



2024 Benefit Guide



2024 Plan Year

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Welcome

Protecting the lifestyle and financial security of our employees is a primary consideration at Jackson Hospital. This guide will help you understand the benefit options that are available as part of your overall compensation package.

Please visit Human Resources Department on Pinestreet to review all Jackson Hospital Benefits, view/print claim forms and carrier contact information.

You can also visit our online benefits open enrollment website to get all of your open enrollment information in one place at [JacksonHospital.MyBenefitsLibrary.com](https://www.jacksonhospital.com/MyBenefitsLibrary.com).



Eligibility

Employees working a minimum of 20 hours per week are eligible for benefits. New hires are eligible for Medical, Dental, Vision, FSA, Accident, Critical Illness, Hospital Indemnity, Universal Life, Legal Shield, Identity Shield, and EAP on the first of the month following their date of hire. On the first of the month following six months of employment, new hires (full time status) are eligible for Basic Life and AD&D, Supplemental Life and AD&D, Short Term Disability and Long-Term Disability coverages. Part time new hires are only eligible for voluntary coverage.

Your dependents are eligible for coverage in most plans you elect. Your eligible dependents include your legal spouse, children, and children for whom you are a legal guardian. The plan overviews outlined in the guide specify the ages that dependents no longer would be considered eligible.

Changing Your Medical, Dental, and Vision Benefits During the Year

Employee contributions to the benefit plans and FSA are made on a pre-tax basis. Therefore according to IRS regulations, you can only make changes during the plan year if you experience a qualified life event.

Changes to your medical, dental, and vision benefits can be made if preceded by a documented qualified life event and if they are made within **30 days** of the event. Your change must be consistent with your life event/status change.

Some events that qualify for a change in coverage include: marriage; civil union; divorce or legal separation; birth or placement for adoption of a child; ineligibility of a dependent; loss of other coverage; change in your employment status or that of your spouse; a court order; entitlement to Medicare or Medicaid.

If you experience one of these events and want to change your benefits, you must make the change within **30 days** after the event occurs. Contact Human Resources for details to ensure the change is made correctly. If you miss the window for making a change, you will need to wait until the next annual open enrollment period to make a change.

Spousal Carveout Provision

Spousal Carveout is a provision which allows Blue Cross to apply Coordination of Benefits whenever a spouse is eligible for coverage through their employer—even if the spouse chooses not to enroll for the coverage. As long as the spouse's employer contributes at least a portion of the cost for health care coverage, then their employer is responsible for making primary payment on the spouse's claims.

If the spouse chooses not to enroll for coverage in their employer's health plan, we will carve out the amount that would have been paid by the health plan if the spouse had accepted the coverage. (We assume the other plan would have paid 80%.)

For Example: Ms. Jones has BCBS health care coverage through Jackson Hospital. Her spouse, Mr. Jones, is eligible for coverage through his employer, XYZ Company, but does not enroll. If Mr. Jones has a \$1,000 procedure, we will pay the claim as follows:

XYZ Primary Liability: 100% of \$1,000 =	\$1,000
XYZ would have paid: 80% of \$1,000 =	<u>-\$800</u>
BCBS Jackson Actual Payment =	\$200



2024 Benefit Summary

2024 Benefits	Who is Eligible	Who Pays	Beginning Date	Coverage Explanation
BLUE CROSS BLUE SHIELD HEALTH INSURANCE	Full Time and Part Time .5	Hospital & Employee	30 days to apply, effective first of month after application	<ul style="list-style-type: none"> Blue Cross Blue Shield Jackson PPO network Prescription drug coverage through MaxorPlus available for employee and family. Copay: Generics - \$15 Preferred - \$40 Non-Preferred - \$60 Specialty - \$150 (At preferred pharmacy) Pre-tax benefit
METLIFE DENTAL INSURANCE	Full Time and Part Time .5	Hospital & Employee	30 days to apply, effective first of month after application	<ul style="list-style-type: none"> MetLife Coverage available for employee and family Pre-tax benefit
METLIFE VISION INSURANCE	Full Time and Part Time .5	Hospital & Employee	30 days to apply, effective first of month after application	<ul style="list-style-type: none"> MetLife Employees electing health insurance receive vision coverage at no additional cost Others may purchase
RELIANCE BASIC LIFE AD&D INSURANCE	Full Time	Hospital	30 days to apply, effective first of month following 6 months of continuous employment	<ul style="list-style-type: none"> 1x base pay up to \$150,000 Includes AD&D
RELIANCE LONG TERM DISABILITY	Full Time	Hospital & Employee	30 days to apply, effective first of month following 6 months of continuous employment	<ul style="list-style-type: none"> Employees electing health insurance receive a 50% benefit at no additional cost to them. Employees may purchase additional 10% benefit (60% benefit max) at a discounted rate
RELIANCE SUPPLEMENTAL TERM LIFE INSURANCE	Full Time	Employee	30 days to apply, effective first of month following 6 months of continuous employment	<ul style="list-style-type: none"> Increments of \$10,000 to \$500,000 Employee coverage guaranteed issue up to \$200,000 Spousal coverage guaranteed issue \$50,000 Child coverage guaranteed issue \$10,000
RELIANCE EMPLOYEE ASSISTANCE PROGRAM	All Employees	Hospital	Immediately	<ul style="list-style-type: none"> Confidential and professional assessment and referral services for employees & their family members. Child care/elder referrals, legal consultation, education referrals, etc
VOLUNTARY INSURANCE OFFERED <ul style="list-style-type: none"> UNIVERSAL LIFE (INDIVIDUAL) ACCIDENT (GROUP) CRITICAL ILLNESS (GROUP) HOSPITAL INDEMNITY (GROUP) SHORT TERM DISABILITY (GROUP) 	Full Time and Part Time .5	Employee	Universal Life, Accident, Critical Illness, Lifetime Benefit Term, Hospital Indemnity: 30 days to apply, effective first of month following 30 days of hire date Short Term Disability: 30 days to apply, effective first of the month following 6 months of continuous employment	<ul style="list-style-type: none"> Accident, Critical Illness, Hospital Indemnity, and Short Term Disability coverage now offered through Reliance Standard Universal Life coverage offered through Allstate
ADDITIONAL INSURANCE OFFERED <ul style="list-style-type: none"> PET INSURANCE 	Full Time and Part Time .5	Employee	30 days to apply. Effective first of month after application	<ul style="list-style-type: none"> Coverage offered through Nationwide

2024 Benefit Summary cont'd

2024 Benefits	Who is Eligible	Who Pays	Beginning Date	Coverage Explanation
PURCHASING POWER	Full Time and Part Time .5	Employee	Minimum 12 month tenure	<ul style="list-style-type: none"> Finance purchases through payroll deduction, and make manageable payments over a 6- or 12-month period with no interest, hidden fees or credit check.
ALLIANCE INSURANCE GROUP HEALTHCARE FLEXIBLE SPENDING ACCOUNT	Full Time and Part Time .5	Employee	30 days to apply. Effective first of month after application	<ul style="list-style-type: none"> Flexible spending accounts for qualified health services, to include medical, dental and vision Pre-tax benefit
ALLIANCE INSURANCE GROUP DEPENDENT CARE SPENDING ACCOUNT	Full Time and Part Time .5	Employee	30 days to apply. Effective first of month after application	<ul style="list-style-type: none"> Flexible spending accounts for depended day care expenses. Pre-tax benefit
JURY DUTY (PAID)	Full Time	Hospital & Employee	Immediately	<ul style="list-style-type: none"> Employees called to jury duty on regularly scheduled workdays shall be paid their regular straight time hourly earnings
JACKSON HOSPITAL 403(B) RETIREMENT PLAN	Employees working a minimum of 1,000 hours per plan year	Hospital & Employee	Immediately	<ul style="list-style-type: none"> Employees are vested after 3 years Defined annual contribution equal to a percentage of base salary
AIG 403(B) TAX DEFERRED ANNUITY PROGRAM	All Employees	Hospital & Employee	Immediately	<ul style="list-style-type: none"> Elective tax deferred savings available to all employees at time of hire
EARNED TIME OFF (ETO)	Full Time and Part Time .5	Hospital	Immediate accrual, however benefits may be taken only after 3 months of continuous employment	<ul style="list-style-type: none"> Annual ETO accruals ETO payout upon separation processed in ADP Employees may sell back up to 80 ETO hours a year after 2 years of employment. Sell back dates are in June and November With proper notice of resignation, employees are paid ETO accruals in full
EXTENDED SICK LEAVE (ESL)	Full Time	Hospital	Immediate accrual, however benefits may be taken only after 3 months of continuous employment	<ul style="list-style-type: none"> Annual ESL accruals (based on 80 hrs. per pay period) = 96 hours (960 hour max accrual) The first 16 hours of a personal illness fall under ETO except: hospitalization, procedures with IV conscious sedation, or contagious illness (See policy for details)
TUITION REIMBURSEMENT	All Employees	Hospital & Employee	After 6 months of employment	<ul style="list-style-type: none"> Reimbursement of tuition for healthcare related programs as approved, up to \$12,000 total benefit (\$4,000 per calendar year)

2024 Benefit Summary cont'd

2024 Benefits	Who is Eligible	Who Pays	Beginning Date	Coverage Explanation
JACKSON WELLNESS CENTER	Full Time and Part Time .5	Employee	Immediately	<ul style="list-style-type: none"> Jackson Wellness Center is a medical fitness facility provided to employees at a reduced membership rate Payroll deduction available for YMCA
TICKETS AT WORK	All Employees	Employee	Immediately	<ul style="list-style-type: none"> Discounts to concerts, amusement parks, hotels, cars, etc
CAFETERIA DISCOUNTS	Full Time and Part Time .5	Hospital & Employee	Immediately	<ul style="list-style-type: none"> Employees receive a 30% discount on meals during their shift (Pine Street Cafe) Immediate family members accompanying the employee will receive a 15% discount Payroll deduction available (\$50 maximum per pay period)
HOSPITAL DISCOUNTS	Full Time and Part Time .5	Hospital & Employee	Immediately	<ul style="list-style-type: none"> Employees receive a 20% discount on hospital charges not covered or paid for by insurance, this should be the greater of the private room difference Employees receive a private room (when available at the same cost as semi-private room) Employees covered under the Jackson Hospital Blue Cross plan receive services covered at 100% at the Jackson Hospital physical therapy department
EMPLOYEE PARKING/ SHUTTLE SERVICE	All Employees	Hospital	Immediately	<ul style="list-style-type: none"> Free parking for employees in designated areas Free 24-hour shuttle service
KASHABLE LOANS/ PAYROLL	All Employees	Employee	Immediately	<ul style="list-style-type: none"> Loan amounts up to \$20,000 6-24 month repayment terms Payroll deduction
FIDUCIOUS STUDENT LOAN FORGIVENESS PROGRAM	All Employees	Employee	Immediately	<ul style="list-style-type: none"> Student loan relief program Access to professional student loan experts
LEGAL SHIELD	All Employees	Employee	Immediately	<ul style="list-style-type: none"> Legal protection plans covering advice & consultation, family matters, document preparation, auto, and more
ID SHIELD	All Employees	Employee	Immediately	<ul style="list-style-type: none"> Identity theft protection plan covering privacy, security, social media, and credit monitoring, credit inquiry alerts, and more

2024 Schedule of Deductions

Blue Cross Blue Shield Health Package: Includes Blue Cross Blue Shield Health, Vision, Long-Term Disability, Life Insurance, and Prescription Drug Coverage

Full Time Employees:			
	Plan 3	Plan 2	Plan 1
Employees	\$48.85	\$58.62	\$67.41
Employee + 1 Dependent	\$118.77	\$142.52	\$163.90
Family	\$158.05	\$189.66	\$218.11
Part Time Employees:			
Employees	\$111.24	\$133.39	\$153.51
Employee + 1 Dependent	\$180.76	\$216.91	\$249.45
Family	\$245.40	\$294.48	\$338.65

*There is an additional \$100.00 per pay period surcharge for smokers.

MetLife Dental

Full Time Employees:	
Employees	\$13.69
Employee + 1 Dependent	\$25.24
Family	\$32.09
Part Time Employees:	
Employees	\$14.20
Employee + 1 Dependent	\$27.30
Family	\$33.12

MetLife Vision Only: For employees not enrolled in the medical insurance

Full Time Employees:	
Employees	\$2.74
Employee + 1 Dependent	\$5.47
Family	\$7.30
Part Time Employees:	
Employees	\$2.74
Employee + 1 Dependent	\$5.47
Family	\$7.30

Medical

There is nothing more important than your health, which is why Jackson Hospital offers Blue Cross Blue Shield of Alabama BlueCard PPO to all employees and their dependents. Child(ren) age off the medical plan at age 26. The tables below highlight the plans being offered for 2024. Although you may see any doctor you like, you will receive greater benefits and lower costs when you choose an in-network provider. While prescription coverage is not through BCBS, your out-of-pocket prescription drug costs will be applied to your medical deductible. This is a general summary of your benefits; please refer to your Summary of Benefits and Coverage (SBC) or a copy of the Summary Plan Description (SPD) for additional details.

Healthcare Waiver

If you receive healthcare treatment from a non-Jackson Hospital facility because it is **not available** at Jackson Hospital, the Employee Healthcare Waiver offers you reimbursement for that cost. The waiver submission process is as follows:

1. Retrieve the Employee Healthcare Waiver Request Form from the Reference Library; Forms Bin; Human Resources section on PineStreet.com.
2. Complete the form and submit it to Human Resources located on the first floor of the South Building.
3. You will be contacted regarding the status of your request. If approved, all claims will be processed at the in-network rate.
4. All approved waiver requests are good for 12 months from the date of approval.

Plan 1: Enrolled Prior to 8/1/23 Eligible: Grandfathered Employees			
	Jackson Hospital / Providers	In-Network	Out-of-Network
Deductibles			
Single	\$300	\$600	\$1,200
Annual Out-of-Pocket Maximum			
Single	\$5,150	\$5,150	N/A
Family	\$10,300	\$10,300	N/A
Prescription Drugs	\$2,000 Single / \$4,000 Family	\$2,000 Single / \$4,000 Family	N/A
Physician Services			
Preventive Care	100% (no copay)	100% (no copay)	Not covered
Physician Visit	100% after \$25 copay	100% after \$50 copay	70% after deductible
Specialist Visit	100% after \$40 copay	100% after \$80 copay	70% after deductible
Emergency Services			
Urgent Care	100% after \$25 copay at Jackson Clinic	100% after \$100 copay	100% after \$100 copay
Medical Emergency	100% after \$100 copay	100% after \$250 copay	100% after \$250 copay
Ambulance	70% after deductible	70% after deductible	70% after deductible
Hospital Services			
Inpatient	100% after \$250 copay at Jackson Hospital	80% after \$250 copay	70% after deductible
Outpatient Surgery	100% after \$100 copay	80% after \$100 copay	70% after deductible \$500 copay
Advanced Outpatient Services (MRI, CAT, PET Scans, etc.)	100% after \$100 copay	80% after \$500 copay	70% after \$500 copay
Diagnostic Lab & X-Ray	100% (no copay)	80% after \$250 copay	70% after \$500 copay

Plan 2: Effective 8/1/2023 | Eligible: New Hires, Rehires, Status Change Eligible

	Jackson Hospital / Providers	In-Network	Out-of-Network
Deductibles			
Single	\$1,000	\$2,000	\$4,000
Annual Out-of-Pocket Maximum			
Single	\$8,000	\$8,000	NA
Family	\$12,000	\$12,000	NA
Prescription Drugs	\$2,000 Single/\$4,000 Family	\$2,000 Single/\$4,000 Family	NA
Physician Services			
Preventive Care	100% (no copay)	100% (no copay)	
Physician Visit	100% after \$40 copay	100% after \$50 copay	50% after deductible
Specialist Visit	100% after \$40 copay	100% after \$80 copay	50% after deductible
Emergency Services			
Urgent Care	100% after \$25 copay at Jackson Clinic	100% after \$100 copay	100% after \$100 copay
Medical Emergency	80% after \$150 copay	70% after \$250 copay	80% after \$250 copay
Ambulance	70% after deductible	70% after deductible	70% after deductible
Hospital Services			
Inpatient	80% after \$250 copay at Jackson Hospital	70% after \$250 copay	50% after deductible
Outpatient Surgery	80% after \$100 copay	70% after \$100 copay	50% after deductible
Advanced Outpatient Services (MRI, CAT, PET Scans, etc.)	80% after \$100 copay	70% after \$500 copay	50% after deductible
Diagnostic Lab & X-Ray	80% (no copay)	70% (nocopay)	50% after deductible

Plan 3: Effective 1/1/2024 | Eligible: All Employees

	Jackson Hospital / Providers	In-Network	Out-of-Network
Deductibles			
Single	\$2,000	\$4,000	\$8,000
Annual Out-of-Pocket Maximum			
Single	\$7,000	\$7,000	NA
Family	\$14,000	\$14,000	NA
Prescription Drugs	\$2,000 Single/\$4,000 Family	\$2,000 Single/\$4,000 Family	NA
Physician Services			
Preventive Care	100% (no copay)	100% (no copay)	
Physician Visit	100% after \$40 copay	100% after \$50 copay	50% after deductible
Specialist Visit	100% after \$40 copay	100% after \$80 copay	50% after deductible
Emergency Services			
Urgent Care	100% after \$40 copay at Jackson Clinic	100% after \$100 copay	100% after \$100 copay
Medical Emergency	80% after \$250 copay	60% after \$500 copay	80% after \$250 copay
Ambulance	60% after deductible	60% after deductible	60% after deductible
Hospital Services			
Inpatient	80% after \$1,000 copay at Jackson Hospital	60% after \$1,000 copay	50% after deductible
Outpatient Surgery	80% after \$500 copay	60% after \$500 copay	50% after deductible
Advanced Outpatient Services (MRI, CAT, PET Scans, etc.)	80% after \$100 copay	60% after \$500 copay	50% after deductible
Diagnostic Lab & X-Ray	80% (no copay)	60% (nocopay)	50% after deductible

Prescription Plan

Jackson Hospital has chosen MaxorPlus to administer your prescription benefit program. Your prescription card program is processed by the real-time electronic pharmacy system.

JACKSON APOTHECARY

The Jackson Apothecary is the only preferred pharmacies covered under the prescription benefit program. If you previously received your prescriptions from CVS, Walmart, Sam's Club, Winn Dixie Pharmacies, IKare, Publix Pharmacies, etc. and you do not transfer your prescription(s) to the Jackson Apothecary, your prescription copays will increase.

Our Meds to Beds Delivery Program through the Jackson Apothecary is a free service that delivers prescriptions and over-the-counter medications straight to your office. Learn more at jackson.org/services/apothecary.

Program Features:

- Lower prescription copays
- Option to conveniently pay your copay via payroll deduction
- Free delivery to your department (no more standing in long lines at the pharmacy)
- Refill or renew prescriptions online
- Provides personal medication review and consultation
- Behind the scenes, our highly trained pharmacists review your new prescriptions with your medication history and medical conditions and coordinate your pharmacy care with your health care team

The Jackson Hospital Drug Plan administered through MaxorPlus has a 3-tiered formulary. This means that your physician can prescribe most prescription drugs available in the marketplace as may be appropriate for treating your medical condition. The amount you pay will depend on whether your medication is generic or brand name and whether your medication is on the Preferred Drug List.

Prescription Benefit Tips

MaxorPlus Mobile App! The MaxorPlus mobile app lets you refill prescriptions and view prescription history from your handheld device. You can also update your account information, find a network pharmacy, and download benefit documents directly within the app. If you have a question about MaxorPlus services, the app allows you to browse the extensive FAQs to find any information you might need. Download the app from the Apple App Store or the Google Play Store today!

Prescription ID Card: Please review the information on your card to be sure it has been printed correctly. If there is an error, please notify a MaxorPlus Member Service Representative, (800) 687-0707, and a new card will be issued promptly.

RX Benefit Questions should be directed to MaxorPlus (800) 687-0707. An AHC/MXP pharmacist can contact our doctor if necessary.

Pharmacy: Eligible members can make a purchase without their prescription card. Encourage the pharmacist to call the AHC/MXO Help Desk at (800) 687-0707 for assistance in processing the claim, or give the pharmacist the information listed below:

- RxBIN 018240
- RxPCN AH3C
- RxGrp 5529
- Your member ID number
- Your date of birth

Consumer Reimbursements: Electronic submissions of claims from a provider pharmacy is the acceptable form of claim payment. If an unsuccessful attempt was made to submit a claim by a provider pharmacy electronically, then the participant must send the original paid bill along with a completed claim form available from the website or by calling MaxorPlus at (800) 687-0707 for evaluation of payment.

Prescription Plan Continued

Copayments – Jackson Apothecary (Preferred Pharmacy): Members can receive up to a 30-day supply on Acute Medications (short-term pharmaceutical treatment) and up to a 90-day supply on Maintenance Medications* (long-term pharmaceutical treatment) prescription drugs through the Jackson Apothecary.

	30 day	90 day
Generic (to be dispensed when available)	\$15	\$37.50
Preferred Brand-Name Drugs (when no generic substitute is available)	\$40	\$100
Non-Preferred Brand-Name Drugs (not on the preferred drug listing)	\$60	\$150

Copayments – Non-Preferred Retail Pharmacies: Members can receive up to a 30-day supply of medications through MaxorPlus contracted pharmacies. CVS, Wal-Mart, Sam’s Club, Winn Dixie Pharmacies, IKare and Publix Pharmacies are all non-preferred retail pharmacies. Baptist Tower & Walgreens are not participating pharmacies.

	30 day
Generic (to be dispensed when available)	\$40
Preferred Brand-Name Drugs (when no generic substitute is available)	\$90
Non-Preferred Brand-Name Drugs (not on the preferred drug listing)	\$150

Copayments: Specialty (Jackson Apothecary)

	30 day
Specialty Medication (Filled only through the Jackson Apothecary)	\$150

Plan Covers:

All medically necessary prescription medication which is listed in the American Health Care powered by MaxorPlus Formulary, prescribed by an authorized physician, and approved by the FDA is part of your drug plan in addition to:

- Legend drugs
- Insulin, insulin syringes and needles
- Children’s vitamins with fluoride to age 5
- Prenatal vitamins
- Compound medication of which one ingredient is a prescription drug

Plan Exclusions

- Medications that are experimental and non-experimental medications that are prescribed for experimental purposes or indications not approved by the United States Food and Drug Administration.
- Medication that is not medically necessary for the treatment of the condition for which it is administered
- Medication to be taken or administered in a licensed hospital
- Medical or surgical appliances and durable medical equipment (DME) with the exception of aero chambers and spacers.
- Over-the-counter medicines or medicines not requiring a written prescription order (except of insulin).
- Medications that are pre-packaged with multiple unites shall not be dispensed in more than one standardized container per prescription order. A maximum of two inhalers per prescription order may be obtained at one time or within 30 days.
- Oxygen and oxygen supplies.
- Cosmetics, except Retin-A up to age 25; beauty aids; diet supplements; anorectics (i.e. appetite suppressants); or any other diet medication.
- Immunizing agents.
- Implantable medications or devices (e.g. pain control Norplant and other contraceptives and devices) and drug infusion pumps and release devices.
- Biological sera, blood, blood derivatives, and blood plasma.
- Non-oral contraceptives (IUDs, implants).

Vision

We are proud to offer vision benefits through MetLife. Although you have the option to see any provider you wish, you will receive the best benefits when you choose an in-network doctor. Go to mymetlifevision.com to find a provider. Dependents are eligible for coverage up to age 26.

Vision Plan Features		
Benefit and Frequency	In-Network	Out-of-Network
Comprehensive Exam <i>(every 12 months)</i>	100% after \$10 copay	\$45 allowance
Retinal Imaging	Up to \$39 copay	Applied to the exam allowance
Materials/Eyewear <i>(Glasses every 24 months; Contacts every 12 months)</i>		
Single	100% after \$15 copay	\$30 allowance
Bifocal	100% after \$15 copay	\$50 allowance
Contact Lenses <i>(Every 12 months)</i>		
Elective	\$130 allowance	\$105 allowance
Necessary	Covered in full after eyewear copay	\$210 allowance

** You will receive an additional 20% off any amount that you pay over your allowance. This offer is available from all participating locations except Costco.

Dental

Because maintaining your smile is important, Jackson Hospital offers a dental plan from MetLife to help you and your covered dependents pay for the costs of dental care. Dependents are eligible for coverage up to age 26. **All employees will receive a dental card to their homes in the mail. To find a provider, go to: metlocator.metlife.com/metlocator/execute/Search.**

Dental Plan Features - Network: PDP Plus		
Coverage Type	In-Network % of Negotiated Fee*	Out-of-Network % of Negotiated Fee*
Type A: Preventive (cleanings, exams, X-rays)	100%	100%
Type B: Basic Restorative (fillings, extractions)	100%	100%
Type C: Major Restorative (Periodontal Scaling and Root Planning)	80%	80%
Type D: Major Restorative (bridges, dentures)	50%	50%
Type D: Orthodontia	50%	50%
Yearly Deductible**		
Individual	\$25	\$25
Family	\$75	\$75
Annual Maximum Benefit		
Per Person	\$1,000	\$1,000
Lifetime Orthodontic Deductible		
Per Person	\$25	\$25
Orthodontia Lifetime Maximum		
Per Person	\$1,000	\$1,000

*Negotiated Fee refers to the fees that participating dentists have agreed to accept as payment in full for covered services, subject to any copayments, deductibles, cost sharing and benefits maximums. Negotiated fees are subject to change.

**Applies only to Type B, C, & D Services.

Reliance Standard Voluntary Benefits

Reliance Standard is the provider for Hospital Indemnity, Critical Illness, Accident, and Short Term Disability. Please visit Jackson's microsite for additional information regarding these benefits at Jackson.MyBenefitsLibrary.com. The site houses brochures, product videos, claim instructions, and more!

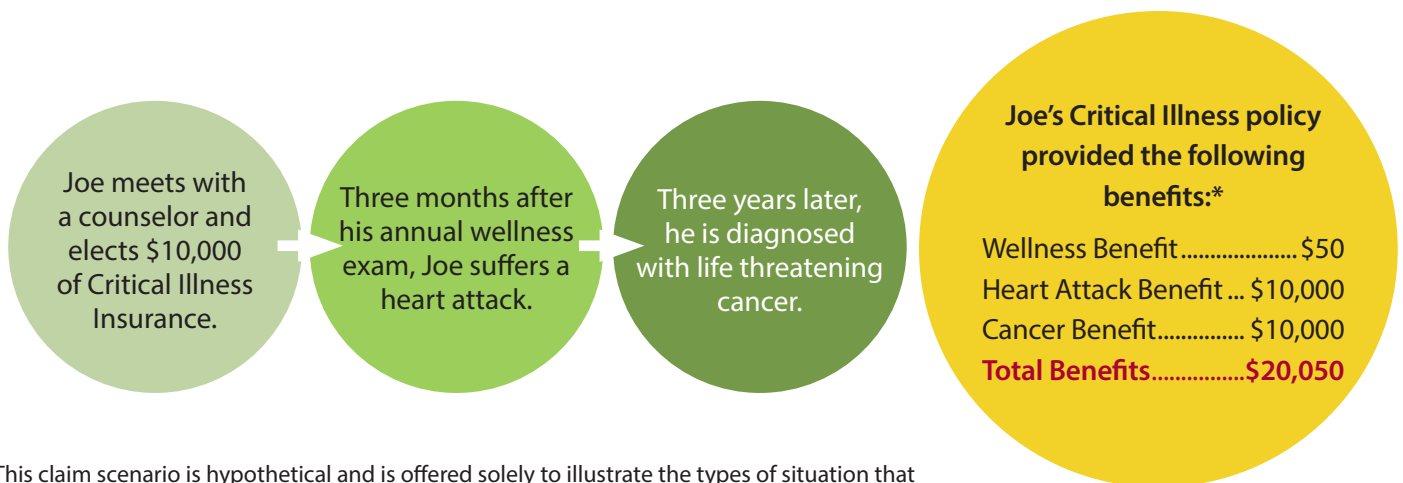
Hospital Indemnity

Hospital Indemnity Insurance is designed to help provide financial protection for covered individuals by paying a benefit due to a hospitalization as a result of a covered illness, in addition to any other medical coverage you may have. This benefit is paid directly to you and you can use it however you see fit, whether it's to meet out-of-pocket expenses or to pay extra expenses that aren't a result of hospitalization. This policy is available for you, your spouse, and your children and can be used regardless of pre-existing conditions, without undergoing a health exam. The table below reflects the coverage amounts for hospital confinement:

Hospital Coverage Amounts	Low Plan	High Plan
First Day Hospital Admission	\$500, once per year	\$1,200, once per year
Daily Hospital Confinement	\$200, up to 180 days	\$300, up to 180 days
Intensive Care	\$400, up to 180 days	\$500, up to 180 days

Critical Illness

No one saves to get sick, which is why being diagnosed with a covered condition can be especially draining, both emotionally and financially. This policy provides you with a lump sum cash benefit in the event you or a loved one is diagnosed with a covered condition such as a heart attack, stroke, or cancer. Every year that you and a covered dependent complete a qualified health screening, you are eligible for a \$50 Wellness Benefit. Coverage for children ends when the child reaches age 26, unless he or she continues to meet the requirements of an eligible dependent. **Newly-hired employees can elect up to \$30,000 of coverage without answering any health questions!**



*This claim scenario is hypothetical and is offered solely to illustrate the types of situation that may result in a claim.

Accident

Having an unexpected accident can cause more than physical injury—it can hurt your bank account, too. Accident Insurance can help cover the out-of-pocket costs associated with off-the-job accidents by paying you a benefit depending on the injuries you suffer and the treatment you receive. Coverage for children ends when the child reaches age 26, unless he or she continues to meet the requirements of an eligible dependent.

- Family coverage available.
- Plan pays a benefit directly to you and does not coordinate with other coverage, so you can still receive benefits on top of what your medical plan provides.
- Coverage applies towards events such as concussions, dislocations, fractures, physical therapy, and x-rays.

Example Accident Benefits*		
Event	Low Plan	High Plan
Dislocation/Fracture	up to \$16,000	up to \$17,600
Ground/Air Ambulance	\$150/\$750	\$250/\$1,250
Physician Office Visit	\$75	\$125
X-ray	\$150	\$175
Urgent Care	\$150	\$300

*This is not a comprehensive list of covered injuries and treatments. Speak to a benefit counselor for a complete list of covered events. Limitations may apply.

Short Term Disability Insurance

Short Term Disability Insurance offers full-time employees up to 25 weeks of coverage if you become totally disabled due to an injury or illness. The plan can help fill this gap until you are able to return to work by paying you a weekly benefit. The policy pays a benefit of 60% of your salary up to a maximum benefit of \$5,000 monthly. **Newly-hired employees can elect coverage without answering medical questions!**

Maximum Benefit	Plan Option	Elimination Period: Accident	Elimination Period: Illness	Max. Benefit Duration
Max. of \$5,000 per month, not to exceed 60% of salary	Option #1	7 days	7 days	12 weeks
	Option #2	7 days	7 days	25 weeks
	Option #3	14 days	14 days	11 weeks
	Option #4	14 days	14 days	24 weeks



Life Insurance

Life Insurance through Reliance Standard helps provide financial stability and protection for your family in the case of a death. You have access to a variety of life insurance options to ensure you have the amount of coverage that best fits your needs.

Basic Term Life Insurance and Accidental Death and Dismemberment (AD&D) Insurance

Jackson Hospital offers Basic Life Insurance and AD&D at no cost to you. The Basic Life and AD&D benefit offers one times your annual earnings (this does not include bonus pay, commission, etc.) to the next higher \$1,000, subject to a maximum of \$150,000. AD&D Insurance provides payment to you and your beneficiaries if you lose a limb or die in an accident. Employees AD&D benefit automatically matches their Basic Life amount.

Supplemental Life Insurance and Accidental Death and Dismemberment (AD&D) Insurance

Supplemental Life and AD&D Insurance is available for purchase in addition to your Jackson Hospital-provided basic life. You may purchase life insurance for your spouse and dependent children, from birth to age 26. The age limit does not apply to handicapped children. You must purchase additional coverage for yourself to cover dependents. Employees AD&D benefit automatically matches their Basic Life amount.

Basic Life Insurance and AD&D Benefit Amount	
Tier	Maximum Benefit Amount
All Full-Time Employees	Your earnings multiplied by 1, rounded to the next higher \$1,000 (subject to a maximum Amount of Insurance of \$150,000)
Benefit Reduction Due to Age	
Age: 70+	Original benefit reduced to 50%

Supplemental Life Insurance and AD&D Benefit Amount	
Tier	Benefit Amount
Employee	Up to 5 times annual salary in \$10,000 increments, up to \$500,000, \$200,000 Guarantee Issue*
Spouse	\$50,000 Guarantee Issue*
Child	\$10,000 Guarantee Issue*

**Evidence of Insurability may apply during this Open Enrollment period for coverage to become effective. Please see a benefit counselor for more information.*

Long Term Disability Insurance

Voluntary Long Term Disability (LTD) coverage provides income when you have been disabled for 90 days or more. Employees electing health insurance receive a 50% benefit at no additional cost to them (this benefit is paid by Jackson Hospital). Employees may purchase an additional 10% benefit (60% benefit max) at a discounted rate. This amount may be reduced by other deductible sources of income or disability earnings. Waiting periods may apply.

Universal Life Insurance with Long Term Care

Universal Life Insurance with Long Term Care through Allstate provides a lump-sum cash benefit to help pay final expenses, bills, and more. Take charge of creating the future you imagine by getting coverage that's guarantee to stay with you. Wherever you go or however your view changes along the way, you have permanent insurance protection for the important things in life – your family, your home, and your finances.

Flexible Spending Accounts (FSAs)

FSAs allow you to pay for eligible health care and dependent care expenses using pre-tax dollars, which lowers your taxable income. Unused funds in your account cannot carry forward, so plan carefully. There are two types of FSAs offered: Healthcare FSA and Dependent Care FSA.

Healthcare FSA

A Healthcare FSA helps you pay for medical, dental, and vision expenses not covered by insurance—TAX FREE!. You can use this account to pay for things like deductible and copayments, orthodontia, glasses, and contact lenses. The maximum annual amount that you may contribute to this plan is \$3,200.

Dependent Care FSA

A Dependent Care FSA can help fund the care of children under the age of 13 or a disabled spouse or parent while you work—TAX FREE! You can use the account to pay for things like payments to a licensed daycare provider, nursery school, before and after school care, summer day camp programs, and elder care. The IRS maximum annual contribution to a Dependent Care FSA is a per household limit of \$5,000. If you are married, the most you and your spouse can contribute is a combined \$5,000. If you are single, the most you may contribute is \$2,500.

Use it or Lose it Provision

The FSA plan year (incurral period) is the later of January 1 or your benefits effective date to December 31 or your termination date. All claims incurred within the plan year need to be submitted by March 15 of the following year. You have 90 days from termination date to submit eligible expenses incurred prior to termination. Any remaining balance after all claims have been processed will be forfeited. Please plan carefully.

Kashable

Kashable offers socially responsible financing for employees as a voluntary benefit. You will have access to low-cost loans via online application with quick decision and funds deposited directly to your bank account within 3 business days from approval. Kashable loans can help cover financial stressors such as car repair, out-of-pocket medical bills, and high-interest debt while improving an employee's credit score. Kashable is offered as a voluntary benefit to all full-time benefit eligible employees with 12 months of consecutive/continuous employment.

- Loan amount eligibility based on income and employment history rather than credit score.
- 6% starting APR to eligible employees.
- Timely reporting to credit bureaus.
- Funds deposited into employee's bank account.
- Automatic repayment through payroll deduction with no additional action needed on the part of the employee.



Visit www.kashable.com to learn more and sign-up.

Student Loan Relief

We offer the voluntary Loan Relief™ benefit from Fiducius, so you can take control of your student loans, put more money in your pocket and focus on what really matters to you. This benefit gives you access to student loan experts who will work for you at no cost. Student loan experts will:

- learn about your personal financial situation and goals
- Identify the best option to solve your student loan issue
- provide a customized Student Loan Financial Wellness Plan

Employee Assistance Program (EAP)

The Employee Assistance Program (EAP) through ACI provides professional and confidential services to help you and your family members address a variety of personal, family, life, and work-related issues. To support you through the stress of everyday life, EAP benefits include unlimited telephonic sessions of professional assessment, child care and elder care referrals, multilingual services, and resources for legal and financial services, pet care, education, personal services, and more.

These benefits are free of charge, 100% confidential, available to all family members regardless of location, and easily accessible 24/7 at **855-775-4357** or **rsli.acieap.com**. To log in for the first time, click “Log in to myACIonline.” Click “Get Started” (the company code, **RSLI859**, should already be filled in). Complete your profile and sign in to access benefits immediately.



Legal Coverage

Legal coverage from LegalShield can offer you the support you need if you or your family members are in need of legal services. Covered services include:

- Personal legal advice on unlimited issues
- Letters/calls made on your behalf
- Contract and document review
- Preparation of wills and living wills
- Moving traffic violations
- IRS audit assistance
- Trial defense (if named defendant/respondent in a covered civil action suit)
- Uncontested divorce, separation, adoption and/or name change representation
- 25% preferred member discount
- 24/7 emergency access for covered situations



Identity Theft Protection

Identity Theft Protection through IDShield offers you peace of mind that your personal information is secure from all forms of identity theft. IDShield Plans are available to cover you, your spouse, and up to eight dependents. This coverage includes:

- **Privacy and security monitoring** of your name, SSN, date of birth, email addresses, phone numbers, driver license and passport numbers, bank account, and credit cards, as well as financial activity alerts and quarterly credit score tracking to keep you secure from every angle.
- **Consultation** through 24/7/365 live support for covered emergencies, unlimited counseling, identity alerts, data breach notifications, and lost wallet protection.
- **Full service restoration** and a \$5 million service guarantee to ensure that if your identity is stolen, it will be restored to its pre-theft status.

Purchasing Power

Purchasing Power is a voluntary benefit program that gives employees financial flexibility by providing access to the products and services they need and want. Through our program, employees can comfortably pay for their purchases interest-free over time through payroll deduction. Our program allows employees to access thousands of brand-name products and services. Through payroll deduction, they make manageable payments over a 6- or 12-month period with no interest, hidden fees or credit check.



Pet Insurance

Nationwide Pet Insurance provides coverage for a wide range of veterinary services, such as wellness visits, vaccinations, surgical procedures, medical care following accidents and illnesses, and more. With Pet Insurance, you can elect coverage for your dog(s), cat(s), bird(s) and/or exotic pet(s).

Benefit Contact Information

Plan	Plan Provider	Phone Number	Website/Email
Medical	Blue Cross Blue Shield	1-888-543-9212	www.bcbsal.com
Dental	MetLife	1-800-942-0854	www.metlife.com/dental
Vision	MetLife	1-855-638-3931	www.metlife.com/insurance/vision-insurance/
Pharmacy Benefits	MaxorPlus	1-800-687-0707	www.maxor.com
Basic Life and AD&D	Reliance Standard	1-800-351-7500	www.reliancestandard.com
Supplemental Life and AD&D	Reliance Standard	1-800-351-7500	www.reliancestandard.com
Universal Life Insurance with Long Term Care	Allstate	1-866-828-8501	www.allstatebenefits.com/mybenefits
Short Term Disability	Reliance Standard	1-877-202-0055	www.matrixabsence.com
Long Term Disability	Reliance Standard	1-800-351-7500	www.reliancestandard.com
Accident	Reliance Standard	1-877-202-0055	www.matrixabsence.com
Critical Illness	Reliance Standard	1-877-202-0055	www.matrixabsence.com
Hospital Indemnity	Reliance Standard	1-877-202-0055	www.matrixabsence.com
Flexible Spending Accounts	Alliance	1-866-396-3967	www.allianceinsgroup.com
EAP	ACI Specialty Benefits	1-855-775-4357	rsli.acieap.com
Kashable	Kashable	1-646-663-4353	www.kashable.com/
Student Loan Relief	Fiducius	1-513-645-5400	jackson.myfiducius.com
Pet Insurance	Nationwide	1-888-899-4874	www.petinsurance.com
Purchasing Power	Purchasing Power	1-888-923-6236	www.purchasingpower.com
Legal Coverage	LegalShield	1-800-654-7757	www.legalshield.com
Identity Theft Protection	IDShield	1-888-494-8519	www.idshield.com



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This guide summarizes the key features of Jackson Hospital's Benefit Plans. If any conflict arises between the information stated here and any Plan provisions, the terms of the actual Plan documents or other applicable documents will govern in all cases. Provisions of the plans and eligibility for coverage to do not constitute a contract of employment with any individual. Plans described in this Guide are subject to change at the discretion of Jackson Hospital.