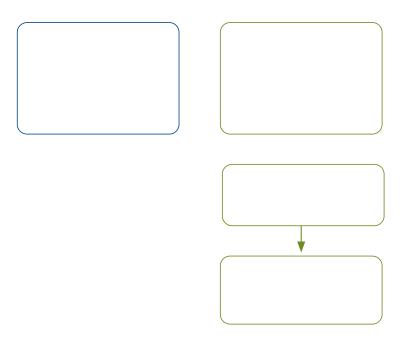
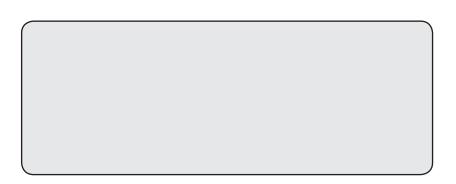
*HWWLQJ 6WDUWHGFo



	_	

ST. LUKE'S HEALTHY U

HOFRPH WR 6W /XNH¶V +HDOWK\ 8) SERSISIODHWLRQ KHDOWE GXF)WH PPS BESTHUV \RX)QG \RXU •• À\ WR DFKLHYH RSW JRRG KHDOWK GHSHQGV ð•P €\ RQ WKH `° À HV ZH PDNI +HDOWPK 180 pÀ WR



			Y L Q J D Q G								

-		

Covered Services

MEDICAL PLAN CHOICES

'HFLGLQJ ZKLFK SODQ LV ULJKW IRU \RX LV D YHU\ SHUVRQDO FKRLFH ,I \RX GRQ¶W DQWLFLSDWH XVLQJ D ORW RI PHGLFDO VHUYLFHV QH[W \HDU \RX PD\ ZDQW WR FRQVLGHU WKH SODQ ZLWK D KLJKHU GHGXFWLEOH 2U PD\EH \RX GRQ¶W SODQ RQ QHHGLQJ PHGLFDO VHUYLFHV QH[W \HDU EXW \RX GRQ¶W IHHO FRPIRUWDEOH ZLWK WKH ILQDQFLDO ULVN RI D KLJK GHGXFWLEOH RU KLJKHU RXW RI SRFNHW PD[LPXP MXVW LQ FDVH WKH XQH[SHF7WRHKGH 168 15 S\S\K\QHVYDOXDWH \RXU SODQ GHFLVLRQV \RX PD\ ZLVK WR DFFHVV WKH 3ODQ 6HOHFWRU 7RRO RQ ,QVLGH 6W /XNH V E\ JRLQJ WR +XPDQ 5HVRXUFHV VHp°€0 W•0 80\P0VH[SFHO VHp°WR +XPPH0WKH,QQ

‡ 7KH VDPH LV WUXH IRU WKH RXW RI SRFNHW PD[LPXP 6RPHRQH ZLWK 3HPSOR\HH RQO\' FRYHUDJH LV UHVSRQVLEOH IRU SD\LQJ RXW RI SRFNHW H[SHQVHV XS WR EHIRUH WKH SODQ ZLOO SD\ IRU LQ QHWZRUN FRYYbull ble@uchibleLandLFHV coinsurance for medical and pharmacy apply to the out-of-pocket maximum

2015/2016 Prescription Plan Summary

HealthSave Prescription Plan Summary - Effective April 1, 2015

Benefits	Incentiv	e Dental	Dental Plus		
Provider Network	PPO	Premier	PPO	Premier	
Maximum Benefit (per individual)					
30DQ < HDU 0D[LPXP					
2UWKRGRQWLF /LIHWL	PH 0D[LPX1PR	FRYHUDJH			
Plan Year Deductible					
6 L Q J O H	1 R	GHGXFWLEOH			
	1	R GHGXFWLEOH			
		1 R	GHGXFWLEOR	Η	

	I		

ONLINE ENROLLMENT QUICK START GUIDE

:LWK WKH FRQYHQLHQFH RI RQOLQH HQUROOPHQW \RX KDYH WKH DELOL

MID YEAR CHANGES - \$)7(5 < 285 ,1,7,\$/ +(\$/7+ ,1685\$1&((/(&7,21 :+(1 &\$1 < 28 &+\$1*(< 285 %(1(),7 (/(&7,216"

*HQHUDOO\ WKH EHQHILW HOHFWLRQV \RX PDNH FDQQRW EH FKDQJHG XC\RX KDYH D TXDOLILHG 3FKDQJH LQ VWDWXV´ 'RFXPHQWDWLRQ LV UHTXL

',' < 28 .12:" 30DQ EHFRPHV GLYRUFHG GXULQJ D PUH

'HSHQGHQW FKLOG OLIH FRYHUDJH LV DOVR RIIHUHG LQ
DPRXQWV RI RU \$Q HPSOR\HH PD\ DGG
WKHLU QHZERUQ V DGRSWHG FKLOG UHQ ZLWKLQ GD\V RI
ELUWK RU SODFHPHQW IRU DGRSWLRQ

&KLOGUHQ PD\ UHPDLQ RQ WKH SODQ XS WR \HDUV RI DJH 2YHU DJH FKLOGUHQ ZLOO EH GURSSHG IURP \RXU SODQ DW WKH HQG RI WKH PRQWK LQ ZKLFK WKH\ WXUQ \HDUV ROG ,I ERWK \RX D @ 0

Tuition Reimbursement and Certification Assistance

7XLWLRQ UHLPEXUVHPHQW DQG FHUWLILFDWLRQ DVVLVWDQFH DUH DYDLODEOH WR HPSOR\HHV ZKR DUH ORRNLQJ IRU D FDUHHU ZLWKLQ WKH 6\VWHP

7KH 7XLWLRQ 5HLPEXUVHPHQW 3URJUDP LV GHVLJQHG WR EHQHILW QRW RQO\ WKH GHJUHH VHHNLQJ HPSOR\HH EXW DOVR

YOUR FLEXIBLE SPENDING ACCOUNTS

)OH[LEOH 6SHQGLQJ \$FFRXQWV RU)6\$V DOORZ \RX WR SD\ IRU KHDOWK FDUH RU GHSHQGHQW FDUH H[SHQVHV XVLQJ SUH WD[GROODUV ,I \RX FKRRVH WR SDUWLFLSDWH LQ

Q WKH +HDOWK &DUH RU /LPLWHG 3XUSRVH)6\$ LI \RX

\$FXSXQFWXUH

PAY IN LIEU OF BENEFITS (PILB)

Enrollment in PILB

(PSOR\HHV DUH RQO\ HOLJLEOH WR HOHFW RU UHYRNH 3,/% ZLWKLQ GD\V RI WKHLU KLUH RU WUDQVIHU WR D EHQHILWV HOLJLEOH VWDWXV GDWH GXULQJ WKH GHVLJQDWHG DQQXDO HQUROOPHQW SHULRG RU ZLWKLQ GD\V RI D TXDOLI\LQJ FKDQJH LQ VWDWXV

7KH SD\ LQ OLHX RI E<u>BISQ7H PL1W</u>FW SODQ LV DQ EHQHILW HOHFWLRQ GHVLJQHG WR DOORZ EHQHILWV HOLJLEOH

HQUROOT's €4's

ÐrdJÀEHQpG€Bw0 €rd•Æ @ `Q GHĎ G€H RQO\0GP0(KWKHDOHVLJ9/P9/R/°€0GH

<u>M € 's E`</u>7,‡*¬®þÿ 9 € P ð V L 0

+(pS §0

U R O €`@

Ê€

VOLUNTARY BENEFITS

7R SURYLGH DGGLWLRQDO EHQHILWV WR \RX ZH RIIHU YROXQWDU\ VXSSOHPHQWDO LQVXUDQFH SODQV

\$V D FRQYHQLHQFH WR HPSOR\HHV ZKR ZDQW WR
SDUWLFLSDWH LQ DQ\ RI WKH 9ROXQWDU\ %HQHILWV 6W /XNH¶V
KDV DJUHHG WR WDNH SD\UROO GHGXFWLRQV IURP HPSOR\HHV
DQG UHPLW WKHP WR WKH HOHFWHG YHQGRU V 3OHDVH
DSSUHFLDWH WKDW WKH SURJUDP SURYLGHV SURGXFWV RIIHUHG
E\ \$)/\$& 0HW/LIH DQG RWKHU YHQGRUV DQG LV QRW
DQ HPSOR\HH EHQHILW SODQ VSRQVRUHG E\ 6W /XNH¶V
\$FFRUGLQJO\ 6W /XNH¶V KDV QR UHVSRQVLELOLW\ IRU WKH
DGPLQLVWUDWLRQ RI WKH SURJUDP RU IRU DQ\ EHQHILWV
SD\DEOH WKHUH XQGHU 6W /XNH¶V GRHV QRW JXDUDQWHH
WKDW WKH YHQGRUV RIIHU WKH ORZHVW RQV@WUDg\py WK-SUp\0PV@SD SUp

		Payment									
< R X	FDC	FKRF	RVH	WR	KDYH	\RXU	SUHPLX	PV	DXWR	PDWLF	D O O \
						_					

Long Term Care Insurance MasterCare Solutions (800) 275-4582 x8814

Why Buy a TRANSAMERICA Long Term Care (LTC) insurance policy:

/RQJ 7HUP &DUH FDQ KDSSHQ WR DQ\RQH DW DQ\ WLPH

- ‡ 1HFHVVDU\ 1HDUO\ RI \$PHULFDQV QHHG /7& VHUYLFHV GXUQQJ WKHLU OLYHV

FRQWULEXWLRQV DQG RU HPSOR\HH EHIRUH WD[DQG DIWHU WD[FRQWULEXWLRQV

)XQGLQJ 0HGLXP DQG \$GPLQLVWUDWLRQ <u>0HGLFDO DQG 3UH</u>VFULSWLRQ 3ODQV 6HOI IXQGHG PHGLFDO DQG SUHVFULSWLRQ 0DQPH SPÜW

Ž€	0 xW§Gïï(•þ	p′P€ g^W Ex	<) •H G A3Bš¬F

IMPORTANT LEGAL NOTICES

Summary of Material Modification
7KLV GRFXPHQW FRQVWLWXWHV D 6XPPDU\ RI 0DWHULDO

SUHPLXPV IRU DQ HPSOR\HU VSRQVRUHG SODQ 2QFH LW LV GHWHUPLQHG WKDW \RX RU \RXU GHSHQGHQWV DUH HOLJLEOH IRU SUHPLXP DVVLVWDQFH XQGHU 0HGLFDLG U0P€ LXT ÀLJL" XU GHS P0HPIPLP @p 0ð@ HPLSHG RU 0WS P0GHSHQGHQWV DUH E 0 Ið€0G 0

:LWK \RXU LQLWLDO EHQHILWV HQUROOPH HQUROO RQOLQH WKURXJK P\%& 5HIHU \ ERRNOHW IRU WKH 2QOLQH (QUROOPHQW KRZ WR JHW VWDUWHG