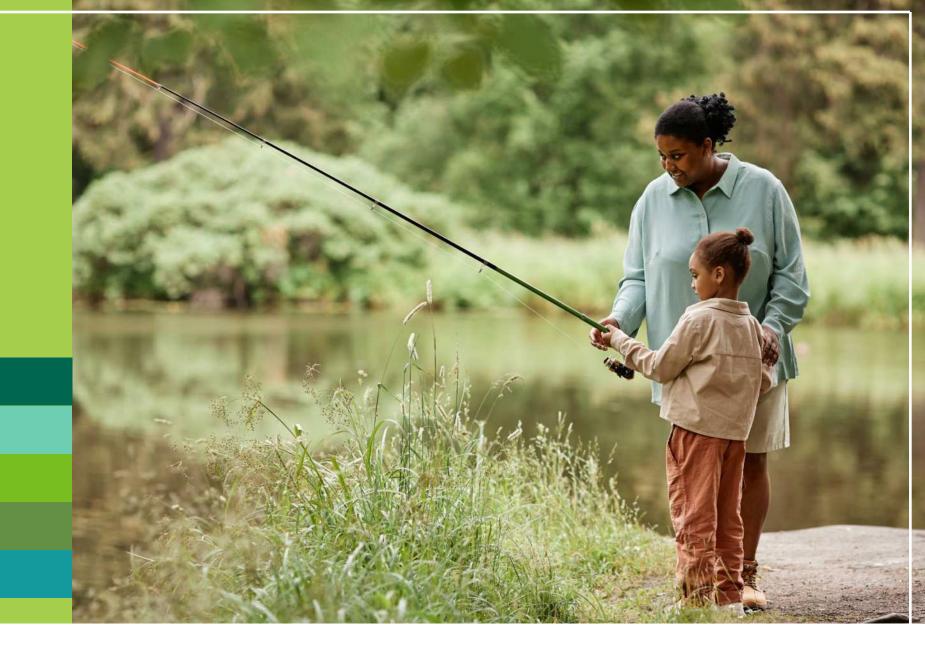
# Dartmouth Health Benefits, Your Way.

- > 2024 Benefits Updates
- > Enrolling in Benefits
- > Residents/Fellows
- > Physicians/APPs
- > Key Resources





# YOUR 2024 BENEFITS GUIDE



# Benefits Updates for 2024

### **Open Enrollment**

### Open Enrollment for 2024 benefits is October 23 through November 6, 2023.

For 2024, we're introducing two new medical plans that take advantage of our worldclass facilities, providers and services to offer both choice and value. The plans replace our existing medical plans across the system. The Healthiest Population Starts with You

At Dartmouth Health, the health and well-being of our employees is a critical part of our strategy. Our robust benefit package is designed to make Dartmouth Health services available to our employees, supporting you and your family physically, emotionally, and financially.

#### Introducing the Anthem Network, administered by AmeriBen

For 2024, we're pleased to announce we are moving our medical plans from HPI to the Anthem network, with AmeriBen handling claims and administration. This change offers a national network of healthcare services and enhanced customer service. To learn more about in-network providers and services, visit anthem.com/dartmouth-health.

#### **Two New Medical Plans**

We are replacing our medical plans with two new plans across Dartmouth Health: the **HSA Plan** and the **PPO Plan** (see page 6 for more information). These plans offer employees a balanced choice between plan premiums and out-of-pocket costs.

The HSA plan allows you to open a Health Savings Account, to which Dartmouth Health may also make quarterly contributions, depending on your salary. PPO Plan members may wish to consider electing a Flexible Spending Account. (see page 12). For members who previously had an HRA – Health Reimbursement Account – we are no longer offering an HRA with either of our plans.

#### Special Coverage for Out-of-Area Employees

Employees who live outside of New Hampshire or Vermont may enroll in the **Out-of-Area HSA Plan** instead of the **HSA Plan**. This option will be automatically available to you if you live outside of New Hampshire or Vermont.

The PPO Plan is available wherever you live.

### **New Vision Option for Cheshire Medical Center**

Employees at Cheshire Medical Center may now elect the vision plan, offered through Delta Vision (see page 14). All other member employees are eligible for this plan.

### **Access Behavioral Health Through Anthem**

Beginning in 2024, behavioral health and substance use services will be available through Anthem.

### Harmonized Retirement Plans in 2024

We are pleased to announce we are harmonizing retirement plans across Dartmouth Health effective January 1, 2024. Look for more details in the coming weeks! Be sure to read all materials sent to you for important information about this change.





# 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 regularly work more hours than budgeted, benefits eligibility and employee contributions toward healthcare 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 beginning with the employee's first 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.

If you change to a benefit ineligible status (less than 0.5 FTE) or terminate employment, all benefits will end on the date of status change or termination of employment (last day worked).

### Couples Enrollment Restriction (Double Coverage Rule)

If you and your spouse are both eligible to enroll in Dartmouth Health benefits, you cannot be enrolled as both an employee and dependent in health and life insurance. Either you **or** your spouse may cover your dependents in health and life insurance; you may not both cover your dependents at the same time.

#### **Changing Your Benefits Elections**

The benefits plan year is January 1 through December 31.

Each fall during the Open Enrollment period, you have an opportunity to change your benefit elections for the upcoming plan year. The elections you make during Open Enrollment cannot be changed during the year unless you experience a **Qualified Life Event**.

# **Qualified Life Event**

A qualified life event is a change in your work or family status that allows you to make adjustments to certain benefit elections, depending on the nature of the life event. Please note that life events must be completed within 30 days of the event occurring. For example, if you get married during the year, you may add your spouse to your healthcare coverage or change the plan you are enrolled in, within 30 days of the effective date of the marriage.

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



# How to Enroll in Benefits

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 2024 benefits by logging on to BenefitConnect using the instructions on this page.

# **Steps to Enroll**

- Go to benefits.dartmouth-health.org. If you are logged on to the Dartmouth Health network, your sign-in will be automatic. If you are prompted to sign-in, use your Dartmouth Health Windows username and password. If you do not remember your Windows username or password, call the Dartmouth Health Computer Help Desk at 603.650.2222 to reset it. You will be required to change the new password to a confidential password.
- 2. Click on Enroll > Take Action > Complete New Hire/Open Enrollment Benefits
- 3. On the BenefitConnect home screen, a countdown will pop up on your screen. Click "Get Started" to start your enrollment process.
- The system will guide you through adding your dependents (if needed), enrolling in benefits, and updating beneficiaries. Please note that if your address is incorrect in BenefitConnect, you will need to change it in Employee Self Service.
- 5. Click Save and Continue at the bottom of each page as you go through the process.
- 6. When you are finished enrolling, you can 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.

# **Enrolling Dependents**

Before you log on to BenefitConnect, make sure you have the name, Social Security Number, and date of birth for each eligible dependent you wish to cover for medical, dental and/or vision coverage, or to name as a beneficiary for your life and AD&D insurance 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.

#### **Dependent Eligibility Verification:**

During the enrollment process you will be instructed to upload documentation such as marriage certificates or birth certificates to verify to verify that any new dependents you are adding to coverage meet the definition of an eligible dependent. You have 60 days from the date you complete your enrollment to provide this information or your dependent will be removed from the plan and will not be able to be added without a qualifying life event.

### Who is an eligible dependent?

- Legally married spouse;
- 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.



# If You Don't Enroll

# If You Were Enrolled in a Dartmouth Health Medical Plan In 2023

All employees must log on to BenefitConnect and review your 2024 benefit: **authorization of your 2024 payroll deductions is required.** 

If you don't make an election during Open Enrollment, the following defaults will apply:

- NH and VT employees: Your medical coverage will default to the HSA plan at your current coverage level.
- Employees outside of NH and VT: Medical Coverage will default to the Out-of-Area HSA plan at your current coverage level.

Your 2023 dental, life, and disability benefit elections will automatically carry over to 2024. If you are not enrolled in a benefit in 2023, you will not be enrolled in 2024.

You must confirm eligibility for the Health Savings Account (HSA) to receive an employer contribution—if eligible—and reelect any Health Savings Account (HSA) or Flexible Spending Account (FSA) annual contributions, as these do not roll over.

Your coverage will be effective January 1 - December 31, 2024.

# If You Become Newly Benefit Eligible In 2024

If you are hired in 2024 or become newly eligible for benefits during the 2024 calendar year, you must make your benefit elections online within 30 days of your benefit eligibility date (hire date in most cases).

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

#### **Default Benefits:**

- Basic Short-Term and Long-Term Disability Insurance
- Basic Life and Accidental Death and Dismemberment (AD&D) Insurance

Your coverage will be effective as of your first day of employment and will continue through December 31, 2024.





# Your Medical Coverage

### **Our Medical Plans**

We offer medical and prescription drug plans to provide you and your family with the coverage you need.

### You Have Two Plans To Choose From:

#### **HSA Plan**

The HSA Plan is our system-wide High-Deductible Health Plan, new for 2024. It features lower plan premiums, in- and out-of network coverage, and lower costs when you use Dartmouth Health providers and services.

The HSA Plan is matched with a Health Savings Account that allows you to save for eligible medical, dental and vision expenses, pre-tax.

 An Out-of-Area HSA Plan is available to employees who live outside of New Hampshire and Vermont. This plan replaces the HSA Plan for employees living in eligible states.

#### **PPO Plan**

The PPO Plan features higher plan premiums balanced by greater coverage at Dartmouth Health: you will pay copays for most services when you receive care at Dartmouth Health facilities and providers. It covers both in- and out-of-network care.

To find out more about the Anthem and Dartmouth Health networks, log on to **anthem.com/dartmouth-health**.

All plans offer free (in-network) preventive care. We encourage you to use your primary care provider to coordinate your healthcare and to seek the lowest-cost, highest value healthcare services and prescription drugs.





# Medical Plans Compared

| Plan Feature                      | HSA Plan   | PPO Plan  |
|-----------------------------------|--|---|
| Medical Administrator             | AmeriBen   | AmeriBen  |
| Provider Network                  | Anthem/BCBS  | Anthem/BCBS   |
| Who Can Enroll                    | Eligible employees living in New Hampshire and Vermont.<br>Employees outside of these states have the option to enroll in<br>the Out-of-Are HSA Plan, instead.   | All eligible employees, regardless of residence.  |
| Coverage                          | Access to a national network of services when traveling, or<br>for dependents in college, as well as out-of-network coverage.<br>Enhanced benefits when Dartmouth Health providers and<br>facilities are used. | Access to a national network of services when traveling, or<br>for dependents in college, as well as out-of-network coverage.<br>Enhanced benefits when Dartmouth Health physicians and<br>facilities are used. |
| Preventive Services               | Covered 100% in-network  | Covered 100% in-network   |
| Paying for Medical Care           | Medical visits are applied first to the plan deductible, after which you pay coinsurance.  | You pay a copay for most services.<br>High-Tech Imaging, Out-Patient Surgery, and Inpatient<br>Admissions are applied first to the plan deductible, after which<br>you pay applicable copay.                    |
| Family vs. Individual Deductibles | Family coverage includes a single family deductible. Plan<br>begins paying benefits once any combination of covered<br>family members have met the family deductible.  | Family coverage includes both a family and individual deductible. Plan begins paying benefits for any individual once they meet their individual deductible.  |
| Pharmacy Network                  | OptumRx, with enhanced benefits at<br>Dartmouth Health Pharmacies, including Home Delivery   | OptumRx, with enhanced benefits at<br>Dartmouth Health Pharmacies, including Home Delivery  |
| Paying for Presciption Drugs      | Medications are applied first to the plan deductible, after which<br>you pay coinsurance. Medications that are on the Preventive Drug<br>List bypass the deductible and you only pay coinsurance.              | You will pay a copay at Dartmouth Health Pharmacies.<br>Otherwise, medications are applied first to the network<br>deductible, after which you pay coinsurance.   |
| Tax Advantaged Accounts           | You can open a Health Savings Account. Depending on your salary, Dartmouth Health makes a quarterly contribution.  | You can open a Flexible Spending Account.   |



# Get support from doctors, therapists, and psychiatrists any time with LiveHealth Online.

Using LiveHealth Online you can have a video visit with a board-certified doctor, psychiatrist, or licensed therapist from your smartphone, tablet, or computer.

- See a board-certified doctor 24/7, no appointment necessary. It's a great option when you have pink eye, a cold, the flu, a fever, allergies, a sinus infection, or another common health issue.
- Visit a therapist (in seven days or less) or psychiatrist (under four weeks). Get help with anxiety, depression, grief, panic attacks, and more. Schedule online or call 1-888-548-3432 from 8 a.m. to 8 p.m, seven days a week.

Sign up today! Go to **livehealthonline.com** or download the app and register on your phone or tablet.



# The Dartmouth Health Network

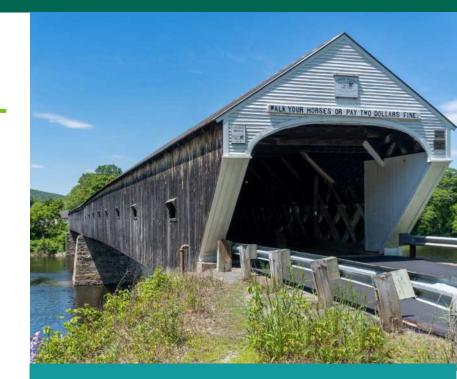
# Seamless, accessible and affordable care at Dartmouth Health

The Dartmouth Health Network provides a tier of providers and services that offer lower costs on both of our plans. Within both of our medical plans, you will receive the greatest benefit when you use the Dartmouth Health Network. The network includes providers and services offering seamless, accessible and affordable care at Dartmouth Health.

### **Dartmouth Health Network Includes:**

- Alice Peck Day Memorial Hospital
- Cheshire Medical Center
- Dartmouth Hitchcock Clinic
- Dartmouth Hitchcock Medical Center
- Mt. Ascutney Hospital and Health Center
- New London Hospital
- Newport Health Center
- Visiting Nurse and Hospice for Vermont and New Hampshire
- Southwestern Vermont Health Care

If you have any questions about the new medical plans, you can reach out to the AmeriBen Designated Customer Care Team at 888-235-4713, open 6:30am to 8:30pm.



To find a provider or service in the Dartmouth Health Network, visit: anthem.com/dartmouth-health





# Your Medical Benefits

# **Medical Plans**

A broad comparison of the Dartmouth Health Medical Plans is shown here.

For a full plan summary, visit benefits.dartmouth-health.org

If you are currently in active course of treatment with a non-Anthem participating provider, you can request transition of care.

A request form can be found at: anthem.com/ dartmouth-health

| Network:  | Dartmouth Health<br>Network   | HSA Plan<br>Anthem Health<br>Network   | Out-of-Network   | Dartmouth Health<br>Network  | PPO Plan<br>Anthem Health<br>Network   | Out-of-Network                                 |
|---|---|--|--|--|--|--|
| Annual Deductible*                                    | Employee Only: \$1,600<br>Family Coverage: \$3,200  | Employee Only: \$2,000<br>Family Coverage: \$4,000   | Employee Only: \$4,000<br>Family Coverage: \$8,000   | Individual: \$250<br>Family: \$500   | Individual: \$2,000<br>Family: \$4,000   | Individual: \$4,000<br>Family: \$8,000         |
| You Pay:  | You pay 10% coinsurance<br>after deductible   | You pay 30% coinsurance<br>after deductible. You pay<br>10% coinsurance after<br>deductible for outpatient<br>behavioral health services | You pay 50% coinsurance<br>after deductible  | \$20 copay for PCP and<br>behavioral health services,<br>\$35 copay for specialists,<br>\$125 copay after deductible for<br>outpatient surgery, \$250 copay<br>after deductible for inpatient care | \$40 copay for PCP,<br>\$60 copay for specialists,<br>30% coinsurance after<br>deductible for outpatient<br>and inpatient care,<br>\$20 copay for outpatient<br>behavioral health services | You pay 50%<br>coinsurance<br>after deductible |
| Out-of-Pocket Maximum                                 | Single: \$3,200<br>Family; \$6,400  | Single: \$4,000<br>Family; \$8,000   | Single: \$8,000<br>Family: \$16,000  | Single: \$1,750<br>Family: \$3,500   | Single: \$4,000<br>Family; \$8,000   | Single: \$8,000<br>Family: \$16,000            |
| HSA Employer<br>Contribution<br>from Dartmouth Health | <b>Salary of \$49,999 or less:</b> Single: \$1,100; Family: \$2,200<br><b>Salary of \$50,000-\$99,999:</b> Single: \$750; Family: \$1,500<br><b>Salary of \$100,000-\$149,999:</b> Single: \$500; Family: \$1,000<br><b>Salary of \$150,000 and above:</b> no funding<br><i>(see Health Savings Accounts, p. 12)</i>      |  |  | -  | <b>HSA or funding by Dartmoutl</b><br>ccounts, p. 12, for additional optic   |  |
|   | Out-of-Area HSA Plan  |  | * About Deductibles  |  |  |  |
| Live outside of<br>Vermont or New<br>Hampshire?       | Eligible employees who live outside of New Hampshire or Vermont will be given the option to elect the <b>Out-of-Area HSA Plan</b> instead of the <b>HSA Plan</b> . Under this plan, all services in the Anthem Health Network are covered as though they were part of the Dartmouth Health Network (see HSA Plan, above.) |  | On the HSA Plan: Family covera<br>paying benefits once any combi<br>deductible. On the PPO Plan: Fa<br>deductible. Plan begins paying b<br>individual deductible, or once an<br>met the family deductible. | nation of covered family memb<br>mily coverage includes both a<br>benefits for any individual once   | pers have met the family and individuate they meet their   |  |



# Your Pharmacy Benefits

# **Prescription Drug Plans**

Your prescription drug benefits are included with your medical plan, and depend on the plan you have elected.

| Days    |  | HSA Plan   |   |
|---------|--|--|---|
| Supply  | Locations  | (including Out-of-Area)  | PPO Plan  |
| 30 Days | <ul> <li>D-H Pharmacy at Centerra</li> <li>D-H Pharmacy Home Delivery</li> <li>Cheshire Medical Center Pharmacy</li> <li>The Pharmacy in<br/>Bennington &amp; Manchester, VT</li> <li>Select CVS Retail Pharmacies<br/>in Southern NH</li> </ul> | Subject to Dartmouth Health<br>Network deductible and<br>10% coinsurance | Generic: \$10 copay<br>Preferred Brand: \$30 copay<br>Non-Preferred Brand: \$50 copay<br>Specialty: \$100 copay |
|         | All Other Retail   | Subject to Anthem Network deductible and 30% coinsurance                 | Subject to Anthem Network deductible and 30% coinsurance  |
| 90 Days | <ul> <li>D-H Pharmacy Home Delivery</li> <li>Cheshire Medical Center<br/>Pharmacy</li> </ul>   | Subject to Dartmouth Health<br>Network deductible and<br>10% coinsurance | Generic: \$20 copay<br>Preferred Brand: \$60 copay<br>Non-Preferred Brand: \$100 copay                          |
|         | OptumRx Mail Service Pharmacy  | Subject to Anthem Network deductible and 30% coinsurance                 | Subject to Anthem Network deductible and 30% coinsurance  |
|         | All Other Retail   | Not Available  | Not Available   |

#### **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.

#### **Filling a Maintenance Medication?**

After two 30-day fills, employees filling a maintenance medication are required to order their prescription as a 90-day supply by mail with D-H Pharmacy Home Delivery, or in person at the Cheshire Medical Center Pharmacy. Maintenance medications are prescribed for long-term chronic conditions like asthma, diabetes, and high-blood pressure. Sign up by calling 855.280.3893 to speak to a pharmacy team member.

D-H Pharmacy Home Delivery can mail to the following states: Arizona, California, Colorado, Connecticut, Florida, Georgia, Idaho, Illinois, Indiana, Maine, Massachusetts, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Dakota, Texas, Utah, Vermont, Virginia, and Washington. If you reside in a state not listed here, you will need to sign up for mail order through OptumRx at **optumrx.com** or by phone at 800.334.8134

#### **Paying for Prescriptions on an HSA Plan**

Based on IRS guidelines, Health Savings Account Plans (HSAs) require that medical care and prescriptions are both applied toward the deductible and out-of-pocket maximum: the member pays the contracted rate for prescriptions until meeting the deductible and then pays coinsurance based on the pharmacy.

On the HSA Plans, drugs on the Preventive Drug List will bypass the deductible and only require you to pay coinsurance.



# Your 2024 Employee Contributions

### **Bi-Weekly Medical Premiums for Non-Tobacco Users\***

|                                    | FTE .75 or          | greater, 30-40 hours    | s per week          | FTE.5 t             | to .74 , 20-29 hours p                          | er week             |
|------------------------------------|---------------------|-------------------------|---------------------|---------------------|---|---------------------|
| Medical and Prescription Plan      | HSA Plan            | Out-of-Area<br>HSA Plan | PPO Plan            | HSA Plan            | Out-of-Area<br>HSA Plan                         | PPO Plan            |
| Base Salary \$0 to \$49,999        |                     |                         |                     |                     | All Salaries                                    |                     |
| Employee Only                      | \$42.45             | \$47.07                 | \$46.44             | \$137.97            | \$152.98  | \$150.95            |
| Employee + Child(ren)              | \$63.65             | \$70.61                 | \$69.67             | \$206.87            | \$229.47  | \$226.42            |
| Employee + Spouse                  | \$89.10 / \$158.65  | \$98.85 / \$173.27      | \$97.54 / \$171.31  | \$289.57 / \$459.36 | \$321.25 / \$506.88                             | \$316.99 / \$500.48 |
| Family                             | \$117.50 / \$201.25 | \$130.38 / \$220.58     | \$128.65 / \$217.98 | \$381.87 / \$597.80 | \$423.75 / \$660.62                             | \$418.13 / \$652.19 |
| Base Salary \$50,000 to \$99,999   |                     |                         |                     |                     |   |                     |
| Employee Only                      | \$55.51             | \$61.55                 | \$60.73             |                     |   |                     |
| Employee + Child(ren)              | \$83.27             | \$92.33                 | \$91.10             |                     |   |                     |
| Employee + Spouse                  | \$116.58 / \$199.87 | \$129.26 / \$218.89     | \$127.54 / \$216.31 |                     |   |                     |
| Family                             | \$153.77 / \$255.66 | \$170.50 / \$280.75     | \$168.24 / \$277.35 |                     |   |                     |
| Base Salary \$100,000 to \$149,999 |                     |                         |                     |                     |   |                     |
| Employee Only                      | \$63.15             | \$70.02                 | \$69.09             |                     |   |                     |
| Employee + Child(ren)              | \$94.75             | \$105.04                | \$103.64            |                     |   |                     |
| Employee + Spouse                  | \$132.70 / \$224.05 | \$147.05 / \$245.57     | \$145.10 / \$242.64 |                     |   |                     |
| Family                             | \$175.00 / \$287.50 | \$193.97 / \$315.95     | \$191.39 / \$312.08 |                     |   |                     |
| Base Salary \$150,000 or greater   |                     |                         |                     |                     |   |                     |
| Employee Only                      | \$94.55             | \$104.84                | \$103.45            | -                   | , rates may vary slight<br>ee on your paycheck. | ly                  |
| Employee + Child(ren)              | \$141.80            | \$157.26                | \$155.17            |                     | ifter slashes include th                        | 20                  |
| Employee + Spouse                  | \$198.55 / \$322.82 | \$220.16 / \$355.24     | \$217.24 / \$350.86 |                     | ge; see note on this pa                         |                     |
| Family                             | \$261.85 / \$417.78 | \$290.40 / \$460.61     | \$286.55 / \$454.82 |                     |   | -                   |

#### **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 healthcare plan contributions. The tobacco use premium will be \$15 per-pay-period regardless of the number of family members who use tobacco.

#### **Spousal Surcharge**

If your spouse has access to group-sponsored health insurance coverage through their own employer and you choose to cover your spouse under one of our medical plans, your 2024 medical plan premiums will include a spousal surcharge (shown here).

The surcharge does not apply if your spouse is employed by and is benefits eligible at Alice Peck Day, Cheshire Medical Center, Dartmouth Hitchcock Medical Center and the Dartmouth Hitchcock Clinics, New London Hospital, or Visiting Nurse and Hospice for VT and NH.

These surcharges can be changed throughout the plan year. Should your circumstances change, please contact: DHBenefits@Hitchcock.org.



# Using the Health Savings Account (HSA Plan)

# Employee and Employer Contributions

The Health Savings Account is a special feature of the HSA health plan that permits an employer, employee, or both to contribute to healthcare expenses throughout the year with a tax benefit.

The Health Savings Account is administered by HealthEquity.

### Health Savings Account (HSA)

#### Features of an HSA:

With the HSA Plan, you're eligible to contribute money to a Health Savings Account. This is a tax-advantaged savings account you can use to help pay for eligible healthcare expenses (medical, dental and vision). You can build up the money in your account and use it for future expenses, even during retirement.

- You decide how much to contribute each pay period (up to the federal limits) to your HSA, and can change that amount at any time.
- It works like a bank account. Use account funds to pay for eligible healthcare expenses by using your debit card when you receive care, or submit a claim for reimbursement for payments you've made.
- It's triple tax-advantaged. You contributions are made on a pre-tax basis, earnings on your contributions are tax-free and you are not taxed when you use your HSA to pay for eligible health care expenses.
- **It's your money.** Unused funds carry over each year you can earn tax-free interest on your HSA balance.

For additional details about contributions and limits and to learn how the HSA works, visit **benefits.dartmouth-health.org** > My Health > Health Savings Accounts.

#### **Dartmouth Health Contributions:**

We provide a base contribution to the HSA for all eligible employees who have a base salary of less than \$150,000 and who enroll in the HSA Plans. You must answer the HSA eligibility questions every year in order to receive a contribution from Dartmouth Health, if eligible. Dartmouth Health will contribute the following amounts for 2024:

| Salary Bands        | HSA<br>Employee Only | HSA<br>All Other Coverage |
|---------------------|----------------------|---------------------------|
| \$0-\$49,999        | \$1,100              | \$2,200                   |
| \$50,000-\$99,999   | \$750                | \$1,500                   |
| \$100,000-\$149,999 | \$500                | \$1,000                   |
| \$150,000 and above | \$O                  | \$O                       |

# Employer contributions will be deposited into your account every three months starting with the first pay period in

**January.** If you are a new hire or you are newly benefits eligible in 2024, you will receive a pro-rated lump sum contribution in the first pay period of the month following your benefits eligibility.

# Important notice if you are thinking of enrolling in Medicare Part A:

If you decide to enroll in Medicare Part A upon turning age 65, or due to one of Medicare's qualifying eligibility rules, you are no longer eligible to participate in the HSA. Funds are still accessible for qualified expenses; however, no new contributions are able to be made upon enrollment in Medicare. If a member defers their enrollment in Medicare Part A, they are able to continue contributions to their HSA account. If you enroll in Medicare Part A after turning age 65, the Medicare coverage will be retroactive to the lessor of 1) the first day of your birthday month, or 2) 6 months.



# Flexible Spending Accounts

# Two Types of Spending Accounts

We offer two Flexible Spending Accounts: one to cover healthcare expenses for you and your family, and the other to pay for childcare or eldercare while you work. Spending Accounts are administered by HealthEquity.

# Health Care Flexible Spending Account (FSA)

The Health Care FSA is a pre-tax spending account available to employees who waive healthcare coverage, enroll in the PPO Plan, or enroll in our Resident/Fellow Medical PPO Plan.

The Health Care FSA can be used to pay for eligible medical, dental, or vision expenses that are not covered by insurance.

The annual maximum amount you may contribute to your Health Care FSA is \$3,050.

#### Examples of eligible expenses:

- Office visits
- Prescription drugs
- Hospital stays and lab work
- Speech/occupational/physical therapy
- Dental and vision care

## Dependent Care Flexible Spending Account (FSA)

The Dependent Care FSA is a pre-tax spending account for eligible elder and childcare expenses so that you and your spouse can work, obtain gainful employment, or attend school full time.

Your daycare 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. The child or adult must be an eligible dependent according to IRS rules.

You may contribute up to \$5,000 for your family (or \$2,500 if married and filing separate tax returns).

#### **Examples of eligible expenses:**

- Childcare up to age 13
- · Adult day care
- After school programs, up to age 13
- At-home elder care

**NOTE:** You can only participate in Dependent Care FSA if you earn less than the highly compensated limits. For the 2024 plan year, an employee who earned more than \$150,000 in 2023 is considered a highly compensated employee.

### Unused FSA balances do not roll over at the end of the year: funds you do not use are forfeited!

- You have 90 days past a termination date or December 31st to submit for reimbursement.
- You must elect to participate in an FSA each Open Enrollment period if you wish to contribute the following year.
- Keep documentation of how you used the money in these accounts for tax purposes.



# Dental Benefits

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

For more information, visit benefits.dartmouth-health.org > My Health > Dental Insurance, or call 603.223.1234.

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

\* Subject to the annual maximum.

# Here is how much you pay bi-weekly for each plan:

|                       | Employee Bi-weekly Contribution |                 |  |
|-----------------------|---------------------------------|-----------------|--|
| Dental Coverage Level | <b>Basic Dental</b>             | Enhanced Dental |  |
| Employee              | \$2.64                          | \$5.83          |  |
| Employee + Child(ren) | \$11.11                         | \$22.20         |  |
| Employee + Spouse     | \$11.11                         | \$22.20         |  |
| Family                | \$21.16                         | \$41.78         |  |

# 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 Benefits

We offer vision coverage for eyewear through DeltaVision.

You can search for in-network providers at

down menu.

eyemedvisioncare.com.

Click on "Find a Provider" and choose "Access Network" from the "Choose Network" dropThe DeltaVision plan covers frames, lenses, and contacts. Eye exams are covered on our medical plans; if you are not covered on our medical plans, the vision benefit also covers an annual exam with a \$10 copay. The plan provides the following in-network benefits.

Find additional discount options at: benefits.dartmouth-health.org. Discounts do not apply for benefits provided by other group benefit plans.

| Plan Features                            | Vision Benefit  |
|--|---|
| Exams                                    | \$10 copay if not covered by medical  |
| Frames                                   | \$150 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                                 | \$150 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—<br>LASIK or PRK | 15% off retail price or 5% off promotional price.   |

Beginning in 2024, the vision benefit is now available to Cheshire Medical Center employees!

# Here is how much you pay bi-weekly for vision coverage:

| Vision Coverage Level | Employee Bi-weekly Contribution |
|-----------------------|---------------------------------|
| Employee              | \$2.39                          |
| Employee + Child(ren) | \$4.52                          |
| Employee + Spouse     | \$4.66                          |
| Family                | \$7.05                          |



# Income Protection: Disability

In addition to the traditional benefits outlined in this guide, we 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
- 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.

#### Long-Term Disability (LTD) Insurance

- 50% of your base salary, to a maximum of \$15,000 per month
- Sun Life Financial will determine eligibility and medical necessity for LTD. If approved, LTD payments are paid by Sun Life on a monthly basis and 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.

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







# Income Protection: Life and AD&D

Life and AD&D insurance provide for you and your family should the worst occur. In addition to the free basic coverage provided by Dartmouth Health, you may purchase supplemental coverage for yourself and your dependents.

# 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
- 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."

# Accidental Death and Dismemberment (AD&D) Insurance

• 1 x annual salary up to \$200,000

# 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 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 back at work. Some levels of coverage will require you to provide evidence of your good health—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. If your spouse is employed within the Dartmouth Health system and is benefit eligible, you may not elect the spousal life benefit.

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

 Enroll in coverage in the amount of \$5,000 or \$10,000.
 One premium covers all of your eligible children. If you and your spouse are both employed within the Dartmouth Health system and are benefit eligible, only one of you can elect the Dependent Child(ren) benefit.

### **Evidence of Insurability (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.

Under the plan provisions, employee Basic and Supplemental Life/AD&D insurance coverages reduce by 50% at age 70.





# Resident/Fellow Benefits (DHMC GME employees Only)

The benefits on this page apply to benefits-eligible Residents/Fellows in place of the benefits described elsewhere in this guide.

Residents/Fellows are eligible for one Dartmouth Health medical plan: the \$0 Deductible PPO Plan This page provides an overview of your coverage, as well as the Resident/Fellow bi-weekly contributions for coverage under this plan.

### **Medical/Prescription Insurance**

| Plan Features            | In-Network  | Out-of-Network  |
|--------------------------|---|---|
| Deductible               | \$O   | Single: \$300; Family: \$600  |
| Coinsurance              | N/A   | 40% after deductible  |
| Out-of-Pocket Maximum    | Single: \$1,800; Family: \$3,600 (includes pres   | scription drugs)  |
| In-Network Benefits Cove | rage Highlights   |   |
| Preventive Care          | Plan pays 100% of eligible services   |   |
| Routine Eye Exam         | Plan pays 100%, one routine eye exam per n  | nember, per year  |
| Pharmacy Benefits        |   |   |
| Supply                   | Location  | \$0 deductible plan   |
| 30 Days                  | <ul> <li>D-H Pharmacy at Centerra</li> <li>D-H Pharmacy Home Delivery</li> <li>Cheshire Medical Center Pharmacy</li> <li>The Pharmacy in Bennington, VT<br/>&amp; Manchester, VT</li> <li>Select CVS Retail Pharmacies</li> </ul> | Generic: \$5<br>Brand Name: \$25<br>Specialty / Non-Preferred: \$25 |
|                          | All Other Retail  | Generic: \$10; Brand: \$50; Non-Preferred: \$50                     |
| 90 Days                  | <ul> <li>D-H Pharmacy Home Delivery</li> <li>Cheshire Medical Center Pharmacy</li> </ul>  | Generic: \$10<br>Brand Name: \$50<br>Non-Preferred: \$50            |
|                          | OptumRx Mail Service Pharmacy   | Generic: \$30<br>Brand Name: \$100<br>Non-Preferred: \$100          |
|                          | • All Other Retail  | Not Available   |

| Resident/Fellow 2024<br>Medical Contribution Rates * | Bi-Weekly Non Tobacco User |
|--|----------------------------|
| Employee   | \$42.45                    |
| Employee + Child(ren)                                | \$63.65                    |
| Employee + Spouse                                    | \$89.10 / \$158.65         |
| Family   | \$117.50 / \$201.25        |

Due to rounding, rates may vary slightly from what you see on your paycheck.

\* Contributions after slashes include the Spousal Surcharge; see note on next page.



# Resident/Fellow Benefits (DHMC GME employees Only)

### 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 healthcare plan contributions.

The tobacco use premium is \$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 2024 medical plan premiums will will include a spousal surcharge based on your coverage tier.

The surcharge does not apply if your spouse is employed by and is benefits eligible at Alice Peck Day, Cheshire Medical Center, Dartmouth Hitchcock, New London Hospital, or Visiting Nurse and Hospice for VT and NH.

These surcharges can be changed throughout the plan year. Should your circumstances change, please contact: DHBenefits@Hitchcock.org.

# (STD) Insurance The 2024 benefits program provides Residents/Fellows with STD coverage equal to 100% of base salary for up to 90 days. This benefit begins immediately following Sun Life Financial's determination

of disability.

# Short-Term DisabilityLong-Term Disability(STD) Insurance(LTD) Insurance

The 2024 benefits program provides Residents/Fellows with basic LTD coverage equal to 80% of base salary, to a maximum benefit of \$3,750 per month. Sun Life Financial determines eligibility and medical necessity for LTD.

If approved, LTD payments begin immediately following the date STD payments end.

### Life Insurance Benefits

The 2024 benefit program provides Residents/Fellows with the following Life and AD&D Insurance at no cost.

#### **Resident/Fellow Basic Life Insurance**

- 1x salary to a maximum of \$100,000
- IRS rules allow employers 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."

# Resident/Fellow Accidental Death and Dismemberment (AD&D) Insurance

• 1x salary to a maximum of \$100,000

Under the plan provisions, Resident/Fellow Basic Life/AD&D Insurance coverage reduces by 50% at age 70.

### **Flexible Spending Accounts**

As a Resident/Fellow, you may be eligible for our Health Care and Dependent Care Flexible Spending Accounts (FSAs).

For details on these accounts, visit:

#### benefits.dartmouth-health.org

> My Health > Flexible Spending Accounts.



# Physician and Advanced Practice Provider Benefits

The following apply to benefits eligible Physicians and Advanced Practice Providers in place of the benefits described elsewhere in this guide.

# Physician And Advanced Practice Provider Short-Term And Long-Term Disability Insurance

Dartmouth Health 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

- The 2024 benefits program provides Physicians and Advanced Practice Providers with STD coverage equal to 100% of base salary for up to 26 weeks.
- Sun Life Financial determines eligibility and medical necessity for STD.

This benefit begins immediately following determination of disability.

#### **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 are paid by Sun Life on a monthly basis and 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, Dartmouth Health's 2024 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



# Physician Benefits

The following apply to benefits eligible Physicians in place of the benefits described elsewhere in this guide.

### **Physician Life Insurance**

The 2O24 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, select Supplemental Life Insurance options for individual and dependent coverage through Sun Life Financial.

| Group-Rated                           | Age-Rated   |
|---------------------------------------|---|
| Available in \$100,000 increments, up | Available in \$50,000 increments, up                                  |
| to \$1,500,000, subject to EOI.       | to \$1,000,000, subject to EOI. (Closed group - no new participants.) |

For more details on these plans, visit **benefits.dartmouth-health.org** > My Retirement & Income Protection > Life and AD&D Insurance.

#### **Changing Supplemental Plans**

If a Physician is enrolled in Sun Life Financial Age-Rated coverage, you may switch to Sun Life Financial Group-Rated coverage later. However, once enrolled in Sun Life Financial Group-Rated coverage, Physicians may not switch to Sun Life Financial Age-Rated coverage Physician Basic Life and AD&D Insurance coverage and Group-Rated Supplemental Life Insurance coverage reduces by 50% at age 70.



# Work/Life

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.

Get started at: benefits.dartmouth-health.org Dartmouth Health works hard to create and sustain a culture where employee wellness, efficiency of practice, and personal and professional fulfillment are valued and supported at every level. Visit the benefits portal to find the full range of programs available to you.

### Lifestyle Improvement Program

The Lifestyle Improvement Program helps you with your personal well-being through a variety of wellness programs and services, including health coaching, education, challenges and local resources. Our programs focus on: exercise and movement; nutrition and healthy eating; stress management; and weight management.

### ManageWell

ManageWell is the Dartmouth Health employee wellness portal to Lifestyle Improvement Program well-being activities and resources. Log in to discover a variety of programs and tools that you can access anywhere, anytime.

### Health and Wellness Coaching

Health and Wellness Coaches are experts trained in assisting individuals with their personal growth. Coaches work with individuals and groups using a client-centered process to develop and achieve self-determined goals related to health and wellness—at no cost to you.

# **Health Screening**

Health and wellness coaching can include pointof-care screening: measuring blood pressure, total cholesterol, HDL, blood glucose, and if desired, height, weight, and waist circumference. This is an in-person service provided at DHMC only, by appointment.

# **Insight Timer @Work**

Insight Timer @Work is a meditation app offered free to Dartmouth Health employees, including live yoga classes, guided meditation, and more.





in mind.

# Important Reminders

#### As you consider your benefits **My Benefits Portal**

needs for the coming year, Benefits.dartmouth-health.org has all here are a few things to keep the details you need to make the most of the benefits Dartmouth Health 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!

### **Keep Your Beneficiaries Up To Date!**

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 benefits.dartmouth-health.org today to update your beneficiaries in BenefitConnect.

# **Plan Documents And Summary Plan Descriptions**

This Guide to Your Benefits provides a brief summary of benefits plans effective January 1 - December 31, 2024. 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. Dartmouth Health 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 the benefits portal. You may request a printed version by contacting the Benefits Administration office:

**Benefits Administration Office One Medical Center Drive** Lebanon, NH, 03756 603.653.1400 DHBenefits@Hitchcock.org





# Key Resources

### Benefits.dartmouth-health.org

has all the details you need to make the most of your benefits. However, if you need to contact a benefits vendor directly, please see the contact information on this page.

### Health

Anthem/Ameriben Medical coverage anthem.com/dartmouth-health Designated care team: 888.235.4713

#### **RxBenefits**

Pharmacy Benefits Administrator optumrx.com 800.334.8134

#### HealthEquity

Health spending and health reimbursement accounts healthequity.com 866.346.5800

#### Delta Dental

Dental coverage nedelta.com/Home 603.223.1000

#### DeltaVision

Vision plan eyemedvisioncare.com 866.723.0513

LiveHealth Online livehealthonline.com 1.888.548.3432

#### D-H Pharmacy Home Delivery

Phone: 855.280.3893 Fax: 855.302.4715

### **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

# Work/Life

Dartmouth Health Employee Assistance Program (EAP) 603.650.5819 (Dartmouth Hitchcock Medical Center and Clinics Only)

#### KGA Employee Assistance Program

my.kgalifeservices.com (Company Code: Dartmouth) 800.648.9557

#### **Employee Wellness Department**

employees.dartmouth-hitchcock.org/ livewellworkwell.html 603.650.5900

#### Figo

Pet insurance bit.ly/3zWhlwR 844.493.4130