2020 Medical and Dental Insurance
Premium Rates

Medical Insurance Eligibility:
1st of the month following your hire date as a FT/PT Associate, or a qualifying event (see reverse)
**DURING YEAR END OPEN ENROLLMENT, CONFIRM ELECTIONS ON-LINE ULTIMO**

| (Associate semi-monthly premiums taken out during 2 payrolls each month) |

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<thead>
<tr>
<th>PLAN TYPE</th>
<th>1/1/2020 PREMIUMS</th>
<th>THOMPSON MO. COST</th>
<th>ASSOC. MO. COST</th>
<th>ASSOC. SEMI-MONTHLY</th>
<th>EFFECTIVE COST</th>
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<td>Thompson Health H.S.A. contribution x 26 cycles/year</td>
<td></td>
</tr>
<tr>
<td>Full time-Associate only</td>
<td>537.56</td>
<td>481.56</td>
<td>56.00</td>
<td>$28.00</td>
<td>$19.23 $7.17</td>
</tr>
<tr>
<td>Full time-Assoc. &amp; Spouse/DP only</td>
<td>1236.27</td>
<td>994.27</td>
<td>242.00</td>
<td>$121.00</td>
<td>$38.46 $79.33</td>
</tr>
<tr>
<td>Full time-Assoc. &amp; Child(ren)</td>
<td>1386.61</td>
<td>1119.61</td>
<td>267.00</td>
<td>$133.50</td>
<td>$38.46 $91.83</td>
</tr>
<tr>
<td>Full time-FAMILY</td>
<td>1459.13</td>
<td>1159.13</td>
<td>300.00</td>
<td>$150.00</td>
<td>$38.46 $108.33</td>
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<tr>
<td>Part time-Associate only</td>
<td>537.56</td>
<td>430.56</td>
<td>107.00</td>
<td>$53.50</td>
<td>$19.23 $32.67</td>
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<tr>
<td>Part time-Assoc. &amp; Spouse/DP only</td>
<td>1236.27</td>
<td>906.27</td>
<td>330.00</td>
<td>$165.00</td>
<td>$38.46 $123.33</td>
</tr>
<tr>
<td>Part time-Assoc. &amp; Child(ren)</td>
<td>1386.61</td>
<td>1002.61</td>
<td>384.00</td>
<td>$192.00</td>
<td>$38.46 $150.33</td>
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<tr>
<td>Part time-FAMILY</td>
<td>1459.13</td>
<td>1044.13</td>
<td>415.00</td>
<td>$207.50</td>
<td>$38.46 $165.83</td>
</tr>
</tbody>
</table>

BLUE PPO- HDHP with H.S.A.: First dollar deductible of $1,400 single/$2,800 family with $3,000 single/$6,000 family max IN-OOP (3-tier Rx $5/$45/$90 after deductible is met)

High Deductible Health Plan with Health Savings Account:
Thompson funds an annual contribution to your H.S.A. of up to $500 ($19.23/pay x 26) for a single contract and up to $1,000 ($38.46/pay x 26) for a family contract (2 or more enrolled)

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<td>Full time-Associate only</td>
<td>483.80</td>
<td>437.80</td>
<td>46.00</td>
<td>$23.00</td>
<td>$19.23 $2.17</td>
</tr>
<tr>
<td>Full time-Assoc. &amp; Spouse/DP only</td>
<td>1112.64</td>
<td>916.64</td>
<td>196.00</td>
<td>$98.00</td>
<td>$38.46 $56.33</td>
</tr>
<tr>
<td>Full time-Assoc. &amp; Child(ren)</td>
<td>1247.94</td>
<td>1030.94</td>
<td>217.00</td>
<td>$108.50</td>
<td>$38.46 $66.83</td>
</tr>
<tr>
<td>Full time-FAMILY</td>
<td>1313.22</td>
<td>1070.22</td>
<td>243.00</td>
<td>$121.50</td>
<td>$38.46 $79.83</td>
</tr>
<tr>
<td>Part time-Associate only</td>
<td>483.80</td>
<td>396.80</td>
<td>87.00</td>
<td>$43.50</td>
<td>$19.23 $22.67</td>
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<td>Part time-Assoc. &amp; Spouse/DP only</td>
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<tr>
<td>Part time-Assoc. &amp; Child(ren)</td>
<td>1247.94</td>
<td>937.94</td>
<td>310.00</td>
<td>$155.00</td>
<td>$38.46 $113.33</td>
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<tr>
<td>Part time-FAMILY</td>
<td>1313.22</td>
<td>978.22</td>
<td>335.00</td>
<td>$167.50</td>
<td>$38.46 $125.83</td>
</tr>
</tbody>
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BLUE PPO- HDHP with H.S.A.: First dollar deductible of $2,500 single/$5,000 family with $5,000 single/$10,000 family max IN-OOP (3-tier Rx $5/$45/$90 after deductible is met)

High Deductible Health Plan with Health Savings Account- IN ADDITION TO LOWER PREMIUMS,
Thompson funds an annual contribution to your H.S.A. of up to $500 ($19.23/pay x 26) for a single contract and up to $1,000 ($38.46/pay x 26) for a family contract (2 or more enrolled)

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We are proud to be an equal opportunity employer 11/6/2019.
2020 Medical and Dental Insurance
Premium Rates

DENTAL PLANS (Associate semi-monthly premiums taken out during 2 payrolls each month)

Eligibility: 1st of the month following 6 months in a benefits eligible position

<table>
<thead>
<tr>
<th>BASIC DENTAL</th>
<th>PREMIER DENTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class 1 Preventative</td>
<td>100%</td>
</tr>
<tr>
<td>Class 2 (i.e. cavities)</td>
<td>60%</td>
</tr>
<tr>
<td>Class 3</td>
<td>50%</td>
</tr>
<tr>
<td>Class 4</td>
<td>50%</td>
</tr>
<tr>
<td>Annual Deductible:</td>
<td>$50/ $150 Applies to classes 2 &amp; 3</td>
</tr>
<tr>
<td>Annual Maximum:</td>
<td>$1,000</td>
</tr>
<tr>
<td>Orthodontia Lifetime Max:</td>
<td>$1,000</td>
</tr>
<tr>
<td>Requires Full-time Student Depend. Certification Form between ages 19-23</td>
<td></td>
</tr>
</tbody>
</table>

PLAN TYPE

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<thead>
<tr>
<th>ASSOC. SEMI-MO. COST</th>
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</thead>
<tbody>
<tr>
<td>Single</td>
<td>$10.00</td>
</tr>
<tr>
<td>Family (2+)</td>
<td>$24.00</td>
</tr>
</tbody>
</table>

LOWEST COST? Use AHP Providers or Thompson Health Enhanced Benefit

Quick Reference-

- Shows in-network only
- HDHP with H.S.A. $1,400/$2,800 or $2,500/$5,000

Deductible

- National Bluecard
- see plan deductible limit

Preventative Health

- Covered in Full
- (Adult physical, Mammography, Pap Smear, GYN Exam, Prostate Cancer per recommended guidelines)
- Prescriptions
- (w/ mail order 3 for 2 savings-ask for brochure, or see on-line)

- $5/45/90, subject to deductible

Quick Reference Summary only: PLEASE obtain plan booklet or side-by-side comparisons.

The information above describes the most common benefits. Plans are governed by Excellus BC/BS Documents

Included in-network benefits may vary by area. The below is a summary of benefits.

Completed affidavit required with enrollment form; imputed income applies

We offer domestic partner (DP) coverage for medical and dental insurance

Legend:

- FT- FULL TIME
- PT- PART TIME

When can I change my plan??

Open Enrollment Times:

- Next January 1
- OR within 30 days of a status change:
  - (i.e. birth, death, adoption, marriage, divorce, loss of coverage, change of FT/PT hours)

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Several Methods to help you select an appropriate plan:

What you will find on the Internet/Intranet:

- Medical plan comparisons
- Dental plan information
- AHP Network link
- HSA information
- Voluntary benefit information

From Home:

- https://www.thompsonhealth.com/Careers/Compensation-Benefits

No access? Associate Services has forms and information

2020 Medical and Dental Insurance
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