

You care for others, now

TAKE CARE OF

YOU



Choose benefits for the things that matter most





Eligibility



Eligibility- Dependents



Eligible dependents

Legal/common-law spouse

Same/opposite-sex domestic partner

Children up to 26th birthday

Child of any age who was disabled before age 26

DEPENDENT VERIFICATION

If you enroll a dependent in medical, dental or vision coverage for the first time, you must submit the required documentation.

If you don't, they will lose coverage!



Eligibility – Employees

	Full-Time	Part-Time 3	Contingent
Scheduled	30 or MORE hrs/wk	20 To 29 hrs/wk	LESS THAN 20 hrs/wk
Voluntary Benefits	Medical/Prescription Drug* Dental* Vision* Flexible Spending Accounts Supp. Life and AD&D* Long Term Disability Short Term Disability 401(k) Retirement Savings Employee Stock Purchase Accident* Critical Illness* Long-term Care* Added Benefits	Medical/Prescription Drug* Dental* Vision* Flexible Spending Accounts Supp. Life and AD&D* Long Term Disability Short Term Disability 401(k) Retirement Savings Employee Stock Purchase Accident* Critical Illness* Added Benefits	401(k) Retirement Savings Added Benefits
Automatic Benefits	Basic Life and AD&D Chronic Care Program EAP Employee Discount	Basic Life and AD&D Chronic Care Program EAP Employee Discount	EAP Employee Discount

3 If you elect coverage, you can also choose to cover eligible dependents.



Medical Plan Options and Accounts





Medical Benefits

All plans offer

- Exclusive discounts for care in the Tenet network
- Comprehensive coverage
- Free in-network preventive care
- Personalized support and resources for chronic and complex conditions



Medical Benefits

Choosing your plan



COMPARE SERVICES and COSTS

Annual deductibles

Co-insurance and co-pays

Out-of-pocket maximums

Medical Plan Options



PLATINUM PLAN

Exclusive Provider Organization (EPO)
Lowest deductible
Highest premiums



GOLD PLAN

Preferred Provider Organization (PPO)
Includes Health Reimbursement Account (HRA)



SILVER PLAN

High Deductible Health Plan (HDHP)
Includes Health Savings Account (HSA)



COPPER PLAN

High Deductible Health Plan (HDHP)
Highest deductible
Lowest premiums
Includes Health Savings Account



Know Your Networks



Save Money and support Tenet

Look for the Tenet Network indicator when you search for providers on your insurance carrier's website.

- Tenet Network: Providers and facilities in our network offer the greatest benefit.
- In-network: Providers and facilities in our **Aetna POS II** insurance carrier's network. You'll pay less when you stay in-network than if you go out-of-network.
- Out-of-network: Providers and facilities not in our insurance carrier's network. You'll pay the highest rate for these providers.

Prescription Drugs

- You automatically get prescription drug coverage when you enroll in a medical plan.
- The amount you pay to fill prescriptions depends on:
 1. Your medical plan
 2. The drug category
 3. The quantity (30 days vs. 90 days)
- Prescriptions generally fall into one of four categories:



Generics



Preferred
Brand Name



Non-preferred
Brand Name



Specialty

Generics are almost always the lowest cost option.

If you take name brand drugs, check the OptumRx formulary on the **Benefit Solutions Center** to see if your prescription is included.



Benefits Guide and Plan Comparison Chart



Your 2022 Medical Plan coverage

- The **Copper Plan** is a High Deductible Health Plan (HDHP), which means it's compatible with a Health Savings Account (HSA). (This plan is ideal for people who don't need much care throughout the year.)
- The **Silver Plan** is also an HDHP.
- The **Gold Plan** comes with a Health Reimbursement Account (HRA), with a contribution from Tenet of **\$300** for individual coverage, **\$600** for family coverage.
- The **Platinum Plan** is an Exclusive Provider Organization (EPO) plan. There's generally no coverage if you go outside your network, unless indicated in the table to the right.
- The **Tenet Network** provides the lowest cost for healthcare services. By using it, you're supporting Tenet providers and facilities when you seek care.
- The insurance carrier for all four plans is **Aetna**.

Here's what you'll pay for covered services in 2022:

		Copper Plan	Silver Plan	Gold Plan
Deductible (individual/family)	Tenet network	\$4,000/\$8,000	\$1,400/\$2,800	\$0
	In network	\$6,000/\$12,000	\$1,400/\$2,800	\$1,600/\$3,200
	Out of network	\$12,000/\$24,000	\$2,400/\$4,800	\$3,200/\$6,400
Out-of-pocket max (individual/family)	Tenet network	\$6,000/\$12,000	\$6,450/\$12,900	\$6,450/\$12,900
	In network	\$7,000/\$14,000	\$6,450/\$12,900	\$6,450/\$12,900
	Out of network	Unlimited	Unlimited	Unlimited
Coinsurance	Tenet network	20%	10%	10%
	In network	40%	20%	20%
	Out of network	75%	75%	75%
Inpatient hospital	Tenet network	20% after deductible	10% after deductible	10%
	In network	40% after deductible	20% after deductible	20% after deductible
	Out of network	75% after deductible	75% after deductible	75% after deductible
Outpatient hospital	Tenet network	20% after deductible	10% after deductible	10%
	In network	40% after deductible	20% after deductible	20% after deductible
	Out of network	75% after deductible	75% after deductible	75% after deductible
Mental health inpatient	Tenet network	20% after deductible	10% after deductible	10%
	In network	20% after deductible	10% after deductible	10%
	Out of network	75% after deductible	75% after deductible	75% after deductible
Mental health outpatient	Tenet network	20% after deductible	10% after deductible	10%
	In network	20% after deductible	10% after deductible	10%
	Out of network	75% after deductible	75% after deductible	75% after deductible
Emergency room	Tenet network	20% after deductible	\$100 fee + 10% after deductible	\$100 fee + 10%
	In network	20% after deductible	\$100 fee + 10% after deductible	\$100 fee + 10% after deductible
	Out of network	20% after deductible	\$100 fee + 10% after deductible	\$100 fee + 10% after deductible
Ambulance	Tenet network	20% after deductible	10% after deductible	10%
	In network	20% after deductible	10% after deductible	10%
	Out of network	20% after deductible	10% after deductible	10%
Urgent care	Tenet network	20% after deductible	10% after deductible	10%
	In network	40% after deductible	20% after deductible	20% after deductible
	Out of network	75% after deductible	75% after deductible	75% after deductible

Here's what you'll pay for covered services in 2022:

		Copper Plan	Silver Plan	Gold Plan
Primary care office visit	Tenet network	20% after deductible	10% after deductible	10%
	In network	40% after deductible	20% after deductible	20%
	Out of network	75% after deductible	75% after deductible	75% after deductible
Specialist office visit	Tenet network	20% after deductible	10% after deductible	10%
	In network	40% after deductible	20% after deductible	20%
	Out of network	75% after deductible	75% after deductible	75% after deductible
Diagnostic test — lab expenses	Tenet network	20% after deductible	10% after deductible	10%
	In network	40% after deductible	10% after deductible	10%
	Out of network	75% after deductible	75% after deductible	\$75 after deductible
Diagnostic test — X-ray	Tenet network	20% after deductible	10% after deductible	10%
	In network	40% after deductible	20% after deductible	20%
	Out of network	75% after deductible	75% after deductible	75% after deductible
Imaging (CT/PET/MRI)	Tenet network	20% after deductible	10% after deductible	10%
	In network	40% after deductible	20% after deductible	20% after deductible
	Out of network	75% after deductible	75% after deductible	75% after deductible

Prescription drugs

There's no coverage for prescriptions out of network. Certain preventive medications are available at the copay/coinsurance level before meeting the deductible.

Retail:	Generic	\$5 copay after deductible	\$5 copay after deductible	\$5 copay before deductible
	Preferred brand	20% (\$40 min/\$120 max) after deductible	35% (\$30 min/\$100 max) after deductible	35% (\$30 min/\$100 max) before deductible
	Non-preferred brand	50% (\$60 min/\$180 max) after deductible	50% (\$40 min/\$150 max) after deductible	50% (\$40 min/\$150 max) before deductible
Mail order:	Generic	\$10 copay after deductible	\$10 copay after deductible	\$10 copay before deductible
	Preferred brand	20% (\$100 min/\$300 max) after deductible	35% (\$75 min/\$200 max) after deductible	35% (\$75 min/\$200 max) before deductible
	Non-preferred brand	50% (\$125 min/\$375 max) after deductible	50% (\$100 min/\$300 max) after deductible	50% (\$100 min/\$300 max) before deductible
Specialty pharmacy:	Generic	\$5 copay after deductible	\$5 copay after deductible	\$5 copay before deductible



MONEY Accounts by Plan

GOLD PLAN

- Includes a Health Reimbursement Account **(HRA)**

SILVER & COPPER PLANS

- Includes a Health Savings Account **(HSA)**

Health Savings Account (HSA)



SILVER & COPPER PLANS

- Pays eligible expenses tax-free
- Account goes with you
- Annual maximum contribution:
\$3,650 for individual coverage
\$7,300 for other coverage

Must meet IRS eligibility requirements.

Canadian residents are not eligible for HSA.

Health Reimbursement Account (HRA)



GOLD PLAN

- Company funded- Tenet will contribute money to an Health Reimbursement Plan
- \$300 for individual coverage
\$600 for other coverage
- Use a debit card*
- Use the money for qualified healthcare expenses, like:
 - Out-of-pocket medical costs
 - Prescriptions drugs
 - Dental care
 - Glasses, contacts and vision care
- Unused funds roll over from year to year unless you switch plans or leave the Company.

*** Card is not available for Canadian residents - manual reimbursement for HRA and HCSA**



Healthcare Flexible Spending Account (HCFSA)

- Set aside pre-tax money for medical, prescription drug, dental and vision expenses.
- You can elect this account even if you waive medical coverage.
- Contribute \$130 to \$2,750 for eligible expenses.
- **Plan wisely!** Money does not roll over from year to year.



PLAN

Estimate your healthcare expenses.

SPEND

Use your FSA to pay for eligible healthcare expenses, tax-free!

SAVE

Lower your taxes and keep more money in your pocket.

Dependent Care Flexible Spending Account (DCFSA)

- Set aside pre-tax money for eligible dependent care expenses, like:
 - Licensed caregiver or nursery
 - Day camps
 - After-school care for children under 13
 - Caretakers for disabled adult dependents
- You can contribute up to \$5,000 a year.*
- Money does not roll over from year to year.



PLAN

Estimate your dependent care expenses.

SPEND

Pay your provider as you normally do.

COLLECT

Request reimbursement from Benefit Accounts.

SAVE

Lower your taxes and keep more money in your pocket.

*If you are married and file taxes separately or if you are considered a highly compensated employee, your contribution limits will be different per IRS regulations.

Options for CANADIAN Residents

Green Shield of Canada

(For use in Canada only)

Green Shield Medical

- No Cost to Employee
- Supplements OHIP
- Hospital room 100%
- Rx drugs 80%
- Professional services - up to \$500

Green Shield Dental

- Employee Premium share
- Canadian Dentists
- Annual deductible \$50/\$150
- No office co-pay
- Preventive
- Basic and major services
- Ortho – child under 26

For more information-review the Green Shield Summary Plan Description booklet available on benefitsolutions.ehr.com



Dental & Vision Benefits

DENTAL

- Options cover preventive care, basic and major services, and orthodontia.
- You can see any provider, but you save when you get care within the Delta Dental network.

VISION

- Covers eye exams, lenses and frames.
- Offers discounts on laser eye surgery.
- You can see any provider, but you save when you get care within the VSP network.

Go to the **Benefit Solutions Center** to see your coverage options and search for in-network providers.



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

Provides financial protection in the event of a death or serious injury.

BASIC COVERAGE

- You automatically receive this coverage.
- Tenet pays the full cost.

SUPPLEMENTAL COVERAGE

- Purchase additional coverage for yourself during Annual Enrollment.
- You can also enroll your spouse, domestic partner and/or children.

Go to the **Benefit Solutions Center** to see your coverage options and designate your beneficiary.

Additional Resident Benefits

Income replacement if you are unable to work because of a covered disability.

SHORT-TERM ILLNESS

Pays a benefit if you are unable to work due to a covered illness or injury, including pregnancy.

LONG-TERM

Pays a benefit if you are still disabled after your short-term disability coverage ends.





Long-Term Care Insurance

- Pays a benefit if you become chronically ill or disabled.
- You can use the benefit for in-home care, residential care facilities, skilled nursing facilities or hospice.
- You can elect coverage for yourself during Annual Enrollment.
- You can also enroll your spouse/domestic partner, your parents and/or your grandparents by contacting Unum directly.



Improved Protection Against Identity Theft

Allstate Identity Protection is our new Identity benefit provider for 2022. Allstate Identity Protection delivers comprehensive identity and financial monitoring, including:

- Dark web monitoring
- Financial transaction monitoring
- Social media monitoring
- Data breach notifications
- Family coverage

To get started, visit the **Voluntary Benefits** section of the **Benefit Solutions Center**. Once enrolled, you'll receive a monthly Identity Health level score. If suspicious activity is detected, a privacy expert is available 24/7 to help you resolve the issue.



Anytime and Automatic Benefits



- Contribute up to **\$19,500** or **\$26,000*** if you're age 50 or older

Reduce your tax bill by making before-tax contributions.

Choose the mix of investments that best fit your goals.

401(k) Retirement Savings Plan

Simply for you
benefits for everything
you do





anytime
benefits

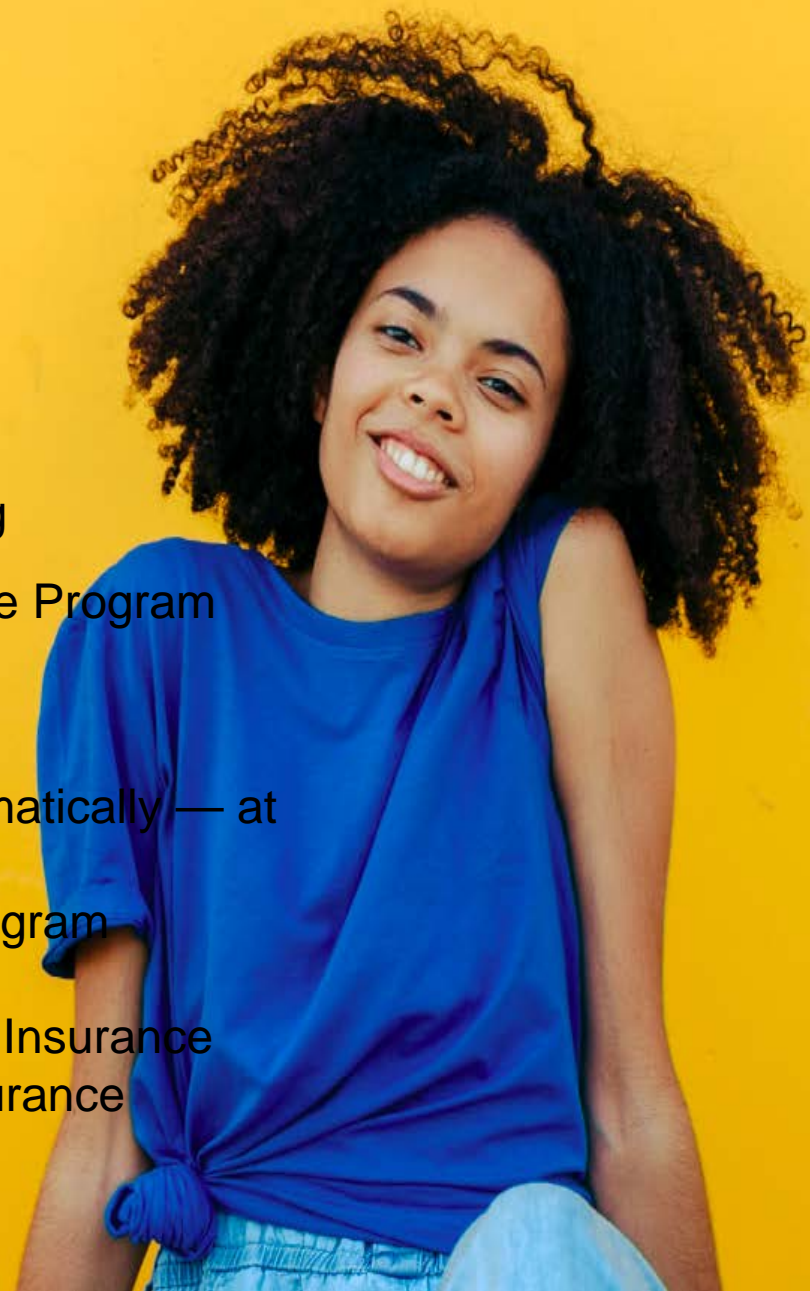
Visit the
**Voluntary
Benefits**
section of
the
**Benefit
Solutions
Center** to
get
started.

- Auto & Home Insurance
- Pet Insurance
- Student Loan Refinancing
- Employee Stock Purchase Program
(quarterly enrollment)

REMEMBER

You get some benefits automatically — at no cost to you:

- Employee Assistance Program
- Employee Discounts
- Business Travel Accident Insurance
- Basic Life and AD&D Insurance




Employee Assistance Program (EAP)

Beacon Wellness

Provides Free, confidential
counseling services

Contact us

 tenet.mybeaconwellbeing.com

 866-335-2340

Online

Phone

In person

24/7, unlimited

5 visits

- Vacation planning
- Relationship / marital
- Stress / depression
- Legal

- Estate planning
- Budgeting / finances
- Alcohol / drug abuse
- Much more



Know and Enroll





Newly
Benefits
Eligible
You have 30
calendar
days
following the
date you're
hired or
become
eligible to
enroll.

New Residents

- Deadline to enroll is 31 days from hire date.
- After that can elect benefits during open enrollment or during a qualified event

Enrollment Website

benefitsolutions.ehr.com



Login

Welcome to Benefit Solutions, your online resource for benefit programs at Tenet Healthcare Corporation.

Tenet Healthcare Corporation has carefully designed its benefit programs with your needs in mind.

User Name:

[Forgot?](#)

Password:

[Forgot?](#)

LOGIN →

➔ First time user? Register and create a password →



CONTACT US

[Privacy Notice](#)



Making Changes



- **Annual Enrollment**
- **Qualified Life Event**
 - Marriage/divorce/death
 - Birth/adoption/change in custody
 - Leave of absence
 - Gain/loss of other health coverage
 - Medicare eligibility

Request a change within 31 days of event:
Go to benefitsolutions.ehr.com or call 844-877-8591



Talk to a representative



(844) 877-8591

(Monday – Friday, 7 a.m. – 7 p.m. CST)



AFTER YOU ENROLL



After You Enroll

1

Verify dependent eligibility

2

Update your beneficiaries

3

Complete Evidence of Insurability form (if applicable)

4

Watch your mail for ID cards.



Helpful Resources





Benefit Solutions Center
benefitsolutions.eHR.com

Chat live or call
1-844-877-8591
Monday – Friday,
7 a.m. – 7 p.m. Central Time



Get Help
Enrolling

Our benefits specialists are trained to answer your benefits questions and support you through the enrollment process.



Thank You

**You respond first.
You put yourself last.
You are essential.**

**Now, take care of
yourself.**

**This enrollment decide
what's essential for you
and yours.**