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The information contained in this booklet is only a summary of coverage and is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Should there be differences between the information in the booklet and the contract, the contract will govern.



### **VISION:**

To be where the children are.

## **MISSION:**

To inspire hope and promote lifelong health by providing the best care to every child.

### **VALUES:**

Collaboration | Responsibility | Empowerment | Advocacy | Transformation | Empathy



# Eligibility:

### Who is Eligible?

If you are a benefits eligible employee who regularly works at least 20 hours per week, you are eligible for coverage under Nicklaus Children's Health System's group benefits plan. Coverage for certain benefits may depend on the rules of the individual plans.

### Dependents

You also may cover the following eligible dependents under NCHS plans that offer dependent coverage, including our Medical, Dental and Vision plans. Eligible dependents are:

- your legal spouse;
- your unmarried or married dependent children, up to age 26\*. Dependent children can include:
  - $\Rightarrow$  children you have legally adopted
  - $\Rightarrow~$  children placed with you for adoption, foster care
  - $\Rightarrow$  children for whom you have a legal guardianship
  - $\Rightarrow$  step children or children covered by a qualified medical child support order (QMCSO)

\*Dependents in this case would be eligible for coverage until their 26th birthday. Coverage remains in effect until the end of the month in which the dependent's 26th birthday falls.

Note: The spouse of your dependent child is not eligible for coverage under the NCHS group benefit plan.

### **Proof of Eligibility Required**

All employees who enroll a new dependent during Open Enrollment must provide proof of their dependent's eligibility. If you provided such proof during last year's Open Enrollment process, you do not need to provide proof again. This proof may include a marriage license, birth certificate, or your most recent income tax return. For details, please contact TM&E Benefits at 786-624-2461 option 9.



### When You and Your Spouse are Employed at NCHS

If you and your spouse are both employees of NCHS, only one of you can enroll eligible dependents in NCHS benefit plans. If you are covered under your spouse's NCHS medical plan, you are <u>NOT</u> eligible for the "Cash Back Option" provided to employees who waive benefits. See page 5 for more details on "Cash Back Option."

### **Enrolling in Benefits**

If you are a benefits eligible employee, you have the opportunity to enroll in the plans or make new elections each year during Open Enrollment. Please look for your Enrollment Newsletter and other communications for updates on your benefits, as well as enrollment instructions.

## How to enroll using Lawson:



#### Home

Inbasket ProcessFlow Integrator
Jobs and Reports
New Hire Enrollment
New Hire 🕸
Employee Self-Service ^
Benefits 🤣
Employment 👽
Pay 👽
Personal Information 🛛
Open Enrollment
Home Address
Dependents
Benefits

#### Step 1: Log in to Lawson Online Enrollment

*Note: If you have any difficulty logging in or accessing the Open Enrollment Online Program, please contact x4357 for assistance.* 

#### ⇒ From your home computer

- Go to <u>www.nicklauschildrens.org</u> and click on Employee and Physician Login at the bottom of the page.
- Enter your Network User Name and Password.
- You will need Citrix Access Gateway to connect to our portal remotely. *Note: If you are logging in for the first time, a Security Screen may display. Click "yes" to access the NCHSnet employee portal.*
- Select Lawson Portal and re-enter your Network User Name and Password.

#### ⇒ From your NCHS network computer

- Go to the NCHSnet Employee Portal
- On the right-hand side of the home page, under Applications find the link for Lawson (do not select Lawson LBI)
- Enter your Network User Name and Password

#### **Step 2: Complete your elections**

- Click on "Benefits" under "Open Enrollment" and follow the instructions to make your elections.
- If you are a new hire, click on "New Hire" then "Enroll in Benefits" under "New Hire Enrollment" and follow the instructions to make your elections.

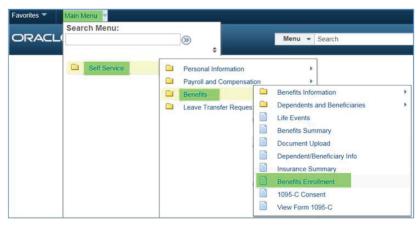
## How to enroll using PeopleSoft:

### Step 1: Log in to PeopleSoft HCM

To find PeopleSoft HCM on the portal, please follow step 1 above (from your home computer or NCHS network computer) and select PeopleSoft HCM instead of Lawson.

#### **Step 2: Complete your elections**

- Click on "Main Menu" then "Self Service."
- Once in "Self Service," click on "Benefits" then "Benefits Enrollment" and follow the instructions to make your elections.



## Things to Consider as You Enroll:

- ⇒ Even if you plan to waive benefits, you still need to participate in Open Enrollment.
   You may be eligible for the Cash Back Option if you decline medical coverage and if you actively participate in the Healthy Lifestyles Program.
- $\Rightarrow$  New Hires will be eligible for the Cash Back Option if you decline medical coverage.
- ⇒ Two PTO cash out options (May and/or November 2018)may be elected during open enrollment period up to a max of 120 hours combined.
- ⇒ You must make new Flexible Spending Account elections every year. Your prior year elections do not automatically carry forward to the current year.
- ⇒ Be sure to check that we have the proper address listed for you. The address we have on file is what we use when sending important mailings.
- ⇒ A mandatory reporting law related to Medicare and Medicaid requires insurers to have Social Security numbers for all dependents enrolled in their plans. Please be sure you have entered Social Security number(s) for each dependent you enroll.
- ⇒ NCHS provides every employee life insurance coverage at no cost. However, it is imperative that you designate a beneficiary. As you enroll, please be sure to complete your online beneficiary information.

# Enrollment – As Simple as 1, 2, 3:

#### **1. Know Your Benefits**

Benefits are an integral part of your total compensation at NCHS. That is why it's important that you get the maximum value from your benefit plans. Please take the time to review all your benefit options in order to make elections that fit your needs and keep pace with changes in your life. To learn all you can about the plans, review this booklet and other plan materials thoroughly. In addition, we encourage you to read your Total Rewards Statement which has information on your current benefit elections. Finally, look for your enrollment newsletter in the mail. It includes important dates and helpful tips to make the enrollment process as easy as possible.

#### 2. Choose Wisely

The choices you make during Open Enrollment stay in effect throughout

the plan year, unless you experience a qualifying status change (see more information on qualifying events below). It is important that you think about your needs and your dependents' needs for the coming year. Take into consideration any fixed expenses you have (e.g., regular prescription medications) as well as projected expenses. With different plans to choose from, you'll want to be sure to select the plans that best meet your needs.

#### **3. Enroll**

Once you have made your decisions, log on to the Open Enrollment Online Program through NCHSnet and follow the instructions to complete your enrollment. Remember, everyone must log on either to elect benefits or waive benefits.



## Making Changes to Your Benefits: When Can I Change My Benefit Choices?

### **Qualifying Life Events**

The elections you make during the Open Enrollment period stay in effect for an entire year, from January 1 through December 31. The elections you make when you first become eligible for coverage also stay in effect through December 31. The only other time you can change your coverage during the year is when you have a qualifying life event [see Internal Revenue Service Section 125 and the Health Insurance Portability and Accountability Act (HIPAA)]. Some examples of qualifying life events include marriage, divorce, legal separation, birth or adoption of a dependent, losing or gaining other group health coverage, or death of a spouse or dependent.

## **Changes to Your Benefits Based on Qualified Status Changes**

- If you have a qualified change in status and want to change your benefits, you are required to register your qualifying status change with TM&E Benefits within <u>31 days</u> of the life event (60 days for newborns for medical plan only).
- Review your employee information (name, address, phone number, marital status, beneficiary designation, and other personal information) to ensure that it is recorded correctly in the Online Enrollment Program.
- Please contact TM&E Benefits at 786-624-2461 option 9 to discuss your change so that you can be sure you complete all required steps.

Note: Some changes may require you to complete additional forms.

## Paying for Your Benefits:

You and NCHS share the cost of your benefits. However, it is important to note that, for most of your benefits (medical, dental, vision, FSAs) your payments are made with pretax dollars. This means your contributions are deducted from your pay before taxes are determined. Because this lowers the amount of income on which you pay taxes, it enables you to pay less in current income taxes. NCHS makes this possible through its company-sponsored IRS Section 125 Pre-tax Savings Plan.

# Medical Plan:

NCHS is pleased to offer both HMO and POS plans through UnitedHealthcare (UHC). The following pages describe the differences between these two plans.

### **UnitedHealthcare – Choice HMO (Health Maintenance Organization) Plan**

Typically with an HMO, you choose a Primary Care Physician (PCP) who coordinates all your medical care. The advantage of the Choice HMO plan offered at NCHS is that you do not need to select a PCP and can see any provider within the network. However, you must stay in the specified network of doctors, hospitals and laboratories in order to receive coverage. Participating providers offer a full range of healthcare services to members for a modest co-payment amount with no deductible or claim forms to file.

Plan Provisions	In-Network	
Lifetime Maximum	Unlimited	
Calendar Year Deductible		
Individual	N/A	
Family	N/A	
Out-of-Pocket Maximum Individual	\$2,500 (includes all medical and prescription drug copays)	
Family	\$5,000 (includes all medical and prescription drug copays)	
Physician Expenses	+-, (	
NCHS Pediatric Care Center	\$5 copay (Doctor/PCC visit only); \$35 copay (urgent care visit)	
Primary Care Physician	\$25 copay	
Specialist	\$40 copay	
Preventive Benefit Services	\$0 copay (i.e. mammography & colonoscopy are covered at 100%)	
Routine Vision Care		
Refractive Eye Exam	\$40 copay	
Hospital Expenses	\$0 copay at Nicklaus Children's Hospital	
Inpatient	\$100 per day x 5 days (maximum of \$500 per admission) at all other facilities	
Emergency Room	\$100 copay at Nicklaus Children's Hospital/\$150 copay at all other facilities (waived if admitted as an inpatient stay)	
Urgent Care	\$35 copay	
Outpatient Surgery		
Сорау	\$100 copay	
Diagnostic, Lab & X-ray		
High End Diagnostics: MRA, MRI,	¢100	
PET, CT, and Sleep Studies	\$100 copay	
Low End Diagnostics: X-ray, Ultrasound	\$50 copay	
Rehabilitation Services Visit	\$2E consy	
Maximum Number of Visits	<ul><li>\$25 copay</li><li>60 visits combined for physical therapy, occupational therapy, speech therapy,</li></ul>	
	pulmonary rehabilitation and cardiac rehabilitation per calendar year	
Applied Behavioral Analysis (ABA)	\$25 copay	
Durable Medical Equipment		
Сорау	\$35 copay	
Prescription Drugs	Please refer to page 10 for information regarding prescription drugs	

This is only a summary and not intended as a complete description of covered services. Please read the full description of the coverage in the plan's certificate of coverage, summary plan description, or plan document, all of which will prevail should there be any conflict with this information. Benefits Eligible: Full-time & a week)- first of the month f Customer Service: UnitedHe Your Contributions: Pre-tax

**Benefits Eligible:** Full-time & part-time employees (working at least 20 hours a week)- first of the month following date of hire

Customer Service: UnitedHealthcare | (866) 633-2446 | <u>www.myuhc.com</u> Your Contributions: Pre-tax

## UnitedHealthcare Choice Plus POS (Point of Service) Plan:

This plan allows you the flexibility to choose a provider who either does or does not participate in the network. Benefit levels are higher and out-of-pocket costs are lower when you stay within the UHC Choice Plus network. Out-of-network providers may also bill you for amounts exceeding the plan's payment schedule.

In-Network	Out-of-Network
= Preset co-payments, for physician office visits	= No co-payments, coinsurance applies
= Higher % of your cost covered	= Lower % of cost covered
= Lower out-of-pocket costs	= You may have higher out-of-pocket costs
= No claim forms to file	= You may have to file claim forms

Plan Provisions	In-Network	Out-of-Network
Lifetime Maximum	Unlimited	Unlimited
Calendar Year Deductible	4	4
Individual	\$300	\$600
Family	\$600	\$1,200
Out-of-Pocket Maximum	\$3,500 (includes deductible,	\$7,000 (includes deductible,
Individual	coinsurance, and all medical and	coinsurance, and all medical and
	prescription drug copays)	prescription drug copays)
Family	\$7,000 (includes deductible,	\$14,000 (includes deductible,
	coinsurance, and all medical and	coinsurance, and all medical and
<b>N N</b>	prescription drug copays)	prescription drug copays)
Physician Expenses	\$35 copay (urgent care visit);	Netsustation
NCHS Pediatric Care Center	\$5 copay (doctor/PCC visit only)	Not applicable
Primary Care Physician	\$20 copay	40% coinsurance
Specialist	\$35 copay	40% coinsurance
Preventive Benefit Services	\$0 copay (see page 10 for details)	Not covered
Routine Vision Care		
Refractive Eye Exam	\$35 copay	Not covered
Hospital Expenses	\$0 copay at Nicklaus Children's	
Inpatient	Hospital and deductible waived	400/
For any set Descent	20% coinsurance at all other facilities	40% coinsurance
Emergency Room	\$100 copay at Nicklaus Children's Hospit \$150 copay at all other facilities (waived	
Urgent Care	\$35 copay	40% coinsurance
Outpatient Surgery	20% coinsurance	40%
Coinsurance		40% coinsurance
Diagnostic, Lab & X-ray High End Diagnostics: MRA, MRI,	20% coinsurance	
PET, CT, and Sleep Studies		40% coinsurance
Low End Diagnostics: X-ray,		
Ultrasound	20% coinsurance	40% coinsurance
Rehabilitation Services		
Visit	20% coinsurance	40% coinsurance
Maximum Number of Visits	60 visits combined for physical therapy,	60 visits combined for physical therapy,
	occupational therapy, speech therapy,	occupational therapy, speech therapy,
	pulmonary rehabilitation and cardiac	pulmonary rehabilitation and cardiac
	rehabilitation per calendar year	rehabilitation per calendar year
Applied Behavioral Analysis (ABA)	20% coinsurance	Not covered
Durable Medical Equipment		
Coinsurance	20% coinsurance	40% coinsurance
Prescription Drugs	Please refer to page 10 for information r	egarding prescription drugs

## **Prescription Drug Plan:**

Prescription drug coverage is available through UnitedHealthcare (UHC). The UHC plan gives you control to pay for your medications either through retail or mail order programs, and it provides three levels of coverage. The retail program allows you to purchase up to a 30-day supply at participating pharmacies. If you or a dependent take maintenance drugs (e.g., blood pressure medication), using the mail order program can save you money.

### **Specialty Prescription Drug Program**

When you're living with a rare or complex condition, appropriate use of specialty medications can be critical to maintaining or improving your health -- and your quality of life. UHC's Specialty Pharmacy Program provides the resources and personalized condition-specific support you need to help you better manage your condition. After receiving a prescription for a specialty medication or to transfer your medications from a retail pharmacy, call Prescription Solutions by Optum/Briova Rx Specialty Pharmacy at 1-888-739-5820. If you are not sure if your medication qualifies as a specialty drug please contact Optum/Briova Rx.

### **Saving Money on Your Medications**

Retail 1-month supply of prescription	Mail Order 3-month supply of prescription	Specialty Drug 1- month supply of prescription
\$10 Tier 1	\$25 Tier 1	\$7 Tier 1
\$30 Tier 2	\$75 Tier 2	\$20 Tier 2
\$50 Tier 3	\$125 Tier 3	\$34 Tier 3
If generic is available, member must pay th	ne brand copay plus the difference in cost be	tween the generic and brand name.

\*The co-payment amounts shown in this example are for illustrative purposes only. Your actual co-payment may be different depending on the plan in which you are enrolled. Please refer to the medical plan information in this guide for actual co-payment amounts.

## Medical Plan Rates: (for Employees hired after 9/25/2017)

Biweekly Contributions	2018 PAYCHECK CONTRIBUTIONS EPO				
	<\$30,000	\$30,000 - \$59,999	\$60,000 - \$99,999	\$100,000 - \$149,999	>\$150,000
SINGLE COVERAGE	\$60.78	\$63.90	\$67.75	\$70.37	\$72.69
EMPLOYEE + CHILD(REN)	\$122.99	\$129.30	\$137.09	\$142.38	\$147.08
EMPLOYEE + SPOUSE	\$142.90	\$150.23	\$159.28	\$165.43	\$170.89
FAMILY	\$217.66	\$228.82	\$242.61	\$251.99	\$260.30

Biweekly Contributions		2018 PAYCHECK CONTRIBUTIONS POS			
	<\$30,000	\$30,000 - \$59,999	\$60,000 - \$99,999	\$100,000 - \$149,999	>\$150,000
SINGLE COVERAGE	\$146.95	\$154.49	\$163.80	\$167.70	\$174.08
EMPLOYEE + CHILD(REN)	\$300.33	\$315.73	\$334.75	\$342.72	\$355.78
EMPLOYEE + SPOUSE	\$330.19	\$347.12	\$368.04	\$376.80	\$391.15
FAMILY	\$506.11	\$532.07	\$564.12	\$577.56	\$599.55

## **Preventive Benefit Services:**

Nicklaus Children's Health System has a commitment to the wellness of our employees and their families. We believe helping people live healthier lives begins with preventive care. Preventive services covered with no cost share are those services described in the United States Preventive Services Task Force A and B recommendations, the Advisory Committee on Immunization Practices (ACIP) of the CDC, and HRSA Guidelines including the American Academy of Pediatrics Bright Futures periodicity guidelines. In addition to these mandated services, under the Preventive Benefit, UnitedHealthcare also provides screening using CT Colonography, PSA and Screening Mammography without age limits.

#### All members:

- Yearly preventive medicine visits (wellness visits)
- All standard immunizations recommended by the American Committee on Immunization Practices

#### All members at an appropriate age or risk status:

- Screening colorectal cancer, elevated cholesterol and lipids
- Screening for certain sexually transmitted diseases and HIV
- Screening and counseling at doctor's office for alcohol or substance abuse; tobacco use; obesity; diet and nutrition
- Screening for high blood pressure, diabetes and depression

#### Women's health:

- Screening mammography, cervical cancer including Pap Smears, certain sexually transmitted diseases and evaluation for genetic testing for BRCA
- Screening pregnant women for anemia, iron deficiency, bacteriuria, hepatitus B virus, Rh incompatibility
- Osteoporosis screening (age 60 or older)
- Counseling women at high risk of breast cancer for chemoprevention
- Breast pumps
- Certain contraceptive medication in PDL Tier 1 (additional contraceptives are covered in higher-cost tiers at the applicable plan cost-share)

#### Men's health:

- Screening for prostate cancer for men age 40 and older
- Screening for abdominal aortic aneurysm in men 65-75 years old

#### **Children's health:**

- Screening newborns for hearing, thyroid disease, phenylketonuria, sickle cell anemia
- Standard metabolic screening panel for inherited enzyme deficiency diseases
- Screening for major depressive disorders
- Screening for developmental/autism screening
- Screening for lead and tuberculosis



## UnitedHealthcare Disease Management Programs:

#### **Diabetes Health Plan**

UnitedHealthcare has a program available to help members living with diabetes improve their health. All pre-diabetics and diabetics will be enrolled in a program that waives copays for certain diabetes related health visits, supplies and prescription drugs. In order to continue to be eligible for this program, you must remain in compliance with your diabetes care management, cancer screenings, preventive care, and prescription drug utilization. As long as you stay in compliance, eligibility for reduced out-of-pocket costs is maintained. For more information visit www.uhctogether.com/MCH.

#### **Healthy Pregnancy Program**

UnitedHealthcare has special prenatal programs to help you during Pregnancy. They are completely voluntary and there is no extra cost for participating. To sign up, you should notify UnitedHealthcare's customer service department during the first trimester, but no later than one month prior to the anticipated childbirth. If you enroll in this program and actively participate in a minimum of 3 calls, including one post-partum, your inpatient copay will be waived. Visit www.healthy-pregnancy.com.

#### **Cancer Support Program**

NCHS realizes many of our employees and their families have been affected by cancer and wants to ensure that ample support is being provided during treatment. UnitedHealthcare has a program that will help arrange access to certain network providers participating in the Cancer Resource Services Program for the provision of oncology services. You may be referred to Cancer Resource Services by UnitedHealthcare, or you may self refer to Cancer Resource Services by calling 866-936-6002 prior to obtaining services.

Additional support is provided by UnitedHealthcare's dedicated Nurse Liaison. Please contact the Employee Health Clinic at 786-624-2636 for more information or your UHC Nurse Liaison.

For other questions, contact the UnitedHealthcare Customer Service Department.

## Dental Plan:

NCHS offers you a choice between a Dental Health Maintenance Organization (DHMO) plan and a Dental Preferred Provider Organization (PPO) plan. Both plans are administered by Delta Dental.

#### **Delta Dental – DHMO Plan**

The DHMO plan requires you to select a primary dentist within Delta Dental's specified provider network. Your primary dentist will coordinate all your treatment needs. You must stay within the specified network to receive coverage. For each visit to the dentist, you will be charged a flat co-pay for covered services. See the chart that follows for details.



Plan Provisions	In-Network
Preventive Services	
Office Visit	\$5 copay
Oral Examinations	\$0 copay
Cleanings	\$0 copay
X-Rays	\$0 copay
Oral Surgery	
Extraction, Coronal Remnants-Deciduous tooth	\$5 copay
Removal of Impacted Tooth - Soft Tissue	\$60 copay
Removal of Impacted Tooth - Full Bony Impaction	\$110 copay
Periodontics	
Gingivectomy or Gingoplasty (per quadrant)	\$145 copay
Periodontal scaling & Root Planning (per quadrant)	\$55 copay
Endodontics	
Anterior Root Canal	\$110 copay
Molar Root Canal	\$350 copay
Prosthodontics	
Complete Upper or Lower Denture	\$335 copay
Crown and Bridge	
Porcelain Crown - Fused to High Noble Metal	\$380 copay
Orthodontics	
Evaluation	\$25 copay
Pre-treatment Records and Diagnostic Services	\$200 copay
Comprehensive Treatment - Child	\$1,900 copay
Comprehensive Treatment - Adult	\$2,100 copay
Biweekly Employee Contributions	
Employee	\$4.85
Employee + Child(ren)	\$9.00
Employee + Spouse	\$9.41
Family	\$11.12

This is only a summary of your dental benefits. Please read the full description of the coverage in the plan's certificate of coverage, summary plan description, or plan document, all of which will prevail should there be any conflict with this information. Benefits Eligible: Full-time & part-time employees (working at least 20 hours a week) - First of the month following date of hire Customer Service: Delta Dental 1-800-422-4234 | www.deltadentalins.com Your Contributions: Pre-tax

## **Delta Dental PPO:**

The PPO dental plan allows you to use an in-network or out-of-network provider when you need care. You do not have to select a primary dentist, nor do you need referrals to see specialists. However, when you visit a dentist who participates in the Delta Dental PPO network, you can lower your out-of-pocket expenses. With an in-network dentist, you can only be charged up to the plan's negotiated rate. When you use an out-of-network provider, you may have to pay the difference between what the plan pays and what the dentist actually charges.

Plan Provisions	In-Network	Out-of-Network	
Calendar Year Maximum	\$2,000	\$1,500	
Calendar Year Deductible* Individual	\$50		
Family	\$150		
<b>Preventive and Diagnostic Benefits</b> (cleaning, diagnostic services, x-rays, dental sealants, space maintainers, fluoride treatments)	100% of PPO fee schedule	90% of PPO fee schedule	
<b>Basic Benefits</b> (simple extractions, fillings, simple restorations, repairs, endodontics, periodontics)	90% of PPO fee schedule	70% of PPO fee schedule	
Major Benefits (crowns, prosthodontic services)	60% of PPO fee schedule	40% of PPO fee schedule	
Child and Adult Orthodontia	50% of PPO fee	e schedule	
Lifetime Maximum	\$1,50	0	
Biweekly Employee Contributions	•		
Employee Only	\$15.29		
Employee + Child(ren)	\$31.06		
Employee + Spouse	\$27.51		
Family	\$46.31		

\*Deductible does not apply to diagnostic, preventive and orthodontic services.

This is only a summary and not intended as a complete description of covered services. Please read the full description of the coverage in the plan's certificate of coverage, summary plan description, or plan document, all of which will prevail should there be any conflict with this information.

Benefits Eligible: Full-time & part-time employees (working at least 20 hours a week)- First of the month following date of hire Customer Service: Delta Dental 1-800-521-2651 | <u>www.deltadentalins.com</u> Your Contributions: Pre-tax



## Vision Plan:

Protecting your eyesight is very important. Routine eye exams are essential in order to detect any problems with your vision and to screen for serious health conditions such as glaucoma, cataracts, diabetes, etc.

NCHS offers a comprehensive vision plan through EyeMed Vision Care's Select Network. As with your medical and dental plans, you can lower your costs by staying in the EyeMed "Select" Network. For specifics on what the plan covers and costs to you, please see the chart that follows.

### **EyeMed | Essential Plan**

	ESSENTIAL			
Vision Care Services	Member Cost	Out-of-Network Reimbursement		
Exam with Dilation as Necessary	\$0 Copay	Up to \$35		
Exam Options				
Standard Contact Lens Fit and Follow-Up	Up to \$40	N/A		
Premium Contact Lens Fit and Follow-Up	10% off retail price	N/A		
Retinal Imaging	Up to \$39	N/A		
Frames	\$0 Copay; \$100 Allowance,			
	20% off balance over \$100	Up to \$50		
Standard Plastic Lenses				
Single Vision	\$10 Copay	Up to \$25		
Bifocal	\$10 Copay	Up to \$40		
Trifocal	\$10 Copay	Up to \$55		
Standard Progressive Lens*	\$75 Copay	Up to \$40		
Premium Progressive Lens*	\$75 Copay, 80% of charge less \$120 Allowance	Up to \$40		
Lens Options				
UV Treatment	\$15	N/A		
Tint (Solid and Gradient)	\$15	N/A		
Standard Plastic Scratch Coating	\$15	N/A		
Standard Polycarbonate - Adults	\$40	N/A		
Standard Polycarbonate - Kids under 19	\$40	N/A		
Standard Anti-Reflective Coating	\$45	N/A		
Polarized		N/A		
Other Add-Ons	20% off Retail Price 20% off Retail Price	N/A N/A		
Contact Lenses		N/A		
Contact Lenses				
Conventional	\$0 Copay; \$120 Allowance, 15% off balance over \$120	Up to \$96		
Disposable	\$0 Copay; \$120 Allowance, plus balance over \$120	Up to \$96		
Medically Necessary	\$0 Copay, Paid-in-Full	Up to \$200		
Laser Vision Correction				
For Lasik Providers call 1-877-5LASER6 or visit eyemedlasik.com.	15% off Retail Price or 5% off promotional price	N/A		
Additional Pairs Benefit	Members also receive a 40% discount off complete pair eyeglass purchases and a 15% discount off conventional contact lenses once the funded benefit has been used.	N/A		
' Standard progressive lens covered - fund premium progressive as a standard	Frequency Examination Frame Lenses OR Contact Lenses	Once every calendar year Once every two calendar years Once every calendar year Once every calendar year		
	<i>Bi-weekly Rate</i> Subscriber Subscriber & Family	Premium \$2.65 \$7.43		

\* Lasik and PRK correction procedures are provided by the U.S. Laser Network, owned by LCA-Vision. Members must first call 1-877-552-7376 for the nearest facility and to receive authorization for the discount.

This is only a summary of your vision benefits. Please read the full description of the coverage in the plan's certificate of coverage, summary plan description, or plan document, all of which will prevail should there be any conflict with this information. Benefits Eligible: Full-time & part-time employees (working at least 20 hours a week)- First of the month following date of hire Customer Service: Eyemed Vision care 1-866-939-3633 | www.eyemed.com Your Contributions: Pre-tax

### EyeMed | Enhanced Plan

	ENHANCED			
Vision Care Services	Member Cost Out-of-Network Reimbur			
Exam with Dilation as Necessary	\$0 Copay	Up to \$35		
Exam Options				
Standard Contact Lens Fit and Follow-Up	\$0 Copay, Paid-in-full fit and two follow-up visits	Up to \$40		
Premium Contact Lens Fit and Follow-Up	\$0 Copay, 10% off retail prices, then apply \$40 Allowance	Up to \$40		
Retinal Imaging	Up to \$39	N/A		
Frames	\$0 Copay; \$160 Allowance, 20% off balance over \$160	Up to \$80		
Standard Plastic Lenses				
Single Vision	\$10 Copay	Up to \$25		
Bifocal	\$10 Copay	Up to \$40		
Trifocal	\$10 Copay	Up to \$55		
Standard Progressive Lens*	\$10 Copay	Up to \$55		
Premium Progressive Lens*	\$10, 80% of charge less \$120 Allowance	Up to \$55		
Lens Options		00 10 400		
UV Treatment	\$0 Copay	Up to \$8		
Tint (Solid and Gradient)	\$0 Copay	Up to \$8		
		• • •		
Standard Plastic Scratch Coating	\$0 Copay	Up to \$8		
Standard Polycarbonate - Adults	\$0 Copay	Up to \$20		
Standard Polycarbonate - Kids under 19	\$0 Copay	Up to \$20		
Standard Anti-Reflective Coating	\$0 Copay	Up to \$23		
Polarized	20% off Retail Price	N/A		
Other Add-Ons	20% off Retail Price	N/A		
Contact Lenses				
Contact lens allowance includes materials only				
Conventional	\$0 Copay; \$160 Allowance, 15% off balance over \$160	Up to \$128		
Disposable	\$0 Copay; \$160 Allowance, plus balance over \$160	Up to \$128		
Medically Necessary	\$0 Copay, Paid-in-Full	Up to \$210		
Laser Vision Correction				
For Lasik Providers call 1-877-5LASER6 or visit evemedlasik.com.	15% off Retail Price or 5% off promotional price	N/A		
Additional Pairs Benefit	Members also receive a 40% discount off complete pair eyeglass purchases and a 15% discount off conventional contact lenses once the funded benefit has been used.	N/A		
	Frequency			
* Standard progressive lens covered - fund premium progressive as a standard	Examination Frame Lenses OR	Once every calendar year Once every calendar year Once every calendar year		
	OR Contact Lenses	Once every calendar year		
		Premium		
	Subscriber Subscriber & Family	\$7.02 \$19.71		

\* Lasik and PRK correction procedures are provided by the U.S. Laser Network, owned by LCA-Vision. Members must first call 1-877-552-7376 for the nearest facility and to receive authorization for the discount.

This is only a summary of your vision benefits. Please read the full description of the coverage in the plan's certificate of coverage, summary plan description, or plan document, all of which will prevail should there be any conflict with this information.

Benefits Eligible: Full-time & part-time employees (working at least 20 hours a week)- First of the month following date of hire Customer Service: Eyemed Vision care 1-866-939-3633 | www.eyemed.com Your Contributions: Pre-tax



## Flexible Spending Accounts:

Flexible Spending Accounts (FSAs) let you pay for out-of-pocket health care and dependent day care expenses on a tax-free basis. Money is set aside from your pay before federal income tax and Social Security (FICA) taxes are withheld. You save money because this lowers your taxable income, and you pay taxes on a smaller amount. Your contributions to the spending accounts are deducted from your paycheck in equal installments throughout the year. The NCHS FSA plan is administered by WageWorks.

### **Key Points about Your FSA:**

- Rules on Over-the-Counter (OTC) Medications. You may no longer use the debit card to purchase OTC products that are considered to be "drugs and medicines." In addition, to receive reimbursement for the purchase of OTC products considered "drugs and medicines" you must submit a written "prescription" from a physician for the product, along with your claim form and itemized receipt.
- Use It or Lose It. This plan requires that all monies set aside in your spending accounts be used during the plan year or you will forfeit the balance. Leftover balances in your account(s) cannot be carried forward and you cannot change your election during the year unless you experience a Qualified Life Event.
- **Plan Ahead.** Choose your contribution amount carefully. Take the time before you enroll to estimate your expenses for the plan year for each account.
- Yearly Enrollment Required. You must make new FSA elections every year. Your prior year elections do not automatically carry forward to the current year.
- Account Transfers Not Permitted. You Cannot Transfer Contributions Between FSAs If you participate in both a Health Care and the Dependent Care FSA, the amount you contribute to one account cannot be transferred to or used toward expenses under the other account.

Type of Benefit	Benefit Description	
Health Care Spending Account		
Maximum Contribution	\$2,600 Annual Maximum	
Dependent Care Spending Account		
Maximum Contribution         \$4,940 Annual Maximum		
Reimbursement	Processed claims paid daily	
Grace Period 90 days following plan year to submit claims;		
90 days following termination from plan to submit claim		

### An Example of How FSAs Help You Save:

- Health Care FSA This FSA is for eligible health care expenses not paid by insurance, including co-payments, exams, deductibles, vision care and dental expenses.
- Dependent Care FSA This FSA is for dependent care expenses you incur to care for your eligible dependents, including daycare, afterschool care or elder care.

This is only a summary of your benefits. For a list of eligible expenses, please contact TM&E Benefits at 786-624-2461 option 9. Please read the full description of the coverage in the plan's certificate of coverage, summary plan description, or plan document, all of which will prevail should there be any conflict with this information.



**Benefits Eligible:** Full-time & part-time employees (working at least 20 hours a week)- First of the month following date of hire

Customer Service: WageWorks 1-877-924-3967 | <u>www.wageworks.com</u> Your Contributions: Pre-tax

## Group Life, Supplemental Coverage and AD&D Plan:

NCHS provides group life insurance at no cost to you. You also have the option to purchase additional life for you and your eligible dependents and accidental death and dismemberment (AD&D) insurance for you through The Hartford.

Type of Benefit	Life Insurance
Eligibility	All benefits eligible full-time and part-time employees working at least 20 hours per week.
Benefit Amount	Employer Paid - 2 times your annual earnings rounded to the next higher \$1,000 to a maximum of \$300,000
Supplemental Coverage	<b>Employee Only</b> Employee paid - You choose from 1, 2, or 3 times your annual earnings rounded to the next higher \$1,000 to a maximum of \$750,000 (combined basic and supplemental)
	Non-Medical Maximum:
	\$500,000 (combined basic and supplemental)
	Employee and Spouse &/or Child(ren)
	Employee paid - You choose from two options:
	Option 1 -
	Spouse: \$10,000
	Child(ren): Live birth to 6 months - \$100; 6 months to age 26 - \$5,000
	Option 2 - Spouse: \$25,000 Child(ren): Live birth to 6 months - \$100; 6 months to age 26 - \$10,000
	Employee Only
	Employee paid - You choose from these options for supplemental AD&D cover- age:
	Option 1 - \$50,000
	Option 2 - \$100,000
	Option 3 - \$200,000
	Option 4 - \$300,000
Waiver of Premium	If you become totally disabled before age 65, Life premiums may be waived after six months from the date you are no longer in active employment
Conversion/portability	If your employment terminates, you may be eligible for conversion / portability under this contract.

This is only a summary of your benefits. Please read the full description of the coverage in the plan's certificate of coverage, summary plan description, or plan document, all of which will prevail should there be any conflict with this information. Benefits Eligible: Full-time & part-time employees (working at least 20 hours a week)- First of the month following date of hire Customer Service: Hartford Group Benefits 1-888-563-1124

## **REMINDER | Supplemental Life Insurance:**

If you are increasing your optional life insurance coverage by more than one times your annual salary or electing dependent life insurance, you must complete an Evidence of Insurability (EOI) form that will be mailed to your home by The Hartford.

# **Disability Plan:**

NCHS provides short-term disability (STD) and long-term disability (LTD) at no cost to you. Disability insurance protects your income should you become disabled and are unable to work.

### **STD Plan Highlights**

What is Short- Term Disability Insurance?	Short-Term Disability Insurance pays you a portion of your earnings if you cannot work because of a disabling illness or injury. Your employer currently provides – at no cost to you – Short-Term Disability Insurance. This highlight sheet is an overview of your Short-Term Disability Insurance. Once a group policy is issued to your employer, a certificate of insurance will be available to explain your coverage in detail.
What is disability?	Typically disability means that you cannot perform one or more of the essential duties of your occupation due to injury, sickness, pregnancy or other medical condition covered by the insurance, and as a result, your current monthly earnings are 80% or less than of your pre-disability earnings.
Am I eligible?	You are eligible if you are a benefits eligible, active employee who works at least 40 hours bi-weekly on a regularly scheduled basis.
How much coverage would I have?	Your employer provides Short-Term Disability Insurance that pays you a benefit of 60% of your earnings, to a maximum of \$1,600 per week. Earnings are defined as in The Hartford's contract with your employer.
How long do I have to wait before I can receive my benefit?	You will be eligible to collect your Short-Term Disability insurance benefit starting on the 8th day after your accident or sickness. Your benefit could continue for an additional 12 weeks.
When is it effective?	Coverage goes into effect subject to the terms and conditions of the policy. You must be Actively at Work with your employer on the day your coverage takes effect.
If I'm disabled, can the amount of my benefit be reduced?	Yes. As described in the following section, your Short-Term benefit may be reduced by other income you receive. Your Short-Term benefit will not be reduced by any Sick Hour/PTO Benefits that you may receive.

### **LTD Plan Highlights**

	Class 1 Coverage	Class 2 Coverage
Benefits Eligible Employees	All directors and physicians of Nick- laus Children's Health System in active employment and working at least 40 hours bi-weekly.	All other employees of Nicklaus Children's Health System in active employment working at least 40 hours bi-weekly.
Elimination Period	90-days or the end of the STD benefit period, whichever is greater.	
Benefit Plan	60% of monthly earnings to a maxi- 60% of monthly earnings to a	
	mum of \$20,000 / month maximum of \$10,000 / month	
<b>Minimum Monthly Benefit</b>	\$100 or 10% of your gross monthly benefit, whichever is greater.	
Survivor Benefit	After disability has continued for 180 days, upon your death, Hartford will pay a	
	survivor an amount equal to 3 times your last monthly benefit.	
Conversion Option	If your employment terminates with Nicklaus Children's Health System, you may be eligible to convert your policy. Maximum conversion amount is 60% to \$5,000.	

This is only a summary of your benefits. Please read the full description of the coverage in the plan's certificate of coverage, summary plan description, or plan document, all of which will prevail should there be any conflict with this information.

**Benefits Eligible:** Full-time & part-time employees (working at least 20 hours a week)- First of the month following date of hire **Customer Service**: Hartford Benefits Group 1-888-877-9199

### **Paid Time Off**

This program combines vacation, holiday and sick time in one plan. Employees who are eligible for benefits accrue Paid Time Off on a pro-rated basis.

### **Plan Highlights**

Plan Provisions	Paid Time Off (PTO)	
Accrual Rates -	Hourly	Salaried
Based on Years of Service		
0-1	24 days / year	29 days / year
2	25 days / year	30 days / year
3	26 days / year	31 days / year
4	27 days / year	32 days / year
5	28 days / year	33 days / year
6	29 days / year	34 days / year
7	30 days / year	34 days / year
8	31 days / year	34 days / year
9	32 days / year	34 days / year
10	33 days / year	34 days / year
10+	34 days / year	34 days / year
	•	•
Accrual Formula	Based on Years of Service and Wo	orked Hours — Up to a Maximum of
	40 hours per week (Part-time employees' accruals are pro-rated)	
<b>Carry-over:</b> Maximum number of hours you can carry over from year to year	400 Hours	
<b>Maximum reset:</b> Starting January 1, 2011 & every January 1st thereafter	PTO account balance greater than 400 hours — your account will reset to 400 hours	
Annual PTO Cash Out	Up to 120 hours (paid at the hourly rate at time of cash out); provided 40 hours remain in the PTO account. This benefit must be elected during open enrollment with two annual cash out options in May and in November of the following year. The total combined amount of hours for both cash outs is 120 hours. The minimum amount of hours that can be cashed out is 10 hours.	
Types of Leaves Administered by the Hartford	Available for all NCHS Employees	
Family Medical Leave (FMLA)	A maximum of 12 weeks (unpaid) leave is available for all Employees employed for at least 12 months with 1,250 hours in the 12 month period prior to the date of the leave, in accordance with the FMLA guidelines.	
Domestic Violence Leave	30 days (unpaid) maximum to obtain legal assistance, counseling or supportive services, to take care of other arrangements because of domestic or repeated violence	
Military Leave	Up to ten (10) paid working days each calendar year for military leave	
Personal Leave	10 days (unpaid) maximum for personal reasons; subject to department director approval	

This is only a summary of your benefits. Please read the full description of the coverage in the company policies and procedures, all of which will prevail should there be any conflict with this information. **Benefits Eligible:** Full-time & part-time employees (working at least 20 hours a week)- First of the month following date of hire

Questions: TM&E Benefits | 786-624-2461 option 9 Hartford Benefits Group | 1-888-877-9199

## **Retirement Savings Plan:**

Everyone has plans for the future - travel, new hobbies, spending time with family and friends. Whatever your plans for retirement are, retirement is a serious responsibility that cannot begin too soon. Most agree that no matter when you stop working, you'll need substantial assets to maintain your current lifestyle and it's going to take money to make that happen. The time to start funding your future dreams is now and a great way to do that is to enroll in your Nicklaus Children's Health System Retirement Plan and start saving today!

Our NCHS retirement plan, administered through Prudential Financial, consists of a Pension Plan and a 403 (b) Plan, that includes a matching and an elective deferral. Other benefits include:

- Qualifying for an employer contribution and an employer match
- Reducing your current taxable income by making your own contributions on a pre-tax basis
- Growing your account over time by contributing regularly on a tax-deferred basis
- Investing in a wide variety of investment options offered through the Retirement Plan
- And much more!

#### Plan Highlights Eligibility & Vesting for both NCHS Pension & NCHS Match

- Eligibility: 1 year of service (12 months) with 1,000 worked hours.
- Vesting: Determined by your years of ("vesting service"). Participants are 100% vested upon completion of 3 or more years in which you complete 1,000 or more worked hours per calendar year.

#### **Pension Plan**

- NCHS will contribute 3% of your annual base salary up to the IRS regulations.
- You will receive the employer pension contribution once a year during the first quarter of the following year after meeting eligibility.

#### 403(b) Employer Matching

- NCHS will match contribution for every dollar you contribute up to 3% (IRS limits apply).
- You will receive the employer match contribution biweekly after meeting eligibility.

Auto Enroll, Auto Escalation 403 (b) Elective Deferrals & Contribution Accelerator

- All new hires will be auto-enrolled at 3%.
- At the beginning of each plan year, employees currently not participating in the plan will be auto enrolled at 3% and employees contributing less than 3%, will be automatically increased to 3%.
- Every April of each plan year, all plan participants will be enrolled in the Contribution Accelerator where the elective deferral will be increased by 1% annually, up to a maximum of 6%.
- Employees can opt out at any time

Accessing or Modifying your account

Online at www.retirement.prudential.com or you may call 1-800-458-6333.

#### Access to Funds

- Loans Provisions: You may borrow up to 50% of your vested balance with a minimum loan of \$1,000 and a maximum loan of \$50,000.
- Pension Plan Distribution Options: The employee must be Fully Vested to be eligible for a distribution of the account balance upon termination.
- 403 (b) Employer Match Distribution Options: The employee must be Fully Vested to be eligible for a distribution of the account balance upon termination.
- 403 (b) Elective Deferrals: Upon termination from employment the employee can-
- 1. Leave funds in the account,
- 2. Take a full or partial distribution,
- 3. Roll over funds, or
- 4. Purchase an Annuity

Three year vesting schedule is effective January 1st, 2007, and applies only to contributions made on or after that date. Earlier company contributions will remain under the five-year vesting schedule. This is only a summary of your benefits. Complete details are set forth in the individual plan documents and summary plan descriptions. If there are any discrepancies between this guide and the official plan documents, the plan documents will govern.

Important Notice: After the employee meets the initial eligibility they don't have to work 1,000 hours each year in order to get the match but they have to be vested to take it with them. Employees can opt out of automatic enrollment contributions generally 30-days before the contributions begin.

## Total Employee Wellness at NCHS:



**Employee Wellness Center** | The Employee Wellness Center offers employees the opportunity to improve their health and wellness by providing them with daily access to cardiovascular and strength training equipment for a minimal payment of \$6 per paycheck. The Wellness Center also provides a weight management program, affordable personal training packages and group exercise classes including boot camp and Zumba. Outpatient locations available. Phone: 786-624-2431

**Convenient Care Clinic** | Your Employee Health Clinic offers you an array of quality services to meet your health and wellness needs for a minimal copay. With easy access to certified nurse practitioners, the clinic offers less wait time than a regular doctor's office and the convenience of its onsite location, including Telehealth. Some of the services that will be provided include: minor injuries, minor illnesses, fever, cold, flu, sinus infections, skin conditions and much more. Phone: 786-624-2636 **NEW: Corporate HQ Wellness Center location and Health Clinic will be opening soon.** 

**In-house Dietitian** | Our in-house dietitian (located next to Wellness Center) provides personal nutritional plans and counseling. First visit is complementary to those employees who receive personal health results that include elevated levels of Hemoglobin AIC.

**UnitedHealthcare Nurse Liaison** | Our on-site nurse liaison, Jessenia Nunez, is available to discuss any lifestyle behaviors you want to address including prevention education and disease management support for conditions like diabetes and high blood pressure. Jessenia can be reached at 305-527-5440 or jessenia\_nunez@uhc.com.

**Weekly Farmers' Market** | NCHS' weekly Farmers' Market takes place at the main hospital every Wednesday.

**Interactive Health Personal Coach** | Your personal coach can guide you in making lasting lifestyle changes. Telephonic courses are available to all participants. Topics covered include: tobacco-free for life, diabetes prevention and control, weight loss, managing cholesterol levels and high blood pressure, better nutrition, personalized fitness and more. You can contact a health coach at 800-840-6100.

**Smoking Cessation Program** | The program consists of on-site employee support groups that cover a variety of topics including coping with withdrawal symptoms, managing addiction and preventing relapse. It is FREE to participants with free Nicotine replacement patches, gum, and lozenges and will cover all forms of tobacco (contact the Employee Health Office at ext. 2636).

# **Employee Wellness**

### **On-site Wellness Center**

- Membership available to employees, their spouses/dependents over the age of 16, volunteers, contractors, and medical education students
- Comprehensive cardiovascular, strength, and functional equipment
- Showers with towel service
- Free body composition analysis
- Free midday group exercise class

### **Off-site locations**

- Mini centers at Palmetto Bay, Miami Lakes, and Doral
- New facility to open at Corporate

#### **Employee Wellness Services**

- Lose to Win Program
   Boot Camp
- Personal Training
- Yoga
- Registered Dietitian

#### **Other Programming**





## Healthy Lifestyles Incentive Program:

All benefits-eligible employees and their NCHS insured spouses are invited every September prior to Open Enrollment to participate in the Healthy Lifestyles Incentive Program. This program focuses on giving you the opportunity to take control of your own health and wellness by providing you with health evaluations that create personal health goals.

Benefits-eligible employees and NCHS insured spouses who participate in the program will earn an annual health insurance premium reduction. The program is completely confidential and is fully administered by interactive Health. No one at NCHS has access to your personal health information. We carefully chose Interactive Health because of their reputation (87% of clients successfully achieve their health goals) and their endorsement from the American Hospital Association.

The program begins with an initial health evaluation where a trained Interactive Health phlebotomist performs a blood test (you'll need to fast for 10-12 hours) which will take approximately 15 minutes. Health evaluations will not only deliver a detailed report of all 38 health variables, they will also include a new, unique set of lab tests known as the exclusive TOP (Test Optimize Perform) test panel. TOP, developed by Nicklaus Children's Hospital very own Dr. Steven Melnick, identifies potential risks in nutritional areas as well as highlights common preventable health risks. Testing is done on-site at all NCHS locations or Lab Corp.

After the initial evaluation is complete, participants receive a detailed personal health report, both online and in the mail, that includes your health score and measurable goals. You then have one year to complete your goals. To help you achieve these goals, the program features access to personal health coaches, monthly health webinars, and a comprehensive website with great tools to track food, log exercise and build recipes; it even offers a way to develop meal and exercise plans. You also have access to the NCHS Employee Health Clinic and Wellness Center, and our in-house dietician. Other benefits offered through the program include:

- A free, preventive health evaluation;
- A comprehensive clinical blood assessment which tests for high blood pressure, high cholesterol, diabetes, liver and kidney disease, anemia and other diseases such as blood, bone and muscle;
- A personal health report with all results;
- Online access to results, medical records, medical resources, and online health consultations;
- Access to health coaching programs including weight loss, tobacco-free for life, diabetes, fitness and much more;
- Health related emails targeted to your specific condition(s), age and gender; and
- A reduction in insurance premium when your health goals are met.

#### **Reasonable Alternatives**

This wellness program is committed to helping you achieve your best health. Rewards for participating in the program are available to all employees. If you think you might be unable to meet a standard for a reward under this wellness program, you may qualify for an opportunity to earn the same reward by different means. Contact Interactive Health at (800) 840-6100, and they will work with you (and, if you wish, your doctor) to find a wellness program with the same reward that is right for you in light of your health status.



# Employee Assistance Program (EAP):

NCHS offers an Employee Assistance Program (EAP) through Magellan, which provides a confidential and easily accessible professional counseling service to our employees whose personal problems are affecting their ability to function effectively at work or home. You and your family are eligible for this free service. Your EAP program provides access to resources to help you learn about and locate a wide range of personal resources in our community and nationwide including:

- Work stress
- Family/parenting issues
- Coping with change
- Anger management
- Anxiety or depression
- Alcohol or drug dependencies
- Marital or relationship problems
- Grief or bereavement

# Work-Life Services:

Magellan Work-Life Services gives you access to specialists who can evaluate your needs and match you with service providers anywhere in the country. Work-Life specialists provide expert guidance, information and personalized referrals to service providers in many areas. Some topics include:

- Child Care & Parenting—child care & school options, summer care, special needs, managing work and family, parenting infants to teens.
- Adult Care & Aging—care options & living arrangements, senior services, respite care, grief & bereavement.
- Education—financial aid, scholarships, colleges, continuing education, tutoring, extracurricular activities.
- Daily Living—home improvement, pet care, consumer information, emergency preparedness.

Life can change in an instant—You can't always be there, but Magellan can. They are there all day, every day—even on holidays—via phone, web, mobile, or chat. *It's free and confidential*.

# Backup Care Connection:

When care arrangements break down, you can keep working. Magellan can help you with care arrangements anywhere, at any time, including:

- Access to credentialed providers for a \$10 co-pay
- Care for children and adults (including mildly ill)
- Self-care for when you are ill or recovering from illness or surgery
- Support for planned and emergency care needs
- Over 2,100 brand-name child care centers, most with National Association for the Education of Young Children (NAEYC) accreditation
- More than 900 in-home care agencies representing thousands of caregivers
- Reimbursement if you prefer to use other licensed providers, friends or family to provide care
- 24/7 access via telephone and web

# Florida Pre-Paid College:

We are excited to be able to offer you payroll deductions for the Florida Prepaid College Plan. The Florida Prepaid College Plan covers the registration fees (the tuition, financial aid, building, Capital Improvement Trust Fund fees), local fees (activity and service, athletic and health fees) and tuition differential fee at Florida's state universities and the registration fees (the tuition, Capital Improvement and financial aid fees) and local fees (the student activity and service and technology fees) at Florida Colleges (formerly known as community colleges). There are four Florida Prepaid College Plan options available.

For more information, please contact TM&E Benefits at 786-624-2461 option 9, or you can contact Florida Pre-Paid directly at 1-800-552-GRAD.

## **NCHS Career Paths:**

NCHS cares about your career advancement and wants to see you achieve your personal career goals. Because of this, we created the Career Paths Program which offers employees tools such as career exploration, guidance, self-assessments, developmental recommendations and various interview tools. Employees may also be provided additional learning resources like access to our leadership resource library, abstract subscriptions and informational interviews. For NCHS leaders, Career Paths can provide you with an opportunity to develop your career trajectories, assess yourself on the NCHS competencies, obtain developmental recommendations and take advantage of many developmental programs. Contact Jamiel Rivero, Career Representative at extension 4217 or Jamiel.Rivero@mch.com.

# **Tuition Reimbursement:**

The Tuition Reimbursement program is designed specifically for health care professional degree programs, leadership programs, technical courses and certificate training programs which improve the knowledge and skills of employees and promote their professional and career development. Educational assistance is available to all NCHS employees who have been employed at least **twelve** months, who are in a benefit status and not on progressive discipline.

#### **Reimbursement:**

- 1. Full-time status employees (0.8) 64 hours (1.0) 80 hours are eligible to receive: (per calendar year
- $\Rightarrow$  \$5250 Graduate and Ph.D. Degree
- ⇒ \$4000 Undergraduate Degree
- ⇒ \$2000 Associate's Degree and Certifications
- 2. Book Reimbursement Cap for full time employees: (per calendar year)
- $\Rightarrow$  Ph.D. & Graduate Degree \$500
- $\Rightarrow$  Undergraduate Degree \$300
- $\Rightarrow$  Associate Degree/Certification \$200

#### Part-time employees will receive one half of the full-time benefit limits.

An application processing fee will be deducted from allotted annual tuition monies for each application submitted. The tuition eligibility requirements, reimbursement form and procedure are available on the Learning and Development page of the NCHSnet (NCHS Employee Portal).

## **Community Education:**

The Learning and Development Services Department offers classes to the community and our employees. Most courses are free to our employees. Some of the classes offered include:

- Breast Feeding Class
- CPR Classes
- Internet Safety
- Safe Sitter
- Talking to Your Children About Sexuality
- Skin Cancer Screening
- Raising a Bilingual Child
- Infant Massage
- Picky Eater vs. Problem Feeder
- Big Brothers Big Sisters Mentor Program

For more information regarding Tuition Assistance or Community Education, please contact the Learning and Development Services Department at extension 8282.



# **Adoption Assistance:**

NCHS offers financial assistance for the legal adoption of a child up to the age of 18 as follows: \$5,000 limit/ \$7,000 limit with special needs up to a total of two adoptions per lifetime. You can qualify for this benefit after one year of continuous employment in a benefits eligible position. You must stay with the organization for an additional year after receiving the adoption benefit. Your request, along with proof, for adoption assistance must be submitted within 90 calendar days after the court's final approval. For more information, please contact TM&E Benefits at 786-624-2461 option 9.



# **Group Legal Insurance Plan:**

The Preferred Legal Plan ("PLP") offers comprehensive legal assistance, advice and discounted representation on all types of legal services for an affordable premium of \$4.60 per payroll. Coverage includes a spouse, dependents and anyone living in the household. Plan services are unlimited and available 24/7. Members have access to a statewide network . Employment-related subjects are not covered.

### Types of covered legal issues include:

<ul> <li>divorce</li> <li>child support, custody and visitation</li> <li>traffic tickets/suspended licenses</li> <li>credit repair</li> <li>personal injury</li> <li>domestic violence</li> </ul>	<ul> <li>loan modifications/foreclosures</li> <li>bankruptcy</li> <li>wills/powers of attorney/living wills</li> <li>identity theft services</li> <li>buying or selling a home</li> <li>criminal defense</li> <li>car accidents</li> </ul>	<ul> <li>Probate</li> <li>immigration</li> <li>IRS issues</li> <li>garnishments</li> <li>landlord-tenant disputes</li> <li>civil litigation/small claims</li> <li>and many more</li> </ul>
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### Member benefits include:

- FREE unlimited legal advice via phone consultation
- FREE review of legal documents (real estate contracts, lease agreements, court papers, etc.)
- FREE letters and phone calls on your behalf to third parties to resolve miscellaneous disputes
- FREE Identity Theft protection and restoration
- FREE loan modification assistance and foreclosure defense
- FREE Wills for Member and spouse (powers of attorney and living wills also available)
- FREE legal forms available through Form Library (i.e. bills of sale, court forms, promissory notes, contracts, affidavits, etc.)
- Up to 70 percent reduced legal fees for panel attorney representation
- All pre-existing issues are covered.
- Unlimited, immediate use of membership.

# ID Watchdog:

NCHS is proud to offer you, ID Watchdog - a program to safeguard your identity. Some of their services include: credit monitoring, credit report & score, monthly credit score tracker, payday loan monitoring, enhanced non-credit loan monitoring, high-risk transaction monitoring, national provider ID alerts, rapid credit alerts, credit freeze, public records & NCOA monitoring, cyber monitoring and much, much more. For more information visit www.idwatchdog.com or call (800) 373-1226.

## PerkSpot:

NCHS is happy to offer you PerkSpot, a one-stop shop for exclusive discounts at many of your favorite national and local merchants! PerkSpot is completely free, and optimized for use on any device: desk-tops, tablets, and phones. Enjoy access to thousands of discounts in dozens of categories, updated daily. To register, create an account at perkspot.com. You can even discover discounts in your neighborhood with PerkSpot's streamlined Local Map.

Don't see the retailer or product you want? You can always request a merchant through your PerkSpot account, and our negotiating experts will work to get it for you. Be sure to opt into their weekly emails to keep an eye out for new featured discounts!

# Dade County Federal Credit Union:

NCHS offers you a FREE\* credit union membership to assist you with your financial needs. Whether it is daily money management, borrowing, or investment, you have the assurance of receiving the services from a reliable financial institution. Since 1939, Dade County Federal has been dedicated to providing its members solutions to their financial needs.

Dade County Federal Credit Union offers you:

- Savings and Checking Accounts
- FREE online bill pay and mobile banking
- Low auto loans and leasing programs
- 2% reduction on all Personal Loans (restrictions apply)
- Residential and Relocation Loans and Refinancing
- Commercial Lending for Physician Practices
- Investment & Financial Planning and much more!

Visit the branch located in the Main Campus, or contact the Branch Manager at (786) 845-3151.

## Veterinary Discount Plan - Pet Assure:

NCHS offers a Veterinary Discount Program that can save you money on all your pet care needs. Through this program, you can save on veterinary services, pet supplies, and pet services. The Full Membership Includes:

- ⇒ Veterinary Care: Savings of 25% at thousands of participating veterinary practices. All in-house medical services are discounted, including office visits, surgical procedures, x-rays, examinations, injections and dental care. There are no exclusions – all pets are eligible regardless of type, breed, age, health condition or pre-existing conditions.
- ⇒ Pet Care: Discounts of 5-35% at thousands of participating merchants and providers. You'll enjoy these significant savings on a host of everyday basics, such as: boarding, food and treats, grooming, medications and pet sitting.
- ⇒ 24/7 Pet Recovery Service: Pet Assure members receive a special Pet Assure Locator Service ID tag for their pets. The PALS system has helped reunite thousands of lost pets with their families.



For more information, please contact Pet Assure at (888) 789-7387.

## **Colonial Life Voluntary Products:**

Colonial Life products will be available to all Nicklaus Children's Health System employees during this year's annual enrollment. A Colonial Life benefits counselor will explain these voluntary products in greater detail during your one-to-one personal benefits consultation.

These benefits can enhance your core benefits portfolio and can be customized to fit your individual needs. Also:

- Coverages are available for you and your family, with most products.
- You will enjoy the convenience of premium payment through payroll deduction.
- You will have the ability to take most coverages with you if you change jobs or retire.

During this year's enrollment you will have the chance to apply for the following products:

Accident Insurance helps offset the unexpected medical expenses, such as emergency room fees, deductibles and co-payments that can result from a covered accident.

**Cancer Insurance** helps offset the out-of-pocket medical and indirect non-medical expenses related to cancer diagnosis and treatment.

**Critical Illness Insurance** pays a lump sum benefit upon diagnosis of a covered critical illness such as heart attack (myocardial infarction), end stage renal failure, coronary artery bypass surgery, stroke or major organ transplant.

**Hospital Confinement Indemnity Insurance** is designed to help you with the rising costs associated with a covered hospital confinement or covered outpatient surgery.

**Universal Life Insurance** provides death benefit coverage that you can increase or decrease as your needs change. The policy builds cash value on a tax-deferred basis at current interest rates and premium payments are flexible.

See your Colonial Life benefits counselor to find out about the advantages of Colonial Life and how they can help you prepare for the unexpected. For more information please contact: Pamela B. Avery at 954.205.0876

Policies have exclusions and limitations that may affect benefits payable. Benefits vary by state and may not be available in all states. See the outline of coverage for complete details.

Colonial Life products are underwritten by Colonial Life & Accident Insurance Company, for which Colonial Life is the marketing brand.



# **Compliance Corner:**

### Important Notice from Nicklaus Children's Health System About Your Prescription Drug Coverage and Medicare

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with Nicklaus Children's Health System and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

# There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

- Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can
  get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan
  (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least
  a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher
  monthly premium.
- 2. Nicklaus Children's Health System has determined that the prescription drug coverage offered by the UnitedHealthcare Plan is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

#### When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th to December 7th. However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

#### What Happens To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current Nicklaus Children's Health System coverage will not be affected. The following are the plan provisions under the Nicklaus Children's Health System prescription drug program:

Prescription Drugs	In-Network
Retail	
Tier 1	\$ <b>10</b>
Tier 2	\$ <b>30</b>
Tier 3	\$ <b>50</b>
Mail Order	
Tier 1	\$ <b>25</b>
Tier 2	\$ <b>75</b>
Tier 3	\$ <b>125</b>
Specialty Drugs through Specialty Pharmacy	
Tier 1	\$ <b>7</b>
Tier 2	\$ <b>20</b>
Tier 3	\$ <b>34</b>

## **Compliance Corner:**

If you do decide to join a Medicare drug plan and drop your current Nicklaus Children's Health System coverage, be aware that you and your dependents will not be able to get this coverage back until Nicklaus Children's Health System's annual enrollment, which has an effective date of January 1<sup>st</sup>.

#### When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with Nicklaus Children's Health System and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

#### For More Information About This Notice Or Your Current Prescription Drug Coverage...

Contact the person listed below for further information. **NOTE:** You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through Nicklaus Children's Health System changes. You also may request a copy of this notice at any time.

#### For More Information About Your Options Under Medicare Prescription Drug Coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

#### For more information about Medicare prescription drug coverage: Visit www.medicare.gov

Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date: October 2, 2017 Name of Entity/Sender: Nicklaus Children's Health System Contact--Position/Office: Talent Management & Effectiveness Benefits Department Address: 3100 S.W. 62<sup>nd</sup> Ave, Miami, Fl. 33155 Phone Number: 786-624-2461

## **Compliance Corner:**

#### Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or **www.insurekidsnow.gov** to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call 1-866-444-EBSA (3272).

You may be eligible for assistance paying your employer health plan premiums. The following is the contact for Florida and is current as of August 10, 2017. Contact your State for more information on eligibility.

#### FLORIDA - Medicaid

Website: <u>https://www.flmedicaidtplrecovery.com/</u> | Phone: 1-877-357-3268

To see if any other states have added a premium assistance program since August 10, 2017, or for more information on special enrollment rights, contact either:

U.S. Department of Labor	U.S. De
Employee Benefits Security Administration	Cen
www.dol.gov/ebsa	
1-866-444-EBSA (3272)	1-877

U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services <u>www.cms.hhs.gov</u> 1-877-267-2323, Menu Option 4, Ext. 61565

## **Additional Compliance Notices:**

Nicklaus Children's Health System complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-786-624-3505.

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-786-624-3505.

Additional documents regarding the new health reform and other related resouces, such as Notice of Health Plan's Privacy Practices (HIPAA), can be found in the Benefits Page of the NCHSnet under Benefits Resources. For more information, please contact TM&E Benefits at 786-624-2461 option 9.

### Meet Your Total Rewards & Wellness Teams

Leadership Team:



Michael Kushner SVP & Chief Talent Officer

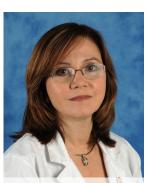
#### **Benefits/FMLA Team:**



Janet Lara-Vital Total Rewards & Wellness Director



Jacqueline S. Vaquer Benefits Manager



Lucy Castellanos Employee Health Office Manager



Alice Dobao Benefits Specialist

#### Wellness Team:



Sabry Reyeros Wellness Supervisor



Margarita Conzalez

Benefits Service

Representative

Kathleen Stoner Exercise Physiologist



**Michele De Justo** 

LOA/WC Coordinator

Joseph Locke Fitness Instructor

### **Employee Health Team:**



Ashley Pages



Demi Fuentes ARNP



Amanda Facenda Medical Assistant



Yunieska Velazco Medical Assistant



Erick Lara Medical Assistant

### **Contact Information**

Vendor	Toll-Free Number	Website
Medical HMO/UnitedHealthcare	(866) 633-2446	www.myuhc.com
Medical POS/UnitedHealthcare	(866) 633-2482	www.myuhc.com
Delta Care USA/Delta Dental	(800) 422-4234	www.dentalins.com
Vision/EyeMed	(800) 521-2651	www.eyemed.com
FSA/WageWorks	(866) 939-3633	www.wageworks.com
Life & AD&D/The Hartford	(877) 924-3967	www.thehartford.com
Disability/The Hartford	(888) 563-1124	www.thehartfordatwork.com
NCHS Retirement Plan/Prudential	(888) 877-9199	www.prudential.com/online/retirement
Group Legal/Preferred Legal	(888) 577-3476	www.preferredlegal.com
Veterinary Discount Plan/Pet Assure	(888) 789-7387	www.petassure.com
EAP, Work-Life, Backup Care/Magellan	(800) 327-5496 (800) 523-5668	www.magellanassist.com
ID Watchdog	(866) 513-1518	www.idwatchdog.com
PerkSpot	(866) 606-6057	www.perkspot.com
Dade County Federal Credit Union	(786) 845-3151	www.dcfcu.org
Voluntary Benefits/Colonial Life	(800) 325-4368	www.coloniallife.com
Benefits Concepts (COBRA)	(800) 969-2009	mybenefits.benefitconcepts.com

NCHS Department	Phone Number
Employee Benefits	(786) 624-2461
Employee Health Clinic	(786) 624-2636
Employee Wellness Center	(786) 624-2431
Learning & Development Services	(305) 663-8535
Talent Management & Effectiveness	(305) 662-8295



**Outpatient Centers** 



## We're Here When You Need Us

