



**2014** Wellness & Benefits Enrollment Guide

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This benefits enrollment guide is designed to provide you with an overview of the benefits available through your employment with St. Dominic Health Services. If you enroll, your Summary Plan Documents will provide you with the details of the features, benefits, limitations and exclusions for all the available plans. The actual benefits and benefit descriptions are governed solely by the relevant plan documents and contracts. If there are any discrepancies between this document and the plan document, the plan document will prevail. St. Dominic Health Services retains the right to amend, change or modify benefits at any time.



## BENEFITS

#### Benefits designed for you and your family...

St. Dominic Health Services is pleased to provide our employees with one of the most comprehensive group insurance programs available today. We recognize the importance of providing comprehensive benefits and consider them to be a major part of your total compensation package. Our program includes medical, dental, vision, group life with accidental death and dismemberment, long-term care, long-term disability, short-term disability, healthcare flexible spending account, accident, critical illness, burial insurance, cancer, Universal LifeEvents and LifeLock.

If you are out on unpaid leave of absence, missing employee deductions (including health, dental, vision, voluntary life, long term disability and healthcare flexible spending account) will be collected in full from your first paycheck after you return to work, unless you contact the Employee Benefits Office and make arrangements to pay the premiums during your unpaid absence period. If there are any other insurance premiums (including accident, short-term disability, burial,

long-term care, MPACT/MACS programs, critical illness, cancer, Universal LifeEvents and LifeLock) deducted from your check, you will need to contact the carriers individually and arrange to pay the premiums. If you do not, your benefits COULD TERMINATE. Please note that the HR Benefits office will not be allowed to accept premium payments from you, but can provide the appropriate contact information.

This enrollment guide is an overview of the Summary of Benefits for each benefit in which you may enroll. It serves as a handy reference for you and your family, enabling you to receive the most from your benefit plans throughout the year. Whenever you have questions about your benefits, this enrollment guide is a good place to start.



If there are any differences between this booklet and the official plan documents, the plan document will govern.

#### Using your enrollment guide...

We realize how important employee benefits are to you and your family. We have developed this enrollment guide to provide you with a summary of the benefits that are available for you to choose from. In addition, you will find the contact telephone numbers on page 22 for each of our insurance carriers.

#### How you can help...

Your benefit plan belongs to you through your monthly contributions and the financial support of St. Dominic Health Services. In order to maintain these excellent levels of benefits, we must continue to work together to contain costs. We ask that you take the time to understand how your plan selections work and that you and your family discuss treatment expenses with your medical provider.

Remember to keep this enrollment guide handy to use throughout the year.

# ELIGIBILITY

### How do I know if I am eligible for the benefit plan?

#### For our employees...

All full-time, active employees (excluding non-benefited) working at least 30 hours per week are eligible to participate in all of St. Dominic Health Services' benefits. New full-time employees may participate in our benefit program the first of the month following 30 days of continuous employment. You will be required to complete the necessary forms and provide such data as is reasonably required by the insurance providers. It is important to remember that you must enroll within 30 days of your date of hire or you will not be able to participate in the benefit program until the next designated open enrollment. If you are an existing employee, open enrollment is the only time that you can make benefit changes, unless you experience a "qualifying event," which is outlined on page 6 of this benefits enrollment guide. Please note that the medical plan does not allow for open enrollment. See page 6 for details on medical enrollment.

All part-time, active employees (excluding non-benefited) working at least 20 hours per week are eligible to participate in the following benefits: voluntary life with accidental death and dismemberment, dental, vision, accident, critical illness, short-term disability, burial, healthcare flexible spending account, cancer, Universal LifeEvents and LifeLock.

### And their family members...

Eligible dependents include:

- Your spouse
- The following dependent children are eligible to age 26, regardless of student or marital status:
  - Natural children
  - Adopted children or children placed with a Covered Employee in anticipation of adoption
  - Step-children as long as a natural parent remains married to the Covered Employee
  - An unmarried child or children if the Covered Employee is the Legal Guardian
- Totally disabled children

#### For Medical coverage only, dependent child must not be eligible for their own employersponsored or their spouse's employer-sponsored medical coverage.

For additional information on eligibility requirements, please refer to the Summary Plan Document or call the Employee Benefits Department at 601-200-6733 or 601-200-6711.

# ENROLLMENT

#### The Enrollment Process...

- The Employee Benefits staff will assist all employees with their benefits enrollment.
- All newly hired eligible regular full-time or part-time employees, as noted on the previous page, may enroll in St. Dominic Health Services benefits within their first 30 days of employment.
- Coverage for benefit plans will begin the first of the month following 30 days of employment.

#### Our Medical Enrollment...

Our Medical plan does not allow for an Open Enrollment period. If you do not sign up for Medical coverage for yourself and your dependents when first eligible, you will not be allowed to enroll in Medical coverage for yourself and/or your dependents, unless you qualify for a Special Enrollment Period as defined in the Medical Summary Plan Document. Any enrollment based on a Special Enrollment Period must be completed within 31 days of the event (e.g. marriage, birth, loss of coverage).

If you want to add dependents to the medical plan when first eligible or during a Special Enrollment Period, you must provide proper documentation (marriage license and birth certificate). If you are adding an adult child, you must also sign a document stating the child is not eligible for their own employer-sponsored or their spouse's employer-sponsored medical coverage. Please remember that you must drop coverage for your adult child when he or she becomes eligible for their own employer-sponsored or their spouse's employer-sponsored medical coverage.

If you participate in the medical plan, there will be an Annual Enrollment period in which you may make changes to your election. You will not be allowed to add coverage for yourself or dependents during the Annual Enrollment period; however, you may drop coverage or switch between the High and Low options, but only for current covered participants. If you drop coverage, you will not be able to add it back unless you qualify for a Special Enrollment Period.

#### Our Annual Open Enrollment...

Each year during the Annual Open Enrollment period, you may enroll, drop or make changes to all other benefit elections (excluding medical). Once those elections for vision, dental and/or healthcare flexible spending account are made, they cannot be changed until the next Open Enrollment period, unless you experience a qualifying status change as defined in the Summary Plan documents. Any changes to benefits based on a qualifying status change must be completed within 31 days of the status change.

Short-Term Disability, Cancer, Universal LifeEvents, Critical Illness, Accident, and Identify Theft Protection can only be enrolled during Annual Open Enrollment.



Adding long-term disability, voluntary life coverage, dependent life coverage, critical illness coverage, short-term disability, cancer, or Universal LifeEvents may require submitting evidence of insurability for approval of coverage.

#### Your Medical Options...

We have designed our medical plan to protect you and your family from financial strain in the event of a catastrophic illness.

Your medical plan options are administered through St. Dominic Health Services, and you may receive medical care from any Mississippi Health Partners Network provider you choose. However, the amount of out-of-pocket expense you incur depends on the hospital you go to. When going to St. Dominic Hospital, your out-of-pocket expense will be less.

American Health Holding, our Utilization Management vendor, must be notified of <u>all</u> hospitalizations, whether at St. Dominic or at another provider. You or your physician may call the toll free number shown on your medical ID card, 1-877-253-4550.

### Please note that non-network facilities are not covered under the medical plan. To locate a listing of network providers, please visit <u>www.mhpartners.com</u>.

You have two medical plan options from which to choose. The High Option Medical Plan provides a higher benefit level and is therefore more expensive on a monthly premium basis. The Low Option Medical Plan provides a lower benefit level and requires more out-of-pocket expense on your part. This is why the Low Option Medical Plan is less expensive on a monthly premium basis.

We encourage you to compare both of these programs and select the one that best fits the needs of you and your eligible family members.







# MEDICAL

Benefit		High Option	
Lifetime Maximum Plan Benefit		Unlimited	
Calendar Year Maximum Plan Benef	fit	\$2,000,000	
St. Dominic Hospital Service	<u>25</u>		
Inpatient Hospital Copay (per admis	ssion)	\$175	
Coinsurance		100%	
Outpatient Surgery Copay		\$100	
Coinsurance		100%	
Colonoscopy Coinsurance		100%, deductible waived	
Mississippi Health Partners I	Network		
Inpatient Hospital Copay (per admis	ssion)	\$1,000	
Coinsurance		70%	
Out-of-Pocket Limit		Unlimited	
Outpatient Surgery Copay (per adm	ission)	\$500	
Coinsurance		70%	
Out-of-Pocket Limit		Unlimited	
Non Network (Non MHP Hospitals) No Benefit		No Benefit	
Physician Services (including Emergency Room)			
Network Physicians			
Calendar Year Deductible		\$300 single/\$600 family	
Coinsurance		80%	
Out-of-Pocket Limit		\$2,000 single/\$4,000 family	
Office Visit Copay		\$5 at St. Dominic	
		Physicians only	
Non-Network Physicians			
Calendar Year Deductible		\$1,000 single/\$2,000 family	
Coinsurance		60%	
Out-of-Pocket Limit		Unlimited	
Wellness Benefit (In Networl	<u>« Only)*</u>	No deductible/covered 100% (subject to age/sex parameters as listed on page 9)	
Prescription Drugs			
Purchased at Farlow's		Generic Preferred Brand Name	

Purchased at all other Network Pharmacies (all Network Pharmacy purchases are subject to a \$100 calendar year deductible)

#### ption Low Option Unlimited 0 \$2,000,000 \$250 100% \$150 100% luctible waived 100%, deductible waived \$1,000 60% Unlimited \$1,500 60% Unlimited No Benefit

\$750 single/\$1,500 family70%\$4,000 single/\$8,000 family\$5 at St. DominicPhysicians only

\$1,000 single/\$2,000 family 60% Unlimited

\$10 Copay \$30 Copay \$50 Copay \$105 Copay \$15 Copay \$40 Copay \$60 Copay \$105 Copay

\*Your claim must be coded as wellness in order to receive 100% benefit. Wellness Colonoscopies, Flexible Sigmoidoscopies, Mammograms and Bone Density Test must be performed at St. Dominic to receive 100% benefit. Wellness Colonoscopies, Flexible Sigmoidoscopies and Mammograms performed by a Mississippi Health Partners or a PPOplus provider are subject to your PPO calendar year deductible and coinsurance.

Injectable

Injectable

Generic

Non-Preferred Brand Name

Non-Preferred Brand Name

Preferred Brand Name

This overview provides a quick reference but is not a complete description of the plan. Please read the entire plan carefully for a full explanation of plan benefits, limitations and exclusions.

### MEDICAL

#### **PREVENTIVE CARE PARAMETER** for HIGH and LOW OPTIONS

NOTE: Services that are boxed must be performed at St. Dominic to receive the 100% benefit.

Age	Sex	Procedures Recommended	Age	Sex	Procedures Recommended
0 – 1 year	M/F	<ul> <li>Preventive medicine evaluation or re-evaluation / 8 in age range</li> <li>Hemoglobin, hematocrit, or CBC / 5 in range for those age 6 months or older</li> <li>Immunizations per Mississippi State Department of Health schedule / TB skin test as needed</li> <li>Rotavirus Vaccination / up to age 9 months</li> <li>Varicella (chicken pox) – 2nd vaccination</li> <li>Urinalysis / 2 in age range</li> </ul>	40 – 49 years	F	<ul> <li>Preventive medicine evaluation or re-evaluation / 1 per year</li> <li>Blood pressure / 1 per year</li> <li>Breast exam / 1 per year</li> <li>Glucose / 1 procedure every year</li> <li>Hemoglobin, hematocrit, or CBC / 1 per year</li> <li>Immunizations / TB skin test as needed</li> <li>Varicella (chicken pox) - 2nd vaccination</li> <li>Lipid profile, total cholesterol, or HDL cholesterol screenings / 1 every year</li> <li>Mammogram / 1 per year *</li> </ul>
2 – 11 years	M/F	<ul> <li>Preventive medicine evaluation or re-evaluation / 1 per year</li> <li>Blood pressure / 1 per year</li> <li>Hemoglobin, hematocrit, or CBC / 1 per year</li> <li>Immunizations per Mississippi State Department of Health schedule / TB skin test as needed</li> <li>Varicella (chicken pox) – 2nd vaccination</li> <li>Urinalysis / 1 per year</li> </ul>	40 – 49 years	M	<ul> <li>Pap smear and pelvic exam / 1 per year</li> <li>Stool for occult blood / 1 per year</li> <li>Urinalysis / 1 per year</li> <li>Preventive medicine evaluation or re-evaluation / 1 per year</li> <li>Blood pressure / 1 per year</li> <li>Glucose / 1 procedure every year</li> <li>Hemoglobin, hematocrit, or CBC / 1 per year</li> </ul>
9 – 27 years	F	Human Papillomaviruse (HPV) Vaccination			<ul> <li>Immunizations / TB skin test as needed</li> </ul>
11 - 21 years	М	Human Papillomaviruse (HPV) Vaccination			<ul> <li>Varicella (chicken pox) – 2nd vaccination</li> <li>Lipid profile, total cholesterol, or HDL cholesterol</li> </ul>
12 – 17 years	M/F	<ul> <li>Preventive medicine evaluation or re-evaluation / 1 per year</li> <li>Blood pressure / 1 per year</li> <li>If female, include breast exam if appropriate for stage of development / 1 per year</li> <li>Glucose / 1 procedure every year</li> </ul>			<ul> <li>Steel for occult blood / 1 per year</li> <li>Stool for occult blood / 1 per year</li> <li>Urinalysis / 1 per year</li> </ul>
		<ul> <li>Hemoglobin, hematocrit, or CBC / 1 per year</li> <li>Immunizations per Mississippi State Department of Health schedule / TB skin test as needed</li> <li>Varicella (chicken pox) – 2nd vaccination</li> <li>Lipid profile, total cholesterol, or HDL cholesterol</li> </ul>	50 years and older	F	<ul> <li>Preventive medicine evaluation or re-evaluation / 1 per year</li> <li>Blood pressure / 1 per year</li> <li>Breast exam / 1 per year</li> </ul>
		<ul> <li>screenings / 1 every year</li> <li>If female and sexually active or age 17, include pap smear and pelvic exam / 1 per year</li> <li>Urinalysis / 1 per year</li> </ul>	50 years and older	F	<ul> <li>Colonoscopy/ 1 every 10 years and Flexible Sigmoidoscopy/ 1 every 5 years *</li> <li>Glucose / 1 procedure every year</li> <li>Hemoglobin, hematocrit, or CBC / 1 per year</li> </ul>
18 – 34 years	F	<ul> <li>Preventive medicine evaluation or re-evaluation / 1 per year</li> <li>Blood pressure / 1 per year</li> <li>Breast exam / 1 per year</li> <li>Glucose / 1 procedure every year</li> <li>Hemoglobin, hematocrit, or CBC / 1 per year</li> <li>Immunizations / TB skin test as needed</li> <li>Varicella (chicken pox) - 2nd vaccination</li> <li>Lipid profile, total cholesterol, or HDL cholesterol screenings / 1 every year</li> </ul>			<ul> <li>Immunizations / TB skin test as needed</li> <li>Varicella (chicken pox) – 2nd vaccination</li> <li>Lipid profile, total cholesterol, or HDL cholesterol screenings / 1 every year</li> <li>Mammogram / 1 per year *</li> <li>Pap smear and pelvic exam / 1 per year</li> <li>Stool for occult blood / 1 per year</li> <li>Urinalysis / 1 per year</li> <li>Bone Density Test / 1 per lifetime</li> </ul>
		<ul> <li>Pap smear and pelvic exam / 1 per year</li> <li>Urinalysis / 1 per year</li> </ul>	50 years and older	М	<ul> <li>Preventive medicine evaluation or re-evaluation / 1 per year</li> <li>Blood pressure / 1 per year</li> </ul>
35 – 39 years	F	<ul> <li>Preventive medicine evaluation or re-evaluation / 1 per year</li> <li>Blood pressure / 1 per year</li> <li>Breast exam / 1 per year</li> <li>Glucose / 1 procedure every year</li> <li>Hemoglobin, hematocrit, or CBC / 1 per year</li> </ul>			<ul> <li>Colonoscopy/ 1 every 10 years and Flexible Sigmoidoscopy/ 1 every 5 years *</li> <li>Glucose / 1 procedure every year</li> <li>Hemoglobin, hematocrit, or CBC / 1 per year</li> <li>Immunizations / TB skin test as needed</li> <li>Varicella (chicken pox) – 2nd vaccination</li> </ul>
35 – 39 years	F	<ul> <li>Immunizations / TB skin test as needed</li> <li>Varicella (chicken pox) – 2nd vaccination</li> <li>Lipid profile, total cholesterol, or HDL cholesterol screenings / 1 every year</li> <li><u>Mammogram</u>/ 1 time during this age range *</li> <li>Pap smear and pelvic exam / 1 per year</li> <li>Urinalysis / 1 per year</li> </ul>			<ul> <li>Lipid profile, total cholesterol, or HDL cholesterol screenings / 1 every year</li> <li>Prostate specific antigen with digital rectal exam / 1 per year</li> <li>Stool for occult blood / 1 per year</li> <li>Urinalysis / 1 per year</li> </ul>
18 – 39 years	М	<ul> <li>Preventive medicine evaluation or re-evaluation / 1 per year</li> <li>Blood pressure / 1 per year</li> <li>Glucose / 1 procedure every year</li> <li>Hemoglobin, hematocrit, or CBC / 1 per year</li> <li>Immunizations / TB skin test as needed</li> <li>Varicella (chicken pox) – 2nd vaccination</li> <li>Lipid profile, total cholesterol, or HDL cholesterol screenings / 1 per year</li> <li>Urinalysis / 1 per year</li> </ul>	at St. Dominic * Colonoscopies	c will pay Flexibl rs or a P	e Sigmoidoscopies [Mammograms] [Bone Density] Tests performed y at 100%. e Sigmoidoscopies] and [Mammograms] performed by a Mississippi PO plus provider are subject to your PPO calendar year deductible

## WELLNESS

### Annual Health Risk Assessment And Screening...

St. Dominic's provides all full and part-time benefit eligible employees a comprehensive annual health risk assessment and screening at no cost. This program services the entire health continuum, from helping healthy employees stay healthy to helping high-risk employees deal successfully with chronic disease and disability. This program includes: health assessment, lifestyle management, communication, incentives, measurement, and evaluation.



For more information regarding the annual health risk assessment, please contact Deidre Mooney at 601-200-6446.

### Healthy Lives Program...

The Healthy Lives Program is an additional Wellness Benefit provided at no cost to all employees, spouses and dependents 18 years and older on St. Dominic's Medical Insurance plan. Participation in Healthy Lives provides access to many benefits, including a free comprehensive health risk assessment, health screening, health coaching services, educational programs, reduction in health insurance premiums, and annual cash back rewards.

An employee and/or spouse who completes the Healthy Lives initial screening program will receive:

- \$5 (employee **or** spouse) or \$10 (employee **and** spouse) monthly discount on their Medical premiums; and
- The following drugs free at Farlow's

Label Name	Uses	Copay
Simvastatin 40 Mg Tablet	Cholesterol	\$0.00
Metformin Hcl 500 Mg Tablet	Diabetes	\$0.00
Metformin Hcl 1,0 <mark>00 Mg Tab</mark> let	Diabetes	\$0.00
Amlodipine Besylate 10 Mg Tab	High Blood Pressure	\$0.00
Amlodipine Besylate 5 Mg Tab	High Blood Pressure	\$0.00
Hydrochlorothiazide 12.5 Mg Cp	High Blood Pressure	\$0.00
Hydrochlorothiazide 25 Mg Tab	High Blood Pressure	\$0.00
Hydrochlorothiazide 25 Mg Tab	High Blood Pressure	\$0.00
Lisinopril 10 Mg Tablet	High Blood Pressure	\$0.00
Lisinopril 20 Mg Tablet	High Blood Pressure	\$0.00
Lisinopril 5 Mg Tablet	High Blood Pressure	\$0.00
Lisinopril-Hctz 10-12.5 Mg Tab	High Blood Pressure	\$0.00
Losartan Potassium 50 Mg Tab	High Blood Pressure	\$0.00
Losartan-Hctz 50-12.5 Mg Tab	High Blood Pressure	\$0.00

For more information regarding the many no cost wellness services, please contact Deidre Mooney at 601-200-6446.

### WELLNESS

#### The Club At St. Dominic's Fitness Center...

The Club is a medically-based facility geared toward helping you reach and maintain an optimal level of health through safe exercise and strength training. An exceptional aquatic exercise program, state-of-the-art equipment and an array of fun and exciting classes – not to mention a personable, qualified staff – make The Club the ultimate choice for fitness and overall well-being.

When you join The Club, you'll receive a comprehensive wellness assessment that includes muscular strength, endurance, flexibility, pulmonary function test and a fasting blood analysis. Periodic reassessments are available to help you track your health progress.

Your membership at The Club gives you access to: Toning & Strength classes, Yoga & Pilates, Indoor Cycling, Personal Training, Massage Therapy, Water Aerobics, Pre/Post Natal Fitness, Sauna & Steam Rooms, Heated Indoor Pool, Indoor Track/Outdoor Walking Trail, Latest Cardio & Strength Training Equipment, Degreed & Certified Staff, and Monitored Transition from St. Dominic's Rehab programs.

The Club at St. Dominic's is located on the 2<sup>nd</sup> floor of Dominican Plaza and is open 7 days a week. For more information call 601-200-4925.

#### Healthy Weight Advantage...

The Healthy Weight Advantage program offers a full range of options designed to help people lose 10 to more than 200 pounds. We approach the task of weight loss with a commitment that goes well beyond traditional diet plans. Taken as directed, the food plan provides 100% of the Daily Value for vitamins and minerals, so you can be confident you're getting the nutrition you need. Healthy Weight Advantage has three diet options from which to choose: Medically Supervised Low or Very Low Calorie & Decision Free Diet, Healthy Solutions or HMR at Home Kits.

With the Healthy Weight Advantage program, you'll do more than just learn how to lose weight. From the first day in the program, you'll actually start practicing specific strategies that will help you keep the weight off after you complete the program.

#### Tobacco Use Policy...

Because we, as your employer, care about your health, and want to continue providing quality healthcare benefits to you despite rising costs, effective January 1, 2014, St. Dominic will implement a new tobacco policy. The focus of the plan is to reward tobacco free behavior and encourage tobacco users to become tobacco free.

An employee or spouse, who uses tobacco and is covered by St. Dominic's health plan, will be charged a \$25 per month premium surcharge or \$ 50 if both the employee and the employee's spouse use tobacco and the spouse is covered under the plan. A plan participant is a "tobacco user" if he or she smokes cigarettes, cigars, cigarillos, pipes, uses chewing tobacco, snuff, dip, a loose tobacco via pipe, hookah, or other means.

#### **Tobacco Cessation Program...**

If an employee is a tobacco user, he/she has the opportunity to pay non-tobacco user rates by participating in a Tobacco Cessation Program, which will be administered by the Mississippi Tobacco Quitline. Similarly, if your spouse is covered under your plan, and he/she is a tobacco user, then he/she can also qualify to participate in Quitline. Tobacco users who enroll in Mississippi Tobacco Quitline will enjoy non-tobacco premium rates upon enrollment into the program. Your employer will pay for any enrollment costs associated with the program, and enrollees may involve their doctor if they desire.

Further, if your doctor thinks participation in Quitline is not medically advisable for you, we will work with you to find a wellness program with the same reward that is right for you in light of your health status.

For more information about St. Dominic's Tobacco Policy or to enroll in the Mississippi Quitline, please contact Deidre Mooney at 601-200-6446.

### DENTAL

### Your Dental Benefits...

Dental health care is important for you and your family. For that reason, we provide you with the opportunity to participate in the following dental benefits, which are underwritten by Ameritas. In order to provide you with the level of coverage that best fits the needs of you and your family we are offering two dental options. With either option, you have the availability to see the dental provider of your choice. Our dental care program provides the following benefits:

<u>Services</u>	High Option	Low Option
Annual Deductible	\$50 per person/\$150 per family	\$50 per person/\$150 per family
Annual Maximum Benefit	\$1,250 per person per year	\$1,250 per person per year
Preventive - Exams, Cleanings, Periodic X-Rays	100% with no deductible, up to usual and customary	Based on a schedule with no deductible (see sample schedule below)
Basic Restorative - Fillings, Sealants, Oral Surgery	80% after deductible up to usual and customary	Based on a schedule after deductible (see sample schedule below)
Major Restorative - Crowns, Bridgework, Dentures, Implants	50% after deductible up to usual and customary	Based on a schedule after deductible (see sample schedule below)
Orthodontia/Braces Separate \$1,250 lifetime maximum benefit	50% with no deductible up to usual and customary	50% with no deductible up to usual and customary

#### Example Schedule of Benefits for Low Option

<u>Plan Code</u>	Description	Reimbursement
0120	Periodic Oral Evaluation	\$19
1110	Prophylaxis Adult	\$41
2140	Amalgam, 1 Surface, Permanent	\$30
2752	Porcelain Crown, 1 Tooth	\$186
3330	Root Canal Therapy, Molar	\$187
7140	Extraction, 1 Tooth	\$34

**DENTAL REWARDS** – Both options include Dental Rewards, which allows members to carry forward a portion of the unused annual maximum. Members going to the dentist at least once a calendar year and using a total benefit, not exceeding \$500, will be rewarded the following benefit year with \$250 added to their \$1,250 calendar year maximum. The maximum reward earned is an additional \$1,000 for a total possible calendar year maximum of \$2,250.

If you enroll after your eligibility period, during the first year of coverage you will only be covered for cleanings, exams and fluoride treatments (fluoride treatments are for children only).

Please refer to plan document for guidelines, limitations and/or exclusions.

## VISION

#### Your Vision Benefits...

St. Dominic Health Services provides with the opportunity to participate in our vision program. All vision care benefits must be rendered on a prescription basis by an optometrist or an ophthalmologist. The benefits listed below are to be provided on a reasonable and customary basis at 100%, up to the limits listed in the schedule of benefits. If you elect to use an out-of-network provider, you will need to pay for your services at the time of service and then file a claim with AlwaysCare. You can find their phone number on page 22 of the benefits enrollment guide. You will be reimbursed the amount stated in the schedule of benefits.

Vision Benefits include:

Services	<b>Frequency</b>	In-Network	Out-of-Network
Copay		\$10 exam/\$25 materials	N/A
Eye Exam	Every 12 months	Paid at 100% after copay	Up to \$45
Lenses	Every 12 months	Paid at 100% after copay	Up to \$70
Frames	Every 24 months	Up to \$130 after copay	Up to \$45
Contact Lenses	Every 12 months (You choose between lenses and contacts.)	Medically necessary covered in full. Elective up to \$175.	Medically necessary up to \$250. Elective up to \$105.

Patient options included under the materials copay are: All ranges of prescriptions and sizes, scratch resistant coating, UV coating, solid and gradient tinting, and polycarbonate lenses for children at Wal-Mart and Sam's Club only.

Our vision plan is administered through AlwaysCare. You can go to their website at www.alwayscarebenefits.com to obtain a list of participating providers.

Please refer to plan document for guidelines, limitations and/or exclusions.

## LIFE INSURANCE/AD&D

#### Life Insurance Benefits to protect your family...

Life insurance is invaluable to your family at the time of your death. It can provide some level of security at a very difficult time. Accidental Death and Dismemberment (AD&D) insurance adds to that protection with additional financial assistance if you lose your life in an accident.

#### Basic Term Life and AD&D...

Because we know how important this benefit is to individuals and their families, we provide a term life insurance benefit through Standard equal to one times your annual earnings, up to a maximum of \$500,000, for all benefit eligible full-time employees. An equal amount of AD&D is included.

# Voluntary Supplemental Term Life and AD&D insurance for you and your family members...

In the untimely event of your death, do you really have enough life insurance protection to meet the needs of your family? Because all families are different, St. Dominic Health Services has included the opportunity for you to purchase additional term life insurance and AD&D protection through Standard. This coverage is purchased through payroll deduction and is in addition to the base term life and AD&D the hospital provides you. You may purchase additional amounts of insurance in \$10,000 increments, up to five times your annual salary or \$500,000, whichever is less. The first \$150,000 of life insurance benefits you purchase is guarantee issue, meaning that you do not need to provide medical information when you are first eligible. If you sign up for more than \$150,000, or if you sign up after your 30 day eligibility period, you must answer health questions.



#### Dependent Life...

In addition, you can also purchase term life and AD&D insurance on your spouse and child(ren). For your spouse, we offer you the opportunity to elect amounts of coverage in increments of \$5,000, up to a maximum of \$250,000. You may not purchase more life insurance on your spouse than you have on yourself; however, the benefit amounts may be the same. The first \$50,000 of spouse life coverage you purchase is guarantee issue, meaning that your spouse does not need to provide medical information when first eligible. If your spouse signs up for more than \$50,000, or after your 30 day eligibility period, your spouse must answer health questions. You may also insure your eligible dependent child(ren) for \$20,000 from birth to age 26, regardless of student status. The \$20,000 of child life coverage is guarantee issue, meaning that your children do not need to provide medical information when first eligible. If you sign up for child coverage after your 30 day eligibility period, your children must answer health questions.

The cost of employee and spouse coverage is based on the employee's age. Your premium will increase as you move into a new age band.

Please refer to plan document for guidelines, limitations and/or exclusions.

# DISABILITY

#### Short-Term Disability...

St. Dominic Health Services provides you with an opportunity to purchase short-term disability insurance through Trustmark Voluntary Benefit Solutions using the convenience of payroll deduction. This insurance is portable, meaning that should you leave your employment at St. Dominic Health Services, you can take the coverage with you.

The short-term disability benefits are as follows:

- Benefit Amount is in \$100 increments up to 60% of pre-disability base income, up to \$6,000 per month.
- Benefits paid on same cycle as your paycheck.
- Elimination Period is 14 days sickness / 14 days illness.
- Disability resulting from pregnancy or childbirth is covered as any other illness, 10 months after coverage effective date.
- Benefit Period is 90 days.

Please refer to plan document for guidelines, limitations and/or exclusions.

You can obtain the monthly cost of this coverage and enroll only through annual open enrollment.

### Long-Term Disability...

Who would pay your bills and insure that your income is protected if you were unable to work for an extended period of time? In order to make sure that your family would not face the financial hardships of your inability to earn an income, St. Dominic Health Services provides you the opportunity to purchase long-term disability insurance from Standard through payroll deduction. This plan is designed to help replace a significant portion of your income until you reach your normal retirement age under the Social Security Act (assuming your disability begins prior to age 60). This plan has an option that allows you take the coverage with you should you leave employment at St. Dominic Health Services. Refer to your plan document for additional details. As an employee, if you sign up for coverage after your 30 day eligibility ends, you must answer health questions.

Your long-term disability plan benefits are as follows:

- Benefit Amount is up to 60% of pre-disability base income, up to \$6,000 per month. Actual benefit may be subject to other income offsets.
- Elimination Period is 90 days of disability.
- Benefit Period is to your normal retirement age under the Social Security Act.

Please refer to plan document for guidelines, limitations and/or exclusions.

The cost of coverage is based on your salary and age. Your premium will change as you have a change in salary or move into a new age band.

# HEALTHCARE FLEXIBLE SPENDING ACCOUNT

A Healthcare Flexible Spending Account is a great way to reduce the financial impact of eligible health care expenditures. You can enroll within 30 days of your initial eligibility or during our Annual Open Enrollment. You may elect to contribute up to \$2,500 per calendar year to your account. It is important to note that any amount left in your account 2 ½ months from the end of each plan year is forfeited. Also, once your election is made, it cannot be changed until the next plan year unless you experience a status change as defined in the Summary Plan Document.

#### **Examples of Eligible Medical Expenses**

- Deductibles, Coinsurance and Copays
- Contact Lenses/Contact Solution
- Hospital, Dental, Physician, Surgical and Diagnostic Fees, as well as out of pocket expenses not covered by insurance
- Prescription Drugs/Medical Supplies
- Over-The-Counter Drugs Used to Alleviate or Treat a Medical Condition. Over-The-Counter Drugs will be covered only with a prescription written by a physician. Prescription must be provided to Fox/Everett before the claim will be honored.
- Routine Physical and Non-Diagnostic Treatments
- Smoking-Cessation Programs

#### **Pre-Tax Premium Option...**

All payroll deductions for medical, dental, vision, and health care flexible spending account will be pre-taxed. If you select this benefit, your premium expense is deducted from your gross wages, which



allows you to reduce your taxable income by the amount of your deduction. It's a great way to reduce the actual cost of your monthly contributions. If you elect these benefits, you need to understand that you cannot later change your decision, unless you experience a qualified family or employment status change. Your premium deductions will automatically be taken pre-tax unless you opt out.

The plan administrator for our flexible spending account is Fox-Everett. You can find their contact information on page 22 of this enrollment guide.

## BENEFIT TIME OFF AND EXTENDED SICK LEAVE (ESL)

#### Benefit Time Off (BTO) And Extended Sick Leave (ESL)...

Regular employees will accrue paid time off benefits each pay period which may be used to supplement pay for holiday, vacations, sickness, and personal leave with supervisor approval. Non-benefit full-time, and PRN employees are ineligible to accrue paid time off. Paid time off is accrued according to employment classification and length of service based on the date of hire. Only regular full-time employees accrue both BTO and ESL. Full-time employees who regularly work less than 40 hours per week and part-time employees accrue BTO time on a pro-rated basis based on the number of regular hours worked, but a minimum of 40 hours must be worked in a pay period to accrue any BTO. All regular full-time employees accrue three hours of ESL each pay period, or 76 hours per year, regardless of hours worked. Part-time, non-benefit full-time, and PRN employees do not accrue ESL hours.

<u>Years of</u> <u>Service</u>	<u>Hours per Pay</u> <u>Period</u>	<u>Hours Last Pay</u> <u>Period of Year</u>	<u>Hours Per</u> <u>Year</u>	<u>Days Per</u> <u>Year</u>
0 – 2	6.770	6.750	176	22
2 – 5	7.385	7.375	192	24
5 – 8	8.000	8.000	208	26
8+	8.924	8.900	232	29

Eligible employees will accrue BTO according to the following guidelines:

Use of paid benefit hours are subject to the following guidelines:

- 1. All BTO requests must be scheduled in advance and approved by the employee's immediate supervisor.
- 2. St. Dominic recognizes the following holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, and Christmas. Employees must use BTO hours to be compensated for these holidays. An employee must obtain supervisory approval to work on a recognized holiday. NOTE: To ensure that new employees are compensated for St. Dominic recognized holidays, employees who are employed for less than 90 days are eligible to take earned BTO for holidays they are not scheduled to work. BTO is not available for vacation or other holidays until the employee has completed 90 days of employment.
- **3**. Employee illnesses are compensated with BTO and ESL hours. The first 16 hours of each episode of illness are compensated with BTO hours. All subsequent hours/days are compensated with ESL hours if the employee provides his/her supervisor with a physician's statement. ESL will be paid from the first day of absence to employees that have a medically necessary, physician-verified period of inpatient hospitalization requiring a minimum overnight stay of 24 hours. Furthermore, if an employee has subsequent intermittent absences based on a continuation of the same illness or injury within 30 days of the first absence for the incident, hours missed subsequent to the first 16 hours of absence will be covered by ESL.
- **4**. Employees should notify supervisors of unplanned absences at least two (2) hours prior to their scheduled shift. BTOS hours will be paid for unscheduled absences.
- 5. Funeral leave will be paid from ESL hours.
- 6. Employee may use ESL and BTO hours to make up the difference in pay between Workers' Compensation benefits and regular pay when the employee is off work due to injury.

# BENEFIT TIME OFF AND EXTENDED SICK LEAVE (ESL)

- 7. With the exception of St. Dominic recognized holidays new employees must complete a 90-day qualifying period from date of hire to use BTO hours. New employees must complete a 180day qualifying period to use ESL hours although hours accumulate from date of hire. PRN employees who change to part-time or full-time status must complete a 90-day qualifying period for BTO use. Part-time and PRN employees who change to full-time status must complete a 180-day qualifying period for ESL use.
- 8. BTO and ESL hours are available for use during the pay period after they are earned (after meeting qualifying period requirements). Current accrual rates are available on Dominet under employee self service and printed on check stubs each pay period.
- **9**. Employees will not be allowed to have a negative BTO accrual (borrowing from future accruals). If for some reason an employee has mistakenly been granted BTO in advance of eligibility and is terminated prior to being eligible for BTO, all advance payments will be deducted from their final paycheck.
- 10. Hourly employees are allowed to take BTO and ESL time in increments of hours or tenths of hours. Because of the nature of exempt employees and the expectation of the hours they are required to work, BTO should only be given to exempt employees for full days.
- 11. The number of BTO hours that an employee is allowed to have at one time is limited to the maximum accrual allowed according to years of experience. When an employee's earned BTO hours exceed the maximum, the excess hours will be assigned to a "Lost Hours" category. The payroll system will annually survey each employee's accumulation and move up to twenty hours from the Lost Hours category to ESL. Any Lost Hours in excess of twenty will be deleted. No Lost Hours may be restored to BTO. Requests for exceptions to this policy should be rare occurrences and it is expected that proper planning of BTO time will be conducted by the employee and coordinated with the supervisor. In the event an exception is requested for payment of excess BTO hours due to unusual circumstances, a recommendation and explanation from the employee's department manager must be forwarded to the Vice-President for Human Resources for review. Only the hospital President may authorize exceptions if recommendations are approved.
- 12. On December 1 of each year, employees with ESL hours in excess of 720 will be allowed to convert excess hours on a two-for-one basis into either cash or BTO hours. Employees with 90-119 days of ESL may convert a maximum of 10 days of ESL per year provided that a balance of 90 days is maintained. Employees with 120 days of ESL or more may convert a maximum of 12 days of ESL per year provided that a balance of 90 days is maintained.
- **13**. Employees will be allowed to voluntarily convert up to 20 hours of BTO to ESL annually on November 30.
- 14. Employees who resign with proper notice and who have completed at least one year of employment will be paid for all unused BTO hours. Employees who terminate within the first year of employment, who terminate without notice or who are discharged, will not be paid for earned and unused BTO hours. Excess ESL will be paid out on a two-for-one basis at termination when the ESL balance exceeds 720 hours.

# ADDITIONAL BENEFITS

#### DominiCare...

St. Dominic Health Services operates an on-site child care facility for the children of our employees. The center is licensed by the Mississippi Department of Health and meets all state requirements. The center is open seven days a week, 6 AM to 7:30 PM. The director of DominiCare will provide additional information concerning curriculum and rates. For more information, you may contact Fannie Harper at 601-200-4100.

### Long-Term Care...

Your career or the care of a loved one? It's not a choice you should have to make. Yet each year people across the country may have to put their business and career plans on hold to become a caregiver for family members. Perhaps you're lucky and your loved ones have planned carefully enough that caring for them isn't an issue. But can you make the same claim for yourself? The average cost of long-term care in the United States is \$56,575 per year.

Our Mass Mutual long-term care plan features the following benefits:

- You become eligible when you cannot perform two out of six activities of daily living.
- Eligible employees can receive benefits in their home, nursing home, assisted living facilities and adult day care facilities.
- Employees of St. Dominic Health Services receive a 10% premium discount and their spouses receive a 50% premium discount on a joint policy.

Please refer to plan document for guidelines, limitations and/or exclusions.

You can obtain the monthly cost of this coverage and enroll only through annual open enrollment.

#### Burial...

St. Dominic Health Services offers a burial plan through the H.D. Catchings Agency for each employee and their family members (spouse, children, and grandchildren). This benefit may be purchased for \$2.00 per week per individual with no medical questions. The plan goes into effect as soon as the payroll deduction slip and application are signed. If there is a change in employment, the program may be continued with no decrease in benefits or increase in premiums.

Please refer to plan document for guidelines, limitations and/or exclusions.

You can obtain the monthly cost of this coverage and enroll only through annual open enrollment.

#### Cancer Insurance...

If you are diagnosed with cancer, how will you pay for what your health insurance won't? UNUM's Voluntary Cancer Insurance provides benefits for direct and indirect expenses associated with the diagnosis and treatment of cancer and other specified diseases. Although medical insurance will pay for a portion of the cost associated with the treatment of cancer, there is still a large amount of out of pocket expenses.

Plan features of our Cancer Program include:

- Initial Diagnosis Benefit- \$1,500
- Reimbursements for hospital confinement, private duty nursing, home health care, hospice, radiation, chemotherapy, blood and plasma, etc. for the treatment of Cancer
- Reimbursements for hospital confinement, ambulance and attending physician costs incurred for the treatment of a specified disease
- Cancer Screening/Wellness Benefit- \$25 Mammogram Only
- Coverage is available for employee, spouse, and children
- Coverage is individually owned which allows you to retain coverage without increases in premiums if you ever leave St. Dominic Health Services
- You purchase through convenient payroll deduction

Please refer to plan document for guidelines, limitations and/or exclusions.

You can obtain the monthly cost of this coverage and enroll only through annual open enrollment.

# ADDITIONAL BENEFITS

#### Universal LifeEvents<sup>®</sup>...

Trustmark Voluntary Benefit Solutions' Universal LifeEvents is designed to provide you with benefits for Long Term Care and death benefits to your beneficiaries if you pass away. At an affordable premium, you can have the added financial protection you and your family may need during times of uncertainty. This valuable offering allows you to enroll yourself, spouse, child(ren) and grandchild(ren) while using the convenience of payroll deduction to pay your monthly premiums.

Plan features of the Universal LifeEvents program include:

- Pays a higher death benefit during the working years when expenses are high and families need maximum protection.
- At age 70, when financial needs are typically lower, the death benefit reduces to one-third.
- Long Term Care Benefit which helps cover the cost for assisted living, home healthcare, adult day care and nursing home care.
- Death Benefit Restoration which restores the death benefit that is reduced to pay for Long Term Care.
- Accidental Death Benefit which doubles the death benefit if death occurs by accident.
- Terminal Illness Benefit which advances up to 75% of your death benefit if your life expectancy is 24 months or less.

Please refer to plan document for guidelines, limitations and/or exclusions. You can obtain the monthly cost of this coverage and enroll only through annual open enrollment.

### Group Critical Illness...

Our group critical illness plan offered through AFLAC/Continental American Insurance Company provides a lump-sum benefit upon the diagnosis of not only one covered illness, but for each covered illness. Cancer, heart attack, major organ transplant, stroke, end stage renal failure, coma, paralysis, burns, loss of sight, loss of speech, loss of hearing, and occupational HIV are all life-changing events. Medical coverage helps with a large portion of the medical expenses associated with the treatment of a critical illness; however there are still expenses that would otherwise be paid out-of-pocket. Consider the expense associated with having to make modifications to your home or job retraining following a critical illness. Without this type of coverage, you would be left to pay for those on your own. Group critical illness insurance provides a lump-sum benefit payment to cover those and other expenses.

Plan Features of our group critical illness program include:

- Lump-sum benefits paid directly to you (unless otherwise assigned) following the diagnosis of each covered critical illness (each additional occurrence must be separated by at least 6 months).
- Lump-sum benefits paid directly to you following the diagnosis of the same covered critical illness if the dates of diagnosis are separated by at least 12 months (12 months treatment free for cancer).
- Spouse coverage available.
- Each child is covered at 25% of the primary insured amount at no additional cost.
- You choose your benefit amount from \$5,000 to \$50,000, with \$25,000 available for your spouse (up to 50% of the employee amount).
- \$50 annual health screening benefit for each covered Employee and Spouse included.
- The plan is portable, so you can take it with you if you ever leave St. Dominic Health Services (with stipulations).
- Level premium rates based on your age at the time of application. Your rates cannot increase due to a change in your age, health or individual claim.
- You purchase through the convenience of payroll deduction.

Please refer to plan document for guidelines, limitations and/or exclusions. You can obtain the monthly cost of this coverage and enroll only through annual open enrollment.

# ADDITIONAL BENEFITS

#### Group Accident...

AFLAC/Continental American Insurance Company's voluntary group accident insurance provides a lump-sum benefit for a wide variety of injuries and accident-related expenses associated with the loss of income due to a covered off-the-job accident. Although medical insurance will pay for a portion of the expenses associated with an accident, there is still a portion that would have to be paid out-of-pocket. Hospitalization, physical therapy, hospital intensive care, transportation and lodging associated with an accident are just some of the expenses the program will help cover. No one can ever truly be prepared for an accident and the costs associated with it, but group accident insurance will provide you and your family with financial security in an unexpected situation.

Plan features of our group accident program include:

- Lump-sum benefits, based on injury or accident-related expense, paid directly to you (unless otherwise assigned). See schedule of benefits for details.
- Coverage is available for employee, spouse, and children.
- \$60 annual health screening benefit for each covered participant included after policy has been in force 12 months.
- The plan is portable, so you can take it with you if you ever leave St. Dominic Health Services (with stipulations).
- You purchase through convenient payroll deduction.

Please refer to plan document for guidelines, limitations and/or exclusions. You can obtain the monthly cost of this coverage and enroll only through annual open enrollment.

### **Identity Theft Protection...**

LifeLock's Identity Theft Protection plan helps protect the identity of you and your covered dependents. You can elect coverage for yourself, spouse and children.

Plan features of LifeLock include:

- Early notification of identity threats.
- Searches the web for illegal selling or trading of your personal information.
- Helps cancel and replace the contents of your lost or stolen wallet.
- Verifies change of address requests and much, much more.

Please refer to plan document for guidelines, limitations and/or exclusions. You can obtain the monthly cost of this coverage and enroll only through annual open enrollment.





## CONTACT INFORMATION

#### Just in case you need more information or assistance...

We know that there are always questions that may arise. To assist you, we have listed below the telephone numbers of the insurance companies that work with us to provide benefits to you and your family members.

To enroll in any of these benefits, please contact the Employee Benefits office at 601-200-6733 or 601-200-6711.

	<u>Customer Service</u>	Policy #
Medical Insurance St. Dominic Health Services Administered through Fox-Everett	1-877-476-6327	775/776
MS Health Partners	1-800-748-1879	N/A
Dental Insurance Ameritas	1-800-487-5553	3501791 3501792
<u>Vision Insurance</u>	1-888-729-5433 ext. 2013	2SDH0110
AlwaysCare <u>Critical Illness and Accident</u> AFLAC/Continental American Insurance Company	1-800-433-3036	individual policy #s
Group & Voluntary Life/AD&D Insurance Standard	1-800-628-8600	155361
Short-Term Disability and Universal LifeEvents Insurance Trustmark Voluntary Benefit Solutions	1-800-918-8877	individual policy #s
Long-Term Disability Insurance Standard	1-800-368-1135	155361
Healthcare Flexible Spending Account (FSA) Fox-Everett	1-877-476-6327	N/A
<u>Long-Term Care</u> Mass Mutual	1-601-981-4545	individual policy #s
Burial Insurance The H.D. Catchings Agency	1-601-355-7489	individual policy #s
<u>Cancer Insurance</u> UNUM	1-800-635-5597	individual policy #s
Identity Theft Protection LifeLock	1-800-543-3562	N/A

**IMPORTANT NOTE:** 

Whenever you call one of our providers, make sure that you identify yourself as an employee of St. Dominic Health Services.

# MONTHLY / PER PAY PERIOD PREMIUMS

Με	edical
High Option	<b>Employee Monthly/Per Pay Period</b>
Employee	\$107.34 / \$53.67
Employee + Child(ren)	\$274.26 / \$137.13
Employee + Spouse	\$364.88 / \$182.44
Family	\$446.48 / \$223.24
Low Option	
Employee	\$78.70 / \$39.35
Employee + Child(ren)	\$209.86 / \$104.93
Employee + Spouse	\$26 <mark>9.48 / \$134</mark> .74
Family	\$334.88 / \$167.44

Premiums above do not include any wellness discount or tobacco surcharge for employee and/or spouse.

	Dental
<b>High Op<mark>tion</mark> Employee Family</b>	\$ 31.00 / \$ 15.50 \$ 86.08 / \$ 43.04
<b>Low Option</b> Employee Family	\$ 16.12/\$ 8.06 \$ 48.88/\$ 24.44
	Vision
Employee Employee + 1 Dependent Family	\$ 6.9 <mark>6 / \$ 3.48</mark> \$ 13.92 / \$ 6.96 \$ 19.96 / \$ 9.98





## MONTHLY PREMIUMS

#### **Monthly Premium Calculations for Voluntary Term Life and Accidental Death & Dismemberment**

The cost of coverage (employee and spouse) is based on the employee's age. Your premium will increase as you move into a new age band. The rates for you and your spouse are as follows:

Age	ployee Rates per \$1,000	-	1se Rate \$1,000	5
Under 30	\$.08	\$	\$.094	
30-34	.10		.104	
35-39	.11		.124	
40-44	.15		.144	
45-49	.22		.214	
50-54	.32		.384	
55-59	.52		.614	
60-64	.72		1.104	
65-69	1.32		1.884	
70+	2.72		3.044	

As an example, if you were 45 years old and wanted to purchase \$50,000 of additional term life and AD&D insurance, your cost would be \$11.00 per month (50 X \$.22). As you can see, this is a very affordable way to provide your family with additional life insurance protection.

The monthly cost for child(ren) voluntary life insurance is \$1.98 for \$20,000 of coverage. One dependent policy covers all your children equally.

#### Monthly Premium Calculations for Long-Term Disability Income Insurance

The cost of coverage is based on your salary and age. Your premium will change as you have a change in salary or move into a new age band.

Age	Rates per \$100 of Payroll
Under 25	\$.440
25-29	.490
30-34	.667
35-39	.863
40-44	1.208
45-49	1.691
50-54	2.300
55-59	3.040
60-64	3.358
65-69	3.726
70+	3.970

As an example, if you are 40 years old and your gross pay is \$3,265 per month, your monthly premium would be \$39.44 (\$3,265 divided by 100 X \$1.208=\$39.44).

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