

Welcome!

At Pauls Valley General Hospital we know how important your benefits are to you and your family. Each year, we work carefully to evaluate the performance of our benefit plans. It's our goal to ensure we offer and maintain a benefits program that is affordable and comprehensive for all employees.

This Benefit Guide provides an overview of the benefit options available to you for the 2017/18 plan year. Please take time to carefully consider the information in this guide so you can make informed decisions about your benefit elections.

One way each of us can impact the health of our benefits program is by making wise choices about our healthcare. This means getting an annual check-up and taking advantage of our plans' free in-network preventative care. This means using Telemedicine instead of going to the doctor's office and using generic prescription medications instead of pricey brand-name drugs. These smart steps over time will have a positive impact on the cost of our medical plans in future years. By making wise choices about how you receive healthcare, you'll help keep our plans sustainable and affordable for both the company and for your family.

It would be our pleasure to be of assistance to you.

Skye benefits – www.skyebenefits.com

(501) 478-6111

Ameritas VSP – www.ameritas.com

(800) 659-2223

Mutual of Omaha - www.mutualofomaha.com

(800) 377-9000

Colonial Life – www.coloniallife.com

(800) 325-4368

Delta Dental of OK - www.deltadental.org

(800) 522-0188

Health EZ/CIGNA – www.healthez.com

(800) 948-9450

Who is Eligible?

Your eligible dependents include: spouses and dependents defined by civil union, common law marriage, or domestic partnerships. Please refer to employee handbook for more in-depth definitions.

How to Enroll?

Get ready for your enrollment by reviewing information in regards to benefits available within this book.

Adding Dependents? If you are adding new dependents to plans during Open Enrollment, you will need to provide documentation to verify eligibility. We will request verification documents once you make your Open Enrollment selections so we can ensure that only eligible dependents are enrolled. You must respond or your newly added dependents will not have coverage.

When to Enroll?

Employees have up to 30 days from their date of hire to make benefit plan elections. Benefits will go into effect on the first of the month following waiting period of 30 days.

How to Make Changes?

IRS rules state you may only make changes to your pre-tax benefit elections during Open Enrollment, unless you have a Qualified Life Event (QLE). If you have a QLE during the year, you may be allowed to enroll for coverage (if you previously waived coverage), add newly eligible dependents or change your level of coverage.

You have 30 days from the date of the QLE to change your elections by notifying the Human Resource Department. We cannot process requests made more than 30 days after a QLE occurs.

The IRS defines the following as QLES:

- Marriage, divorce or legal separation
- Birth, adoption of a child, placement for adoption or child support orders
- Death of an enrolled dependent
- Change in spouse's employment status
- Involuntary loss of coverage
- Relocation out of your plans' service area
- Ineligibility of a child who becomes "over-age" (you are required to notify HR when your child turns 26)
- A significant increase in the cost of coverage or a significant reduction of benefits under your or your spouse's healthcare plan
- This list is not inclusive. You will be required to provide documentation to substantiate your QLEs.

New! Telemedicine Program:

MD LIVE

Instead of going to the ER or urgent care for a non-emergency issue, you can now call or login to MD LIVE!

- Complimentary program available to ALL Employees and their household members
- Common conditions treated: Allergies, Bronchitis, Cold/Flu, Diarrhea, Ear Infections, Fever, Headache, Infections, Insect Bites, Joint Aches, Rashes, Sore Throats, UTI, and more!
- Ask your Skye Benefits Counselor for more information during open enrollment!



Online Tools

www.pvghbenefits.com

Visit your one-stop benefit website for benefit information, forms, account balances, processed claims, previous statements and much more. An online account allows you to fully manage you benefits.

To sign up for online access, follow these steps:

1. Go to www.pvghbenefits.com and click LOGIN.
2. Click “Need to set up your online access?”
3. Enter your Member ID – found on your ID card – your Social Security number, and your date of birth. Pick a Username and Password. Be sure to make you Password at least 8 characters long; any combination of letters or numbers is acceptable. Click Proceed to my Account and you’re registered!

Precertification

The medical system is increasingly pushing patients into expensive and unnecessary procedures. To make sure you receive the best treatment possible, we are requiring your doctor to notify us before MRI and CT scans as well as inpatient treatment and surgeries.



Pharmacy

Your pharmacy benefit manager is MagellanRx. MagellanRx is one of the nation’s largest pharmacy benefits managers and can offer additional discounts – especially on higher cost drugs. Your pharmacy claims will also appear on your HealthEZ statement.

Here are a few ways to save on pharmacy costs:

- *Ask your doctor to start you on the lowest cost alternative
- *Check out the “\$4 prescriptions” at places like Wal-Mart
- *Price shop your prescriptions at Sam’s Club and Costco; you don’t have to be a member to access their pharmacy
- *Ask your pharmacist about pill slitting; it can lower your cost.

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Major Medical Health Insurance Options:



Pauls Valley General Hospital provides you with three different medical plan options through HealthScope. Deductibles, copayments/coinsurance and annual out-of-pocket maximums differ between the plans. All three plans offer comprehensive coverage and provide a wide range of preventative care services at no cost to you.

Staying Inside the Network - It's important that you stay inside the CIGNA Network, as you will pay less out of your pocket. Doctors and facilities that are in the network have agreed to only charge members a certain amount for services. That means those outside the network may charge your more and possibly make you pay for services up front.

Your primary network is CIGNA. To find an in-network physician or facility, go to www.pvghbenefits.com and click on "Find a Doctor" or call customer service at (844) 839-6735.

MEDICAL

HealthScope Benefits

	Option 1	Option 2	Option 3
Product			
Option	\$1500 HSA	\$3000 PPO Plan	\$5000 HSA Plan
Plan Offering	Single Option	Single Option	Single Option
Preventative	Covered 100% NO COPAY	Covered 100% NO COPAY	Covered 100% NO COPAY
Lifetime Maximum	No Lifetime Max	No Lifetime Max	No Lifetime Max
Benefits*	Network Single/Family	Network Single/Family	Network Single/Family
Office Copay (PCP/SPC)	No charge after ded	No charge after ded	No charge after ded
Hospital Copays	No charge after ded	No charge after ded	No charge after ded
UC/ER/Major Diag Copay	No charge after ded	No charge after ded	No charge after ded
Deductible	\$1500/3000	\$3000/6000	\$5000/10000
Coinsurance	0%	0%	0%
Out-of-Pocket	\$1500/3000	\$3000/6000	\$5000/10000
Pharmacy	No charge after ded	\$10/35/100/150	No charge after ded
Out of Network Single/Family			
Deductible	\$3000/6000	\$6000/12000	\$10000/20000
Coinsurance	50%	50%	50%
Out of Pocket	\$6000/12000	\$12000/24000	\$15000/30000

Rates Semi-Monthly for Employee

Rates

	Option 1	Option 2	Option 3
Employee	\$66.76	\$68.82	\$37.81
Employee + Spouse	\$283.86	\$288.09	\$224.52
Employee + Child(ren)	\$283.86	\$288.09	\$224.52
Employee + Family	\$283.86	\$288.09	\$224.52

Dental Coverage

The PVGH dental plan with Delta Dental allows you to go to any licensed dentist, but you can save money by seeing an in-network provider. Because dental health is so important, the plan covers in-network preventative dental services in full, without you having to pay a deductible. Out-of-network dentists who are not contracted with Delta Dental may balance bill you for services.

To find an in-network provider, please visit www.deltadentalok.org
When searching for a dentist online, be sure to select the PPO or Premier networks.



Delta Dental of OK
(800) 522-0188
www.deltadentalok.org

Individual Annual Deductible	\$50
Family Annual Deductible	\$50 per person
Annual Maximum Benefit	\$1500
<u>Preventative:</u> (Includes 2 Cleanings, exam, x-ray per person annually)	Covered 100%
<u>Basic:</u> (Anesthesia, fillings, minor extractions)	Covered at 80%
<u>Major:</u> (Root canal, surgery, bridges, crowns, dentures) Orthodontia for children under age 26 only	Covered at 50%
Employee Only	\$20.52
Employee + Spouse	\$41.01
Employee + Children	\$57.10
Family	\$77.59



Vision Coverage

Comprehensive vision coverage is available through Ameritas (VSP+), which has a national network of participating doctors for you and your dependents to receive quality vision care and prescription eyewear. To maximize your benefits, use an in-network provider. If you see an out-of-network provider, your benefits will be reduced and you receive reimbursement only after you file a claim. Also, for services and frequency of benefits, the dates are based on the plan year, not the calendar year. To find an in-network provider, please visit www.vsp.com, select Find a VSP Doctor and then select VSP Signature Network.

VSP Vision

Vision Exam: \$10 Copay
Exam/Lenses: Once every 12 Months

Materials: \$25 Copay
Frames: Once every 24 months (\$130 allowance + 20%)
Prescribed Contacts covered 100%
Contact Lens Fitting up to \$60

NO WAITING PERIOD REQUIRED

Employee Only	\$4.43
Employee + Spouse	\$9.72
Employee + Children	\$7.81
Family	\$13.10

Continued on next page...

VSP Vision Coverage Continued...

VSP Vision/Lasik Benefits:

Lasik Advantage

LASIK Advantage provides coverage for LASIK and related procedures, including standard LASIK, Custom LASIK, LASIK with Wavefront Technology, CustomVue LASIK, LASIK with IntraLase technology and Photorefractive Keratectomy (PRK). Members earn a lifetime benefit per eye over time. The benefit amount increases throughout a three-year period, with the highest coverage provided at year three. Members earn benefits for each eye and can't combine benefits for both eyes to use for a single eye. The LASIK Advantage benefit is available to members age 18 and older. Adult and child coverage is allowed - adult only and child only coverage are not. LASIK Advantage is only available with dental plans with preventive, basic and major coverage. There is no network tied to this coverage.

Lifetime Benefit Earned: Both Eyes

Year One	Year Two	Year Three
\$350 (\$175 per eye)	\$350 (\$175 per eye)	\$700 (\$350 per eye)

VSP Vision/Hearing Care Benefits:

Coinsurance

Annual Hearing Exam 100%
Hearing Aid 50%
Hearing Aid Maintenance 100%

Deductible

Annual Hearing Exam \$0
Hearing Aid \$0
Hearing Aid Maintenance \$0

Maximum (per benefit period)

Annual Hearing Exam Up to \$75
Hearing Aids (per ear)
Year One Up to \$200 Year Two Up to \$600 Year Three Up to \$800
Hearing Aid Maintenance Up to \$40



Health Savings Accounts



A Health Savings Account allows you to set aside money to pay for expected annual expenses through tax-free payroll deductions. By making tax-free contributions, you reduce your taxable income, which means more money in your pocket.

You may use this account for most medical, prescription drug, dental and vision expenses that are not paid for by your healthcare plans. Some examples include deductibles, prescription co-payments, eyeglasses, contact lenses, hearing aids, braces and other expenses allowed by the IRS. Certain over-the-counter (OTC) drugs are eligible for reimbursement through your HSA with a prescription.

[Annual IRS Contribution Limits](#)

2017 – Self-only \$3400; Family \$6750

2018 – Self-only \$3450; Family \$6900

Catch-up contributions (age 55 or older) - \$1000

Group Life Insurance



Mutual of Omaha

Mutual of Omaha - www.mutualofomaha.com

Customer Service (800) 775-1000

Basic Life & AD&D: PAID BY EMPLOYER

Employee – 1x annual base salary rounded up to next \$1000

Dependents – Spouse: \$25,000 Child(ren): \$10,000 each child

Voluntary Life & AD&D: Paid by employee via payroll deduction

Employee – Multiples of \$10,000 up to 5x annual base salary or \$500,000 (whichever is less).

Rates are based on age.

Age:	Cost per \$10,000	Age:	Cost per \$10,000
0-29	\$.55	55-59	\$2.55
30-34	\$.65	60-64	\$3.95
35-39	\$.70	65-69	\$7.15
40-44	\$.90	70-74	\$10.55
45-49	\$1.30	75+	\$20.65
50-54	\$1.65		

Spouse – Multiples of \$10,000 up to \$100,000 (not to exceed employee's coverage). Rates based on table above.

Child(ren) – \$5,000 in coverage = \$.50 \$10,000 in coverage = \$1.00

Optional Life Insurance Programs



Colonial Life - www.coloniallife.com

Customer Service (800) 325-4368

- Term Life:** Select 10, 20, or 30 year term. Unlimited face amount allowed.
 Rates remain the same for the length of the term.
 Portable. Can cover dependents.
 Accelerated Death Benefit: in the event of catastrophic diagnosis, plan will pay up to 80% of death benefit upon diagnosis.
- Whole Life:** Rates remain the same for entire life.
 Builds cash value you may borrow against in time.
 Portable. Can cover dependents. Accelerated Death Benefit.

Disability Program



Mutual of Omaha - www.mutualofomaha.com
800-388-9606

Short Term Disability: PAID BY EMPLOYER

Elimination Period

If you become disabled, there is an elimination period before benefits are payable. Your benefits begin:

- On the day of your disabling injury.
- On the 8th day of your disabling illness.

Weekly Benefit

Your benefit is equivalent to 60% of your before-tax weekly earnings, not to exceed the plan's maximum weekly benefit amount less other income sources.

Maximum Benefit Period Up to 13 weeks

Maximum Weekly Benefit \$1,000

Minimum Weekly Benefit \$25

Partial Disability Benefits

If you become disabled and can work part-time (but not full-time), you may be eligible for partial disability benefits, which will help supplement your income until you are able to return to work fulltime.



Colonial Life Disability 1000 www.coloniallife.com (800)325-4368

Helps replace a portion of your income to help make ends meet if you become disabled from a covered accident or covered sickness. "Paycheck Insurance"

- On/Off-Job Accident and Sickness Disability

6 Month Benefit Period

ELIMINATION PERIOD	ISSUE AGE	\$1,000*	\$1,500*	\$2,000*
<i>*monthly benefit amount</i>				
7 days Accident / 7 days Sickness	17-49	\$22.25	\$33.38	\$44.50
	50-64	\$29.45	\$44.18	\$58.90
14 days Accident / 14 days Sickness	17-49	\$17.05	\$25.58	\$34.10
	50-64	\$22.40	\$33.60	\$44.80

Supplementing Your Health Plan



Colonial Life Cancer Assist www.coloniallife.com (800)325-4368

Helps offset the out-of-pocket medical and indirect, non-medical expenses related to cancer that most medical plans don't cover. This coverage also provides a benefit for specified cancer-screening tests. 1:2 men and 1:3 women will be diagnosed with Cancer in the lifetime. CDC Facts

- with \$5,000 Initial Diagnosis Benefit, Progressive Payment, and **\$100 Annual Wellness Benefit**

	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Level 3	17-75	\$20.98	\$36.98	\$21.45	\$37.46

Colonial Life Critical Illness 1.0

Provides a lump-sum benefit you can use to pay the direct and indirect costs related to a covered critical illness, which can often be expensive and lengthy. Heart attack, stroke, kidney failure, and others.

- with Subsequent Diagnosis Coverage, Health Screening Benefit
 - *May choose between \$10,000 Lump Sum Benefit and \$20,000 Lump Sum Benefit*
 - *May also cover spouse and children*
 - *Rates based on age, tobacco status, and selected benefit amount*

Colonial Life Premier Accident Coverage

Helps offset unexpected medical expenses, such as emergency room fees, deductibles and co-payments that can result from a fracture, dislocation or other covered accidental injury.

- On/Off-Job Accident Coverage, Health Screening Benefit (\$100)

Plan 1

ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
17-99	\$13.26	\$18.16	\$19.85	\$24.75

Group Medical Bridge

Provides a lump-sum benefit for a covered hospital confinement or a covered outpatient surgery. Helps with co-payments and deductibles that are not covered by most major medical plans.

- \$2,000 Hospital Confinement Benefit and Health Screening Benefit of \$50 per covered person/year

Issue Age	Named Insured	Named Insured & Spouse	Named Insured & Dependents	Family
17-49	\$10.63	\$18.74	\$14.66	\$22.77
50-59	\$13.39	\$26.15	\$17.43	\$30.18
60-64	\$18.34	\$37.60	\$22.38	\$41.63
65-99	\$25.43	\$52.17	\$29.46	\$56.20

With Colonial Life products:

Coverage is available for your spouse and eligible dependent children.

Benefits are paid directly to you, unless you specify otherwise.

You can continue coverage when you retire or change jobs, with no increase in premiums.

You may receive benefits regardless of any other insurance you may have with other insurance companies.

Retirement Savings



Pauls Valley General Hospital offers a retirement savings plan for our employees. Under this plan, also commonly known as a 403(b) plan, you can save money toward your retirement on a tax-deferred basis. That is, you don't pay federal or state income taxes on your investment earnings until you withdraw the money and may choose to delay income taxes on your savings.

YOUR CONTRIBUTIONS

Your 403(b) contributions are deducted from your paycheck each pay period. You may defer a percentage of your pay each pay period with a maximum dollar amount of \$XXXX for 2017 and \$XXXXX for 2018 (indexed annually by the IRS). Additional catch-up amount is \$XXXX for 2017 and \$XXXX for 2018 (indexed annually by the IRS). You may start, stop or change your contributions at any time, beginning soon after you join the company. You may also transfer or roll over funds from a prior retirement plan or IRA.

INVESTMENT OPTIONS

The plan offers many investment choices for your savings. You may choose a target-date fund to have your investment allocation managed for you or choose to divide your account among funds to personalize your investments. More information on investment options is available from the plan provider.

Other Benefits



Employee Assistance Program

EMPAC Employee Assistance Program (EAP) provides comprehensive EAP services to all PVGH employees and their dependent family members. These services are provided at no cost.

The EAP can help you with the following:

- Emotional support with anxiety, depression, stress, grief, loss and relationship/marital conflicts
- Legal guidance/assistance with your most pressing legal issues, including divorce, adoptions, family law, wills, trusts and more
- Financial resources to help with retirement planning and taxes, relocation, mortgages, budgeting, debt and bankruptcy

Discounts –

Frontier City/White Water Bay, AT&T, Budget Rent-A-Car, Holiday Inn Pauls Valley, PVGH Gift Shop, PVGH Services

This guide contains a brief summary of your employee benefits. Complete descriptions of the plans are contained in the plan documents. If there is any disagreement between this booklet or any oral description of the plan and the wording of the corresponding plan document, the plan document will govern. Pauls Valley General Hospital (PVGH) reserves the right to modify, amend, suspend or terminate any plan, in whole or in part, at any time and for any reason. The authority to make any such changes to the plan rests with PVGH. Any such modifications, suspension or termination of the plan shall be made the decision of PVGH.