Mason District Hospital

BENEFITS DESIGNED WITH YOU IN MIND



2027 EMPLOYEE BENEFITS

January 1, 2027 – December 31, 2027

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Questions?

Contact the Benefits Resource Center (BRC) at 855-874-0742 or email BRCCental@usi.com.



WELCOME TO YOUR
Mason District Hospital
BENEFITS

Mason District Hospital is pleased to announce our 2027 benefits program. Offering a competitive benefits package is just one way we strive to provide our employees with a rewarding workplace. Please read the information provided in this guide carefully. For full details about our plans, please refer to the summary plan descriptions.

Who is Eligible?

Full-Time employees regularly working at least 30 hours per week and their eligible dependents may participate in the Mason District Hospital benefits program.

Generally, for the Mason District Hospital benefits program, dependents are defined as:

- Your spouse
- Dependent "child" up to age 26. (Child means the employee's natural child or adopted child and any other child as defined in the certificate of coverage)

When and How Do I Enroll?

Open enrollment runs from October 26th to November 6th.

All eligible employees are **REQUIRED** to complete enrollment, even if you do not wish to make any changes to your benefits.

If an election is not made by the end of open enrollment, whatever was chosen last plan year will remain in effect for the next plan year.

When is My Coverage Effective?

The effective date for your benefits is January 1, 2027.

If you are newly eligible for benefits, you will be enrolled the first of the month following 30 days of employment.

Changing Coverage During the Year

You can change your coverage during the year when you experience a qualified change in status, such as marriage, divorce, birth, adoption, placement for adoption, or loss of coverage. The change must be reported to the Human Resources Department within 30 days of the event. The change must be consistent with the event.

For example, if your dependent child no longer meets eligibility requirements, you can drop coverage only for that dependent.

If you do not enroll at the above times, you must wait for the next annual open enrollment period.



MEDICAL INSURANCE

Mason District Hospital offers two medical plan options through Meritain.

MEDICAL BENEFITS

The table below summarizes the benefits of the SHP/PPO.

Copays are collected at time of service. Copays do not count toward your deductible but do apply to your maximum Out-of-Pocket limit. Refer to the official plan documents for additional information on coverage and exclusions.



Benefit Coverage	SHP/PPO		
	Tier 1 Mason District Hospital	Tier 2 Aetna Choice POS II Network	Tier 3 Out-of-Network
Annual Deductible			
Individual / Family	$250 / $500	$1,250 / $2,500	$3,000 / $6,000
Coinsurance (You Pay)	10%	20%	50%
Maximum Out-of-Pocket *(includes deductibles, copays and coinsurance)*			
Individual / Family	$3,250 / $6,500	$5,000 / $10,000	Unlimited
Physician Office Visit			
Primary Care	$20 copay	20% after deductible	50% after deductible
Specialty Care	$40 copay	20% after deductible	50% after deductible
Preventive Care			
Adult Periodic Exams	100%		50% after deductible
Well-Child Care			
Diagnostic Services			
X-ray and Lab Tests	10% after deductible	20% after deductible	50% after deductible
Complex Radiology	10% after deductible	20% after deductible	50% after deductible
Urgent Care Facility	$20 copay	20% after deductible	50% after deductible
Emergency Room Facility Charges	$100 copay then 10%		
Inpatient Facility Charges	5% after deductible	20% after deductible	50% after deductible
Outpatient Facility / Surgical Charges	10% after deductible	20% after deductible	50% after deductible

QUESTIONS?

Call customer service at 888-324-5789 or visit meritain.com

MEDICAL BENEFITS

The table below summarizes the benefits of the HDP/HSA.

Refer to the official plan documents for additional information on coverage and exclusions.



Benefit Coverage	HDP/HSA		
	Tier 1 Mason District Hospital	Tier 2 Aetna Choice POS II Network	Tier 3 Out-of-Network
Annual Deductible			
Individual / Family	$3,500 / $7,000	$4,500 / $9,000	$8,000 / $16,000
Coinsurance (You Pay)	0%	20%	40%
Maximum Out-of-Pocket *(includes deductibles, copays and coinsurance)*			
Individual / Family	$3,500 / $7,000	$6,000 / $12,000	Unlimited
Physician Office Visit			
Primary Care	0% after deductible	20% after deductible	40% after deductible
Specialty Care	0% after deductible	20% after deductible	40% after deductible
Preventive Care			
Adult Periodic Exams	100%		40% after deductible
Well-Child Care			
Diagnostic Services			
X-ray and Lab Tests	0% after deductible	20% after deductible	40% after deductible
Complex Radiology	0% after deductible	20% after deductible	40% after deductible
Urgent Care Facility	0% after deductible	20% after deductible	40% after deductible
Emergency Room Facility Charges	0% after deductible		
Inpatient Facility Charges	0% after deductible	20% after deductible	40% after deductible
Outpatient Facility / Surgical Charges	0% after deductible	20% after deductible	40% after deductible

QUESTIONS?

Call customer service at 888-324-5789 or visit meritain.com

PHARMACY (RX) BENEFITS

The table below summarizes the pharmacy benefits of both medical plans.

Please refer to the official plan documents for additional information on coverage and exclusions.



Benefit Coverage	SHP/PPO		HDP/HSA	
	Tier 1 Mason District Hospital	**Tier 2 Aetna Choice POS II Network**	**Tier 1 Mason District Hospital**	**Tier 2 Aetna Choice POS II Network**
Deductible/Out-of-Pocket (Combined with Medical)				
Rx Deductible Individual / Family	N/A		$3,500 / $7,000	
Rx Max Out-of-Pocket Individual / Family	$3,250 / $6,500		$3,500 / $7,000	
Retail Pharmacy (30 Day Supply)				
Tier 1 – Generic	$10	$15	0% after deductible	
Tier 2 – Brand (Formulary)	$35	$50	0% after deductible	
Tier 3 – Brand (Non-Formulary)	$70	$100	0% after deductible	
Tier 4 – Specialty	20% to $200	20% to $250	0% after deductible	
Mail Order (90 Day Supply only via CVS Mail) or 90 Day Supply at Retail				
Tier 1 – Generic	$20	$30	0% after deductible	
Tier 2 –Brand (Formulary)	$70	$100	0% after deductible	
Tier 3 – Brand (Non-Formulary)	$140	$200	0% after deductible	
Tier 4 – Specialty	N/A	N/A	N/A	

Maximize Your Prescription Savings with These Tips:

Look for coupons or manufacturer discounts:

Many drug manufacturers offer coupons or patient assistance programs to help reduce costs.

Use generic medications:

Always ask if a generic version of your prescribed medication is available– they typically cost significantly less.

PHARMACY BENEFITS

Beginning January 1, 2027, CVS Caremark will administer the prescription drug benefit for Mason District Hospital's employee health plans.

This change gives MDH health plan members access to CVS Caremark's nationwide pharmacy network and prescription benefit services. It does not mean that you are required or encouraged to fill your prescriptions at a CVS Pharmacy.

MDH Pharmacy remains your preferred pharmacy.
Employees and covered family members generally receive the lowest out-of-pocket cost when they fill prescriptions at MDH Pharmacy. Using MDH Pharmacy also helps us manage prescription costs and supports the long-term affordability of our self-funded health plan.

NEW for 2027

No more pharmacy reimbursement forms

One of the biggest improvements with CVS Caremark is simpler pharmacy claim processing. When you fill a covered prescription at MDH Pharmacy or another participating CVS Caremark network pharmacy, the pharmacy will submit the claim electronically to CVS Caremark. You will pay the applicable copay, coinsurance, or deductible amount at the pharmacy. That means you will no longer need to submit routine pharmacy claims to MDH for reimbursement.

Think of it this way:
CVS Caremark administers the prescription benefit and provides the national pharmacy network. MDH Pharmacy remains the preferred pharmacy for MDH employees and their covered family members.

1	2	3
Start with MDH Pharmacy Use MDH Pharmacy whenever practical to minimize member cost.	**Use the network when needed** Caremark network pharmacies remain available for travel, urgent needs, and other situations.	**Specialty: Start with MDH Pharmacy** MDH can fill some specialty medications. If MDH cannot fill yours, CVS Specialty is available.

MEDICAL CONTRIBUTIONS

Listed below are the bi-weekly costs for medical insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis, which means you don't pay taxes on the amount you pay for coverage.

Bi-Weekly Cost	SHP/PPO	HDP/HSA
Employee Only	$102.01	$73.23
Employee + Spouse	$205.83	$154.38
Employee + Child(ren)	$186.74	$140.05
Employee + Family	$252.09	$177.13



- Remember to review your contributions annually to ensure they align with your financial goals.
- You can calculate the annual cost of your medical insurance by multiplying the bi-weekly contribution by 26 paychecks.

FIND A PROVIDER

Find a provider (as a guest)

1. Go to https://www.meritain.com/.
2. Select 'For Members' after hovering over Resources at the top.
3. Scroll to the bottom of the page until you get to 'Provider network finder'.
4. Go to the ABC section and select 'Aetna'.
5. Enter the location of where you would like to find a provider.
6. The right side of the screen will ask you to select a plan. Choose 'Aetna Choice POS II (Open Access)' under the broad medical networks section.
7. From there, you can search by name, specialty, etc.

Find a provider (logging into Meritain account)

1. Go to https://www.meritain.com/ and log in to your account.
2. Click on the Find Care icon.
3. A list of networks pop up. Select the Aetna Choice POS II Network.
4. From there, you can search for a provider by name, specialty, etc.

Coming Soon!

DocConnect

DocConnect is a resource that will be available to employees to search for providers in the Mason District Hospital (Tier 1) network. This resource will be available closer to the January 1, 2027 effective date.



KNOW WHERE TO GO

MERITAIN HEALTH PORTAL	PRIMARY CARE DOCTOR	URGENT CARE	EMERGENCY ROOM
This secure online portal lets members manage their health and healthcare expenses – all from their phone, tablet or computer, 24/7.	The best place to go for routine or preventive care, to keep track of medications, or for a referral to see a specialist.	For conditions that aren't life threatening. Staffed by nurses and doctors and usually have extended hours.	For immediate treatment of critical injuries or illness. Open 24/7. If a situation seems life-threatening, call 911 or go to the nearest emergency room.

Download the Meritain Health Mobile App.

Discover how Meritain Health simplifies health care, download and start using the app today!

Download on the App Store | GET IT ON Google Play

TERMS TO KNOW

COPAYS
A fixed dollar amount you may pay for certain covered services. Typically, your copay is due at the time of service.

DEDUCTIBLE
The amount you must pay each year for certain covered health services before your insurance plan will begin to pay.

COINSURANCE
After you meet your deductible, you may pay coinsurance, which is your share of the costs of a covered service.

OUT-OF-POCKET MAXIMUM
This includes copays, deductibles, and coinsurance. Once you meet this amount, the plan pays 100% of covered services the rest of the year.



SAVINGS ACCOUNTS

When you are enrolled in a Qualified High Deductible Health Plan (QHDHP) and meet the eligibility requirements, the IRS allows you to open and contribute to an HSA Account. Our HDP/HSA Plan is a Qualified High Deductible Health Plan.

For those not enrolled in the HDP/HSA Plan, you can enroll in a Health Care Flexible Spending Account to save money on qualified expenses. Mason District Hospital offers three Flexible Spending Account (FSA) options, a Health Care FSA , a Dependent Care FSA, and a Limited Purpose FSA.



HEALTH SAVINGS ACCOUNT

MAXIMIZE YOUR TAX SAVINGS WITH AN HSA

If you enroll in the HDP/HSA Plan, you may be eligible to open and contribute to a health savings account (HSA) via HSA Bank.

The HSA is a tax-advantage account administered by HSA Bank that can be used to pay for qualified healthcare, dental, and vision expenses. It operates just like a checking account with a debit card. Your account balance and investment earnings are tax-free, roll over year to year, and are yours to keep. You may choose to fund your HSA to meet expected health care costs for the year, or fund all the way up to the contribution limit to build your tax-advantage account. You can fund your account via pre-tax payroll deductions, or if you contribute post-tax, you may deduct the contribution when completing your federal income tax return.

Mason District Hospital will contribute $1,000 for Singles and $2,000 for Families into your HSA.

$250 single/$500 family will be paid in January. The remainder will be deposited into your HSA over the next 25 pay periods.

HSA ELIGIBILITY – You must be enrolled in the HSA Medical plan to open the account and contribute.

You are NOT eligible to fund an HSA if:

- You are covered by a non-HSA eligible medical plan, health care FSA, or health reimbursement arrangement.
- You are eligible to be claimed as a dependent on someone else's tax return.
- You are enrolled in Medicare, TRICARE, or TRICARE for Life.







SAFETY NET	HSA INVESTMENTS	LONG-TERM SAVINGS
HSAs are highly effective savings vehicle for individuals and families of all income levels. They offer "rainy day" medical savings that reduce the financial impact of medical bills. Contributions to an HSA cannot exceed the IRS allowed annual maximums. The below maximums include the employer and employee contributions to the HSA. • **Individuals:** $4,500 • **All other coverage levels:** $9,000	Invest and grow HSA funds tax free—including interest and investment earnings. After age 65, spend HSA dollars on any expense penalty free.	Roll over funds every year to boost your long-term savings. Even if you switch health plans or jobs, the money is yours to keep.

If you are age 55+ by Dec. 31, 2026, you may contribute an additional $1,000.

Refer to **IRS Publication 969** for additional eligibility details. If you are over age 65, please contact the Benefits Department.

FLEXIBLE SPENDING ACCOUNT

Mason District Hospital offers three flexible spending account (FSA) options through Meritain. Employees will now have a debit card to use for their health care and limited purpose FSA eligible expenses. Remember to keep your receipts for these purchases, even when using the debit card.

HEALTH CARE FLEXIBLE SPENDING ACCOUNT (HCFSA)

A Health Care Flexible Spending Account (FSA) lets you pay for qualified medical, Rx, dental and vision expenses using pre-tax dollars. The elected amount is deducted from your paycheck pre-tax meaning you will not pay Federal Income Tax or Social Security Taxes on the deducted amount.

FSA Rules:
An FSA allows you to pay for medical, RX, dental and vision expenses for you, your spouse or your dependent children. The 2027 IRS maximum FSA contribution is $3,500. Please note limits are subject to change based on the IRS. Elected funds are available immediately BUT be careful as FSAs are subject to a "use it or lose it" rule. Unused funds are forfeited at the end of the plan year, except for $700 which you are allowed to rollover into 2028.

All elections are final, unless you have a family status change. When making your election it's important to consider anticipated costs for the upcoming plan year and to be conservative with your election. Consider expected expenses for the coming plan year and plan accordingly.

DEPENDENT CARE FLEXIBLE SPENDING ACCOUNT (DCFSA)

What is it?
A Dependent Care Flexible Spending Account (DCFSA) lets you pay for qualified child and/or dependent elder care expenses using pre-tax dollars. These funds can only be used on qualified dependents and unlike the FSA funds are not all available at once. Money must accumulate before you can use it and you can only use the amount that's available at the time.

DCFSA RULES:

A DCFSA allows you to pay for eligible dependent care expenses. The 2027 IRS maximum DPFSA contribution is **$7,500** for those married filling separately and **$3,750** for those married filing jointly.

Examples of Eligible DCFSA Expenses:

- Pre-School Charges
- Before and After School Care
- Summer Day Camps
- Day Care
- Adult Day Care

LIMITED PURPOSE FLEXIBLE SPENDING ACCOUNT (LPFSA)

What is it?
A Limited Purpose Flexible Spending Account (LPFSA) lets you pay for qualified dental and vision expenses using pre-tax dollars. While those with an HSA cannot enroll in a Health Care FSA, you can enroll in a Limited Purpose FSA. Like the HCFSA, you can rollover $700 into 2028 on the LPFSA. The 2027 IRS Contribution limit is $3,500

DENTAL INSURANCE

Mason District Hospital offers a dental plan through Meritain.



DENTAL BENEFITS

Mason District Hospital offers a dental insurance plan through Meritain.

The table below summarizes key features of the dental plan. Please refer to the official plan documents for additional information on coverage and exclusions.



Summary of Covered Benefits	Dental Plan
Plan Year Deductible Individual/Family	$50 / $150
Plan Year Benefit Maximum	$1,250
Preventive Care (Oral exams, cleanings, x-rays)	Plan pays 100%
Basic Services (Periodontal services, endodontic services, oral surgery, fillings)	80% after deductible
Major Services (Bridges, inlays/onlays, implants, dentures [fill/partial])	50% after deductible
Orthodontia Services (children up to age 19)	50% up to $1,000 lifetime maximum

DENTAL COSTS

Listed below are the bi-weekly costs for dental insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis, which means you don't pay taxes on the amount you pay for coverage.

Bi-Weekly Costs	Dental Plan
Employee Only	$3.28
Employee + Spouse	$6.73
Employee + Child(ren)	$5.45
Employee + Family	$9.52

QUESTIONS??

Meritain Health® an aetna company

Call customer service at **888-324-5789** or visit www.meritain.com



VISION INSURANCE

You have the option to purchase vision insurance through Meritain.

VISION BENEFITS

Mason District Hospital offers a vision insurance plan through Meritain.

The table below summarizes key features of the vision plan. Please refer to the official plan documents for additional information on coverage and exclusions.



Summary of Covered Benefits	Vision Plan
Eye Exam (Every 12 months)	$10 copay
Standard Plastic Lenses (Every 12 months) Single/Bifocal/ Trifocal	Covered in full after $25 copay
Frames (Every 12 months)	$150 allowance, 20% off the balance over $150
Contact Lenses (Every 12 months in lieu of standard plastic lenses)	$150 allowance

Did you know? Even if you have perfect vision, an annual eye exam is important. Just by examining your eyes, a doctor can find warning signs of high blood pressure, diabetes, and more than 200 other major diseases.

VISION COSTS

Listed below are the bi-weekly costs for vision insurance. The amount you pay for coverage is deducted from your paycheck on a pre-tax basis, which means you don't pay taxes on the amount you pay for coverage.

Biweekly Costs	Vision
Employee Only	$0.61
Employee + Spouse	$1.21
Employee + Child(ren)	$1.42
Employee + Family	$2.18

QUESTIONS??

Meritain Health® an aetna company

Call customer service at **888-324-5789** or visit www.meritain.com

FINANCIAL PROTECTION

Financial protection is a crucial component of your overall well-being, providing a safety net for you and your loved ones in times of need. The following sections will guide you through life insurance, accidental death and dismemberment, and disability benefits. These play a vital role in securing your financial future, offering a peace of mind and support during unforeseen circumstance. Whether it's safeguarding against loss of income, covering unexpected medical expenses, or ensuring your family's financial stability, these protections are designed to help you navigate life's uncertainties with confidence.

Take the time to explore these options and make informed decisions that will protect your financial future.





LIFE AND AD&D BENEFITS

Please be sure to keep your beneficiary designations up to date.

BASIC LIFE AND AD&D INSURANCE

Mason District Hospital automatically provides basic life and AD&D insurance through Symetra to all benefits-eligible employees **AT NO COST**. The Life insurance benefit will be paid to your designated beneficiary in the event of death while covered under the plan. The AD&D benefit will be paid in the event of a loss of life or limb by accident while covered under the plan. Ask HR for more details on this coverage.

The benefit begins to reduce by 35% at age 65, then 50% at age 70.

VOLUNTARY LIFE AND AD&D

Mason District Hospital offers employees the option to purchase additional life and AD&D insurance. This coverage is offered on a voluntary basis through Symetra. If you purchase voluntary life and AD&D insurance for yourself, you can purchase voluntary life and AD&D insurance for your spouse and/or child(ren). Both life and AD&D benefits begin to reduce by 35% at age 65, then 50% at age 70.

During your newly eligible window, you may elect coverage up to the guaranteed issue amount without completing a statement of health (evidence of insurability). If you wish to elect more than the guarantee issue amounts, your election will be subject to Evidence of Insurability approval. Coverage will not take effect until approved by Symetra.
During future open enrollments you will not have the opportunity to elect up to the guarantee issue amount.

EMPLOYEE

Life and AD&D insurance

You may purchase a benefit in increments of **$10,000, a minimum of $10,000** up to a maximum of **$300,000.**

What's guarantee issue?

Guarantee issue (GI) is the amount you can purchase as a newly eligible employee without having to provide evidence of insurability (EOI). The **Guarantee Issue is $100,000** for life insurance.

SPOUSE

Life and AD&D insurance

You may purchase a benefit in increments of **$5,000, a minimum of $5,000** up to a maximum of **$100,000**, not to exceed 100% of employee voluntary life benefit.

What's guarantee issue?

Guarantee issue (GI) is the amount you can purchase as a newly eligible employee without having to provide evidence of insurability (EOI). The **Guarantee Issue is $25,000** for life insurance.

CHILD(REN)

Life and AD&D insurance

You may purchase a benefit in increments of **$2,500** up to **$10,000** for children 6 months to age 26. The benefit amount for children from 15 days to 6 months is **$1,000**. Symetra does not require EOI for child(ren). The cost for the benefit is the same for one or multiple children.

DISABILITY BENEFITS

Voluntary Long-Term Disability Insurance

Mason District Hospital offers an opportunity for employees to purchase long-term disability through MetLife. This benefit covers 60% of your monthly base salary up to $10,000/month. Please see the summary plan description for complete plan details.

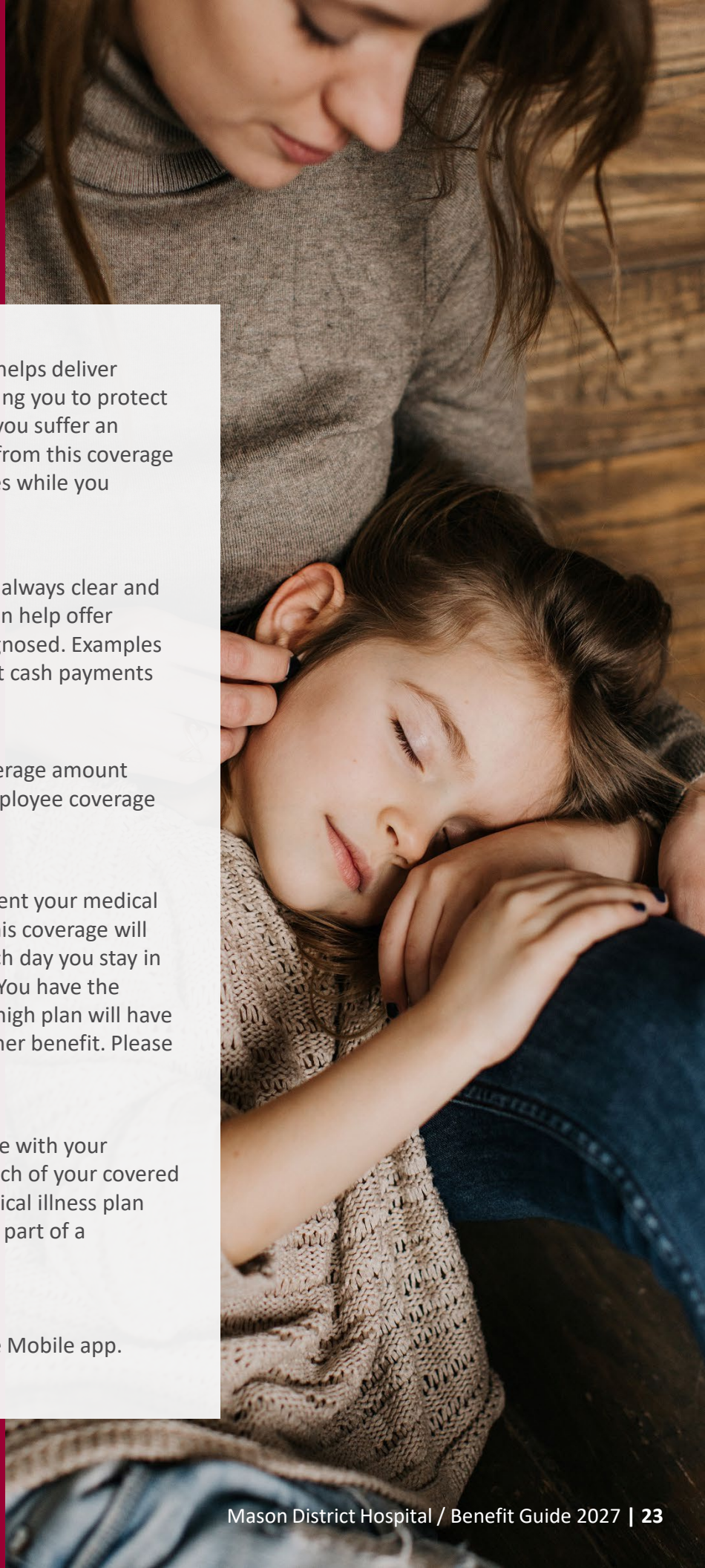
Plan Features	Long-Term Disability
Waiting Period	90 days
Maximum Monthly Benefit	$10,000
Percentage of Income Replaced	60% of salary
Maximum Benefit Period	Social Security Normal Retirement Age

Biweekly Rates:

Voluntary Long-Term Disability	
Age	Rate per $100 of covered monthly payroll
Less than 35	$0.140
35-39	$0.300
40-44	$0.411
45-49	$0.558
50-54	$0.747
55-59	$0.853
60-64	$0.665
65+	$0.251



VOLUNTARY BENEFITS



Accident

Accident insurance offered through MetLife helps deliver financial security for the unexpected – allowing you to protect your budget against unforeseen expenses if you suffer an accidental injury. You can use cash benefits from this coverage to help meet copayments and other expenses while you recover, or any other way you see fit.

Critical Illness

The signs pointing to a critical illness are not always clear and may not be preventable, but our coverage can help offer financial protection in the event you are diagnosed. Examples include heart attack, cancer and stroke. Most cash payments are 25%-100% of your elected benefit.

- Employee: $10,000, $20,000 or $30,000
- Spouse: Up to 100% of the employee coverage amount
- Dependent children: Up to 50% of the employee coverage amount

Hospital Indemnity

Hospital Indemnity insurance helps supplement your medical insurance should you have a hospital stay. This coverage will pay cash benefits for being admitted and each day you stay in the hospital up to a certain amount of days. You have the option to enroll in the low or high plan. The high plan will have a higher premium cost but will pay out a higher benefit. Please see plan documents for more details.

MetLife Health Screen Benefit

The MetLife Health Screen Benefit is available with your accident and critical illness plans. You and each of your covered dependents **will receive $50** each on the critical illness plan and **$75** each on the accident plan for taking part of a preventative heath screening.

File your claim online via MyBenefits at www.metlife.com/mybenefits or the MetLife Mobile app.

VOLUNTARY BENEFIT COSTS

Critical Illness Rates – Biweekly

Age	Critical Illness Insurance – Premium per $1,000 of Coverage			
	Employee Only	Employee + Spouse	Employee + Children	Family
<25	$0.22	$0.44	$0.32	$0.54
25-29	$0.26	$0.51	$0.36	$0.61
30-34	$0.31	$0.61	$0.42	$0.71
35-39	$0.38	$0.75	$0.48	$0.85
40-44	$0.51	$1.00	$0.61	$1.10
45-49	$0.69	$1.38	$0.79	$1.48
50-54	$0.94	$1.95	$1.04	$2.05
55-59	$1.26	$2.70	$1.36	$2.81
60-64	$1.69	$3.74	$1.79	$3.84
65-69	$2.28	$5.15	$2.39	$5.25
70-74	$3.00	$6.73	$3.10	$6.83
75-79	$4.08	$8.93	$4.18	$9.03

Hospital Indemnity Rates – Biweekly

	Low Plan	High Plan
Employee Only	$7.28	$11.78
Employee + Spouse	$9.68	$16.88
Employee + Child(ren)	$9.68	$15.08
Employee + Family	$11.12	$17.96

Accident Rates – Biweekly

	Accident Plan
Employee Only	$6.97
Employee + Spouse	$13.94
Employee + Child(ren)	$16.48
Employee + Family	$19.68

Voluntary Life and AD&D Rates – Biweekly

Age	Employee & Spouse Rate Per $1,000 of coverage	Child Rate Per $1,000 of coverage
<24	$0.03	$0.05
25-29	$0.03	
30-34	$0.04	
35-39	$0.06	
40-44	$0.09	
45-49	$0.14	
50-54	$0.22	
55-59	$0.34	
60-64	$0.46	
65-69	$0.74	
70-74	$1.31	
75+	$2.29	

BENEFIT CONTACTS



PROVIDER/PLAN	Phone	Website
Medical – Meritain	(888) 324-5789	meritain.com
Dental – Meritain	(888) 324-5789	meritain.com
Vision – Meritain	(888) 324-5789	meritain.com
Life and AD&D – Symetra	(800) 796-3872	symetra.com
LTD, ACC, CI, HI – Metlife	(800) 438-6388	metlife.com

Additional Resource – Employee Assistance Program

LifeCare is an additional resource available to employees for personal assistance with childcare, elder caregiving, emotional health counseling, wellness resources, pet services, legal and financial services and more. You can find more information about this benefit on page 27.

Lifecare.com | 855-329-4407

QUESTIONS?

Please call the USI Benefit Resource Center (BRC) if you have any questions or issues with your Benefits. The BRC is designed to provide you with a responsive, consistent, hands-on approach to benefit inquiries.

Benefit Specialists are available to research and solve elevated claims, unresolved eligibility problems, and any other benefit issues with which you might need assistance. The Benefit Specialists are experienced professionals, and their primary responsibility is to assist you.

BRCCentral@USI.com | 855-874-0742
Monday through Friday, 8:00AM to 5:00PM CST.

BENEFIT RESOURCE CENTER (BRC)



Scan here to learn more!

Call the Benefit Resource Center ("BRC"), We're Here To Help!

We speak insurance. Our Benefits Specialists can help you with:

- Deciding which plan is the best for you
- Benefit plan & policy questions
- Eligibility & claim problems with carriers
- Information about claim appeals & process
- Allowable family status election changes
- Transition of care when changing carriers
- Claim escalation, appeal & resolution
- Medicare basics with your employer plan
- Coordination of benefits
- Finding in-network providers
- Access to care issues
- Obtaining case management services
- Group disability claims
- Filing claims for out-of-network services

Benefit Resource Center
BRCCentral@usi.com | Toll Free: 855-874-0742

EMPLOYEE ASSISTANCE PROGRAM (EAP)

Trying to manage daily responsibilities and life events can be a real challenge at times. Fortunately, there's LifeCare, an employer-paid work-life employee assistance program designed to save you time and stress. LifeCare helps you manage your daily life – from prenatal questions to adult care…from summer camps to child care services…from pet care to health and wellness…and much more. Plus, LifeCare offers LifeMart, an online discount center with thousands of discounts for you.

Whether it's an expected life event or unexpected, last minute need, we're here to help 24/7/365. LifeCare's specialists are equipped with expert knowledge so they're prepared to help with whatever you may be facing, even your most complex, one-of-a-kind issues. LifeCare offers 3 face-to-face counseling sessions per issue per year. Some areas they cover are listed below.

- Anxiety & depression
- Marital or relationship difficulties
- Substance abuse
- Adoption & prenatal care
- Child care
- Senior caregiving services
- Diet & nutrition
- Pet care
- Legal & personal finance
- Medicare/Medicaid

How to access LifeCare:
Call 855-329-4407
To access the LifeCare website, log in to My TotalSource and select the EAP link from the home page



Mason District Hospital

About This Guide. This brochure summarizes the benefit plans that are available to Mason District Hospital Installation's eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. These documents are available upon request through the Human Resources Department. Information provided in this brochure is not a guarantee of benefits. Information provided by USI Insurance Services.

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