

2022-2023
PLAN YEAR



Employee Central

You have 31 days to complete your benefit enrollment.



Med Center Health

Eligibility

- Full-time or part-time employees who are scheduled to work a minimum of 15 hours per week
- Effective Date of Coverage
 - Coverage begins the first of the month following hire. If hired on the 1st of the month, benefits begin day one.
 - *Example: Hire date is May 5th, coverage would begin June 1st. If hired on June 1st, benefits begin that day.*
- Dependents:
 - Legal Spouse;
 - Your Natural child, stepchild, legally adopted child, child placed for adoption or child by appointed legal guardianship who is under 26 years of age;
 - Your Natural child, stepchild, legally adopted child, child placed for adoption or child by appointed legal guardianship who is over 26 years of age and is physically or mentally disabled.

Dependent Verification

- The Benefit Verification Center will request documents to verify each dependent enrolled in the Medical Plan
- Example of documentation include:
 - Government issued marriage certificate
 - Tax returns from prior year
 - Government issue birth certificate
 - Legal adoption papers
- For spouse verification – you will need to provide two separate documents
- For child verification – you will need to provide only one document

You will have 30 days from completing your enrollment to submit Dependent Verification documents through Employee Central.

Failure to provide the requested documentation will result in your dependent(s) not being added to the medical plan.

Ask Emma

- Emma is your virtual benefit counselor in Employee Central
- Emma will ask you a few questions and your benefit needs
- Emma will offer a recommendation on your benefit plans
- Emma is incorporated within your enrollment process and will help you enroll in your medical plan



ask EMMA™

Spousal Eligibility

- Spouses who have access to their employers' group medical plan are not eligible for coverage in the Med Center Health Medical Plan
- To be eligible, you spouse must be:
 - Not employed;
 - Retired and/or covered by Medicare;
 - Self-employed;
 - Employed by Med Center Health in a FT or PT position; or
 - Employed but does not have access to their employer's group medical plan

Life Events

- Our Insurance plan year begins on April 1 and ends on March 31
- Outside of your initial enrollment period, you can only make changes to your benefits at Open Enrollment or when you experience a qualifying life event. Qualifying life events include:
 - Change in legal marital status;
 - Change in number of dependents, such as: birth, adoption, legal guardianship, etc;
 - Gain or loss of benefit coverage; or
 - Change in work schedule

Medical Plan

- MCH offers three medical plan options for eligible employees
 - Gold
 - Silver
 - Bronze
- Higher levels of coverage our offered at MCH Hospitals
 - Med Center of Bowling Green
 - Med Center of Scottsville
 - Med Center of Franklin
 - Med Center of Caverna
 - Med Center of Albany
 - Commonwealth Regional Specialty Hospital
- Preferred Provider Network
 - CC Select Network – Employee Central or 270-745-1517
 - MCH Partners Network – Employee Central or 270-796-3580
 - Silver Network – Employee Central or 1-270-796-3580

Silver Plan – Silver Network

- The Silver Plan offer a balance of lower pay period contributions with a more defined network.
- The Silver Network includes all facilities and providers employed at:
 - Med Center Health
 - Vanderbilt University Medical Center
 - UK Medical Center
 - Norton Healthcare
 - U of L Healthcare
 - MCH Partners Network
- The Silver Network also includes CC Select Providers for the following specialty areas; podiatry, neurology, urology, endocrinology, rheumatology, cardiac pediatrics, adolescent psychiatry, allergy/immunology and ophthalmology.

** There is no out-of-network coverage except if you experience an emergency, have a dependent who lives outside of the Silver Network Service area or when services are not available within the Silver Network*

Gold Plan

- Has the highest per pay period contributions.
- Uses the MCH Partners Network and CC Select Network.
- Offers network flexibility
- Features out of network benefits.

Bronze Plan

- Offers a great value with pay period contributions
- Uses the MCH Partners Network and CC Select Network.
- Features out of network benefits.
- Potential for higher out-of-pocket cost based on how you use the plan.

Primary Care Physician Services

- Employee and Dependents who are enrolled in Med Center health's Medical Plan will have no out of pocket expenses for Primary Care Providers who are in the Med Center Health Partners Network for the below services.
 - Office Visits, Telehealth Visits, Basic in-office labs, Basic In-office Radiology and Disease Management Tools such as blood pressure cuffs or glucose monitoring machines.
 - Primary Care Providers include Primary Care, Internal Medicine, OB/GYN & Pediatrics. *Maternity Services are not included*
- PRN employees and employees not enrolled in Med Center Health's Medical Plan can utilize primary care services at Medical Center Primary Care for free.
 - There is no co-pay and basic lab work is provided at no cost.
 - To schedule an appointment, please call 270-901-0629

Medical Plan Opt-Out

- Regular full-time employees can waive medical coverage and receive the Opt-Out contribution
- Med Center Health will contribute \$19.23 per pay period (*up to \$500 per plan year*) into a Health Care FSA or Dependent Care FSA
- The contribution is not taxable
- You must be enrolled in another medical plan. Individual medical plans do not qualify

Employee Premiums

	Gold Plan		Silver Plan		Bronze Plan	
	Full-time	Part-Time	Full-time	Part-Time	Full-time	Part-Time
Employee Only	\$70.17	\$118.54	\$25.78	\$72.07	\$20.06	\$34.07
Employee + Spouse	\$188.52	\$272.29	\$104.68	\$157.01	\$84.33	\$126.52
Employee + Child(ren)	\$153.17	\$224.18	\$83.75	\$125.62	\$65.24	\$97.89
Family	\$292.56	\$428.34	\$159.96	\$239.93	\$124.59	\$186.90

Tobacco Surcharge

- \$27 per pay period, per person for you and your spouse if you have used tobacco products within the last 6 months.

Tobacco Cessation Program

- You can avoid the tobacco surcharge by completing the cessation program
- Upon completion of the program, your tobacco surcharge will be reimbursed
- You must enroll within 4 months of your benefit start date
- To get started, call Med Center Health & Wellness at 270-745-1010.

Prescription Plan

CVS Caremark

- Prescription drug coverage is included with MCH Medical Plan
- Riverside Pharmacy offers a greater discount for prescriptions and over the counter products because they are a part of the MCH system.
- ***Medication Therapy Management*** at Riverside Pharmacy
 - When you work with a Pharmacist at Riverside for the treatment of Asthma, Allergies, Diabetes, Hypertension, High Cholesterol, or Congestive Heart Failure, you can receive Generic medications at no cost or discounted Brand Name drugs.
 - Call Riverside to schedule an appointment with the Pharmacist.

Flexible Spending Accounts (FSA)

HealthEquity

Health Care FSA

- Deductibles, co-insurance and co-pays
- Dental, Vision and Prescription expenses not covered by insurance
- IRS Limit - \$2,850
- Roll over \$550 year to year
- Use it or lose it! Must use funds by March 31

Dependent Care FSA

- Daycare expenses for children
- Preschool and before/after school care
- Daycare expenses for adults
- IRS Limit - \$5,000 (married filing jointly); \$2,500 (married filing separately)
- Claim forms are in the Library on Employee Central or you can file electronically

Dental Plan Overview

Paramount (HRI)

	Standard Plan			Enhanced Plan		
Deductible	\$0			\$0		
Annual Max (per person)	\$1,500			\$2,000		
Ortho Lifetime max (per person)	\$1,200			\$2,000		
Percentage of Coverage For Services	Preventative 100%	Basic 80%	Major 50%	Preventative 100%	Basic 80%	Major 80%
Rates	Full Time		Part Time	Full Time		Part Time
Employee Only	\$2.31		\$5.34	\$6.09		\$9.12
Employee + Spouse	\$9.89		\$12.91	\$18.05		\$21.07
Employee + Child(ren)	\$9.89		\$12.91	\$19.22		\$22.24
Family	\$9.89		\$12.91	\$23.52		\$26.54

Vision Plan Overview

Humana

- Frames are covered every 24 months
- Frame allowance - \$175 retail; 20% off of retail over \$175
- Lenses and Contact Lenses are covered every 12 months
- Contact Lenses allowance \$150 annually
- Contact Lens fittings: co-pay of \$25 (standard) or \$50 (Custom)

Premium Per Pay Period	
Employee Only	\$3.90
Employee + Spouse	\$6.83
Employee + Child(ren)	\$7.18
Family	\$10.14

Employee Assistance Program (EAP) BHS

- Immediately available to you and your dependents upon hire
- Master's level clinician for in-the-moment support and guidance when you need someone to talk to
- Short-term counseling support, up to six free sessions per concern, per year
- Consult with a legal or financial expert
- Childcare or eldercare referrals
- Browse lifestyle management resources
- Participate in a training or the monthly webinar series

Disability Benefits

- Short Term Disability - *Matrix*
 - Employer Paid – Available for PT & FT employees
 - Provides 60% of Base Salary for up to 26 weeks
 - First 7 days of Leave of Absence (LOA) is used by PTO
 - Notify Supervisor of LOA, then contact Matrix to apply for Leave.
 - Please contact Employee Health once you have been cleared to return to work.

- Long-Term Disability – *Reliance Standard*
 - Available for purchase
 - Provides 60% of Base Salary
 - Designed to pick up after Short-Term disability has ended
 - Benefits began after 180 (from disability date)

Life Insurances

- Basic Life & Accidental Death & Dismemberment (AD&D) - *Reliance Standard*
 - Employer Provided
 - Available to Fulltime status only
 - Covered at 1.5x your Base Annual Salary
- Voluntary Life Insurance (Term Life) – *Reliance Standard*
 - Employee Life – up to \$500,000; first \$250,000 is guarantee issue
 - Spouse Life – up to \$250,000; first \$50,000 is guarantee issue
 - Child Life - \$10,000
- Whole Life Insurance – *Voya Financial*
 - Fixed premium, never increases
 - Builds cash value
 - Buy-up LTC option
 - Up to \$500,000 (non-tobacco) or \$250,000 (tobacco users) – first \$100,000 guarantee issue

Voluntary Benefits

Guardian

Cancer Plan

- Value and Advantage Plan
- Pays a cancer screening benefit per year for a covered cancer test
 - Value Plan - \$25
 - Advantage Plan - \$100

Critical Illness

- \$15,000 & \$30,000 Plans
- Spouse & Children receive 50% of benefit amount
- Benefits are paid directly to you

Accident Insurance

- Provides cash benefit in the event you or your covered dependent(s) have an accident
- Use the money to pay for medical bills, living expenses or other expenses
- Benefits are paid directly to you

Hospital Indemnity

- Provides cash benefit if you or covered dependent(s) are hospitalized
- Use the money to pay for medical bills, living expenses or other expenses
- Benefits are paid directly to you

Voluntary Benefits – cont'd

Identity Theft Protection – *ID Shield*

- Credit monitoring – all 3 bureaus, dark web monitoring, court & public record monitoring
- Provides a \$1,000,000 (employee only) or \$2,000,000 (family coverage) policy
- Provides full-service restoration services to help restore your identity to pre-theft status

	Premium Per Pay Period
Employee Only	\$3.44
Employee + Spouse	\$6.48
Employee + Child(ren)	\$6.48
Family	\$6.48

Pet Insurance - *ASPCA*

- Offers flexible coverage options that may reimburse you for accidents, illnesses and preventive care.
- Enroll at www.aspcapetinsurance.com/MCH and use priority code: EB22MCH

Paid Time Off (PTO)

- MCH provides a PTO program that can be used for *ALL* absences such as holidays, vacation time, sick time or other personal time off.
- Eligibility
 - *Eligible to full time and part-time employees who work a minimum of 15 hours per week*
- You start to accrue immediately
- Your bank is available for use the pay period following 90 days of cumulative service

Years of Service	PTO hours earned per hour	Maximum Annual Accrual
0-4 years	.084625	176
5-9 years	.103875	216
10+ years	.123125	256

Holiday Schedule

- Med Center Health observes the following holidays
 - New Year's Day
 - Memorial Day
 - Independence Day
 - Labor Day
 - Thanksgiving Day
 - Christmas Day
- Holiday Pay
 - 1.5x your hourly wage
 - Pay is for hours worked 12am-12am on one of the observed holidays

Retirement Plans

T. Rowe Price

403(b)

- Available to **ALL** Employees
- 100% vested in your contributions
- IRS Limit \$20,500
- Catch-up contribution of \$6,500 (age 50 and older)
- Auto enrolled at 3% following 30 days of employment or transfer into a FT or PT position

Retirement Savings Plan (RSP)

- Available to Full-time and Part-time
- Vested after 3 years of service
- Receive 50% match of your 403(b) contribution, up to 6% of pay
- Service Base Contribution - 1% of salary
 - Employed on 12/31
 - Worked 1,000 hours Jan - Dec

Important Deadlines and How to Enroll

- You have 31 days from your hire date to complete your enrollment.
- You have 30 days from completing your enrollment to submit dependent verification documents through Employee Central.
- Visit www.mchealth.net/employeecentral to complete your enrollment in Employee Central.
- You can access Employee Central using any device with internet access.
 - You can access Employee Central on Thursday. For example, if your start date is on Monday, you will need to wait until Thursday morning to access Employee Central.
 - Your username is your Med Center Health Username
 - When you first login, your password is the last four digits of your Social Security Number.
 - Please note that your password for this site is not linked to the Med Center Health password you use when logging into a work computer.

Important Benefit Plan Information

Med Center Health's Health & Welfare plan documents, Retirement Plan documents, Summary Plan Descriptions (SPD), plan amendments, Summary of Material Modification (SMM), Summary Annual Reports (SAR), the Medical Plan Summary of Benefit Comparisons (SBC) and other mandatory benefit notifications are maintained and distributed electronically.

You can access these documents anytime by clicking on the Library tab at the top of your home page in Employee Central. You will be notified through your Med Center Health email (Outlook) of revisions to the Med Center Health benefit plans and when new documents have been posted.

These documents contain important information that explain the terms and conditions of your benefit plans, including eligibility, coverage amounts, and exclusions. If you would like a paper copy of these documents, please contact a member of your Benefits Team at 270-745-1540. There is no additional charge for paper copies.

Electronic Signature & Acknowledgement

Once you have completed this CBL, click “Take Test” to complete the acknowledgement requirements for the Med Center Health Benefit Plans.

By taking the test and selecting “I Agree” you acknowledge your acceptance of the terms and conditions of the Med Center Health Benefit Plans and that your acknowledgement will serve as your electronic signature for purposes of administering the Med Center Health Benefit Plans for you and your dependents.

If you, for some reason, do not think that you can select “I agree,” please contact a member of Human Resources at 270-745-1540. Your enrollment may be delayed or possibly denied until you agree to these terms and conditions.

Have Questions?

*Contact a member of your Benefits Team at
(270)745-1540 or BenefitHelpDesk@MCHHealth.net*

