov">https://chfs.ky.gov</a>	Website: <a href="https://www.dhhs.nh.gov/oii/hipp.htm">https://www.dhhs.nh.gov/oii/hipp.htm</a> Phone: 603-271-5218 Toll free number for the HIPP program: 1-800-852-3345, ext 5218
LOUISIANA – Medicaid	NEW JERSEY – Medicaid and CHIP
Website: <a href="http://www.medicare.la.gov">www.medicare.la.gov</a> or <a href="http://www.ldh.la.gov/la hipp">www.ldh.la.gov/la hipp</a> Phone: 1-888-342-6207 (Medicaid hotline) or 1-855-618-5488 (LaHIPP)	Medicaid Website: <a href="http://www.state.nj.us/humanservices/dmahs/clients/medicaid/">http://www.state.nj.us/humanservices/dmahs/clients/medicaid/</a> Medicaid Phone: 609-631-2392 CHIP Website: <a href="http://www.njfamilycare.org/index.html">http://www.njfamilycare.org/index.html</a> HIP Phone: 1-800-701-0710
MAINE – Medicaid	NEW YORK – Medicaid
Enrollment Website: <a href="https://www.maine.gov/dhhs/ofi/applications-forms">https://www.maine.gov/dhhs/ofi/applications-forms</a> Phone: 1-800-442-6003 TTY: Maine relay 711 Private Health Insurance Premium Webpage: <a href="https://www.maine.gov/dhhs/ofi/applications-forms">https://www.maine.gov/dhhs/ofi/applications-forms</a> Phone: -800-977-6740. TTY: Maine relay 711	Website: <a href="https://www.health.ny.gov/health_care/medicaid/">https://www.health.ny.gov/health_care/medicaid/</a> Phone: 1-800-541-2831
MASSACHUSETTS – Medicaid and CHIP	NORTH CAROLINA – Medicaid
Website: <a href="https://www.mass.gov/masshealth/pa">https://www.mass.gov/masshealth/pa</a> Phone: 1-800-862-4840	Website: <a href="https://medicaid.ncdhhs.gov/">https://medicaid.ncdhhs.gov/</a> Phone: 919-855-4100
MINNESOTA – Medicaid	NORTH DAKOTA-Medicaid
Website: <a href="https://mn.gov/dhs/people-we-serve/children-and-families/health-care/health-care-programs/programs-and-services/other-insurance.jsp">https://mn.gov/dhs/people-we-serve/children-and-families/health-care/health-care-programs/programs-and-services/other-insurance.jsp</a> Phone: 1-800-657-3739	Website: <a href="http://www.nd.gov/dhs/services/medicalserv/medicaid/">http://www.nd.gov/dhs/services/medicalserv/medicaid/</a> Phone: 1-844-854-4825
MISSOURI – Medicaid	OKLAHOMA – Medicaid and CHIP
Website: <a href="http://www.dss.mo.gov/mhd/participants/pages/hipp.htm">http://www.dss.mo.gov/mhd/participants/pages/hipp.htm</a> Phone: 573-751-2005	Website: <a href="http://www.insureoklahoma.org">http://www.insureoklahoma.org</a> Phone: 1-888-365-3742
MONTANA – Medicaid	OREGON – Medicaid
Website: <a href="http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP">http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP</a> Phone: 1-800-694-3084	Website: <a href="http://healthcare.oregon.gov/Pages/index.aspx">http://healthcare.oregon.gov/Pages/index.aspx</a> <a href="http://www.oregonhealthcare.gov/index-es.html">http://www.oregonhealthcare.gov/index-es.html</a> Phone: 1-800-699-9075
NEBRASKA – Medicaid	PENNSYLVANIA – Medicaid
Website: <a href="http://www.ACCESSNebraska.ne.gov">http://www.ACCESSNebraska.ne.gov</a> Phone: 1-855-632-7633 Lincoln: 402-473-7000 Omaha: 402-595-1178	Website: <a href="https://www.dhs.pa.gov/Services/Assistance/Pages/HIPPPProgram.aspx">https://www.dhs.pa.gov/Services/Assistance/Pages/HIPPPProgram.aspx</a> Phone: 1-800-692-7462

RHODE ISLAND – Medicaid and CHIP	VIRGINIA – Medicaid and CHIP
Website: <a href="http://www.eohhs.ri.gov/">http://www.eohhs.ri.gov/</a> Phone: 1-855-697-4347, or 401-462-0311 (Direct Rlte Share Line)	Website: <a href="https://www.coverva.org/en/famis-select">https://www.coverva.org/en/famis-select</a> <a href="https://www.coverva.org/en/hipp">https://www.coverva.org/en/hipp</a> Medicaid Phone: 1-800-432-5924 CHIP Phone: 1-800-432-5924
SOUTH CAROLINA – Medicaid	WASHINGTON – Medicaid
Website: <a href="https://www.scdhhs.gov">https://www.scdhhs.gov</a> Phone: 1-888-549-0820	Website: <a href="https://www.hca.wa.gov/">https://www.hca.wa.gov/</a> Phone: 1-800-562-3022
SOUTH DAKOTA – Medicaid	WEST VIRGINIA – Medicaid
Website: <a href="http://dss.sd.gov">http://dss.sd.gov</a> Phone: 1-888-828-0059	Website: <a href="https://dhhr.wv.gov/bms/">https://dhhr.wv.gov/bms/</a> <a href="http://mywvhpp.com/">http://mywvhpp.com/</a> Medicaid Phone: 304-558-1700 CHIP Toll-free phone: 1-855-MyWVHIPP (1-855-6998447)
TEXAS – Medicaid	WISCONSIN – Medicaid and CHIP
Website: <a href="http://gethipptexas.com/">http://gethipptexas.com/</a> Phone: 1-800-440-0493	Website: <a href="https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm">https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm</a> Phone: 1-800-362-3002
UTAH – Medicaid and CHIP	WYOMING – Medicaid
Medicaid Website: <a href="https://medicaid.utah.gov/">https://medicaid.utah.gov/</a> CHIP Website: <a href="http://health.utah.gov/chip">http://health.utah.gov/chip</a> Phone: 1-877-543-7669	Website: <a href="https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility/">https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility/</a> Phone: 1-800-251-1269
VERMONT– Medicaid	
Website: <a href="http://www.greenmountaincare.org/">http://www.greenmountaincare.org/</a> Phone: 1-800-250-8427	

To see if any other states have added a premium assistance program since January 31, 2022, or for more information on special enrollment rights, contact either:

U.S. Department of Labor  
Employee Benefits Security Administration  
[www.dol.gov/agencies/ebsa](http://www.dol.gov/agencies/ebsa)  
1-866-444-EBSA (3272)

U.S. Department of Health and Human Services  
Centers for Medicare & Medicaid Services  
[www.cms.hhs.gov](http://www.cms.hhs.gov)  
1-877-267-2323, Menu Option 4, Ext. 61565

### Paperwork Reduction Act Statement

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average approximately seven minutes per respondent. Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employee Benefits Security Administration, Office of Policy and Research, Attention: PRA Clearance Officer, 200 Constitution Avenue, N.W., Room N-5718, Washington, DC 20210 or email [ebsa.opr@dol.gov](mailto:ebsa.opr@dol.gov) and reference the OMB Control Number 1210-0137.



# Notes






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