



SUMMARY OF BENEFITS

The following is a brief summary of benefits available to our eligible employees and their dependents. These benefits, provided by Methodist Jennie Edmundson, are payable pursuant to plans and policies maintained by Methodist Jennie Edmundson and Nebraska Methodist Health System, Inc., the parent corporation. This summary explains your benefits in plain language; however, it does not describe every situation and is not intended to replace the plans and policies. Please contact the Human Resources Department at Methodist Jennie Edmundson for copies of the plans or policies or for more detailed information.

HEALTH CARE PLAN

Methodist Jennie Edmundson (MJE) understands that different people have different health care needs. That is why MJE offers you two different health care plan options to choose from. You can choose to have coverage under the PPO Health Plan option or the High Deductible Health Plan (HDHP) with a Health Savings Account option.

Any of the health care plan options protect you and your family against health care expenses – including hospitalization, surgery, physician, preventive care and prescription drug expenses. You have a choice of doctors and hospitals – and the opportunity to save money by using our preferred providers. For a comparison of the options and related coverage cost, please see the enclosed insert titled “*Comparison Chart for Health Plan Options.*”

If you are a full-time or part-time staff member scheduled to work 16 hours or more per week, you’re eligible for coverage under the health plan. You may also cover your eligible dependents, which include your legally married spouse and your children (natural, adopted, foster, guardian or stepchildren) under age 26.

Coverage is effective the first of the month following the date you become eligible – provided you enroll within 30 days after being hired or becoming eligible.

Due to IRS rules, you can’t add, drop or change your coverage during the year unless you have a qualifying event that meets the applicable legal requirements (such as a change in marital or employment status). If you don’t have a qualifying event, you can add, drop or change coverage once a year at annual enrollment.

Health Savings Account (HSA)

If you choose the HDHP option, MJE will make available a Health Savings Account (HSA), which will allow you to save dollars on a pre-tax basis to pay for eligible health care expenses. Unlike a Flexible Spending Account, any unused dollars you save in this HSA will rollover year after year and can be used for future eligible health care expenses. In addition, MJE will contribute to this account to help pay for your eligible health care expenses! The amount MJE contributes to your HSA depends on the level of coverage you elect, and when your coverage is effective. Contributions will be pro-rated for partial year participation.

If you are interested in the High Deductible Health Plan with the Health Savings Account option, please see the intranet under *Human Resources/MJE Benefits/New Hire & Newly Eligible Benefits Enrollment* for more detail.

DENTAL CARE PLAN

The dental plan provides coverage for preventive, basic, major and orthodontic services. You can choose any dentist – and you can also receive a discount by choosing preferred providers.

If you are a full-time or part-time staff member scheduled to work 16 hours or more per week, you're eligible for coverage under the dental plan. You may also cover your eligible dependents which include your legally married spouse and your children (natural, adopted, foster, guardian or stepchildren) under age 26. Coverage is effective the first of the month following the date you are eligible – provided you enroll within 30 days after being hired or becoming eligible. If you enroll after 30 days, a late dental penalty may apply; only preventative and diagnostic services are covered for the first six months of coverage on the plan.

Due to IRS rules, you can't add, drop or change your coverage during the year unless you have a qualifying event that meets the applicable legal requirements (such as a change in marital or employment status). If you don't have a qualifying event, you can add, drop or change coverage once a year at annual enrollment time.

A Closer Look at Your Dental Benefits

For details about current dental plan coverage and coverage cost, see the attachment titled "*Dental Benefits*."

VISION CARE PLAN

MJE offers a vision plan that complements the health and welfare plans available to you. This plan provides a routine eye exam and benefits for eye care purchases such as glasses and contacts. Plan benefits are available through providers participating in the network and through non-network providers. You may also cover your eligible dependents which include your legally married spouse and your children (natural, adopted, foster, guardian or stepchildren) under the age of 26, unless the child is unmarried and a full-time student, then coverage may continue. For more information about the vision care plan, please see the attachment titled, "*Vision Benefits*."

HEALTH, DENTAL AND VISION COVERAGE COSTS

MJE pays a large portion of the cost of health and dental coverage, and you pay the remaining portion. One-half of your monthly health and dental cost of coverage is deducted from your first and second paycheck each month. All payments apply to the cost of coverage for the current month.

You pay 100% of the vision coverage. Your monthly premium will be deducted from the 1st paycheck each month.

See the plan attachments for coverage costs.

Pre-Tax Premium Plan

You can deduct your health, dental and/or vision premium costs for yourself and your covered dependents from your paycheck on a pre-tax basis. So, you pay for your portion of health care coverage in a tax-efficient way, as well as reduce your taxable income.

REIMBURSEMENT PLANS

MJE offers you three types of reimbursement plans – a Medical Expense Reimbursement Plan, a Limited Use Medical Expense Reimbursement Plan and a Dependent Care Expense Reimbursement Plan.

If you are a full-time or part-time staff member scheduled to work 16 hours or more per week, you can participate. Coverage is effective the first of the month following the date you are hired or become eligible.

Medical Expense Reimbursement Plan

This plan allows you to contribute up to \$2,850 on a pre-tax basis and use the money to reimburse yourself for eligible health care expenses not covered by other plans. Some examples of eligible expenses are:

- Medical and dental deductibles, co-payments and coinsurance amounts;
- Vision expenses; and

- Hearing expenses.

Please refer to the intranet under *Human Resources/MJE Benefits/New Hire & Newly Eligible Benefits Enrollment* for more details.

Limited Use Medical Expense Reimbursement Plan

The Limited Use Medical Expense Reimbursement Plan is only available if you elect health care coverage under the High Deductible Health Plan. This plan allows you to contribute up to \$2,850 on a pre-tax basis and use the money to reimburse yourself for eligible dental, vision and preventive medical expenses not covered by other plans.

Dependent Care Expense Reimbursement Plan

If you have eligible dependent children or a parent who needs care while you're at work, you may want to take advantage of the Dependent Care Expense Reimbursement Plan to cut down on these expenses. If you are a full-time or part-time staff member scheduled to work at least 16 hours per week, you can participate if you meet one of the following requirements:

- You're a single working parent; or
- You're married and your spouse works, is a full-time student for at least five months of the calendar year, or is disabled and unable to provide care.

Coverage begins the first of the month following the date you are hired or become eligible.

You can contribute up to \$5,000 to the Dependent Care Expense Reimbursement Plan (or \$2,500 for married taxpayers filing separate returns) on a pre-tax basis and use the money to reimburse yourself for eligible dependent care expenses.

In general, any dependent care expense considered tax-deductible by the IRS is eligible, including the following:

- Licensed day care center and nursery school charges;
- Babysitting costs for care in or out of your home; and
- Nursing or custodial care for elderly or disabled dependents who live with you and are unable to care for themselves.

The Dependent Care Expense Reimbursement Plan is similar to the Medical Expense Reimbursement Plans. When you incur an eligible dependent care expense, you pay the cost out of your own pocket – then you are reimbursed from the plan. Claims for expenses incurred during the calendar year are accepted up to 90 days following the end of the calendar year.

Since you pay for these expenses on a pre-tax basis, your money goes a lot further – and your taxable income is reduced.

The plans are easy to use. You decide how much to contribute, through convenient payroll deductions. When you or your eligible dependent incurs an eligible expense, you pay the cost out of your own pocket. Then simply file for reimbursement from the plan. Claims for expenses incurred during the calendar year are accepted up to 90 days following the end of the calendar year.

Plan Carefully!

Remember, due to IRS rules, you must use the money you contribute to the Reimbursement Plans for expenses that you incur during the calendar year. Otherwise, you forfeit any money left from your election in the plan. You can't change your contribution amount during the year unless you have a qualifying event that meets the applicable legal requirements (such as a change in marital or employment status).

Also, keep in mind that for dependent care expenses you may already be eligible for a tax credit on your income tax return. You cannot apply the same expenses to both the Dependent Care Expense Reimbursement Plan and the tax credit. Any amount you contribute to the plan reduces the amount you can apply to the federal tax credit.

You may want to speak with a tax expert to help you determine if the tax credit or reimbursement plan is better for your situation.

BASIC LIFE INSURANCE

If you are a full-time or part-time employee scheduled to work at least 30 hours per week, you are eligible for basic life insurance after 6 months of continuous employment while scheduled for at least 30 hours per week. MJE pays the entire premium for this benefit.

If covered, your life insurance benefit is equal to one times your annual base salary over the last twelve months rounded up to the next higher \$1,000, up to a maximum benefit of \$50,000. An accidental death and dismemberment benefit is also provided equal to the amount of your life insurance death benefit.

If you are an eligible employee, you will be notified when your coverage begins and you will receive information explaining the basic life insurance coverage.

VOLUNTARY EMPLOYEE LIFE INSURANCE

If you are a full-time or part-time employee scheduled to work at least 20 hours per week, you are eligible to purchase life insurance for yourself upon your hire or eligibility. You can purchase coverage in increments of \$10,000, up to a maximum of seven times your annual salary or \$300,000, whichever is less.

If you choose to enroll, you must do so within 30 days of your hire or eligibility date. Coverage will be effective the first of the month following such date. If you enroll after 30 days of hire or eligibility, you must provide evidence of insurability to the insurance carrier.

This plan provides group term life insurance. Premiums are paid by you through payroll deduction on an after-tax basis. The cost of the insurance is based on your age and the amount of insurance elected. Remember to complete your beneficiary designation online in Employee Self Service.

VOLUNTARY SPOUSE AND CHILD LIFE INSURANCE

If you are a full-time or part-time employee scheduled to work at least 20 hours per week and have purchased the Voluntary Employee Life Insurance or are covered on the employer paid basic life insurance, you may also purchase voluntary life insurance for your spouse or dependent children. For your spouse, you can purchase coverage in increments of \$10,000 up to a maximum of \$50,000. For your dependent children, you can purchase \$10,000 of coverage.

If you choose to enroll, you must do so within 30 days of your hire or eligibility date. Coverage will be effective the first of the month following such date. If you enroll after 30 days of hire or eligibility, your spouse must provide evidence of insurability to the insurance carrier.

Premiums are paid by you through payroll deduction on an after-tax basis.

SHORT-TERM DISABILITY POLICY

MJE offers a short-term disability benefit for those covered employees of the hospital who are unable to perform the duties of their occupation because of non-occupational injury or illness. You may be eligible for this benefit if you are a full-time or part-time employee scheduled to work at least 16 hours per week and have been continuously employed for at least 6 months.

The benefit replaces 60% of your regular rate of pay (pro-rated for part-time employees based on their budgeted FTE) up to a maximum of \$5,000 per month and for a maximum period of twelve months.

VOLUNTARY ACCIDENT INSURANCE

If you are a full-time or part-time employee scheduled to work at least 16 hours per week, you are eligible to purchase Voluntary Accident Insurance for yourself and family upon your hire or eligibility. Accident Insurance provides benefits to help cover out-of-pocket medical expenses related to an accidental injury. Benefits are paid based on the type of injury or service performed and do not interfere or coordinate with your major medical plan.

VOLUNTARY HOSPITAL INDEMNITY INSURANCE

Hospital Indemnity Insurance pays a fixed dollar amount per day for services and supplies you receive during a hospital stay, up to a maximum number of days each year. There are no preexisting condition limitations, no health questions to answer and no medical tests to take. You're paid the full per-day benefit no matter what other insurance you have. If you are a full-time or part-time employee scheduled to work at least 16 hours per week, you are eligible to purchase Voluntary Hospital Indemnity Insurance for yourself and family upon your hire or eligibility.

VOLUNTARY CRITICAL ILLNESS INSURANCE

If you are a full-time or part-time employee scheduled to work at least 16 hours per week, you are eligible to purchase Voluntary Critical Illness Insurance for yourself and family upon your hire or eligibility. If you are diagnosed with a covered condition after the policy is in effect, you will receive a lump-sum benefit payment based on the terms of your policy and the diagnosis. Benefits are paid directly to you, regardless of any other insurance coverage you may have.

LONG TERM DISABILITY PLAN

If you are a full-time or part-time employee scheduled to work at least 20 hours per week, you are eligible for long term disability coverage after one year of continuous full-time or part-time employment. Methodist Health System pays the entire premium for this benefit.

HOLIDAYS

MJE recognizes the six holidays shown below. Holiday hours are included in the employees' PTO accrual.

New Year's Day	Labor Day
Memorial Day	Thanksgiving Day
Independence Day	Christmas Day

PAID TIME OFF (PTO)

Employees that are scheduled for at least 16 hours per week are eligible for PTO – time off used for vacation days, sick leave, holidays and personal days. PTO hours accrued are determined by the number of hours worked or scheduled during a pay period and the employee's years of service.

The per pay period accrual rate for regular full-time employees (based on a maximum of 75 hours per pay period) is as follows:

<i>Years of Service</i>	<i>Accrual Rate Per Hour</i>	<i>Pay Period Maximum*</i>	<i>Maximum Annual Accrual Hours (Per Year)**</i>	<i>Maximum PTO In Days (Per Year)***</i>
0 - 1	.0985	7.39	192	24
2 - 4	.1108	8.31	216	27
5 - 9	.1313	9.85	256	32
10 - 15	.1354	10.16	264	33
16 - 25	.1395	10.47	272	34
26 +	.1436	10.77	280	35

* Pay Period Maximum is based on 75 hours per pay period.

** The Maximum Annual Accrual is the maximum PTO accrual received in a one year period and not a maximum account balance.

*** Maximum PTO in Days is based on 8 hours a day.

Guaranteed accrual on scheduled hours. Additional accrual if employee works more than scheduled hours, up to pay period maximum.

RNs Covered by union agreement – see contract for PTO information

BEREAVEMENT LEAVE

Employees will receive 24 hours of bereavement leave to be used for time off due to the death of a spouse, child, brother, sister, parent, step-parent, spouse's parent, fiancée, or any dependent regularly living in your home.

Employees will receive 8 hours of bereavement leave to be used for time off due to the death of a grandparent, daughter-in-law, son-in-law, brother-in-law, sister-in-law, or grandchild.

BUSINESS TRAVEL AND ACCIDENT INSURANCE

MJE provides business travel and accident insurance at no cost to you. If you are injured or killed while traveling on business, you or your beneficiary will receive a benefit. The benefit amount is based on your salary and the extent of your injuries.

If you are a full-time or part-time employee scheduled to work at least 20 hours or more per week, you are covered for Business Travel and Accident Insurance at the expense of MJE beginning on the second day of your employment.

METHODIST HEALTH SYSTEM (MHS) DEFINED CONTRIBUTION RETIREMENT PLAN

The MHS Defined Contribution Retirement Plan consists of three key components:

1. MHS **Base** Contributions
2. Your **Employee** Contributions
3. MHS **Matching** Contributions

MHS **Base** Contributions

MHS provides a foundation for your retirement security by making **Base** contributions to the MHS Defined Contribution Retirement Plan in your name. You don't need to enroll or make your own contributions to receive this benefit. You become a participant in this component as of January 1 of the year you have completed one year of service and worked 1,000 hours during that year and attained age 21.

Base contributions will be made to your account annually if you are a participant, you worked at least 1,000 hours during the plan year, and are an active employee with a Participating Employer on the last day of the Plan Year, or you leave employment and have attained age 55 and have 20 years of service. The contributions are equal to your eligible compensation during the year multiplied by your **Base** contribution rate. Your **Base** contribution rate increases as your accrual service grows. You earn one (1) year of accrual service for each year you are a participant and work at least 1,000 hours.

The following chart shows the MHS **Base** contribution schedule according to your years of accrual service.

Years of Accrual Service At <u>End</u> of Plan Year	Base Contribution Rate Schedule
1 through 5	4%
6 through 10	5%
11 through 15	6%
16 through 20	7%
21 or more	8%

For example, if you have one year of accrual service and your eligible compensation is \$40,000, your **Base** contribution would equal 4% of \$40,000 - or \$1,600 – for the year. The IRS limits the amount of eligible compensation – the 2021 limit is \$290,000.

You earn the right to your **Base** contributions, or become “vested,” after completing three years of vesting service in the plan. You earn one (1) year of vesting service for each calendar year you work at least 1,000 hours. If you leave MHS prior to becoming vested, your **Base** contribution account balance will be forfeited.

Principal Financial Group is the custodial holder of your **Base** contributions as well as your voluntary **Employee** contributions and the **Matching** contributions. The elections you select will direct the investments for all three contribution types. If you have not yet made any investment elections, your **Base** contributions will be invested in the Wells Fargo Target Date Fund that is appropriate for your age. You can change your investment elections at any time.

Your **Employee** Contributions

You can build on the foundation provided through MHS **Base** contributions by electing to make your own **Employee** contributions to the MHS Defined Contribution Retirement Plan, through payroll deduction from your salary. There are significant advantages to saving for your retirement by electing to make your own contributions, including making contributions on a pre-tax basis, having a variety of investment options to choose from, tax deferral of any investment earnings, and receiving **Matching** contributions that MHS makes to your account when you contribute your own money.

Automatic Enrollment – you are immediately eligible to make your own contributions to the plan and will automatically be enrolled to make **Employee** contributions at a rate of 2% of your eligible pay approximately two to two and a half months after your hire date. Unless you make a different election, your contributions will be invested in the Wells Fargo Target Date Fund that is appropriate for your age.

Even though your enrollment is automatic, you always have the option to:

- Change your contribution rate
- Direct contributions to other investment options available through the plan, or
- Decline participation

Detailed information regarding the automatic enrollment process will be mailed to your home by Principal Financial Group shortly after receiving your first paycheck.

The maximum amount you can contribute to the MHS Defined Contribution Retirement Plan, through payroll deduction, is determined by the IRS on an annual basis. If you are age 50 or over, you can also take advantage of additional catch-up contribution limits.

Below is a chart that shows the current employee contribution limits.

Tax Year	Annual Contribution Limit	Additional Annual Catch-Up Contribution Limit (If Age 50 or Older)
2021	\$19,500	\$6,500

You are always 100% vested in your own **Employee** contributions.

MHS Matching Contributions

If you are making your own contributions to the MHS Defined Contribution Retirement Plan, MHS provides a **Matching** contribution, up to plan limits, every pay period you make an **Employee** contribution through payroll deduction. The level of match will be a specified percentage of your employee contributions on the first two (2) percent of your pay for the pay period. The specified percentage is based on your years of accrual service as follows:

Years of Accrual Service at <u>Beginning</u> of Plan Year	Matching Contribution Percentage	Maximum Matching Contribution Per Pay Period As A Percentage of Pay
0 through 5	50%	1.0%
6 through 10	75%	1.5%
11 or more	100%	2.0%

For example, if you have one year of accrual service, your gross pay for the pay period is \$10,000, and you contribute \$200 (2% of your pay) to the MHS Defined Contribution Retirement Plan, your **Matching** contribution for that pay period will be \$100 (50% of \$200). To receive the maximum match, you must contribute at least 2% of your pay each pay period. The plan’s annual maximum Matching contribution in calendar year 2021 is \$5,800.

You earn the right to your **Matching** contributions, or become “vested,” after completing three years of vesting service in the plan. You earn one (1) year of vesting service for each calendar year you work at least 1,000 hours. If you leave MHS prior to becoming vested, your **Matching** contribution account balance will be forfeited.

Note – the IRS limits the combined amount of all contributions made to the MHS Defined Contribution Retirement Plan each year. In 2021 the total annual contribution that can be made from all sources is the lesser of a) 100% of your compensation and b) \$58,000.

Remember to designate your beneficiary online through your Plan account at Principal Financial Group.

If you leave MJE, you can roll your vested MHS Defined Contribution Retirement Plan account balance to an IRA, or another employer’s 403(b) or 401(k) plan, if those plans accept such rollovers. You can also take a taxable distribution, but such distribution may be subject to early withdrawal penalties.

TUITION ASSISTANCE

If you are a full-time or part-time employee scheduled to work at least 8 hours per week and are in good standing, you are eligible to apply for tuition assistance after six months of employment. Any degree which is directly related to your current position or for promotion may be approved.

Applications may be obtained on the intranet and must be submitted to Human Resources prior to the start of the course. If approved, you will be reimbursed 100% on the first \$1,000 of eligible expenses and 50% of the next \$2,000 of eligible expenses, for a calendar year maximum of \$2,000. Completion of the course with a "C" grade or better is required.

CREDIT UNION

You may participate in the First Nebraska Credit Union through payroll deduction. The credit union has savings accounts, checking accounts and certificates of deposit. Loans are also available to members. For more information or to join the credit union, contact First Nebraska Credit Union at (402) 492-9100 or (800) 882-0244 or visit the web site www.firstnebraska.org.

EMPLOYEE ASSISTANCE PROGRAM

The Employee Assistance Program (EAP) is a service designed to help employees and their families with personal problems. It is a method of obtaining confidential, reliable assistance. Their telephone number is 402-354-8000.

CHILD CARE SERVICES

"Jennie's House" provides an environment that stimulates the physical, emotional, social and intellectual growth of children. Jennie's House is a child care center located close to the hospital campus. For more information, call 712-325-8070.

WELLNESS BENEFITS INFORMATION

MHS provides many additional benefits and information to keep you feeling your best. For more information, contact Human Resources at (402) 354-2200. MHS sponsors various wellness activities for you and your family, including the following:

- Wellness Premium Incentive for Health Plan Participants
- Free Flu Shots
- Tobacco Cessation Program and Tobacco Free Resources
- Health System Supported Community Activities
- Lactation Program
- Ergonomics Program
- Health Information and Education
- Subsidized Memberships to YMCA
- Employee Health Services