



Benefits Orientation

Medical and Pharmacy Benefits: Part 2

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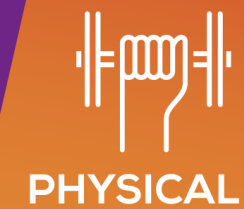
- Traditional Plan
- Health Savings Plan
- Essential Plan

Spoiler alert: Part 2 builds on concepts in Part 1



- Be sure to view Part 1 first: Introduction to Medical and Pharmacy Plans. It covers:
 - The two medical network tiers, and how choosing Trinity Health providers and facilities, when available, can save you money
 - The role of Clinically Integrated Network
 - Key terms you should know to help you compare plans

Trinity Health benefits: medical plans



Three medical plans* give colleagues options to meet your diverse needs



Traditional Plan



Health Savings Plan

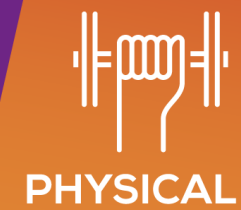


Essential Plan

- All three standard plans include two medical network tiers. Each tier offers choice in where to receive care.
- Using Tier 1 providers reduces out-of-pocket expenses and helps hold down rising health care costs for all of us

* Your ministry may offer other options. See your new hire information.

Costs for each medical plan vary



- You and Trinity Health share in the cost of your medical coverage
- Your costs include:
 - Payroll deductions for premiums
 - Deductibles
 - Copays
 - Coinsurance

Accounts to assist with medical costs



Account	Traditional Plan	Health Savings Plan	Essential Plan
Healthcare Flexible Spending Account (FSA)	✓		✓
Health Savings Account (HSA)		✓	
Health Reimbursement Account (HRA)*			✓

* The Health Reimbursement Account is available to colleagues who qualify for the Essential Assist Plan.

Traditional Plan



PHYSICAL



MENTAL

- Low out-of-pocket costs at time of service
- Highest colleague contribution per pay period
- Family deductible met by more than 1 covered family member
- May enroll in Health Care Flexible Spending Account (HCFSA), but not the Health Savings Account

Highlights	Tier 1	Tier 2
Annual Deductible (Individual/Family)	\$500 / \$1,000	\$1,000 / \$2,000
Out-of-pocket max	\$3,000 / \$6,000	\$5,250 / \$10,500
Inpatient copay	\$0	\$500
Outpatient surgical copay	\$50	\$100
Member Coinsurance (*after deductible)	10%*	20%*
Office Visit (PCP/Specialist)	\$20 / \$30	\$30 / \$40
Rx – retail (34 days) <ul style="list-style-type: none"> • Generic • Brand formulary • Brand non-formulary • Obesity medications 	\$10 20% (\$30 min, \$100 max) 40% (\$60 min, \$150 max) 40% (\$60 min, \$400 max)	
Rx – mail (90 days) <ul style="list-style-type: none"> • Generic • Brand formulary • Brand non-formulary • Obesity medications 	\$25 20% (\$75 min, \$250 max) 40% (\$150 min, \$375 max) 40% (\$150 min, \$1,000 max)	

Health Savings Plan



PHYSICAL



MENTAL

- Second lowest colleague contribution per pay period
- You pay full cost of medical and Rx expenses until you meet the annual deductible
- Once deductible is met, you pay coinsurance until you reach out-of-pocket maximum. Then plan pays 100% of eligible expenses.
- Individual deductible applies to those enrolled in colleague-only coverage. The full family deductible applies to all other coverage levels.
- Includes Health Savings Account (HSA) with Trinity Health contribution

Highlights	Tier 1	Tier 2
Annual Deductible (Individual/Family)	\$1,750 / \$3,500	\$2,750 / \$5,500
Employer contribution to Health Savings Account (HSA)	\$650 individual \$1,300 family	
Out-of-Pocket Max (OOPM)	\$3,100 / \$6,200	\$5,500 / \$11,000
Inpatient copay	None	\$500
Outpatient Surgical copay	None	\$100
Member Coinsurance, including office visit	10%*	20%*
Rx – retail (34 days)	20%* after deductible**	
Rx – mail (90 days)	20%* after deductible**	

* After deductible is met; coinsurance is applied until out-of-pocket maximum is met.

** Select, generic preventive drugs are covered at 100% and not subject to deductible.

Essential Plan



PHYSICAL



MENTAL

- Lowest colleague contribution per pay period
- Higher out-of-pocket costs at time of service compared to Traditional Plan
- Family deductible met by more than 1 family member
- May enroll in Health Care Flexible Spending Account, but not the Health Savings Account

Highlights	Tier 1	Tier 2
Annual Deductible (Individual/Family)	\$1,250 / \$2,500	\$2,750 / \$5,800
Out-of-pocket max	\$4,000 / \$8,000	\$6,000 / \$12,000
Inpatient copay	\$0	\$500
Outpatient Surgical copay	\$50	\$100
Member Coinsurance, including office visit (*after deductible)	20%*	30%*
Rx – retail (34 days)	<ul style="list-style-type: none"> • Generic \$10 • Brand formulary 25% (\$30 min, \$100 max) • Brand non-formulary 50% (\$60 min, \$170 max) • Obesity medications 50% (\$60 min, \$400 max) 	
Rx – mail (90 days)	<ul style="list-style-type: none"> • Generic \$25 • Brand formulary 25% (\$75 min, \$250 max) • Brand non-formulary 50% (\$150 min, \$425 max) • Obesity medications 50% (\$150 min, \$1,000 max) 	

Essential Assist Plan with Health Reimbursement Account (HRA)



- Essential Assist Plan for colleagues who meet certain income requirements
- You must apply to enroll in this plan. **Applications and documentation are due 30 days after initial eligibility for benefits.**
- If you apply and qualify, you will be enrolled in the Essential Assist Plan, and Trinity Health will make a contribution to a Health Reimbursement Account (HRA) at time of enrollment based on your coverage level

Trinity Health benefits: medical and Rx



PHYSICAL



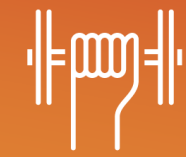
MENTAL

Highlights	Network Tier	Traditional Plan	Health Savings Plan	Essential Plan
Deductible (single/family)	1	\$500 / \$1,000	\$1,750 ² / \$3,500	\$1,250 ² / \$2,500
	2	\$1,000 / \$2,000	\$2,750 ² / \$5,500	\$2,750 ² / \$5,800
HSA/HRA Contribution		N/A	HSA Single: \$650 HSA Family: \$1,300	HRA Single: \$1,000 ¹ HRA Family: \$2,000 ¹
Coinsurance (patient pays)	1	10%	10%	20%
	2	20%	20%	30%
Out of Pocket Maximum including deductible, copay and Rx (single/family)	1	\$3,000 / \$6,000	\$3,100 / \$6,200	\$4,000 / \$8,000
	2	\$5,250 / \$10,500	\$5,500 / \$11,000	\$6,000 / \$12,000
Preventive Care	1, 2	0%, no deductible	0%, no deductible	0%, no deductible
Office Visits	1	PCP \$20 copay; Specialist \$30 copay	10% coinsurance	20% coinsurance
	2	PCP \$30 copay; Specialist \$40 copay	20% coinsurance	30% coinsurance

¹ HRA is only available to colleagues who participate in the Essential Assist plan.

² The individual deductible only applies to those enrolled in colleague-only coverage for the Health Savings Plan and Essential Assist Plans. For all other coverage levels, the full family deductible must be met even if only one person in the family is receiving care.

Trinity Health benefits: medical and Rx



PHYSICAL



MENTAL

Highlights	Network Tier	Traditional Plan	Health Savings Plan	Essential Plan
Emergency Room (copay waived if admitted)	Tier 1, Tier 2 and out-of-network	\$200 copay	10% coinsurance	\$200 copay
Inpatient Admission	1	\$0 copay; 10% after deductible	\$0 copay; 10% after deductible	\$0 copay; 20% after deductible
	2	\$500 copay; then deductible & 20% coinsurance	\$500 copay; then deductible & 20% coinsurance	\$500 copay; then deductible & 30% coinsurance
Retail Rx (34-day supply)	Generic	\$10 copay	20% coinsurance	\$10 copay
	Brand Formulary	20% coinsurance (min \$30 / max \$100)		25% coinsurance (min \$30 / max \$100)
	Brand Non-Formulary	40% coinsurance (min \$60 / max \$150)		50% coinsurance (min \$60 / max \$170)
	Obesity mediations	40% coinsurance (min \$60 / max \$400)		50% coinsurance (min \$60 / max \$400)
Home Delivery Rx (90-day supply)	Generic	\$25 copay	20% coinsurance	\$25 copay
	Brand Formulary	20% coinsurance (min \$75 / max \$250)		25% coinsurance (min \$75 / max \$250)
	Brand Non-Formulary	40% coinsurance (min \$150 / max \$375)		50% coinsurance (min \$150 / max \$425)
	Obesity mediations	40% coinsurance (min \$150 / max \$1,000)		50% coinsurance (min \$150 / max \$1,000)

Factors to consider when choosing a plan



- Who you will cover under your medical insurance
- What type of services they typically need
- Your family budget and preference for paying for insurance
 - More each paycheck (premium contribution)
 - More at the time of service (deductibles, copays)

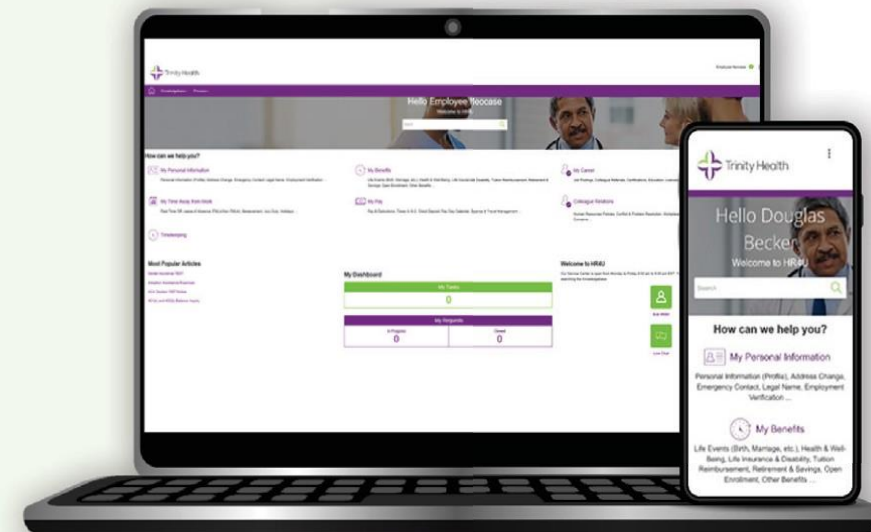
HR4U Colleague Portal

Get Answers to Your Benefits and HR-Related Questions, 24/7

Trinity Health colleagues have 24/7 access to benefits and other HR-related info through the **HR4U online portal**. When you log into HR4U you can chat in real time with an HR representative Monday through Friday, 7 a.m. – 7 p.m. ET. You can also submit a request for assistance and track the status of your inquiry.

To get started, click on the HR4U icon in your ZENworks or desktop applications window and enter your Trinity Health network credentials.

You can also access HR4U on your mobile device at:
<https://hr4u.trinity-health.org>



Check out all the episodes in the video series

Live Your Whole Life

- Medical and pharmacy
- Health Savings Account
- Essential Assist with Health Reimbursement Account
- Flexible spending accounts
- Dental and vision
- Life Insurance/AD&D
- Time Away from Work
- Voluntary benefits
- Retirement program
- Live Your Whole Life / Mental Well-being
- Other benefits
- Eligibility and enrollment



Important Information

The information provided in this summary is designed to assist you with understanding your options under Trinity Health's welfare benefit plans and programs. It is only an overview. Please refer to the summary plan descriptions and official plan documents for more details concerning these benefits. If there is any conflict, the official plan and program documents will govern. Trinity Health reserves the right to modify or terminate its benefit plans and programs at any time.

To view the summary plan descriptions and certificates of coverage, visit the HR4U colleague portal or, if your Health Ministry has not yet transitioned to the Trinity Health Human Resources Service Center, the MyBenefits site at www.trinity-health.org/my-benefits/. For any plan or program in which you participate, you may request a printed copy of the summary plan description, any certificate of coverage, and/or the official plan documents from your employer or from the Trinity Health Human Resources Service Center at 20555 Victor Parkway, Livonia, MI 48152. There is no charge for printed copies.

All Trinity Health group health plans provide care coordination, care management, utilization review, and referral services to help manage members' healthcare. By enrolling in a Trinity Health group health plan, you understand that the plan will provide services to manage care for you and your dependents. These services may be provided through independent third-party administrators, through clinically integrated networks of hospitals, physicians, and other health care providers, or through other professionals and healthcare providers, including those affiliated with Trinity Health. The persons providing these services will have access to your personal health information—including health information you disclose through wellness programs and well-being activities—not only for treatment purposes but also to manage and coordinate your healthcare. Any access to, use, or disclosure of protected health information will comply with the privacy and security regulations under the Health Insurance Portability and Accountability Act and any applicable state privacy and security laws.



Trinity Health