



**FOCUS ON YOU**



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As New York's largest private employer Northwell Health is committed to offering you and your dependents a comprehensive benefits package designed to provide you coverage for all your health and welfare needs.

### Eligibility

To be considered benefits-eligible, you must be a full- or part-time team member scheduled to work at least .5 of the full time equivalent (FTE) per week. To be eligible for full-time benefit rates you must work .8 FTE or greater. Temporary team members are not eligible.

Temporary team members are those who work less than .5 FTE, or 30 hours on average a year. If you are a temporary team member you can go to the Health Insurance Marketplace or consider COBRA, if you become eligible (refer to page 41 for more information).

The following are considered benefits-eligible dependents under Northwell's team member benefit plans:

- Legal spouse
  - If your spouse is eligible for coverage through his or her own employer and you choose to cover them under a Northwell medical plan you will be subject to an annual surcharge of \$1,140 (pro-rated per pay period)
  - If you are married to another Northwell non-union benefits-eligible team member, the team member in the higher benefit group will have to elect his/ her own medical coverage at a higher cost. The spouse in the lower benefit group does have the option to elect coverage as single, or employee + child(ren).
- Children up to age 26 (natural, adopted or step) are covered until the last day of the month in which they turn 26
- Unmarried children over the age of 26 who are incapable of self-support

Coverage for you and your dependents will begin on the first of the month following 32 days of employment. Coverage will cease for you and your dependents on the last day of the month in which you resign or terminate, at which time you may be COBRA eligible. Long-and short-term disability and life insurance will terminate on the last day of employment.

Please note that Northwell audits your dependent information. New hires must submit proof of dependent eligibility by providing birth certificate(s), etc. Those who are already employed will also need to respond to our periodic audits in a timely manner. If you do not respond to the audit, your dependents may be terminated from coverage. If the information you provide is false your employment with Northwell may be jeopardized.

**Note from the Internal Revenue Service (IRS):** Due to a new IRS reporting requirement, your Social Security number and those of your dependents must be recorded in mySelfService. To do so, log into myBenefits>Dependents & Beneficiary>View/Edit Summary. Click on dependent's name to view, if their Social Security is missing – hit edit and save. Please make sure that you and your dependent(s) names are recorded in mySelfService exactly the same as you report them when you file your taxes with the IRS.

*Note: Certain union-represented members are eligible to enroll in the Northwell benefit plans: Staten Island 1456 and 94/94A, Staten Island UFT nurses hired after April 1, 2017, Ambulatory 1199, LIJ Forest Hills 94/94A, as well as nurses from Lenox Hill Hospital, Lenox Health Greenwich Village, Huntington Hospital, LIJ Valley Stream, and Plainview Hospital.*



### Enrolling in your benefits

**New team members** must elect or waive health and welfare benefits within the first 30 days of employment. All new hires will receive an email their first week containing their Universal ID, password and ESS key. For additional assistance, call the Information Services Help Desk at 516-470-7272.

How to enroll in your benefits if you are a new hire:

- Log into mySelfService using your Universal ID, password and ESS key
- Select myBenefits
- Select Benefits Enrollment

**Existing team members** can enroll, waive or change their benefit elections through the same process as new hires, but only during a two week period of time, typically in November/December, referred to as benefit open enrollment.

If you do not change or waive your elections from the previous year, your benefits will automatically rollover (Flexible Spending Accounts are the exception, these accounts do not rollover)

The only other time you can enroll, waive or change your benefits is as a result of a Qualifying Life Event (QLE). A QLE includes a change of marital status, dependent status, a change in your family's coverage due to your dependent's coverage, or a change in employment status.

### Benefit groups and location classifications

Your contribution towards the cost of benefits depends on the coverage you select for you and your dependents, your date of hire, benefit group and the location in which you work. 2020 rates can be found on pages 24-28.

See references below:

- **Benefit group 3** generally refers to staff-level team members
- **Benefit group 2** generally refers to manager-level team members and clinical mid-level providers
- **Benefit groups 1** generally refers to directors and AVPs
- **Benefit group 1A** generally refers to executives (above the AVP level) and physicians (for benefit information, please refer to the Physicians and Executive Guide)
- **365** generally refers to those working in a hospital or 24/7 setting (includes team members hired before Jan. 1, 2011 with no break in service – regardless of their work location)
- **Non-365** generally refers to those who work in an office or non-24/7 setting

Note: Non-365 team members receive the same benefits as those working in a hospital (referred to as 365) with slightly different plans for disability, rates and paid time-off. Some non-365 team members are grandfathered into 365 benefits.

### Questions

- If you need additional information after reviewing this document, call the HR Service Center Monday through Friday, 8:00 a.m. to 6:00 p.m. at 516-734-7000 (the first and third Friday of every month opening at 9:00 a.m.)
  - The HR Service Center offers a live chat on the home page of the employee intranet
- Contact information for all participating plan administrators can be found at the end of this document





## Medical Plans

Northwell offers three medical plans, all administered by UnitedHealthcare (UHC).

**Northwell Health High Deductible Health Plan (HDHP) administered by UnitedHealthcare and Health Savings Account (HSA)** is designed for those who use in-system\* and in-UHC network providers and facilities and are looking to save for future medical expenses. This plan has lower premiums but higher deductibles than a traditional health plan. When covered by a HDHP it is a requirement to have a HSA.

**Northwell Health Value Plan** is designed for those who utilize in-system providers and Northwell facilities, but would like access to out-of-system care.

**Northwell Health Buy-Up Plan** is designed for those who do not exclusively use in-system providers and facilities. If you frequently seek care outside of the in-system network you will pay a lower deductible and coinsurance compared to the Value Plan but you will pay more via paycheck deductions.

## Out-of-Area Plans

Northwell assigns team members who live outside of our primary service area, which is determined by zip code, into Out-of-Area (OOA) plans. If you are considered OOA, you can choose either the Value or Buy-Up plans, and will be subject to lower out of pocket costs for certain in-network services provided. The two primary differences are:

1. If you are undergoing an elective hospitalization, you can use an in-UHC network hospital, rather than in-system, for a \$0 copay.
2. Primary Care / Specialist copays will be (\$20/\$40) rather than the deductible and coinsurance. Additional testing and procedures will continue to be subject to deductible and coinsurance.

Note: By enrolling in a Northwell medical plan you and your enrolled dependents may be contacted by a service provider (which may be a Northwell team member) offering information, support or assistance, related to the usage of plan benefits. Any participation in, or cooperation with, such services or providers is completely voluntary and without extra charge. Any personal health information that is voluntarily provided will not be used for purposes other than the services offered.

*\*In-system refers to Northwell's Clinical Integration Independent Physician Association (CIIPA, or IPA for short) which consists of approximately 8,000+ employed and community-based physicians throughout New York who are in the Northwell team member benefits plan network. To check if your provider, service or facility is in-system, visit: [Northwell.edu/InSystem](https://Northwell.edu/InSystem)*



## High Deductible Health Plan and Health Savings Account Northwell Health (in-system and in-UHC network providers and services only)

	In-system	In-UHC network
Deductible	\$1,500 Individual/\$3,000 Family (1) Non-Embedded	\$3,000 Individual/\$6,000 Family (1) Non-Embedded
Cardiac and Orthopedic Deductible	Deductible/100%	\$5,750 per individual
Out-of-Pocket Max (Includes deductibles, coinsurance/copays)	\$3,500 Individual/\$7,000 Family (2) Embedded	\$6,750 Individual/\$13,500 Family (2) Embedded
Hospital Copay	Deductible/100%	Deductible/60%
Employer Contributions to the Health Savings Account	\$500 Individual/\$1,000 Family (annually prorated per paycheck)	\$500 Individual/\$1,000 Family (annually prorated per paycheck)
<b>Home/Office/Outpatient Care</b>		
Preventive Care -Annual Exams & Immunizations	100% covered	Deductible/60%
Office Visits	Deductible/\$15 Primary Care copay Deductible/\$35 Specialist copay	Deductible/\$15 Primary Care copay Deductible/\$35 Specialist copay
Emergency Room Visit	Deductible/\$200 copay	Deductible/\$200 copay
Urgent Care	Deductible/\$20 copay at GoHealth, ProHEALTH, PM Pediatrics, CareMount	Deductible/\$60 Copay
Maternity Care	Deductible/100%	Deductible/60%
Home Healthcare	Deductible/100% (200 visits max annually)	Deductible/60% (200 visits max annually)
Hospice Care	Deductible/100%	Deductible/60%
Outpatient Surgery, Pre-surgical Testing, Anesthesia	Deductible/100%	Deductible/60%
Chemotherapy, Radiation	Deductible/100%	Deductible/60%
Lab Tests, X-Rays, MRI, MRA, CAT, PET and Nuclear Scans	Deductible/100%	Deductible/60%
Artificial Insemination	Deductible/100%, no lifetime max	Deductible/60%, no lifetime max
Assisted Reproductive Technology	Deductible/80% covered up to 3 cycles per lifetime at Northwell Fertility(3)	Not covered
Third Party Reproduction (4)	Deductible/covered up to \$30K per lifetime/household at Northwell Fertility(3)	Not covered
Elective Egg, Embryo, Sperm, Reproductive Tissue and Donor Services Freezing	Deductible/covered up to \$8.5K per lifetime at Northwell Fertility(3)	Not covered
Fertility Medication (5)	Deductible/covered with \$15K lifetime max	Deductible/covered with \$15K lifetime max
Chiropractic Care	Deductible/\$35 Specialist copay	Deductible/\$35 Specialist copay

(1) Non-Embedded Deductible- members in family coverage have to meet the full family deductible before moving to the coinsurance phase

(2) Embedded Out-of-Pocket Max (OOPM) - all individuals, including individuals within a family, move to 100% coverage once they satisfy the individual OOP max. The full family moves to 100% coverage when any combination of family members satisfy the family OOPM.

(3) Northwell Fertility is located at 300 Community Drive, Manhasset.

(4) Third Party Reproduction is not administered by UHC. Contact Northwell Fertility for more information.

Phone: 516-562-2229

(5) Fertility medication must go through Vivo Health.



## High Deductible Health Plan and Health Savings Account Northwell Health (in-system and in-UHC network providers and services only)

Acupuncture	Deductible/\$35 Specialist copay	Deductible/\$35 Specialist copay
Second Surgical Opinion	Deductible/\$35 Specialist copay	Deductible/\$35 Specialist copay
Kidney Dialysis	Deductible/100%	Deductible/60%
Physical Therapy, Speech/Language, Occupational, Developmental Delay	Deductible/\$0 copay at all in-system facilities (60 visits max annually)	Deductible/\$0 copay (60 visits max annually)
Substance Use	Deductible/100%	Deductible/60%
Durable Medical Equipment	Deductible/90% coinsurance	Deductible/60%
Prosthetics, Orthotics (when medically necessary)	Deductible/90% coinsurance	Deductible/60%
Ambulance	Deductible/100%	Deductible/60%
Bariatric Surgery	Deductible/100%	Not Covered
<b>Inpatient Care</b>		
Inpatient Hospital (as many days as medically needed)	Deductible/100%	Deductible/60%
Surgery, Surgical Assistance, Anesthesia	Deductible/100%	Deductible/60%
Skilled Nursing Facility (60 days max per calendar year)	Deductible/100%	Deductible/60%
<b>Mental Health</b>		
Outpatient	Deductible/\$20 Copay	Deductible/\$20 Copay
Inpatient Substance Use Rehab	Deductible/100%	Deductible/100%
Inpatient Substance Use Detox	Deductible/100%	Deductible/100%
<b>Prescription Drug Plan through Vivo Health (Medical/RX same deductible applies)</b>		
	<b>Retail Cost</b>	<b>Mail Order Cost</b>
Generic Drug	Deductible/\$0 copay	Deductible/\$0 copay (90-day supply)
Brand Formulary	Deductible/\$50 copay	Deductible/\$125 copay (90-day supply)
Brand Non-Formulary	Deductible/50% to maximum \$500 copay	Deductible/50% to \$1,250 maximum (90-day supply)
Specialty Drug (must submit through Vivo)	Deductible/ Variable copay not to exceed 20% up to \$300 maximum	N/A

Vivo Health has a large pharmacy network, which includes more than 64,000 participating pharmacies, including ten Vivo Health Pharmacy locations. Note: Walgreens (which includes Duane Reade and Select Rite Aid pharmacies) is not a participating pharmacy.

Visit [Northwell.edu/myMeds](https://www.northwell.edu/myMeds) for information about Vivo Health and its participating pharmacies.





## High Deductible Health Plan + Health Savings Account (HSA): Frequently Asked Questions

### What's a High Deductible Health Plan?

A high-deductible health plan (HDHP) is a health insurance plan with lower premiums but higher deductibles than a traditional health plan. You can use in-system and in-UHC network providers and facilities. Being covered by a HDHP is a requirement to have a HSA.

### What's a Health Savings Account (HSA)?

- It's a medical savings account administered by Payflex
- A triple-tax-advantage way to save for medical expenses, your contributions are not taxed, there is no tax on earnings and no tax on distributions. Once you have an account balance of \$1000, you can invest your money in mutual funds
- You can put aside up to \$3,050 in pre-tax money if you elect single coverage and \$6,100 in pre-tax money if you elect family coverage. These are per paycheck deductions and you can change your contributions monthly. To help offset your deductible Northwell will also fund your account, \$500 for single and \$1,000 for family coverage (pro-rated per paycheck). The total maximum team member and employer contributions into the HSA account are \$3,550 for single coverage and \$7,100 for family coverage.
- Lowers taxable income
- Unlike a Flexible Spending Account (FSA), HSA funds roll over and accumulate year to year if they are not spent
- If you participate in this plan you are only eligible for a limited purpose Flexible Spending Account (FSA)
- This account can also serve as a saving account to pay your medical expenses during retirement
- If you are 65 or older or you collect social security, you cannot participate in this plan
- Team members age 55-64 can contribute an additional \$1,000

### What is an HSA-Compatible FSA or a Limited Purpose FSA?

The Limited Purpose FSA means that if you have both HSA and FSA accounts, you can only use an HSA account for medical expenses, and use an FSA to pay only for dental and vision expenses. The Limited Purpose FSA limit is the same as regular (the Full Purpose) FSA. For 2020 the IRS limit is \$2,750.

### Opening your HSA Account

PayFlex is the custodian and the administrator of your HSA and Citibank is the depository bank. If you enroll in the Northwell HDHP, Payflex will open a HSA for you. In order to do so you will have to agree to the PayFlex HSA custodial agreement and fee schedule when enrolling in benefits.

To qualify for an HSA, you must: (1) be covered under a qualified high deductible health plan (HDHP); (2) not be covered by any other health plan that is not an HDHP, including a spouse's Flexible Spending Account (FSA), with certain exceptions for plans providing preventive care and limited types of permitted insurance and permitted coverage; (3) not be enrolled in Medicare; and (4) not be claimed as a dependent on another person's tax return.



Value Plan	Northwell In-system	United Healthcare In-UHC network	Out-of-Network <i>reimbursement = 130% of Medicare. Participant pays the difference between United Healthcare payment and the provider charges.</i>
Deductible	\$0	\$1,000 Individual/ \$2,000 Family	\$3,000 Individual/ \$6,000 Family
Deductible Out-of-Area Plan (OOA)	\$0	\$750 Individual/ \$1,500 Family	\$2,500 Individual/ \$5,000 Family
Cardiac and Orthopedic Deductible (OOA Plan excluded)	\$0	\$5,750 Individual/ \$11,500 Family	\$8,500 Individual/ \$17,000 Family
Cardiac and Orthopedic Deductible OOA Plan	\$0	\$750 Individual/ \$1,500 Family	\$2,500 Individual/ \$5,000 Family
Coinsurance		30%	50%
Out-of-Pocket Max (includes deductibles, coinsurance/copays)	\$5,000 Individual/ \$10,000 Family	\$5,750 Individual/ \$11,500 Family	\$8,500 Individual/ \$17,000 Family
Hospital Copay	\$0	\$1,250 per admission Deductible/30% Coinsurance	\$1,500 per admission Deductible/50% Coinsurance
Hospital Copay OOA Plan	\$0	No copay Deductible/30% Coinsurance	\$1,250 per admission Deductible/50% Coinsurance
Lifetime Maximum	Unlimited	Unlimited	Unlimited
<b>Home/Office/Outpatient Care</b>			
Preventive Care -Annual Exams -Immunizations	100% covered	Deductible/30% Coinsurance	Deductible/50% Coinsurance
Preventive Care OOA Plan -Annual Exams -Immunizations	100% covered	100% covered	Deductible/50% Coinsurance
Office Visits	\$20 Primary Care \$40 Specialist copay	Deductible/30% Coinsurance	Deductible/50% Coinsurance
Office Visits For OOA	\$20 Primary Care/ \$40 Specialist copay	\$20 Primary Care/ \$40 Specialist copay	Deductible/50% Coinsurance
Emergency Room Visit	\$200 copay (waived if admitted within 24 hrs)	\$200 copay (waived if admitted within 24 hrs)	\$200 copay (waived if admitted within 24 hrs)
Urgent Care	\$20 Copay at GoHealth, ProHEALTH, PM Pediatrics, CareMount Urgent Care	\$60 copay	Deductible/50% Coinsurance
Maternity Care	100% covered	Office Visit (first visit only): \$20 copay , Delivery: Deductible/Coinsurance and hospital copay (waived for OOA)	Deductible/50% Coinsurance and hospital copay



Value Plan	Northwell In-system	United Healthcare In-UHC network	Out-of-Network <i>reimbursement = 130% of Medicare. Participant pays the difference between United Healthcare payment and the provider charges.</i>
Home Healthcare (1)	100% covered	100% covered 200 visits max per calendar year	Deductible/50% Coinsurance 200 visits max per calendar year
Home Infusion Therapy	100% covered	Deductible/30% Coinsurance	Deductible/50% Coinsurance
Home Infusion Therapy OOA Plan	100% covered	100% covered	Deductible/50% Coinsurance
Hospice Care	100% covered/ No copay	Deductible/ 30% Coinsurance	Deductible/ 50% Coinsurance
Outpatient Surgery, Pre-surgical Testing, Anesthesia	100% covered/ No copay	Deductible/ 30% Coinsurance	Deductible/ 50% Coinsurance
Chemotherapy, Radiation	100% covered/ No copay	Deductible/ 30% Coinsurance	Deductible/ 50% Coinsurance
Lab Tests, X-Rays, MRI, MRA, CAT, PET and Nuclear Scans	100% covered/ No copay	Deductible/ 30% Coinsurance	Deductible/ 50% Coinsurance
Artificial Insemination	100% covered, no lifetime max	Deductible/ 30% Coinsurance	Deductible/ 50% Coinsurance
Assisted Reproductive Technology	80% covered up to 3 cycles/Lifetime at Northwell Fertility (2)	Not covered	Not covered
Third Party Reproduction (3)	Covered up to 30K per lifetime/household at Northwell Fertility (2)	Not covered	Not covered
Elective Egg, Embryo, Sperm, Reproductive Tissue and Donor Services Freezing	Covered up to \$8.5K per lifetime at Northwell Fertility (2)	Not covered	Not covered
Fertility Medication (4)	Covered with \$15K, lifetime max	Covered with \$15K, lifetime max	Covered with \$15K, lifetime max
Chiropractic Care (48 days max per calendar year)	\$20 Specialist copay	Deductible/ 30% Coinsurance	Deductible/ 50% Coinsurance
Acupuncture	\$20 Specialist copay	Deductible/ 30% Coinsurance	Deductible/ 50% Coinsurance
Second Surgical Opinion	\$40 Specialist copay	Deductible/ 30% Coinsurance	Deductible/ 50% Coinsurance
Kidney Dialysis	100% covered/No copay	Deductible/30% Coinsurance	Not Covered
Kidney Dialysis OOA Plan	100% covered/No copay	100% covered/No copay	Not Covered
Physical Therapy, Speech/Language, Occupational, Developmental Delay	100% covered/ No copay for all in-system facilities and IPA PTs only. (60 visits max per therapy annually)	\$20 copay (60 visits max per therapy annually)	Deductible/ 50% Coinsurance (60 visits max per therapy annually)
Substance Use	100% covered/No copay	100% covered/No copay	Deductible/50% Coinsurance



Value Plan	Northwell In-system	United Healthcare In-UHC network	Out-of-Network <i>reimbursement = 130% of Medicare. Participant pays the difference between United Healthcare payment and the provider charges.</i>
Durable Medical Equipment	100% covered	100% covered	Deductible/50% Coinsurance
Prosthetics, Orthotics (when medically necessary)	100% covered	100% covered	Deductible/50% Coinsurance
Ambulance	100% covered	100% covered	100% covered
Bariatric Surgery	100% covered/ No copay	Not Covered	Not Covered
Bariatric Surgery OOA Plan	100% covered/ No copay	Deductible/30% Coinsurance	Not Covered
<b>Inpatient Care</b>			
Inpatient Hospital (as many days as medically needed)	100% covered	Deductible/30% Coinsurance/and \$1,250 per admission copay	Deductible/50% Coinsurance/and \$1,500 per admission copay
Inpatient Hospital (as many days as medically needed) Out-of-Area Plan	100% covered	Deductible/30% Coinsurance	Deductible/50% Coinsurance/and \$1,500 per admission copay
Surgery, Surgical Assistance, Anesthesia	100% covered	Deductible/ 30% Coinsurance	Deductible/50% Coinsurance
Skilled Nursing Facility (60 days max per calendar year)	100% covered	Deductible/ 30% Coinsurance	Deductible/50% Coinsurance
<b>Mental Health</b>			
Outpatient	\$20 Copay	\$20 Copay	Deductible/50% Coinsurance
Inpatient Substance Use Rehab	100% covered	100% covered	Deductible/50% Coinsurance
Inpatient Substance Use Detox	100% covered	100% covered	Deductible/50% Coinsurance

**Notes:**

1. Home Healthcare- must be ordered by a physician, provided by or supervised by a registered nurse. Custodial Care and Domiciliary Care are not covered.
2. Northwell Health Fertility is located at 300 Community Drive, Manhasset.
3. Third Party Reproduction is not administered by UHC. Please contact Northwell Health Fertility at 516-562-2229 for more information.
4. Fertility Medication must go through Vivo Health.
5. Coinsurance amounts are off of UnitedHealthcare's contracted rates with providers.
6. Reimbursement schedule varies. Participant pays the difference between United Healthcare payment and the provider charges. If you go out-of-network you may incur very high out of pocket expenses.
7. Compression socks may be covered by Vivo Health only sometime in 2020.
8. Prescribing of Growth Hormone may be covered by Tier 1 only, sometime in 2020.



Buy-up Plan	Northwell In-system	United Healthcare In-UHC network	Out-of-Network <i>reimbursement = 130% of Medicare. Participant pays the difference between United Healthcare payment and the provider charges.</i>
Deductible	\$0	\$750 Individual/ \$1,500 Family	\$2,500 Individual/ \$5,000 Family
Deductible Out-of-Area (OOA) Plan	\$0	\$500 Individual/ \$1,000 Family	\$1,000 Individual/ \$2,000 Family
Cardiac and Orthopedic Deductible (OOA Plan excluded)	\$0	\$5,750 Individual/ \$11,500 Family	\$8,500 Individual/ \$17,000 Family
Cardiac and Orthopedic Deductible Out-of-Area Plan	\$0	\$500 Individual/ \$1,000 Family	\$1,000 Individual/ \$2,000 Family
Coinsurance		10%	40%
Coinsurance OOA Plan		10%	30% (applies to all OOA out-of-network benefits)
Out-of-Pocket Max (includes deductibles, coinsurance/copays)	\$5,000 Individual / \$10,000 Family	\$5,750 Individual/ \$11,500 Family	\$8,500 Individual/ \$17,000 Family
Hospital Copay	\$0	\$1,250 per admission Deductible/10% Coinsurance	\$1,500 per admission Deductible/40% Coinsurance
Hospital Copay OOA Plan	\$0	No Copay Deductible/10% Coinsurance	\$1,250 Per Admission Deductible/30% Coinsurance
Lifetime Maximum	Unlimited	Unlimited	Unlimited
<b>Home/Office/Outpatient Care</b>			
Preventive Care -Annual Exams -Immunizations	100% covered	Deductible/10% Coinsurance	Deductible/40% Coinsurance
Preventive Care OOA Plan -Annual Exams -Immunizations	100% covered	Deductible/10% Coinsurance	Deductible/40% Coinsurance
Office Visits	\$20 Primary Care \$40 Specialist copay	Deductible/10% Coinsurance	Deductible/40% Coinsurance
Office Visits For OOA	\$20 Primary Care/ \$40 Specialist copay	\$20 Primary Care/ \$40 Specialist copay	Deductible/30% Coinsurance
Emergency Room Visit	\$200 Copay (waived if admitted within 24 hrs)	\$200 Copay (waived if admitted within 24 hrs)	\$200 Copay (waived if admitted within 24 hrs)
Urgent Care	\$20 copay at GoHealth, ProHEALTH, PM Pediatrics & CareMount	\$60 copay	Deductible/40% Coinsurance
Maternity Care (OOA Plan included)	100% covered	\$20 copay for Office Visit (first visit only) For Delivery Deductible/Coinsurance and hospital copay (waived for OOA)	Deductible/40% Coinsurance and hospital copay





Buy-up Plan	Northwell In-system	United Healthcare In-UHC network	Out-of-Network <i>reimbursement = 130% of Medicare. Participant pays the difference between United Healthcare payment and the provider charges.</i>
Home Healthcare (1)	100% covered	100% Covered 200 visits max per calendar year	Deductible/40% Coinsurance/ 200 visits max per calendar year
Home Infusion Therapy	100% covered	Deductible/10% Coinsurance	Deductible/40% Coinsurance
Hospice Care	100% covered/ No copay	Deductible/ 10% Coinsurance	Deductible/ 40% Coinsurance
Outpatient Surgery, Pre-surgical Testing, Anesthesia	100% covered/ No copay	Deductible/ 10% Coinsurance	Deductible/ 40% Coinsurance
Chemotherapy, Radiation	100% covered/ No copay	Deductible/ 10% Coinsurance	Deductible/ 40% Coinsurance
Lab Tests, X-Rays, MRI, MRA, CAT, PET and Nuclear Scans	100% covered/ No copay	Deductible/ 10% Coinsurance	Deductible/ 40% Coinsurance
Artificial Insemination	100% covered, no lifetime max	Deductible/ 10% Coinsurance	Deductible/ 40% Coinsurance
Assisted Reproductive Technology	80% Covered up to 3 cycles/Lifetime at Northwell Health Fertility (2)	Not covered	Not covered
Third Party Reproduction (3)	Covered up to 30K per lifetime/household at Northwell Health Fertility (2)	Not covered	Not covered
Elective Egg, Embryo, Sperm, Reproductive Tissue and Donor Services Freezing	Covered up to \$8.5K per lifetime at Northwell Health Fertility (2)	Not covered	Not covered
Fertility Medication (4)	Covered with \$15K, lifetime max	Covered with \$15K, lifetime max	Covered with \$15K, lifetime max
Chiropractic Care (48 days max per calendar year)	\$20 Specialist copay	Deductible/ 10% Coinsurance	Deductible/ 40% Coinsurance
Acupuncture	\$20 Specialist copay	Deductible/ 10% Coinsurance	Deductible/ 40% Coinsurance
Second Surgical Opinion	\$40 Specialist copay	Deductible/ 10% Coinsurance	Deductible/ 40% Coinsurance
Kidney Dialysis	100% covered/No copay	Deductible/10% Coinsurance	Not Covered
Kidney Dialysis OOA Plan	100% covered/No copay	100% covered/No copay	Not Covered
Physical Therapy, Speech/Language, Occupational, Developmental Delay	100% covered/ No copay for all in-system facilities and IPA PTs only. (60 visits max per therapy annually)	\$20 copay (60 visits max per therapy annually)	Deductible/ 40% Coinsurance (60 visits max per therapy annually)



Buy-up Plan	Northwell In-system	United Healthcare In-UHC network	Out-of-Network <i>reimbursement = 130% of Medicare. Participant pays the difference between United Healthcare payment and the provider charges.</i>
Substance Use	100% covered/ No copay	100% covered/ No copay	Deductible/40% Coinsurance
Durable Medical Equipment	100% covered	100% covered	Deductible/40% Coinsurance
Prosthetics, Orthotics - when medically necessary	100% covered	100% covered	Deductible/40% Coinsurance
Ambulance	100% covered	100% covered	100% covered
Bariatric Surgery	100% covered/No copay	Not Covered	Not Covered
Bariatric Surgery OOA Plan	100% covered/No copay	Deductible/10% Coinsurance	Not Covered
<b>Inpatient Care</b>			
Inpatient Hospital (as many days as medically needed)	100% covered	Deductible/10% Coinsurance/and \$1,250 per admission copay	Deductible/40% Coinsurance/and \$1,500 per admission copay
Inpatient Hospital (as many days as medically needed) OOA Plan	100% covered	Deductible/10% Coinsurance	Deductible/30% Coinsurance/and \$1,250 per admission copay
Surgery, Surgical Assistance, Anesthesia	100% covered	Deductible/10% Coinsurance	Deductible/40% Coinsurance
Skilled Nursing Facility (60 days max per calendar year)	100% covered	Deductible/ 10% Coinsurance	Deductible/40% Coinsurance
<b>Mental Health</b>			
Outpatient	\$20 Copay	\$20 Copay	Deductible/40% Coinsurance
Inpatient Substance Use Rehab	100% covered	100% covered	Deductible/40% Coinsurance
Inpatient Substance Use Detox	100% covered	100% covered	Deductible/40% Coinsurance

**Notes:**

1. Home Healthcare- must be ordered by a physician, provided by or supervised by a registered nurse. Custodial Care and Domiciliary Care are not covered.
2. Northwell Health Fertility is located at 300 Community Drive, Manhasset.
3. Third Party Reproduction is not administered by UHC. Please contact Northwell Health Fertility at 516-562-2229 for more information.
4. Fertility Medication must go through Vivo Health.
5. Coinsurance amounts are off of UnitedHealthcare's contracted rates with providers.
6. Reimbursement schedule varies. Participant pays the difference between United Healthcare payment and the provider charges. If you go out-of-network you may incur very high out of pocket expenses.
7. Compression socks may be covered by Vivo Health only sometime in 2020.
8. Prescribing of Growth Hormone may be covered by Tier 1 only, sometime in 2020.



### Hospital Pre-Certification applies to Northwell Value and Buy-Up plans

The medical plans require pre-certification before you are admitted to an out-of-network hospital. To receive the maximum hospital benefits under your medical plan, you or your physician must call the carrier's pre-certification phone number to pre-certify your hospital admission or emergency visit. You may have to pay a penalty if you do not receive authorization from your medical plan. For pre-certification, call 888-254-3698.

### Prescription Drug Plan for Value or Buy-Up Plan with Vivo Health

Your prescriptions will automatically be covered by Vivo Health if you enroll in a medical plan. Vivo Health offers convenient services such as the mail order plan, specialty pharmacy and a mobile app for your on-the-go pharmacy needs.

Vivo Health has a large pharmacy network, which includes more than 64,000 participating pharmacies, including ten Vivo Health Pharmacy locations. Note: Walgreens (which includes Duane Reade and Rite Aid) is not a participating pharmacy.

Visit [Northwell.edu/myMeds](https://www.northwell.edu/myMeds) for information about Vivo Health and its participating pharmacies.

Benefit for Value or Buy-Up	Cost	Mail Order Cost
Generic Drug	\$10 Copay	\$20 Copay (90-day supply)
Brand Formulary	30% or \$40 minimum/\$80 maximum	30% or \$80 minimum/ \$160 maximum (90-day supply)
Brand Non-Formulary	50% or \$80 minimum/\$160 maximum	50% or \$160 minimum/ \$320 maximum (90-day supply)
Specialty Drug (must submit through Vivo)	Variable copay not to exceed 20% up to \$300 maximum	Variable copay not to exceed 20% up to \$300 maximum (30-day supply)
Out-of-Pocket Max	\$1,600 Individual/ \$3,200 Family	

#### Notes:

- After **three refills** of a maintenance medication at retail, your copay will be 100% at retail unless you refill through mail order.
- If you are using specialty medication, check with Vivo and your manufacturer on their copay assistance program to see if you can apply.
- Northwell currently has in place the Member Pay the Difference. This means that when there is a brand dispensed per your request when generic is available, you will be charged the generic copay plus the difference in cost between the brand and generic.
- Northwell team members are encouraged to take advantage of the convenience and value that our in-system pharmacy, Vivo Health offers. Vivo provides reduced pricing on specific medications for all team members, as well as a full line of Over-The-Counter medications, convenient delivery services and more.
  - Specialty medications delivery to your home or office for FREE
  - Access to a dedicated and knowledgeable team who can collaborate with your providers to provide you with the highest level of care
  - Medication Therapy Management
  - Patient education and drug counseling services



## Wellness Credit Program

If you're enrolled in any of the three medical plan choices you can participate in the Wellness Credit Program. To participate, you must complete four wellness actions (which includes a mandatory Health Risk Assessment (HRA) on the myWellness platform) in exchange for paycheck credits totaling \$1,560 (\$390 each action) per year. **This equates to \$15 per biweekly paycheck and \$16.25 per semi-monthly paycheck.**

**Current medical plan/credit program participants:** Check your Wellness Credit Summary on mySelfService for your date-of-service/compliance. If you have completed the mandatory Health Risk Assessment and three additional actions before Oct. 31 your paycheck credits will begin with the first pay cycle of the following year. If you do not complete your actions until November/December your paycheck credits will be delayed for up to eight weeks into the following calendar year, and will not be retroactive.

If you are missing a wellness action on your Wellness Credit Summary, you can email proof of completion to [benefits@northwell.edu](mailto:benefits@northwell.edu). Paycheck credits will only be given on future paychecks based on the date submitted, and will not be processed retroactively.

**New hires and new to the plan:** If this is your first time enrolling in a medical plan, you'll automatically receive paycheck credits for six months. You must complete four wellness actions (Health Risk Assessment is mandatory) for the credits to continue after your six month grace period is up, or your credits will cease.

### Wellness actions

1. **MANDATORY Online Health Risk Assessment (HRA) wellness action:** Available at [Northwell.edu/myWellness](http://Northwell.edu/myWellness) as a "daily card" or on the programs page under "TAKE THE HRA".
2. Physician Wellness Action: Your annual physical or myWellCheck visit
3. Dental Exam Action: Exam or cleaning
4. Vision Exam Action: Eye exam by a licensed provider
5. Breast Cancer Screening Action: Mammogram
6. Skin Cancer Screening Action: Full body skin check
7. Colorectal Cancer Screening Action: Colonoscopy
8. Cervical Cancer Screening Action: Pap smear
9. Feinstein GaP Registry Action: Visit [Northwell.edu/FeinsteinGAPpledge](http://Northwell.edu/FeinsteinGAPpledge)
10. Financial Well-Being Action: [Northwell.edu/financialwellbeing](http://Northwell.edu/financialwellbeing) is currently being updated. The updated website will be accessible in late 2020. In the meantime, you can get credit for this action by completing a one-on-one financial meeting with a Transamerica representative.
11. Stress Reduction Action: Visit [Northwell.edu/stressless](http://Northwell.edu/stressless)
12. Living Healthy with Diabetes Program Action: Click [here](#) to learn more about the Living Healthy with Diabetes program. To participate, call 1-855-36-GOALS (1-855-364-6527) or email [healthyliving@northwell.edu](mailto:healthyliving@northwell.edu).
13. Tobacco Cessation Program Action: Click [here](#) to learn more about the Tobacco Cessation program and resources to become tobacco-free. To participate, call 516-466-1980 or email [tobaccocenter@northwell.edu](mailto:tobaccocenter@northwell.edu).
14. Healthcare Proxy and Organ Donation Video Action: website in construction

### Compliance and confidentiality

Once your action has been completed, plan providers will send information to the insurance company for processing. Insurance company or other partners store your information securely. They send a date of action completion to your wellness summary by using secure file remittance process. This entire process can take up to ten weeks to complete and is 100% confidential. Your personal health and claims information from the HRA will be stored in a secure database with Virgin Pulse, the third party vendor who hosts the myWellness platform.



## Northwell Health Solutions

Northwell Health Solutions provides care management and coordination to Northwell team members and their dependents who are covered by one of the team member medical plans. Our care management programs are aimed to support you if you have a chronic medical condition or new diagnosis. You do not need a physician's referral or a specific qualifying condition. We will confidentially discuss your needs and partner with you on a plan of care, at no cost to you.

Northwell Health Solutions will work with you to:

- Understand your medications and condition
- Navigate to the right care and providers within the Northwell network
- Coordinate and schedule your appointments, and work with you to identify questions you want to ask your doctors
- Engage your whole healthcare team including your family members, primary and specialty care providers
- Create an individual care plans designed around your goals
- Connect you with programs and support groups, and find resources to help you manage your health

Our care managers provide coordination, support and navigation for any new or chronic conditions or personal goals, including:

- Cancer
- Cardiac Conditions and Hypertension
- Diabetes
- Musculoskeletal Conditions and Rheumatology
- Behavioral and Mental Health
- Weight Loss
- Tobacco cessation

**Contact information for Northwell Health Solutions Care Management Programs:** 516-918-6009

## Clinical Call Center

You and your family members can get answers to questions regarding urgent health support, by calling the Clinical Call Center at 516-918-6005. Reliable advice about urgent health concerns and changes in conditions is provided by experienced Northwell registered nurses certified in emergency communication and trained to recommend the right level of care for you. This service is provided free of charge, 24/7/365 and is 100% confidential.

## Tobacco Cessation Program

Become tobacco free with support from Northwell's Center for Tobacco Control. Northwell offers team members evidence-based, effective cessation programs. The Center for has helped thousands of people quit tobacco, and has one of the highest success rates in the United States. Team members who want to become tobacco-free need to schedule at least two coaching sessions with the Center; these session are free and scheduled at time convenient for you. Team members who participate will receive a starter kit of cessation medications, including nicotine replacement products.

**Contact the Center for Tobacco Control to schedule a session:**

- Call 516-466-1980
- Email [tobaccocenter@northwell.edu](mailto:tobaccocenter@northwell.edu)





### Healthy Living for team members with diabetes

Northwell Health has a program to help team members live healthy with Diabetes. If you have Diabetes, Northwell's Healthy Living program can help you feel better and continue doing the things you enjoy. You will schedule an appointment with a certified diabetes educator to learn the self-care skills you need to stay healthy and active. This Program is accredited by the American Association of Diabetes Educators.

#### Contact the Healthy Living Program to schedule an appointment:

- Call 1-855-36-GOALS (1-855-364-6257)
- Email [healthyliving@northwell.edu](mailto:healthyliving@northwell.edu)

### Well-being benefits

Northwell is continually looking for new and innovative ways to improve our team member's health and well-being all designed to improve your mental and physical well-being with assessment, coaching and follow-up resources in an online convenient and 100% confidential environment.

### Live better with diabetes and Livongo

The Livongo for Diabetes program makes living with diabetes easier by providing participants with a connected meter, unlimited strips, and coaching – all free of charge.

The program offers:

- More than a standard meter: The Livongo meter is connected and provides real-time tips and automatically uploads your blood glucose readings, making log books a thing of the past.
- Unlimited strips at no cost to you: Get as many strips and lancets as you need with no hidden costs. When you are about to run out, Livongo ships more supplies, right to your door.
- Coaching anytime, anywhere: Livongo coaches are Certified Diabetes Educators who are available anytime via phone, text, and a mobile app to give you guidance on your nutrition and lifestyle questions.
- Educational materials: Valuable information and dietary tips will come right to your email inbox, guiding you on a path to a healthier lifestyle.

To join, you or your dependent must be enrolled in the Value, Buy-Up or High Deductible team member medical plan through UnitedHealthcare. Visit

[Join.livongo.com/NORTHWELLHEALTH/now](https://Join.livongo.com/NORTHWELLHEALTH/now) or call (800) 945-4355 and mention registration code NORTHWELLHEALTH.

### Get more joy in your life with myJoyable

myJoyable is a digital behavioral health resource provided by the experts at Joyable at no cost to you. This resource is both web- and app-based and was designed to help individuals with everything from day-to-day stress to more challenging behavioral health experiences.

Once myJoyable verifies your eligibility through your name and full date of birth you will be asked to take a brief quiz. myJoyable will then assess your level of well-being and offer you a choice of services: basic tools or activities, digital coach therapy, or a referral to in-person therapy. Once you choose the platform or app the tool will guide you on an eight-week well-being journey.

Visit [Northwell.edu/myJoyable](https://Northwell.edu/myJoyable) or download the free app from the iOS App Store or Google Play Store and enter the access code 'northwell' to get started on your well-being journey.

*Joyable is Health Insurance Portability and Accountability (HIPAA) compliant and use of Joyable's programs and services are held private and confidential according to the Joyable Privacy Policy and Terms. Your personal program data is never shared with your employer.*

**Size up your drinking habits with myBottleCap**

Northwell's online well-being resource, myBottleCap is a free, convenient and confidential way that you and family members can assess, address and perhaps change your drinking habits so you can be comfortable with your well-being journey, now and in the future.

After a brief assessment gauging the frequency and amount of your alcohol intake, myBottleCap will provide you with an eight-week program that best fits your assessment's results. Resources and support comes in the form of text messaging, or text messaging combined with a personal coach.

Visit [Northwell.edu/myBottleCap](https://Northwell.edu/myBottleCap) promo code: Wellness

*myBottleCap is a Northwell-owned resource through our Center for Addiction Services and Personalized Interventions Research (CASPIR). A research center designed to help people who experience problems as a result of their drinking, is developing and investigating new and innovative ways for people to reduce or stop drinking. myBottleCap fully complies with the Health Insurance Portability and Accountability Act (HIPAA), with specific measures in place to keep your information private.*

**Recover and prevent your aches, pains and injuries with myHealthyBody**

In partnership with Salaso Health Solutions, Northwell Health is offering a robust resource for team members looking to help prevent and manage common aches, pains and injuries – referred to in the medical field as musculoskeletal conditions (muscles, ligaments, tendons and bones).

The online well-being resource, myHealthyBody, was developed by expert clinicians and provides online health assessments and delivery of evidence-based solutions through videos and educational resources, and suggests the appropriate care setting for treatment is necessary.

Visit [Northwell.edu/myHealthyBody](https://Northwell.edu/myHealthyBody)



## Dental Plans

Cigna offers two plans that provide different levels of dental benefits - each gives you and your family access to affordable, quality dental care and dentists.

**The Dental Preferred Provider Organization (DPPO or PPO)** costs a bit more per paycheck but you'll have access to both in- and out-of-network dentists and services. Referrals are not required for in- or out-of-network specialists.

**The Dental Care Access Network** (formerly referred to as a Dental Health Maintenance Organization or DHMO) gives you access to Cigna Dental or in-network services only. The plan has \$0 deductibles, with unlimited maximum. Referrals to a specialist is required.

For more information, call Cigna at 888-336-8258 for the PPO Plan and 800-367-1037 for the HMO Plan.

Cigna DPPO	In-network (Advantage only)	Out-of-network (with discounts)
Deductibles	\$50 Individual/\$100 Family	\$50 Individual/\$100 Family
Maximums	\$2,000 Annual	\$2,000 Annual
Preventive/ Diagnostic Care	100% - twice annually	80%
Basic Restorative Care	80% (after deductible)	70% (after deductible)
Major Restorative Care	50% (after deductible)	50% (after deductible)
Orthodontic Care	50% (after deductible) \$1,500 Lifetime	50% (after deductible) \$1,500 Lifetime
Referrals to Specialists	Not required	Not required
*Dental Implants	\$1,800 lifetime max for implant coverage, no member cost share up to the max of \$1,800 (\$900 for implants placed by residents and \$1,800 for implants placed by attending dentists)	

To pay the least out-of-pocket, stay in the Advantage network. If you go outside of the Advantage network, you will have access to discounts under the Dental DPPO network.

Members who enroll in the DPPO plan will not receive a dental plan ID card. Dental providers use the members social security number to verify coverage.

\*Members enrolled in the Cigna PPO plan are eligible for dental implants. Coverage restricted to the following Northwell dental clinics only:

LIJ Medical Center, 270-05 76th Ave, New Hyde Park, NY, 11040 Phone: 718-470-7120

Northshore Dental Manhasset, 400 Community Drive,, Manhasset, NY, 11030 Phone: 516-562-4525

### Cigna Dental Care Access Network (formerly referred to as Dental Health Maintenance Organization)

Cigna DHMO	In-network ONLY
Deductibles	\$0
Maximums	Unlimited
Preventative/ Diagnostic Care	100% covered
Major/Basic Restorative Care	Fixed pre-set fees
Orthodontic Care	Lifetime maximum benefits/24-month treatment
Referrals to Specialists	Referral required



### Davis Vision Plan

	In-Network Coverage	Out-of-Network Reimbursement
Annual Exam	100% covered	\$30
Spectacle Lenses	100% covered	\$25 for single vision lenses \$35 for bifocal lenses \$45 for trifocal lenses \$60 for lenticular (post cataract) lenses
Contact Lenses	Disposables – 8 multi packs of lenses Planned replacements - 4 multi packs of lenses	\$225 for Medical Reason \$75 for Elective
Eyeglass Frame	100% (Certain Styles) Covered	\$130 allowance + 20% discount at Davis Visionworks  \$75 allowance at any participating providers other than Visionworks
Warranty on Eyeglasses (not covered for loss)	100% covered	None
Scratch-Resistant Protection	100% covered	None
Laser Vision Correction	Discounted	None



## Benefit Rates

### 365 rates

Benefit Group 1 AVP/Director (Bi-Weekly Rates)				
	Single	EE+Spouse	EE+Child(ren)	Family
<b>Medical</b>				
<b>High Deductible Health Plan</b>				
<b>FT</b>	\$86.99	\$122.08	\$118.57	\$157.17
<b>PT</b>	\$109.36	\$167.87	\$162.01	\$226.37
<b>Value Plan</b>				
<b>FT</b>	\$130.69	\$222.60	\$213.42	\$314.55
<b>PT</b>	\$189.33	\$342.59	\$327.26	\$495.83
<b>Buy-Up Plan</b>				
<b>FT</b>	\$182.25	\$331.95	\$316.99	\$481.67
<b>PT</b>	\$253.82	\$479.88	\$457.28	\$705.93
<b>Dental</b>				
<b>DHMO Plan</b>				
<b>FT/PT</b>	\$7.24	\$14.65	\$13.92	\$21.98
<b>DPPO Plan</b>				
<b>FT</b>	\$19.47	\$38.91	\$36.98	\$54.50
<b>PT</b>	\$20.65	\$41.31	\$39.26	\$58.21
<b>Vision</b>				
<b>FT/PT</b>	\$2.62	\$5.22	\$4.96	\$7.84

Benefit Group 1 AVP/Director (Semi-Monthly Rates)				
	Single	EE+Spouse	EE+Child(ren)	Family
<b>Medical</b>				
<b>High Deductible Health Plan</b>				
<b>FT</b>	\$94.24	\$132.25	\$128.45	\$170.27
<b>PT</b>	\$118.47	\$181.86	\$175.51	\$245.23
<b>Value Plan</b>				
<b>FT</b>	\$141.58	\$241.15	\$231.21	\$340.76
<b>PT</b>	\$205.11	\$371.14	\$354.53	\$537.15
<b>Buy-Up Plan</b>				
<b>FT</b>	\$197.44	\$359.61	\$343.41	\$521.81
<b>PT</b>	\$274.97	\$519.87	\$495.39	\$764.76
<b>Dental</b>				
<b>DHMO Plan</b>				
<b>FT/PT</b>	\$7.84	\$15.87	\$15.08	\$23.81
<b>DPPO Plan</b>				
<b>FT</b>	\$21.09	\$42.15	\$40.06	\$59.04
<b>PT</b>	\$22.37	\$44.75	\$42.53	\$63.06
<b>Vision</b>				
<b>FT/PT</b>	\$2.84	\$5.66	\$5.37	\$8.49

Rates do not include wellness credits and spousal surcharge.





Benefit Group 2 Managers/Clinical Mid-Level Providers (Bi-Weekly Rates)				
	Single	EE+Spouse	EE+Child(ren)	Family
<b>Medical</b>				
<b>High Deductible Health Plan</b>				
<b>FT</b>	\$77.06	\$99.78	\$97.51	\$122.52
<b>PT</b>	\$97.44	\$141.47	\$137.07	\$185.53
<b>Value Plan</b>				
<b>FT</b>	\$104.67	\$164.21	\$158.26	\$223.76
<b>PT</b>	\$158.05	\$273.45	\$261.90	\$388.83
<b>Buy-Up Plan</b>				
<b>FT</b>	\$155.10	\$275.81	\$263.74	\$396.54
<b>PT</b>	\$224.00	\$418.26	\$398.83	\$612.49
<b>Dental</b>				
<b>DHMO Plan</b>				
<b>FT/PT</b>	\$7.24	\$14.65	\$13.92	\$21.98
<b>DPPO Plan</b>				
<b>FT</b>	\$15.08	\$30.19	\$28.68	\$42.26
<b>PT</b>	\$16.12	\$32.24	\$30.62	\$45.14
<b>Vision</b>				
<b>FT/PT</b>	\$2.62	\$5.22	\$4.96	\$7.84

Benefit Group 2 Managers/Clinical Mid-Level Providers (Semi-Monthly Rates)				
	Single	EE+Spouse	EE+Child(ren)	Family
<b>Medical</b>				
<b>High Deductible Health Plan</b>				
<b>FT</b>	\$83.48	\$108.10	\$105.64	\$132.73
<b>PT</b>	\$105.56	\$153.26	\$148.49	\$200.99
<b>Value Plan</b>				
<b>FT</b>	\$113.39	\$177.89	\$171.45	\$242.41
<b>PT</b>	\$171.22	\$296.24	\$283.73	\$421.23
<b>Buy-Up Plan</b>				
<b>FT</b>	\$168.03	\$298.79	\$285.72	\$429.59
<b>PT</b>	\$242.67	\$453.12	\$432.07	\$663.53
<b>Dental</b>				
<b>DHMO Plan</b>				
<b>FT/PT</b>	\$7.84	\$15.87	\$15.08	\$23.81
<b>DPPO Plan</b>				
<b>FT</b>	\$16.34	\$32.71	\$31.07	\$45.78
<b>PT</b>	\$17.46	\$34.93	\$33.17	\$48.90
<b>Vision</b>				
<b>FT/PT</b>	\$2.84	\$5.66	\$5.37	\$8.49

**Rates do not include wellness credits and spousal surcharge**



Benefit Group 3 Staff (Bi-Weekly Rates)				
	Single	EE+Spouse	EE+Child(ren)	Family
<b>Medical</b>				
<b>High Deductible Health Plan</b>				
<b>FT</b>	\$60.00	\$60.00	\$60.00	\$60.00
<b>PT</b>	\$78.72	\$97.44	\$95.57	\$116.15
<b>Value Plan</b>				
<b>FT</b>	\$60.00	\$60.00	\$60.00	\$60.00
<b>PT</b>	\$109.05	\$158.05	\$153.15	\$207.10
<b>Buy-Up Plan</b>				
<b>FT</b>	\$127.89	\$200.51	\$193.25	\$273.13
<b>PT</b>	\$194.17	\$333.01	\$319.13	\$471.84
<b>Dental</b>				
<b>DHMO Plan</b>				
<b>FT/PT</b>	\$0.00	\$0.00	\$0.00	\$0.00
<b>DPPO Plan</b>				
<b>FT</b>	\$8.08	\$16.15	\$15.34	\$22.60
<b>PT</b>	\$8.61	\$20.61	\$19.60	\$31.16
<b>Vision</b>				
<b>FT/PT</b>	\$2.62	\$5.22	\$4.96	\$7.84

Benefit Group 3 Staff (Semi-Monthly Rates)				
	Single	EE+Spouse	EE+Child(ren)	Family
<b>Medical</b>				
<b>High Deductible Health Plan</b>				
<b>FT</b>	\$65.00	\$65.00	\$65.00	\$65.00
<b>PT</b>	\$85.28	\$105.56	\$103.53	\$125.83
<b>Value Plan</b>				
<b>FT</b>	\$65.00	\$65.00	\$65.00	\$65.00
<b>PT</b>	\$118.14	\$171.22	\$165.91	\$224.36
<b>Buy-Up Plan</b>				
<b>FT</b>	\$138.55	\$217.22	\$209.35	\$295.89
<b>PT</b>	\$210.35	\$360.76	\$345.72	\$511.16
<b>Dental</b>				
<b>DHMO Plan</b>				
<b>FT/PT</b>	\$0.00	\$0.00	\$0.00	\$0.00
<b>DPPO Plan</b>				
<b>FT</b>	\$8.75	\$17.50	\$16.62	\$24.48
<b>PT</b>	\$9.33	\$22.33	\$21.23	\$33.76
<b>Vision</b>				
<b>FT/PT</b>	\$2.84	\$5.66	\$5.37	\$8.49

Rates do not include wellness credits and spousal surcharge.



## Non-365 rates

All Non-365 (Benefit Groups 1, 2 & 3) Bi-Weekly Rates				
	Single	EE+Spouse	EE+Child(ren)	Family
<b>Medical</b>				
<b>High Deductible Health Plan</b>				
FT	\$77.06	\$99.78	\$97.51	\$122.52
PT	\$97.44	\$141.47	\$137.07	\$185.53
<b>Value Plan</b>				
FT	\$104.67	\$164.21	\$158.26	\$223.76
PT	\$158.05	\$273.45	\$261.90	\$388.83
<b>Buy-Up Plan</b>				
FT	\$155.10	\$275.81	\$263.74	\$396.54
PT	\$224.00	\$418.26	\$398.83	\$612.49
<b>Dental</b>				
<b>DHMO Plan</b>				
FT/PT	\$7.24	\$14.65	\$13.92	\$21.98
<b>DPPO Plan</b>				
FT	\$15.08	\$30.19	\$28.68	\$42.26
PT	\$16.12	\$32.24	\$30.62	\$45.14
<b>Vision</b>				
FT/PT	\$2.62	\$5.22	\$4.96	\$7.84

All Non-365 (Benefit Groups 1, 2 & 3) Semi-Monthly Rates				
	Single	EE+Spouse	EE+Child(ren)	Family
<b>Medical</b>				
<b>High Deductible Health Plan</b>				
FT	\$83.48	\$108.10	\$105.64	\$132.73
PT	\$105.56	\$153.26	\$148.49	\$200.99
<b>Value Plan</b>				
FT	\$113.39	\$177.89	\$171.45	\$242.41
PT	\$171.22	\$296.24	\$283.73	\$421.23
<b>Buy-Up Plan</b>				
FT	\$168.03	\$298.79	\$285.72	\$429.59
PT	\$242.67	\$453.12	\$432.07	\$663.53
<b>Dental</b>				
<b>DHMO Plan</b>				
FT/PT	\$7.84	\$15.87	\$15.08	\$23.81
<b>DPPO Plan</b>				
FT	\$16.34	\$32.71	\$31.07	\$45.78
PT	\$17.46	\$34.93	\$33.17	\$48.90
<b>Vision</b>				
FT/PT	\$2.84	\$5.66	\$5.37	\$8.49

Rates do not include wellness credits and spousal surcharge.



### Flexible Spending Accounts (FSAs)

With an FSA, you put aside pre-tax dollars to pay for healthcare or dependent care expenses. You can enroll in FSAs during benefits open enrollment, even if you choose not to enroll in any of our health benefits. You must re-enroll in FSAs each year, during open enrollment, your election(s) from the previous year will not rollover.

**Healthcare FSAs** allow you to set aside \$150 to \$2,750 per year to pay for medical, prescription, dental and vision care out-of-pocket expenses incurred by you and your eligible dependents. Eligible products do not include over-the-counter (OTC) drugs. For new participants, a debit card with access to the full amount you elected will be mailed to you in January. If you have an HSA account, you can only use your FSA to pay for dental and vision related expenses.

**Dependent Care FSAs** allow you to set aside \$150 to \$5,000 per family, per year to pay for dependent care expenses, such as elder care or the care of a disabled spouse, and daycare costs and summer camps for those under the age of 13.

- Dependent Care FSAs are audited by the IRS for discrimination testing. Highly compensated team members may have their benefits reduced. If applicable, you will be notified during the first half of the year.

**Grace period for Healthcare FSA:** The Internal Revenue Service has approved a 10-week extension of the incurred period for health care expenses. This means that if you have funds in your Healthcare FSA remaining from the prior plan year, you can still submit eligible health care expenses incurred from Jan. 1 until March 15 of the plan year following the year of contribution, and they will be considered eligible for reimbursement. The deadline to submit claims for both the Healthcare FSA and Dependent Care FSA is March 31.

### Commuter benefit

A Commuter Transit Account is a pre-tax benefit account used to pay for public transit – including train, subway, bus, and ferry – as part of your daily commute to and from work. The pre-tax payroll deduction can be set up through your PayFlex account. Identify the transit agency pass you want to purchase, and you will have the option automatic delivery to your home or office. Visit [payflex.com](https://payflex.com) or call 844-729-3539 to enroll. Parking, Transit and Vanpooling monthly limit is \$270 effective January 1, 2020. Team members on Leave of Absence are not eligible to contribute.



## Disability

### Short term disability

**New York State (NYS) Disability:** This benefit pays you 50% of your weekly pay, up to \$170 per week, begins on 8th day - for a max of 26 weeks during a period of 52 consecutive weeks.

**Benefit Group 1 and 1A (365):** You'll receive salary continuation for 26 weeks – a disability form must be approved by our vendor. You're automatically enrolled at no cost. Team members receiving salary continuation do not receive NYS disability.

**Benefit Group 2 (365):** You'll receive salary continuation for 12 weeks. You're automatically enrolled at no cost. Team members receiving salary continuation do not receive NYS disability.

After 12 weeks the Basic Short-Term Disability Plan will begin and can continue for up to 14 weeks. This plan is equal to 50% of your base salary including NYS disability, up to a maximum of \$692.31/week, supplemented by PTO. You're automatically enrolled at no cost.

If you'd like to elect to buy-up to the 60% Plan, you will receive 60% of your base pay including NYS disability benefit, max \$2,000/week for weeks 12-26. This is non-taxable.

**Benefit Group 3 (365) and Benefit Groups 1, 2 and 3 Non-365:** The benefit is equal to 50% of your base pay including NYS disability benefit, up to a maximum of \$692.31/week. The first two weeks of disability leave will be subtracted from PTO. 50% will begin on the 15th calendar day and cover up to 26 weeks. You're automatically enrolled at no cost.

If you'd like to elect to buy-up to the 60% Plan, you'll receive 60% of your base pay including NYS disability benefit, up to a maximum \$2,000/week. The first two weeks will be subtracted from PTO, disability will begin on the 15th calendar day and cover up to 26 weeks.

### Long term disability

**Benefit Group 1, 1A and 2 (365):** This benefit is equal to 50% of your base pay, up to a maximum of \$10,000 per month. You pay taxes on employer-paid premium, so that benefits are tax free. You're automatically enrolled at no cost.

If you'd like to buy-up to the 60% Plan, you will receive 60% of your base pay, up to a maximum of \$20,000 per month. You must elect this benefit and are responsible for the cost.

**Benefit Group 3 (365) and Benefit Groups 1, 2 and 3 Non-365:** This is a voluntary 50% plan, with benefits equal to 50% of your base pay, up to a maximum of \$10,000 per month. You're automatically enrolled in this benefit, and are responsible for the cost. You must opt out within your first 30 days of employment or during open enrollment if you do not want the benefit.

If you would like to buy-up to the 60% Plan, you will receive 60% of your base pay, up to a maximum of \$10,000 per month. You must elect this benefit and are responsible to pay for its cost.

### Important note about disability benefit payments in 2020

During the period of an authorized Leave of Absence (LOA) while you continue to receive a paycheck your benefit deductions will continue for no more than six months. If you are no longer receiving a paycheck, or if your paycheck is no longer sufficient to cover your pay period benefit deductions, you will be responsible for submitting a payment to Northwell for the total cost of your benefits. If you are out on a LOA for more than six months and/or approved for long-term disability, you will need to elect cobra to continue health coverage.





## Life insurance

You are automatically covered at no cost for basic term life insurance equal to 1.5 times your base salary and augmentation income up to \$500,000.

**Supplemental life and accidental death and dismemberment:** 1 - 5 times your pay up to 1 million is offered to you as additional income for your survivors, with premiums based on group rates, your age and smoking status. Elections for supplemental life are based on whether you are an existing team member (able to increase your election in increments of 1x up to a maximum of 3x or \$500,000 of base salary with no medical underwriting) or a newly hired team member (able to elect up to 3x your base salary to a max of \$500,000 at time of hire). Higher elections will generate a requirement for Evidence of Insurability (EOI) from Aetna.

In addition, you may elect life insurance for your spouse and/or child(ren). You have the option to choose dependent life insurance at \$5,000 or \$10,000, and spouse at \$25,000 or \$50,000. Benefits for a dependent child will continue until the date they reach age 26. It is the team member's responsibility to notify the Northwell benefits department to remove the dependent child from the benefit elections. You can complete/update your beneficiary information on employee self-service.

**Age reduction rule:** Your life insurance will be reduced by the following:

Age 65- benefit is reduced to 65% of your original life amount

Age 70- benefit is reduced to 40% of your original life amount

Age 75- benefit is reduced to 25% of your original life amount

The reduction will go into effect on the first day of the calendar month in which you reach the age specified.

**Imputed income:** Internal Revenue Service regulations require that you be taxed on the value of any employer provided basic life insurance that is more than \$50,000. This value is known as "imputed income" and is shown on your paycheck and on your annual W-2 statement. If you do not wish to pay taxes on the value of basic life insurance in excess of \$50,000, you may waive coverage over \$50,000. Future election of the waived coverage is subject to Evidence of Insurability.

**Portability and conversion** provisions allow a team member to continue life insurance coverage that has been lost due to either termination of employment, reduction in coverage, or a transfer to a position that is not eligible for the benefit. The deadline for applying for portability and conversion through Aetna Life Insurance Company is 31 days following coverage termination or reduction. Call Aetna Life Insurance Company at 800-523-5065.

## Beneficiaries

Consider who you would want to receive your insurance money should something happen to you. You can put down as many as you want as long as the total distribution adds up to 100%. Your beneficiary should be the person or persons for whom you wish to provide financial protection in the event of your death.

To update your life insurance beneficiaries: login to mySelfService>myBenefits>Review Benefits Selection>Supplemental Life and Basic Life>Click on User Guide



## Voluntary Benefits through Aon Voluntary Benefits and Enrollment Solutions

Additional coverage is offered through Northwell's partner Aon. Voluntary benefit policies are portable, meaning you can take them with you if you should leave the organization. Below is a list of offerings you can request a quote for during benefits open enrollment or upon hire. For more information, to get a quote and enroll, call the Aon Voluntary Benefits and Enrollment Solutions Enrollment Center at 1-888-561-0240, Monday through Friday, 9:00 a.m. to 6:00 p.m. ET or visit [Northwell.edu/voluntarybenefits](https://Northwell.edu/voluntarybenefits).

### Critical Illness Insurance

The policy pays the full benefit directly to you if you are diagnosed with a covered condition. You can use this benefit any way you choose – to pay deductibles, copays, coinsurance, expenses your family incurs to be by your side, or simply to replace your lost earnings from being out of work.

Covered illnesses include:

- Heart Attack
- Cancer\*
- Stroke
- End stage renal (kidney) failure
- Major organ transplant
- Coronary artery bypass surgery\*

*\*The coverage pays 25% of the face amount of the policy once per lifetime for non-invasive cancer and coronary artery bypass surgery.*

Plan features:

- You choose the benefit amount when you enroll.
- Coverage is guaranteed Issue up to \$30,000 during this Open Enrollment period.
- You do not have to be terminally ill to receive benefits.
- Family coverage is available
- A wellness benefit is included, which pays a \$50 annual benefit if a covered health screening test is performed (blood tests, stress tests, colonoscopies, chest X-rays, etc.).
- Coverage is portable – you can take your policy with you if you change jobs or retire.

*The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable. This benefit becomes effective the first of the month in which your benefit payroll deductions begin.*

### Accident Insurance

Accident Insurance is designed to help cover the out-of-pocket medical expenses and extra bills you may incur as a result of an accident. The plan pays a benefit directly to you – not a doctor or hospital – for injuries and accident-related expenses. You can use the money however you choose.

Benefit amounts are based on the type of injury and treatment needed.

Covered injuries and accident-related expenses include:

- Fractures
- Dislocations
- Hospitalizations
- Physical Therapy
- Emergency Room Treatment
- Transportation
- Lodging, and more



#### Plan features:

- Benefits are paid for accidents that occur on or off-the-job, so you have 24-hour coverage
- You can also elect to cover your spouse, same sex domestic partner and children
- There are no health questions or physical exams required
- You can take your policy with you if you change jobs or retire

*The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable. This benefit becomes effective the first of the month in which your benefit payroll deductions begin.*

#### Hospital Indemnity Insurance

This coverage pays a benefit to you when you are admitted to the hospital and additional amounts for each day you are confined. The funds can be used to pay for out-of-pocket expenses, such as coinsurance and deductibles, and even for non-medical expenses like rent or mortgage payments, car payments, groceries, child care and more.

#### Plan highlights:

- No pre-existing condition limitations.
- No waiting period.
- Benefits do NOT reduce as you get older.
- Coverage can be purchased for your spouse and children (team member must elect coverage).

#### Additional plan features:

- Hospital Admission - \$1,000 per confinement
- Hospital Confinement - \$165 per day, up to 31 days for each covered sickness or accident
- Hospital Intensive Care - \$165 per day up to 10 days per confinement for each covered sickness or accident (paid in addition to Hospital Confinement benefit)
- Guaranteed Issue – If you enroll during this Open Enrollment period, you will not be required to provide medical information

*The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable. This benefit becomes effective the first of the month in which your benefit payroll deductions begin.*

#### Permanent Life Insurance

Permanent Life Insurance is an individual insurance policy designed to provide a death benefit to your beneficiaries if something should happen to you. It can also build cash value that you can utilize while you are still living. At an affordable premium, you can have the added financial protection you and your family may need during times of uncertainty.

#### Plan features:

- You can purchase coverage for yourself, your spouse, your children and/or your grandchildren.
- Permanent Life Insurance is voluntary, which means you purchase the precise amount of coverage that is right for your needs.
- The benefit is Guaranteed Issue, so no physical exams are required to apply for coverage up to a certain amount during this Open Enrollment period.
- As the policy builds cash value, you can eventually use it to make premium payments or to pay urgent expenses while you are still living.
- You can take your policy with you if you leave the company or retire.
- A Long Term Care Rider is included, which provides benefits for nursing home care, home health care or adult day care



Permanent Life Insurance never expires. You keep the policy as long as you make the payments, which means the premiums will not go up. Lock in a lower premium NOW and save thousands of dollars in the future! Cost varies based on age, coverage level and tobacco use.

*The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations that may affect any benefits payable. Your Permanent Life Insurance election is effective the first of the month following the month in which your benefit payroll deductions begin.*

### **ID Theft**

Identity theft protection provides comprehensive, proactive identity theft monitoring and recovery assistance. By constantly monitoring your personal and financial data, this service catches fraud early, and helps you act quickly to limit the damage of stolen information.

*This benefit becomes effective the first of the month in which your benefit payroll deductions begin.*

### **Legal Insurance**

The plan gives eligible team members and their dependents access to a network of local attorneys for telephone and in-office consultations. The network can provide comprehensive legal assistance and discounted representation on a variety of legal needs.

Some covered services include:

- Document review
- Wills
- Name changes
- Estate administration
- Document preparation, including Power of Attorney, deeds, promissory notes and mortgages
- Lawyer office work
- Adoptions
- Administrative hearings
- Real estate transfer
- Debt collection defense

*This benefit becomes effective the first of the month in which your benefit payroll deductions begin.*

### **Pet Insurance**

Pet Insurance reimburses eligible veterinary expenses relating to accidents, illnesses and injuries for dogs, cats, birds and several exotic pets. Optional wellness protection coverage is also available for routine preventative exams and services. The premium is based on the age of the pet, species and breed. Coverage includes the option to use your preferred vet and 24/7 access to a vet helpline. For more information, visit [petinsurance.com](https://www.petinsurance.com).

*This benefit becomes effective the first of the month in which your benefit payroll deductions begin.*



## Retirement

Northwell's generous retirement program provides a solid foundation to help you save for your future. Whether you are rolling over a retirement plan or just starting to contribute, it's never too late to start saving for retirement.

Northwell's retirement plans differ depending on your hiring date. The following information outlines what each population is offered through Northwell and our partners at Transamerica Retirement Solutions.

- The Cash Balance Plan (Defined Benefit) is a fixed interest pension plan funded and administered by Northwell and there is no action needed on your part.
- The 401(k), 403(b) and 457(b) plans (Defined Contribution) allows team member contributions to grow tax-deferred until withdrawn at retirement. All newly hired team members are automatically enrolled in the plan for 3% of their annual pre-tax salary after 30 days from their date of hire. Your contribution will be automatically increased by 1% every year until you reach 10%. To receive the maximum employer contribution (which starts after one year in which you worked at least 975 hours), you must contribute at least 6% of your annual salary. To set your contribution at 6% or more, go to [northwell.edu/myretirement](http://northwell.edu/myretirement) or call Transamerica at 844-675-4547 10 days from your hire date. You may waive or change participation in the plan at any time on the Transamerica website.
- 457(b) plan (Defined Contribution) is similar the above plans, but only applicable for those in Benefit Group 1a or 1 who earn in excess of \$175,000.
- The Defined Contribution retirement plans are administered by Transamerica Retirement Solutions. For more information, contact Transamerica at 844-675-4547 or visit [Northwell.edu/myRetirement](http://Northwell.edu/myRetirement) to register/login to your account.

More information about these benefits can be found below. Be sure to review the section that pertains to your date of hire.

**\*Excludes Peconic Bay Medical Center, Northern Westchester and Phelps team members. Please contact your site HR for more information about your retirement benefits.**

## For those hired prior to July 1, 2018

Your retirement benefit consists of three plans, two of which include employer contributions:

- The Cash Balance Plan
- 403(b) Plan/ 401(k) Plan
- 457(b) Plan

### Note about internal transfers:

- If you are a non-union team member who transfers to another non-union position you will receive 403(b)/401(k) with Cash Balance
- If you transfer from union (excluding Staten Island UFT Nurses, Huntington with DB plan only and Lenox Hill with DB plan only) to a non-union position you will receive the new 401(k) formula

### **Cash Balance Plan**

You became a participant of the Cash Balance Plan the first of the following quarter after your one year anniversary. You were automatically enrolled in the Cash Balance Plan as long as you met the eligibility requirements. Each quarter, your account is credited with pay-based credits equal to 3% of your eligible



pay for the previous quarter as well as interest credits. Your account is 100% funded by Northwell Health, there are no team member contributions to this account. The Plan's assets are held in a trust.

At retirement, vested participants receive a specified benefit. Being "vested" means that you have the right to receive benefits from the Plan when you retire. You are vested in the Cash Balance Plan after you have worked for Northwell for three years in which you worked at least 975 hours.

Remember to elect your Cash Balance Beneficiary - this will ensure your money will be designated to your beneficiary (ies). If you are married, your spouse must be designated for at least 50% of your account unless he/she signs the consent form designating otherwise.

You can view your Cash Balance balance on your quarterly statement, or online, from Transamerica at [Northwell.edu/myRetirement](https://Northwell.edu/myRetirement). You can also access your account information, update your beneficiaries, and run pension estimates by visiting [Northwell.edu/mybenefitscenter](https://Northwell.edu/mybenefitscenter)

#### Retirement specifications

- The "normal" age of retirement is considered 65. You're eligible for early retirement at age 55 with a minimum of five years of service with Northwell. If you elect to start receiving your Cash Balance Plan distribution before your normal retirement age, after you satisfy your early retirement eligibility, your distribution will be reduced. Your monthly payments will be lessened to reflect the longer period of expected payments.
- If you continue working past your normal retirement age, your deferred retirement date is the first day of the month coincident with, or following your actual retirement. As an active team member, the earliest you may start receiving a monthly benefit is April 1<sup>st</sup> following the year in which you turn 70½ years old.

#### **403(b)/401(k) Plan**

##### Team member contributions

You may contribute from 1% to 75% of your pay on a pre-tax basis up to the IRS limit (\$19,500 in 2020 if you're under 50 and \$26,000 if you're 50 and over). Team members may make Roth contributions up to 75% of their salary annually after-tax. Roth contributions are included in the annual IRS contribution limit. Both pre-tax and Roth contributions in total should not exceed 75% of your pay. Voluntary contributions are remitted to Transamerica weekly.

Both plans offer a wide array of investment options which allow you to diversify your investments. To make changes to your investment allocation, go to [Northwell.edu/myRetirement](https://Northwell.edu/myRetirement). If you do not designate an investment allocation, you will be automatically invested in a Vanguard Target Date Retirement Fund which is the default investment option. You may change your contributions and your investment allocation at any time.

The Northwell plan allows for after-tax contributions to be converted to a Roth account within your plan. Please be aware that there are important tax and other considerations involved in Roth conversions. If you're considering converting any balances to Roth, please see your SPD posted on the intranet or call Transamerica at 844-675-4547. You may also wish to consult with a qualified financial or tax professional.

##### Employer contributions

You're eligible to receive employer basic and matching contributions after the first anniversary of your



hire date. Northwell will begin basic contributions of 3% of your eligible earnings\* to your account. Northwell will also match 33.33% of your voluntary pre-tax and Roth contributions, up to 2% of your eligible pay, if you contribute at least 6% to your account.

Once eligible, employer contributions are made on a quarterly basis. You must be actively employed on the last day of the quarter to receive the contributions for that quarter. Contributions will be posted to your account in the month following the end of the quarter.

You are always 100% vested in your own contributions. Employer contributions are subject to the following vesting schedule:

- 20% after 2 years of service
- 40% after 3 years of service
- 60% after 4 years of service
- 80% after 5 years of service
- 100% after 6 years of service

**Note:** Team members who attain age 65 while actively employed by Northwell will be fully (100%) vested in their basic and matching contributions in the Plan.

\* Your eligible compensation includes your base pay (shift differential, fringe base and augmentation). Compensation in excess of the IRS limit is not taken into account (the limit is \$285,000 in 2020); this limit is subject to a cost of living adjustment in future years.

**Note:** Total employer and team member contributions cannot exceed \$57,000 annually/\$63,500 if you are over age 50 (in 2020).

## For those hired on or after July 1, 2018

Your retirement benefit consists of two plans, one of which includes employer contributions:

- 401(k) Plan
- 457(b) Plan: for those in Benefit Group 1 or 1a earning \$175,000 or more

### **Note about internal transfers:**

- If you are a non-union team member who transfers to another non-union position you will receive the new 401(k) formula
- If you transfer from union (excluding Staten Island UFT Nurses, Huntington with DB plan only and Lenox Hill with DB plan only) to a non-union position you will receive the new 401(k) formula

## 401(k) Plan

### Team member contributions

You may contribute from 1% to 75% of your pay on a pre-tax basis up to the IRS limit (\$19,500 in 2020 if you're under 50 and \$26,000 if you're 50 and over). Team members may make Roth contributions up to 75% of their salary annually after-tax. Roth contributions are included in the annual IRS contribution limit. Both pre-tax and Roth contributions in total should not exceed 75% of your pay. Voluntary contributions are remitted to Transamerica weekly.

Both plans offer a wide array of investment options which allow you to diversify your investments. To make changes to your investment allocation, go to [Northwell.edu/myRetirement](https://Northwell.edu/myRetirement). If you do not designate





an investment allocation, you will be automatically invested in a Vanguard Target Date Retirement Fund which is the default investment option. You may change your contributions and your investment allocation at any time.

The Northwell plan allows for after-tax contributions to be converted to a Roth account within your plan. Please be aware that there are important tax and other considerations involved in Roth conversions. If you're considering converting any balances to Roth, please see your SPD posted on the intranet or call Transamerica at 844-675-4547. You may also wish to consult with a qualified financial or tax professional.

### Employer Contributions

You are eligible to receive employer basic and matching contributions after the first anniversary of your hire date. Northwell will begin Basic contributions of 5.5% of your eligible earnings\* to your account. Northwell will also match 33.33% of your voluntary pre-tax and Roth contributions, up to 2% of your eligible pay, if you contribute at least 6% to your account. Total employer contribution is 7.5%.

Once eligible, employer contributions are made on a quarterly basis. You must be actively employed on the last day of the quarter to receive the contributions for that quarter. Contributions will be posted to your account in the month following the end of the quarter.

You are always 100% vested in your own contributions. Employer contributions are subject to the following vesting schedule:

- 20% after 2 years of service
- 40% after 3 years of service
- 60% after 4 years of service
- 80% after 5 years of service
- 100% after 6 years of service

Note: Team members who attain age 65 while actively employed by Northwell Health will be fully (100%) vested in their basic and matching contributions in the Plan.

\* Your eligible compensation includes your base pay (shift differential, fringe base and augmentation). Compensation in excess of the IRS limit is not taken into account (the limit is \$285,000 in 2020); this limit is subject to a cost of living adjustment in future years.

**Note:** Total employer and team member contributions cannot exceed \$57,000 annually/\$63,500 if you are over age 50 (in 2020).



### 457(b) Plan

The 457(b) Plan is available to team members whose annual base pay and augmentation are greater than or equal to \$175,000 and are in Benefit Group 1 or 1a regardless of their hire date or other retirement programs. This benefit provides another opportunity to contribute to retirement savings on a tax-deferred basis, allowing contributions to be directed into existing investment options.

Upon meeting eligibility, a welcome letter with additional instructions will be sent by Transamerica. Enrollment in the Plan is available at any time. Please note elections become effective as of the second paycheck in the following month.

You may contribute up to 100% of your eligible pay (up to \$19,500 in 2020). If your contribution exceeds the annual dollar limit, the excess contribution must be distributed to you by no later than the following April 15. There are no employer contributions to this Plan.

The rules permit you to participate in both the 401(k)/403(b) and 457(b) Plans simultaneously. Generally, if you choose to participate in the 457(b) Plan, you should first consider maximizing your elective salary deferral contributions to the 401(k)/403(b) Plan.

If base pay decreases below \$175,000, your contributions will be stopped in the following year.

#### "Three-year" Catch-up Contribution

The three-year catch-up provision gives you the opportunity to make up for prior years in which you did not contribute up to the Plan's maximum annual limit, based on your past years of eligibility. You have the option to make this contribution for prior years in which you were either participating in, or eligible to, participate in the Plan. The Plan was originally effective in 2002.

The three-year catch-up contribution may only be used in the three years prior to your normal retirement age ("NRA"). You may elect your normal retirement age in writing as any age between 65 and 70½. The three-year catch up cannot be used in the same year of your actual retirement or later. For example, if you plan to retire at age 70½, you may only contribute the three-year catch-up contribution during the years you attain ages 67, 68 and 69.

Call Transamerica at **844-675-4547**, for more information and an eligibility determination.



## 401(k)/403(b) Notes

### Transactions/rollovers

If you have an existing eligible retirement plan account with a prior employer or an IRA eligible for rollover, you may transfer or rollover all or some of those assets into your 401(k) or 403(b) Plan. Your money will continue to accumulate on a tax-deferred basis. You may also roll after-tax sources from your prior employer's plan into your Roth with Northwell.

### Loans

You may borrow money from your 401(k) or 403(b) Plan account. The Internal Revenue Code limits the amount you may borrow. Loan repayments are deducted from your checking or savings account.

### Withdrawals

There is a 10% excise tax on certain distributions and withdrawals. This tax does not apply if you:

- Are age 59½ or older
- Become disabled
- Rollover funds to an eligible plan
- Death- beneficiaries can get distributions without paying 10% tax

Additionally, 20% in Federal tax may be withheld if the payment is made directly to you. Lump-sum distributions (but not hardship distributions) are treated as eligible rollover distributions if transferred into a qualified Plan like an IRA or another 401(k)/ 403(b) Plan. Annuity distributions will not be treated as eligible rollover distributions if transferred into a qualified Plan, like an IRA or another 401(k)/ 403(b) Plan. Hardship withdrawals are available from your employer accounts and subject to IRS rules.

Each quarter you will receive an account statement with a detailed summary of all activity, including account transactions and history, ending account balance, fund performance/benchmarks, and vesting information.

### Distributions

Participants normally request distributions on or after their retirement. If you are retired, distributions must begin no later than when you reach age 70½. To request a distribution, visit the Transamerica website at [northwell.edu/myretirement](http://northwell.edu/myretirement) or call them at 844-675-4547.

### Normal forms of payment

If you are single when your benefits begin, the normal form of payment is a single-life annuity.

If you are married, the normal form of payment is a qualified 50% joint and survivor annuity. Your spouse receives monthly benefits equal to 50% of your retirement payment should he/she survive you.

### Optional forms of payment

- Life annuity
- 50/75% Joint and survivor annuity
- Installments
- Partial withdrawals
- Lump sum (all or a portion of the value of the account)

**Note:** Balances between \$1,000 and \$5,000 will be rolled over to an individual IRA unless you request a rollover to another plan. Balances under \$1,000 will be automatically distributed to you.



### Cost of plan participation

There is an annual per plan fee of \$60 for the 403(b)/401(k) plans and \$90 for the 457(b) plan from Transamerica Retirement Solutions. Fees are not based on a percentage of participant plan balances. These are fixed fees. Individual funds also have fees.

### Investment strategies that work

With the 401(k) and 403(b) Plans, you have a choice of two investment strategies—Target Retirement Funds and Core Funds or a mix of those two strategies. Whether you're an experienced or a novice investor, choosing the right plan can help you create an investment portfolio that fits your needs. Visit the Transamerica website at [northwell.edu/myretirement](http://northwell.edu/myretirement) (click on Review, then Fund and Fee Information) or call them at 844-675-4547 for specific fund information.

### Target Retirement Funds

These funds simplify investing for retirement. Choose the date specific fund nearest your expected year of retirement. As that date approaches, each fund gradually and automatically reduces risk by shifting from stocks to bonds and short-term reserves. Although Target Retirement Funds are geared to simplify investment selection, all mutual fund investing is subject to risk. Each Target Retirement Fund invests in up to seven broadly diversified Vanguard funds and is subject to the risks associated with these funds.

### Core Funds

If you have some investment experience and the time and interest to research your fund options, consider creating a diversified portfolio made up of Core Funds. To see a chart of both Target Retirement and Core Funds available, please refer to the Transamerica website [Northwell.edu/myRetirement](http://Northwell.edu/myRetirement).

### Note about Risk

Investments in bond funds are subject to interest rate, credit and inflation risk. Prices of mid and small cap stocks often fluctuate more than those of large company stocks. Foreign investing involves additional risks including currency fluctuations and political uncertainty. Funds that concentrate on a relatively narrow market sector face the risk of higher share price volatility. Please note diversification does not ensure a profit or protect against loss in a declining market.

### Transamerica Retirement Solutions

Take advantage of the many interactive tools available on [Northwell.edu/myRetirement](http://Northwell.edu/myRetirement), such as the OnTrack® tool. Based on information we know about you, such as your expected years to retirement, income, investment strategy, and contribution amount, Your Retirement Outlook will be displayed in easy to understand graphic weather icons. If you are in good shape for your retirement the sun will be shining on your OnTrack tool. In addition, Transamerica offers one-on-one retirement planning session with all team members. Visit [Northwell.edu/myRetirement](http://Northwell.edu/myRetirement) and contact a representative today.



## 457(b) Notes

### Withdrawals

In accordance with regulations, as long as you are an active team member, you may only access your contributions and/or earnings after age 70½ or in the event of a documented unforeseeable emergency. An unforeseeable emergency is defined as a participant, spouse or a dependent experiencing a severe financial hardship resulting from an illness, accident or property loss due to a casualty. This is subject to Plan qualification; all other alternatives to raising money must first be exhausted.

Call Transamerica at **844-675-4547**, if you need to apply for an unforeseeable emergency withdrawal.

### Investment Options

You are responsible for directing the investment of these contributions among the options offered under the Plan, which may change at Northwell Health's discretion. You assume the risk related to your investment options. Visit the Transamerica website at [northwell.edu/myretirement](http://northwell.edu/myretirement) (click on Review, then Fund and Fee Information) or call them at 844-675-4547 for specific fund information.

### Transfers and Account Changes

You have complete control to determine the types of transactions you wish to make, as well as the frequency of those transactions. You may transfer balances between different investment options or reallocate future contributions.

### Ownership of Assets

Regulations that govern 457(b) Plans require that your salary deferrals into the Plan, including any attributed income resulting from your deferrals, be deemed property of Northwell Health. This property is subject to the claims of its general creditors until you withdraw the assets upon separation from employment or through an unforeseeable emergency withdrawal.

### Transamerica Retirement Solutions

Take advantage of the many interactive tools available on [Northwell.edu/myRetirement](http://Northwell.edu/myRetirement), such as the OnTrack® tool. Based on information we know about you, such as your expected years to retirement, income, investment strategy, and contribution amount, Your Retirement Outlook will be displayed in easy to understand graphic weather icons. If you are in good shape for your retirement the sun will be shining on your OnTrack tool. In addition, Transamerica offers one-on-one retirement planning session with all team members. Visit [Northwell.edu/myRetirement](http://Northwell.edu/myRetirement). and contact a representative today.



## Work/Life and Wellness Programs

**Adoption Assistance Program** provides you the opportunity of financial assistance for full time team members with one year of service in the health system. The benefit provides up to \$5,000 per family, per lifetime, for direct costs related to the adoption process.

**Education and professional development** is available to all team members, with access to the Center for Learning and Innovation (CLI). A Tuition Reimbursement Program is also available to eligible full-time team members.

**Team member discounts** locally and nationally provide a true value to all team members.

**Team member appreciation** is shown in many ways across the health system, such as seasonal celebrations and special events. Team members also have the opportunity to recognize, and even reward, colleagues for exemplifying our values and expectations on an online interactive portal at [Northwel.edu/myRecognition](https://Northwel.edu/myRecognition). In addition, there are system-wide award programs that recognize extraordinary team members, such as our President's Award and High-Potential programs.

**Family Medical Leave** due to illness, or the necessary care of an immediate family member, entitles you to 12 weeks of unpaid, job-protected leave under the Family and Medical Leave Act (FMLA). You must have worked 1,250 hours in the year before your requested leave to be eligible for this benefit.

**Paid Family Leave (PFL)** pays part of a team member's income while they're out of work for up to 10 weeks in 2020. It covers bonding with a new child, caring for a family member with a serious health condition, and other events related to a family member's active-duty military status. For more information, visit <https://paidfamilyleave.ny.gov/>

**Paid Time-Off (PTO)** provides paid days away from work for the purpose of vacation, illness or personal time. PTO varies with each Benefit Group.

**Wellness initiatives** include access to our online myWellness platform, the Wellness Credit Program, Smoking Cessation, Stress Management, Weight Watchers *At Work*, and more.



## Rights, legal notices and disclaimers

### Affordable Care Act (ACA)

The coverage offered to you by Northwell exceeds the minimum value standard set forth by the ACA. The coverage is affordable to you and your family if your cost share does not exceed 9.5% of your household income. If you are, or become, ineligible for Northwell benefits, you may be eligible for subsidies on the New York State Health Exchange. The Exchange is the only body that can make determinations about your eligibility for subsidy.

### COBRA Notice: Comprehensive Omnibus Budget Reconciliation Act

Northwell offers continuation of health care coverage to team members and dependents who lose coverage due to a qualifying event under the Northwell benefits plan. A qualifying event occurs under the following circumstances:

Qualifying Event	Maximum COBRA Continuation Period		
	Team member	Spouse	Dependent
Employer's termination (other than gross misconduct) or reduction in hours worked	18 months	18 months	18 months
Team member death	N/A	36 months	36 months
Divorce or legal separation	N/A	36 months	36 months
Cessation of dependent status	N/A	N/A	36 months
Medicare entitlement	N/A	36 months	36 months
Disability*	29 months	29 months	29 months

\*Qualified beneficiaries who are approved for Social Security Disability may continue coverage for an additional 11 months beyond the initial 18 month period at an increased premium rate.

Our Human Resources Department will notify PayFlex, the third party administrator of who is eligible for continuation of benefit coverage and initiate a COBRA notification to the team member within fourteen (14) days of his/her eligibility event. The plan will offer COBRA continuation coverage only after Northwell has been timely notified that a qualifying event has occurred. For the other qualifying events (divorce/legal separation, cessation of dependent status), you must notify Northwell in writing within 31 days after the qualifying event or the date your dependent would lose coverage under the plan as a result of the qualifying event.

If either you, your spouse or any of your dependent children covered under the plan, is determined by the Social Security Administration to be disabled on the date of the team member's termination of employment or reduction in work hours, or at any time during the first 60 days of COBRA continuation coverage, due to such qualifying event, each individual (whether or not disabled) may be entitled to receive up to an additional 11 months of COBRA continuation coverage, for a total maximum of 29 months.

The disability would have to have started at some time before the 60th day of COBRA continuation of coverage and must last at least until the end of the 18 month period of continuation coverage. To qualify for this disability extension, you must notify Northwell Health of the person's disability status both at the initial qualifying event date and before the original 18 month COBRA continuation coverage period ends. Also, if Social Security determines the individual is no longer disabled, you are required to notify Northwell Health within 30 days after this determination.





Any terminated team member and/or dependent electing continuation of coverage is required to pay a monthly premium to cover the full cost of his/her coverage plus a 2% administrative fee. Continued benefit coverage will terminate prior to the end of the 18, 29, or 36 month period if:

- Initial payment is not received within 45 days of its due date;
- Subsequent payments are not received within 30 days of their due date;
- The individual becomes covered under another group plan;
- The individual becomes eligible for Medicare;
- The plan is terminated for all team members.

### **HIPAA Notice**

HIPAA is a law that requires employers (or their insurers or their administrators) to provide certification of the healthcare coverage you had while you were employed. You may present the HIPAA Certificate to another employer if they request it as proof that you had healthcare coverage.

### **Patient Protection and Affordable Care Act ("PPACA") Patient Protection Notices**

Generally you will be permitted to designate a primary care provider under any benefit plan. You have the right to designate any primary care provider who participates in either United HealthCare (Value or Buy-Up plan) and who is available to accept you or your family members. For information on how to select a primary care provider, and for a list of participating primary care providers, contact United HealthCare at 1-888-254-3698.

### **Protected Health Information (PHI)**

PHI is "individually identifiable health information in any form that relates to: (i) the past, present or future physical or mental health or condition of an individual; (ii) the provision of health care to an individual; or (iii) the past, present or future payment for the provision of health care to an individual. "Individually identifiable health information" is health information that identifies the individual to whom it relates, or for which there is a reasonable basis to believe that it can be used to identify the individual to whom it relates. Under the law, the Plans may disclose your PHI without your authorization when the use and/or disclosure are for the purposes of: (i) treatment, (ii) payment, or (iii) health care operations.

### **Notice of Creditable Coverage**

This notice has information about your current prescription drug coverage with Northwell Health 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.
- Northwell has determined that the prescription drug coverage offered by the Northwell Health Medical 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 15 through December 7. 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 Northwell coverage will not be affected. You can keep your Northwell coverage if you elect Part D and this plan will coordinate with your Part D coverage. If you do decide to join a Medicare drug plan and drop your Northwell prescription drug and medical coverage, be aware that you and your dependents may not be able to get this coverage back.

**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 Northwell 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 Corporate Human Resources for further information at 516-734-7000. 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 Northwell Health 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](http://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 1800MEDICARE (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](http://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: September 30, 2019

Name of Entity/Sender: Northwell Health/Total Rewards

Contact Position/Office: Human Resources Dept.

Address: 1111 Marcus Ave, Suite LL20, NY 11042

Phone Number: (516) 734-7000

**CMS Form 10182CC** According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 09380990. The time required to complete this information collection is estimated to average 8 hours per response initially, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C42605, Baltimore, Maryland 212-441-850.

### **Medicaid and the Children's Health Insurance Program (CHIP)**

If you are eligible for benefits but are unable to afford the premiums, some states have premium assistance programs that can help pay for coverage. These states use funds from their Medicaid or CHIP programs to help people who are eligible for employer sponsored health coverage, but need assistance in paying their health premiums. If you or your dependents are already enrolled in Medicaid or CHIP you can 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, you can contact your state Medicaid or CHIP office or dial 877-KIDS-NOW or [insurekidsnow.gov](http://insurekidsnow.gov).

### **Disclaimers**

Benefit Summaries referenced in this Guide are intended only to highlight your benefits and should not be relied upon to fully determine your coverage. If this Benefit Summary conflicts in any way with the Summary Plan Description (SPD), the SPD shall prevail. If this Benefit Summary conflicts in any way with certificates, the certificates will prevail. It is recommended that you review your SPD for an exact description of the services and supplies that are covered, those which are excluded or limited, and other terms and conditions of coverage.

### **WHCRA Notice**

WHCRA is the Women's Health and Cancer Rights Act of 1998 that entitles individuals who have had or are going to have a mastectomy, certain benefits under the law. For those individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient.

### **Michelle's Law**

Under Michelle's Law, a group health plan cannot terminate a child's coverage for loss of full-time student status if the change in student status is due to a "medically necessary leave of absence." The plan may be required to allow such a child to remain covered as a team member's dependent for up to a year after the leave of absence begins.

### **Newborns' and Mothers' Protection (Newborns' Act)**

The Newborns' and Mothers' Health Protection Act (Newborns' Act) includes important protections for mothers and their newborn children with regard to the length of the hospital stay following childbirth. The



Newborns' Act requires that group health plans that offer maternity coverage pay for at least a 48 hour hospital stay following childbirth (96 hour stay in the case of a Cesarean section).

**Northwell Health Disclaimer**

This material is designed to highlight the features of the team member benefits program offered by Northwell Health as of January 1, 2020. Where there may be discrepancies in the summaries provided in this brochure, the official plan documents will govern. If you cannot access the Summary Plan Descriptions, please contact the HR Service Center. Although Northwell Health expects to continue these benefits indefinitely, Northwell Health reserves the right to amend, modify or discontinue the plans at any time.

**Privacy Notice**

As part of Northwell Health's commitment to providing exceptional care for its team members, Northwell partners will provide resources to assist you in a creation of a wellness plan. As part of the wellness credits, you must completed a free online Health Assessment (HA) and enter personal health data.

**Protecting Your Personal and Health Information**

The HRA administrator has business practices that are in compliance with the privacy regulations of HIPAA. Precautions have been taken to protect all submissions against unauthorized access and use. The administrator has reasonable and customary security measures in place in its physical facilities to protect against the loss, misuse, or alteration of information collected from you at the site.

**Notice Regarding Northwell Health's Annual Wellness Credit Program**

The Northwell Health Annual Wellness Credit Program is a voluntary wellness program available to team members eligible for Value, Buy-Up and HDHP self-insured plans. The program is administered according to federal rules permitting employer sponsored wellness programs that seek to improve team member health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the wellness program you will be asked to complete a voluntary health risk assessment or "HRA" that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., diabetes). You are not required to complete the HRA or to participate in any medical examinations.

The information from your HRA and the results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks, and may also be used to offer you services through the wellness program, such as potential action plans to help you improve your wellbeing in a certain area. You also are encouraged to share your results or concerns with your own doctor.

When participating in the Wellness Credit Program your actions can be viewed on your personal Wellness Summary on mySelfService. The information recorded and sent from the provider to the carrier, to Northwell, is not your health information it is the date of service of when you acted on your wellness. This includes the online Health Risk Assessment. This process takes 6 to 8 weeks.

Past claims information is securely sent and stored in your health history. It helps serve as a reference for you to track your health history and it may be useful for your treating medical providers.

**Acknowledgment:** By enrolling in a Northwell medical plan you and your enrolled dependents may be contacted by a service provider (may be a Northwell team member) offering information, support or assistance, related to the usage of plan benefits. Any participation in, or cooperation with, such services or



providers is completely voluntary and without extra charge. Any personal health information that is voluntarily provided will not be used for purposes other than the services offered.”

### **Protections from Disclosure of Medical Information**

We are required by law to maintain the privacy and security of your personally identifiable health information. Any personal health information that is voluntarily provided will not be used for purposes other than the services offered. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. By enrolling in a Northwell plan, your enrolled dependents and you may be contacted by a service provider (in some cases a Northwell team member) offering information, support or assistance, related to the usage of plan benefits. Any participation in, or cooperation with, such services or providers is completely voluntary and without extra charge. Any personal health information that is voluntarily provided will not be used for purposes other than the services offered.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and **no** information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately. You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

The HRA is not intended to elicit any genetic information from team members who participate in Northwell’s Annual Wellness Credit Program, and it is requested that team members refrain from providing any genetic information when completing the HRA.

If you have any questions or would like more information about Northwell’s Annual Wellness Credit Program, please contact the Human Resources Service Center at 516-734-7000.

### **Northwell Health Nondiscrimination Notice**

Northwell Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Northwell Health does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

#### **Northwell Health:**

Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages



If you need these services, contact: The Center for Equity of Care (516-881-7000).

If you believe that Northwell Health has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Elizabeth McCulloch

The Center for Equity of Care

1981 Marcus Avenue

Lake Success, NY 11042

Phone: (516) 881-7000 • Fax: (516) 881-7047 (fax) • Email: DIHL@northwell.edu.

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, The Center for Equity of Care is available to help you. You can also file a civil rights complaint with the U.S.

Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue SW., Room 509F

HHH Building

Washington, DC 20201

(800) 868-1019, (800) 537-7697 (TDD).

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>



**ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-516-881-7000 (TTY: 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-516-881-7000（TTY：711）

**ВНИМАНИЕ:** Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1- 516-881-7000 (телетайп: 711).

**ATANSYON:** Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-516-881-7000 (TTY: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-516-881-7000 (TTY: 711)번으로 전화해주십시오.

**ATTENZIONE:** In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-516-881-7000 (TTY: 711).

אויב איר רעדט אידיש, זענען ארהאן פאר אייך שפראך הילף סערוויסעס פריי פון אפצאל. רופט 1-516-881-7000 (TTY: 7000).

লক্ষ্য করুনঃ যদিও আপনি বাংলা, কথা বলতে পাতেন, সেখানেও দ্রুত খেঁচায় ভাষা সহায়ের পাঠে উপলব্ধি আসবে। জান করুন ১-516-881-7000 (TTY: ১-711)

**UWAGA:** Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-516- 881-7000 (TTY: 711).

م: إذا كنت قد تحدثت في لغة غير اللغة الإنجليزية، يمكنك الحصول على خدمات مساعدة لغوية مجانية. اتصل بالرقم 1-516-881-7000 (TTY: 711).  
هال صم وال بكم: (711). رؤم

**ATTENTION :** Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-516-881-7000 (ATS : 711).

1-516-881-7000 ک ال۔ ہیں دس ٹیپام ہیں منت خدمات کی حد تک یزبانک و آپ وہ ہیں، بولنے اردو آپ اگر: خ بردار (TTY: 711). ک

**PAUNAWA:** Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-516-881-7000 (TTY: 711).

**ΠΡΟΣΟΧΗ:** Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-516-881-7000 (TTY: 711).

**KUJDES:** Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1- 516-881-7000 (TTY: 711).





## Contact Information

### **Medical:**

Northwell Health Find a Physician  
[Northwell.edu/inSystem](http://Northwell.edu/inSystem)

United Healthcare for Medical Plans  
[myuhc.com](http://myuhc.com) 888-254-3698

Vivo Health for Prescription Plans through United HealthCare  
 Mail Order/Maintenance-833-868-8486  
 Customer Service- 888-741-5228.

### **Dental:**

Cigna for Dental Plans  
[mycigna.com](http://mycigna.com)  
 PPO Plan: 888-DENTAL8 (336-8258)  
 DHMO Plan: 800-367-1037

### **Vision:**

Davis Vision for Vision Plan  
[davisvision.com](http://davisvision.com) or 800-999-5431

### **Voluntary Plans:**

Aon Voluntary Benefits & Enrollment Solutions  
[Northwell.edu/voluntarybenefits](http://Northwell.edu/voluntarybenefits)  
 or 888-561-0240

### **FSA, DFSA, HSA, and Transit:**

PayFlex for Flexible Spending Accounts, Health Savings Accounts and Commuter Benefit  
[payflex.com](http://payflex.com) 844-729-3539

### **Disability:**

myAbsence for Disability Plans  
[Northwell.edu/myAbsence](http://Northwell.edu/myAbsence) 855-789-9355

### **Life Insurance:**

Aetna for Life Insurance Plans  
 800-523-5065

### **Retirement:**

Transamerica for 403(b), 401(k) and 457(b) plans  
[Northwell.edu/myRetirement](http://Northwell.edu/myRetirement)  
 Cash Balance Plan  
[Northwell.edu/mybenefitscenter](http://Northwell.edu/mybenefitscenter)  
[Retirement@northwell.edu](mailto:Retirement@northwell.edu)

### **Additional Information:**

Physician and Executive Concierge  
 (844)697-4947 or (844) 693-9347  
[TotalRewards@northwell.edu](mailto:TotalRewards@northwell.edu)

Human Resources Service Center  
[hrrservicecenter@northwell.edu](mailto:hrrservicecenter@northwell.edu) 516-734-7000

### **My Recognition**

[myrecognition@northwell.edu](mailto:myrecognition@northwell.edu)

### **Benefits**

[benefits@northwell.edu](mailto:benefits@northwell.edu)

### **Payroll**

[payroll@northwell.edu](mailto:payroll@northwell.edu)

### **Tuition Reimbursement**

[tuition@northwell.edu](mailto:tuition@northwell.edu)

Northwell Health IS Help Desk  
 516-470-7272

Northwell Health Employee Self Service  
[Northwell.edu/mySelfService](http://Northwell.edu/mySelfService)

### **Payflex (Cobra and Retiree)**

800-359-3921  
[cobramail@payflex.com](mailto:cobramail@payflex.com)