

BENEFIT PROGRAM 2013 - 2014 PLAN YEAR

"While you take care of patients, we'll take care of you"







Introduction

Mt. Graham Regional Medical Center strives to manage the cost of health care coverage in an effort to keep care affordable for you and your family. Your MGRMC benefits team has carefully balanced increasing costs with our desire to give you meaningful choices for the plan year. For 2013, we are pleased to announce that we will continue to offer the same comprehensive benefits plans with the same carriers this plan year.

Managing your overall health with a focus on wellness and prevention is key to maintaining a healthy lifestyle for you and your family. Our "Climb to Wellness" commitment will continue through the Blue Cross Blue Shield's on-line Healthy Blue wellness program. By participating in this program and earning a minimum of 20 credits by December 31, 2013, you can earn a \$240 incentive bonus check! Just complete the online My BluePrint Health Assessment and participate in the wellness activities through out the year to earn credits.

We encourage you to take advantage of all of the excellent benefit features Mt. Graham Regional Medical Center has to offer. Remember, benefits are not just about medical care, MGRMC's total benefits package includes dental, vision, life and disability insurance, retirement, and a host of other voluntary programs designed to meet your physical, emotional and financial needs.

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When are You Eligible for Benefits?

All employees who's status is 24 hours or greater per week are eligible to participate in MGRMC's benefit programs. If you are eligible to participate in the benefit programs, your eligible dependents may also participate in many of the plans. Your eligible dependents may include your legal spouse or dependents to age 26.

Coverage begins the first day of the month after 30 days of continuous employment and after MGRMC receives your completed enrollment form and any other required materials.

If you do not enroll within 31 days of the end of your eligibility waiting period, neither you nor your dependents will be enrolled in any of the benefit plans. You will have to wait until next annual enrollment unless you have a qualifying event.

Generally, once you enroll in your benefits, you cannot make changes until the next open enrollment period.

Making Changes to Your Benefits

You can make changes during the year only when you have a qualified change in status, sometimes called a Qualified Life Event. These changes include:

- Marriage or divorce
- Birth or adoption of a child
- Commencement of a qualified medical support order for a child
- · Death of a dependent
- An employment status change for you or your spouse
- · Medicare or Medicaid eligibility

You must notify Human Resources within 31 days of the Qualified Life Event in order to make a change in your elections.





Medical

Administered by Blue Cross Blue Shield of AZ

The MGRMC medical plan is administered by Blue Cross Blue Shield of AZ (BCBSAZ). Our plan is a PPO Preferred Plan. With the Preferred Plan you have the choice to use in-network or out-of-network providers. This also means, you have the freedom to see a specialist without a referral.

Blue PPO Preferred				
Benefits	In-Network	Out-of-Network		
Calendar Year Deductible*				
Individual	\$750	\$3,000		
Family	\$1,500	\$6,000		
Coinsurance	100%	80%		
Out-of-Pocket Maxir	num - Includes Annual	Deductible		
Individual	\$750	\$9,000		
Family	\$1,500	\$18,000		
Benefit Maximum - Lifetime	Unli	mited		
Physician Co-Pay	\$25 copay	80%*		
Specialist Co-Pay	\$50 copay	80%*		
Hospital				
Inpatient	100%*	80%*		
Outpatient Surgery	100%*	80%*		
Emergency Visit	\$125	copay		
Urgent Care	ent Care \$50 copay 80%*			
Prescription Drugs - Generics First				
Level 1	\$10	Copay plus the balance bill		
Level 2	\$30	(difference between a		
Level 3	\$50	pharmacy's price and the allowed amount).		
Preventive Services	100% copays, deductibles and coinsurance waived	Routine Mammogram only covered at 80% deductible waived		
Maternity	Initial visit copay then 100% after deductible is met	80%*		
Chiropractic Services	\$25 copay	80%*		

^{*}Plan benefits paid after deductible is met.

BlueNet for Members

To ensure that your account information is available to you any time of the day or night, BlueNet offers online access 24/7 to view account transactions and other highly utilized resources.

The portals make it even easier to access any of the online services BCBSAZ offers to their customers, including account and benefit information, claims status lookups, deductible trackers, cost calculators, health and wellness knowledge centers, and much more. Use the login area located at **www.azblue.com** to access your BlueNet account.

Free Mobile App - AZ Blue

AZBlue Mobile is designed to help you use and manage your healthcare coverage when you're on the go. Whether you're at the doctor's office, at work, or out running errands, AZBlue Mobile makes it easier than ever to access your ID Cards, Coverage Summary, Deductible Balances, Blue Cross Blue Shield of Arizona contact information, and also locate Urgent Care Centers. You will also have access to helpful health and wellness tools.



Tobacco Affidavit

As part of our overall wellness program, MGRMC will add a \$15/ per paycheck (\$30 month) surcharge to the employee's group health insurance premium if you use tobacco products. All employees will be required to complete a Tobacco Affidavit at enrollment which confirms employees use status. Employees may avoid the monthly surcharge by enrolling in a tobacco cessation program through Arizona Smokers Helpline (ASHline) or Blue Cross/ Blue Shield of Arizona.

Employees may contact
Toni Burress, MGRMC Health
Educator at 928-348-8774
to enroll in ASHline. BCBS
cessation programs can
be initiated by logging
on to www.azblue.com/
healthlyblue or calling
877-694-2583.







Dental

Administered by MetLife

Taking care of your teeth is as important as taking care of the rest of your body. MGRMC offers eligible employees a dental plan through MetLife. Members can visit any licensed dentist—no referrals are required.

MetLife offers many online tools and information that will save you time and make you more familiar with the benefits of your dental plan. Go to www.metlife.com/dental for details.



MetLife Dental				
Covered Charges	In-Network & Out-of-Network			
Calendar Deductible	\$25 Individual / \$75 Family			
Calendar Annual Benefit	\$1,500 per person			
Preventive Service (routine cleanings, bitewing x-rays, fluoride treatment)	100%			
Basic Services (root canal, fillings, periodontic surgery, oral surgery, inlays, crowns)	80%*			
Major Services (bridges, implants)	50%*			
Orthodontic Services - Adult & Child	50%			
Orthodontic Lifetime Maximum	\$1,500			

^{*}Benefits paid after deductible is met.

Vision

Administered by VSP

When people think about health care, they may overlook one of the most important assets—their vision. To help you maintain good eyesight, MGRMC offers a voluntary vision plan through VSP. You receive significant savings for lenses and frames when you use network providers. To locate a provider near you, visit www.vsp.com.

VSP Vision				
Benefits	In-Network	Out-of-Network		
Exam with Dilation as necessary	\$10 copay	Up to \$50		
Standard Plastic Lenses:				
Single Vision	\$25 copay	Up to \$50		
Bifocal	\$25 copay	Up to \$75		
Trifocal	\$25 copay	Up to \$100		
Frames	\$130 allowance, 20% off retail price	Up to \$70		
Contact Lenses	\$130 allowance, 15% off retail price	Up to \$105		
Frequency				
Exam	Every 12 Months			
Frames and Lenses	Every 24 Months			

Flexible Spending Account

Administered by BASIC

The MGRMC Plan Year is April 1 to March 31

You may choose to participate in the flexible spending accounts (FSA), also known as health care and dependent care reimbursement accounts offered with BASIC. These accounts help you save money by providing a way to pay for certain types of health care and dependent care expenses on a pre-tax basis. For a complete listing of eligible expenses go to www.irs.gov.

Funds will not be made available until the first day of the pay period following enrollment.

Please note: Employees must make new elections every plan year (April 1 to March 31).

Account	Use For	Contribution
Health Care Spending	Most medical, dental and vision care expenses	Annual Maximum Election is \$2,500
Dependent Care Spending	Dependent care expenses (daycare, after-school programs, or eldercare programs) so you and your spouse can work or go to school full time.	Annual Maximum Election is \$5,000





Life and AD&D

Administered by MetLife

As a MGRMC employee, you automatically receive life and accidental death and dismemberment (AD&D) coverage through MetLife at no cost to you. The benefit amount is based on four different classes. Please refer to your benefit summary for details.



Administered by MetLife

As an MGRMC employee, you are automatically enrolled in the plan. The long-term disability plan pays you a benefit if your illness or injury continues longer than 90 days. Under the LTD coverage you will receive 60% of your monthly earnings up to \$3,000 per month. Claims are submitted to MetLife and subject to their approval.



Financial - 403(b)

All employees even PRN are eligible to participate in MGRMC's 403(b) savings plan

MGRMC matches dollar for dollar up to 1.5% of your base wages plus contributes a gift equal to 2% of your base wages each paycheck. It is easy to sign up, and start saving today! By not contributing to your 403(b) savings plan you are walking away from money on the table!

Voluntary Benefits

Voluntary Life Administered by MetLife

MetLife offers Voluntary Term Life Insurance to provide the coverage you need. Employee Life options are available in increments of \$10,000 up to a maximum of \$300,000, not to exceed 7 times your annual salary. Spouse Life options are available in \$5,000 increments to a maximum of \$150,000, not to exceed 3.5 times your annual salary. Child Life 14 days to six months- \$250. Over six months of age options of \$1,000, \$2,000, \$4,000, \$5,000 or \$10,000.

AFLAC

Several plans are offered through AFLAC that protect you for services not typically covered by traditional insurance.

These include:

- Short Term Disability
- Accident Insurance
- Cancer Security
- Personal Sickness Indemnity
- Hospital Confinement
- Critical Illness

Please see an AFLAC representative for additional information and to enroll.

Will Preparation

Automatically included with Voluntary Life. Face to Face meeting with a Hyatt attorney.

Will Preparation is offered by Hyatt Legal Plans, Inc. Cleveland, Ohio. In certain states, legal services benefits are provided through insurance coverage underwritten by Metropolitan Property and Casualty Insurance Company and Affiliates, Warwick, Rhode Island.





Employee Assistance Program Administered by SupportLinc

All MGRMC employees and immediate family will have access to the SupportLinc Employee Assistance Program, which is provided by MGRMC at no cost to you. Each member can have

up to 5 face to face visits per incident, per year with a counselor and unlimited telephonic consultations.

The program provides assessments, short-term counseling and professional referrals for life's everyday problems.

- Marriage and Relationship Issues
- Stress, Anxiety and Depression
- Substance Abuse
- Anger Management
- Family Problems
- Grief and Loss
- Legal and Financial Services



Phone: 1-888-881-LINC (5462)
Web: www.support-linc.com
Username: MGRMC, Password: LINC123

Time Off

Bereavement Leave

After 30 days of continuous employment, full time employees will be granted a leave with pay for a maximum of three days for the death of a member of the employee's immediate family.

Holidays

MGRMC recognizes eight holidays during the year. These are New Year's Day, President's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Christmas Day and one floating holiday. All employees will be paid time and one half for their work on any of the above holidays except for the floating holiday.

Jury Duty

After 30 days of employment, all full time employees will receive any shortages from the jury pay equal to his/her regular straight time wage for a maximum of thirty days.

Paid Time Off (Full-Time employees)

Full time employees will accrue PTO at the same flat rate based on months of service. The accrual rate includes a minimum of ten paid vacation days, eight paid holidays and five paid sick days.

Paid Time Off (Part-Time employees)

Part time employees will accrue PTO based on actual hours worked and months of service.

Extended Illness Bank (EIB) (Full-Time employees)

Extended Illness Bank (EIB) will accumulate at the rate of four (4) hours per pay period beginning with the first full pay period completed after the first 30 days of employment and will continue to accumulate until a maximum of 440 hours is accumulated. When EIB is applied, MGRMC will pay the straight time wage up to the weekly status for the first 260 hours. Any hours above 260 will be paid at 75% of the employees base rate.







Road Runner Rehab

All eligible MGRMC employees can pay a one-time \$5 enrollment fee and then receive free gym membership through Road Runner Rehab.

Wellness Program

MGRMC BCBS subscribers have an opportunity to earn a \$240 bonus incentive for participating in wellness activities throughout the year. The Wellness Reward program begins January 1, 2013 and continues through December 31, 2013. Earn wellness credits that will translate into a \$240 incentive bonus! Please note your participation in any MGRMC wellness activity is voluntary.



Benefits Website - MyAonAssist

Thinking About Benefits? Go To MyAonAssist

MyAonAssist keeps you informed and in touch. This benefits website puts a vast source of news and information about Mt. Graham Regional Medical Center employee benefits at your disposal. You and your family can access MyAonAssist at any time, anywhere from the Internet.





MyAonAssist. Easy As 1-2-3!

- 1. Go to the web address for MyAonAssist: MtGraham.myaonassist.com
- 2. Input your user ID and password: User ID: MGRMC, Password: Benefits
- 3. Hit "enter"

Health Advocate

In addition to contacting your HR team, we also offer you the opportunity to have your own Personal Health Advocate. This free Health Advocate benefit gives you one-on-one help for any healthcare or insurance-related issue, when you need it most. You'll save time and money. All you have to do is call the toll-free number to speak with a registered nurse or claims specialist. Monday – Friday, 8am to 9pm (EST) 866-695-8622.





Customer Service Information

If you have questions or need more information about MGRMC's employee benefit plans, please contact the following:

Benefit	Benefit Carriers	Group Number	Phone Number	Web Address
Medical	Blue Cross Blue Shield of AZ	28884	800-232-2345	www.azblue.com
Dental	MetLife	KM05989197	800-275-4638	www.metlife.com/dental
Vision	VSP	30031562	800-877-7195	www.vsp.com
Employee Assistance Plan (EAP)	SupportLinc	N/A	888-881-LINC (5462)	www.support-linc.com User: MGRMC Password: linc123
Supplemental Insurance	AFLAC	CZJ30	800-992-3522	www.aflac.com
Life	MetLife	KM05989197	800-275-4638	www.metlife.com
Disability	MetLife	KM05989197	800-275-4638	www.metlife.com
Flexible Spending Account	Basic	N/A	800-444-1922 #1	www.basicflex.com
Health Advocate	N/A	N/A	866-695-8622	www.healthadvocate.com/members
Human Resources	Casey Gable	Benefit Specialist	928-348-4201	caseyg@mtgraham.org

Plan Costs

Group Medical*	Employee C	ontribution	Employer Contribution	Total Cost
Group Medical	Per Paycheck (24)	Per Month	Per Month	Per Month
Employee Only	\$15.00	\$30.00	\$620.97	\$650.97
Employee + Spouse	\$120.00	\$240.00	\$1,123.12	\$1,363.12
Employee + Child(ren)	\$115.00	\$230.00	\$1,074.08	\$1,304.08
Family	\$182.50	\$365.00	\$1,722.10	\$2,087.10

^{*} Please add an additional \$30 per month to the employee medical rate if you are a Tobacco user.

Group Dental	Employee C	Employee Contribution		Total Cost	
Group Bernar	Per Paycheck (24)	Per Month	Per Month	Per Month	
Employee Only	\$1.85	\$3.70	\$25.73	\$29.43	
Family	\$20.65	\$41.30	\$42.88	\$84.18	

Group Vision	Employee Contribution		Employer Contribution	Total Cost	
Group vision	Per Paycheck (24)	Per Month	Per Month	Per Month	
Employee Only	\$1.50	\$3.00	\$1.53	\$4.53	
Employee + Spouse	\$2.75	\$5.50	\$1.75	\$7.25	
Employee + Child(ren)	\$2.95	\$5.90	\$1.50	\$7.40	
Family	\$4.50	\$9.00	\$2.93	\$11.93	

Voluntary Life and AFLAC product rates vary based on age and benefit amounts.

Please contact HR for details.

DISCLAIMER: This document has been prepared for you to use as an "at-a-glance" reference to your benefits package. It is intended for summary purposes only. In all cases, however, only the official plan documents control the administration and operation of the plans. The terms of this summary and the official plan documents will automatically be amended to conform to federal law and applicable state law, including future changes as they occur.