

2022

Benefits Guide



Northern Light
HealthSM

Your commitment to exceptional patient care deserves an exceptional benefits package. Ours are designed to:

- Support and improve your health
- Provide financial security
- Help you balance your work and personal life

Introduction to Your Benefits

| Benefits for Your Health | Benefits for Your Financial Security | Benefits for Balancing Your Work and Life |
|---|---|--|
| <p>Dental</p> <ul style="list-style-type: none"> • Northeast Delta Dental <p>Medical</p> <ul style="list-style-type: none"> • Northern Light Employee Health Plan <p>Wellness Programs</p> <ul style="list-style-type: none"> • Northern Light Total Health • Beacon Health and Wellness <p>Vision Plan</p> <ul style="list-style-type: none"> • VSP <p>Prescriptions</p> <ul style="list-style-type: none"> • Geisinger | <p>Accidental Death and Dismemberment</p> <p>Health Savings Account (HSA)</p> <p>Flexible Spending Accounts</p> <ul style="list-style-type: none"> • Healthcare FSA • Dependent Child Care FSA • Limited Purpose FSA <p>Supplemental Life Insurance for you and your dependents</p> <p>403b Retirement w/Employer Match</p> <p>Long-term Disability</p> <p>Short-term Disability</p> <p>Retirement Savings</p> | <p>Work Force Employee Assistance Program</p> <p>Paid Time Off</p> <p>Leaves of Absence</p> <p>Tuition Reimbursement</p> |

Our benefits are designed with you in mind. This guide has the important information you need including eligibility and enrollment information and a description of your benefit options. If you have questions after you review our guide, please call your HR Service Center, or check out our Benefits page on Resource ME:

https://mingle-portal.inforcloudsuite.com/EMH_PRD

to find information and download important documents and forms.

**Northern Light Health
Human Resources Service Center**

Phone: 207-973-4000 or 1-855-660-0202

Fax: 207-973-7865

Benefits page on Resource ME: https://mingle-portal.inforcloudsuite.com/EMH_PRD

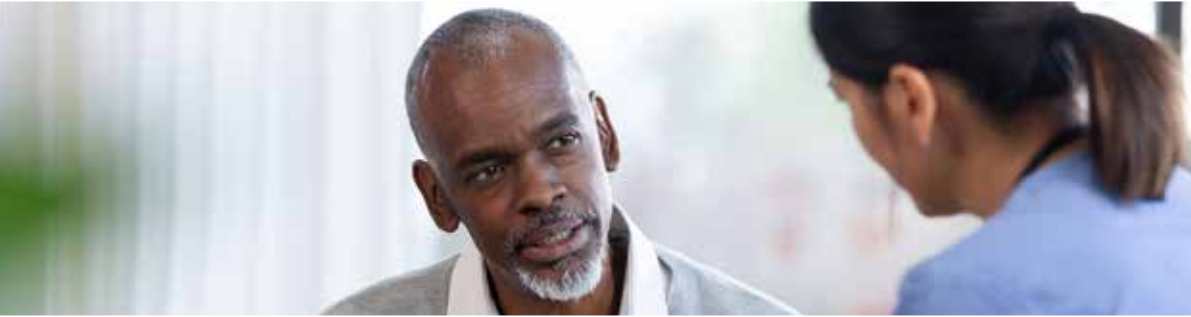
Please note: Collective bargaining agreements may contain provisions that either supersede or are supplemental to the information provided in this guide.

| Health Plan | | |
|---|---|---|
| Northern Light Beacon Health <ul style="list-style-type: none"> Covered Services Behavioral Health Preferred and In-Network Providers Customer Service | <u>1-855-429-1023</u> | employeehealthplan.northernlighthealth.org |
| Optum Financial <ul style="list-style-type: none"> Health Reimbursement Account (HRA) | <u>1-833-799-1781</u> | www.connectyourcare.com |
| Geisinger <ul style="list-style-type: none"> Prescription drug benefits | <u>1-800-988-4861</u> | www.geisinger.org/northernlighthealth |
| Northern Light Pharmacy | <u>1-800-639-8801</u> | www.northernlighthealth.org/pharmacy |
| Health Savings Account (HSA) | | |
| Fidelity | <u>1-800-544-3716</u> | www.netbenefits.com |
| Dental Plan | | |
| Northeast Delta Dental | <u>1-800-832-5700</u> | www.nedelta.com Group Number 6532 |
| Wellness | | |
| Northern Light Total Health | <u>207-973-4000</u> or <u>1-855-660-0202</u> | Total Health page on Resource ME https://mingle-portal.inforcloudsuite.com/EMH_PRD |
| Beacon Health | beaconwellness@northernlight.org | https://beaconhealth.me/Wellness-Services.aspx |
| Short-term Disability | | |
| Lincoln Financial | Report a claim <u>1-888-408-7300</u> | www.mylincolnportal.com Company Code EMHS006 |
| Long-term Disability | | |
| Lincoln Financial | <u>1-800-713-7384</u> Claims Questions: <u>1-800-210-0268</u> | www.mylincolnportal.com Company Code EMHS006 |
| Life Insurance | | |
| Lincoln Financial | Life Claims <u>1-888-787-2129</u> Life Waiver Questions <u>1-888-787-2129</u> Evidence of Insurability <u>1-888-287-8494</u> | www.mylincolnportal.com Company Code EMHS006 |
| Vision Care | | |
| VSP | <u>1-800-877-7195</u> | www.vsp.com |
| Flexible Spending Accounts (FSA) | | |
| Benefit Strategies | <u>1-888-401-3539</u> | www.benstrat.com |
| COBRA Administrator | | |
| Benefit Strategies | <u>1-888-401-3539</u> | www.benstrat.com |
| Employee Assistance Program | | |
| Work Force EAP and Training | <u>1-800-769-9819</u> | www.workforceeap.com |
| Retirement Plan | | |
| Fidelity Investments | <u>1-800-343-0860</u> | netbenefits.com/northernlighthealth |

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*For information about other benefits for balancing your work and life, such as paid time off, holidays, jury and witness duty, tuition reimbursement, etc., please contact our Northern Light Health HR Service Center or visit [Resource ME](#).



Welcome to our 2022 Northern Light Health Benefits Guide! If the guide isn't clear and concise, tell us. Your feedback makes us better.

Benefits Eligibility

Our benefits are designed with you and your family in mind.

All full-time and part-time employees are eligible for coverage.

Temporary long-term, full-time and part-time employees are generally eligible (positions lasting longer than 60 days); please call our Northern Light Health Human Resources Service Center at 207-973-4000 or 1-855-660-0202 if you have any questions.

Eligible Dependents

We are pleased to extend coverage to your eligible dependents, as outlined in this guide.

For most benefits, your eligible dependents include:

- Your spouse;
- Your dependent children up to the end of the month they turn the age of 26; and
- Your disabled children of any age, if disabled before the age of 26.
(Medical documentation required.)

Proof of Eligibility

| Relationship | Required Verification Documents (Acceptable copies include photocopy, picture, scan, or fax) |
|---|--|
| <p>Spouse The participant’s legal spouse of the same or opposite sex</p> | <p>A copy of state or county issued marriage certificate if married within last 12 months. All others, provide a copy of the first page of your federal tax return (through line 6 of Form 1040)* or proof of joint ownership issued within the last 6 months**</p> |
| <p>Child under age 26</p> <ul style="list-style-type: none"> • Your biological child, legally adopted child, or child in the process of being adopted • Stepchild (must be spouse’s child) • A child whom you have legal guardianship of • A child who is the subject of a Qualified Medical Child Support Order (QMCSO) issued to you • Foster child | <p>A copy of the following documents (varies by the relationship of the child to the employee):</p> <p>Biological child - Government issued birth certificate (including parents’ names)</p> <p>Adopted child: Adoption placement agreement (including child’s DOB) or Petition for Adoption (including child’s DOB) OR Adoption Certificate (including child’s DOB)</p> <ul style="list-style-type: none"> • Stepchild: State or county issued birth certificate showing parents’ names, copy of your Marriage Certificate if married within last 12 months or • State or county issued birth certificate showing parents’ names and copy of the first page of your federal tax return (through line 6 of Form 1040)* or proof of joint ownership issued within the last 6 months • Child whom you have legal guardianship: Signed court order • Child who is the subject of a Qualified Medical Child Support Order: Signed court order |
| <p>Dependent Child with a Disability (age 26 or older) A child who has attained age 26, but is incapable of self-sustaining employment because of a documented mental or physical handicap that began before the child reached age 26</p> | <p>A copy of state or county issued birth certificate and a copy of the first page of your federal tax return* claiming the child</p> <p>Please note:</p> <ul style="list-style-type: none"> • You must submit certification of the child’s disability no later than 31 days after your child turns age 26 |

*Black out the first five digits of SSN, and any financial information.

If you just joined Northern Light Health, you have 31 days (from your date of hire – always a Sunday) to provide proof of dependent eligibility.

- Proof of joint ownership can be confirmed with a mortgage, rental agreement, utility bill, etc., and must be dated within six months prior to the start of your benefits coverage.
- Submit a federal tax return, please provide the first page only and black out the first five digits of your social security number (SSN) and all financial information. The return must be from the tax year prior to the year you are adding benefits.
- Please, send copies, not originals. You will not get these documents back; we shred them once they’re reviewed.
- Missing the 31 day window will delay your enrollment until open enrollment for the next plan year.

How and When to Enroll

If you want to have coverage in the following core benefits, **you will need to complete enrollment within 31 days of the date you first become eligible for benefits coverage** (such as the date you are first hired, or the date you become a benefit eligible full-time or part-time employee). Your benefits will start on the first of the month following your date of hire or change in benefits eligibility. For example, if your date of hire is June 11, your elected benefits will start on July 1. **Your date of hire is always a Sunday.** Remember that if you do not enroll in benefits prior to your first paycheck following your benefit effective date, you may miss your first benefit deductions and any missed deductions will be automatically collected from your next paycheck (or two paychecks, if two are missed).

You must actively enroll to have the following benefits coverage:

- Medical/Prescription Drug
- Dental
- Vision
- Supplemental Life Insurance
- Flexible Spending Accounts
- Health Savings Account

You are automatically enrolled in Northern Light Health provided Short-term Disability, Long-term Disability, the Employee Assistance Program, and employee basic life insurance.

NOTE: If your spouse is employed by a Northern Light Health member organization, double coverage is not available for the following employee paid benefits: medical, spousal life insurance, and dependent life insurance.

Benefit Enrollment Instructions

- Benefit enrollment can be accessed two ways via Infor Cloudsuite:
 - Go directly to https://mingle-portal.inforcloudsuite.com/EMH_PRD from a work or home computer
 - OR,
 - From your organization's intranet homepage, type "Infor" in the search bar directly on top of your Quick Links and then select "Infor Cloudsuite"
- Accessing Infor Cloudsuite requires the same username and password you use to log in to your work computer. If you do not have this information or are having trouble logging in, please contact the Northern Light Health IS Help Desk at 207-973-7728 or toll free at 1-888-827-7728.
- Instructions for enrolling in your benefits are located on the benefits page on [Resource ME](#).
- **IMPORTANT:** Once you make your benefit elections, click the **blue** "submit" button and then click "OK" to confirm submission. Then click on the **red** pdf box to print or **save a copy of your Enrollment Statement.**

Retirement Enrollment

You may enroll in or change your election in your Northern Light Health organization's retirement savings plan at any time during the year by contacting Fidelity Investments by phone at 1-800-343-0860 or online at netbenefits.com/northernlighthealth.

Making Changes/Qualifying Life Events

If you want benefits, you must enroll within 31 days of your eligibility date. The only exception is if you experience a qualifying event. (See next page for more information about Making Changes/Qualifying Events.) Your next opportunity to enroll in coverage will be during our next open enrollment period.

When you enroll, choose your benefits carefully, because they are in effect from January 1 through December 31. You may only change your benefits during the plan year if you experience a qualifying life event.

When you make a change due to a qualifying life event, you may only make an adjustment to your benefits that is consistent with the change in life event. Contact the HR Service Center to determine what qualifying changes you are permitted to make.

Qualified status changes take into account some of our more common life events and include the following:

- Marriage
- Birth, legal adoption, legal guardianship, or placement of foster or stepchildren
- A judgment, decree, or order in a domestic relation proceeding, including a Qualified Medical Child Support Order requiring coverage be provided to an eligible child
- Death of you, your spouse, or dependent child
- Legal separation, divorce, or annulment
- A change in your job status (from a non-benefit eligible position to a benefit eligible position) that triggers eligibility
- Loss of coverage or receipt of new coverage under another employer's plan (including open enrollment)
- Change in your dependent's eligibility (e.g., due to being over the age limit)
- A significant change in your required premium (a significant change means a change of 10 percent or more)
- Commencement of or return from a qualified leave of absence (FMLA) or unprotected leave of absence
- Receipt of or loss of Medicare/Medicaid (you may change the current election for the eligible person only)

If you need guidance, contact the HR Service Center to confirm a qualifying event. All qualifying events require specific documentation. Call us if you have questions.

Important: If you need to make a change to your benefits due to a qualifying life event, contact our Northern Light Health HR Service Center as soon as possible (207-973-4000 or 1-855-660-0202).

All changes must be made within 31 days of the event. Changes go into effect the first of the month following the change and submission of paperwork.

The only exception is newborns and adoptions -- you have a 90 day window to enroll in our Northern Light Employee Health Plan, with coverage retroactive to the date of birth/date of adoption.



The Northern Light Employee Health Plan is a self-funded plan. This means the funds used to pay claims come from the premiums we pay as employees and the contributions Northern Light Health makes as our employer.

The performance of our plan (and our premiums) largely depends on how well we take care of ourselves and where we seek care.

Excellent Care with You at the Center

Our health plan is administered by Beacon

Beacon offers a high quality, well-organized network of healthcare providers, care coordination services, care managers, and wellness interventions. Beacon is committed to supporting proactive care that encourages us to lead healthy, productive, and highly satisfying lives. By using our resources at Beacon, we developed a cohesive strategy that works for all of us. It's about connecting executive leadership, Total Health, and Human Resources to design and implement population health strategies – the focus is always on what's best for us; what we need to be healthy. Beacon supports care teams actively engaging with us in our health so we can live fuller lives and if we do become ill we have better outcomes! By partnering with our frontline care teams, they help us accelerate best practices quickly across our system. This gives providers more time to focus on caring for you and your family.

Beacon offers innovative programs to help us make better lifestyle choices and live a healthier life while managing a chronic condition or receiving a new diagnosis. Their expertise is matched by their commitment to our good health with programs developed specifically for us, offering one-on-one interventions such as specialized nurse care management, health and disease management, and a variety of wellness programs including biometric screenings. Your relationship with Beacon's care providers is confidential and your health information is protected.

Nurse Care Management Program

Personalized nurse care managers help you get everything you need to stay on top of a chronic condition or get back to your life after a visit to the emergency department or a hospital stay. Provider-led teams coordinate a comprehensive treatment plan that includes clinical care supported by outreach with a specialized nurse just for you, health education, and support tools so you can achieve your best outcome. Our nurse care managers work right alongside your primary or specialty care team and help you get the care and support you need when you need it.

When you invest in your health, you build a healthier future. Take advantage of Beacon's programs. They are free and part of our benefits package.

Beacon Health Wellness Coaching is all about you

How about personalized support and encouragement to take charge of your health? Wellness Coaching is all about what's important to you. Our program offers individual support so you can achieve your goals. Coaches help you overcome challenges and work with you to develop a plan that is tailored to your unique circumstances and capabilities. Our coaches can meet with you virtually or in person.

Beacon Health Kicking Butts -- when you're ready to quit for good

Kicking Butts is a comprehensive tobacco cessation program that follows best practices and incorporates the latest evidence-based research. Our program includes individual support from a wellness coach who helps you develop a quit plan and provides one-on-one education incorporating the latest approaches and resources for tobacco cessation. In addition, coaches regularly reach out to help you manage your triggers and stay tobacco-free.

Beacon Health Weight Solutions

When accountability, direction, and support is important, this program is a must. Coaches help you improve your health and wellbeing through healthy weight loss. Following best practices, Beacon combines one-on-one partnerships and a group component. Program graduates are proof change is possible. Visit beaconhealth.me for more information about Beacon wellness programs.

Beacon Health Wellness Network

Are you ready to take your health to the next level? Looking for new ways to stay active and save money at the same time? Look at our statewide network of preferred wellness services for all employees and family members on our health plan. Our Wellness Network includes fitness centers, personal trainers, massage therapists, yoga studios, and more*, all at a discounted cost. A complete listing of services, searchable by location or service, is available at beaconhealth.me under Wellness Services/Wellness Services Network.

*Some services may not be available in all locations.



Northern Light Health Additional Programs

Total Health

Available to all employees

- Programs, challenges, events, lunch and learns, tools and resources, newsletters, and education

Northern Light Employee Health Plan

The programs listed below are available to covered employees and spouses on the Northern Light Employee Health Plan. All associated incentives are available equally to employees and their spouses.

- Beacon Health Biometric Screening Program. More information on this year's program is available on Beacon Health's site.
- Beacon Health Kicking Butts tobacco cessation program
- Beacon Health Diabetes Prevention Program
- Beacon Health Weight Solutions
- Beacon Health Wellness Coaching
- Weight Watchers reimbursement program for community and at-work programs

Livongo (Base & Buy-Up enrollees only)

Livongo is a digital health platform that empowers people with chronic conditions to live better and healthier lives. A whole person approach is offered starting with diabetes, pre-diabetes, weight management and behavioral health. This program is offered at no cost to Northern Light Health Plan members with diabetes. To sign up or to learn more about this program, visit join.livongo.com/NORTHERNLIGHTHEALTH/enter or call Livongo Member Support at 1-800-945-4355 and have your registration code "NORTHERNLIGHTHEALTH" ready.

Biometric screenings (Base & Buy-Up enrollees only)

Biometric screenings take place each year in the fall for employees and spouses on the Northern Light Employee Health Plan whose blood cholesterol, blood glucose, blood pressure and body mass index (BMI) was not picked up on the Northern Light Health electronic medical record from a visit to their primary care's office at some point during the calendar year. Information about this incentive program is sent to eligible employees and is available at employeehealthplan.northernlighthealth.org. If you are hired after December 1 you will be eligible for this program the following fall.

Weight Watchers Reimbursement (Health Plan enrollees)

Employees and spouses can receive a taxable reimbursement of \$72.50 for attending 10 out of 12 consecutive meetings. This benefit is available for community Weight Watchers meeting either in person or via Zoom in addition to Weight Watchers at Work if available. Please visit the Benefits page at Resource ME at https://mingle-portal.inforcloudsuite.com/EMH_PRD for details and to access reimbursement affidavits.

Health Reimbursement Account (HRA) contributions (Base & Buy-Up enrollees only)

As an additional component of the fall biometric screening, all employees and spouses who have a BMI under 29 receive a \$50 contribution into their HRA accounts, up to the maximum HRA balance allowed per our Employee Health Plan Summary Plan Document. If you have a BMI of 29 or over, you can still qualify for the HRA contribution. You just need to actively work toward meeting that standard by participating in a qualifying program. Additionally, those who use tobacco, are pre-diabetic or diabetic or who otherwise wish to improve their health can also earn a range of HRA contribution incentives by participating in a qualified engagement program or programs. Details about these programs are available at employeehealthplan.northernlighthealth.org.

Health Plan Benefits—Northern Light Employee Health Plan

If you enroll in Plan benefits, you may choose from the following coverage levels:

- Employee only
- Employee and Spouse
- Employee and Child(ren)
- Full Family

You may elect different coverage levels for health, dental, and the voluntary vision benefits.

For example, you may elect full family for health, employee and child(ren) for dental, and employee-only for voluntary vision. You choose the benefits and the level of coverage that you and your family need.

Beacon

Beacon is the administrator of the Northern Light Employee Health Plan. The same providers who work on quality performance, patient engagement, and healthcare utilization through Beacon Health also support the administration of our Health Plan.

These advancements and investments mean we can customize our Plan design to meet the needs of our Northern Light Employee Health Plan population. By designing and administering our Plan, we can be more effective across the broad demographics, style, and culture of our system and geography. Beacon helps meet our goal to partner with employees to share the responsibility and work required to offer a meaningful and affordable health plan benefit successfully.

Beacon contracts with other companies to process our claims and manage a few select components of our Health Plan. Your Health Plan and your ID cards will read: Northern Light Employee Health Plan.

Coverage Levels

| | Preferred | In-Network | Out-of-Network |
|-------------------------------|--|---|---|
| Coverage Level | Highest level of benefits | Middle level of benefits | Lowest level of benefits |
| Where you receive care | Services that are rendered and billed by any facility or provider listed in the online provider directory as preferred, which includes Northern Light Health members and select partners | Services that are rendered and billed by any facility or provider that participates at the in-network level as listed in the provider directory | Services that are rendered and billed by any facility or provider that is not in the preferred or in-network provider directory |
| Special Features | Out-of-pocket costs based on negotiated rates | Out-of-pocket costs based on negotiated rates | Out-of-pocket costs generally based on reasonable and customary charges |
| Claims | No claims to file | No claims to file | You may be required to file claims |
| Pre-authorization | Provider’s responsibility | Provider’s responsibility | Your responsibility |

The preferred level of coverage is an enhanced benefit; services will not always be available.

Visit employeehealthplan.northernlighthealth.org to search the provider directory for preferred and in-network providers.

Out-of-Network Coverage

Services not provided by a preferred or in-network provider will be covered at the out-of-network level, which means a higher deductible, higher coinsurance, higher out-of-pocket maximum, and the potential for balance billing unless you are receiving emergency care or other excepted services. Examples include:

- Receiving non-routine, non-emergency, or non-urgent care out of area. For example, traveling outside of the Northern Light Health service area and going to a provider for a non-urgent condition.
- Receiving non-routine care outside of the service area without prior authorization. For example, having surgical services, or getting a second opinion in Boston without your provider working with Medical Management receiving advance authorization.

Call our Medical Management Triage Customer Service at 855-429-1024 with questions.

Out-Of-Network and Prior Authorizations

It is the responsibility of your preferred or in-network provider or the facility in which you will be receiving care to ensure prior authorization for services on the prior authorization list at <https://employeehealthplan.northernlighthealth.org/>

Services received from an out-of-network provider which are on the prior authorization list will need to be approved via the provider submitting a prior authorization form (available on the website). You are responsible for assuring that the provider has submitted this form and obtained prior authorization approval.

The prior authorization list includes, but is not limited to the following:

- Inpatient hospital stays;
- Inpatient services;
- Residential treatment;
- Intensive outpatient services including certain outpatient surgeries;
- Durable Medical Equipment (over \$500)
- Medical pharmacy (such as injectable drugs for chemotherapy or rheumatoid arthritis that are on the prior authorization list)

Providers that are contracted with Beacon Health have online access to a complete list of services requiring prior authorization via the website listed above.

IMPORTANT Receiving services from an out-of-network provider: If you receive services from an out-of-network provider or facility that require prior authorization, you are financially responsible when you receive these services if a prior authorization is not obtained. You'll be responsible for 100 percent of the cost without co-insurance and without the cost going towards your deductible or out-of-pocket maximum if:

(a) A prior authorization has been requested by a provider or facility and been denied,

or

(b) You obtain services out-of-network that require prior authorization without going through the prior authorization process,

or

(c) If a service is on the prior authorization list, but is reviewed by Medical Management and is determined to be not medically necessary

A complete listing of services requiring prior authorization can be found at employeehealthplan.northernlighthealth.org. Should you have any questions as to whether you have received prior authorization, please contact Customer Service via the phone number on the back of your health plan identification card.



Provider Network

The provider directory at employeehealthplan.northernlighthealth.org will only include preferred and in-network providers within the Northern Light Health service area. To obtain services outside the Northern Light Health service area, you must work with your primary care provider (PCP) to assure a prior authorization is completed.

If you or your covered dependent(s) live outside the Northern Light Health service area

If you or your dependents live outside the state of Maine, there is access to a national provider network through Multiplan/PHCS. Services provided by a Multiplan/PHCS provider will be covered at the in-network level of coverage.

- If your home address is outside of Maine, you and your covered dependents will automatically have access to this network.
- If only your covered dependent(s) lives outside the Northern Light Health service area, you must complete the Out of State Network Authorization form and submit it to Human Resources.

The Out of State Network Authorization form is on the benefits page at <https://erc.enwisen.com/ASI/Page.aspx?code=efc22242&orgid=E4D94BAA-ABF6-4D8F-96D4-EF3CE7A2FC00&header=on&branding=off> and at employeehealthplan.northernlighthealth.org. It must be submitted **annually**.

We encourage you to use Northern Light Health facilities for your healthcare needs. All facility, professional, and other services will be covered at the preferred level. However, keep in mind that you will still be required to pay applicable copays, coinsurance, and deductibles for your care.

Understanding the Health Plan Options

| | |
|---|--|
| Premiums | You pay for your health plan coverage through bi-weekly deductions from your paycheck. Your bi-weekly premiums can be found on the rate sheet. |
| Routine Preventive Care | 100 percent paid if through a preferred or in-network PCP or facility; includes routine physical exams, well child visits, and immunizations. |
| Health Reimbursement Account (HRA) | Northern Light Health will fund an account to help you meet the plan deductibles in the Base & Buy-Up Plans. Once your account is depleted, you'll be responsible for the remaining deductible. Your HRA can be used to cover PCP office copays, but not prescription drug copays. Please see next page for further information. |
| Health Savings Account (HSA) | Applicable only to enrollees in the HSA Eligible Plan. An HSA is an individual account you own that can be used to pay for out-of-pocket qualified medical expenses that the health plan doesn't cover. Please look to pages 15 and 18 for additional information. |
| Deductibles | There are separate deductibles for the Plan offerings. If you cover dependents, there are individual and family deductibles. An individual will never accumulate more than the individual maximum. Deductibles accumulate across the three coverage tiers. |
| Co-insurance | Once you have met your deductible, you will be responsible for a portion of your medical bill(s) until you meet the out-of-pocket maximum: 20 percent for preferred, 30 percent in-network and 50 percent out-of-network. |
| Out-of-Pocket Maximums (OOPM) | There are separate OOPM amounts for the three coverage tiers and for the Plan options. Out-of-pocket prescription plan costs apply to the preferred OOPM. Like deductibles, OOPMs accumulate across the three coverage tiers and an individual will never accumulate more than the individual maximum. |

Northern Light Employee Health Plan—2022 Plan Year

| | NEW! HSA Eligible Plan | | | Base Plan | | | Buy-up Plan | | |
|---|--|--|--|-----------------------------------|-----------------------------------|--|-----------------------------------|-----------------------------------|--|
| | Preferred | In-Network | Out-of-Network | Preferred | In-Network | Out-of-Network | Preferred | In-Network | Out-of-Network |
| | Annual Employer Funded Health Reimbursement Account. See page 17 for more info. This account helps you meet your deductible/out-of-pocket maximum ¹ . | | | | | | | | |
| Annual Deductible ² | \$2,500 Ind \$5,000 Fam | \$3,000 Ind \$6,000 Fam | \$4,000 Ind \$8,000 Fam | \$2,500 Ind \$5,000 Fam | \$3,000 Ind \$6,000 Fam | \$4,000 Ind \$8,000 Fam | \$1,500 Ind \$3,000 Fam | \$2,000 Ind \$4,000 Fam | \$3,000 Ind \$6,000 Fam |
| Annual Out-of-Pocket Maximum ³ | \$4,000 Ind \$8,000 Fam | \$4,500 Ind \$9,000 Fam | \$5,500 Ind \$11,000 Fam | \$4,000 Ind \$8,000 Fam | \$4,500 Ind \$9,000 Fam | \$5,500 Ind \$11,000 Fam | \$3,000 Ind \$6,000 Fam | \$3,500 Ind \$7,000 Fam | \$4,500 Ind \$9,000 Fam |
| Preventive Care | 100% Paid | 100% Paid | 50% ⁵ after deductible ⁴ | 100% Paid | 100% Paid | 50% ⁵ after deductible ⁴ | 100% Paid | 100% Paid | 50% ⁵ after deductible ⁴ |
| Primary Care Provider (PCP) Office Visit | 20% ⁵ after deductible | 30% ⁵ after deductible | 50% ⁵ after deductible ⁴ | \$25 copay | 30% ⁵ after deductible | 50% ⁵ after deductible ⁴ | \$25 copay | 30% ⁵ after deductible | 50% ⁵ after deductible ⁴ |
| Outpatient Mental Health and Substance Use Disorder | 20% ⁵ after deductible | 30% ⁵ after deductible | 50% ⁵ after deductible ⁴ | \$25 copay | 30% ⁵ after deductible | 50% ⁵ after deductible ⁴ | \$25 copay | 30% ⁵ after deductible | 50% ⁵ after deductible ⁴ |
| OB/GYN Specialist Office Visit | 20% ⁵ after deductible | 30% ⁵ after deductible | 50% ⁵ after deductible ⁴ | \$25 copay | 30% ⁵ after deductible | 50% ⁵ after deductible ⁴ | \$25 copay | 30% ⁵ after deductible | 50% ⁵ after deductible ⁴ |
| Urgent Care Services | 20% ⁵ after deductible | | | 20% ⁵ after deductible | | | 20% ⁵ after deductible | | |
| Emergency Care Services | 30% ⁵ after deductible | | | 30% ⁵ after deductible | | | 30% ⁵ after deductible | | |
| Other Services: –Specialist Office Visit –Inpatient and Outpatient Services (i.e., inpatient hospital services; laboratory; x-ray; MRI; PET and CAT scans, maternity services, and durable medical equipment) | 20% ⁵ after deductible | 30% ⁵ after deductible | 50% ⁵ after deductible ⁴ | 20% ⁵ after deductible | 30% ⁵ after deductible | 50% ⁵ after deductible ⁴ | 20% ⁵ after deductible | 30% ⁵ after deductible | 50% ⁵ after deductible ⁴ |
| Prescription Benefits | | | | | | | | | |
| 1 to 30 day supply copay | \$10/\$30/\$50 after deductible ⁸ | \$20/\$40/\$60 after deductible ⁸ | Not covered | \$0/\$10/\$30/\$50 | \$0/\$20/\$40/\$60 | Not covered | \$0/\$10/\$30/\$50 | \$0/\$20/\$40/\$60 | Not covered |
| Maintenance drugs and mail order copay (Northern Light Pharmacy; 90 day supply) ⁶ | \$20/\$60/\$100 | Not covered ⁷ | Not covered | \$0/\$20/\$60/\$100 | Not covered ⁷ | Not covered | \$0/\$20/\$60/\$100 | Not covered ⁷ | Not covered |
| Maintenance drugs and mail order copay (Northern Light Pharmacy; 90 day supply) ⁶ | \$20/\$60/\$100 after deductible | Not covered ⁷ | Not covered | \$0/\$20/\$60/\$100 | Not covered ⁷ | Not covered | \$0/\$20/\$60/\$100 | Not covered ⁷ | Not covered |

Important Notes

- The health reimbursement accounts apply toward the deductible and out-of-pocket maximum.
- Preferred, in-network, and out-of-pocket annual deductibles cross accumulate (the amount is applied to all three networks).
- Out-of-pocket prescription plan costs will apply to the preferred maximum out-of-pocket cost.
- Out-of-network services are generally paid based on reasonable and customary — charges above reasonable and customary are your responsibility and do not count toward the deductible and out-of-pocket maximum.
- Percentages indicate employee share of coinsurance.
- Maintenance controlled substances are not required to be filled through mail order.
- Exceptions available if living outside of Maine.
- There are two exceptions for prescriptions (RX) when you are on the HSA Eligible Plan:
 - Some RX are completely free per Affordable Care Act guidelines
 - Some RX are on a preventive waiver list: those are NOT subject to deductible and instead jump directly to the appropriate copay tier.

Note: Prescription Drug Zero Copay program covers specific drugs for coronary artery disease, depression, diabetes and hypertension. (Refer to geisinger.org/northernlighthealth for a complete listing.)

Refer to the Northern Light Employee Health Plan Document and Summary Plan Description for coverage details.

This document is available under Required Notices on the Benefits page on Resource ME:

https://mingle-portal.inforcloudsuite.com/EMH_PRD

Your Health Reimbursement Account with the Base & Buy-up Plans (HRA)

(See HRA overview chart, page 17)

Beacon Health partners with Optum Financial to administer the HRA—one of the distinguishing features of our health plan. The HRA is funded by Northern Light Health and helps you meet plan deductibles. Any remaining balance in your health reimbursement account will roll over to the following year to a maximum of \$5,500 for individual coverage or \$11,000 if you cover dependents. If you have questions about your HRA balance or a payment(s) to a provider, you can log in to your account at connectyourcare.com or call 1-833-799-1781.

Foundational HRA Contribution: This automatic employer contribution will be added to your HRA each January 1 (or the first day of your medical coverage if different than Jan 1) and no employee action is required.

HRA Supplement Contribution: Full-time and part-time employees making \$15.48 an hour (\$32,200 annualized) or less will receive an additional foundational amount annually of \$600 for individual coverage or \$1,200 if you cover dependents, through a supplemental HRA benefit. This pay threshold is set to 250 percent of the Federal Poverty Level for an individual, a key amount used by the government to establish subsidies under the Affordable Care Act. For those that meet requirements, you don't have to do anything to receive the HRA Supplement and it will be added to your HRA each January 1 (or the first day of your medical coverage if different than January 1).

Preferred PCP Contribution: Employees and spouses covered by the Northern Light Employee Health Plan can obtain an additional Preferred Primary Care Provider (PCP) HRA contribution when they attest to being established with or having scheduled a new patient appointment with a Preferred PCP. Preferred PCPs are part of Northern Light Health hospitals (Northern Light Blue Hill Hospital, Northern Light CA Dean Hospital, Northern Light Eastern Maine Medical Center, Northern Light Inland Hospital, Northern Light Maine Coast Hospital, Northern Light Mayo Hospital, Northern Light Mercy Hospital, Northern Light Sebecook Valley Hospital, and Northern Light AR Gould Hospital) and additional select primary care partners. Although the Preferred PCP contribution is provided based on the establishment of preferred primary care for employees and their spouses, HRA dollars are first-come-first-served, so those contributions can also be utilized for the covered services of dependent children.

There are four annual opportunities to attain the Preferred PCP HRA contribution by completing the attestation via an online survey link: April 15, July 15, October 15, and during the annual fall open enrollment timeframe. You may submit your attestation at any time, but attestations will be reviewed and audited on the dates above and the applicable \$500/\$1,000 Preferred PCP HRA Contribution(s) will be loaded into your HRA around the first of May, August, November, and January. Important: Prior claims will not be reprocessed to include newly added dollars.

Some exceptions apply

If you or your spouse falls into one of the exception categories below, you must complete the online attestation and make the appropriate exception election to receive the Preferred PCP HRA contribution:

- Primary residence is outside of Maine,
- There is not a Preferred Primary Care team within 30 miles of primary address as indicated in your employee record, or
- There is a Preferred Primary Care team within 30 miles of primary address but they are not accepting new patients

Notes:

- Pediatrician/PCP choices for dependent children of any age are not part of this plan design
- An OB/GYN, although an important part of a woman's healthcare, is not a PCP and is not part of this initiative

Visit the Northern Light Health Benefits page at https://mingle-portal.inforcloudsuite.com/EMH_PRD on [Resource ME](#) for a complete list of Preferred PCPs and the link to submit your online attestation.

| Health Reimbursement Account (HRA) Contribution 2022 (Base & Buy-Up Plan only) | | |
|--|---|---|
| | Total Foundational HRA Contribution (automatic) | Total with Preferred PCP Contribution Additional \$500/\$1000 (action required) |
| Employee Only | \$500 | \$1,000 |
| Employee & Spouse or Full Family | \$1,000 | \$1,500 (employee OR spouse attests) |
| | | \$2,000 (BOTH employee AND spouse attest) |
| Employee & Children | \$1,500 | \$2,000 (employee attests) |
| HRA Supplement Program for employees earning \$15.48 or less per hour | | |
| | Total Foundational HRA Contribution (automatic) | Total with Preferred PCP Contribution Additional \$500/\$1000 (action required) |
| Employee Only | \$1,100 | \$1,600 |
| Employee & Spouse or Full Family | \$2,200 | \$2,700 (employee OR spouse attests) |
| | | \$3,200 (BOTH employee AND spouse attest) |
| Employee & Children | \$2,700 | \$3,200 (employee attests) |

Which medical plan is right for me?

- You can choose the **Buy-up Plan** and pay higher payroll deductions up front with a smaller deductible, have access to \$25 copay office visits and Foundational and PCP Attestation contributions to your HRA, and lower annual deductible.
- You can choose the **Base Plan** and pay lower payroll deductions up front with a larger deductible, have access to \$25 copay office visits and Foundational and PCP Attestation contributions to your HRA, and a higher annual deductible.
- You can choose the **HSA Eligible Plan** and pay lower payroll deductions up front, have the ability to contribute funds pre-tax to your accompanying HSA account and manage your health care and how you pay for services. A high deductible health plan (HDHP) requires the deductibles to be met before the plan pays. By electing this plan:
 - You decide how to spend your healthcare dollars.
 - Contributions earn tax free interest and the ability to invest
 - Contributions rollover from year to year
 - Contributions are individually owned and portable

Health Savings Accounts (HSA)

When you enroll in the Northern Light Health HSA Eligible Plan, a qualifying high-deductible health plan, you are required to set up a health savings account (HSA) through Fidelity Bank if you meet all of the additional IRS requirements. An HSA is an account that allows you to pay for qualified health expenses without paying taxes on the money.

An HSA is similar to a 401(k) or 403b plan in that you own the account and contributions are tax-free. Money placed in the HSA is available for paying qualified health expenses that apply to your deductible or that are not covered through the health plan, including dental, vision and orthodontic expenses. The HSA rewards conscientious use of your health plan because unused HSA money accumulates in your account over time. If you leave the company, you keep your HSA and the money in it; however, you must be enrolled in a qualified high deductible health plan in order to contribute to your account.

HSA Eligible Plan

The HSA Eligible Plan is a qualifying high deductible health plan with an accompanying Health Savings Account (HSA) with Fidelity. This plan offers preferred, in-network and out-of-network benefit levels, with certain prior authorization requirements like our other health plans. The HSA eligible plan does have annual plan deductibles that must be met prior to co-insurance.

Eligibility for HSA Eligible Plan

You are **not** eligible to set up or contribute to an HSA if:

- You are claimed as a dependent on someone else's tax return
- You are eligible to receive benefits from any plan that is not a qualified high deductible health plan including:
 - Enrollment in your spouse's non-qualified health plan
 - Enrollment in a non-limited purpose flexible spending account by either you or your spouse
 - Enrollment in Medicare, Medicaid, Military or veteran's healthcare program (e.g. TRICARE)

| HSA Annual Contributions | IRS Maximum Annual Contribution 2022 | Additional Contribution if employee is over 55 years old in 2022 | NLH Annual Contribution provided per-pay period through 2022 |
|--------------------------|--------------------------------------|--|--|
| Single | \$3,650 | \$1,000 | \$500 |
| Family | \$7,300 | \$1,000 | \$1,000 |



Northern Light
Pharmacy
mail order
distribution center:

Central Mail
Distribution
Center, 207-275-3300
or 800-639-8801.

Northern Light Pharmacy

Northern Light Pharmacy is the preferred retail pharmacy operating at five locations in the Bangor and Portland areas. Our mail order distribution center is in Brewer. Additional services provided to Northern Light Health plan participants by Northern Light Pharmacy's professional staff include a resource for all medication needs, tobacco cessation and healthy heart programs, immunizations, medication reviews, and durable medical equipment services. You will receive preferred pricing and your mail order maintenance, and specialty drugs will be mailed to you at no charge. You also have a dedicated webpage on northernlighthealth.org/pharmacy. You can visit a Northern Light Pharmacy at the following locations:

Riverside (Northern Light Eastern Maine Medical Center main campus)
417 State Street, Bangor
207-973-8888 or (888)-277-4007

Westgate (Northern Light Health Center, Union Street)
915 Union Street, Bangor
207-973-6788

Fore River
195 River Parkway, Suite 170, Portland
207-535-1600

State Street
210 State Street, Bangor
207-947-8369

Whiting Hill (Lafayette building on the Northern Light Health campus)
33 Whiting Hill Road, Brewer
207-973-9444

Geisinger manages the formulary (list of available drugs), and changes are made periodically. You can visit the Geisinger website at geisinger.org/northernlighthealth to review the current formulary and locate participating pharmacies.

Zero Copay Program (Tier 0, Base, and Buy Up Plans only)

By waiving copays for chronic conditions and providing 100 percent coverage of critical medical supplies (brands are predetermined), such as diabetes test strips and glucose monitors, Northern Light Health is removing cost barriers to ensure participants can access necessary care. Chronic conditions in this program include:

- Coronary Artery Disease (high cholesterol)
- Depression
- Diabetes
- Hypertension (high blood pressure)

For a complete and current list of drugs and medical supplies covered under the Zero Copay program, refer to geisinger.org/northernlighthealth.

Prescription Drug Coverage

If you are covered by the health plan, Northern Light Health provides prescription drug coverage to you and your family. Coverage is administered by Geisinger Health Options in conjunction with PerformRX and offers a wide network of participating pharmacies. You will receive a separate prescription ID card for each covered member.

Your prescriptions have two levels of coverage with the lower copays being through Northern Light Pharmacy. Preferred coverage for 30-day or less prescriptions is also available through a select group of contracted pharmacies located outside of the Bangor and Portland area, including Walgreens.

Prescriptions for a 30-day supply or less are available at the higher in-network copays at Geisinger/PerformRX participating pharmacies throughout the country. See below for details about maintenance, mail order, and specialty drugs. If you have questions about the pharmacy benefit, you can log in to the Geisinger website (geisinger.org/northernlighthealth) or call 1-800-988-4861 for assistance.

Maintenance, Mail Order and Specialty Drugs

Maintenance Drugs: Maintenance drugs are taken routinely, often for a chronic condition. You may fill up to two 30-day supplies of a maintenance drug at your participating preferred or in-network pharmacy. *All following prescriptions must be filled through Northern Light Pharmacy, either by mail order or by visiting one of the Bangor or Portland area locations.* The “Covered Drugs” search tool can be found on the Geisinger landing page and is also available to registered members of the Geisinger website, geisinger.org/northernlighthealth. You can search for a drug to see if it is considered a maintenance medication. Members who live outside of Maine may obtain 30-day or 90-day supplies of maintenance drugs at PerformRX network pharmacies, to be paid at the preferred level. To locate a PerformRX pharmacy near you, please visit geisinger.org/northernlighthealth.

Important: Maintenance medications must be filled at a Northern Light Pharmacy after filling up to two 30-day supplies at a preferred or in-network pharmacy. Exceptions are available for maintenance-controlled substances.

Mail Order: Northern Light Pharmacy provides mail service without additional charge to those living in the state of Maine, as well as select other states. Prescriptions that qualify for mail order can also be picked up at any Northern Light Pharmacy location.

Specialty Drugs: Specialty drugs are often injectable drugs, but also include high-cost drugs for cancer and other high-risk conditions. These drugs are managed by Northern Light Pharmacy in conjunction with Geisinger and Beacon. If Northern Light Pharmacy is not able to provide a specific specialty drug, they will locate an alternative distributor. If necessary, an exception will be provided for those drugs Northern Light Pharmacy is unable to obtain.

Prescription Prior Authorization Process

Prescription coverage is one of the fastest growing areas of cost in healthcare. Geisinger manages what is called a closed formulary, which means that not all drugs are available to plan participants without a review process. Care is taken to ensure that appropriate, medically necessary drugs are available. In some instances, the plan will require that your provider try alternative medications and other approaches before filling a requested prescription drug. Your provider may complete a Geisinger Pharmacy Prior Authorization form, available on the Northern Light Health benefits page on [Resource ME](#) and through geisinger.org/northernlighthealth.

Filling Prescriptions Outside of Maine

If you are traveling or have a dependent living outside of Maine, Northern Light Pharmacy can have your prescriptions sent to certain states. Please phone or visit any Northern Light Pharmacy to have your information updated accordingly. You also have the option to fill your prescriptions outside of Maine through Walgreens (preferred outside of the Bangor, Portland, and South Portland areas) or at any of the Geisinger nationally contracted pharmacies through PerformRX. To locate a contracted pharmacy, the “Pharmacy Search” tool can be found on Geisinger’s Northern Light Health landing page, geisinger.org/northernlighthealth, and is available to registered members of the Geisinger website.

If necessary, you have the option of paying for your prescription and then requesting reimbursement. Reimbursement claim forms should be sent to Geisinger and are located both at [Resource ME](#) and geisinger.org/northernlighthealth.

Prescription Coverage Highlights

| Coverage Level | HSA Eligible Plan | | Base Plan and Buy Up Plan | In-Network (Geisinger/PerformRX) |
|---|--|--------------------------|--|--|
| | Preferred | In-Network | Preferred | In-Network |
| 1 to 30-day supply copays¹ | \$10/\$30/\$50 | \$20/\$40/\$60 | \$ 0–Tier 0–Zero Copay Program \$10–Tier 1–Generic \$30–Tier 2–Brand Formulary \$50–Tier 3–Brand Non-Formulary | \$ 0–Tier 0–Zero Copay Program \$20–Tier 1–Generic \$40–Tier 2–Brand Formulary \$60–Tier 3–Brand Non-Formulary |
| Participating pharmacies | Northern Light Pharmacy | Not covered ² | Northern Light Pharmacy, Walgreens (nationwide except in Bangor, Brewer, Hampden, Portland and South Portland), Harris Drug (Greenville), Community Pharmacies (for full list, visit geisinger.org/northernlighthealth) | Most pharmacies in Maine, most national pharmacy chains, Walgreens in Bangor, Brewer, Hampden, Portland and South Portland |
| 90 day supply maintenance Rx and mail order copays³ (available only through Northern Light Pharmacy) | Safe Harbor Drug List \$20/\$60/\$100 | Not covered ² | \$ 0–Tier 0–Zero Copay Program \$20–Tier 1–Generic \$60–Tier 2–Brand Formulary \$100–Tier 3–Brand Non-Formulary | Not covered ² |

1. There are two exceptions for prescriptions (RX) when you are on the HSA Eligible Plan:
 - a. Some RX are completely free per Affordable Care Act guidelines
 - b. Some RX are on a preventive waiver list: those are NOT subject to deductible and instead jump directly to the appropriate copay tier.
2. Exception available if living outside of Maine.
3. Exclusions apply to maintenance-controlled substances, which cannot be acquired by mail order.



Benefits that Work with Your Health Plan

Flexible Spending Accounts (FSA)

Northern Light Health offers three Flexible Spending Accounts (FSAs) through Benefit Strategies—the Healthcare FSA, Limited Purpose FSA, and Dependent Child Care FSA. These accounts are designed to help you save on taxes by allowing you to set aside money, up to certain limits, on a pre-tax basis to pay for eligible healthcare or dependent care expenses. You may not transfer money from one account to another.

You decide how much to contribute each year (up to certain limits), and your contributions are automatically deducted from your paycheck each pay period before certain taxes are taken out.

You may only use your FSA to pay for goods and services that are considered by the IRS to be eligible expenses. Refer to [irs.gov](https://www.irs.gov) or benstrat.com for more information. When you have an eligible expense, you can either use your FSA debit card or submit claims manually with a receipt and claim form (available at [Resource ME](#) or benstrat.com). You must keep your itemized receipts for all debit card transactions—it is an IRS requirement and Benefit Strategies can request them at any time.

You may only change your FSA contribution(s) during the year if you experience a qualifying event. Special rules apply to FSAs—contact the Northern Light Health HR Service Center (1-855-660-0202 or hrservicecenter@northernlight.org) to determine what qualifying events permit you to make changes to your FSA contributions. You are encouraged to visit benstrat.com where you can access your personal account information, find more details on the advantages of flexible spending accounts, review a detailed list of eligible healthcare expenses, utilize a tax savings calculator, find claim forms, and access many more useful tools.

| Healthcare FSA (Allowed with the Base Plan and Buy-Up Plan) | |
|--|---|
| Pre-tax Deductions | Minimum \$260–Maximum \$2,750 per year |
| Funds Availability | Your annual FSA balance is available as of the first day of eligibility |
| Eligible Expenses | Include, but are not limited to, prescription copays, medical expenses (after HRA is exhausted), dental expenses, glasses, contacts, and over-the-counter medications and drugs <i>with a prescription</i> (except insulin) |
| Carryover Rule | At the end of a year when you've been enrolled in the plan, if you enroll in the plan again you can carry over up to \$550 to the following year; unused money over the \$550 is forfeited. If you do not enroll in the plan for the following year, you must have a minimum balance of \$100 to carry over funds; unused money over the \$550 is forfeited |
| Claims Submission | March 31, for eligible expenses incurred on or before December 31 of the previous calendar year |
| Limited Purpose FSA (Allowed with all Plans and the only non-dependent care flex option allowed with the HSA Eligible Plan) | |
| Pre-tax Deductions | Minimum \$260–Maximum \$2,750 per year |
| Funds Availability | Your annual FSA balance is available as of the first day of eligibility |
| Eligible Expenses | Dental and Vision expenses only. Available for those enrolled in the HSA Eligible, Base or Buy-up Plans. |
| Carryover Rule | At the end of a year when you've been enrolled in the plan, if you enroll in the plan again you can carry over up to \$550 to the following year; unused money over the \$550 is forfeited. If you do not enroll in the plan for the following year, you must have a minimum balance of \$100 to carry over funds; unused money over the \$550 is forfeited |
| Claims Submission | March 31, for eligible expenses incurred on or before December 31 of the previous calendar year |
| Dependent Child Care FSA (No connection to Health Plan enrollment) | |
| Pre-tax Deductions | Minimum \$260–Maximum \$5,000 per year (maximum is for the family - please see note on next page) |
| Funds Availability | Your funds are only available as you pay into your account |
| Eligible Expenses | Include, but are not limited to, eligible child care expenses for your children under age 13, or your dependents of any age who are physically or mentally unable to care for themselves and for whom you contribute more than half of their financial support. Provider must be 19 years old or older and must claim earnings through the IRS. You must provide your dependent care provider's tax ID number or Social Security number to be eligible for reimbursement. |
| Carryover Rule (grace period) | The unused balance of your dependent care FSA may be used for eligible expenses that you incur during the first 2½ months of the following year; unused money is forfeited (use it or lose it!) |
| Claims Submission | March 31, for eligible expenses incurred on or before the end of the 2½ month grace period |



A Note About the Dependent Child Care Flex Annual Maximum:

Northern Light Health is required by the Internal Revenue Service (IRS) to pass a series of annual non-discrimination tests in order to retain tax-favored status (i.e., pre-tax premiums) for all Dependent Child Care plan participants. Occasionally it is necessary to adjust for highly compensated employees (per IRS regulation, an employee who earns an annual salary of \$130,000 a year or more) in order to keep the plans in compliance. For the 2022 plan year it is necessary to make an adjustment for highly compensated employees and the annual maximum contribution to Dependent Child Care FSA will be limited to \$1,500.

Life Insurance

Northern Light Health provides a comprehensive term life insurance program administered by Lincoln Financial with three components:

- Basic Life Insurance for yourself (this is an automatic benefit paid for by Northern Light Health). **Please note:** Northern Light Health-paid life insurance premiums for coverage of more than \$50,000 are considered imputed income and are taxable.
- Supplemental Life Insurance for yourself.
- Dependent Life Insurance for your spouse and/or child(ren). Eligibility for children is up to the age of 26. Evidence of Insurability (EOI) is never required for child life insurance.

If you are newly enrolling in employee supplemental, spousal and/or child(ren) life insurance coverage, you must make your election via Resource ME.

For Current Eligible Employees

If you had previously declined supplemental coverage for yourself or your spouse and would like to elect coverage, or if you want to increase your coverage level during open enrollment, you will need to complete an Evidence of Insurability (EOI) form which is subject to approval.

For New Hires or Newly Benefits Eligible Employees

New hires/newly benefits eligible are not required to submit an Evidence of Insurability (EOI) form unless employer-paid and/or supplemental life insurance exceeds \$500,000. For new hires/newly benefits eligible enrolling in spousal supplemental life insurance, EOI is not required unless the supplemental insurance amount is greater than \$75,000.

Dental Benefits—Northern Light Employee Dental Plan

Northern Light Health offers two dental plan options through the Northern Light Employee Dental Plan administered by Northeast Delta Dental: Core and Plus. The dental plans provide benefits to help cover the cost of dental services and supplies. By using a contracted provider there is no balance billing, and they will file claims for you. If you use a non-contracted provider, you may have to submit claims and be balance billed for charges over the reasonable and customary amounts. You can search for a contracted provider on nedelta.com, as well as view your benefit and claims information and view/print plan ID numbers/temporary cards.

If you choose to enroll in dental benefits, you may choose from the following coverage levels:

- Employee only
- Employee and Spouse
- Employee and Child(ren)
- Full Family

You do not have to elect the same coverage level for dental coverage that you choose for medical and/or vision coverage.

HOW Program: Additional preventive benefits are available for members at a greater risk for oral diseases through Delta Dental’s HOW (Health through Oral Wellness) program. HOW is designed to help you achieve and maintain better oral wellness. Once you have taken a short online oral risk assessment and reviewed it with your dentist, you may be eligible for additional no-cost preventive benefits based on your risk. Visit the benefit page on https://mingle-portal.inforcloudsuite.com/EMH_PRD for details.

Dental Highlights*

| | Core | Plus |
|---|--|--|
| Annual Maximum Benefit | \$1,000/individual | \$2,000/individual |
| Annual Deductible | \$25/individual \$75/family | \$50/individual \$150/family |
| Diagnostic and Preventive Benefits <ul style="list-style-type: none"> • Cleaning and oral evaluations 2x per calendar year • Bitewing films (x-rays) 1x in 12 months • Fluoride 1x in 12 consecutive months through age 18 • Sealants 1x per tooth per lifetime through age 14 | 100% (no deductible) | |
| Basic Benefits <ul style="list-style-type: none"> • Fillings (white and silver) • Root canals • Extractions • Repair of complete and partial dentures (bridges) | 40% employee share (after deductible) | 20% employee share (after deductible) |
| Major Benefits <ul style="list-style-type: none"> • Crowns and onlays • Removable and fixed partial dentures (bridges) • Complete dentures • Implants <i>(covered under Plus only)</i> | 50% employee share (after deductible) | 50% employee share (after deductible) |
| Orthodontic Benefits <ul style="list-style-type: none"> • Correction of malposed (crooked) teeth • \$100 lifetime orthodontic deductible per individual • \$2,000 lifetime maximum benefit per individual | Not covered | 50% employee share (after deductible) |

*Refer to the Dental Plan Summary Plan Document for limits, exclusions, and complete coverage. This document is available under Required Notices on the Northern Light Health benefits page on Resource ME at https://mingle-portal.inforcloudsuite.com/EMH_PRD.

Please note: If you visit a provider that does not participate with Northeast Delta Dental, you may be balance billed for charges over the allowable amount.

Vision Plan Highlights* **VSP Choice Plan**

to enroll in vision benefits, you may choose from the following coverage levels:

- Employee only
- Employee and Child(ren)
- Employee and Spouse
- Full Family

You do not have to elect the same coverage level for vision coverage that you choose for medical and/or dental coverage.

| Benefit | Description | Copay | Frequency |
|---|---|-----------------------------------|---------------------------|
| Coverage with VSP and Affiliate Providers** | | | |
| WellVision Exam | <ul style="list-style-type: none"> • Focuses on your eyes and overall wellness | \$10 for exam | Every calendar year |
| Prescription Glasses/Contacts | | | |
| Frame | <ul style="list-style-type: none"> • \$200 allowance for a wide selection of frames • \$150 allowance for featured frame brands • 20% savings on the amount over your allowance | Combined with exam | Every other calendar year |
| Lenses | <ul style="list-style-type: none"> • Single vision, lined bifocal, and lined trifocal lenses • Polycarbonate lenses for dependent children | Combined with exam | Every calendar year |
| Lens Enhancement | <ul style="list-style-type: none"> • Standard progressive lenses • Premium progressive lenses • Custom progressive lenses • Average savings of 20-25% on other lens enhancements | \$55 \$95-\$105 \$150-\$175 | Every calendar year |
| Contacts (instead of glasses) | <ul style="list-style-type: none"> • Contact lens exam (fitting and evaluation) • \$175 allowance for contacts; copay does not apply | Up to \$60 | Every calendar year |
| Diabetic Eyecare Plus Program | <ul style="list-style-type: none"> • Services related to diabetic eye disease, glaucoma and age-related macular degeneration (AMD). Retinal screening for eligible members with diabetes. Limitations and coordination with medical coverage may apply. Ask your VSP provider for details. | \$20 | As needed |
| Extra Savings | Glasses and Sunglasses <ul style="list-style-type: none"> • Extra \$20 to spend on featured frame brands • 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your latest WellVision Exam | | |
| | Laser Vision Correction <ul style="list-style-type: none"> • Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities | | |

*Refer to the Vision Plan Summary Plan Document for limits, exclusions, and complete coverage. This document is available under Required Notices on the Northern Light Health Benefits page on Resource ME — https://mingle-portal.inforcloudsuite.com/EMH_PRD.

**Coverage with a retail chain affiliate may be different. Once your benefit is effective, visit vsp.com for details.

Coverage with other providers

Visit vsp.com for details if you plan to see a provider other than a VSP provider.

Life Insurance Highlights

| Employee Basic Life (paid for by Northern Light Health) | |
|---|--|
| Coverage | 1½ times your base annual salary (minimum \$25,000) |
| Maximum coverage without approved EOI* | \$500,000; coverage is rounded up to a multiple of \$1,000 |
| Maximum coverage with approved EOI* | \$1,000,000 |
| Employee Supplemental Life | |
| Coverage | 1, 2, 3, 4 or 5 times your base annual salary (minimum \$25,000) |
| Maximum coverage without approved EOI* | \$500,000; coverage is rounded up to a multiple of \$1,000 |
| Maximum coverage with approved EOI* | \$1,000,000 (maximum when added to basic life insurance is \$2,000,000) |
| Dependent Life for your Spouse | |
| Coverage | \$5,000 to \$100,000 in increments of \$5,000 (amount cannot exceed total combined basic and supplemental employee life) |
| Maximum coverage without approved EOI* | \$75,000 |
| Maximum coverage with approved EOI* | \$100,000 |
| Dependent Life for your Child(ren) | |
| Coverage | \$5,000 or \$10,000 (available until child has attained age 26) |

*EOI information in this chart is applicable to new hires or newly benefit eligible employees. Current employees are subject to EOI when newly enrolling in or increasing coverage during open enrollment.

Please note: Spousal life insurance cannot exceed employee's total life insurance (basic and supplemental). Double coverage is not allowed for employed spouses or dependents.

If you are required to complete an **Evidence of Insurability (EOI)** form for yourself or your spouse, you will need to submit the form directly to Lincoln Financial by mail or secure fax (information is on the form) or online at mylibertyconnection.com. On this form, you will need to provide personal information and then answer medical questions. If you are accessing the Lincoln Financial website for the first time, you will need to click on the "new user" link to register. You will be required to provide our company code **EMHS006** in order to register. The EOI form and instructions for completing EOI online can be found on the benefits page on Resource ME at <https://erc.enwisen.com/ASI/Page.aspx?code=14387f76&orgid=E4D94BAA-ABF6-4D8F-96D4-EF3CE7A2FC00&header=on&branding=off>.

Once you submit the form, the insurance carrier may require you to provide even more medical information through a physical exam, paramedical exam, or an attending physician report. You will be notified by the insurance carrier if this applies to you. Lincoln Financial will review your EOI application and will notify you by mail indicating whether your request for new or additional life insurance has been approved. Please note that your request for coverage is not effective until the EOI is approved. Coverage will be in effect as of the first of the month following the approval. Remember to keep confirmation as proof of your submission.

Accidental Death and Dismemberment (AD&D)

AD&D covers death by accidental means (rather than natural causes) and dismemberment, which includes loss of the use of certain body parts (such as limbs or eyesight). Northern Light Health provides all regular full-time and regular part-time employees with basic AD&D coverage that matches the basic life insurance benefit. For example, a full-time employee with a base annual pay of \$50,000 would be eligible for a life insurance benefit of \$75,000, plus \$75,000 AD&D coverage for a total benefit of \$150,000.

Short-term Disability (STD) Coverage

NOTE: Collective Bargaining Agreements may contain provisions that either supersede or are supplemental to the information regarding short-term and long-term disability. Directors, associate vice presidents, vice presidents, executives, and certain providers are communicated to directly about their short-term disability coverage.

Northern Light Health provides Short-term Disability (STD) coverage to all benefit eligible employees through Lincoln Financial at no cost for non work-related injury or disability. If you are unable to work due to an illness or injury, short-term disability may provide you with a portion of your income while you are out. STD benefits will not be paid if you are receiving Workers' Compensation benefits. Recovering from childbirth can be considered a disability.

Your enrollment in this benefit is automatic, so you do not need to sign up.

Short-term Disability Highlights

| | Managers and Staff |
|---------------------------------------|---|
| Benefit Coverage | 60% of your base weekly wage* |
| Maximum Benefit | \$2,500 per week |
| Paid Leave Supplement | You may choose to use available accrued paid time off (PTO) to supplement up to 100% of your pre-disability base salary by contacting the HR Service Center and opting in to supplement your STD with PTO |
| Benefits Begin | Fifteenth calendar day of disability (paid leave benefits must be used for the first 14 calendar days of your disability) |
| Benefits Duration | Up to 24 weeks |
| Evidence of Insurability (EOI) | EOI and pre-existing conditions do not apply |

*Base weekly wage excludes differentials, and other additional income.

Long-term Disability Highlights (Full-Time Benefit Eligible Only)

| | |
|-------------------------|---|
| Benefits Begin | 180 days after disability begins (lines up with maximum duration of an STD claim) |
| Benefits Payable | 60% of monthly basic weekly earnings up to age 65 |
| Maximum Benefit | <ul style="list-style-type: none"> ▪ \$15,000 per month for managers and staff ▪ \$20,000 per month for medical group |

Please be aware that your long-term disability benefits will be reduced by any income you are eligible to receive while receiving LTD benefits, including Social Security.



Northern Light Health Retirement Plans

At Northern Light Health, we are committed to your financial well-being in helping you prepare for your retirement. We offer all employees the opportunity to participate in a retirement savings plan, managed by Fidelity Investments.

The member organization you are employed by determines whether you will be eligible to participate in the 403(b) or the 401(k) plan. The plans offer the same plan features and investment options.

Fidelity Investments will mail an enrollment guide to your home a few weeks after your hire date. The guide includes an overview of the Plan, information on the investment options, and instructions for setting up online access to your account.

The Plan has an automatic enrollment feature. This means you will be automatically enrolled with a contribution rate of three percent of your eligible earnings. Unless you make an alternate contribution election, your contributions will be in an age appropriate Target Date Fund.

The Plan provides the option to make Roth (after-tax) contributions to your account. For more information about the Roth option, call Fidelity at 1-800-343-0860.

Once you have met the eligibility requirements, the company will make matching and/or discretionary contributions to your retirement account. Company contributions are vested once you have attained three years of service as defined under the Plan.

If you have retirement savings in a former employer plan, you can rollover these accounts at any time. Please contact Fidelity at 1-800-343-0860 for help with rollovers.

529 College Savings Plan

A 529 College Savings Plan is designed to help you save for future college costs. Savings can be used for tuition, books, and other qualified education-related expenses. For more information on opening a 529 Plan please visit www.nextgenforme.com.

The Harold Alfond Foundation provides grants for Maine residents. There is a \$500 grant provided for every baby born a Maine resident. There are matching grants and other financial incentives for contributing to a 529 Account through NextGen.

Non-Qualified Deferred Compensation Plans

Northern Light Health offers certain senior clinical, management, and executive employees additional retirement savings opportunities through 457(b) and 409(a) deferred compensation plans. You will be notified if you are eligible to participate in one of these plans. Please contact the HR Service Center at (207) 973-4000 with any questions regarding these plans.



Benefits for Balancing Your Work and Life

Juggling the demands of your professional life and personal life can be difficult. Northern Light Health provides our employees with several programs and services to help you better balance those demands.

Workforce - EAP

Your mental and emotional wellness is as important as your physical well-being, which is why Northern Light Health has Work Force Employee Assistance Program (EAP) to provide high-quality services for you and your family. Work Force offers confidential resources including face-to-face and web-based confidential assessment and referral services for benefit eligible employees and their household members to help you with challenges you may be facing. Problems are a part of everyday life, but when they become a distraction, it may be time to talk with a Work Force counselor. They can help identify and address private issues or difficulties and can help an employee or household member plan strategies for managing them. Your first visit and up to two follow-up visits will be paid as appropriate for the same or related problem.

Your EAP is available 24 hours a day, seven days a week by calling 1-800-769-9819 or visiting www.workforceeap.com. In addition to face-to-face counseling, enhanced online education resources are available with registration using your member organization's company code.

Company codes can be located in the EAP section of the Northern Light Health benefits page on [Resource ME](#).

Leaves of Absence

Approved leaves of absence from work come in various forms. All leaves are administered through the Human Resources (HR) Service Center. Statutory leaves (those mandated by federal and state law) are approved through the HR Service Center and non-statutory leaves are approved by your department head in conjunction with your local HR office.

Information about statutory leaves is posted on the employee required notice bulletin board located at all Northern Light Health locations. Information on the different types of leaves, including the application process and employee responsibilities, can be found on the applicable system HR policies located on the Northern Light Health Policy Gateway (emhs.ellucid.com) and by visiting the Northern Light Health Leaves & Time Off landing page on [Resource ME](#).

Paid Time Off Program (PTO)

We all work hard and need our time off to relax, refresh and sometimes recover from illness. Northern Light Health offers market-based Paid Time Off (PTO) plans that are standard across our system and are inclusive of paid vacation, holidays and sick leave. Employees in a benefit eligible status are eligible to receive PTO benefits. PTO is accrued on a biweekly 80 hour pay cycle basis (prorated based upon your FTE). Effective January 2021 all benefit ineligible employees are eligible to also accrue PTO, up to 40 hours annually.

Northern Light Virtual Walk-In Care

- Is easy to access by anyone through MyNorthernLigthHealth.com, our patient portal, or our mobile app
- Provides an easy alternative for care while patients are on the go
- Will be staffed by walk-in care providers throughout the Northern Light Health system
- Is fully integrated with our electronic health record, meaning walk-in care providers can see care history for our established patients to help guide their care

NOTE: Collective Bargaining Agreements may contain provisions that either supersede or are supplemental to the information in this Benefits Guide. Managers with staff coverage by a Collective Bargaining Agreement should refer to the provisions of the applicable Agreement.

Staff and Managers PTO Benefit (based on one Full Time Employee)

| | | PTO Accruals | | |
|---|----------------------------|----------------|--------------------|-----------------------|
| Benefit Service Years | Benefit Service Pay Cycles | Hours Per Year | 8 Hour Annual Days | Maximum Accrued Hours |
| PTO 1: Clerical, Service, and Technical Employees | | | | |
| 0 to 5 | 0 to 129 | 208 | 26 | 400 |
| 5 to 10 | 130 to 259 | 224 | 28 | 400 |
| 10 to 15 | 260 to 389 | 240 | 30 | 400 |
| 15 to 20 | 390 to 519 | 256 | 32 | 400 |
| 20+ | 520+ | 272 | 34 | 400 |
| PTO 2: Exempt and Non-Exempt Professionals and Supervisors | | | | |
| 0 to 5 | 0 to 129 | 224 | 28 | 400 |
| 5 to 10 | 130 to 259 | 240 | 30 | 400 |
| 10 to 15 | 260 to 389 | 256 | 32 | 400 |
| 15 to 20 | 390 to 519 | 272 | 34 | 400 |
| 20+ | 520+ | 288 | 36 | 400 |
| PTO 3: Managers Below Directors and Senior Professionals (typically requiring a Doctorate) | | | | |
| 0 to 5 | 0 to 129 | 240 | 30 | 400 |
| 5 to 10 | 130 to 259 | 256 | 32 | 400 |
| 10 to 15 | 260 to 389 | 272 | 34 | 400 |
| 15 to 20 | 390 to 519 | 288 | 36 | 400 |
| 20+ | 520+ | 304 | 38 | 400 |

Providers

Many providers (Physicians, Nurse Practitioners, Physician Assistants, Certified Nurse Midwives and Certified Registered Nurse Anesthetists) participate in an allotment program that is inclusive of Continuing Medical Education (CMEs) days. The annual benefit allotment is refreshed on the first Sunday of the calendar year. Up to 40 hours of unused PTO from prior year allotment can be carried over and hours in excess of 40 are forfeited. Any remaining PTO at time of termination or move to benefit eligibility is forfeited.

Directors and Executives

Leaders at the Director level and above participate in an allotment (“use it or lose it”) plan. The annual benefit allotment is replaced on the first Sunday of the calendar year. PTO not used by the end of the year or when employment ends is forfeited.

Other Benefits

For information about other benefits such as tuition reimbursement, jury and witness duty, etc., please visit the Northern Light Health HR Info, Policies, & Contacts landing page on Resource ME (<https://erc.enwisen.com/ASI/Page.aspx?code=61bd473a&orgid=E4D94BAA-ABF6-4D8F-96D4-EF3CE7A2FC00&header=on&branding=off>) or contact the HR Service Center.*

*Not all benefits are available at all Northern Light Health locations.

The information contained in this document is for illustrative purposes only and is not intended to change the Summary Plan Descriptions (SPD). While care has been used in preparing this information, all data is governed by the provisions of the applicable SPD. In the event of a conflict between the language in this document and the SPD, the SPD will control.



Northern Light Health

Acadia Hospital

AR Gould Hospital

Beacon Health

Blue Hill Hospital

CA Dean Hospital

Eastern Maine Medical Center

Home Care & Hospice

Inland Hospital

Maine Coast Hospital

Mayo Hospital

Mercy Hospital

Northern Light Health Foundation

Northern Light Laboratory

Northern Light Medical Transport & Emergency Care

Northern Light Pharmacy

Sebasticook Valley Hospital

Work Force

Work Health

northernlighthealth.org