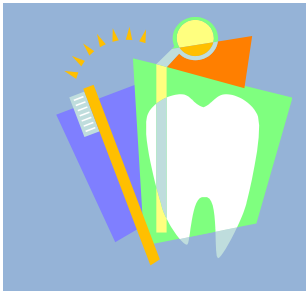




MERCY EMPLOYEE BENEFITS GUIDE



Plan Year | 2019



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Each year, Mercy conducts an in-depth analysis of its employee benefits. This analysis includes not only a review of plan performance but benchmarking against other healthcare and Iowa employers. Through this analysis, we strive to provide a comprehensive and affordable benefit package to our employees. We are happy to provide information about benefits for the 2019 plan year and encourage all participants to assess their health status and benefit needs, create a plan to achieve health and wellness goals and commit to a healthy lifestyle. Annual enrollment is your opportunity to review all the benefits available to you and choose the ones that best fit your life for the upcoming year. Read this guide for details about your options and how to enroll. Additional plan details can be found on Mercy Central.

Mercy’s benefit program is just one element of the total compensation package designed to ensure the welfare of our employees and their loved ones as they continue to contribute to the organization’s success. Mercy recognizes that everyone’s needs are different. By offering a varied benefit package, we hope to meet each employees’ needs.

Enrollment for most benefits for will be online in the Kronos Workforce Central System. Enrollment in the 401(k) is completed directly with Vanguard. Please contact Human Resources with any questions.

Enrollment

- Learn about your benefits.**
 - Read this benefit guide.
 - Attend new hire orientation where benefits will be explained in detail
 - Contact Human Resources with questions.

- Enroll in benefits in Kronos**
 - (<https://mercyic.kronos.net/wfc/navigator/logon>) – **Must do within 30 days of your hire date**

- Complete Wellmark Primary Care Provider Selection Form**
 - Only if enrolling in Medical Coverage
 - Designate a physician for each family member and return to Human Resources
 - Wellmark cannot release your ID card without a physician designation on file

- Provide documentation for all dependents enrolled in medical, dental and/or vision.**
 - **Must do within 30 days of your date of hire**
 - **Spouse**
 - Copy of marriage license or common law affidavit
and
 - Current tax return, mortgage statement or bank statement
 - **Children**
 - Copy of birth certificate or court ordered documentation

- Register on Vanguard**
 - www.Vanguard.com/retirementplans
 - Group #099032
 - Change/elect contribution
 - If no election is made, 3% contribution will start about 30 days after date of hire
 - Update beneficiary information

- Register with Wageworks only if enrolling in the HSA or FSA**
 - myspendingaccount.wageworks.com
 - Wait to register until after first benefit payroll deduction

Medical

The following summary provides general information about the dental benefits offered through Mercy's medical plan. For more details information on each plan, including Privacy Practices and Summary Plan Descriptions (SPD), please refer to Mercy Central or Human Resources.

Health Savings Account (HSA) Program

Plan Features	Mercy PHO Domestic Network	Blue Advantage Provider Network	Out-of-Network
Annual Deductible (per person/per family)	\$2,700/\$5,000	\$3,500/\$7,000	Emergency Coverage Only
Annual Out-of-Pocket Maximum (per person/per family)	\$4,000/\$8,000	\$5,500/\$11,500	Emergency Coverage Only
Office Visits (Employee Pays)	15% after deductible	35% after deductible	Emergency Coverage Only
Emergency Room (Employee Pays)	15% after deductible		Emergency Coverage Only
Lab Tests/ Radiology Exams (technical & professional component) (Employee Pays)	15% after deductible	35% after deductible	Emergency Coverage Only
Hospital Stays - inpatient and outpatient (Employee Pays)	15% after deductible	35% after deductible	Emergency Coverage Only
Durable Medical Supplies (Employee Pays)	15% after deductible	35% after deductible	Emergency Coverage Only
Infertility Treatment (Employee Pays)	15% after deductible \$15,000 lifetime limit for artificial insemination, IVF, GIFT, ZIFT, and other transfer procedures The following are not covered: collection or purchase of donor semen or eggs, surrogate services unless acting surrogate is a covered member under Wellmark's plan, freezing of sperm, eggs or embryos, or sterilization reversal.		No Coverage
Preventive Care Services * Physical exam (one per calendar year; includes separate gynecological exam) * Immunizations * X-ray/labs * Mammogram (one baseline bw 35-39; one per benefit period 40+) * Pap smears * Prostate screening * Well-child care (to age 7) * Smoking cessation counseling * Routine vision exam	No Member cost share	No Member cost share	No Coverage

Employee Monthly Cost

	Full Time	Part Time
Single Coverage	\$60.32	\$168.88
Family Coverage	\$150.79	\$422.21

HSA Program Prescription Drug Coverage

Prescriptions filled at an in-network pharmacy will first apply towards deductible. This means participants will be responsible for 100% of the cost of the prescription until the deductible is met. After deductible is met, the plan will pay 85% of the cost of the prescription until the out of pocket maximum is reached. If a participant reaches the out of pocket maximum in the year, prescriptions will be covered at 100% by the plan. Wellmark Formulary: Blue Rx Value Plus

- 90-day Maintenance medications will need to be filled through CVS pharmacies (which include Target pharmacies) or through CVS mail order.
- Specialty medications will be required to be filled through CVS Caremark specialty which can be mailed to a member's home, provider's office, or in some cases, also picked up at a CVS store.

Healthcare reform requirements mandate employers to cover contraceptives beginning in 2014 for some employers and 2015 for other employers. Based on our religious affiliation Mercy will continue to defer coverage.

Health Savings Account

A Health Savings Account (HSA) is an account that offers a tax-advantaged way for consumers to pay for health care expenses. Paired with a High Deductible Health Plan, HSAs help consumers pay for current health expenses and save for future qualified medical and health expenses in retirement.

Who is eligible for an HSA?

Anyone who is:

- Covered by a High Deductible Health Plan (HDHP)
- Not covered under another medical health plan
- Not enrolled in Medicare benefits (Part A or B)
- Not eligible to be claimed on another person's tax return
- You cannot establish a HSA if your spouse has a health care flexible spending account (FSA) or health reimbursement account.



Contributions

To help fund your HSA, Mercy will contribute to your account on a pre-tax basis. The employer contribution is a dollar-for-dollar match and is based on elections made during annual enrollment. This means to receive the full amounts listed below, the employee will need to also contribute that amount. For example, a full-time employee who enrolls in Family coverage that contributes \$1,000/year will also receive \$1,000 upfront in January from Mercy. If this same employee with Family coverage contributes \$500/year, then they would receive \$500 upfront in January from Mercy.

Max Employer Matching Contribution

	Full Time	Part Time
Single Coverage	\$750	\$450
Family Coverage	\$1,000	\$600

Funding your HSA

In addition to Mercy's contribution, you can contribute funds to your HSA through a pre-tax payroll deduction. This means the money you contribute reduces your taxable salary. The savings you receive from paying lower premiums can fund your contributions. Contribution amounts can be adjusted at any time throughout the year.

2019 HSA Annual Limits (employee and employer combined)

Single Plan = \$3500

Family Plan = \$7000

Age 55 and over - \$1000 catch-up per individual allowed

Flexible Spending Accounts

Flexible Spending Accounts (FSA) allow employees to set aside funds on a pre-tax basis to reimburse themselves for out-of-pocket dependent care or health care expenses.

There are three types of FSAs:

1. The **Healthcare FSA** is used to pay for eligible out-of-pocket medical expenses (available to those not enrolled in HSA)
2. The **Dependent Care FSA** is used to pay for eligible child or elder care expenses
3. The **Limited Purpose FSA** is only available to employees enrolled in a Health Savings Accounts (HSA) and funds can only be used for dental and vision expenses.

Healthcare FSA

By participating in the healthcare FSA, you will be reimbursed for out-of-pocket medical, dental, vision and hearing expenses, such as copayments and deductible amounts. The maximum contribution that can be made is \$2,650. If you enroll in the health care FSA, you are not eligible to participate in an HSA, either individually or through your spouse.

Dependent Care FSA

A Dependent Care Flexible Spending Account is an employee benefit that lets you use pre-tax money to pay for child or elder care expenses that you incur so you and your spouse can work or look for work, or your spouse can attend school full-time. The maximum contribution is \$5,000 per household (\$2,500 if you and your spouse file separate tax returns).

A dependent care FSA can save you money if one of these situations apply to you:

- You have dependent children under age 13 who attend daycare, before/after-school care or summer day camp.
- You provide care for a person of any age whom you claim as a dependent on your federal income tax return and who is mentally or physically disabled.

Limited-Purpose FSA

Available only to employees who have enrolled in the HSA Program health plan, the limited-purpose FSA complements an HSA and allows for reimbursement of dental and vision expenses while preserving eligibility for the HSA. Employees enrolled in the HSA program are not eligible for a traditional health care FSA. The maximum annual contribution that can be made is \$2,650.

Dental Plans



Two options to choose from providing coverage towards cleanings, endodontic, periodontic, and orthodontic services. Consider your typical dental usage when deciding which plan is best for you and your family.

Mercy's dental plan provides CheckUp Plus. CheckUp Plus encourages you to use preventive services while allowing you to get the most out of your annual benefit maximum. That's because, diagnostic and preventive dental services do not count toward your annual benefit maximum.

The following summary provides general information about the dental benefits offered through Mercy's two dental plans. For more details information on each plan, including Privacy Practices and Summary Plan Descriptions (SPD), please refer to Mercy Central or Human Resources.

Dental Insurance	OPTION ONE		OPTION TWO	
www.deltadentalia.com Network: Delta Premier	DEDUCTIBLE	COINSURANCE	DEDUCTIBLE	COINSURANCE
BENEFIT CATEGORIES	\$50/\$150		\$75/\$200	
Check Ups and Teeth Cleaning 2 times per year	Waived	0%	Waived	20%
Cavity Repair and Tooth Extractions (Routine and Restorative Services)	Yes	20%	Yes	30%
Root Canals (Endodontic Services Includes)	Yes	50%	Yes	50%
Gum and Bone Diseases (Periodontal Services Includes)	Yes	50%	Yes	50%
High Cost Restorations (Cast Restorations Includes)	Yes	50%	Yes	50%
Dentures and Bridges (Prosthetics - replacement of missing teeth)	Yes	50%	Yes	50%
Straighter Teeth (Orthodontics) (\$1,000 lifetime maximum per participant)	Yes	50%	No Orthodontics	
Overall Maximum:	(\$1,000 per participant annual maximum)		(\$750 per participant annual maximum)	

	OPTION ONE MONTHLY COST		OPTION 2 MONTHLY COST	
	Full Time	Part Time	Full Time	Part Time
Family	\$39.24	\$53.70	\$12.32	\$25.74
Single	\$12.06	\$16.56	\$4.00	\$8.20

Vision Benefits

Two vision plan options are available to eligible Mercy employees and their dependents.



- [Eye Physicians & Surgeons Vision](#) Plan offers vision services via the Eye Physicians and Surgeons clinic located at 2629 Northgate Drive in Iowa City.
- [The Avesis Vision Plan](#) offers discounts for materials (no eye exam) through participating Avesis providers.

Eye Physicians & Surgeons Vision Plan

This plan is exclusive to Eye Physicians and Surgeons, LLP and Iowa City Optical and you will be examined by a board-certified ophthalmologist. Plan features are as follows:

- Provider of Service – Board Certified Ophthalmologists on Mercy staff
- Exam Cost to Patient – None
- Exam Type – Refraction, slit lamp exam, dilation when needed
- Exam Frequency – One exam every 12 months
- Lenses, frames & certain contact brands* – 20% discount (no limit)
- Materials & Supplies – 20% discount at Iowa City Optical (no limit)
- Frame Frequency – No limit

Coverage Level	Monthly Cost
Employee	\$7.50 per month
Employee + 1	\$14.00 per month
Employee + 2	\$20.50 per month

Add \$6.50 per month for each additional covered dependent

Avesis Vision Plan – materials only (no exam coverage)

BENEFITS	IN NETWORK	OUT-OF-NETWORK
Spectacle Lenses (pair) (Once every 12 Consecutive Months)		
Standard Single Vision	Covered In Full	Reimbursed up to \$25.00*
Standard Bifocal	Covered In Full	Reimbursed up to \$40.00*
Standard Trifocal	Covered In Full	Reimbursed up to \$50.00*
Standard Lenticular	Covered In Full	Reimbursed up to \$80.00*
Lens Options (tints, coatings, etc.)	Up to 20% off on all lens options (except Wal-Mart)	Reimbursed up to \$0.00
Frame (Once every 24 Consecutive Months)	Up to a \$50.00 Wholesale allowance (approx. retail of \$100.00 - \$150.00.	Reimbursed up to \$45.00*
Contact Lenses (Once every 12 Consecutive Months) IN LIEU OF SPECTACLE LENSES AND FRAMES		
Elective	\$130 for materials and services	Reimbursed up to \$130.00*
Medically Necessary	Covered in full	Reimbursed up to \$250.00*

Coverage Level	Monthly Cost
Employee Only	\$9.04
Employee + Spouse	\$18.12
Employee + Child(ren)	\$16.24
Employee + Family	\$22.71

Long Term Disability

Mercy offers a Long Term Disability insurance plan through Reliance Standard which provides a monthly income replacement benefit in the event of an accident or extended illness. Full-time employees with position control of 40 hours or more per pay period are eligible for the following options:

	Benefit	Cost	Maximum Monthly Benefit
Core LTD	60% of base annual salary*	Company Paid	up to \$10,000 per month
Buy Up LTD	66.67% of base annual salary*	Rate based on age and salary	up to \$15,000 per month

*Base annual salary does not include bonuses, differential or overtime pay.

Short Term Disability

What would you do if you became disabled and couldn't work? Employees who elect short term disability coverage can rest easy knowing that if they become disabled, they will have a way to pay their bills.

- Employee paid benefit that allows you to purchase coverage of 60% of replaceable basic monthly income up to \$1,500 per week
- 14 day elimination period, payable up to a maximum benefit period of 13 weeks (depending on illness)
- Cost of coverage is based on age and salary. When enrolling, Kronos will calculate cost automatically.

Short Term Disability, Life Buy-Up and Long Term Disability Buy-Up elections are guaranteed issue for new hires or newly eligible employees. This means you can elect this coverage, no questions asked! If you choose to not enroll in these plans as a new hire, future elections are subject to approval.

24-Hour Travel Assistance Services

Through your group coverage with Reliance Standard, you automatically receive travel assistance services provided by On Call.

- Pre-Trip Assistance
- Emergency Medical Transportation
- Passport/Visa Requirements

800-456-3893 – within the US

603- 328-1966 - Worldwide

Bereavement Support Services

Bereavement Support Services provide confidential and professional support services to all covered employees and family members to cope with the loss of a loved one—at no extra cost.

- Grief Counseling
- Legal and Financial Services

855-RSL-HELP

Basic Life Insurance and AD&D

Mercy offers group life insurance through Reliance Standard to employees with position control of 40 hours or more per pay period. Accidental Death and Dismemberment (AD&D) provides additional benefits when a death is the result of an accident. Basic and optional coverage amounts are doubled. There are also benefits payable for dismemberment that results from bodily injury. AD&D premiums are also paid by Mercy for basic coverage amounts.

Benefit	Volume	Cost	Plan Maximum
Core Life and AD&D Insurance	1 times your Basic Annual Earnings	Company Paid	\$300,000
Buy Up 1x Life and AD&D	1 times your Basic Annual Earnings in addition to company provided 1 times	Based on age and coverage amount	\$750,000
Buy Up 2x Life and AD&D	2 times your Basic Annual Earnings in addition to company provided 1 times	Based on age and coverage amount	\$750,000

Dependent Life Insurance

Eligible employees can elect life insurance for their spouse as well as children.

Supplemental Spouse Life

- Increments of \$10,000 up to \$250,000, not to exceed 50% of employee life coverage
- Cost based on age and amount elected
- New enrollments and increases to coverage are subject to approval by Reliance Standard.

Supplemental Child Life

- \$10,000
- \$2 per month
- New enrollments are subject to approval by Reliance Standard.

Accident Insurance – only offered once a year during open enrollment

- Helps minimize the financial impact if you experience an accident.
- Receive a cash benefit, after your claim is approved, for injuries or treatments.
- Use the benefit however you see fit.

Covered Benefits

- Accidental Death and Dismemberment
- Dislocations (hip, ankle, knee, elbow, finger(s))
- Fractures (hip, skull, leg, pelvis, rib)
- Lacerations
- Burns

See policy on Mercy Central for all covered conditions and additional details



Critical Illness Insurance - only offered once a year during open enrollment

Focus on your health, not your wallet, if you're diagnosed with a serious illness.

- Pays a lump sum benefit, after your claim is approved, for a variety of covered conditions.
- Pays a Wellness Screening Benefit: \$50 per calendar year for employee and spouse.


Covered Benefits

- Heart Attack
- Stroke
- Paralysis
- Cancer

See policy on Mercy Central for all covered conditions and additional details

Guarantee Issue

- Employee - \$25,000
- Spouse - \$25,000
- Child - \$12,500



Employees can elect up to the guarantee issue amount without health questionnaire!

401(k) Retirement Plan

The Mercy Hospital, Iowa City, Iowa, 401(k) Retirement Plan is an easy way to save for your future.

Excluded Employees	Age is less than 18 Employees with bi-weekly position control of less than 40 Leased employees Temporary employees
Employer Contribution	Mercy makes a discretionary contribution into eligible employees' accounts.
Employer Match	3.5% maximum 100% of first 1% 50% of next 5% An employee must contribute 6% to receive the maximum Mercy Match
Vesting	<u>3.5% Employer Match:</u> 1 year = 100% <u>3.5% Employer Contribution:</u> 1 year = 0%; 2 years = 20%; 3 years = 40%; 4 years = 60%; 5 years = 80%; 6 years = 100%
Automatic Enrollment	All employees at 6% (employees can change at any time) Automatic Enrollment begins 60 days after start date unless you direct Vanguard sooner. See your plan booklet for more details.
Automatic Increases	1% per year up to 15% (employees can opt out at any time)

Who is Eligible?

Benefit eligibility is determined by your employment status. All employees with a position control hours of at least 40 hours a pay period are eligible for all benefits offered through Mercy's benefits program. The chart below highlights available benefits and eligibility requirements.

Who can be covered?

Some of the benefits described in this guide offer coverage for eligible dependents. Eligible dependents are as follows.

- Your husband or wife as the result of a marriage that is legally recognized in Iowa.
- Your child(ren) up to age 26 including a natural child, a legally adopted child or child placed for adoption, a stepchild, a natural child for whom coverage is court ordered or a child for whom you have legal guardianship.
- Your unmarried child(ren) of any age who is totally and permanently disabled, physically or mentally. The disability must have existed before the child was age 26. In addition, the child must have had creditable coverage without a break of 63 days or more since turning age 26.

If you elect coverage for your dependents, you must provide all required dependent information (i.e., name, date of birth and Social Security number, etc.) when you enroll. Further, as part of the enrollment process, Mercy Iowa City requires proof of dependent eligibility for any newly enrolled dependents. If you are enrolling a spouse and/or dependent child(ren) for whom you have not previously provided documentation, you will be notified and required to provide supporting documentation.

Dependent Eligibility Verification

Employees who have a spouse or child enrolled in coverage through Mercy Hospital are asked to review the definition of an eligible dependent. If your dependents no longer meet this definition of an eligible dependent, please remove the dependent during open enrollment. If in the future it's discovered that ineligible dependents are enrolled in Mercy's plans, the employee may have to pay penalties and back claims for the ineligible dependent.

Definitions of an eligible dependent:

- **Spouse:** A spouse is defined as your husband or wife as the result of a marriage that is legally recognized in Iowa.
- **Children:** A child is eligible under the plan member's coverage if the child has any of the following relationships to the plan member or an enrolled spouse:
 - A natural child.
 - Legally adopted or placed for adoption (that is, you assume a legal obligation to provide full or partial support and intend to adopt the child).
 - A stepchild.
 - A natural child a court orders to be covered.

In addition, a child must be one of the following:

- Under age 26.
- An unmarried child who is totally and permanently disabled, physically or mentally. The disability must have existed before the child turned age 26. In addition, the child must have had creditable coverage without a break of 63 days or more since turning age 26.



Employee Action:

Employees who add dependents to coverage for the first time must provide proper documentation for each dependent. [Click here for a list of documents.](#)



Mid-Year Benefit Changes

Certain qualifying events (for example: birth or adoption of a child, marriage, divorce, loss of coverage, etc.) may provide an opportunity to add or change benefit elections outside of open enrollment. Please refer to the applicable plan description on Mercy Central for a complete listing of qualifying events. If a qualifying event occurs, all enrollment materials must be completed and submitted to Human Resources within 30 days of the event in order for coverage to be changed. Changes must be made within 60 days if due to the loss of coverage through Medicaid/CHIP (Children’s Health Insurance Program). Failure to make a change within 30 days of the event will result in continuation of current benefit elections until open enrollment or another qualifying event, whichever occurs first.

Additional Benefits

In addition to the Mercy’s core benefits, Mercy’s benefit program includes a variety of other benefits. Many of these benefits are offered at no cost to you. A comprehensive list follows.

General Benefit Summary



Medical, Dental, Life, Disability:

- Health & Dental Insurance²
- Wellness Program and annual Health Risk Assessment²
- Flexible Spending Accounts, Medical and Dependent Care
- Long Term Disability & Life Insurance²
- Voluntary Insurance (Critical Illness & Accident coverage, Short Term Disability, & Vision plans)



Retirement/financial benefits:

- 401 (k) plan - employer match²
- Tax-Deferred Annuities²
- Temporary Assistance Program
- Pay differentials
- 529 college savings plan



Health Related Benefits:

- 20% discount on Mercy services
- Flu vaccinations³ and Hepatitis B vaccine⁵
- New hire physical screenings⁴



Health Related Benefits:

- 20% discount on Mercy services
- Flu vaccinations³ and Hepatitis B vaccine⁵
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Paid Time Off and Sick Leave¹:

- Bereavement Leave
- Jury Duty Pay



Child care:

- Dependent Care FSA
- Adoption assistance



Education:

- Tuition assistance
- CEU Programs
- Discounts at partner schools



Miscellaneous:

- Free convenient parking
- Service Recognition Awards
- Notary service
- PHO Value Plus Program
- Vizient Employee Discount
- Workers' compensation
- Employee assistance program
- Cafeteria discount



Important Benefit Notices

As required under federal law, Mercy Hospital is providing you with a number of important notices related to your health plan benefits. Click [here](#) to view these forms.

- Women's Health and Cancer Rights Act
- HIPAA Special Enrollment Right
- Children's Health Insurance Plan (CHIP)
- Medicare Part D Creditable Coverage
- Newborns' & Mothers' Health Protection Act
- Notice Regarding Coverage for Contraception
- Exchange Notice

2019 Summary Plan Descriptions (SPD) will be posted as soon as available. To view 2018 SPDs, click [here](#).

Does this Coverage Provide the Minimum Essential Coverage?

The Affordable Care Act requires most people to have health care coverage that qualifies as “minimum essential coverage.” **These plans or policies provide the minimum essential coverage.**

Does the Coverage Meet the Minimum Value Standard?

The Affordable Care Act establishes a minimum value standard of benefits of a health plan. The minimum value standard is 60% (actuarial value).

This health coverage does meet the minimum value standard for the benefits it provides.

Mercy values our employees, and because we care about you and your health, we are committed to providing health benefits that are both affordable and substantial. That is why we provide benefits through Wellmark Blue Cross Blue Shield which meet affordability and minimum value standards under the Affordable Care Act (ACA).

Because our coverage is considered to be affordable and to provide minimum value under the ACA, you will not be eligible to receive a premium tax credit or cost-sharing reduction subsidy if you chose to waive health benefits in order to enroll in an individual plan through the Health Insurance Marketplace. If you were to enroll and claim a subsidy, you would have to repay that subsidy to the federal government at the end of the year.

You may print these notices yourself, or may request a free, hard copy of the notices by contacting Human Resources at 319-339-3937. You and your eligible dependents are encouraged to read the notices carefully as they contain important information about your benefits.

About This Guide

This guide provides a summary of the benefit programs available to Mercy employees for the 2019 plan year. The information provided in this guide, as well as other available materials, should be carefully reviewed before making new benefit elections for 2019.

Many important factors are taken into consideration when designing benefit plans for our employees. The organizational strategy focuses on providing comprehensive coverage to help keep employees and their families healthy; maintaining plans that are affordable and sustainable for all participants; offering variety in plan designs to best meet the diverse needs of our employees; and continuing to operate compliant, responsible benefit programs in an increasingly complex regulatory and economic environment.

Note: This resource guide is not intended to be fully comprehensive and should be used in conjunction with other benefit materials including but not limited to plan summaries and certificates of coverage (available on Mercy Central or by contacting Human Resources). If there is any discrepancy between this guide or any oral description of the plan(s) and the wording of the corresponding plan document, the plan document will govern.