



**A Guide to**  
*Your Benefits*



**2017 Plan Year**

# Lake Regional Health System

Lake Regional Health System (LRHS) thrives on balance - balancing professional and personal worlds - balancing work and rest - always balancing cost and value.

We also understand that balance must be individualized. What is right for one person may not be appropriate for another. We make it our goal to offer you choices that allow you to tailor your benefit plans specifically to what is right for you.

## Your Choices

Lake Regional Health System provides a complete package of benefits aimed at providing flexible insurance protection and programs to meet your ever-changing needs. LRHS shares the cost of some benefits with you, while making additional benefits available that you pay for if you choose to enroll. The part of the benefit costs that you are responsible for will be automatically deducted from your paycheck, either before or after your taxes are calculated.

Benefit	Pre-tax or Post-tax?	Who pays the cost?
Medical Insurance	Pre-tax	Lake Regional & You
Dental	Pre-tax	You
Flexible Spending Account and Dependent Care Account	Pre-tax	You
Basic Life Insurance	Not Applicable	Lake Regional
Supplemental Term Life Insurance	Post-tax	You
Voluntary Whole Life Insurance	Post-tax	You
Voluntary Critical Illness Option	Post-tax	You
Voluntary Cancer and Specified Disease Plan	Post-tax	You
Voluntary Short Term Disability (STD) Insurance	Post-tax	You
Voluntary Long Term Disability (LTD) Insurance	Post-tax	You
401(k) Plan	Pre-tax	You
401(k) Match	Pre-tax	Lake Regional

### Why do I pay for some benefits with pre-tax money?

While not all benefits qualify for pre-tax contribution, there is a definite advantage to paying for those that do: *Taking the money out before your taxes are calculated lowers the amount of your taxable income. Therefore, you pay less in taxes.*

## Benefits for Your Dependents

Spouses and children of full-time and part-time employees are also eligible for some Lake Regional Health System benefits, including:

- ▶ Medical
- ▶ Flexible Spending Accounts
- ▶ Dental
- ▶ Supplemental Term Life Insurance
- ▶ Voluntary Whole Life Insurance
- ▶ Voluntary Critical Illness Option (spouse only)
- ▶ Voluntary Cancer and Specified Disease Plan

### Benefits Eligibility

*Full-time and part-time employees are eligible for most benefits on the 1st of the month following 60 days of employment. See each benefit description for specific eligibility requirements.*

## F.I.S.H.

The LRHS employees' intranet is named F.I.S.H. (Finding Information Sources Health-System Wide). This is the employees' tool for up-to-the-minute information and resources within the Health System. Updated and current benefit information and Summary Plan Documents can be found at any time on F.I.S.H, under the Human Resources tab by clicking on "Benefits".

## Making Changes

Voluntary benefits can be dropped at any time during the Plan year. This includes Supplemental Term Life, Whole Life, Critical Illness, Cancer and Disability policies. Changes to Medical, Dental, Flex plans and any additions to voluntary benefits can only be made at the Benefits Annual Enrollment or if you have a qualifying event.

Qualifying event changes include but are not limited to:

- ▶ Marriage
- ▶ Divorce
- ▶ Birth, adoption or placement for adoption of an eligible child
- ▶ Death of your spouse or covered child
- ▶ Change in you or your dependents work status that affects benefits eligibility (for example: starting a new job, leaving a job, changing from part-time to full time)
- ▶ Becoming eligible for Medicare or Medicaid during the year

If you have a qualifying event change, you must notify Human Resources within 30 days of the event. Depending on the type of event, you may need to provide proof of the event (for example, a marriage or birth certificate). If you do not notify Human Resources within 30 days, you will have to wait until the next Benefits Annual Enrollment period to make benefits changes unless you have another qualifying event.

## Portability

If you leave the company, some of your benefits end (see When Coverage Ends on this page). Other benefits, however, are portable. This means you can take them with you if you leave, as long as you continue to pay the premiums yourself.

The benefits that are portable include:

- ▶ Supplemental Term Life Insurance (Reliance Standard)
- ▶ Voluntary Whole Life Insurance (Boston Mutual)
- ▶ Voluntary Critical Illness Insurance (Boston Mutual)
- ▶ Voluntary Cancer and Specified Disease Insurance (Allstate)

## When Coverage Ends

Benefits end on the date through which premiums are paid or when you cease to meet eligibility guidelines.

### Continuing Your Coverage

Under certain circumstances, you may continue your benefit coverage when it would otherwise end. This is called COBRA coverage. COBRA stands for the Consolidated Omnibus Budget Reconciliation Act of 1985. COBRA applies to these plans:

- ▶ Medical Insurance
- ▶ Dental Insurance
- ▶ Vision
- ▶ Flexible Spending Account – Health FSA only

### When can I continue coverage under COBRA?

You and/or your dependents are eligible to continue Medical, Dental and Health FSA coverage under COBRA if coverage is lost because:

- ▶ Your employment with Lake Regional Health System ends for any reason other than “gross misconduct”
- ▶ Your work hours are reduced
- ▶ You die
- ▶ You become entitled to and enroll in Medicare prior to losing coverage
- ▶ You divorce or become legally separated from your spouse
- ▶ Your dependent loses dependent status

### Looking ahead . . .

Now let's look at each benefit that makes up the Lake Regional Health System benefits program. In the following pages, you'll learn more about the valuable benefits Lake Regional Health System offers. You'll also see how choosing the right combination of benefits can help protect you and your family now while also helping you prepare for your future.

## Health Insurance

For most people, Health Insurance is no longer a “want” – it’s a need. That’s why Lake Regional Health System offers a self-insured medical plan and pays a portion of the premiums for part-time employees, full-time employees and their dependents. Your coverage begins on the first day of the month after you have been employed for 60 days.



## How Does the Health Insurance Plan Work?

Lake Regional Health System’s medical coverage is a self-insured medical plan administered by Meritain Health. This plan has 3 plan benefit levels. You are covered under all 3 levels when you enroll in the plan. Co-pays and deductibles are determined by the level of coverage that the facility or provider falls under. To view Level 1 and Level 2 facilities and providers, please visit [www.healthlink.com](http://www.healthlink.com). Level 3 providers are considered out of network and will not be listed on this website.

## Prescription Drug Benefit

Reduced co-pays are available when utilizing the following preferred pharmacies:

**Lake Regional RX-Lake Ozark**  
**1870-C Bagnell Dam Blvd.**  
**Lake Ozark, MO 65049**  
**Phone: 573-964-6200**

**Lake Regional RX-Osage Beach**  
**1057-B Medical Park Drive**  
**Osage Beach, MO 65065**  
**Phone: 573-302-2700**

**Lake Regional RX-Camdenton**  
**1930-C North Business Rte 5**  
**Camdenton, MO 65020**  
**Phone: 573-346-2300**

Benefit Description	Preferred Pharmacies (Level 1)	Preferred Pharmacies (Level 2 and 3)
<b>Pharmacy Drug Option</b>	<b>Co-pay</b>	
Generic Drugs	\$7 (30-day) \$15 (90-day)	\$20 (retail) \$35 (mail order)
Preferred Brand Name Drugs	\$20 (30-day) \$40 (90-day)	\$30 (retail) \$60 (mail order)
Non-Preferred Brand Drugs	\$30 (30-day) \$65 (90-day)	\$40 (retail) \$80 (mail order)
Speciality Drugs	Paid the same as generic, preferred and non-preferred drugs	Paid the same as generic, preferred and non-preferred drug

### Key Terms

#### Self-Insured Plan

A self-funded plan that offers the opportunity for a company to offer a custom, flexible benefit plan tailored to meet its employees’ needs

#### Co-payment (or Co-pay)

A flat fee that you pay to your provider at the time of service regardless of the actual amount charged by your provider. The co-pay amount does not apply toward your deductible.

#### Deductible

The amount you pay towards covered medical expenses each year before the plan starts paying benefits.

## Health Insurance Rates Effective 1.1.16 - 12.31.16

Premium Rates Per Pay Period		
	Full Time	Part Time
<b>Employee</b>	\$45.00	\$211.00
<b>EE + Spouse</b>	\$169.00	\$388.75
<b>EE + Children</b>	\$132.00	\$318.75
<b>Family</b>	\$228.00	\$554.25

Summary of Medical Benefits	Level 1 LRHS	Level 2 HealthLink PPO	Level 3 Non-Network
<b>Deductible:</b> Individual/Family (calendar year)	\$600/\$1,200	\$2,400/\$4,800	\$4,800/\$9,600
<b>Out-of-Pocket:</b> Individual/Family (includes deductibles)	\$1,200/\$3,600	\$4,800/\$14,400	\$9,600/\$28,800
<b>Medical Lifetime Maximum</b> (per covered person)	Unlimited		
<b>PREVENTIVE CARE/WELL CARE</b>			
<b>Routine Well Adult Care/Well Child Care</b>	\$30 co-pay	\$60 co-pay	\$120 co-pay
<i>Includes office visits, routine physical exam, gynecological exam for adults and office visits and routine physical exam for children to age 26.</i>			
<b>Routine Immunizations, Mammogram, Pap Smear, PSA Test, All Other Routine Well Adult/Child Tests</b>	100%	100%	100%
<b>VISION - limited to 1 exam each calendar year</b>			
Routine Vision Exam	\$25 co-pay	\$45 co-pay	\$90 co-pay
<b>X-RAY &amp; LABORATORY SERVICES</b>			
Pre-Admission and Pre-Surgical Testing	90% after deductible	80% after deductible	70% after deductible
Inpatient and Outpatient Diagnostic Charges ( <i>x-ray &amp; lab</i> )	90% after deductible	80% after deductible	70% after deductible
<b>HOSPITAL SERVICES, SPECIALIZED TREATMENT FACILITIES AND SERVICES</b>			
Primary Care Sick Visit ( <i>Injury or Illness</i> )	\$30 co-pay; 90% after deductible	\$60 co-pay; 80% after deductible	\$120 co-pay; 70% after deductible
Inpatient Hospital ( <i>Limited to semi-private room rate</i> )	90% after deductible	80% after deductible	70% after deductible
Intensive Care Unit ( <i>limited to the ICU/CCU room rate</i> )	90% after deductible	80% after deductible	70% after deductible
Birthing Center/Routine Well Newborn Care	90% after deductible	80% after deductible	70% after deductible
Outpatient Hospital ( <i>Surgical or Non-Surgical</i> )	90% after deductible	80% after deductible	70% after deductible
Home Health Care ( <i>100 visit calendar year maximum</i> )	\$35 co-pay	\$70 co-pay	\$140 co-pay
Hospice Care	100%	100%	100%
Skilled Nursing, Extended Care, Rehab Facilities ( <i>Limited to semi-private room rate/60 day maximum per year</i> )	90% after deductible	80% after deductible	70% after deductible
<b>EMERGENCY SERVICES</b>			
Ambulance Service	90% after deductible	80% after deductible	70% after deductible
<i>Ground and air ambulance to or from a Level 1 facility will be subject to Level 1 calendar year deductible and out-of-pocket maximum, and reimbursed at Level 1 coinsurance.</i>			
Emergency Room	\$175 co-pay	\$350 co-pay	\$700 co-pay
<i>Follow-up treatment not considered under this benefit. Co-pay is waived if admitted for medical emergency. Meritain must be notified within 48 hours by calling 800-242-1199. All levels of Emergency Room co-pays will accumulate toward each other when occurring in the same medical episode, not to exceed the maximum of \$600.</i>			
Urgent Care Facility/Clinical Visit	\$30 co-pay, then 90%	\$60 co-pay, then 80%	\$120 co-pay, then 70%
<i>Any other services ordered or rendered at time of visit are subject to deductible and coinsurance.</i>			
<b>MEDICAL AND SURGICAL PHYSICIAN SERVICES</b>			
Services and Supplies Listed Below	90% after deductible	80% after deductible	70% after deductible
<i>Allergy Testing (serum and injections); Inpatient and Outpatient Private Duty Nursing; Inpatient and Outpatient Surgery (includes anesthesiologists); Surgery performed in a Physician's Office; Inpatient Physician visits; Occupational, Physical, Speech, Respiratory, Chemo and Radiation Therapies; Cardiac Rehabilitation; Dialysis, Genetic Testing and Counseling; Organ Transplants. Durable Medical Equipment, Medical Supplies, and Prosthetics and Orthotics, and all other covered Medical and Surgical expenses.</i>			
Spinal Manipulation/Chiropractic (10 visits per calendar year)	\$35 co-pay	\$35 co-pay	\$35 co-pay
<b>MENTAL DISORDERS AND SUBSTANCE USE DISORDERS</b>			
Inpatient	90% after deductible	90% after deductible	70% after deductible
Outpatient Office Visits	\$30 co-pay, then 90%	\$30 co-pay, then 90%	70% after deductible
All other related services	90% after deductible	90% after deductible	70% after deductible

Precertification required for all hospital stays. Failure to precertify will result in a \$250 (per occurrence) penalty. Please see plan documents for additional information/limitations.

## Dental Insurance

A visit to your dentist can help you keep a great smile and prevent many health issues. However, dental care can be costly and you can be faced with unforeseen expenses. With access to one of the largest network of dental providers in the country, who agreed to charge negotiated fees for their services of up to 30% less than average charges in the same community, you will benefit from lower out-of-pocket costs, quality care from screened and reviewed dentists and excellent customer service. With your **PPO** plan, you can visit any dentist; but you pay less out-of-pocket when you choose a **PPO** dentist.



	Type	In-network	Out-of-network
<b>Preventive</b>	Cleaning (prophylaxis)	100%	100%
	Frequency:	2 in 12 months	
	Fluoride Treatments	100%	100%
	Limits:	Under Age 19	
	X-rays	100%	100%
<b>Basic</b>	Anesthesia* Fillings‡ Perio Surgery Periodontal Maintenance <sup>1</sup>	90%	80%
	<sup>1</sup> Frequency:	Once every 6 months (standard)	
	Root Canal Scaling & Root Planing - (per quadrant) Simple Extractions Surgical Extractions	90%	80%
<b>Major Care</b>	Bridges and Dentures Inlays, Onlays, Veneers** Repair & Maintenance (of Crowns, Bridges & Dentures) Single Crowns	60%	50%
<b>Orthodontia</b>	Orthodontia	50%	50%
	Limits:	Child(ren)	

This is only a partial list of dental services. Your certificate of benefits will show exactly what is covered and excluded.

### Dental Carryover Benefit - Save your unused claims dollars for when you need them most!

Guardian will roll over a portion of your unused annual maximum into your personal Maximum Rollover Account (MRA). If you reach your Plan Annual Maximum in future years, you can use money from your MRA. To qualify for an MRA, you must have a paid claim (not just a visit) and must not have exceeded the paid claims threshold during the benefit year. Your MRA may not exceed the MRA limit. You can view your annual MRA statement detailing your account and those of your dependents on [www.GuardianAnytime.com](http://www.GuardianAnytime.com). Please note that actual maximum limitations and thresholds vary by plan. Your plan may vary from the one used below as an example to illustrate how the Maximum Rollover functions.

**College Tuition Services** - Lake Regional has worked with Guardian to make College Tuition Benefit services available to eligible members enrolled in a Dental plan. You can now create your Rewards account and start accumulating your Tuition Rewards that can be used to pay up to one year's tuition at SAGE Scholar Consortium of colleges. You can use your College Tuition Benefits Rewards at over 340 private colleges and universities across the nation. 80% of SAGE colleges have received an "America's Best" ranking by US News and World Reports. Here is how the service works: you will receive 2,000 rewards for each year you have Guardian Dental Plan benefits, each Tuition Reward point equals a \$1 tuition reduction and Tuition Rewards can be given to your relatives including children, nephews, nieces, and grandchildren

To learn more about the program and how to get started, go to: [www.Guardian.CollegeTuitionBenefit.com](http://www.Guardian.CollegeTuitionBenefit.com) to set up your account. If you have any questions, please feel free to visit the website or contact College Tuition Benefit directly at 215-839-0119.

**Dental Plan Premium Rates Per Pay Period**  
Full-Time and Part-Time Employees

<b>Employee</b>	\$13.70
<b>EE + Spouse</b>	\$26.47
<b>EE + Children</b>	\$37.35
<b>Family</b>	\$50.53

**Vision Insurance**

Many consider vision to be their most valued sense, and it is said that 80% of the sensory information that our brain receives comes in through the eyes. Yet, many are unaware of the relationship between overall health and routine eye exams. An eye exam is a comprehensive vision analysis and a gateway for learning about a person's overall health. To find a provider visit [www.superiorvision.com](http://www.superiorvision.com) or call Superior Vision Member Services at 800-507-3800.



**SUPERIOR VISION**  
See yourself healthy.

Exam	\$10
Materials <sup>1</sup>	\$25
Contact Lens Fitting (standard & specialty)	\$25

Emp. only	\$3.08
Emp. + spouse	\$6.15
Emp. + child(ren)	\$6.95
Emp. + family	\$10.75

Exam	12 months
Frame	24 months
Contact Lens Fitting	12 months
Lenses	12 months
Contact Lenses	12 months

(Based on date of service)

**Benefits through Superior National Network**

	In-Network	Out-of-Network
Exam (Ophthalmologist)	Covered in full	Up to \$34 retail
Exam (Optometrist)	Covered in full	Up to \$26 retail
Frames	\$130 retail allowance	Up to \$63 retail
Contact Lens Fitting (standard <sup>2</sup> )	Covered in full	Not covered
Contact Lens Fitting (specialty <sup>2</sup> )	\$50 retail allowance	Not covered
Lenses (standard <sup>4</sup> ) per pair		
Single Vision	Covered in full	Up to \$29 retail
Bifocal	Covered in full	Up to \$43 retail
Trifocal	Covered in full	Up to \$53 retail
Progressive lens upgrade	See description <sup>3</sup>	Up to \$53 retail
Contact Lenses <sup>4</sup>	\$130 retail allowance	Up to \$100 retail

Co-pays apply to in-network benefits; co-pays for out-of-network visits are deducted from reimbursements

<sup>1</sup> Materials co-pay applies to lenses and frames only, not contact lenses

<sup>2</sup> See your benefits materials for definitions of standard and specialty contact lens fittings

<sup>3</sup> Covered to provider's in-office standard retail lined bifocal amount; member pays difference between progressive and standard retail lined bifocal, plus applicable co-pay.

<sup>4</sup> Contact lenses are in lieu of eyeglass lenses and frames benefit

**Maximum Member Out-of-Pocket**  
Single Vision    Bifocal & Trifocal

Scratch coat	\$13	\$13
Ultraviolet coat	\$15	\$15
Tints, solid or gradients	\$25	\$25
Anti-reflective coat	\$50	\$50
Polycarbonate	\$40	20% off retail
High index 1.6	\$55	20% off retail
Photochromics	\$80	20% off retail

**Discounts on Non-Covered Exam and Materials**

Exams, frames, and prescription lenses:	30% off retail
Lens options, contacts, other prescription materials:	20% off retail
Disposable contact lenses:	10% off retail

<sup>2</sup> Discounts and maximums may vary by lens type. Please check with your provider.

**Discount Features**

Look for providers in the Provider Directory who accept discounts, as some do not, please verify their services and discounts (range from 10%-30%) prior to service as they vary.

**Discounts on Covered Materials**

- Frames: 20% off amount over allowance
- Lens options: 20% off retail
- Progressives: 20% off amount over standard progressive retail

The following options have out-of-pocket maximums<sup>3</sup> on standard (not premium, brand, or progressive) lenses.

**SuperiorVision.com**  
**Customer Service**  
**800.507.3800**

**Refractive Surgery**

Superior Vision has a nationwide network of refractive surgeons and leading LASIK networks who offer members a discount. These discounts range from 15%-50%, and are the best possible discounts available to Superior Vision.

The Plan discount features are not insurance.

All allowances are retail; the member is responsible for paying the provider directly for all non-covered items and/or any amount over the allowances, minus available discounts. These are not covered by the plan.

Discounts are subject to change without notice.

Disclaimer: All final determinations of benefits, administrative duties, and definitions are governed by the Certificate of Insurance for your vision plan.

Please check with your Human Resources department if you have any questions.

## Flexible Spending Accounts



What if you could make your earnings stretch further? A Flexible Spending Account (FSA) can help you to do just that. Lake Regional Health System offers you an opportunity to participate in two FSA programs: A Healthcare FSA and a Dependent Care FSA. An FSA is a tax-effective, money-saving option that will help you pay for qualified healthcare expenses that aren't covered by your medical plan, and for dependent care services necessary to enable you to work. Through the Lake Regional FSA, you can use tax-free dollars to pay for:

- ▶ most medical, dental and vision care expenses like copayments and deductibles.
- ▶ dependent care expenses like day care, babysitters, after-school programs or elder care programs so that you and your spouse can work or go to school.

If you choose to participate, you will elect to have a specified amount of pretaxed money deducted from your paycheck each pay period. These dollars are set aside in a flexible spending account and subtracted from your gross earnings before any taxes are taken out. You will be issued a debit card to use for eligible expenses or you can fill out a claim form and attach your healthcare and/or dependent care receipts.

### Health Care Account Limits

- ▶ A maximum of \$2,600 per year

### Dependent Care Account Limits

- ▶ A maximum of \$2,500 if you and your spouse file separate tax returns
- ▶ A maximum of \$5,000 if you are single or if you and your spouse file a joint return

## Other Points to Remember

**Use it or lose it.** The IRS rules state that if you have money left over in your FSA accounts after you have submitted all your claims for the year, you lose the amount that is left over. So, be careful when calculating how much to contribute.

**Health Care Reform Legislation.** Most over-the-counter (OTC) drugs and medications (except insulin) are no longer eligible under the FSA without a prescription from a licensed physician. OTC items that will continue to be eligible include bandages, blood pressure monitors, crutches, and other non-drug or medicine-related items.

## Life Insurance Benefits



Life Insurance is all about planning ahead, and it's an important part of your financial security, especially if others depend on you for support. It helps protect your family from a sudden loss of income in the event of your death. And even if you're single, your beneficiary can use your life insurance to pay off your debts — like credit cards, car payments and mortgages — and other final expenses.



## Basic Life Insurance



To ensure that you have adequate coverage for your family's financial needs, Lake Regional Health System provides Basic Life Insurance through Reliance Standard for regular full-time and part-time employees scheduled to work a minimum of 36 hours per pay period. Basic Life Insurance is equal to one and one-half times your base annual income, rounded to the nearest multiple of \$1,000 up to a maximum of \$750,000. Accidental Death & Dismemberment coverage is also included. Therefore, if you die as a result of a covered accident, your benefit is doubled.



## Supplemental Term Life Insurance

**RELIANCE STANDARD**  
LIFE INSURANCE COMPANY

Supplemental Term Life Insurance is also available for you, your spouse and your dependent children.

As an employee, you may purchase Supplemental Term Life Insurance for yourself in increments of \$10,000, not to exceed \$1,000,000 when combined with your Basic Life coverage. Additionally, you may purchase Supplemental Term Life Insurance for your dependents:

- ▶ Spouse: available in increments of \$10,000, not to exceed \$100,000.
- ▶ Children: 14 days to 6 months - \$500 benefit. Ages 6 months to age 21; through age 25 if a full-time student (coverage ends on their 26th birthday) - 4 benefit options available; \$2,500, \$5,000, \$7,500 or \$10,000. One rate covers all unmarried dependent children.

The Supplemental Term Life plan offers a certain amount of coverage on a Guaranteed Issue (GI) basis at your initial enrollment. If you are already covered under the plan, you may add \$10,000 of coverage on a GI basis, not to exceed the GI limit. If you have previously waived this benefit, you may still enroll for \$10,000 of coverage this year on a GI basis.

- ▶ Employee Guaranteed Issue maximum is \$750,000 for Basic Life and Supplemental Term Life combined.
- ▶ Spouse Guaranteed Issue maximum is \$50,000. Coverage over \$50,000 will be subject to certain health questions.
- ▶ Dependent Children Guaranteed Issue is \$10,000 for children aged 6 months to 21; through age 25 if a full-time student (coverage ends on their 26th birthday). For children from 14 days to 6 months, the benefit is \$500.

### Key Terms

#### Guaranteed Issue (GI)

When a benefit is offered on a Guaranteed Issue basis, this means that no health questions or medical evidence are required for you to be eligible to enroll in the benefit.

## Supplemental Term Life Employee & Spouse Rates

Age	Semi-Monthly Premiums per \$10,000 coverage
0-29	\$.37
30-34	\$.42
35-39	\$.48
40-44	\$.68
45-49	\$1.10
50-54	\$1.65
55-59	\$2.75
60-64	\$4.03
65-69	\$4.36
70+	\$5.91

  

Dependent Children Life Premiums*
<b>\$2,500 - benefit costs \$.28 semi-monthly</b>
<b>\$5,000 - benefit costs \$.55 semi-monthly</b>
<b>\$7,500 - benefit costs \$.83 semi-monthly</b>
<b>\$10,000 - benefit costs \$1.10 semi-monthly</b>

\*One rate for all unmarried dependent children up to age 21; through age 25 if a full-time student (coverage ends on their 26th birthday) Benefit is limited to \$500 from 14 days to age 6 months.

## Voluntary Whole Life Insurance

You may also choose to purchase Voluntary Whole Life Insurance, which offers you a guaranteed death benefit and a cash value accumulation that you can borrow against if you choose. All eligible employees and their spouses through age 72 may purchase coverage under the Basic Plan. Weekly deductions range from \$2.00-\$30.00 per week for employees age 18-72 and \$2.00-\$15.00 per week for spouses.



You may elect up to \$18 per week on a Guaranteed Issue basis, meaning you do not have to answer any health questions. You may also purchase coverage for your unmarried dependent children (ages 15 days through 25 years) or grandchildren (15 days to age 15) on this Whole Life Insurance plan, even if you choose not to enroll yourself.

A ELOP Employee Life Option Plus brochure offers additional details about this plan and is available in Human Resources.

## Voluntary Critical Illness

Every day thousands of people are diagnosed with a serious illness like cancer or suffer from a heart attack, stroke, or other unexpected medical condition.



The associated costs - even for individuals with medical insurance - can be astronomical. Lake Regional Health System offers the Boston Mutual Critical Illness option to help overcome costs not covered by medical insurance. You may also purchase coverage on your spouse. Dependent children are covered at 25% of your amount at no additional cost.

Upon first diagnosis of any of the following critical illnesses, the covered individual will receive 100% of the lump sum benefit available - from \$5,000 to \$50,000:

- ▶ Cancer
- ▶ Stroke
- ▶ End-Stage Renal Failure
- ▶ Heart Attack
- ▶ Major Organ Transplant

A 25% lump sum benefit will be received by insured for either coronary artery bypass surgery or carcinoma in situ.

Additionally, if you collect full benefits for a critical illness covered under the plan and later have one of the remaining covered illnesses, you will receive the full benefit amount for each additional illness as long as they are separated by at least 6 months.

If you collect full benefits for a covered condition and are later diagnosed with the same condition, you will receive the full benefit again, as long as the two dates of diagnosis are separated by at least 12 months or 12 months treatment free for cancer.

If you have a covered health screening test during the year, such as a pap smear, mammogram or colonoscopy, you and your covered spouse will receive a \$50 Health Screen Benefit, regardless of the results of the test.

Should you leave the company, this benefit is portable, meaning you can take it with you.

## Voluntary Cancer and Specified Disease Insurance



This plan pays benefits for the necessary treatment of cancer or a specified disease and for other conditions directly caused or aggravated by the cancer or specified disease.

It pays based on medical treatments, according to a schedule of benefits, and is designed to help you manage the unpredictable expenses related to a serious illness such as cancer.

Benefits are paid for expenses such as continuous hospital confinement, surgery, radiation and chemotherapy, private duty nursing, hospice care, non-local transportation and lodging, and bone marrow or stem cell transplant, among others.

Both plans pay a one-time first occurrence benefit. Plan A pays \$2,000 and plan B pays \$5,000 upon the initial diagnosis of cancer. In addition, Plan A pays a cancer screening benefit of \$75 per person per year for tests such as a pap smear, mammogram or colonoscopy; Plan B pays \$100.

Premium Rates Per Pay Period		
	Plan A	Plan B
<b>Individual</b>	\$7.76	\$15.18
<b>Family</b>	\$13.46	\$26.38



## Voluntary Short Term Disability Insurance

RELIANCE STANDARD  
LIFE INSURANCE COMPANY

How do you see yourself five years from now? Or ten? Chances are, you don't see yourself disabled. But a surprising number of people do find themselves injured or sick and unable to work – even if only for a short time. But would a month seem like a short time if you had *no income*?

Lake Regional Health System offers a Voluntary Short Term Disability (STD) plan that will help you pay your household expenses if you become disabled and cannot work. Whether you have an accident or are dealing with a sickness or pregnancy, the Voluntary STD plan covers you.

This plan offers you the opportunity to replace a portion of your weekly income for a period of 13 weeks, following a 14 day waiting period. You may choose from \$100 up to \$1,400 per week in increments of \$25, not to exceed 65% of your weekly income.

This coverage is available to eligible employees without having to provide medical evidence, during the Benefits Annual Enrollment or as a newly hired employee.

Voluntary Short Term Disability	
Percent of your base pay that you can receive	Up to 65% of weekly earnings
Maximum weekly benefit you can receive	\$1,400
When benefits start	15 <sup>th</sup> day after injury or sickness
How long you may receive benefits	13 weeks

### When are you disabled?

You are considered disabled if:

- ▶ you are unable to perform the material and substantial duties of your regular job due to your sickness or injury, and
- ▶ you are under the regular care of a doctor.

Pregnancy is covered as an illness, and the expected time off for delivery is six weeks for normal, eight weeks for Caesarean.

## Voluntary Long Term Disability Insurance

RELIANCE STANDARD  
LIFE INSURANCE COMPANY

If you are still disabled after 90 days, you may be eligible to receive Long Term Disability benefits. Lake Regional Health System offers this plan, which is designed to pick up where your Voluntary Short Term Disability coverage ends. You may elect up to \$6,000 per month, not to exceed 60% of your monthly earnings.

This coverage is also guaranteed issue during the Benefits Annual Enrollment or as a newly hired employee.

Voluntary Long Term Disability	
Percent of your base pay that you can receive	Up to 60% of monthly earnings
Maximum monthly benefit you can receive	\$6,000
When benefits start	91 <sup>st</sup> day after injury or sickness
How long you may receive benefits	Up to Social Security Normal Retirement Age

### When are you disabled?

Initially, you are considered disabled if:

- ▶ you are unable to perform the material and substantial duties of your regular job due to your sickness or injury, and
- ▶ you are under the regular care of a doctor.

After you have been receiving LTD payments for 24 months, the definition of disabled changes. After that point you are considered disabled if:

- ▶ you are unable to perform the duties of any gainful occupation for which you are reasonably suited because of your education, training or experience, and
- ▶ you are under the regular care of a doctor.

If you have lost your professional or occupational license because of your injury or illness, you may not necessarily be considered disabled.

## 401(k) Retirement Plan

Lake Regional provides a 401(k) Safe Harbor retirement plan through the Principal Financial Group. Beginning the first of the month following 60 days of employment, you are eligible to begin making salary contributions.



Once an employee has met the eligibility requirements of the retirement plan, Lake Regional Health System will match 100% of the first 3% of salary and 50% of the next 2% you contribute - the maximum match is 4% of salary.

Employees are 100% vested in salary-deferral contributions, as well as 401(k) Safe Harbor employer contributions.

## Paid Time Off (PTO)

Lake Regional offers a paid leave program that entitles employees in regular part-time or full-time status to accrue time off for illness, vacation, holiday or personal time. Paid Time Off (PTO) hours begin to accrue immediately upon employment, based on your hours worked to a maximum amount per year as displayed below. You are eligible to begin taking PTO hours the first of the month following 60 days of employment.

### PTO Accrual

Length of Employment	Maximum Accrual Hours	Accrual Rate/Qualifying Hour Paid
1st year	128	0.0615384
Year 2	160	0.0769231
Year 3	168	0.0807692
Year 4	200	0.0961539
5 years - 9 years	216	0.1038461
10 years - 14 years	232	0.1115384
15 years - 19 years	248	0.1192307
20 years - 24 years	264	0.1269230
25 years or greater	280	0.1346154

## Shift Differential

Employees receive a shift differential for working evenings and weekends. Evening differentials are paid for shifts that begin between the hours of 2:00 p.m. and 4:00 a.m. Weekend differentials are paid to shifts that begin between the hours of 6:00 p.m. on Friday and 6:00 p.m. on Sunday.

	Night	Weekend Day	Weekend Night
	Between 2 p.m. & 4 a.m.	Saturday and Sunday	Friday and Saturday
Non-licensed Employees	5%	10%	15%
Licensed Employees	10%	20%	30%

## Education Benefits - Tuition Assistance

Tuition assistance is available to employees in a Full Time or Part Time status. For undergraduate classes, tuition reimbursement may be paid up to \$300 per class for up to 4 classes per year. Graduate school classes may be paid for up to \$600 per class for up to 4 classes per year. This benefit is available after one full year of employment.

## Jury Duty

Full-time employees called for jury duty or Lake Regional Health System related court appearances are guaranteed their normal working wages less any court pay.

## Bereavement Leave

In the event of the death of an immediate family member, employees are eligible at the first of the month following 60 days of employment to be compensated for time lost to attend the funeral or make necessary arrangements for up to three consecutive scheduled working days.

## Meal Discount

As an employee of Lake Regional Health System, you receive a 30% discount on food in the Hospital cafeteria when you present your name badge at the time of purchase.

## Free Services

### Annual Blood Testing

- Comprehensive Metabolic Panel
- Lipid Profile
- CBC w Differential/Platelet
- TSH
- Free T4
- PSA
- Free consultation with Occupation Resources, if requested

LRHS gym use  
Flu Shots (Seasonal)  
TB Testing  
Hepatitis A & B Shots

## Discounted Services

### Lake Regional Retail Pharmacy

Over-the-counter items may be purchased at cost.  
\$4 on many generics

### Local Business Discounts

- Eye Exams
- Fitness Centers
- Getaway Hotel Rates
- YMCA membership discount

Discount Rates Available on the F.I.S.H

*\* All discounted services provided by vendors outside of LRHS were negotiated for LRHS staff members only and are not available to the general public.*

## Smoke Free Environment

Lake Regional is committed to providing a smoke-free environment for its employees, patients and customers. All Lake Regional Health System properties are smoke-free.



For health tips, upcoming health fairs and more, like us at [facebook.com/lakeregional](https://facebook.com/lakeregional).

## Service Recognition

Lake Regional recognizes employees who complete five, ten, fifteen, twenty, twenty-five, and thirty or more years of continuous service to the hospital.



**Thrive**

*A team approach to employee wellness*

Stay up-to-date with running opportunities in the lake area! Search for the Thrive Runners group on Facebook and ask to join.

## For More Information

Should you have questions about any of the employee benefits please contact Diana Matthews at 573.348.8306 or [dmatthews@lakeregional.com](mailto:dmatthews@lakeregional.com).

Visit the Lake Regional Health System website at: [www.lakeregional.com](http://www.lakeregional.com).



Lake Regional's blog is filled with great info, recipes and more from Lake Regional experts. Follow us at [lakeregional.com/HealthSmart](http://lakeregional.com/HealthSmart).

# NOTES



## About This Guide

This guide describes the benefit plans and policies available to you as an employee of Lake Regional Health System. The details of these plans and policies are contained in the official plan and policy documents, including some insurance contracts. This guide is meant only to cover the major points of each plan or policy.

If there is ever a question about one of these plans and policies, or if there is a conflict between the information in this guide and the formal language of the plan or policy documents, the formal wording in the plan or policy documents will govern.

Please note that the benefits described in this guide may be changed at any time and do not represent a contractual obligation on the part of Lake Regional Health System.



This Benefit Guide was provided by:

