

2025 Benefits Summary



We strive to provide our employees with benefits that are comprehensive and enable them to get healthy and stay healthy.



With "people" as one of our core values, valuing our employees is a top priority for Grace Cottage Family Health & Hospital. We care about you, your family and your overall health and well-being. We are proud to offer a comprehensive and competitive benefits package designed to help our people stay healthy, balance work and life responsibilities, protect their assets and plan for a secure financial future.

Please take some time to review the many choices in this year's Benefits Summary, designed to support a healthier you!

Benefit	Eligibility	Waiting Period	Contact Information
Medical, HRA, and Pharmacy	Minimum 20 hours/week	First of the month following one month of employment	Health Plans Inc (Medical, HRA) 888-335-9400 www.healthplansinc.com RxBenefits (Pharmacy) 800-334-8134 Optumrx.com
Dental Insurance	Minimum 32 hours/week	First of the month following one month of employment	Northeast Delta Dental 800-832-5700 www.nedelta.com
Vision Insurance	Minimum 32 hours/week	First of the month following one month of employment	<u>VSP: Vision Insurance</u> 800-877-7195 www.vsp.com
Flexible Spending Accounts (FSA/DCA)	Minimum 20 hours/week	First of the month following one month of employment	<u>Voya</u> 833-232-4673 www.HASinfo@voya.com
Life & Disability	Minimum 32 hours/week	First of the month following one month of employment	Reliance Standard 800-351-7500 www.customercare.rsli.com
Accident, Critical Illness & Hospital Indemnity	Minimum 20 hours/week	First of the month following one month of employment	<u>Voya</u> 877-236-7564 www.voya.com
Wellness Program	All staff	Date of Hire	Mediterranean Wellness: Wellness Program 800-977-6337 www.mymedwellness.com/login
401(k)	Eligible to participate after 3 months of service and attained age of 18	First day of the month following completion of eligibility	<u>Voya:</u> <u>Retirement Plan</u> 800-584-6001 www.voyaretirementplans.com
Employee Assistance Program	All staff	Date of Hire	KGA 800-648-9557 Company code: gracecottage My.KGALifeServices.com
Pet Insurance	Minimum 20 hours/week	First of the month following one month of employment	Nationwide Pet Insurance 877-738-7874 www.petinsurance.com/gracecottage
ID Theft Protection & Legal Insurance	Minimum 32 hours/week	First of the month following one month of employment	Legal Shield: Voluntary Legal Protection 1-800-654-7757 www.legalshield.com/info/gracecottage
Travel Assistance	Minimum 32 hours/week	First of the month following one month of employment	Assist America Inc.: Employee Travel Assistance Program 800-872-1414* (US, Canada, Bermuda) 609-986-1234** (Outside of US) medservices@assistamerica.com
FMLASource	Based on federal guidelines	Based on federal guidelines	FMLASource 877-462-3652 www.fmlasource.com



Thinkhealth.priorityhealth.com

Qualifying Events:

You have 30 days after the event to make a change.

A change in your situation — like getting married, having a baby, or losing health coverage — that can make you eligible for a Special Enrollment Period, allowing you to enroll in health insurance outside the yearly Open Enrollment Period.

Medical Coverage & HRA

Grace Cottage is pleased to offer their full-time employees (30+ hours per week) and part time employees (20-29 hours per week) 3 plan choices through Health Plans, Inc. An employee is eligible to participate on the first day of the month following one month of employment.

	<u>Platinum Plan</u>	<u>Gold Plan</u>	<u>Silver Plan</u>	
Deductible & Out-of-Pocket				
Annual Deductible Single Family	\$6,450 \$12,900	\$6,450 \$12,900	\$6,450 \$12,900	
Annual HRA Contribution Single Family	\$4,000 \$8,000	\$3,000 \$6,000	\$1,400 \$2,800	
Annual Out-of-Pocket after HRA Single Family	\$2,450 \$4,900	\$3,450 \$6,900	\$5,050 \$10,100	
Preventive Care				
Routine Physicals & Gynecological Exams	100%	100%	100%	
Other Services				
Office Visits (Primary & Specialty), Chiropractor (12 visits per calendar year) Diagnostic Lab & X-Ray CT, MRI, & PET Scan Outpatient Surgery Inpatient Hospital Behavioral Health Hospital Service Behavioral Health Office Visit Occupational and Physical Therapy (30 visits per calendar year) Speech Therapy Ambulance Emergency Room Urgent Care	100% after deductible	100% after deductible	100% after deductible	
Prescription Drug Benefits (Rx Benefits)				
Prescription Drug Out-of-Po	ocket Maximum: Sing	gle \$1,800 Family \$3,6	000	
Retail Pharmacy & Mail Order	All prescriptions are covered at 100% once the deductible has been met			
Wellness Drugs		100% deductible waive	ed	

Health Reimbursement Arrangement (HRA) To offset your deductible, Grace Cottage funds an HRA account, through Health Plans, Inc. each year beginning on January 1 for each employee who is enrolled in the health plan. Funds can only be used for services that are eligible to be covered by Health Plans, Inc. under the medical plan. You will be asked to provide receipts to prove that the charges you have put on your card are eligible for reimbursement. Claims can also be reimbursed by paper claim form if you are unable to use your card at a provider. Funding amounts will vary based on the medical plan you choose.

Understanding Your Health Plan

Health Plans Inc

Manage your plan online with MyPlan through HPI. You'll have 24/7 access to your plan and account details.



Register in Minutes!

- Go to the website listed on the back of your member ID card (it will be at the top)
- Click on the **Members** section and the link to **Get Registered**
- Enter your information to create your username and password

If you are a dependent, be sure to have the five digit home ZIP Code and the last four digits of the employee's (plan subscriber's) social security number.

See a Doctor Now, Wherever you are

Through HPI's affiliation with Harvard Pilgrim, Doctor on Demand gives you physician video visits from your phone, tablet, or computer.

It's fast and easy

- •Quickly connect with a doctor on your computer or mobile devise the average wait time is only two minutes
- •No need to wait to schedule an appointment
- •Pay only your office visit/PCP-level cost share
- •Referrals are not required
- Paperless prescriptions are sent directly to your pharmacy

How it Works

- 1. Download the app on your mobile device or access doctorondemand.com/health-plans-inc.
- 2. Create your account and enter insurance (choose Health Plans Inc.) and pre-consult information.
- 3. Complete a questionnaire of current symptoms and medical history.
- 4. Pay cost-share via app or website
- 5. Consult with a Doctor on Demand board certified provider
- 6. Receive an email follow up after the visit to share with your PCP, or request that it be sent directly to your PCP.



2025 Full-Time Rates (30+ Hours)

Annual Wages < Than 50K

Semi-Monthly Paycheck Cost	Platinum	Gold	Silver
Employee Only	\$80.42	\$47.29	\$29.94
EE + Spouse / Domestic Partner	\$128.65	\$75.65	\$47.89
EE + Child(ren)	\$112.56	66.21	\$41.91
Family	\$201.01	\$118.23	\$74.83

Annual Wages 50-100K

Semi-Monthly Paycheck Cost	Platinum	Platinum Gold		
Employee Only	\$114.60	\$81.47	\$64.13	
EE + Spouse / Domestic Partner	\$183.35	\$130.35	\$102.58	
EE + Child(ren)	\$160.42	\$114.07	\$89.77	
Family	\$286.48	\$203.69	\$160.30	

Annual Wages > 100K

Semi-Monthly Paycheck Cost	Platinum	Gold	Silver
Employee Only	\$148.79	\$115.66	\$98.31
EE + Spouse / Domestic Partner	\$238.05	\$185.05	\$157.29
EE + Child(ren)	\$208.28	\$161.93	\$137.63
Family	\$371.94	\$289.16	\$245.76

Annual Salary is based on a Full-Time equivalency (1 FTE)

2025 Part-Time Rates (20-29 Hours)

Annual Wages < Than 50K

Semi-Monthly Paycheck Cost	Platinum	Gold	Silver
Employee Only	\$120.62	\$70.93	\$44.91
EE + Spouse / Domestic Partner	\$192.98	\$113.48	\$71.83
EE + Child(ren)	\$168.84	\$99.31	\$62.86
Family	\$301.52	\$177.34	\$112.24

Annual Wages 50-100K

Semi-Monthly Paycheck Cost	Platinum	Gold	Silver
Employee Only	\$171.90	\$122.21	\$96.19
EE + Spouse / Domestic Partner	\$275.02	\$195.52	\$153.88
EE + Child(ren)	\$240.63	\$171.11	\$134.65
Family	\$429.72	\$305.54	\$240.44

Annual Wages > 100K

Semi-Monthly Paycheck Cost	Platinum	Gold	Silver
Employee Only	\$223.18	\$173.49	\$147.47
EE + Spouse / Domestic Partner	\$357.08	\$277.58	\$235.93
EE + Child(ren)	\$312.42	\$242.89	\$206.44
Family	\$557.92	\$433.74	\$368.65

Annual Salary is based on a Full-Time equivalency (1 FTE)

Health Advocate



Caring support for the whole family

Our services are available to you, your spouse/partner, dependents, parents, and parents-in-law.





Health Advocate is here to help you and your family:

During your first call, you will be assigned a Personal Health Advocate who will begin helping you right away.

Personal Health Advocates are typically registered nurses, supported by medical directors and benefits and claims specialists. They'll help cut through the red tape and assist with complex conditions, find specialists, address eldercare issues, clarify insurance coverage, work on claim denials, help negotiate fees for non-covered services and get to the heart of your issue.

Save time, money, and worry

- Understand your coverage for medical, dental and vision services; know your deductibles, and copays
- Get help resolving claims and billing issues, check that your out-of-pocket costs are correct

Feel confident that your medical care & treatment is on track

- Get answers to your questions so you can make the right choices for your care
- Connect with leading specialists for second opinions; get support for pre-authorizations and transferring records

HealthAdvocate



866-695-8622

answers@HealthAdvocate.com HealthAdvocate.com/members





Expert healthcare support when you need it most

- Understand health conditions, diagnoses and treatments; explore the latest treatment options
- Get connected to the right in-network doctors and specialists; get help with appointments and transferring records

Get help anytime, anywhere online or through our mobile app

- Quickly connect with an advocate in real time through
- Learn all about your Health Advocate services and the many ways we can help you and your family

^{*}You must be enrolled in one of the Grace Cottage medical plans in order to qualify for this benefit.

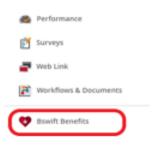
Employee Benefits Center & Paylocity Self-Service Portal

We understand that our employees, YOU, are our most valuable resource. Therefore, we are committed to providing you with the most cost-effective benefit programs possible. *Paylocity* is our online Payroll and Benefits center. If you have not yet signed into Paylocity, this is the time!

Scan the QR code to access Paylocity







To review your benefit elections at any time, under HR & Payroll in the upper left-hand corner of the screen, click on *Bswift Benefits*. This will bring you directly into your B-Swift profile. No additional login required!

Employee Benefit Center (EBC)

This site has been created to provide you with an efficient way to obtain information and answers to your questions regarding your employee benefit plans on a 24/7 basis.

Your benefits are an important part of your total compensation, so we invite you to familiarize yourself with details of these plans and encourage you to seek clarification when necessary. Our goal is to empower you through the EBC tool to meet your specific needs, as well as enhance your understanding of our benefit programs. Specifically, you will have access to the various benefit summaries, SBC's, plan documents, forms, and links to important sites.

Should you have any questions regarding your benefits or any other component of your employment with us, we invite you to contact our Human Resources (HR) Department at hr@gracecottage.org.

To learn more about the benefits programs Grace Cottage has to offer please visit:

http://gracecottage.trgportal.com/

Username: **gracecottage** Password: **benefits**





Dental Coverage

		Outline of Covered Ser	vices	Buy- Down	Basic	Enhanced
Coverage A	focused, an X-rays - cc X-rays onc Brush bio PREVEN Cleanings - in a 12-mor Fluoride to Space main	as – 2 in a 12-month period, this d comprehensive evaluations omplete series or panoramic film te in a 12-month period, X-rays of psy once in a 12-month period wTIVE: - 2 in a 12-month period under the period under the thanced of the period under the 2 in a 12-month period under the 3 in a 12-mo	ne Buy-Down and Basic options; 4 otion od to age 19	100%	100%	100%
Coverage B	Amalgam (s ORAL S Surgical an ENDOD Root canal PERIOD Periodonta Down and Note: Clear (Coverage E Treatment Clinical Cro DENTU Repair of a	ONTICS: al Maintenance (Cleaning) – 2 in Basic options; 4 in a 12-month p	a 12-month period under the Bu eriod under the Enhanced option routine (Coverage A) or periodonta mber of allowed cleanings. e per site	50%	80%	80%
Coverage			ge); complete dentures Rebase and	N/A	50%	50%
Coverage D	ORTHODONTICS: Verage D Correction of crooked teeth for children and adults			N/A	N/A	50%
Calendar Year	Maximum	for services covered unde	er A, B and C	\$1,000	\$1,500	*\$2,000
Orthodontic L	ifetime M	aximum (per person)		N/A	N/A	\$2,000
Calendar Year	Deductible	e per Person/Family (Cov	rerage B and Conly)	N/A	\$25 / \$75	\$25 / \$75
Semi-Moi	nthly	Employee Only	EE+ Spouse/DP	EE + Child(re	n)	Family

Semi-Monthly	Employee Only	EE+ Spouse/DP	EE + Child(ren)	Family
Buy-Down	\$0.00	\$0.43	\$8.18	\$21.92
Basic	\$0.00	\$18.11	\$18.99	\$49.45
Enhanced	\$0.00	\$21.67	\$42.41	\$58.29

Delta Dental Programs

Health Through Oral Wellness (HOW):



A healthy mouth is part of a healthy life, and Northeast Delta Dental's innovative HOW works with your dental benefits to help you achieve and maintain better oral wellness. HOW is all about you because it's based on your specific oral health risk and needs. Best of all, it's secure and confidential. Here's how to get started:

- **1.** Go to <u>www.healththroughoralwellness.com</u> and click on "Register Now".
- 2. After you register, please take the free oral health risk assessment by clicking on "Free Assessment" in the Know Your Score section of the website.
- **3.** The next step is to share your results with your dentist at your next dental visit. Your dentist can discuss your results with you and perform a clinical version of the risk assessment. Your dentist can discuss your results with you and perform a clinical version of the risk assessment

Philips Oral Health Product Discounts:

Qualifying Northeast Delta Dental patients are now eligible for Philips Oral Health products.

- Verify you have the HOW program attached to your dental plan
- Visit your dentist and have a Pre-Viser risk assessment completed to qualify for a discount

For more information, visit:

www.healththroughoralwellness.com/Patients/home-care-offer/





Registration is simple:

- 1. Go to www.nedelta.com and click on Patients
- 2. Click on REGISTER HERE under Benefit Lookup login
- 3. Complete the three-step registration process Note: you will need your subscriber ID number (found on your ID card or by calling Customer Service)

*Please note: ID cards are <u>not</u> sent to participants each year and are not required when visiting your dentist's office. You simply let your provider know you have coverage with Delta Dental and they can look up your plan information directly from their Delta Dental portal.





- Extra cleanings
- Fluoride varnish or topical fluoride
- Oral hygiene instruction
- Sealants
- Nutritional counseling
- Tobacco cessation counseling















Vision Coverage

Grace Cottage offers vision coverage to all full-time employees working a minimum of 32 hours per week. An employee is eligible to participate on the first day of the month following one month of employment.

Lo	ow Plan Coverage with a VSP Provider		Hi	igh Plan Coverage with a VSP Provider	
WELLVISION EXAM	Focuses on your eyes and overall wellness Every calendar year	\$10	WELLVISION EXAM	Focuses on your eyes and overall wellness Every calendar year	\$10
ESSENTIAL MEDICAL EYE CARE	Retinal screening for members with diabetes 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. Coordination with your medical coverage may apply. Ask your VSP doctor for details. Available as needed	\$0 per screening \$20 per exam	ESSENTIAL MEDICAL EYE CARE	Retinal screening for members with diabetes 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. Coordination with your medical coverage may apply. Ask your VSP doctor for details. Available as needed	\$0 per screening \$20 per exam
PRESCRIPTION	GLASSES	\$25	PRESCRIPTION	GLASSES	\$25
FRAME*	\$150 featured frame brands allowance \$130 frame allowance 20% savings on the amount over your allowance \$130 Walmart®/Sam's Club® frame allowance \$70 Costco® frame allowance Every other calendar year	Included in Prescription Glasses	FRAME ⁺	\$270 featured frame brands allowance \$250 frame allowance 20% savings on the amount over your allowance \$250 Walmart®/Sam's Club® frame allowance \$135 Costco® frame allowance Every calendar year	Included in Prescription Glasses
LENSES	Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children Every calendar year	Included in Prescription Glasses	LENSES	Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children Every calendar year	Included in Prescription Glasses
LENS ENHANCEMENTS	Standard progressive lenses Anti-glare coating Tints/Light-reactive lenses Scratch-resistant coating Premium progressive lenses Custom progressive lenses Average savings of 30% on other lens enhancements Every calendar year	\$0 \$0 \$0 \$0 \$0 \$95 - \$105 \$150 - \$175	LENS ENHANCEMENTS	Standard progressive lenses Anti-glare coating Tints/Light-reactive lenses Scratch-resistant coating Premium progressive lenses Custom progressive lenses Average savings of 30% on other lens enhancements Every calendar year	\$0 \$0 \$0 \$0 \$0 \$75 - \$105 \$150 - \$175
CONTACTS (INSTEAD OF GLASSES)	\$130 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) Every calendar year	Up to \$60	CONTACTS (INSTEAD OF GLASSES)	\$250 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) Every calendar year	Up to \$60
LIGHTCARE***	\$130 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts Every other calendar year	\$25	LIGHTCARE™	\$250 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts Every calendar year	\$25

†Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change. ‡Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details. +Coverage with aretail chain may be different or not apply.

Vision Rates

Semi-Monthly Paycheck Cost



Plan Name	Employee Only	Employee + Spouse/DP	EE + Child(ren)	Family
High Plan	\$1.42	\$2.27	\$2.31	\$3.73
Low Plan	\$0.80	\$1.28	\$1.31	\$2.11

Additional VSP Benefits

Do you know what is covered under your vision plan?

- Treatment for eye pain, or conditions like pink eye are covered.
- Tests to diagnose sudden vision changes
- · Pictures of your eyes to detect and track eye conditions
- Exams to monitor cataracts
- Retinal Screenings

Find out if laser surgery is right for you. Your VSP coverage can save you an average of 15% off the regular price.

- 1. Visit www.vsp.com to get details about the program, learn what to expect during surgery, and to locate a VSP Laser VisionCare doctor.
- 2. Confirm your eligibility before scheduling an appointment by calling 800-877-7195.
- 3. Call your VSP Laser VisionCare doctor to verify that they participate in the program.
- 4. Schedule a complimentary screening.

Enjoy Low Prices on Hearing Aids

TruHearing® is making hearing aids affordable by providing exclusive savings to all VSP® Vision Care members. You can save up to \$2,400 on a pair of hearing aids with TruHearing pricing. What's more, your dependents and even extended family members are eligible, too.

In addition to great pricing, TruHearing provides you with:

- · Three provider visits for fitting and adjustments
- 45-day trial
- Three-year manufacturer's warranty for repairs and one-time loss and damage
- 48 free batteries per hearing aid

Plus, with TruHearing you'll get:

- Access to a national network of more than 3,800 licensed hearing aid professionals
- Straightforward, nationally fixed pricing on a wide selection of the latest brand-name hearing aids
- Deep discounts on replacement batteries shipped directly to your door

Here's how it works:

- 1. Call TruHearing at 877.396.7194. You must mention VSP
- 2. Schedule exam with a local provider through TruHearing
- 3. Attend Appointment

Best of all, if you already have a hearing aid benefit from your health plan or employer, you can combine it with this program to maximize the benefit and reduce your out-of-pocket expenses.

Learn more about this VSP Exclusive Member Extra at www.truhearing.com/vsp.



Flexible Spending Accounts

Flexible Spending Accounts can help you pay health care and dependent care expenses on a pre-tax basis. By anticipating your family's health care and dependent care expenses for the next year and setting aside money, you can actually lower your taxable income.

Healthcare Flexible Spending Account (FSA)

This benefit allows employees to use pre-tax dollars for certain IRS-approved expenses. FSAs are funded through payroll deductions. The annual maximum amount you may contribute is updated annually per IRS guidelines. A portion of unused FSA dollars may be rolled over into the following plan year to use for eligible expenses. However, amounts of unused dollars over what is allowed by the IRS will be forfeited. Over-the-counter medications are not reimbursable through the FSA unless you have a prescription from your physician.

Some examples include:

- Hearing services, including hearing aids and batteries
- •Vision services, including contact lenses, contact lens solution and eyeglasses
- •Dental services and orthodontia
- •Medical and Rx deductibles; Co-payments and Co-insurance

A full list of Qualified Medical Expenses can be found on the EBC: https://fsastore.com



Dependent Care FSA

The dependent care flex account allows you to reimburse yourself with pre-tax dollars for daycare expenses for your children under age 13 and other qualified dependents. You can contribute up to \$5,000* per year; \$2,500* if you and your spouse file your taxes separately.

Eligible Day Care Expenses:

- •Childcare/Adult Care by a licensed childcare facility for children under age 13 who qualify as dependents on your federal income tax return
- •Childcare/Adult Care for children or adult of any age who are physically or mentally unable to care for themselves and who qualify as dependents

Ineligible Day Care Expenses

- •Child support payments
- Food, clothing and entertainment
- •Educational supplies and activity fees
- •Cleaning and cooking services not provided by the day care provider
- Overnight camp



Life & AD&D Insurance

Basic Life & AD&D Insurance

Life insurance offers you and your family important financial protection. AD&D (accidental death & dismemberment) doubles the benefit value if death results from an accident		
Benefit	\$25,000 Flat Benefit	
	Grace Cottage also pays for \$5,000 of coverage on the spouse or domestic partner of an employee and \$3,000 on dependent children of the employee (Child(ren): birth through 6 months: \$500; 6 months through age 26: \$3,000.)	
Age Reduction	At age 70 coverage decreases to 50% of the amount of coverage you had prior to age 70.	
Conversion	Included (You can convert this policy if you terminate employment)	
Contributions	100% Employer Paid	

Voluntary Life Insurance & AD&D Insurance

You can purchase additional insurance on yourself, spouse, domestic partner, or children.

You can elect up to \$500,000 in \$10,000 increments for yourself. Amounts over the guaranteed issue of \$200,000 will be subject to Evidence of Insurability for new hires. All new enrollments and increases to voluntary life coverage amounts will require Evidence of Insurability during this year's open enrollment.

You can elect up to \$250,000 in \$5,000 increments for your spouse or domestic partner. Amounts over the guaranteed issue of \$25,000 will be subject to Evidence of Insurability. Spouse/Domestic Partner benefit cannot exceed 100% of employee's election.

You can elect up to \$10,000 in \$2,000 increments for your dependent children. All amounts are guaranteed issue. Benefits begin at 14 days and terminate at age 19, 26 if a full-time student. The employee must be insured in order for dependents to be covered.

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Age Reduction	At age 70 coverage decreases to 50% of the amount of coverage you had prior to age 70.
Conversion	Included (You can convert this policy if you terminate employment)
Contributions	100% Employee Paid

For rates & details, please visit the EBC or the bswift online enrollment system

Disability Insurance

Voluntary Short Term Disability (Hourly Employees)

Short Term Disability, also known as Weekly Income, covers employees who become disabled as a result of an injury or sickness for a temporary period. It replaces a percentage of the income employees would have earned had they been able to continue working. It protects an employee's greatest asset, the ability to earn an income.

Benefits begin to pay on the 1st day of the disability if it was the result of an accident or on the 8th day of the disability if it was the result of an illness. Benefits are 60% of your pre-disability income, up to \$1,250 per week. Benefits are paid, as long as you remain disabled, for up to 26 weeks. No Evidence of Insurability is required for new voluntary short term disability enrollments as benefits are subject to pre-existing conditions.

Contributions

100% Employee Paid

Short Term Disability (Salaried Employees)

Benefits begin to pay on the 1st day of the disability if it was the result of an accident or on the 8th day of the disability if it was the result of an illness. Benefits are 66.7% of your pre-disability income, up to \$2,500 per week. Benefits are paid, as long as you remain disabled, for up to 26 weeks.

Contributions

100% Employer Paid

Long-Term Disability (Salaried Employees)

RELIANCE STANDARD

Disability income protection insurance provides a benefit for "long term" disability resulting from a covered injury or sickness. Benefits begin at the end of the elimination period and continue while you are disabled up to the maximum benefit duration.

You must be disabled, and have a loss of income, for 180 calendar days before benefits begin to pay out. Benefits are 60% of your pre-disability income, up to the maximums listed below. Benefits are paid, as long as you remain disabled, until age 65 or as defined in the policy.

Full-Time Salaried Employees earning less than \$70,000 annually = up to \$7,500/monthly Full-Time Salaried Employees earning more than \$70,000 annually = up to \$15,000/monthly

Contributions

100% Employer Paid

<u>Travel Assistance (On Call International)</u>

Travel assistance services provide medical assistance services for employees of our Policyholders.

Whenever you are on a trip in a foreign country or 100 miles or more from home, you are eligible for a wide array of medical and travel assistance services.

The total of all services in connection with emergency evacuation, medically necessary repatriation, transportation of a family member or friend, return of dependent children, and repatriation of remains are subject to a limit of \$100,000 per person per event.

In the U.S. call: (800)456-3893 Worldwide call: (603) 328 -1966

Accident, Critical Illness, Hospital Indemnity

The Accident, Critical Illness, and Hospital Indemnity plans are 100% voluntary and employee paid.

Accident Insurance: When you, your spouse, domestic partner, or child has a covered accident, like a fall from a bicycle that requires medical attention, you can receive cash benefits to help cover the unexpected costs. You can use accident benefits to help cover related expenses like lost income, childcare, deductibles, and co-pays. Accident benefits can be used however you want, and it pays in addition to any other coverage you may already have. Benefits are paid directly to you.

You can elect to cover yourself, your spouse or domestic partner, and your children up to age 26. Your employer offers you a choice of (2) plans.

Standard Plan

Hospital Admission: \$1,500 Urgent Care/Emergency Room Visit: \$225 Ground Ambulance/Air Ambulance: \$400/\$1,500 Chiropractor or Physical or Occupational Therapy:

> Medical Equipment: \$200 Major Diagnostic Exams: \$275 X-Ray: \$75

\$45

Burns: range from \$2,000 to \$20,000 Eye Injury (removal of foreign object): \$300 Concussion: \$225

Emergency Dental (Crown/Extraction): \$350/\$100 And more!

Enhanced Plan

Hospital Admission: \$2,250
Urgent Care/Emergency Room Visit: \$300
Ground Ambulance/Air Ambulance: \$600/\$2,500
Chiropractor or Physical or Occupational Therapy:
\$75

Medical Equipment: \$500 Major Diagnostic Exams: \$500 X-Ray: \$100

Burns: range from \$3,200 to \$25,600 Eye Injury (removal of foreign object): \$350

Concussion: \$450

Emergency Dental (Crown/Extraction): \$480/\$180

And more!

<u>Critical Illness Insurance</u>: When you, your spouse or domestic partner, or child is diagnosed with a covered condition, you can receive a cash benefit to help cover the unexpected costs not covered by your health plan. Critical Insurance benefits can be used however you want, and it pays in addition to any other coverage you may already have. Benefits are paid directly to you. What's more, all family members on your plan are eligible for a wellness-screening benefit, also paid directly to you once each year per covered person.

You can elect to cover yourself, your spouse or domestic partner, and your children up to age 26.

<u>Hospital Confinement Indemnity Insurance</u>: provides a daily fixed indemnity benefit for eligible hospital confinements. Employees can use the benefit as they choose – for instance, to help offset copays, coinsurance or deductibles that may be tied to a hospitalization or lost time from work.

You can elect to cover yourself, your spouse or domestic partner, and your children up to age 26.

Standard Plan

Hospital Admission (1st day of confinement): \$1,000 Daily Benefit: \$100

Enhanced Plan

Hospital Admission (1st day of confinement): \$1,000 Daily Benefit: \$200



Voluntary Pet Insurance

Plan Summary

Nationwide pet insurance helps you cover veterinary expenses so you can provide your pets with the best care possible without worrying about the cost. Simply pay for coverage through a convenient after-tax payroll deduction

Coverage Highlights

You have a choice of reimbursement options so you can find coverage that fits your budget. All plans have a \$250 annual deductible and \$7,500 maximum annual benefit. Coverage includes:

- Accidents
- Illnesses
- Hereditary and congenital conditions
- Cancer
- Dental diseases
- Behavioral treatments
- Rx therapeutic diets and supplements
- And more

Included with Every Policy

vethelpline[®]

- 24/7 access to veterinary experts (\$110 value)
- Available via phone, chat, and email
- Unlimited help for everything from general pet questions to identifying urgent care needs

PetRxExpress[™]

- Save time and money by filling pet prescriptions at participating in-store retail pharmacies across the U.S.
- Rx claims submitted directly to Nationwide
- More than 4,700 pharmacy locations



Retirement Plan & Medicare Navigation

Retirement Savings Plan



- Eligible to participate after 3 months of service and attained age of 18.
- You will enter the plan the first day of the month following the completion of eligibility requirements.
- You will be automatically enrolled at a 6% pre-tax contribution unless you opt-out.
- You may defer 1% 90% of your eligible earnings on a pre-tax or ROTH after-tax basis. Annual
 contribution limits are established by the IRS annually. Catch-up contributions are available for
 employees aged 50 or older.
 - In 2025, the contribution limit for the calendar year is \$23,500. The catch-up contribution is \$7,500 for calendar year 2025.
- Grace Cottage will make a matching contribution of 50% of an employee's elective deferrals up to 6% of eligible compensation. To maximize the employer match, you must contribute at least 6% to receive a 3% matching contribution.
- Matching contributions are vested 100% after three years of service. If you do not attain 3 years of service, you will be 0% vested in the employer contributions in your account.

To enroll, go to: <u>Voya Online Enrollment</u> or call 888-311-9487.

Need help with rolling your balance from a previous employer's retirement plan? Contact the VOYA ACT (account consolidation team) below:





Give us a call today **1-866-865-2660.**

Medicare Navigation (Smart Connect)

Medicare planning is complex and it is important that you have an advocate who can provide you the proper Medicare education and guidance.

There are different paths you can choose with Medicare plans and it can be very time consuming and difficult to filter through these options yourself. It is important that you find the appropriate plan in your area that best fits your medical needs and is within your financial budget.

Please visit the EBC to find resources that will simplify the Medicare approach by providing you the needed education, plan evaluation and enrollment assistance.



SmartConnect 1-833-460-4458 | TTY: 711 https://gps.smartmatch.com/carlosgotis





Employee Assistance Program (EAP)/Work-Life Program & FMLA Services



For support, contact KGA at:

www.my.kgalifeservices.com

800-648-9557

info@kgreer.com



For easy access:

Download our app, KGA Mobile:





KGA Overview

Who would assist me?

KGA licensed Counselors and Work-Life Consultants are highly skilled professionals with deep experience. Beginning with your initial contact, the same KGA staff member will work with you to ensure continuity and quality.

What happens to information about me?

All contact with KGA is kept confidential. No information, including your name, can be released to your employer or anyone else without your consent. The only exceptions are those required by law, such as when someone is determined to be a threat to themselves or others.

FMLASource

Grace Cottage is pleased to partner with FMLASource to provide an easy and convenient online way to request, track and manage family and medical leave.

Employees can:

- Request leave
- Check eligibility for leave
- · Download medical certifications
- Check the status of a leave request
- Keep track of leave time

KGA provides you free and confidential access to:

EMOTIONAL AND MENTAL HEALTH COUNSELING

Support for addiction, anxiety, depression and everyday stress in the moment when you need it

CRISIS SUPPORT

Expert help for dealing with grief and the trauma that comes with upsetting events

CAREER SUPPORT

Consultations on career moves, job search strategies, interviewing skills, and resume development

ELDERCARE RESOURCES

Consultations and referrals for all types of eldercare needs and caregiving support

FINANCIAL CONSULTATION

Help with debt management, budgeting and financial planning

LEGAL ASSISTANCE®

Consultation with an attorney and referrals for legal issues

PARENTING RESOURCES

Referrals for all types of childcare needs and parenting support

CONVENIENCE SERVICES

Referrals for family/home needs from pets and contractors to continuing education and transportation

NUTRITION CONSULTATION

Consultations with a nutritionist on weight management, allergies and other dietary concerns

Learn about federal FMLA regulations: **fmlasource.com**

FMLA Source®



Legal Shield

HAVE YOU EVER?

	 Needed your will prepared or updated Been overcharges for a repair or paid an unfair bill Had trouble with a warranty or defective product Signed a contract Received a moving traffic violation Had concerns regarding child support 	 Been pursued by a collection agency Worried about being a victim of Identity Theft Been concerned about your child's identity Lost your wallet Worried about entering personal information online Feared security of your medical information
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The Legal Shield Membership Includes:

- Dedicated Law Firm
- Legal Advice/Consultation on unlimited personal issues
- Letters/Calls made on your behalf
- Contracts/Documents Reviewed up to 15 pages
- Residential Loan Document Assistance
- Lawyers prepare your Will/Living Will/Health Care Power of Attorney/Financial Power of Attorney
- Speeding Ticket Assistance
- · IRS Audit Assistance
- **Trial Defense** (if named defendant/respondent n a covered civil action suit)
- Uncontested Divorce, Separation, Adoption and/or Name Change Representation (available 90 days after enrollment)
- 25% Preferred Member Discount (bankruptcy, criminal charges, DUI, personal injury, etc.)
- **24/7 Emergency Access** for covered situations

The IDShield Membership Includes:

· Social Media Monitoring

Allows you to monitor multiple social media accounts and content feeds for privacy and reputational risks

· Privacy and Security Monitoring

Internet monitoring of your name, date of birth, SSN, email address, phone numbers and more. Monthly credit score tracking. With the family plan, Minor Identity Protection is included and provides monitoring for up to 8 children under the age of 18 for no additional cost

Consultation

Your identity protection plan includes 24/7/365 live support for covered emergencies, unlimited counseling, identity alerts, data breach notifications and lost wallet protection

Full Identity Restoration

Complete identity recovery services by Kroll Licensed Private Investigators to its pre-theft status

\$5 Million Service Guarantee

We'll do whatever it takes for as long as it takes to help recover and restore your identity

Payment Method Payment Frequency (Monthly)	VT Legal+ Individual IDShield	VT Legal + Family IDShield
LegalShield	\$16.95	\$18.95
IDShield	\$8.95	\$18.95
Combined	\$25.90	\$33.90

Earned Time

Earned Time is time off from work that can be accumulated and used for vacations, holidays, sickness or other personal reasons. Accrual will begin for those employees consistently working an average of at least 18 hours per week. Per Diem employees are not eligible for Earned Time.

Earned Time is accrued by non-exempt employees based on the hours actually worked. For Exempt employees, Earned Time is accrued based on their bi-weekly standard hours, up to a maximum of 80 hours per pay period. Accrual begins with the date of hire or when eligibility commences based on a status change. New hires or employees who are newly eligible for Earned Time must complete a waiting period of ninety (90) calendar days of employment before using Earned Time. During this 90-day waiting period, employees may use Earned Time for paid time off on GC recognized holidays. Employees may not borrow Earned Time or have a negative Earned Time balance. An employee who is terminated by Grace Cottage after completing the 90 day waiting period and then is re-hired within 12-months will not have to go through a new 90-day waiting period.

There is no maximum Earned Time accrual limit for either non-exempt or exempt employees. All accrued but unused Earned Time carries over from year to year.

Upon termination of employment, the maximum hours of Earned Time that will be paid out is 150% of an employee's Total Annualized Earned Time eligibility (e.g., an employee in Category A may receive a maximum payout of 312 Hrs. of Earned Time at separation). At separation, any accrued but unused Earned Time in excess of 150% of your current Total Annualized Earned Time eligibility is forfeited. Employees who voluntarily resign will be paid out Earned Time consistent with this policy only if they have completed their 90-day waiting period, have provided appropriate notice, and have worked through the conclusion of the notice period, if requested by Grace Cottage.

Earned Time is paid at the base normal hourly wage rate and does not include differentials. Earned Time is not considered time worked for calculation of overtime.

Twice a year (November and May) employees may choose to take Earned Time pay as a cash payment. Employees may request cash payments for Earned Time hours that have been accrued over one week of normally scheduled hours. These are the only two (2) times during the year when Earned Time cash payments can be requested.

An employee may not transfer Earned Time hours to another employee.

Earned Time does not accrue during an unpaid leave of absence or while an employee is being paid by a disability carrier. Earned Time can be used to pay for benefits while on leave.

This policy is intended to provide paid time off in accordance with Vermont's earned sick leave law. To the extent this policy provides for a benefit more generous than that of applicable law, this policy will apply.

Earned Time Accrual Method	A All others 1-4 Years	B All Others 5-9 Years	C Dept Heads All Others 10+ Years
Accrual Rate	0.1	0.11923	0.13846
Max Accrual per PPD	8	9.54	11.08
Hours per year based on 40/week	208	248	288

Education Assistance Benefits

Tuition Reimbursement

Grace Cottage Family Health & Hospital encourages employees with financial support intended to enhance employees' professional development, their skills and knowledge related to hospital administration and clinical education. Grace Cottage will reimburse per GCFHH policy. Employees with one-year continuous full-time service (32+ regularly schedule hours/week) are eligible.

Student Loan Assistance



The Grace Cottage tuition assistance program is designed to help employees pay back student loan debt and improve their financial well-being

Utilizing Grace Cottage Family Health & Hospital's relationship with The Richards Group, consultation services provided through GradFin are provided free of charge. GradFin is a new benefit program that is revolutionizing the way employees can reduce their student loan debt or obtain funding to go back to school.



To schedule a one-on-one consultation visit:

https://gradfin.com/platform/trg/

Licensed Loan Reimbursement Program

This program has been established to help assist employees in positions where a license is required. (An educational need is required to obtain that license). These positions include: PT, OT, RN, LPN, Radiological Technologist, Medical Lab Tech and Pharmacist. Reimbursement is only for the debt incurred to obtain the licensure needed for current position.

The Licensed Loan Reimbursement Program will award up to \$5,000 per year towards a licensed employee's educational loan payments up to a maximum of ten (10) years or until 100% of the educational loan is paid off, whichever comes first.

Advanced Practice Provider Loan Repayment

The Grace Cottage Hospital Loan Repayment Program has been established to help attract and retain advanced practice providers.

The Loan Repayment Program will award up to \$10,000 per year towards a full-time advanced practice employee's educational loan payments up to a maximum of ten (10) years or until 100% of the educational loan is paid off, whichever comes first.

See details of each plan for eligibility and other requirements.

Wellness and Employee Discounts

Grace Cottage Hospital cares about your total wellbeing. Join us for a variety of online and in-person opportunities to address your personal goals. We offer rewards for participating in your choice of health education programs, volunteering, challenges, and preventive care. Login to our customer, secure portal and get rewarded for taking care of yourself. (This benefit is taxable.)

Earn up to \$100 per Quarter

To set up your account for the first time, go to https://www.mymedwellness.com/login.php. If you have logged in before, please log in with your credentials.

- 1. Click on, "New User? Register Here."
- 2. Enter your first name and last name as it is listed on your payroll check, birthday, and the company code.
- 3. Company Code: Grace
- 4. Please create your username and password. Enter your email address, phone number and submit.

Log in to your account with the credentials at:

www.mymedwellness.com/login.php



Grace Cottage is pleased to provide staff with Employee Discounts



Messenger Valley Pharmacy: 25% off over-the-counter items





GC Dietary Department:

Food Purchases at Cost Order by case only. See Denise Choleva



GC Purchasing Department:

Various Items at Cost Order by case only. Contact Purchasing Dept.



PC Connection:

Computers & Electronics www.pcconnection.com/gracecottage

Additional Information & Notices

COBRA Information:

COBRA continuation coverage is a temporary extension of coverage under the group health plan. The right to COBRA continuation coverage was created by a federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). COBRA continuation coverage can become available to you when you would otherwise lose your group health coverage. It can also become available to other members of your family who are covered under the Plan when they would otherwise lose their group health coverage. For additional information about your rights and obligations under the Plan and under federal law, you should review the Plan's Summary Plan Description or contact the Benefits Coordinator in Human Resources.

Health Insurance Marketplace:

You may have other options available to you when you lose group health coverage. You may be eligible to buy an individual plan through the Health Insurance Marketplace (www.healthcare.gov). By enrolling in coverage through the Marketplace, you may qualify for lower costs on your monthly premiums and lower out-of-pocket costs. Additionally, you may qualify for a 30- day special enrollment period for another group health plan for which you are eligible (such as a spouse's plan), even if that plan generally doesn't accept late enrollees.

HIPAA Information:

Special Enrollment Right Mandated by the Health Insurance Portability and Accountability Act of 1996

Group health plans and health insurance insurers are required to provide special enrollment periods during which individuals who previously declined coverage for themselves and their dependents may be allowed to enroll without having to wait for the plan's next open enrollment period. A special enrollment period can occur if a person with other health coverage loses that coverage or if a person becomes a new dependent through marriage, birth, adoption or placement for adoption. If you refuse enrollment for yourself or your dependents for medical coverage, you may later enroll within 30 days of a change in family status or loss of health coverage.

Individuals may not be denied eligibility or continued eligibility to enroll for benefits under the terms of the plan based on specified health factors. In addition, an individual may not be charged more for coverage than similarly situated individuals based on these specific health factors.

Effective April 1, 2009, the Children's Health Insurance Reauthorization Act of 2009 (CHIPRA) created a new 60-day special enrollment period for eligible employees and dependents to immediately enroll in the plan if they become ineligible for Medicaid or any state's Children's Health Insurance Program (CHIP) and lose coverage or become eligible for that state's premium assistance program. The employee must request coverage within 60 days after the termination of coverage or the determination of subsidy eligibility.

Women's Health and Cancer Rights Act of 1998 (WHCRA):

WHCRA requires a group health plan to notify you, as a participant or a beneficiary, of your potential rights related to coverage in connection with a mastectomy. Your plan may provide medical and surgical benefits in connection with a mastectomy and reconstructive surgery. If it does, coverage will be provided in a manner determined in consultation with your attending physician and the patient for a) all stages of reconstruction on the breast on which the mastectomy was performed; b) surgery and reconstruction of the other breast to produce a symmetrical appearance; c) prostheses; and d) treatment of physical complications of the mastectomy, including lymphedema. The coverage, if available under your group health plan, is subject to the same deductible and coinsurance applicable to other medical and surgical benefits provided under the plan. For specific information, please refer to your summary plan description or benefits booklet, or contact Human Resources.

THIS IS ONLY A SUMMARY, NOT A CERTIFICATE OF INSURANCE

The information contained in this Employee Benefits Summary is presented for illustrative purposes only and is based on information provided by the employer and in certificates of insurance supplied by the insurance carrier. The Richards Group, your company's insurance broker, has prepared this Summary to assist employees in understanding their company's benefits plan. While every effort has been made to describe these benefits accurately, discrepancies or errors are possible. You should also read the actual plan documents in their entirety. If there is a discrepancy between the Employee Benefits Summary and the actual plan documents, the plan documents will prevail. If you have any questions about the Employee Benefits Summary, please contact Human Resources.



The text contained in this Guide was taken from various summary plan descriptions and benefit information. In case of a discrepancy between the Guide and the actual plan documents, the actual plan documents will prevail. All information is confidential, pursuant to the Health Insurance Portability and Accountability Act (HIPAA) of 1996. If you have any questions about this Guide, contact Human Resources.

