



BOZEMAN HEALTH



Comprehensive Benefit Package

2018 Benefit Year

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Welcome to Bozeman Health



At Bozeman Health, we are committed to creating a culture of excellence and are pleased that you have chosen to be a member of our team. Welcome.

Quality care is a direct result of what you do every day. We repay your commitment to us in a number of ways, including through our employee benefits program. As an employee of Bozeman Health, you and your eligible dependents have the opportunity to participate in our comprehensive benefits plan which includes healthcare, dental, vision, tax-advantaged spending accounts, earned time off and retirement plans. Each employee's needs are different, which is why Bozeman Health offers different medical plans to meet the needs of our staff and their family members. Each health care plan covers pharmacy and mental health benefits.

This benefit guide highlights the many benefit options available to you as part of your 2018 benefit package.

What You Need to Know

Eligibility and Qualifying Events

Bozeman Health offers benefits to .4 FTEs working at least 16 hours per week, and provides long term disability insurance to .75 FTEs working at least 30 hours per week. Under the Patient Protection and Affordable Care Act (PPACA), commonly called the Affordable Care Act (ACA), medical benefits will be offered to employees who average at least 30 worked hours per week over a 12-month measurement period. Benefits are available to you and your dependents on the first day of the month following 30 days of employment.

Eligible dependents are defined as:

- Legal spouse
- Domestic partner
- Dependent children up to age 26
- Dependent children over age 26 who are physically or mentally unable to care for themselves

Because of legal regulations, once you have made your election for 2018, you generally cannot change your benefits until the next annual enrollment period. If you fail to elect coverage for you or a family member, you cannot add them mid-year unless you or the family member qualifies for “special enrollment” as described in the applicable Summary Plan Description (SPD).

Special Enrollment Events

- Marriage
- Legal separation or divorce
- Birth or adoption of a child
- Change in employment status for you or spouse that results in a loss or gain of coverage
- Change in dependent’s eligibility status (example: a dependent child exceeding the maximum age for coverage)
- Change in place of residence causing a loss of eligibility (example: moving outside of the service area)
- Change in the cost of dependent care (only available for the dependent care spending account)
- Loss of a dependent

Written documentation of the special enrollment event will be required. An enrollment event and change to benefit enrollment is done through the eBenefits enrollment site, www.ebenefits.com/bdh. The enrollment and appropriate documentation must be remitted to Human Resources within 30 calendar days.

Affordable Care Act (ACA) Employer Shared Responsibilities

The ACA imposes a penalty on employers with 50 or more employees who do not offer affordable, Minimum Essential Coverage to full-time employees and their dependents. Bozeman Health follows the Employer Shared Responsibilities provision and offers coverage that is deemed affordable and meets the required Minimum Value standard to our employees. Those employees who meet the hourly requirement over a 12-month measurement period will be offered coverage each year for a corresponding 12-month stability period. A full-time employee is defined by the ACA as an employee who is employed, on average, for at least 30 hours of service per week or 130 hours of service in a calendar month. At Bozeman Health, full-time and part-time employees are determined by the following classification standards:

	Insurance Premium Level
.9 FTE	Employee: Full-time insurance premiums Dependents: Full-time insurance premiums
.75 - .89 FTE	Employee: Full-time insurance premiums Dependents: Part-time insurance premiums
> .75 FTE	During initial 12 month measurement period Employee: Part-time insurance premiums Dependents: Part-time insurance premiums
	Upon satisfying measurement period and meeting 30 hr/wk requirement Employee: Full-time insurance premiums Dependents: Part-time insurance premiums

Initial Measurement Period

For new employees hired as a less than .75 FTE, this will be a period of time from the first of the month following the date of hire and continuing through the following 12 months. At the end of this measurement period, hours will be measured to determine eligibility for full-time employee only medical insurance premiums.

Standard Measurement Period

For ongoing employees appointed as a less than a .75 FTE, this will be a period of time beginning with the first paycheck in November through the last paycheck of October of each year. For 2019, the measurement period is November 3, 2017 through October 19, 2018. During this time, employee’s hours are measured to determine eligibility for full time employee only medical insurance premiums. An ongoing employee is one that has made it through their initial measurement period.

Stability Period

A period of time in which an employer must continue to offer an eligible, full time employee, medical benefits at the full-time premium amount. Bozeman Health has defined our stability period as our benefit plan year which is January 1 – December 31



Employee Premiums

Insurance premiums are collected semi-monthly from 24 of the 26 paychecks received in the year. The following premiums are noted on a *per pay period/semi-monthly* basis. Premium deductions vary and are taken both pre-tax and post-tax. The table below specifies premium deductions for each benefit.

Benefit	Pre-Tax	Post-Tax
Group Medical	X	
Group Dental	X	
Group Vision	X	
Flexible Spending Account	X	
Health Savings Account (HSA)	X	
Short Term Disability		X
Long Term Disability Buy Up		X
Legal Plan		X
American Fidelity		X
American Public Life		X
Aflac Voluntary Benefits		X

Medical Plan Premiums

Gallatin Plan	.9FTE or Greater		.75 - .89 FTE or Eligible variable hour EE		.4 - .74 FTE	
	Base	Engaged	Base	Engaged	Base	Engaged
Employee Only	\$5.26	\$0	\$5.26	\$0	\$87.70	\$82.44
Employee + 1	\$108.09	\$101.21	\$226.00	\$219.12	\$226.00	\$219.12
Employee + Family	\$159.46	\$150.80	\$333.41	\$324.76	\$333.41	\$324.76

Madison Plan	.9FTE or Greater		.75 - .89 FTE or Eligible variable hour EE		.4 - .74 FTE	
	Base	Engaged	Base	Engaged	Base	Engaged
Employee Only	\$41.83	\$36.16	\$41.83	\$36.16	\$129.68	\$124.01
Employee + 1	\$181.44	\$173.92	\$304.36	\$296.83	\$304.36	\$296.83
Employee + Family	\$267.00	\$255.93	\$447.88	\$436.80	\$447.88	\$436.80



Dental Plan Premiums

	Delta Dental Base Plan	Delta Dental Enhanced Plan	Aflac Dental Individual Plan
Employee Only	\$11.18	\$18.52	\$16.86
Employee + Spouse	\$22.34	\$37.04	\$30.66
Employee + Child(ren)	\$27.34	\$41.74	\$32.22
Employee + Family	\$38.51	\$61.19	\$46.09

Vision Plan Premiums

Employee Only	\$4.00
Employee + 1	\$7.99
Employee + Family	\$12.87

Supplemental Term Life Insurance Premiums

Full Time / Part Time Employee and Spouse Rates Monthly Rate per \$1,000 of Coverage											
Age	0-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
Rate	\$0.051	\$0.059	\$0.068	\$0.076	\$0.127	\$0.195	\$0.348	\$0.568	\$0.873	\$1.687	\$2.730

Supplemental Accident Death & Dismemberment (AD&D)

Monthly Rate per \$1,000 of Coverage	
Employee	\$0.031
Spouse	\$0.072
Children	\$0.041

Benefits at a Glance

Medical Benefits

Bozeman Health provides four plan options administered by Blue Cross Blue Shield of Montana (BCBSMT). The options are the Base and Engaged Gallatin High Deductible Health Plan (HDHP) and the Base and Engaged Madison Plan. All plans offer you the flexibility to choose your provider along with access to BCBSMT's broad network of providers. The summary below reflects in network benefits. Please refer to your Summary Plan Description booklet for details on services, including out of network payment.

BCBSMT Medical Plans

	Base Gallatin*		Engaged Gallatin**	
Pre-Tax Savings Options	Health Savings Account (HSA) and Flexible Spending Account (FSA)			
Network	BCBS	Out	BCBS	Out
Annual Deductible	Individual: \$2,700 Family: \$5,400		Individual: \$2,200 Family: \$4,400	
Coinsurance	100% / 0%	50% / 50%	100% / 0%	50% / 50%
Out of Pocket Maximum (Includes deductible)	Individual: \$2,700 Family: \$5,400	Individual: \$3,100 Family: \$6,200	Individual: \$2,200 Family: \$4,400	Individual: \$3,100 Family: \$6,200
Preventive Care (Routine Care, Well Child Care)	Paid 100%; deductible waived			
Office/Specialist Visit	0% after deductible			
Emergency Room Care	0% after deductible			
Hospital Services (Inpatient/outpatient, lab and x-ray, surgery centers, other facility services)	0% after deductible			
Preventive Vision Exam	Paid 100% up to \$100; deductible waived			
Prescription Drugs (Retail Pharmacy 34-day supply)				
Preventive Rx Highland Park Only Generics: Covered at 100% Preferred: \$40 / Non-Preferred: \$80 (Subject to Prime Preventive Rx List)				
All other Rx subject to Medical deductible				

* The Base Gallatin plan is an **embedded** plan in which a covered member needs to satisfy the individual deductible, not the family deductible, prior to receiving plan benefits.

** The Engaged Gallatin plan is an **aggregate** plan in which the entire family deductible must be met before co-pay or co-insurance is applied for any individual family member.



BCBSMT Medical Plans

	Base Madison		Engaged Madison	
Pre-Tax Savings Options	Flexible Spending Account			
Network	BCBS	Out	BCBS	Out
Annual Deductible	Individual: \$700 Family: \$1,400		Individual: \$500 Family: \$1,000	
Coinsurance	70% / 30%	50% / 50%	70% / 30%	50% / 50%
Out of Pocket Maximum (Includes deductible)	Individual: \$2,700 Family: \$5,400	Individual: \$3,000 Family: \$6,000	Individual: \$2,500 Family: \$5,000	Individual: \$3,000 Family: \$6,000
Preventive Care (Routine Care, Well Child Care)	Paid 100%; deductible waived			
Office/Specialist Visit *	\$25 co-pay	Deductible/ Coinsurance	\$10 co-pay	Deductible/ Coinsurance
Emergency Room Care	\$250 co-pay			
Hospital Services (Inpatient/outpatient, lab and x-ray, surgery centers, other facility services)	30% after deductible			
Preventive Vision Exam	Paid 100% up to \$100; deductible waived			
Prescription Drugs** (Retail Pharmacy 34-day supply)				
Generic	\$20 co-pay			
Formulary Brand***	\$40 co-pay			
Non-Formulary Brand***	\$60 co-pay			
Mail Order	2x retail co-pay for 90-day supply			
Specialty Pharmacy	Formulary: \$100 Non-Formulary: \$200			

* Members will pay \$0 co-pay when seeing a Bozeman Health therapy provider for Physical Therapy and Occupational Therapy Services.

** Members will pay an ancillary charge under the Madison plan in addition to the co-pay if the member chooses a Formulary or Non-Formulary drug when a generic is available, applicable to retail and mail order only.

*** Must meet a \$200 deductible when filling Formulary and Non-Formulary drugs before paying co-pay amount. Deductible is per covered member, per year, and does NOT apply to generic prescription drugs.

Dental Benefits

Bozeman Health offers three dental plan options to you and your eligible dependents; two plan options through Delta Dental and one plan option through Aflac.

Delta Dental Plans

In-Network Benefits	Base Plan	Enhanced Plan *
Annual Deductible/Individual	\$50	\$50
Diagnostic & Preventive	100%; <i>Deductible and annual maximum waived</i>	100%; <i>Deductible and annual maximum waived</i>
Basic Restorative	80%	80%
Major Restorative	Not Covered	50%
Annual Maximum / Individual	\$750	\$1,500
Orthodontia	Not Covered	50% up to \$1,000 Lifetime Maximum

*Employees who enroll in the Enhanced plan must remain on this plan for two years.

Delta Dental has a network of participating providers. While you have the option to seek services from a non-network provider, you will receive the maximum benefits under the plan and pay less out of pocket when receiving care from a network provider. If a non-network provider is used, then expenses are reimbursed based at 80 percent of reasonable and customary (R&C) charges.

Aflac Dental Plans

With Aflac dental, you have the freedom to access the dentist of your choice; there is not a network of dentists. You and your dentist choose the best treatment plan for you and you do not need permission from Aflac for treatment. Aflac pays a certain amount towards the dental services provided. The difference between what is charged by your provider and what Aflac pays is what you will pay out of pocket. There is no deductible. The uniqueness of Aflac dental is that Aflac will pay the benefits regardless of whether you have an additional dental policy. Aflac will continue to pay the full eligible benefit amount. Aflac dental will increase each covered member's annual

	Waiting Period	Benefit Amounts
Preventive (Wellness and X-Ray)	None	\$35 - \$50
Fillings and Basic Services	3 months	\$15 - \$275
Pain Management and Adjunctive Services	3 months	\$35 - \$140
Other Preventive Services	6 months	\$20 - \$120
Oral Surgery, Gum Treatments, and Prosthetic Repair	6 months	\$30 - \$975
Crowns and Major Services	12 months	\$20 - \$425
Major Prosthetic Services	24 months	\$45 - \$650
Annual Maximum / Individual		\$1,600

maximum by \$100 after each 12 consecutive months the policy is in force, up to a maximum of \$500 per covered member. To enroll in the Aflac dental benefit plan or to learn more, contact Jeremy Flikkema at 406-539-8282.

Vision Benefits

Bozeman Health offers a vision plan through Vision Service Plan (VSP) to you and your eligible dependents. The vision plan's network of participating providers is provided at www.vsp.com. You will receive the maximum benefit under the plan and pay less out of pocket when you receive care from a network provider.

VSP Vision Plan

	In Network	Out of Network
Exam (every 12 months)		
Well Vision Exam	\$10 co-pay	\$45 allowance
Contact Lens Exam	Up to \$60	Not covered
Lenses (every 12 months)		
Single Vision	\$25 co-pay	Up to \$30
Lined Bifocal	\$25 co-pay	Up to \$50
Lined Trifocal	\$25 co-pay	Up to \$65
Frames (every 24 months)	\$150 allowance + 20% off remaining balance	Up to \$70
Contact Lens (every 12 months) **	\$150 allowance	Up to \$105
Extra Discounts and Savings		
Glasses and Sunglasses	20% off (including lens options) for additional glasses and sunglasses 30% savings on lens options (progressive, scratch-resistant, anti-reflective coatings)	Not covered
Laser Vision Correction	Average 15% off the regular price, or 5% off the promotional price from contracted facilities	

** If you choose to use the plan for contact lenses, then you will be eligible for frames 12 months from the date contact lenses were obtained. The frames allowance will remain every 24 months if you use the plan for purchasing items.

NOTE: If you elect both medical and vision coverage, those dependents covered under the medical plan must also be covered on the vision plan.

Being a Smart Consumer

Health Savings Account (HSA)

The Base and Engaged Gallatin Health Plans offered to Bozeman Health employees is categorized as a High Deductible Health Plan (HDHP). An HDHP typically features a lower premium in return for a higher deductible which must be met before the health plan covers medical services or prescription drugs. Preventive Care is covered at 100%. (Refer to Medical Benefit summary).

When enrolled in an HDHP, you are eligible to open a unique, personal savings account called a Health Savings Account to help manage and control your out-of-pocket expenses.

Health Savings Accounts (HSA)

A Health Savings Account is an individually owned trust or custodial account that you establish with a bank or IRS approved trustee. HSAs are designed to offer triple tax benefits.

- Contribute money pre-tax
- Funds accrue tax free, and
- Withdrawals can be made tax free for qualified medical, dental, vision or prescription expenses.

Participation in the HSA is limited to those enrolled in a qualified HDHP. If you are enrolled in Medicare, your spouse’s employer plan, or another plan that is not considered a qualified HDHP, then you are not eligible to contribute to an HSA.

You do not have to use the money deposited into the HSA on an annual basis. Funds roll over year to year, and there is no limit as to how much money you have in your HSA account as long as you do not deposit over the IRS limits within any one calendar year. The money in your HSA is yours for future use.

Health Equity currently administers the HSA accounts on a payroll deducted basis. **There is a \$2.95 administration fee per month that is collected directly from your account.** Investment options are available once you have a balance of \$2,000 in your account.

2018 HSA Limits

Self - Only HDHP Coverage	\$3,450
Employee + Dependents Coverage	\$6,900
“Catch Up Contribution” Age 55 +	\$1,000

Flexible Spending Account (FSA)

How does it work?

There are two types of flexible spending accounts; one for healthcare and one for dependent care. You decide how much to contribute to your health and/or dependent care FSA on a plan year basis to the maximum allowable amount. Your annual election will be divided by the number of pay periods, and deducted evenly on a pre-tax basis from each paycheck throughout the plan year.

The Healthcare FSA allows you to set aside money from your paycheck on a pre-tax basis to pay for eligible medical, dental, vision and prescription expenses. **You may contribute up to \$2,650 to the health FSA annually. You must elect at least \$120 annually to participate in the health care FSA.**

Bozeman Health allows up to \$500 rollover of remaining health FSA funds into the new benefit year so long as a health FSA account is elected in the subsequent year.

The Dependent Care FSA allows you to set aside money from your paycheck on a pre-tax basis for daycare expenses to allow you and your spouse to work or attend school full-time. Eligible dependents are children under 13 years of age or a child over 13, spouse or elderly parent residing in your home, who is physically or mentally unable to care for themselves. If you file as single, head of household or married filing jointly, you can contribute up to \$5,000 in your dependent care FSA. If you are married and file separate returns, you can each elect up to \$2,500. You and your spouse must be employed or a full-time student to be eligible to participate in the dependent care FSA. **You must elect at least \$120 annually to participate in the dependent care FSA.**

The FSA accounts are currently administered by Health Equity. **There is a \$3.96 per month administration fee, for one or both accounts, that will be collected pre-tax from your paycheck.**

What should I consider before contributing to an FSA?

- Due to the favorable tax treatment of FSAs, the IRS requires that you forfeit any money left in your account if you do not spend it by the end of the plan year.
- You cannot take income tax deductions for expenses you pay with your healthcare and/or dependent care FSA.
- You cannot stop or change contributions to your FSA during the year unless you have a change in status consistent with your change in contributions.

For a full list of eligible expenses, call the IRS at 800.820.3616 and ask for publication 502 and 503 or log on to www.IRS.gov/Publications.



	Medical FSA	Dependent Care FSA	HSA
What is it?	Spend pre-tax dollars to pay for qualified medical expenses for you and your dependents	Spend pre-tax dollars to pay for eligible expenses related to care for your child, disabled spouse, elderly parent or other dependent so you (and your spouse) can work.	Set aside money tax-free to cover health expenses if you're enrolled in a high-deductible health plan.
Who owns the account?	Your employer, but it's your money	Your employer, but it's your money	Individual/employee
Is a certain type of health plan required with this account?	No	No	Yes, a High Deductible Health Plan (HDHP)
Who is eligible?	All benefit eligible employees regardless of medical plan election/selection		Employees enrolled in the Gallatin HSA-qualified High Deductible Health Plan, who is not enrolled in a non-qualified plan elsewhere, including Medicare
Is there a limit on the amount that can be contributed per year?	\$2,650 max yearly contribution	\$5,000 max yearly contribution if married and filing taxes jointly \$2,500 max yearly contribution if married and filing taxes separately	For 2018 \$3,450 - Individuals \$6,900 - Family Age 55 and older \$1,000 catch-up amount
Can unused funds be rolled over from year to year?	Up to \$500 if FSA is elected in the new plan year <i>Subject to "Use it or Lose it" rule</i>	No <i>Subject to "Use it or Lose it" rule</i>	Yes
Can I take my account balance with me if I leave the company?	No	No	Yes
Can I pay for non-medical expenses?	No	No	Yes, but the amount is taxed as income and incurs a 20% penalty <i>(no penalty if distributed after death, disability, or age 65)</i>
What do I do if I want to change my contribution amount?	Can be changed only with qualifying special enrollment event		Contribution amount can be changed at any time during the year
Do I get a debit card to use for expenses?	Yes, but receipts from the use of the debit card must be submitted to Health Equity	No	Yes. You will receive a debit card from Health Equity

Income Protection Benefits

Basic Term Life and AD&D

Bozeman Health provides (1) times your estimated annual salary, up to \$350,000, of basic term life and AD&D insurance to full-time and part-time employees at no cost to you. The coverage is provided through Unum.

Voluntary Term Life and AD&D

You may elect to purchase additional life and AD&D insurance for yourself and your eligible dependents through Unum as follows:

	Employee	Spouse	Child
Guaranteed Issue	\$150,000	\$25,000	\$10,000
Increments	\$10,000	\$5,000	\$2,000
Maximum Benefit	\$500,000 or 5x annual salary	\$500,000	\$10,000

New hires receive guarantee issue of \$150,000 for themselves and \$25,000 for spouse if supplemental life is elected in the first 30 days of hire.

If you wish to increase coverage for you or your spouse *or* newly elect coverage during open enrollment, the requested increase amount will be subject to medical underwriting approval and an Evidence of Insurability form will need to be completed. New or increased coverage will not take effect until approved by the carrier.

Long Term Disability

Long Term Disability (LTD) coverage provides salary contributions in the event that you become disabled. You may qualify for benefits after you have been disabled for 90 days. You may remain covered up to social security normal retirement age (SSNRA) as long as the disability continues and you meet the eligibility requirements. This benefit is provided to you at no cost.

Benefit Amount	60% of basic salary
Benefit Maximum	\$10,000 per month
Elimination Period	90 days
Coverage Duration	Age 65 or SSNRA

Worksite Benefits

Aflac

Bozeman Health Services offers Aflac as an option for benefit eligible employees. Aflac pays benefits directly to employee, regardless of other coverage you may have, and the benefit paid can be used as you see fit. All Aflac plans are portable. You can take these plans with you when you leave or retire at the same rate you pay now.

Aflac Critical Illness - Provides lump sum coverage for, heart attack, stroke, major organ transplant, and renal failure. Employees can purchase up to a \$100,000 policy. Family coverage is also available.

Aflac Accident - Provides benefits to help cover the costs associated with the unexpected bills that arise when you are in an accident. Aflac Accident coverage covers you and your dependents 24/7. Aflac Accident Insurance is guaranteed issue (no underwriting is required to qualify for the coverage). Coverage includes a \$60.00 wellness benefit per year, per family.

Aflac Dental - Please review page 5 for more information about the Aflac Dental plan.

Aflac Short Term Disability - Aflac Short Term Disability offers up to 60 percent of monthly income replacement if you miss work due to an accidental injury, illness or maternity. Accidents are covered from the 1st day of disability. Illness and maternity are covered after 7 or 14 days, your choice at time of enrollment. Benefits do not coordinate with your earned time or EMBH. Aflac offers up to \$3,000 monthly benefit ***guarantee issue (no underwriting required)***. Monthly benefits over \$3,000 is subject to limited health questions. Because the rates associated with this benefit is tied to your income, you will need to contact Jeremy Flikkema, our Aflac representative, to get your specific quote.

Aflac Cancer - We all know someone affected by cancer. Not only are the medical costs high, it is the non-medical costs that the Aflac cancer policy is designed to help you pay. Aflac pays cash for you to use as you need.

Aflac Vision - No provider network for you to worry about, Comprehensive eye-care benefits as well as coverage for eye exam and vision correction.

Aflac Hospital Confinement Indemnity - Designed to pay a large dollar amount for injury or initial hospital confinement, as well as a daily benefit. All hospital confinements are covered including routine child birth.

Aflac Life Plans - A wide variety of Life coverage plan options. 10, 20, and 30 year term life coverage. Life coverage from \$20,000 up to \$500,000. Spouse coverage also available. All Aflac coverage have several plan options. We can design coverage's that best fits your needs and budget.

For additional information on the various policies offered through Aflac, or to enroll, please contact Jeremy Flikkema at 406-539-8282 or jeremy@flikkemainsurance.com to schedule an appointment.

American Fidelity and American Public Life

Bozeman Health Services offers products through American Fidelity/American Public Life.

Accident - Accident insurance pays benefit directly to you for costs associated with the unexpected bills that arise when you are in an accident. The Accident plan provides 24-hour coverage to you and your dependents so injuries off or on the job are covered and benefits pay the same regardless of medical coverage. With American Fidelity Accident, there are three plan options to choose from: Basic, Enhanced, and Enhanced Plus starting as low at \$19.90 per month. Depending on the plan option elected, and after owning the policy for at least 30 days, coverage includes an annual \$50-75 wellness benefit for one covered member. The policy also includes, at no additional cost, an accidental death benefit.

Cancer (Specified Disease) - This policy provides payment to you and for costs associated with the treatment of Cancer to include Radiation/Chemotherapy, Surgery, Experimental Treatment, Transportation & Lodging, and much more. Benefit is not reduced by services covered by your medical insurance. A generous Preventative Benefit for Diagnostic and Preventative screenings including Mammogram Benefit is included. Additionally Critical Illness (Cancer, Heart, Stroke) and Hospital Intensive Care Riders offer lump sum cash payouts upon diagnosis. There are four plan levels that are available to choose from starting at as little as \$11.00 per month.

Short Term Disability - Short Term Disability is insurance protection against lost wages if you are injured or ill and unable to work for up to 13 weeks (90 days) including maternity leave. You may elect the benefit amount that is right for your budget up to 60% of pre-disability income. This policy is most appropriate for new hires who do not have a large EMBH bank or those who have less than 30 days of EMBH time stored in their bank. This policy is most appropriate for new hires who do not have a large EMBH bank or those who have less than 30 days of EMBH time stored in their bank. Participation on Short Term Disability requires completion of five health questions and approval by American Fidelity Underwriting.

For more information, or to enroll, please contact Holly Pickens at 406-870-0544 or hollyfbr@bresnan.net

Benefit Resources

Employee Assistance Program

As your employer, Bozeman Health is interested in your total well-being. That is why we offer an Employee Assistance Program through Health Management Systems of America. This program provides a counseling service that helps you manage problems before they adversely affect your personal life, health and job performance. Counselors are available to assist you with any issue, 24 hours a day, 7 days a week.

All employees and their household members are eligible for the Employee Assistance Program. This is a free service, strictly confidential, and includes up to five (5) face-to-face counseling visits along with counseling access over the telephone. If your supervisor refers you to the program for a work-related issue, he or she will never be told the nature of your personal event. Assistance is available for, but not limited to, the following personal and work life situations:

- Emotional and Mental Health
- Family
- Relationships and Marriage
- Workplace
- Substance Abuse/Addictions
- Financial
- Legal
- Health and wellness resources

There is a wealth of valuable work and life resources available online, to include legal and financial resources, wellness information, elder care providers, child care providers, and informational resource articles. You can find this and more at www.my-life-resource.com.

Username: hmsa

Password: myresource

To speak with HMSA or to set up a face to face visit, please call 800-847-7240



MetLaw Legal Plan

Telephone and Office Consultation - MetLaw provides you with telephone and office consultation for an unlimited number of matter with the attorney of your choice. During the consultation the attorney will review the law, discuss your rights and responsibilities, explore your options, and recommend a course of action. The premium is \$18.00 per month.

Legal Representation

Estate Planning Documents

- Simple Wills
- Complex Wills
- Revocable Trusts
- Irrevocable Trusts
- Powers of Attorney (healthcare, financial, childcare)
- Healthcare Proxies
- Living Wills
- Codicils

Family Law

- Adoption
- Guardianship
- Conservatorship
- Name Change
- Prenuptial Agreement
- Protection from Domestic Violence

Juvenile Matters

- Juvenile Court Defense (including criminal matters)
- Parental Responsibility

Financial Matters

- Personal Bankruptcy/Wage Earner Plan
- Debt Collection Defense
- Foreclosure Defense
- Repossession Defense
- Garnishment Defense
- Identity Theft Defense
- Tax Collection Defense
- Negotiations with Creditors
- Tax Audit Representation (municipal, state, federal)

Traffic Offenses * (*Not available in all states*)

- Defense of Traffic Tickets (Excludes DUI)

- Driving Privileges Restoration (includes license suspension due to DUI)

Consumer Protection

- Disputes over Consumer Goods and Services
- Small Claims Assistance

Real Estate Matters

- Sale, Purchase or Refinancing of your Primary, Second or Vacation Home
- Home Equity Loans for your Primary, Second or Vacation Home
- Tenant Negotiations (tenant only)
- Eviction Defense
- Security Deposit Assistance (tenant only)
- Boundary or Title Disputes
- Property Tax Assessments
- Zoning Applications

Document Preparation

- Affidavits
- Deeds
- Demand Letters
- Mortgages
- Notes
- Review of Any Personal Legal Document

Defense of Civil Lawsuits

- Civil Litigation Defense
- Incompetency Defense
- Administrative Hearings
- School Hearings
- Pet Liabilities

Elder Law Matters

- Consultation and Document Review for Issues Related to your Parents:
- Medicare
- Medicaid
- Prescription Plans

- Nursing Home Agreements
- Leases
- Notes
- Deeds
- Wills
- Powers of Attorney

Personal Property Protection

- Consultation and Document Review for Personal Property Issues
- Assistance for Disputes over Goods and Services

Immigration Assistance

- Advice and Consultation
- Review of Immigration Documents
- Preparation of Affidavits
- Preparation of Powers of Attorney

Additional Plan Features

Reduced Fees

Network attorney provide representation for personal injury, probate, and estate administration matters at reduced fees.

Family Matters

- Available for an additional fee
- Separate plan for parents of participants for estate planning documents

E-Services

- Attorney locator
- Law Firm E-Panel
- Free, downloadable legal documents
- Life Guide
- Links to financial planning, insurance, and work/life matters resources

Discount Programs

Services Discounts at Bozeman Health

Services Discount - Bozeman Health provides a discount of 20 percent off the remaining balance on bills incurred at any Bozeman Health provider to include hospital services, health group clinics, Urgent Cares, and Big Sky Medical Center. The discount is available to the employee and qualified dependents. The employee must meet with Bozeman Health Patient Financial Services to set up the discount.

Pharmacy Discount - Highland Park Pharmacy and Big Sky Pharmacy offer over the counter and prescription fills at cost plus 10 percent. (Employees have the option to take the pharmacy discount, or have the prescription run through insurance, but cannot take both).

Cafeteria/Coffee Shop Discount - Employee receive a 20 percent discount on food and drink. Employees may elect to have the purchases paid through payroll withholding.

On-Site Gift Shop - Employee at .6 FTE or greater may elect to have purchases paid through payroll withholding, following 60 days of employment.

Free Employee Parking - Designated parking is available at no cost.



Recreational Discounts

Discounted Ridge Athletic Club Memberships - A corporate discount is available to all employees. Employees at .4 FTE and greater may elect to have the membership dues collected through payroll withholding. The current monthly membership rates are:

Single - \$49.00

Employee + One - \$77.00

Family - \$99.00

Family Plus - \$165.00

To sign up, please visit the Ridge Athletic Club at 4181 Fallon Avenue in Bozeman, or call 406-586-1737.



Discounts and Offers on Entertainment and Travel - Through Tickets at Work, we are able to purchase discounted tickets to theme park, zoo, shows, and other area attractions nationwide, as well as receive discounts on hotel and car rentals. The website to visit is www.ticketsatwork.com. The company code is BDHOS.

Technology Discounts

Verizon Wireless Discounts - Through Verizon, we receive a significant discounts on our personal Verizon accounts to include up to a 22 percent discount on monthly plans, discounts on certain devices, and discounts on accessories.

If you are a current Verizon customer, you can set up the discount online following these directions. You will need to have a company Outlook email address.

1. Go to www.verizonwireless.com/getdiscounts
2. Enter your WORK email address twice and click on “check for discounts”.
3. WAIT to receive an email at work (check spam or junk folder if needed).
4. Click on the “Register Your Line” link (if you don’t see it you may have to right click on the message to down load pictures) the web page will load.
5. Locate the Existing Customers section (bottom left) and click the “Enroll Now” link.
6. Complete information form and submit.
7. You can also visit a local Verizon store to set up the discount.

Microsoft Home Use Program - Employees have the ability to purchase all the Microsoft products that the hospital uses through the Microsoft Home Use Program for as little as \$9.95. This is for both Windows and MAC.

To get set up, follow these directions.

1. Go to <http://hup.microsoft.com>.
2. Select the country.
3. Enter your corporate e-mail address (name@bozemanhealth.org) and insert the following program code:
BE2F820E96 (the 7th character is zero (0) not the letter o).
4. You will get an email at your bozemanhealth.org account for downloading the software. Just forward this email to your personal email accounts (Hotmail, Gmail, YAHOO, etc.).
 - a. Open the forwarded email on the computer you wish to install the software on and follow the instructions.



Work-Life Benefits

Paid Time Off

Earned Time	Employees accrue hours into an Earned Time bank for each hour worked, per pay period, to be used for vacation, holidays, leaves of absences, short-term illnesses, and personal time off. Additionally, earned time can also be used for instances that you do not work up to your regularly scheduled FTE. Earned Time does rollover from year to year and one can accrue a maximum of 560 hours into the bank.
Bereavement	After completion of your probationary period, employees may receive up to three (3) shifts of bereavement pay due to the death of an immediate family member.
Extended Medical Bank Hours	Part and full time employees accrue hours into an Extended Medical bank for each hour worked, per pay period, to be used for employee’s personal illnesses or pregnancy. Thirty two (32) consecutive hours of earned time must be used first. Extended Medical Bank hours roll over form year to year and one can accrue a maximum of 240 hours.
Education	Employees are eligible for up to sixteen (16) hours of education time per year. It is to be used for non-mandatory, continuing education related to employment/position. It is subject to approval by your manager and you must present evidence of attendance to your manager.

Bozeman Health Retirement Plan

Once you have met certain eligibility requirements, you will be automatically enrolled into the Bozeman Health retirement account. Features of the Bozeman Health Retirement plan include:

- 100 percent employer funded at 6 percent of annual salary.
- Must work 1000 hours per calendar year and be employed last calendar day of the year to receive one (1) year of service and 6 percent of funding to the account.
- Fully vested after six (6) years of service.
- Money purchase retirement plan.

Retirement statements are mailed to participants once a year during the spring. The statement will provide you with annual contribution, interest gains/losses, account balance, and vesting information. Once eligibility for the retirement account has been met, a statement will be department mailed to you. Beneficiary designations forms and a plan document will be emailed to your Bozeman Health email.

Please visit SharePoint or contact Human Resources for additional information about the retirement plan.

403(b) Retirement Account

If you wish to contribute money from your paycheck into a tax deferred retirement plan, you have option to a 403b through American Funds. Through American Funds, you will be able to pick from up to 20 different fund families. All full-time and part-time employees are eligible to participate in the 403b accounts. Other features of the 403b include:

- 100 percent employee funded up to IRS annual limit per year (2018 Annual Limit is \$18,500).
- Employees age 50 and older are eligible to contribute catch-up contributions (Currently an additional \$6,000 annually).
- Accounts can start or stop at any time throughout the year.
- You have access to our plan financial advisor through Edward Jones at no cost to you. Marty Haskins can provide financial advice and to help you understand the various investment options within the American Funds platform. Marty can be reached at 406-556-8164.

To begin contributions to a 403b account, please contact or stop by Human Resources for an enrollment packet.



Additional Benefits

Employee Emergency Fund

Employees who find themselves in a financial emergency, can apply for the Employee Emergency Fund. You must be out of your probation period and must submit an application through the Foundation Department. It is subject to approval and the amount gifted varies depending on circumstances/need.

Direct Deposit

Direct deposit of payroll checks is available and encouraged, at no cost.

Jury Duty

Employees may elect to receive base rate wages for the time spent away from work to serve jury duty. Total hours paid will not exceed 40 hours and the employee must turn over the pay received from the courts within 10 days to the payroll department.

 Blue Cross Blue Shield of Montana	Medical	Blue Cross Blue Shield of Montana (800) 447-7828 www.BCBSMT.com
	Dental	Delta Dental (800) 521-2651 www.DeltaDentalIns.com
 Vision care for life	Vision	VSP (800) 877-7195 www.VSP.com
	Life and AD&D LTD	UNUM (800) ASK-UNUM www.AskUNUM.com
	HSA FSA	Health Equity (866) 346-5800 www.HealthEquity.com
	STD Cancer Accident	American Fidelity / American Public Life Holly Pickens Fringe Benefit Resources (406) 770-3057 fbrholly@gmail.com
	Aflac	Aflac Jeremy (406) 539-8282 jeremy@flickemainsurance.com www.Aflac.com
	EAP	Health Management Systems of America (800) 767-5320 www.HMSANET.com
 expanding the concept of employee benefits	Retirement	Employee Benefit Resources (800) 765-9429 www.EBRWorld.com
	Legal Plan	MetLaw Legal (800) 423-0300 www.LegalPlans.com
 BOZEMAN HEALTH	Ebenefits Online Enrollment	Ebenefits (866) 203-8051 www.ebenefits.com/bdh
	Human Resources	Bozeman Health (406) 414-1739 Heather Barnaby hbarnaby@bozemanhealth.org Amy Stafford astafford@bozemanhealth.org

This information is a summary of benefits and does not supersede the carrier-provided summary of benefits.
 Benefits and general provisions described herein are subject to the terms of the Summary Plan Description or Group Contract.