# BENEFITS FOR A HEALTHY LIFE

### Provider 2023 Benefit Choices

# **Bozeman Health**

# Welcome to Bozeman Health

Bozeman Health is committed to excellence in patient care and in cultivating a culture of excellence in all we do. This requires dedicated employees. We are pleased you have chosen to be a member of our team. We reward your commitment to Bozeman Health with a total rewards package that includes a comprehensive employee benefits and well-being program. Employees and their eligible dependents may participate in health, dental, and vision insurance plans; tax-advantaged spending accounts; earned time off; and retirement plans. Each employee's needs are unique, which is why Bozeman Health offers choice in medical plans for our staff and their family members. Each health care plan covers pharmacy and mental health benefits.

This benefit guide highlights the many options available to you as part of your 2023 benefit package.

#### BOZEMAN HEALTH'S BENEFIT PHILOSOPHY

Bozeman Health is dedicated to offering a competitive benefit package to create value with our employees and promote community health.

#### **BOZEMAN HEALTH'S BENEFIT GUIDING PRINCIPLES**

- Deliver consistent benefits to all Bozeman Health facilities and in doing so acknowledge that we are one care team
- Consistently benchmark our benefit programs to ensure we are providing financially sustainable benefit programs and aligned with employee needs
- · Empower our employees and families to lead healthy lives
- Drive engagement by effectively and transparently communicating the value of employee benefits as a component of Total Rewards

# **OPEN ENROLLMENT** OCTOBER 10 - NOVEMBER 4, 2022

#### WHAT'S NEW FOR 2023

- Open Enrollment starts October 10, 2022 at 8 a.m. and ends at 11:59 p.m. on November 4, 2022. Enrollment is completed through <u>www.myworkday.com/bozemanhealth</u> or access the link on MIND.
- Enrollment is mandatory for 2023 you MUST make your selections by November 4, 2022 to have coverage for 2023.

You must enroll during open enrollment between October 10, 2022 and November 4, 2022 to have medical, dental, vision, flexible spending and/or health savings accounts, or Aflac voluntary benefits in 2023.

- Bozeman Health is offering a new, lower cost medical plan, the Jefferson High Deductible Plan for 2023. Plan changes have also been made on the Madison and Gallatin plans. See page 5 and 6 for more details to select the right plan for you for 2023.
- Medical contributions are changing in 2023. Dental, vision, and supplemental life rates are not changing for 2023. See page 17 for more details.
- Bozeman Health continues to offer lower costs for employees and providers that utilize the Bozeman Health Partners Network. There are changes to the Tier 2 BCBS MT PPO and to Tier 3 Out-of-Network. See page 6 for more details.
- The employee well-being program is making changes in 2023, and more information will be shared in 2023. As part of the program, employees can earn points through healthy activities to be entered into a quarterly drawing for a chance to win prizes throughout the year. Additionally, required actions to earn the \$50 incentive as part of the Engaged medical plan are changing. See page 10 for details.
- Take this opportunity to review your eligible covered dependents and submit all necessary documentation by November 4, 2022. Review beneficiary designation information for life insurance, health savings account, and retirement plans.

#### **IMPORTANT REMINDERS**

- You must select your benefits by November 4, 2022 to keep your benefits in 2023.
- Enroll through Workday at <u>www.myworkday.com/bozemanhealth</u>. You can also find a link to WorkDay on the Bozeman Health employee intranet, MIND, on the 'Links' page.
- Refer to WorkDay login instructions on MIND under Benefits > WorkDay Login instructions. It is critical that you have access to Workday to view pay stubs, paid time off, and health and welfare benefits information.
- New employees: If you are a new employee hired after October 1, 2022, you must enroll within 30 days from your date of hire for your 2022 benefit package and reenroll for 2023 during Open Enrollment. If you don't enroll within this time period, you will not have benefits coverage for the remainder of 2022. You must also participate in Open Enrollment and enroll again to ensure you receive coverage for 2023. Enrollments will not roll over into 2023.

#### HOW TO ENROLL

To enroll in benefits you must login to www.myworkday.com/bozemanhealth

Enroll from any computer with Internet access, 24 hours a day, seven days a week. Follow the prompts to set up your account and select a secure password.

#### **INSIDE THIS GUIDE**

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#### AFFORDABLE CARE ACT (ACA) ELIGIBILITY

Bozeman Health follows the Employer Shared Responsibilities provision and offers coverage that is deemed affordable and meets the required Minimum Value standard to our employees. Those employees who on average, work for at least 30 hours of service per week or 130 hours of service in a calendar month over a 12-month measurement period will be offered coverage each year for a corresponding 12-month stability period. At Bozeman Health, full-time and part-time employees are determined for ACA purposes by the following classification standards:

#### Standard Measurement Period

For ongoing employees appointed as a less than a .75 FTE, this will be a period of time beginning with the first paycheck in November through the last paycheck of October of each year. For 2023, the measurement period is October 30, 2021 through October 29, 2022. During this time, employee's hours are measured to determine eligibility for full time employee only medical insurance premiums. An ongoing employee is one that has made it through their initial measurement period.

#### WHO CAN ENROLL?

#### • Full-time (0.9 FTE) and Part-time employees (.4 FTE and above) Employees are eligible for benefits on the first day of the month following the first 30 days of employment.

• Variable-hour employees

Employees must average at least 30 hours per week during a 12-month period to be eligible for benefits. HR will notify you if you qualify under this status.

#### Eligible dependents

Eligible dependents include includes your legal spouse, domestic partner, and dependent children to age 26, plus disabled dependent children over age 26 who are physically or mentally unable to care for themselves.

#### QUALIFIED LIFE EVENTS

The following events allow you to enroll, decline, or make changes to your benefits. Written documentation of the Qualified Life Event is required to be submitted to <u>www.myworkday.com/bozemanhealth</u>. You have 30 days from date of event to enroll and submit documentation.

- Marriage
- Legal separation or divorce
- Birth or adoption of a child
- Change in employment status for you or spouse that results in loss or gain in coverage
- Change in place of residence causing a loss of eligibility (ex. Moving outside of service area)
- Change in dependent care cost or availability (DC FSA enrolled only)
- Loss of dependent

#### SUMMARY OF BENEFITS AND COVERAGE

The medical section of this guide provides an overview of your medical plan options. You can find detailed information about each plan, including a breakdown of costs, in each plan's Summary of Benefits and Coverage (SBC). The SBCs summarize important information about your health coverage options in a standard format to help you compare costs and features across plans. The SBCs are available on MIND https://mind.bozemanhealth.org/ departments/HumanResources/benefits/SitePages/Home. aspx.

A paper copy is also available by calling Human Resources at 406-414-5421.



### **MEDICAL BENEFITS**

Quality health coverage is one of the most valuable benefits you enjoy as a Bozeman Health employee. Our benefits program offers plans to help keep you and your family healthy and also provide important protection in the event of illness or injury.



#### MEDICAL

Bozeman Health provides three plan options administered by Blue Cross Blue Shield of Montana (BCBSMT). The options are the Gallatin High Deductible Health Plan, the Madison Plan, and the NEW Jefferson High Deductible Health Plan.

All three plans feature a three tier network. Tier 1 is the Bozeman Health Partners Network, Tier 2 is the BCBSMT PPO, and Tier 3 is Out-of-Network. You can minimize your cost sharing by utilizing Bozeman Health Partners Network providers where available. All plans offer you the flexibility to choose your provider along with access to BCBSMT's broad network of providers.

Madison Plan members will pay \$0 co-pay when seeing a Bozeman Health therapy provider for Physical Therapy and Occupational Therapy Services.

Please refer to your Summary of Coverage (Madison Plan Summary of Coverage, Gallatin Plan Summary of Coverage, and Jefferson Plan Summary of Coverage) booklet for details on services, including out-of-network payments.

In order to qualify for the 2023 Engaged plan, you must meet the criteria of 200 points earned through our well-being portal by December 31, 2022. Additional information, along with a link to our well-being portal, can be found on MIND.

#### **NEW** - FERTILITY BENEFIT EXPANSION

Bozeman Health is excited to announce we expanded the fertility benefit to offer coverage of more services with a \$10,000 lifetime cap.

#### **NEW MENTAL HEALTH SUPPORT** - LEARN TO LIVE

Bozeman Health has added a new mental health program, Learn To Live, available through Blue Cross Blue Shield of Montana (BCBSMT). Learn to Live is a self-directed, online program based on the principles of Cognitive Behavioral Therapy. Its confidential and accessible anywhere.

More information available at <u>www.BCBSMT.com</u>.

#### **B2 VirtualCare NEW** - B2 VIRTUAL VISITS NOW AVAILABLE!

Bozeman Health is now offering employees free virtual visits. B2 Virtual Care will be free for Madison plan members and free after deductible for Gallatin and Jefferson plan members. B2 VirtualCare offers 24/7/365 virtual physician visits from anywhere you are in the U.S. for common ailments like sinus infections, allergies, cold and flu, pink eye, sore throats and much more. Receive a diagnosis and have any needed prescriptions instantly prescribed by a medical provider via a virtual visit.

#### PHARMACY BENEFIT DETAILS

Bozeman Health offers comprehensive pharmacy benefits with a variety of opportunities for cost savings. Please review your plan options in detail. To learn more about your pharmacy benefit and cost of prescriptions go to <u>www.BCBSMT.com</u> and log in to your account to determine accurate cost information.

- Members will be charged an additional fee if a Formulary or Non-Formulary drug is chosen to be filled when a generic equivalent is available, applicable to retail and mail order fills on all plans.
- Members in the Gallatin or Jefferson plan will receive generic preventive Rx coverage at 100% covered if utilizing either Highland Park Pharmacy at Deaconess Regional Medical Center or Big Sky Pharmacy at Big Sky Medical Center. Preferred preventive Rx will be a \$40 copay only, non-preferred preventive Rx will be an \$80 copay only, and specialty pharmacy is subject to the medical deductible. Prescriptions not considered preventative will be subject to full cost until your plan deductible is met.
- Members on the Madison Plan must meet a \$200 pharmacy deductible when filling Formulary and Non-Formulary drugs before paying a copay amount. Deductible is per covered member, per year, and does NOT apply to generic prescription drugs.
- Specialty medications are covered only if filled at Bozeman Health pharmacies on all plans.



## WHICH PLAN IS RIGHT FOR YOU?

| Consider which plan features are most<br>important to you. Do you want to:  | Madison<br>Plan | Gallatin<br>Plan | * NEW *<br>Jefferson<br>Plan |
|---|-----------------|------------------|------------------------------|
| Open and contribute to a tax-free HSA,<br>which has no "use it or lose it" rule and<br>offers the opportunity to invest money or<br>future medical costs? |                 | X                | X                            |
| Pay the lowest premium cost, which may<br>make it the least expensive option if you<br>expect to have low health care usage?                              |                 |                  | X                            |
| Balance your out-of-pocket and paycheck costs with a moderate deductible and premium cost?  |                 | X                | X                            |
| Pay the highest premium cost in order to<br>keep your out-of-pocket costs as low as<br>possible when you need care?                                       | X               |                  |                              |

### **COMPARE MEDICAL PLANS**

The chart below provides a comparison of key coverage features and costs.

|  | Madison PPO  | Gallatin HDHP  | Jefferson HDH  |
|--|--|--|--|
| PRE-TAX SAVINGS OPTIONS  | FSA  | HSA  | HSA  |
| Network<br>(Tier 1 / Tier 2 / Tier 3)  | Bozeman Health<br>Partners Network<br>BCBS PPO /Out of Network                 | Bozeman Health<br>Partners Network<br>BCBS PPO /Out of Network                         | Bozeman Health<br>Partners Network<br>BCBS PPO /Out of Network |
| Annual Deductible  | Individual:<br><b>\$500</b> / \$1,500 / \$2,500                                | Individual:<br><b>\$3,000</b> / \$4,000 / \$7,500                                      | Individual:<br><b>\$4,500</b> / \$5,500 / \$8,000              |
| (In-network)   | <b>Family:</b><br><b>\$1,000</b> / \$3,000 / \$5,000                           | <b>Family:</b><br>\$6,000 / \$8,000 / \$15,000   | <b>Family:</b><br>\$9,000 / \$11,000 / \$16,000                |
| Family Deductible Accrual  |  | Embedded   |  |
| Deductible Accumulation  | D  | eductible accumulates across tiers   |  |
| Coinsurance<br>(member share)  | <b>20% /</b> 30% / 50%   | <b>10% /</b> 30% / 50%   | <b>10%</b> / 30% / 50%   |
| Out of Pocket Maximum  | Individual:<br><b>\$2,500</b> / \$4,000 / \$5,000                              | <b>Individual:</b><br><b>\$4,000</b> / \$5,000 / \$9,000                               | Individual:<br>\$6,000 / \$7,000 / \$11,000                    |
| (Includes deductible)<br>In-network  | <b>Family:</b><br><b>\$5,000</b> / \$8,000 / \$10,000                          | <b>Family:</b><br><b>\$8,000</b> / \$10,000 / \$18,000                                 | <b>Family:</b><br><b>\$12,000</b> / \$14,000 / \$22,000        |
| Preventive Care<br>(Routine Care, Well Child Care)   | \$0 (no dec  | ductible) / \$0 (no deductible) / Not  | covered  |
| Office Visit – PCP<br>Office Visit - Specialist  | \$10 / \$25 / 50%<br>\$25 / \$40 / 50%   | 10% / 30% / 50%  |  |
| Emergency Department Care  | \$250 (no ded)   | 10% / 10% / 10%  |  |
| Hospital Services<br>(Inpatient/outpatient,<br>lab and X-ray, surgery centers,<br>other facility services) | 20% / 30% / 50%  | 10% / 30% / 50%  |  |
| Urgent Care  | \$10 / \$25 / 50%  | 10% / 30   | % / 50%  |
| Pharmacy Benefit   | \$200 Rx deductible,<br>does not apply to generic drugs                        | Deductible waived for pre<br>and Big Sky   | -  |
| Generic  | \$20/\$30/\$30   | 10% / 30   | % / 50%  |
| Preferred Brand  | \$40/\$50/\$50   | 10% / 30% / 50%  |  |
| Non-Preferred Brand  | \$60/\$70/\$70   | 10% / 30% / 50%  |  |
| Specialty<br>(Formulary/Non-formulary)   | \$75 / \$150,<br>must be obtained at<br>Highland Park or Big Sky<br>pharmacies | Subject to Medical Deductible,<br>must be obtained at Highland Park or Big Sky pharmac |  |
| Mail Order   | 2 copays for 90-day supply   | Coinsurance for  | r 90-day supply  |

### HEALTH SAVINGS ACCOUNT (HSA)

If you enroll in the Gallatin or Jefferson HDHP, you are eligible to open an HSA. An HSA is a tax-free savings account you can use to pay for eligible health expenses anytime, even in retirement.

#### HOW DOES AN HSA WORK?

#### • Build tax-free savings for health care.

You can make before-tax deductions from your paycheck into your HSA, allowing you to save money by using tax-free dollars to pay for eligible medical, prescription, dental, and vision expenses. The total amount that can be contributed to your HSA each year is limited by the IRS. The following limits are for 2023:

- Up to \$3,850 for employee-only coverage.
- Up to \$7,750 if you cover dependents.
- Add \$1,000 to these limits if you're age 55 or older.

#### • Keep your money.

Unlike an FSA, the money in your HSA is always yours to keep and can be rolled over from year to year. You can take your unused balance with you when you retire or leave Bozeman Health.

#### • Use it like a bank account.

Pay for eligible medical, prescription, dental, and vision expenses for yourself and your family by swiping your HSA debit card, or reimburse yourself for payments you've made (up to the available balance in your account). Keep in mind that you may only access money that is actually in your HSA when making a purchase or withdrawal. There's no need to turn in receipts (but keep them for your records).

#### • Earn interest and invest for the future.

Once your interest-bearing HSA reaches the \$2,000 minimum balance, you can invest in a variety of mutual funds similar to 401(k) investments. You can learn more at www.HealthEquity.com or call 1-866-346-5800.

#### • Triple tax advantage.

Contributions are made on a pre-tax basis, and your withdrawals are not subject to federal income taxes when used for eligible expenses. Any interest or earnings on your HSA balance build tax-free, too.\*

\* Money in an HSA grows tax-free and can be withdrawn tax-free if it is used to pay for qualified health care expenses (for a list of eligible expenses, see IRS Publication 502, available at www.irs.gov). If money is used for ineligible expenses, you will pay ordinary income tax on the amount withdrawn plus a 20% penalty tax if you withdraw the money for ineligible expenses before age 65. After age 65, withdrawals for ineligible expenses are only subject to ordinary income tax. Please review your state regulations as you may have to pay state taxes depending on your residency.



Health Equity currently administers the HSA accounts on a payroll deducted basis. It will take up to two weeks for contributions to post to the account. There is a \$2.95 administration fee per month that is collected directly from your account.

#### HSA ELIGIBILITY

In order to establish and contribute to an HSA, you:

- Must be enrolled in a high deductible health plan, like Bozeman Health's Gallatin or Jefferson HDHP plans.
- Cannot be covered by any other medical plan that is not a qualified high deductible plan. This includes a spouse's medical coverage unless it's an HSA-qualified plan.
- Cannot be enrolled in a traditional health care FSA in 2023.
- Cannot be enrolled in Medicare, including Parts A or B, Medicare, or TRICARE.
- Cannot be claimed as a dependent on another person's tax return.
- Cannot be a veteran who has received treatment, other than preventive care, through the Department of Veterans Affairs within the past three months.

### FLEXIBLE SPENDING ACCOUNTS (FSAS)

Tax-advantaged FSAs are a great way to save money. The money you contribute to these accounts comes out of your paycheck without being taxed, and you withdraw it tax-free when you pay for eligible health care and dependent care expenses.

Bozeman Health offers you the following FSAs:

#### HEALTH CARE FSA

- Pay for eligible health care expenses, such as plan deductibles, copays, and coinsurance.
- Contribute up to \$3,050\* and you must contribute a minimum of \$100 annually to participate.
- Bozeman allows up to \$500 rollover of remaining health FSA funds into the new benefit year as long as an health FSA account is elected in the subsequent year.

#### DEPENDENT CARE FSA

- Pay for eligible dependent care expenses, such as day care for a child or adult dependent care, so you and/or your spouse can work, look for work, or attend school full time.
- Contribute up to \$5,000 in 2023, or \$2,500 if you are married and file separate tax returns. Minimum election is \$120 annually to participate.

#### **ESTIMATE CAREFULLY**

Keep in mind, FSAs are "use-it-or-lose-it" accounts. You will forfeit any amount above \$500 remaining in the health care FSA account at the end of the plan year and any money remaining in the dependent care FSA account.

#### WHAT'S AN ELIGIBLE EXPENSE?

**HealthCare FSA** – Plan deductibles, copays, coinsurance, and other health care expenses. To learn more, see IRS Publication 502 at <u>www.irs.gov</u>.

**Dependent Care FSA** – Child day care, babysitters, home care for dependent elders, and related expenses. To learn more, see IRS Publication 502 & 503 at <u>www.irs.gov/publications</u>.

\*Current (2022) IRS limits; 2023 plan year limits were not available when this guide was printed.

#### HSA VS. HEALTH CARE FSA: WHAT'S THE DIFFERENCE?

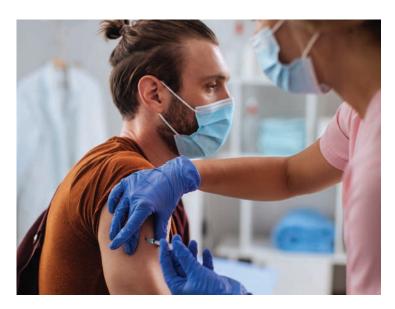
|  | HSA                              | Health Care<br>FSA  |
|--|----------------------------------|---------------------|
| Available if you<br>enroll in a  | Gallatin or<br>Jefferson<br>HDHP | Madison<br>PPO Plan |
| Eligible for<br>company<br>contributions   | Yes                              | No                  |
| Change your<br>contribution<br>amount any time   | Yes                              | No                  |
| Access your<br>entire annual<br>contribution<br>amount from the<br>beginning of the<br>plan year | No                               | Yes                 |
| Access only<br>funds that have<br>been deposited   | Yes                              | No                  |
| "Use-it-or-lose-it"<br>at year-end   | No                               | Yes                 |
| Money is always<br>yours to keep   | Yes                              | No                  |

The FSA accounts are currently administered by Health Equity. There is a \$3.96 per month administration fee, for one or both account that will be collected pre-tax from your paycheck.

When you enroll in a Health Care FSA, you will receive a debit card, which you can use to pay for eligible expenses. Depending on the transaction, you may need to submit receipts or other documentation to Health Equity.

### PREMIUM CONTRIBUTION **RATES**

The information shown here illustrates the current premiums for each benefit plan. Insurance premiums are collected semi-monthly from 24 of the 26 paychecks received in the year. Please review each option carefully and choose the coverage that fits your budget and your family's lifestyle.



| MEDICAL PREMIUMS |                                      |          |           |          |          |          |
|------------------|--------------------------------------|----------|-----------|----------|----------|----------|
|                  | .9 FTE OR GREATER                    |          | .7589 FTE |          | .474 FTE |          |
| GALLATIN PLAN    | BASE                                 | ENGAGED  | BASE      | ENGAGED  | BASE     | ENGAGED  |
| Employee Only    | \$40.00                              | \$15.00  | \$40.00   | \$15.00  | \$142.03 | \$117.03 |
| Employee +1      | \$151.68                             | \$126.68 | \$322.71  | \$297.71 | \$322.71 | \$297.71 |
| Family           | \$211.28                             | \$186.28 | \$462.36  | \$437.36 | \$462.36 | \$437.36 |
|                  | .9 FTE OR GREATER .7589 FTE .474 FTE |          |           |          |          | 4 FTE    |
| MADISON PLAN     | BASE                                 | ENGAGED  | BASE      | ENGAGED  | BASE     | ENGAGED  |
| Employee Only    | \$78.31                              | \$53.31  | \$78.31   | \$53.31  | \$196.99 | \$171.99 |
| Employee +1      | \$245.88                             | \$220.88 | \$425.45  | \$400.45 | \$425.45 | \$400.45 |
| Family           | \$351.66                             | \$326.66 | \$610.48  | \$585.48 | \$610.48 | \$585.48 |
| JEFFERSON        | JEFFERSON .9 FTE OR GREATER          |          | .758      | 9 FTE    | .47      | 4 FTE    |
| PLAN             | BASE                                 | ENGAGED  | BASE      | ENGAGED  | BASE     | ENGAGED  |
| Employee Only    | \$25.00                              | \$0.00   | \$25.00   | \$0.00   | \$70.19  | \$45.19  |
| Employee +1      | \$79.89                              | \$54.89  | \$159.47  | \$134.47 | \$159.47 | \$134.47 |
| Family           | \$111.28                             | \$86.28  | \$227.38  | \$202.38 | \$227.38 | \$202.38 |

| DUAL EMPLOYED | MADISC   | ON PLAN  | GALLATIN PLAN |          | JEFFERSON PLAN |         |
|---------------|----------|----------|---------------|----------|----------------|---------|
| SPOUSE        | BASE     | ENGAGED  | BASE          | ENGAGED  | BASE           | ENGAGED |
| Employee + 1  | \$130.11 | \$105.11 | \$40.00       | \$15.00  | \$25.00        | \$0.00  |
| Family        | \$179.14 | \$154.14 | \$150.31      | \$125.31 | \$79.17        | \$54.17 |

### PREMIUM CONTRIBUTION RATES

The information shown here illustrates the current premiums for each benefit plan. Insurance premiums are collected semimonthly from 24 of the 26 paychecks received in the year. Please review each option carefully and choose the coverage that fits your budget and your family's lifestyle.

# DENTAL PREMIUMS BASE ENHANCE PLAN BASE

\$11.18

\$22.34

\$27.34

\$38.51

**Employee Only** 

**Employee + Spouse** 

**Employee + Child** 

Family

### LIFE INSURANCE RATES

| NHANCED | Rates per \$1,000 of coverage (after-tax) .4 FTE AND ABOVE EMPLOYEE AND SPOUSE |         |  |
|---------|--|---------|--|
| PLAN    |  |         |  |
| \$18.52 | Younger than 24  | \$0.051 |  |
| \$37.04 | 25 - 29  | \$0.059 |  |
| \$41.74 | 30 - 34  | \$0.068 |  |
| \$61.19 | 35 - 39  | \$0.076 |  |
|         | 40 - 44  | \$0.127 |  |
|         | 45 - 49  | \$0.195 |  |
| S       | 50 - 54  | \$0.348 |  |
|         | 55 - 59  | \$0.568 |  |
| LAN     | 60 - 64  | \$0.873 |  |
|         | 65 - 69  | \$1.687 |  |
|         | 70 or older  | \$2.730 |  |
|         | Child Life Insurance   | \$0.316 |  |

### **VISION PREMIUMS**

|               | <b>VISION PLAN</b> |
|---------------|--------------------|
| Employee Only | \$4.00             |
| Employee + 1  | \$7.99             |
| Family        | \$12.87            |
|               |                    |

### ACCIDENT INSURANCE RATES

| Rates per \$1,000 of coverage (after-tax) |         |  |  |
|---|---------|--|--|
| Employee \$0.031                          |         |  |  |
| Spouse/Domestic Parnter                   | \$0.072 |  |  |
| Child                                     | \$0.041 |  |  |

Visit MIND more information about available discount programs and benefit options.

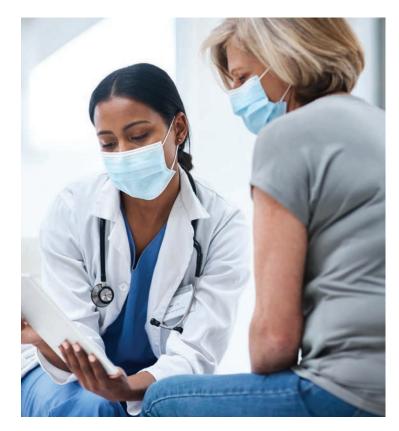
### **BOZEMAN HEALTH PARTNERS NETWORK**

Bozeman Health Partners Network (BHPN) is a specially designed network of providers in our community that have committed to high quality care. This network includes all Bozeman Health providers and many others in southwestern Montana. By utilizing these providers for your healthcare needs, you reduce your out-of-pocket expenses and support our mission for a sustainable, affordable employee benefit programs at Bozeman Health.

The Bozeman Health Partners Network is a group of participating health/medical facilities and providers that employees on a Bozeman Health medical plan participants can utilize the Bozeman Health Partners Network to maximize their health insurance benefits by paying lower out-of-pocket costs for health/medical services. All Bozeman Health care sites are included in the Bozeman Health Partners Network.

### FACILITIES AND CARE SITES INCLUDED IN THE BOZEMAN HEALTH PARTNERS NETWORK—TIER 1

All Bozeman Health care sites Absaroka Emergency Physicians Advanced Medical Imaging **Alpine Orthopedics Barrett Hospital & Healthcare Bozeman Clinic Bridger Orthopedics Community Health Partners** Deer Lodge Medical Center Garden City Professional Offices Gallatin Valley Anesthesia Intercity Radiology Madison Valley Medical Center **Rocky Mountain Surgical Center Ruby Valley Hospital** Yellowstone Pathology



This list is intended to be a guide and not a comprehensive list of participating providers. If you have questions about whether a facility is currently in the Bozeman Health Partners Network versus the BlueCross BlueShield PPO Network, contact Blue Cross BlueShield at 800-447-7828.

#### **BOZEMAN HEALTH 20% SERVICES DISCOUNT**

Another great reason to seek services at Bozeman Health, Bozeman Health proudly provides an employee discount of 20 percent for services received at any Bozeman Health care site/provider (after any insurance payments as applicable). The discount is available to employees and their qualified dependents. To recieve this discount you and/or your eligible dependents simply need to contact Patient Financial Services (406-414-1720) and inform them of your employment with Bozeman Health. Patient Financial Services will validate your employment with human resources, apply your discount, and advise you of your new balance.

### KNEE AND HIP JOINT REPLACEMENT

The Bozeman Health Medical Plan has partnered with Bozeman Health Spine + Joint Institute to provide the best possible care for you.

### "I'M PLANNING TO HAVE A HIP OR KNEE REPLACEMENT."

#### YOU'VE MADE A BIG DECISION.

It's probably a little scary, but you and your surgeon have made this decision possibly because of persistent pain, hoping you can get back to your more normal activity and living an #outdoorhealthylife.

You want to be prepared for surgery. You want the surgery to go well, your discomfort to be controlled, and to be cared for like you're important. You want a speedy recovery without problems, and want to get back to what you miss.

#### WE WANT THAT TOO!

### WE THINK WE'RE YOUR BEST PARTNER ON THIS JOURNEY.

And we're ready to stand behind that pledge like you've not seen before. The Spine + Joint Institute is a partnership between Bozeman Health and local orthopedic surgeons. Working together means better results and a better experience for you.

We're prepared to be with you from the beginning to the end, from working through all other options to surgery, preparing for surgery, and helping you recover to your fullest. Our navigators are your resource even if you wondering if joint replacement is right for you.

#### **BUNDLED PAYMENT**

We are so confident of our quality, we're offering your health plan a warranty on your surgery. You and your medical insurance will continue to be billed for services by those involved in your care. Afterwards, the total cost of your care will be compared to our standard total. If it's above that, we pay back your health plan some of that difference. We are determined to offer healthcare with better value.

If you get a repair to your home, you expect it to work and go right. If it doesn't, you expect the craftsman to take care of the problem until it's fixed and you don't want to keep paying for what should have been done right in the first place. Why should healthcare be different?



#### MY INSURANCE PLAN BENEFITS FROM THIS NOT ME, RIGHT?

We're standing behind your results, and with proven steps in place, we're doing all we can to ensure a good outcome. You'll have a dedicated nurse, helping you through every step. We've designed an evidence-based system specific for knee and hip replacement so that you can get back to doing the activities you love.

### CAN I STILL CHOOSE THE SURGEON I WANT?

We're offering this program for surgeries performed by Bozeman Health Spine + Joint Institute surgeons only at Bozeman Health Deaconess Regional Medical Center and Rocky Mountain Surgery Center. You choose who you see for physical therapy and recovery.

### WHAT'S INCLUDED IN CALCULATING COSTS?

Included is all care you receive related to your joint replacement from 30 days before surgery and the 90 days afterward.

#### WILL QUALITY BE COMPROMISED?

No. Quality and providing safe, expert care is our top priority. With our Spine + Joint Institute being recognized and certified by BCBS and DNV means that we are proven to provide quality care.



### HIGH VALUE MEANS PROVIDING HEALTH, NOT JUST HEALTH CARE.

Bozeman Health Spine + Joint Institute and Blue Cross Blue Shield of Montana have worked together on this program and are pleased to offer it you. Bozeman Health Deaconess Regional Medical Center is one of two hospitals in the state recognized with BCBS Blue Distinction+, and the only program in Montana to be a DNV-accredited Orthopedic Center of Excellence.

As a member enrolled in a Bozeman Health medical plan, if you select this program you will receive the following incentives:

- Access to a high quality care team committed to your recovery
- Lower out-of-pocket costs by utilizing Bozeman Health Partner Providers (see Bozeman Health Partners Network)
- 20% employee discount for care received at any Bozeman Health care site

Contact our Spine + Joint Institute nurse navigator at 406-579-2799 weekdays from 8 a.m. to 5 p.m.



BCBSMT.com/producer/resources/ blue-distinction-centers

Bozeman Health Spine + Joint Institute

### **BENEFITS RESOURCES**

Bozeman Health is committed to providing you meaningful resources for you and your family. We offer benefits and programs that support your total health.

#### **EMPLOYEE ASSISTANCE**

As your employer, Bozeman Health is interested in your total well-being. That is why we offer an Employee Assistance Program through Health Management Systems of America (HMSA). This program provides a counseling service that helps you manage problems before they adversely affect your personal life, health and job performance. Counselors are available to assist you with any issue, 24 hours a day, 7 days a week.

All employees and their household members are eligible for the Employee Assistance Program. This is a free service, strictly confidential, and includes up to five (5) face-to-face counseling visits along with counseling access over the telephone. If your supervisor refers you to the program for a work-related issue, he or she will never be told the nature of your personal event. Assistance is available for, but not limited to, the following personal and work life situations:

- Emotional and Mental Health
- Family
- Relationships and Marriage
- Workplace
- Substance Abuse/Addictions
- Financial
- Legal
- Health and wellness resources

There is a wealth of valuable work and life resources available online, to include legal and financial resources, wellness information, elder care providers, child care providers, and informational resource articles. You can find this and more at www.my-life-resource.com.

Username: hmsa

Password: myresource

To speak with HMSA or to set up a face to face visit, please call 800-847-7240.

#### DON'T HAVE A PERSONAL DOCTOR? YOU SHOULD. HERE'S WHY.

- **Better health.** Getting the right health screenings each year can reduce your risk for many serious conditions. And remember, preventive care doesn't cost you anything.
- A healthier wallet. A PCP can help you avoid costly trips to the emergency room. Your doctor will also help coordinate specialist care, if needed.
- **Peace of mind.** Advice from someone you trust means a lot when you're healthy, but it's even more important when you're sick.



#### **GET CARE FROM YOUR COUCH**

When you don't feel well, or your child is sick, the last thing you want to do is leave the comfort of your home to sit in a crowded waiting room full of other sick people. A virtual consultation, included as a covered service under your medical plan, lets you consult with a doctor from the comfort of your home or office without an appointment. When you seek care through virtual visits, you'll pay a flat copay amount, similar to an office visit. Consider a virtual visit when your doctor isn't available, you become ill while traveling, or you're considering visiting a hospital emergency room for a non-emergency health condition.

Go to <u>www.b2virtualcare.com</u> to schedule a visit.

### FOCUS ON WELL-BEING

Bozeman Health is committed to helping you feel your best and live well. We offer benefits and programs that support your total health and make it easier to pursue your wellness goals.

#### WELL-BEING PROGRAM

Improving community health and quality of life is our mission. Community health starts with our own employee community. As healthcare providers, Southwest Montana looks to us for an example of a workplace and culture where health and well-being are a priority, reflected by our actions.

Bozeman Health continues to invest in the health and well-being of our employees through the Engaged incentive program and Employee Well-being program.

A health screening will not be held in the fall of 2022 to help prevent the spread of COVID-19.

#### **Criteria to earn 2023 Engaged health plan incentive:**

In order to qualify for the 2023 Engaged plan, you must meet the criteria of 200 points earned through our well-being portal by December 31, 2022 and enroll in the Engaged Incentive during Open Enrollment. Additional information, along with a link to our well-being portal, can be found on MIND.

Employees hired October 1, 2022 or later will need to complete 25 points in the Well-being Portal within 90 days of hire and enroll in the Engaged Incentive during New Hire Enrollment to qualify for the Engaged Plan.

#### WELL-BEING PORTAL

To access the Well-being portal (hosted by PartnerWell) Go to <u>www.PartnerWellHealth.com</u> and enter your user name and password or register as a New User if it is the first time you are accessing the portal.

Company ID: BozemanHealth (no spaces)

Member ID: Your Member ID is created by the Portal, is your First Name, Last Name and date of birth (YYYYMMDD)

Example: Michael Simpson and date of birth is March 17, 1968

Member ID will be: MichaelSimpson19680317

\*Note: You will need to enter your First Name as it was provided to us by your HR/Benefits department. This will likely be your legal name versus your nickname.

For quick access on your phone or mobile device, add a shortcut to the portal website so you can enter your actions when you complete them.

For detail instruction on how to register in the Well-being portal or setup a shortcut please see the Wellbeing page on MIND.



#### DENTAL

Delta Dental has a network of participating providers. While you have the option to seek services from a non-network provider, you will receive the maximum benefits under the plan and pay less out of pocket when receiving care from a network provider. You can find participating providers at www.deltadentalins.com.

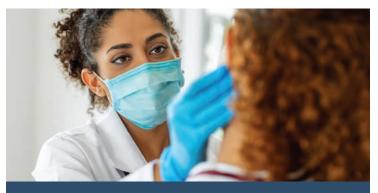
| DENTAL PLANS: WHAT'S THE DIFFERENCE? |           |                   |  |
|--------------------------------------|-----------|-------------------|--|
|                                      | Base Plan | Enhanced<br>Plan* |  |
| Annual deductible<br>(per person/per | \$50      | \$50              |  |

| family)                                     |  |   |
|---|--|---|
| Calendar-year<br>maximum                    | \$750                                      | \$1,500                                   |
| Preventive and/or<br>Diagnostic<br>Services | 100%, deductible and annual maximum waived |   |
| Basic Services                              | 80%  | 80%                                       |
| Major Services                              | Not Covered                                | 50%                                       |
| Orthodontia**                               | Not Covered                                | 50% up to<br>\$1,000 lifetime<br>maximum* |

\* Employees who enroll in the Enhanced Plan must remain enrolled on this plan for two benefit years

\*\* Orthodontia is available only for dependent children up to age 26.

If a non-network provider is used, then expenses are reimbursed based at 80 percent of reasonable and customary (R&C) charges.



#### **MONEY-SAVING TIPS**

Remember, you can use your health spending and/or savings account for qualified out-of-pocket dental and vision expenses.

#### VISION

Bozeman Health offers a vision plan through Vision Service Plan (VSP) to you and your eligible dependents. The vision plan's network of participating providers is provided at <u>www.vsp.com</u>. You will receive the maximum benefit under the plan and pay less out of pocket when you receive care from a network provider.

#### VISION: IN-NETWORK vs OUT-OF-NETWORK

|                                     | In Network   | Out of<br>Network |  |  |  |
|-------------------------------------|--|-------------------|--|--|--|
| Exam (every 12 months)              |  |                   |  |  |  |
| Well Vision Exam                    | \$10 co-pay  | \$45 allowance    |  |  |  |
| Contact Lens Exam                   | up to<br>\$60 co-pay   | Not Covered       |  |  |  |
| Lens                                | es (every 12 mont  | hs)               |  |  |  |
| Single Vision                       | \$25 co-pay  | up to \$30        |  |  |  |
| Lined Bifocal                       | \$25 co-pay  | up to \$50        |  |  |  |
| Lined Trifocal                      | \$25 co-pay  | up to \$65        |  |  |  |
| Frames<br>(every 24 months)         | \$160 allowance<br>+ 20% off<br>remaining<br>balance   | up to \$70        |  |  |  |
| Contact Lens<br>(every 12 months)** | \$160 allowance  | up to \$105       |  |  |  |
| Extra 1                             | Discounts and Sav  | vings             |  |  |  |
| Glasses and<br>Sunglasses           | 20% off<br>(including lens<br>options)<br>for additional<br>glasses and<br>sunglasses<br>30% savings on<br>lens options<br>(progressive,<br>scratch-<br>resistant,<br>anti-reflective<br>coatings) | Not Covered       |  |  |  |
|                                     | Average 15%<br>off the regular<br>price, or 5% off   |                   |  |  |  |

\*\* If you choose to use the plan for contact lenses, then you will be eligible for frames 12 months from the date contact lenses were obtained. The frames allowance will remain every 24 months if you use the plan for purchasing items.



### **INCOME PROTECTION**

Your benefits include programs to help ensure financial security for you and your family. We also provide access to voluntary benefits designed to help you save money on valuable supplemental insurance coverage.

#### BASIC LIFE AND AD&D INSURANCE

Full Time and Part Time employees receive basic life and accidental death and dismemberment (AD&D) insurance so that you can protect those you love from the unexpected. There is no cost to you for this coverage. Your benefit amount will be one (1) times your estimated base salary up to \$350,000. The coverage is provided through Unum.

#### SUPPLEMENTAL LIFE AND AD&D INSURANCE

If you want added protection, you can purchase supplemental life and/or AD&D insurance for yourself. You may elect coverage in increments of \$10,000 up to \$150,000 guaranteed issue and a maximum of 5 times your base annual salary or \$500,000.

#### SPOUSE/DOMESTIC PARTNER VOLUNTARY LIFE AND AD&D INSURANCE

You may also purchase life and/or AD&D insurance for your spouse or domestic partner in increments of \$5,000 up to \$25,000 guaranteed issue and a maximum of \$500,000 or 50% of employee's coverage.

If you wish to increase coverage for you or your spouse or newly elect coverage during open enrollment you will be subject to medical underwriting approval and are required to complete an Evidence of Insurability form. New or increased coverage will not take effect until the new plan year and/or approval by Unum is received.

#### CHILD VOLUNTARY LIFE INSURANCE

Voluntary child life insurance provides \$1,000 of life insurance for children 14 days old to 6 month old and up to \$10,000 of life insurance for children through age 26.

Federal tax law requires Bozeman Health to report the cost of company-paid life insurance in excess of \$50,000 as imputed income. AD&D benefits are paid in addition to any life insurance if you die in an accident or become seriously injured or physically disabled.

### SUPPLEMENTAL LIFE INSURANCE COVERAGE

|                     | Employee                            | Spouse    | Child    |
|---------------------|-------------------------------------|-----------|----------|
| Guarantee<br>Issue  | \$150,000                           | \$25,000  | \$10,000 |
| Increments          | \$10,000                            | \$5,000   | \$2,000  |
| Maximum<br>Benefits | \$500,000 of<br>5x annual<br>salary | \$500,000 | \$10,000 |

#### DISABILITY INSURANCE (for employees that hold a .75 FTE or greater)

The loss of income due to illness or disability can cause serious financial hardship for your family. Our disability insurance program works to replace a portion of your income when you're unable to work. The disability benefits you receive allow you to continue paying your bills and meeting your financial obligations during this difficult time.

### SUMMARY OF LONG TERM DISABILITY BENEFITS

|                          | LONG-TERM DISABILITY  |  |
|--------------------------|---|--|
| Who Pays                 | Employer-paid   |  |
| Benefit Provided         | Up to 60% of<br>base monthly salary   |  |
| Maximum Benefit Payable  | \$10,000 per month  |  |
| Maximum Benefit Duration | Until you're no longer<br>considered disabled or you<br>reach normal retirement age,<br>whichever comes first |  |
| Elimination Period       | 90 days   |  |

#### HAVE YOU NAMED A BENEFICIARY?

The beneficiary will receive the benefit paid by a policy in the event of the policyholder's death. It's important to designate a beneficiary and keep that information up-to-date. Visit Workday <u>www.myworkday.com</u> to add or change a beneficiary.



#### WORKSITE BENEFITS

Bozeman Health offers Aflac as a voluntary benefit option for benefit eligible employees. Aflac pays benefits directly to employee, regardless of other coverage you may have, and the benefit paid can be used as you see fit. All Aflac plans are portable. You can take these plans with you when you leave or retire at the same rate you pay now.

#### AFLAC ACCIDENT

You can't always avoid accidents — but you can help protect yourself from accident-related costs that can strain your budget. Accident insurance supplements your primary medical plan and disability programs by providing cash benefits in cases of accidental injuries. You can use this money to help pay for uncovered medical expenses, such as your deductible or coinsurance, or for ongoing living expenses, such as your mortgage or rent. Benefits are paid in addition to other coverages you may have, such as medical or an AD&D plan. Aflac Accident coverage covers you and your dependents 24/7. Aflac Accident Insurance is guaranteed issue (no underwriting is required to qualify for the coverage). Coverage includes a \$60 wellness benefit per year, per family.

#### AFLAC CRITICAL ILLNESS

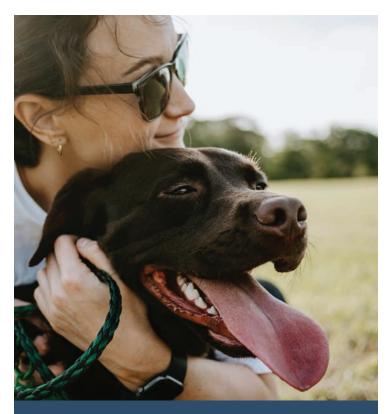
This plan protects against the financial impact of certain covered illnesses such as a heart attack stroke, major organ transplant, or renal failure. You receive a direct lump-sum benefit to cover out-of-pocket expenses for your treatments that are not covered by your medical plan. You can also use the money to take care of your everyday living expenses, such as housekeeping services, special transportation services and day care. Employees can purchase up to a \$100,000 policy. Family coverage is also available.

#### AFLAC HOSPITAL INDEMNITY

A trip to the hospital can be stressful, and so can the bills. Even with a major medical plan, you may still be responsible for copays, deductibles, and other out-of-pocket costs. A hospital indemnity plan provides supplemental payments directly to you — unless assigned to someone else — that you can use to cover expenses that your medical plan doesn't cover for hospital stays. All hospital confinements are covered including routine child birth.

#### AFLAC SHORT TERM DISABILITY

Aflac Short Term Disability offers up to 60 percent of monthly income replacement if you miss work due to an accidental injury, illness or maternity. Accidents are covered from the 1st day of disability. Illness and maternity are covered after 7 or 14 days, your choice at time of enrollment. Benefits do not coordinate with your earned time or EMBH. Aflac offers up to \$3,000 monthly benefit guarantee issue (no underwriting required). Monthly benefits over \$3,000 is subject to limited health questions.



#### **NEW – METLIFE PET INSURANCE**

Bozeman Health is excited to expand your coverage options to your furry friends. With the new direct bill benefit, you can now get pet insurance through MetLife. MetLife offers coverage to any licensed veterinarian in the United States for cats and dogs with options for deductibles, reimbursement levels, and maximums that fit your budget.

Please refer to the information on MIND.

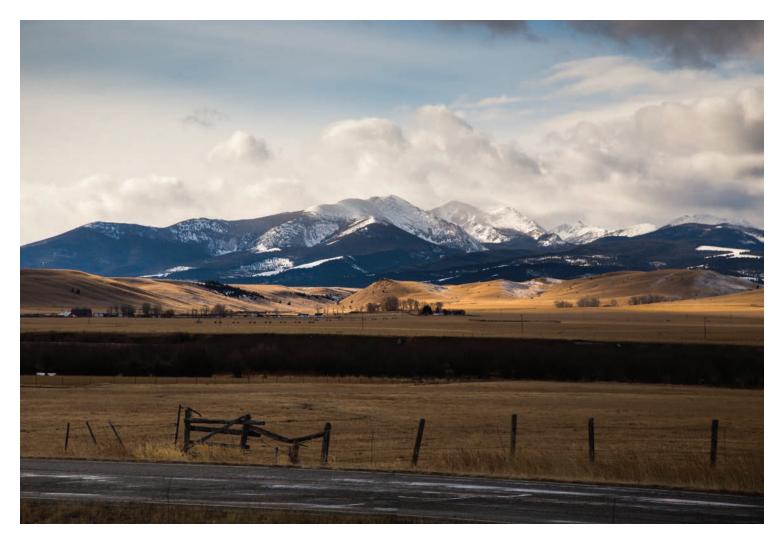
#### AFLAC CANCER

We all know someone affected by cancer. Not only are the medical costs high, it is the non-medical costs that the Aflac cancer policy is designed to help you pay. Aflac pays cash for you to use as you need.

#### LEARN MORE

For additional information on the various policies offered through Aflac, or to enroll, please contact Jeremy Flikkema at 406-539-8282 or p\_flikkema@us.Aflac.com to schedule an appointment.

Please note that any additional coverages beyond those listed here that are purchased through Aflac will not be able to paid for via payroll deduction. Because Aflac is an after tax benefit you have the ability to enroll at any and drop coverage at any time in the year.



#### PAID TIME OFF

#### PAID TIME OFF

Providers may receive Paid Time Off hours specified in your employment agreement and it is to be used for vacation, holidays, leaves of absences, short-term illnesses, and personal time off. Paid Time Off does not rollover from year to year and is not payable upon termination.

#### EXTENDED MEDICAL BANK

Part and full time employees accrue hours into an Extended Medical Bank for each hour worked, per pay period, to be used for employee's personal illnesses or pregnancy. Thirty two (32) consecutive hours of earned time must be used first. Extended Medical Bank hours roll over from year to year and one can accrue a maximum of 240 hours.

#### BEREAVEMENT

After completion of your probationary period, employees may receive up to three (3) shifts of bereavement pay due to the death of an immediate family member.

#### EDUCATION

Eligible employees are eligible for up to sixteen (16) hours of education time per year. It is to be used for non-mandatory, continuing education related to employment/position. It is subject to approval by your manager and you must present evidence of attendance to your manager.

#### JURY DUTY

Employees may elect to receive base rate wages for the time spent away from work to serve jury duty. Total hours paid will not exceed 40 hours and the employee must turn over the pay received from the courts within 10 days to the payroll department.

#### **FMLA**

Employees who have worked over 1,250 hours in the past 12 months and have worked for Bozeman Health for 12 months may be eligible to take care of a personal or family serious medical condition. This leave is up to 12 weeks on a rolling 12 month cycle. For more information and the leave application packet please refer the information on MIND.

#### **RETIREMENT SAVINGS**

#### **BOZEMAN HEALTH RETIREMENT PLAN**

Once you have met certain eligibility requirements, you will be automatically enrolled into the Bozeman Health retirement account. Eligibility requirements include:

- Work first full calendar year
- Complete 1,000 hours of work during the calendar year
- Anniversary year will determine the date the account will open
  - anniversary dates in the first six months of the year =entry date retro to beginning of year
  - anniversary dates in the last six month of the year = entry date the first of the year following

Features of the Bozeman Health retirement plan include:

- 100 percent employer funded at 6 percent of annual salary
- Must work 1,000 hours per calendar year and be employed last calendar day of the year to receive one (1) year of service and 6 percent of funding to the account.
- Fully vested after six (6) years of service.
- Money purchase retirement plan.

You may access your retirement statement by visiting www.randall-hurley.com. You will select 'Login' located in the upper-right corner of the page. Your user ID is your social security number (no dashes), and your password is the last four digits of your social security number. Once logged in, you can view your statement and supporting information in Reports & Forms/Reports & Statements/Participant Statements. Website help is available at 1-800-765-9429.

The statement will provide you with annual contribution, interest gains/losses, account balance, and vesting information. Once eligibility for the retirement account has been met, you will be sent notification of a statement.

Please visit MIND for more information.

#### IT'S ALWAYS THE RIGHT TIME

Call Chad Bunting, Edward Jones Financial Advisor at 406-577-2754 to make an appointment.



#### 403(B) RETIREMENT ACCOUNT

If you wish to contribute money from your paycheck into a tax deferred retirement plan, you have option to a 403b through American Funds. Through American Funds, you will be able to pick from up to 20 different fund families. All fulltime and part-time employees are eligible to participate in the 403b accounts.

#### Other features of the 403b include:

- 100 percent employee funded up to IRS annual limit per year (2023 Annual Limit is \$22,500)
- Employees age 50 and older are eligible to contribute catch-up contributions (Currently an additional \$6,500 annually)
- Accounts can start or stop at any time throughout the year

Visit myretirement.americanfunds.com or contact American Funds at 800-204-3731 to learn more about your options for the funds and current balance within this account.

To begin contributions to a 403b account, please visit MIND for an enrollment packet.

#### 457(B) DEFERRED COMPENSATION (PHYSICIANS ONLY)

Physicians have the option to contribute money from their paycheck to a 457(b) Tax Deferred plan. The 457(b) can be selected in addition to the 403(b) and hospital retirement accounts. Contributions are sent to Merrill Lynch and are invested into the American Funds.

#### Other features of the 457b include:

- 100 percent employee funded up to IRS annual limit per year (2022 Annual Limit is \$20,500)
- Accounts can start or stop at any time throughout the year.

To begin contributions to a 457(b) account, please sign up in Workday. After you have created the account in Workday you will have an action item with the forms you will need to complete and send to Human Resources. Please visit MIND for more information.

### **DISCOUNT PROGRAMS**

#### SERVICES DISCOUNT

Bozeman Health provides a discount of 20 percent off the remaining balance on bills incurred at any Bozeman Health care site or employed provider, including inpatient and outpatient services. The discount is available to the employee and qualified dependents. The employee must meet with Bozeman Health Patient Financial Services to set up the discount.

#### PHARMACY DISCOUNT

Highland Park Pharmacy and Big Sky Pharmacy offer over the counter and prescription fills at cost plus 10 percent. Employees have the option to take the pharmacy discount, or have the prescription run through insurance, but cannot take both.

#### BIG SKY COSMETIC SURGERY + MEDICAL SPA

Big Sky Cosmetic Surgery + Medical Spa, located at Deaconess Regional Medical Center, offers a 10 percent discount on all services and products for employees, as well as a 20 percent discount during the employee's birthday month for a single spa service. This coupon is available on MIND.

#### CAFETERIA/COFFEE SHOP DISCOUNT

Employees receive a 20 percent discount on food and drinks from The Bistro and coffee stands at Deaconess Regional Medical Center. Employees may elect to have the purchases paid through payroll withholding.

### THE GIFT SHOP AT DEACONESS REGIONAL MEDICAL CENTER

Employees at a 0.6 FTE of greater may elect to have Gift Shop purchases paid through payroll withholding following 60 days of employment.

#### FREE EMPLOYEE PARKING

Designated employee parking is provided at every Bozeman Health care site at no cost.

#### DISCOUNTED MEMBERSHIP TO THE RIDGE ATHLETIC CLUBS

A corporate discount is available to all employees. To sign up and/or inquire about the rates, please visit the Ridge Athletic Club at 4181 Fallon Avenue in Bozeman, or call 406-586-1737.

#### DISCOUNTS AND OFFERS ON ENTERTAINMENT AND TRAVEL

Through Tickets at Work, Bozeman Health employees are able to purchase discounted tickets to theme park, zoo, shows, and other area attractions nationwide, as well as receive discounts on hotel and car rentals. The website to visit is www.ticketsatwork.com. The company code is BDHOS.

#### VERIZON WIRELESS DISCOUNTS

Through Verizon, we receive a significant discounts on our personal Verizon accounts to include up to a 22 percent discount on monthly plans, discounts on certain devices, and discounts on accessories.

If you are a current Verizon customer, you can set up the discount online following these directions. You will need to have a company Outlook email address.

- 1. Go to www.verizonwireless.com/getdiscounts
- 2. Enter your WORK email address twice and click on "check for discounts".
- 3. WAIT to receive an email at work (check spam or junk folder if needed).
- 4. Click on the "Register Your Line" link (if you don't see it you may have to right click on the message to download pictures) the web page will load.
- 5. Locate the Existing Customers section (bottom left) and click the "Enroll Now" link.
- 6. Complete information form and submit.
- 7. You can also visit a local Verizon store to set up the discount.

# BENEFIT QUESTIONS?

HERE'S WHO TO CALL.

Please contact the appropriate provider listed below to learn more about a specific benefit plan.



### **BENEFIT QUESTIONS? - WHO TO CALL**

| <b>BENEFIT PLAN</b>   | PROVIDER                             | PHONE NUMBER  | WEBSITE  |
|---|--------------------------------------|---|--|
| Medical and Rx  | Blue Cross Blue<br>Shield of Montana | 800-447-7872  | www.BCBSMT.com   |
| Health Savings<br>Account (HSA) and<br>Flexible Spending<br>Accounts (FSAs) | Health Equity                        | 866-346-5800  | www.HealthEquity.com   |
| Dental  | Delta Dental                         | 800-521-2651  | www.DeltaDentalins.com                                       |
| Vision  | VSP                                  | 800-877-7195  | www.VSP.com  |
| Life, AD&D,<br>and LTD Insurance  | Unum                                 | 800-ASK-UNUM or<br>800-275-8686                         | www.askUNUM.com  |
| Worksite Benefits   | Aflac                                | 406-539-8282<br>or Jeremy at<br>p_flikkema@us.Aflac.com | www.Aflac.com  |
| Wellness Program  | PartnerWell                          | 515-442-8355  | www.PartnerWell.com  |
| Employee Assistance<br>Program (EAP)  | HMSA                                 | 800-767-5320  | www.hmsanet.com  |
| Retirement Programs   | Randall & Hurley                     | 800-765-9429  | www.randall-hurley.com                                       |
|   | Edward Jones                         | 406-577-2754  | www.edwardjones.com/us-en/<br>financial-advisor/chad-bunting |
| Workday   | Online Enrollment                    | www.workday.com/BozemanHealth                           |  |
| Pet Insurance   | Metlife                              | 855-270-7387  | www.metlife.com  |
| Bozeman Health  | Human Resources                      | 406-414-5421  | Benefits@bozemanhealth.org                                   |
|   |                                      |   |  |



# **Bozeman Health**

This guide is intended to describe the eligibility requirements, enrollment procedures, plan highlights, and coverage effective dates for the benefits offered by Bozeman Health. It is not a legal plan document and does not imply a guarantee of employment or a continuation of benefits. While the guide is a tool to answer many of your benefit questions, full details of the plans are contained in the Summary Plan Descriptions (SPDs), which govern each plan's operation. The noted plan changes in this guide may serve as a Summary of Material Modifications (SMM) to the SPD. Whenever an interpretation of a plan benefit is necessary, the actual plan documents will prevail.