

Randolph Health



2021 Employee Benefits Guide

Required Notices

Federal law requires certain notices and disclosures are available to you that pertain to our employee-sponsored health and welfare plans. These notices are available on Rhino under Employee Benefits. Please review this information annually.

- Medicare Part D Creditable Coverage Notice**
- HIPAA Special Enrollment Rights Notice
- HIPAA Notice of Privacy Practices
- Children's Health Insurance Program (CHIP) Notice
- Women's Health and Cancer Rights Act (WHCRA) Notice
- Newborns' Mothers Health Protection Act (NMHPA) Notice
- COBRA General Notice

If you have any questions regarding the content of the notices, please contact your Benefits Team.

Table of Contents

Required Notices	1
Welcome to Open Enrollment	3
Eligibility	3
How to Enroll	4
2021 Benefits	5
Medical Coverage	5
Real Appeal	6
Pharmacy Coverage	7
Flexible Spending Accounts	8
Supplemental Benefits	9
Dental Coverage	11
Vision Coverage	12
Employee Contributions	13
Disability Income Benefits	14
Life Insurance	15
Additional Benefits	16
Contact Information	17

If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a Federal law gives you more choices about your prescription drug coverage. Please refer to Medicare Part D Creditable Coverage Notice on Rhino for more details.

Welcome to Your Benefits Enrollment!

Our 2021 Benefits Guide will provide you with an overview of the comprehensive and rewarding benefits package offered by Randolph Health. We value your service as an employee and our competitive benefits are one way that we thank you for all that you bring to our team. We are proud to offer you a benefits program designed to protect the health and financial security of you and your family.

Benefits Eligibility

After you have completed a 30 day waiting period, you are eligible to enroll in benefits as it relates to your job status. Listed below are the benefit eligible statuses. If you see a prefix next to a benefit choice you are eligible for that benefit.

- **FT** Full- Time employees working at least 36 hours or more per pay week.
- **FT WEO** Full-Time Weekend Option employees working at least 2 shifts each weekend.
- **PT FLEX** Part-Time Flex employees working between 20 and 36 hours per pay week, but agree to have his/her scheduled hours increased or decreased based on department need.

The following statuses are eligible to participate in the 403(b) and many of the additional benefits on page 16:

- **PT FIXED** Part-Time Fixed employees working less than 20 hours per pay week; works in same job for the same number of hours each pay period.
- **PRN** PRN Employees who agree to be available to work “as needed.”

Eligible dependents may enroll in medical, dental, vision, life, accident, and critical illness coverage. Eligible dependents include:

- Spouse as defined by the federal law
- Children up to age 26 and children over age 26 totally disabled under plan rules
 - Can be natural born child, stepchild, foster child, adopted child, child for whom you have been appointed legal guardianship by a court of law or a child for whom the Plan has received a Qualified Medical Child Support Order.
 - Children who are aging out of the medical, dental and vision plans will be removed from the insurance at the end of the month in which they turn age 26.

You must provide date of birth and Social Security number along with proper verification of dependent eligibility when requested by Randolph Health. Claims will be pending until verification of dependent eligibility is submitted.

How to Enroll with PlanSource

1. Login – Enrollment URL: www.plansource.com/login

Username: Your username is the following: the first initial of your first name, up to the first six characters of your last name, and the last four of your SSN. For example, if your name is Jane Anderson and the last four of your SSN is 1234, your username would be janders1234.

Password: Your birthdate in YYYYMMDD format. For example, if your birthdate is August 14, 1962, your password would be 19620814. At initial login, you will be prompted to change your password.

2. Launch Enrollment

Click on “Get Started” to begin.

3. Enroll

Follow each step of the enrollment process from top to bottom. In making your elections, choose the plan option of choice or select the “Decline” option and then select “Continue” after each election has been made until you reach the confirm page.

4. Confirm Enrollment Selections

Once you complete all coverage elections, you will be taken to the Benefit Confirmation Statement for final review. At the very bottom click “Review & Checkout.” Review the benefits, and then click “Confirm.”

When to Enroll or Make Changes

Several benefits may only be elected or changed during open enrollment or with a qualified change in status. Qualified changes in status include, for example: marriage, divorce, birth or adoption of a child, change in child’s dependent status, death of spouse, child or other qualified dependent, change in residence, commencement or termination of adoption proceedings, change in employment status or change in coverage under another employer-sponsored plan, Medicaid, or state child health plan.

Randolph Health shares the cost of many benefits with you, below is an overview of available plans:

	Employer Paid	Employee Paid
Medical & Pharmacy	✓	✓
Dental	✓	✓
Vision		✓
Flexible Spending Accounts		✓
Long Term Disability	✓	
Voluntary Short Term Disability		✓
Basic Life, AD&D	✓	
Voluntary Life, AD&D		✓
403 (b) Plan		✓
Employee Assistance Program	✓	
Accident Insurance		✓
Critical Illness Insurance		✓

Medical & Pharmacy Coverage

UMR | www.umar.com | 800-826-9781

Our plan provides a high value network in two tiers. There are no out of network benefits available. The following chart shows the benefits of our medical plan for 2021.

Medical Plan

FT, FT WEO, PT FLEX

Network	Tier 1 Randolph Health	Tier 2 UHC Choice Plus Network
Deductible Individual Family	\$1,500 \$3,000	\$2,500 \$5,000
Out of Pocket Max Individual Family	\$4,000 \$8,000	\$5,000 \$10,000
Preventive Care	100%	100%
Primary Care	\$25 Copay	\$25 Copay
Specialist	\$40 Copay	\$50 Copay
Rehabilitation Services	\$30 Copay	30% Coinsurance
Advanced Imaging	\$150 Copay	\$300 Copay, then 30% Coinsurance
Hospitalization Inpatient Facility Outpatient Facility	\$500 Copay \$200 Copay	\$1,000 Copay, 30% after deductible \$400 Copay, 30% after deductible
Urgent Care	Not available	\$55 Copay
Emergency Room	\$250 Copay	\$400 Copay, then 30% Coinsurance



Tips for Keeping Costs Down:

- Choose Randolph Health as your provider
- Take advantage of preventive care services
- Request generic prescriptions
- Use Urgent Care providers instead of the Emergency Room

Real Appeal Program

Real People. Real Appeal.

Employees enrolled in the medical plan are eligible to participate in a free, online program that provides a year of support for lasting weight loss. The program includes:



PERSONAL TRANSFORMATION COACH

- Step-by-step guidance and customization for a program that fits your needs, preferences and goals.
- Support and motivation for a full year to help you lose weight or maintain results.
- A personalized dashboard to keep track of your calories, fitness and goals.

24/7 CONVENIENCE

Staying accountable to your goals is easier than ever with:



- Food, activity, weight and goal trackers.
- Unlimited access to digital content.
- Weekly health tips from celebrities, athletes and health experts.
- Your online group class, designed to help you build accountability with others in the program.

SUCCESS KIT

Resources to help you kick-start your weight loss and keep yourself on the road to results. Your kit will be delivered after your first class. It includes:



- Step-by-step Success Guides.
- Workout DVDs.
- Quick and simple recipes.
- Nutrition guide.
- And much more

Join the thousands of members that have lost nearly 1 million pounds. Start today at success.realappeal.com. Spark your transformation with Real Appeal.

Pharmacy Coverage

OptumRX | www.optumrx.com | 800-334-8134

FT, FT WEO, PT FLEX

The pharmacy benefits manager for the 2021 plan year will continue to be OptumRx. The portion of the drug cost that you are responsible to pay is listed in the table below.

Prescription Drug Coverage	
Tier 1 : Generic	\$10 Copay
Tier 2 : Preferred Brand	\$35 Copay
Tier 3 : Non-Preferred Brand	\$50 Copay
Tier 4: Specialty	\$150 Copay

Please note that if you insist on a brand name medication when there is a generic available, and the doctor's prescription allows for a generic to be dispensed, a penalty will be added to your applicable copayment. This penalty is the difference in price between the brand name medication and its available generic.

The following medications are currently included on the Step Therapy Program:

- Oral and non-Insulin injectable diabetes medications
- Cholesterol
- Anti-Hypertensive

The Pharmacy program is intended to promote better utilization management and employee convenience. As a community hospital, we desire to support other local providers. You continue to have the OPTION of filling maintenance medications with a select group of local pharmacies. Your pharmacy plan will require participants on maintenance medications, to use OptumRx mail order or one of the preferred locations below for a 90 day supply. You will be allowed two (2) 30 day grace fills, an initial fill and one (1) refill at any participating retail pharmacy before being required to move to OptumRx mail order or one of the local pharmacies listed.

- Prevo Drug - Asheboro
- Carolina Pharmacy – Asheboro & Seagrove locations
- Carter's Family Pharmacy – Asheboro

It is important to review the formulary each year to determine if any of your medicines are excluded or fall under a new tier. If you have additional questions about your pharmacy benefits and prescriptions you are taking today, please reach out to RxBenefits at 1-800-334-8134 or www.optumrx.com.

Flexible Spending Accounts

PlanSource | www.plansource.wealthcareportal.com | 888-266-1732

FT, FT WEO, PT FLEX

Randolph Health provides you the opportunity to pay for out-of-pocket medical, dental, vision, and dependent care expenses with pre-tax dollars through a Flexible Spending Account (FSA).

Contributions to your FSA are deducted from your paycheck before any taxes are taken out. You should contribute the amount of money you expect to spend on eligible expenses for the year. Any leftover money will not be refunded or rolled over to the following year, per IRS regulations.

Health Care FSA

The maximum you can contribute to a health care FSA for 2021 is \$2,750. The full amount you elect is available at the beginning of the plan year.

Examples of qualified expenses include:

- Prescriptions
- Doctor visit copays
- Contact lenses
- Dental care

Use the following link to view your personal savings <https://plansource.wealthcareportal.com/Page/Home>

Dependent Care FSA

The maximum you can contribute to the dependent care FSA is \$5,000 if you are a single employee or married filing jointly, or \$2,500 if you are married and filing separately. Funds are available only after they are deducted from your paycheck.

Examples of qualified expenses include:

- Child care
- Before or after school program
- Elder care



Health Care Tax Savings Example	
Prescription drugs	\$225
Doctor co-pays	\$80
Orthodontia (braces)	\$1,500
Suggested Plan Year Election	\$1,805
Taxes (30%)	x 0.30
Estimated Annual Savings	\$541.50

Dependent Care Tax Savings Example	
Day care for child	\$3,500
Summer child care	\$1,500
Suggested Plan Year Election	\$5,000
Taxes (30%)	x 0.30
Estimated Annual Savings	\$1,500

*Tax savings examples are for illustrative purposes only and are not intended to reflect actual costs of care. 30% tax rate is used for illustration only and may be different than your rate.

Supplemental Benefits

Voya | claimscenter.voya.com | 800-955-7736

FT, FT WEO, PT FLEX

Randolph Health knows that employees value the opportunity to customize their insurance coverage to best fit their individual needs. We are pleased to offer all full-time and part-time flex employees the ability to add-on either of the following supplemental benefits programs from Voya to complement your medical plan coverage. Premiums are paid through payroll deductions. The coverage is individually owned, so you may be able to take it with you if you leave Randolph Health.

Accident Insurance

FT, FT WEO, PT FLEX

Group Voluntary Accident Insurance, offered by Voya, can help cover the unexpected costs related to accident expenses. Employees, employee spouse, and employee dependent children are eligible for this coverage. This policy pays a specific benefit amount for:

- Initial care such as ambulance, emergency room, or doctor visit
- Follow-up care such as outpatient doctor's treatments and medical devices
- Injuries, including burns, dislocations, and fractures
- Catastrophic accidents
- Accidental death
- Benefits paid for accidents that occur on and off the job

This plan features an Annual Wellness Visit reimbursement up to \$50 for covered employee and spouse and \$25 for covered children.



Critical Illness Insurance

Critical Illness insurance helps guard against financial hardship if you or a dependent is diagnosed with a covered condition. Some of the expenses this benefit can help pay include initial diagnosis, treatment, and follow-up care. You can choose the level of coverage with benefits amounts of \$10,000 or \$20,000. Your spouse and children, if you elect family coverage, are covered at 50% of your benefit amount.

Covered Diagnoses Include:

- Heart attack
- Stroke
- By-pass surgery
- Organ transplant
- Paralysis
- End-stage kidney failure
- Major organ transplant

See benefit summary for all covered conditions.

This plan features an Annual Wellness Visit reimbursement up to \$100 for covered employee and spouse and \$50 for covered children

Voya's Employee Benefit Resource Center

<https://presents.voya.com/EBRC/RandolphhealthVoyaOE>

Visit Rhino to view information created by Voya to view benefit summaries, educational videos, and real life examples for each product. This portal will also allow you with access to start a claim.

Voya Employee Benefits Resource Center

HOME PRODUCTS FILE A CLAIM ABOUT VOYA

Randolph Health

Protect what you have.
Prepare for the future.
Protect yourself today and plan for tomorrow with supplemental insurance products.

Annual enrollment: October 14 - 25, 2019

With life's ups and downs, take advantage of products that help you plan for what's next. Unexpected events or long-term goals -- make sure you've got them covered.

Critical Illness Insurance
Get benefits for covered diseases or illnesses, like a heart attack or stroke.
[Learn More](#)

Accident Insurance
Get benefits for covered events when accidents happen.
[Learn More](#)

Dental

Cigna | www.cigna.com | 877-478-7557

FT, FT WEO, PT FLEX

Randolph Health's dental plan from Cigna allows you and your dependents to visit the dentist of your choice. Preventive services are covered by the plan at 100% and other services are covered with coinsurance.

See an overview of the coverage below and view full details in your dental summary of benefits.

Services	Benefit
Deductible Applies to basic and major services	\$50 Individual / \$150 Family
Benefit Maximum	\$1,500
Preventive Services Exams, cleanings, x-rays	100%
Basic Services Fillings, extractions, oral surgery, root canal	80%
Major Services Dentures, bridges, crowns	50%
Orthodontia	50% up to \$2,000 <i>(lifetime max for dependents up to age 19)</i>

Follow the instructions below to find a participating Cigna provider:

1. Visit www.cigna.com
2. Click on “**Find a Doctor, Dentist, or Facility**” in the top corner of the page
3. Click on “**Plans through your employer or school**”
4. “**Search location**” enter your zip code
5. Under “**Select a plan**” click on Dental
6. Select **DPPO/EPO > Total Cigna DPPO**

Vision

Superior | www.superiorvision.com | 800-507-3800

FT, FT WEO, PT FLEX

Our vision plan covers eye exams and helps offset the cost of corrective eyewear.

An overview of the plan is provided below; please see your summary of benefits for complete details.

Services	Benefit	Frequency
Vision Exam	\$20 Copay	Once every 12 months
Lenses (single, bifocal, trifocal, lenticular)	\$20 Copay	Once every 12 months
Frames	\$125 Allowance	Once every 24 months
Contact Lenses (instead of lenses and frames)	\$125 Allowance	Once every 12 months



Employee Bi-Weekly Contributions in 2021

Your premium for elected plans will be deducted pre-tax from each paycheck.

Medical Coverage

Employee Biweekly Premium				
	Employee Only	Employee + Children	Employee + Spouse	Employee + Family
Full-Time	\$44.00	\$105.00	\$154.00	\$204.00
Part-Time	\$66.00	\$154.00	\$226.00	\$314.00

Dental Coverage

Employee Biweekly Premium		
Employee Only	Employee + 1	Employee & Family
\$13.28	\$25.25	\$44.76

Vision Coverage

Employee Biweekly Premium		
Employee Only	Employee + 1	Employee & Family
\$2.93	\$4.24	\$7.61



Key Terms

- A **premium** is the amount you pay out of your paycheck for insurance coverage
- A **deductible** is the amount you pay before the plan helps pay for the cost of services
- A **copay** is the dollar amount you pay for medical services or prescription drugs
- **Coinsurance** is the percent of charges you pay after you reach the deductible until you reach the plan's out-of-pocket maximum
- The **out-of-pocket maximum** is the most you will pay during the plan year for health care expenses, including your deductible, copays, and coinsurance

Disability Income Benefits

Lincoln Financial | www.lfg.com | 800-423-2765

FT, FT WEO

Should you become unable to work due to a non-work related illness or injury, disability coverage acts as income replacement to protect you and your family from serious financial hardship.

Short-Term Disability Coverage

Randolph Health offers employees the option to purchase a standard or buy-up STD plan through Lincoln Financial.

Short-term disability coverage is available to you on a voluntary basis.

Short-Term Disability		
Plan Details	Standard Option	Buy-Up Option
Benefits Begin	31st consecutive day of disability	15 th consecutive day of disability
Benefits Payable / Duration	22 weeks	24 weeks
Percentage of Income Replaced	60%	60%
Maximum Benefit	\$800 per week	\$800 per week
Rate	\$0.0592	\$0.0803

$$\text{Salary} / 52 \text{ weeks} \times 60\% = \text{Weekly Earnings}$$

$$\text{Weekly Earnings} \times (\text{Rate}) \times 12 / 26 = \text{Cost per pay period}$$

When you enroll in Short Term Disability in the enrollment portal, your rate will be automatically calculated for you. The short term disability plan is a “post-tax” benefit. This benefit is not considered as taxable income when received.

Long-Term Disability Coverage

Randolph Health provides all full-time employees with long-term disability coverage at no cost to you. This is taxable when income is received.

Long-Term Disability	
Benefits Begin	181 st consecutive day of disability
Maximum Benefits Payable / Duration	Social Security Normal Retirement Age
Percentage of Income Replaced	50%
Maximum Benefit	\$5,000 per month

Life Insurance

Lincoln Financial | www.lfg.com | 800-423-2765

FT, FT WEO

Basic Life and AD&D Insurance

Randolph Health provides full-time employees with Basic Life and Accidental Death & Dismemberment (AD&D) Insurance at no cost. Employees are automatically covered at 1.5 times their annual base salary, up to \$250,000. Randolph Health also provides life insurance for your spouse in the amount of \$5,000 and child(ren) age 6 months to 19 years in the amount of \$5,000. You must provide your dependent's date of birth and SSN in order to obtain this dependent coverage.

Please make sure the designated beneficiary is entered into PlanSource.

Voluntary Life and AD&D Insurance

FT, FT WEO, PT FLEX

You are also eligible to elect Voluntary Life and AD&D Insurance for yourself and your dependents. Employees pay the full cost for this plan; premiums will be deducted for your paycheck.

Employee Coverage

- Elect \$10,000 or \$20,000 increments of coverage, up to a maximum of \$300,000.

Employees who enroll in the voluntary plan can also elect coverage for their dependents in the following amounts:

Spousal Coverage

- Elect \$5,000 or \$10,000 increments up to 50% of employee's covered benefit

Child Coverage

- Coverage is available on a guaranteed issue bases in the amount of \$10,000
- Children 14 days to 6 months are eligible for a \$250 benefit

Benefits Reduction Schedule

Employee basic life insurance benefits reduce as follows:

- At age 65 – benefits reduce by 35% of the original amount
- At age 70 – benefits reduce by an additional 25% of the original amount
- At age 75 – benefits reduce by an additional 15% of the original amount

Employee benefits end upon termination of employment; spouse benefits terminate when they reach age 70 or upon your employment termination.

403(b) Retirement Savings Plan

Ascensus | myaccount.ascensus.com/rplink | 866-809-8146

FT, FT WEO, PT FLEX

Saving for your future is important. Randolph Health Retirement Savings Plan offers an easy way to save for retirement. You are eligible to contribute up to the IRS calendar year deferral limits on a pre-tax basis.

You are always 100% vested in your 403(b) contributions and any matching employer contributions. Find more information about plan options, election maximums, and instructions for enrolling contact Ascensus at 866-809-8146 or review your account online at myaccount.ascensus.com/rplink.

Additional Benefits

Employee Assistance Program (EAP)

Randolph Health offers an EAP through Lincoln Financial. When you find yourself with personal challenges, EAP has the resources to help sort things out. Help is available for you or any member of your immediate family living in your household. All employees and their eligible dependents are up to 4 face to face visits and unlimited phone counseling through Compsych with Lincoln Financial.

Payroll Deductions

Payroll deductions can be arranged for the Cafeteria and Gift Shop purchases, as well as other special purchases such as jewelry, uniform, and book sales.

Workers' Compensation

Randolph Health carries Workers' Compensation insurance for all employees. This coverage protects you in the event you suffer a work-related injury or illness.

Tuition Reimbursement

Randolph Health supplies many opportunities to help you meet your professional educational needs.

Family & Medical Leave

After you have completed 12 months of service and have worked 1,250 hours during the last 12 month period, you may be eligible for up to 12 weeks of job-protected leave under the Family and Medical Leave Act. Leave is available for the birth of a child, to care for a newborn, placement of adopted or foster child, and care for an immediate family member with a serious health issue or your own serious health issue.

Leave of Absence

Now and then you may need to spend time away from work for different reasons...personal, military, or educational.

Discounts

Discount tickets, memberships, and special offers available at many times throughout the year to:

- Area amusement parks through Tickets at Work
- Randolph Health Fitness Center
- Uniform sale
- Summit Credit Union
- Art, jewelry, book sale
- Costco



Contact Information

Benefit	Provider	Phone	Website
Medical	UMR	800-826-9781	www.umar.com
Pharmacy	OptumRx	800-334-8134	www.optumrx.com
Dental	Cigna	877-478-7557	www.cigna.com
Vision	Superior	800-507-3800	www.superiorvision.com
Flexible Spending Accounts	PlanSource	888-266-1732	plansource.wealthcareportal.com
Basic Life and AD&D Supplemental Life and AD&D Short-Term Disability Long-Term Disability	Lincoln Financial	800-423-2765	www.lfg.com
Employee Assistance Program	Lincoln Financial	888-628-4824	Compsych through Lincoln Financial www.GuidanceResources.com
403(b) Retirement Savings	Ascensus	866-809-8146	myaccount.ascensus.com/rplink
Accident & Critical Illness	Voya	800-955-7736	claimscenter.voya.com
Employee Benefits Center	Marsh & McLennan Agency	855-313-1075	Email: ebservices@marshmma.com

