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# The Healthiest Population Starts with You

We offer a wide range of options so that you can focus on what matters most — prioritizing the health and well-being of you and your family, now and in the future.

At Alice Peck Day (APD), we know that the health and well-being of our employees is a critical component of our vision to achieve the healthiest population possible. Our robust benefits package is designed to provide the options and support you and your family need to stay healthy. Now is the time to discover benefits your way and make choices for the year ahead.

### **Benefits Overview**

### **ELIGIBILITY**

Each position is budgeted to work a certain number of hours per week, based on a Full Time Equivalent (FTE) schedule. Although many positions may regularly work more hours than budgeted, it is important to note that benefits eligibility and employee contributions toward health care coverage are based on budgeted hours, not actual hours worked.

Employees budgeted at least 0.5 FTE, and their eligible dependents, may participate in our benefits plans on the employee's 30th day of employment.

In addition to FTE, many benefits are based on salary, including health, life, and disability buy-up insurance. Changes to your salary during the year may change your per-paycheck premiums for these benefits. You will be sent a confirmation statement if a change in salary occurs.

### **COUPLES ENROLLMENT RESTRICTION** (Double Coverage Rule)

If you and your spouse are both eligible to enroll in D-HH benefits, you cannot be enrolled as both an employee and dependent in health and life insurance. In addition, either you or your spouse may cover dependents in health and life insurance; they cannot be covered by both of you.

### **CHANGING YOUR BENEFITS ELECTIONS**

The benefits plan year is January 1 through December 31. Each fall, you have an opportunity to change your benefits elections for the upcoming plan year during the Open Enrollment period. The elections you make during Open Enrollment cannot be changed during the year unless you experience a Qualified Life Event.

Qualified Life Event





### Enroll

Our online enrollment system – **BenefitConnect** – gives you easy access to your benefits information, decision-support tools, and financial planning resources throughout the year. Once you've reviewed this guide, you can enroll in your 2022 benefits by logging on to **BenefitConnect** using the instructions below.

1 Go to MyAPDBenefits.com.

NOTE: If you are logged on to the APD network, your sign-in will be automatic. If you are prompted to sign-in, please use your APD Windows username and password. If you do not remember your APD Windows username and/or password, please call the Help Desk at 603.650.2222 and they can reset it for you. Once you have been given a new password, you will be required to change it to a confidential password.

- 2 Hover over the Enroll tab in the navigation and click "Enroll in Coverage."
- 3 On the **BenefitConnect** home screen, a countdown will pop up on your screen. Click "Get Started" to start your enrollment process.

- 4 The system will guide you through adding your dependents (if needed), enrolling in benefits, and updating beneficiaries.
- 5 Click **Save** and **Continue** at the bottom of each page as you go through the process.
- 6 When you are finished enrolling, *print a copy* of your final elections for your records. You can log on to *BenefitConnect* to view and/or print your benefit elections at any time throughout the year.

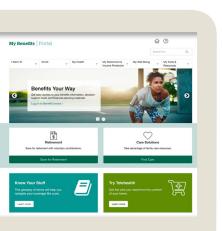
**REMEMBER!** Before you log on to **BenefitConnect**, be sure to have the name, Social Security Number, and date of birth for each **eligible dependent** you wish to cover for medical and/or dental coverage. If you do not add all of your dependent information, the system will not highlight the appropriate benefits options available to you.

Please confirm that only eligible dependents are enrolled in our programs by keeping your dependent information up-to-date.

Who is an eligible dependent?



MyAPDBenefits.com has all the details you need to make the most of the benefits that Alice Peck Day offers. It's also mobile-friendly, so you can get the information you need when and where you need it most!



### If You Don't Enroll

### **NEWLY BENEFITS ELIGIBLE IN 2022**

If you are hired in 2022 or become newly eligible for benefits during the 2022 calendar year, you must make your benefits elections online within 30 days of your benefits eligibility date (hire date in most cases).

If you do not make your benefits elections during the period noted above, you will be enrolled automatically in the default benefits listed below and you will not be eligible for an HSA. You will not have the opportunity to change your benefits elections until the next Open Enrollment unless you experience a qualified life event.

#### Default Benefits:

- ElevateHealth HSA Plan (no HSA), Employee Only coverage
- Basic Dental Insurance, Employee Only coverage
- Basic Short-Term and Long-Term Disability Insurance
- Basic Life and Accidental Death and Dismemberment (AD&D) Insurance

Your coverage will be effective on your 30th day of employment and will continue through December 31, 2022.







# Your Medical Coverage

We offer medical and prescription drug plans to provide you and your family with the coverage you need. All plans offer free (in-network) preventive care. We encourage you to use your primary care provider to coordinate your health care and to seek the lowest-cost, highest value health care services, and prescription drugs. To help you choose a plan that meets your personal needs and budget, we have outlined some similarities and differences between the plans.

### YOU HAVE THREE PLANS TO CHOOSE FROM

### **ELEVATEHEALTH HSA PLAN**

**ELEVATEHEALTH HRA PLAN** 

ElevateHealth is an insurance partnership of APD, Elliot Health System, and Harvard Pilgrim Health Care. Employees who enroll in one of the two ElevateHealth plans can expect care from a network of providers and facilities primarily located in New Hampshire and Vermont, where most of our employees and their families are seeking care today. Coverage is not provided for services outside the ElevateHealth network. The only exception to this provision is in the event of a medical emergency or for a dependent child living outside NH or VT and for whom you have completed an **Out of Area Dependent Form**.

### **CHOICE HEALTH PLAN**

The Choice Health Plan, administered by Health Plans, Inc., offers a national network of providers. In the Choice Health Plan, you have access to the Harvard Pilgrim and UnitedHealthcare network providers.

To find out more about the network, log on to **healthplansinc.com/d-h**.





### **REGISTER FOR D-HH VIRTUAL URGENT CARE NOW**

With Dartmouth-Hitchcock Health (D-HH) Virtual Urgent Care (powered by MDLIVE), APD medical plan members can get non-emergency care quickly any time and from the convenience of your home, office, or wherever you might be.

Connect by phone or by video on your laptop, tablet, or smartphone. Download the D-HH Virtual Urgent Care App and create a free account so that you'll be ready when you're not feeling well. You can also access from MyAPDBenefits.com > My Health > Telehealth. The cost for each appointment is \$49 for employees and family members enrolled in one of our medical plans.

#### **HOW THE PLANS ARE THE SAME**



### The deduction from your paycheck is the same.

The employee premiums are based on the coverage level and your base salary. However, premiums will not differ based on the plan you choose.



### The plans cover the same in-network services.

Services include preventive care (generally covered at 100%), emergency services, inpatient and outpatient care, and prescription drugs.



### Prescription drug coverage is included.

How you pay for prescription drugs and the amount you pay depends on the plan you choose.



### There is a deductible.

Each plan has a set amount you pay before the plan begins paying for services beyond covered preventive care.



### You share in the out-of-pocket costs.

You pay co-insurance (a percentage of the cost, usually payable after the deductible) during the year with the plan.



### You're protected by an out-of-pocket maximum.

If your medical and prescription drug costs hit this maximum, the plan will pay 100% of any additional costs for covered in-network services for the remainder of the year. This feature protects you financially, should you or one of your covered dependents experience a catastrophic illness or injury.

### **HOW THE PLANS ARE DIFFERENT**

- The ElevateHealth HSA Plan and the Choice Health Plan both include a Health Savings Account (HSA). If access to an HSA to save and use for current and future eligible health care expenses is important to you, you may consider one of these plans.
- With the ElevateHealth HRA Plan, you'll have low copays for generic medications, and there are caps on what you'll pay for brand or specialty medications. If you choose The Elevate Health HSA Plan or the Choice Health Plan, your prescription drugs are subject to deductibles and co-insurance, unless the medication is on the Preventive Drug List, in which case you will bypass the deductible and only pay co-insurance.
- The ElevateHealth Plans work best when you primarily receive care in the New Hampshire or Vermont area. The Choice Health Plan allows you to seek coverage wherever you are, and is not limited to certain states.

See a summary of your 2022 Medical/Prescription Plans here.

# 2022 Medical/Prescription Plans Summary

	ELEVATEHEALTH HSA PLAN		ELEVATEHEALTH HRA PLAN		CHOICE HEALTH HSA PLAN	
PLAN FEATURES	Preferred Providers Clinic Based Services	ElevateHealth Network	Preferred Providers Clinic Based Services	ElevateHealth Network	In-Network	Out-of-Network
Deductible	Single: \$ Family: \$		Single: \$1 Family: \$2		Single: \$2,000 Family: \$4,000	Single: \$4,000 Family: \$8,000
Co-Insurance	10% after deductible	30% after deductible	10% after deductible	30% after deductible	30% after deductible	50% after deductible
Out-of-Pocket Maximum	Single: \$ Family: \$ (Includes presc	\$4,400	Single: \$2 Family: \$4 (Includes prescrip	,400	Single: \$3,400 Family: \$6,800 (Includes prescription drugs)	Single: \$5,600 Family: \$11,200 (Includes prescription drugs)
APD Annual HSA or HRA Contribution	Salary of \$49,999 or less: HSA Single: \$1,200; Family: \$2,400 Salary of \$50,000-\$149,999: HSA Single: \$500; Family: \$1,000 Salary of \$150,000+: HSA Single: \$0; Family: \$0		Salary of \$49,99 HRA Single: \$600; F Salary of \$50,000 HRA Single: \$200; Salary of \$15 HRA Single: \$0;	amily: \$1,200 0-\$149,999: Family: \$400 0,000+:	HSA Single: \$1,20 Salary of \$50,0 HSA Single: \$500	000-\$149,999: 0; Family: \$1,000 :150,000+:

# **Pharmacy Benefits**

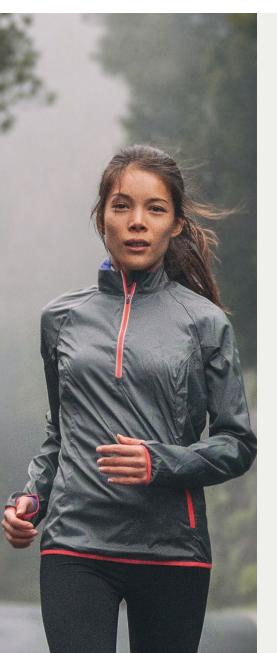
Based on IRS guidelines, Health Savings Account Plans (HSAs) require that medical care and prescriptions are handled the same toward the deductible and out-of-pocket maximum; the member pays the contracted rate for prescriptions until meeting the deductible and then pays co-insurance based on the pharmacy. In the ElevateHealth HSA Plan and the Choice Health Plan, drugs on the **Preventive Drug List** will bypass the deductible and only require members to pay co-insurance.

### **STICK WITH GENERICS**

If a brand medication is requested when a generic is available, you pay the plan copay/coinsurance for the brand medication plus the difference between the cost of the brand and generic medications. To help save money, please work with your providers to request generic when available.

Days Supply	Locations	ELEVATEHEALTH HSA PLAN	ELEVATEHEALTH HRA PLAN	CHOICE HEALTH PLAN
30 Days	<ul> <li>D-H Pharmacy</li> <li>Cheshire Medical Center Pharmacy</li> <li>The Pharmacy in Bennington, VT &amp; Manchester, VT</li> <li>Select CVS Retail Pharmacies</li> </ul>	Subject to deductible and 10% co-insurance	Generics \$10 Brand 30% co-insurance up to \$100 Specialty 50% co-insurance up to \$200	Subject to deductible and 10% co-insurance
	<ul><li>Colonial Pharmacy in New London, NH</li><li>All Other Retail</li></ul>	Subject to deductible and 30% co-insurance	Generics \$15 Brand 40% co-insurance up to \$100 Specialty 60% co-insurance up to \$200	Subject to deductible and 30% co-insurance
	<ul><li>D-H Pharmacy</li><li>D-H Pharmacy Mail Order</li><li>Cheshire Medical Center Pharmacy</li></ul>	Subject to deductible and 10% co-insurance	Generics \$30 Brand 30% co-insurance up to \$300	Subject to deductible and 10% co-insurance
90 Days	OptumRx Mail Service Pharmacy	Subject to deductible and 30% co-insurance	Generics \$45 Brand 40% co-insurance up to \$300	Subject to deductible and 30% co-insurance
	<ul> <li>Colonial Pharmacy in New London, NH</li> <li>The Pharmacy in Bennington, VT &amp; Manchester, VT</li> <li>All Other Retail</li> </ul>	Not Available	Not Available	Not Available





# 2022 Medical/Prescription Employee Contributions

	Bi-Weekly Premiums for Non-Tobacco Users
Medical and Prescription Plan	ElevateHealth Plan with HSA or HRA Choice Health Plan
FTE (0.75 or Greater/30-40 hour	rs per week)
	Base Salary \$0 to \$49,999
Employee Only	\$41.20
Employee + Child(ren)	\$61.79
Employee + Spouse	\$86.50
Family	\$114.09
	Base Salary \$50,000 to \$149,999
Employee Only	\$61.33
Employee + Child(ren)	\$92.00
Employee + Spouse	\$128.81
Family	\$169.91
	Base Salary \$150,000 or greater
Employee Only	\$91.79
Employee + Child(ren)	\$137.66
Employee + Spouse	\$192.74
Family	\$254.23
FTE (0.5 or 0.74)	
Employee Only	\$133.41
Employee + Child(ren)	\$204.16
Employee + Spouse	\$282.99
Family	\$372.05

### **Tobacco Use Premium**

Employees or their covered dependents (including their spouse) who use tobacco may be subject to a tobacco use premium equal to \$15 per bi-weekly pay period (\$390 per year based on 26 pay periods) per family, which will be added to their bi-weekly health care plan contributions. It is important to note that the tobacco use premium will be \$15 per-pay-period, regardless of the number of family members who use tobacco.

### **Spousal Surcharge**

If you choose to cover your spouse under one of our medical plans, and your spouse has access to group-sponsored health insurance coverage through their own employer, your 2022 medical plan premiums will be twice the standard premium for the coverage in which you choose to enroll.

NOTE: This does not apply if your spouse is employed by and benefits eligible at an entity in the D-HH system.

These surcharges can be changed throughout the plan year. Should your circumstances change, please reach out to **DHBenefits@Hitchcock.org** for assistance.





# Health Savings Account (HSA)

We provide a base contribution to the HSA for all eligible employees who have a base salary of less than \$150,000 and enroll in the ElevateHealth HSA Plan or the Choice Health Plan. APD will contribute the following amounts for 2022:

Salary Bands	HSA – Employee Only	HSA – All Other Coverages
\$0-\$49,999	\$1,200	\$2,400
\$50,000-\$149,999	\$500	\$1,000

For additional details about contributions and limits and to learn how the HSA works, visit **MyAPDBenefits.com** > My Health > Health Savings Accounts.

# Health Reimbursement Account (HRA)

If you enroll in the ElevateHealth HRA Plan and earn a base salary of less than \$150,000, APD will contribute to your HRA to help you pay for eligible expenses subject to your medical plan deductible and co-insurance. We will contribute the following amounts for 2022:

Salary Bands	HRA – Employee Only	HRA – All Other Coverages
\$0-\$49,999	\$600	\$1,200
\$50,000-\$149,999	\$200	\$400

For additional details about contributions and limits, visit **MyAPDBenefits.com** > My Health > Health Reimbursement Accounts.

Please note: Our contributions will be deposited into your account as a lump-sum deposit in the first paycheck of the year. If you are a new hire or you are newly benefits eligible in 2022, you will receive a pro-rated lump sum contribution in the first pay period of the month following your benefits eligibility.





# Flexible Spending Accounts (FSAs)

We offer two Flexible Spending Accounts – administered by HealthEquity – the Health Care Reimbursement Account (HCRA) and Dependent Care Reimbursement Account (DCRA).

### **HEALTH CARE REIMBURSEMENT ACCOUNT (HCRA)**

The HCRA is a pre-tax savings account available to employees who waive health care coverage and enroll in the ElevateHealth HRA Plan. The HCRA can be used to pay for eligible health care, dental, or vision expenses that are not covered by insurance. The maximum amount you may contribute to your HCRA is \$2,750 for 2022.

### **DEPENDENT CARE REIMBURSEMENT ACCOUNT (DCRA)**

The DCRA is a pre-tax savings account for eligible elder and childcare expenses so that you and your spouse can work, obtain gainful employment, or attend school full time. Your day care or elder care provider must provide you with their Social Security Number (SSN) or Tax Identification Number (TIN) in order to receive reimbursement for your expenses. You may contribute up to \$5,000 for your family (or \$2,500 if married and filing separate tax returns) for 2022.

NOTE: You can only participate in the DCRA if you earn less than the highly compensated limits. For the 2022 plan year, an employee who earned more than \$135,000 in 2021 is considered a highly compensated employee.

Unused FSA balances do not roll over at the end of the year and the unused funds are forfeited. You must elect to participate in an FSA each Open Enrollment period.

### Dental Insurance

We offer two dental options for you and your eligible dependents through Northeast Delta Dental:

Plan Features	Basic Dental	Enhanced Dental
Deductible	Single: \$50 Family: \$150	Single: \$25 Family: \$75
Preventive Care	100%, no deductible (2 annual cleanings)*	100%, no deductible (2 annual cleanings)*
Basic Restorative Care (Fillings, Extractions, Root Canals)	Plan pays 50%, after deductible	Plan pays 80%, after deductible
Major Restorative Care (Crowns, Dentures, Bridges)	Plan pays 50%, after deductible	Plan pays 50%, after deductible
Orthodontia	Plan pays 50%, no deductible, lifetime maximum benefit of \$2,000 per covered member	Plan pays 50%, no deductible, lifetime maximum benefit of \$2,000 per covered member
Annual Maximum Benefit	\$1,000 per covered member	\$1,500 per covered member

<sup>\*</sup>Subject to the annual maximum.

And here's how much you'll pay bi-weekly for each plan:

	Employee Bi-weekly Contribution	
Dental Coverage Level	Basic Dental	Enhanced Dental
Employee	\$2.58	\$5.69
Employee + Child(ren)	\$10.85	\$21.68
Employee + Spouse	\$10.85	\$21.68
Family	\$20.66	\$40.80

For more information, visit **MyAPDBenefits.com** > My Health > Dental Insurance, or call 603.223.1000.

### **Enhanced Dental Double-Up Max**

Members may double their annual maximum by accumulating \$250 a year in additional benefits for use in the future. Northeast Delta Dental must have paid a claim for either an oral exam or a cleaning during a calendar year and may not exceed a threshold of \$500 per member. Carryover benefit amounts cannot be used toward lifetime orthodontic benefits.





# Vision Coverage

We offer vision coverage for eyewear through DeltaVision. You can search for in-network providers at **eyemedvisioncare.com**. Click on "Find a Provider" and choose "Access" from the "Choose Network" drop-down menu.

Our medical plan covers your annual routine eye exam under preventive services, but the DeltaVision plan can be used toward your frames and lenses. The plan provides the following in-network benefits:

Plan Features	In-network Vision Coverage
Frames	\$130 allowance every 24 months, then 20% off the balance.
Lenses	Available once every 12 months, you pay a \$10 copay for standard plastic lenses, including bifocal and trifocal, and the plan pays the balance. Additional copays apply to other lens options, like UV coating, tinting, and scratch resistance.
Contacts	\$130 allowance every 12 months (in lieu of spectacle lenses). In addition to the allowance, you also receive 15% off any balance payable for non-disposable contacts.
Laser Vision Correction — LASIK or PRK	15% off retail price or 5% off promotional price.

Here's how much you'll pay bi-weekly for vision coverage:

Employee Bi-weekly Contribution	
Employee	\$2.21
Employee + Child(ren)	\$4.17
Employee + Spouse	\$4.30
Family	\$6.50

### Find additional discount options on MyAPDBenefits.com.

\*Discounts do not apply for benefits provided by other group benefit plans.









### **Income Protection**

In addition to those traditional benefits outlined in this guide, we also offer many other programs. Some of these are made available to you at no cost — and for others, you'll pay the full cost for extra protection for you and your family. These options round out your entire benefits package.

### STAFF SHORT-TERM AND LONG-TERM DISABILITY INSURANCE

We provide Short-Term Disability (STD) and Long-Term Disability (LTD) insurance at no cost to you through Sun Life Financial. Both provide income protection for non-work-related injuries or illnesses. Disability payments are considered taxable income and may be offset by Social Security Disability, Workers' Compensation, pension payments, or any other group disability insurance payments that you are eligible to receive. Sun Life Financial determines eligibility and medical necessity for STD and LTD.

### Short-Term Disability (STD) Insurance

- 70% of your base salary, for a maximum of 24 weeks Long-Term Disability (LTD) Insurance
- 50% of your base salary, to a maximum of \$15,000 per month

Staff STD benefits begin following a 14-day elimination period. You will use available earned time to provide income during this elimination period. In order to be eligible for STD coverage, you must begin STD on the 15th full day of missed work. Sun Life Financial will determine eligibility and medical necessity for LTD. If approved, LTD payments begin immediately following the date STD payments end.

### LTD INSURANCE "BUY-UP" OPTIONS

In addition to the LTD benefits provided to you at no cost, our benefits program offers two "buy-up" options. If you choose one of these options, you are responsible for paying the entire cost of the "buy-up" coverage through after-tax payroll deductions.

- **1 Evidence of Insurability (EOI)** may be required. The buy-up options are as follows:
  - 60% of your base salary, to a maximum of \$15,000 per month
  - 66 2/3% of your base salary, to a maximum of \$15,000 per month





### STAFF LIFE AND AD&D INSURANCE BENEFITS

We provide Basic Life and Accidental Death and Dismemberment (AD&D) insurance\* — administered by Sun Life Financial — to offer financial protection for you and your family if you die or become seriously injured while you are employed with us.

The following Life and AD&D Insurance benefits are provided to eligible employees at no cost to you:

### Basic Life Insurance

• 1 x annual salary up to \$200,000

### Accidental Death and Dismemberment (AD&D) Insurance

- 1 x annual salary up to \$200,000
- \*Under the plan provisions, Basic Life/AD&D insurance reduces by 50% at age 70.

### STAFF SUPPLEMENTAL LIFE AND AD&D INSURANCE\*\*

In addition to the Basic Life and AD&D Insurance provided to you at no cost, you can purchase additional Supplemental Life and AD&D Insurance for yourself and your eligible dependents. Any changes you make while on Leave of Absence will not take effect until you are actively back at work. It's important to know that some levels of coverage will require you to provide evidence of your good health or **Evidence of Insurability (EOI)**.

### Staff Supplemental Life Coverage Options

• Enroll in coverage up to five times your annual salary, in one-half salary increments, up to \$1,500,000

### Spouse Life/AD&D Insurance Coverage Options

• Enroll in coverage up to \$100,000 in \$5,000 increments, subject to EOI

### Dependent Child(ren) Life Insurance Coverage Options

• Enroll in coverage in the amount of \$5,000 or \$10,000

NOTE: One premium covers all of your eligible children.

<sup>\*\*</sup>Under the plan provisions, employee Supplemental Life/AD&D insurance coverage reduces by 50% at age 70.







### Retirement

We know the importance of preparing for the future to ensure financial security for you and your family. Eligible employees may save for retirement by making voluntary contributions to the Alice Peck Day Employee Investment Plan through the 403(b) Plan, 403(b) Roth After-Tax Plan, or a combination of both.

You may save up to 100% of your income, subject to the IRS annual maximums. If you are age 50 or older in 2022, you may also make "catch-up" contributions, subject to IRS annual contributions. You may make changes to your contributions at any time throughout the year through T. Rowe Price.

To be eligible for employer contributions, employees must be at least 21 years old and complete a year of service (defined as 975 hours).

Matching contributions begin on the first day of the calendar quarter after an employee becomes eligible.

To learn more about the retirement plans offered to you as a APD employee, and the contributions APD will make to your retirement plan, visit **MyAPDBenefits.com** > My Retirement & Income Protection and browse the Retirement pages.



# Work/Life

We offer programs for work and life to help you live well and take care of yourself. Whether you're looking to get fit or stay fit, trying to find family care, or need help managing debt, we are your partner in achieving physical, financial, and total well-being.









### **Practitioner Benefits**

The following apply to benefits eligible Practitioners in lieu of the benefits described elsewhere in this guide.

## PRACTITIONERS SHORT-TERM AND LONG-TERM DISABILITY INSURANCE

APD provides Short-Term Disability (STD) and Long-Term Disability (LTD) Insurance at no cost to you through Sun Life Financial. Both STD and LTD provide income protection for non-work related injuries or illness. STD and LTD payments may be offset by Social Security Disability, Workers' Compensation, pension payments, or any other group disability insurance payments that you are eligible to receive. Both STD and LTD payments are considered taxable income.

### Short-Term Disability (STD) Insurance

Practitioner disability benefits will be provided for Practitioners of APD. Details regarding pay replacement will be provided on an individual basis directly to each Practitioner.

### Long-Term Disability

• 50% of your base salary, to a maximum of \$15,000 per month

Sun Life Financial determines eligibility and medical necessity for LTD. If approved, LTD payments begin immediately following the date STD payments end.

### Long-Term Disability Insurance "Buy-Up" Options

In addition to the LTD benefit provided to you at no cost, APD's 2021 Benefits program offers two "buy-up" options. If you choose one of these options, you are responsible for paying the entire cost of the "buy-up" coverage through after-tax payroll deductions. In addition, Evidence of Insurability (EOI) may be required. The buy-up options are as follows:

- 60% of your base salary, to a maximum of \$15,000 per month
- 66 2/3% of your base salary, to a maximum of \$15,000 per month

### Evidence of Insurability







### **Practitioner Benefits**

The following apply to benefits eligible Practitioners in lieu of the benefits described elsewhere in this guide.

### **RETIREMENT PLANS**

Effective from and after July 1, 2012, the 403(b) Plan provides for both pre-tax and Roth (after-tax) elective contributions, automatic enrollment, and discretionary matching and non-elective employer contributions.

To be eligible for employer contributions, employees must be at least 21 years old and complete a year of service (defined as 975 hours).

Matching contributions begin on the first day of the calendar quarter after an employee becomes eligible.

Eligible Practitioners are also able to contribute to a 457(b) Plan.

For more information about these plans, you should consult the Summary Plan Description.

### **CONTINUING MEDICAL EDUCATION (CME)**

Practitioners are eligible for \$3,000 and 5 days per year to be used for continuing education, licenses, and any other courses or education provided outside APD. No more than \$6,000 can be accrued; this represents two (2) years worth of funds. If a \$6,000 balance is carried into the third year (at which time \$3,000 would be added), the unused \$3,000 portion from year #1 would be dropped. CME days cannot be carried over to the second year. Licenses, DEA, and one (1) professional membership will be paid by APD per year or as required.





# Physician Benefits

### PHYSICIAN LIFE INSURANCE\*

The 2022 benefits program provides Basic Life and Accidental Death and Dismemberment (AD&D) Insurance through Sun Life Financial. The following Life and AD&D benefits are provided to Physicians at no cost.

Physician Basic Life Insurance	Physician AD&D Insurance
Equal to \$200,000	Equal to \$200,000

IRS rules allow an employer to provide up to \$50,000 of life insurance to an employee, tax free. The cost of coverage for any amount over \$50,000 is subject to taxation, or "imputed income."

### PHYSICIAN SUPPLEMENTAL LIFE INSURANCE

For added financial protection, Physicians have an opportunity to select Supplemental Life Insurance options for individual and dependent coverage. Physicians may select group-rated Supplemental Life Insurance through Sun Life Financial.

### Sun Life Financial Group-Rated\*

Available in increments of \$100,000, up to a maximum of \$1,500,000, subject to EOI.

### PHYSICIAN DEPENDENT LIFE AND AD&D INSURANCE

Group-Rated	
Spouse	Available in \$5,000 increments, up to \$100,000, subject to EOI.
Dependent Child(ren)	Available in increments of \$5,000 or \$10,000.

For more details on these plans, visit **MyAPDBenefits.com** > My Retirement & Income Protection > Life and AD&D Insurance.

<sup>\*</sup>Physician Basic Life and AD&D Insurance coverage and Group-Rated Supplemental Life Insurance coverage reduces by 50% at age 70.





# **Important Reminders**

### MY BENEFITS PORTAL

**MyAPDBenefits.com** has all the details you need to make the most of the benefits Alice Peck Day has to offer, including contact information for our vendors. It's also mobile-friendly, so you can get the information you need when and where you need it most!

### **ADD YOUR BENEFICIARIES**

We know life changes (birth, marriage, divorce, death) are inevitable, but when these changes occur, it's important to keep your beneficiary designations current. Go to **MyAPDBenefits.com** today to add your beneficiaries in **BenefitConnect**. To add your beneficiary for your retirement plan, go to **MyAPDBenefits.com** > Retirement & Income Protection, and select any of the retirement plans.

### PLAN DOCUMENTS AND SUMMARY PLAN DESCRIPTIONS

This Guide to Your Benefits provides a brief summary of benefits plans effective January 1 – December 31, 2022. The Plan Documents and Summary Plan Descriptions (SPDs) fully describe the plans. If there is any discrepancy between this summary and the official Plan Documents, the official Plan Documents will govern. APD intends to operate the plans indefinitely, but reserves the right to change the levels and types of benefits, or otherwise terminate the plans, in whole or in part, at any time, at its sole and absolute discretion. To view SPDs, visit **MyAPDBenefits.com**. You may request a printed version by contacting the Benefits Administration office:

Alice Peck Day Memorial Hospital Attention: Human Resources 10 Alice Peck Day Drive Lebanon, NH, 03766





# **Key Resources**

Learn about resources that can help you make the most of your benefits all year long.

#### Health

#### **Health Plans**

Medical coverage

### healthplansinc.com/d-h

866.471.5550

#### **RxBenefits**

Pharmacy Benefits Administrator

#### optumrx.com

800.334.8134

#### **Optum Behavioral Health**

Behavioral Health Services

#### liveandworkwell.com

(Access Code: Dartmouth)

855.409.7026

### HealthEquity

Health spending and health reimbursement accounts

### healthequity.com

866.346.5800

#### **Delta Dental**

Dental coverage

### nedelta.com/Home

603.223.1000

#### DeltaVision

Vision hardware plan

### eyemedvisioncare.com

866.723.0513

### **Income Protection**

#### **Sun Life Financial**

Filing a disability or leaves claim **sunlife-ams.com** 

Leave and STD: 844.236.5180 Life Insurance and LTD: 800.247.6875

### **Allstate Identity Protection**

Identity theft protection **myaip.com** 

800.789.2720

### Retirement

### **Lincoln Financial Retirement**Retirement plans

https://www.lfg.com/public/individual

#### Work/Life

### KGA Employee Assistance Program https://my.kgalifeservices.com/

(Company Code: Dartmouth)

800.648.9557

### Figo

Pet insurance

https://bit.ly/3d5YRnv

844.738.3446

**Family Care Resources** 

Care.com

877.227.3115

### Qualified Life Event

A qualified life event is a change in your work or family status that allows you to make adjustments to certain benefits elections, depending on the nature of the life event. For example, if you get married during the year, you may add your spouse to your health care coverage, and you may change the plan in which you are enrolled.

Examples of qualified life events include:

**Change in Status** — change in marital status, number of dependents, employment status of the employee, spouse or dependent, residence that affects benefits coverage, or change in dependent eligibility status.

**Dependent Care Changes** — change to dependent care provider. For example, if you move out of the area and can no longer use the same day care provider.

**HIPAA Special Enrollment Rights** — loss of other coverage due to exhaustion of a COBRA period, loss of eligibility, or if employer contributions to another plan under which you have coverage ends. In addition, HIPAA grants rights to add coverage upon marriage or a new dependent child, if previously waived.

### Who is an eligible dependent?

• Legally married spouse;



- Ex-spouses, legally separated spouses, and their children until the earlier of:
  - Date you or your former spouse enter into a marriage
  - Three (3) year anniversary of the date of the divorce or legal separation
  - Termination date as established by court order
  - Date your coverage ends
  - First day of the period in which you fail to make the required contribution
  - Date the Plan is terminated;
- Children (including your covered spouse's children) who are under age 26;
- Your unmarried child age 26 or older who is Permanently and Totally Disabled, whose disability began before age 26, and for whom you submit proof of Permanent and Total Disability when requested at reasonable intervals.

### EOI

When you are first eligible to enroll in Life Insurance, you may elect up to \$500,000 with no EOI. During Open Enrollment, you may increase your coverage by one times your annual salary, without EOI, up to a maximum of \$500,000.

