This document provides basic plan information. For additional details, please contact Aetna or review the benefits guide on ourhc.org/benefits. We reserve the right to terminate or amend this plan in whole or in part at any time.

Revised: October 2019

**High Deductible Health Plan (HDHP)**

**ELIGIBILITY**
The Emory Healthcare High Deductible Health Plan (HDHP) is designed specifically for our employees who are scheduled to work fewer than 20 hours per week or are full-time temporary workers.

Employees who are scheduled for 20 or more hours per week or are full-time, permanent employees are not eligible to participate in this plan, but may participate in either our Health Savings Account (HSA) or Point of Service (POS) plans.

The HDHP is available for employees and their dependent children (up to age 26). Spouses are not covered in this plan. New hires or newly eligible employees must enroll within 31 days of their hire or status change date.

**NETWORK**
Members have access to the extensive Aetna In-Network group of providers and facilities. Health care by providers or facilities outside the Aetna In-Network are the sole responsibility of the employee and do not count toward the annual deductible or out-of-pocket maximum.

To see if your provider is part of the network, visit aetna.com/docfind/custom/emory.

**PHARMACY**
ACA Preventive prescriptions are covered at 100%. All other prescription drug costs are 100% paid by the employee until the deductible is met, then covered 100% for the remainder of the plan year.

However, members are responsible for paying the difference in price if they choose the brand name drug when generic is available, regardless of whether the deductible has been met.

Contact CVS/Caremark at 1-866-601-6935 or www.caremark.com for a list of drug categories and more detailed information.

**ADDITIONAL FEATURES**
- **100% coverage for all preventive care** when services are in the Aetna In-Network (see below). Includes annual physicals, routine immunizations, well baby & well child visits, mammograms, colonoscopies, annual eye exams. **Dental and vision are not included.**

- **No employer contribution.** Contribution rates are the sole responsibility of the employee and are made on a pretax basis.

- **No copays or coinsurance.** The employee pays for all medical costs until the annual deductible and out-of-pocket maximum is met.

- **The annual deductible and out-of-pocket maximum are the same.** When this is reached, the plan pays 100% of eligible expenses for you and your covered dependents for the remainder of the plan year. See table for details.

- If at any point you miss two (2) consecutive paycheck deductions for the plan you will receive a notification of non-payment of premiums. You will need to submit payment on an after-tax basis for the missed deductions. Coverage will end on the last day of the month for which a full contribution was received if you do not make the required contributions.

**PLAN INFORMATION**

<table>
<thead>
<tr>
<th>Plan</th>
<th>Biweekly Pretax Contribution Rate</th>
<th>Annual Deductible &amp; Out-of-Pocket Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Only</td>
<td>$240.75</td>
<td>$6,000</td>
</tr>
<tr>
<td>Employee + Child(ren)</td>
<td>$446.59</td>
<td>$13,000</td>
</tr>
</tbody>
</table>

**Benefit Provision**

- Health Savings Account (HSA) Seed: N/A – HSA not available
- Preventive Care: Mammograms, routine immunizations, colonoscopies, well-baby and well-child visits, well-woman exams, annual physicals, etc.: 100% covered by the plan
- Coinsurance (Play Pays): 100% after deductible is met
- PCP, specialist, Urgent Care, Emergency Department, etc.: 100% after deductible is met
- Radiology, Lab and other non-preventive diagnostics: 100% after deductible is met
- Generic Prescriptions: 100% after deductible is met
- Preferred & Brand Name Prescriptions: 100% after deductible is met

**TO ENROLL**
- Log on to our enhanced e-Vantage enrollment tool with your network ID and password.
- Select Self Service from the top dropdown menu.
- Select the Benefits tile and then Benefits Enrollment.

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EMORY HEALTHCARE RETIREMENT SAVINGS & MATCHING PLAN

ENROLLMENT INSTRUCTIONS

ELIGIBILITY TO CONTRIBUTE TO THE 403(b) RETIREMENT SAVINGS & MATCHING PLAN

Employees who are at least 21 years of age, after completion of 1 year of service and 1,000 hours worked in a 12-consecutive-month period are eligible to participate in the 403(b) Retirement Savings & Matching Plan. Once eligibility is satisfied & you wish to contribute to the Plan, you will be eligible for the employer matching contributions.

Please review the Discover your Retirement Options guide available on the Benefits Intranet page at www.ourehc.org under Employee Resources. This guide is a resource about the vendors (TIAA, Fidelity, and Vanguard) and fund investment options.

REGISTER FOR ACCESS TO YOUR ONLINE ACCOUNT
Add your Beneficiary information & fund investments:

- Fidelity: www.fidelity.com/atwork; 800-343-0860; Access Code: 73136 (if needed)
- Vanguard: http://www.vanguard.com; 800-523-1188; Access Code: 094040 (if needed)
- TIAA: www.tiaa.org/emoryhealthcare; 800-842-2252; Access Code: EHC050 (if needed)

PAYROLL DEDUCTIONS FOR ENROLLMENT
Contact the Employee Resource Center, your one-stop-shop for helpful information and support related to your HR benefits, at 404-686-6044 or by email ehc.hr/benefits@emoryhealthcare.org and request the Authorization for Payroll Deduction form.

Once your payroll deduction authorization form is processed, for future changes, you can make changes online in e-Vantage by following the directions below.

Step 1: Visit ourehc.org and select e-Vantage from the home page menu on the right.

Step 2: Log in using your Emory Healthcare username and password.

Step 3: Select Self Service from the top dropdown menu. Click the Benefits tile, then click 403(b) Savings Plan Election.

Step 4: Select the “Click here to enroll, change, or stop 403(b) elections” button to:
  • Make your contribution elections. You can calculate your maximum allowed contributions by clicking the “Click here to model 403(b) maximum contributions” button.
  • Make your vendor selections. Note: If you participate in the Retirement Program, you will need to make vendor selections for the employer contribution, even if you choose not to contribute to the plan. If you do not make a vendor selection, any contributions will be invested with Vanguard, the default vendor.