



Employee Benefits

Our investment in you.

2022 New Employee Enrollment Guide



Welcome to Summa Health!

summahealth.org

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Questions?



- Visit the Human Resources>>Benefits page on Summa@Work
- Email the Employee Benefits Team at **summabenefits@summahealth.org**
- Call Employee Benefits at **234.312.6262**



Don't Wait Until the Last Day!

Enrollment must be completed within 31 days of your benefit eligibility date, which is the first of the month following your hire/transfer date except for house staff residents; which is their date of hire.



This New Employee Enrollment Guide has been designed to help you understand your 2022 benefit choices for the Plan Year beginning January 1, 2022.

The information contained in this Guide pertains to regular full-time and part-time benefit eligible employees in positions of 20 hours per week or greater.

Carefully review the information detailed inside this New Employee Enrollment Guide to fully understand your 2022 Benefit Plan options and rates.

Please retain this guide for your reference.

Completing Your Enrollment

Actions You Must Take

1. **Read** this guide thoroughly to understand your benefit plan choices and payroll deductions.
2. **Complete & Return** all required forms and documents to Summa Health Employee Benefits within 31 days of your benefits eligibility date, which is the first of the month following your hire/transfer date except for house staff residents; which is date of hire.
3. **Enroll in benefits ASAP!** Enrollment must be completed within 31 days of your benefits eligibility date.
 - New hires must enroll online. See online enrollment instructions on page 31 of this Guide.
 - Transferring employees will be emailed benefits information which includes paper enrollment forms.

Required Forms and Documents Checklist

Transferring Employees:

- Complete your Benefits Enrollment/Change Form; include the birthdate and Social Security Number for each family member you wish to enroll for medical, dental, and/or vision coverage.
- Provide copies of verification documents (see Family Member Eligibility Guidelines on page 6 of this Guide for details) for each family member you wish to enroll on your medical plan; submit copies to Employee Benefits with your completed Benefits Enrollment/Change Form.
- Complete the Flexible Spending Account (FSA) Enrollment Form if you wish to participate in either the Health Care or Dependent Care FSA.
- Securian will mail instructions directly to your home.
- Contact SummaCare's Customer Service at **330.252.5922** to notify them of your primary care physician (PCP) election.
- If you wish to enroll, change, or cancel your existing UNUM Whole Life, Critical Illness, and/or Group Hospital Indemnity Insurance policy(ies) through Summa Health, please contact Summa Health's Voluntary Benefits Call Center at **888.317.3759** for more information.

New Hires & Rehires:

- Enroll online for your benefits; be certain to have birthdates and Social Security Numbers for your family members available when you enroll.
- Provide copies of verification documents (see Family Member Eligibility Guidelines on page 6 of this Guide for details) for each family member you wish to enroll on your medical plan. Submit the documents to Summa Health Employee Benefits ASAP but within 31 days of your benefit eligibility date following your online enrollment.
- Designate your group term life insurance beneficiary via Securian's secure website. Securian will mail the instructions directly to eligible employee homes.

Information You Need to Know

1. **Your benefits elections/changes** take effect on the first of the month following your hire date/transfer date.
2. **Retro-Active Deductions:** As necessary, Employee Benefits will take retro-active deductions for any benefits for which deductions were missed due to timing of your enrollment.
3. **Enrollment Id Cards:**
 - **Medical Plan:** Allow a minimum of 2-3 weeks post enrollment; SummaCare will mail your ID cards directly to your home.
 - **Vision Plan:** An ID card is not necessary to obtain services. Contact VSP at **800.877.7195** for information on VSP providers or visit vsp.com.
 - **Dental Plans:** An ID card is not necessary to obtain services. Contact Delta Dental at **800.524.0149** or print an ID card from deltadentaloh.com/summahealth.
4. **Plan Year:** Your elections and bi-weekly benefit deduction(s) must remain in effect for the entire Plan Year (January 1 through December 31), unless you notify Employee Benefits within 31 days of a qualifying life status event and submit all required information within the designated timeframe. Otherwise, your next opportunity to make changes will be during the Annual Benefits Enrollment held in November for the following January 1. For examples of a qualifying life status event, see page 36 of this Guide.
5. **If you are a** Summa Health Medical Group Physician, House Staff Resident or a member of the union Local 2317 (Barberton Campus), you will need to review the Addendums beginning on page 34 for benefit information unique to you.
6. **Medical Plan:** Dependent verification documents must be sent upon enrollment, but no later than 31 days of the medical coverage effective date. **If documents are not received, dependent coverage will be delayed to the first of the month following receipt of the documents.**
7. **Complete and apply** for the Resident Outside of the Service Area Request Form should you or a covered dependent(s) reside outside of the 20-county service area on a permanent basis, or your dependent(s) who temporarily reside outside outside of the service area while attending full-time school.

Return ALL completed documents to
summabenefits@summahealth.org.



Medical & Prescription Insurance Plan

Family Member Eligibility Guidelines



If you wish to add a family member to your 2022 medical plan who is not enrolled on your 2021 plan, you are required to provide verification documents by **November 30, 2021** to prove their relationship to you.

<p>Definition of legal spouse:</p> <ul style="list-style-type: none"> Legally married spouse <p>You may not cover your legal spouse on your Summa Health medical plan if your spouse is employed and eligible for group medical coverage through his/her own employer</p> <p>It is your responsibility to notify Employee Benefits should your spouse's coverage status change during the year</p>	<p>Required Verification Documents</p> <ul style="list-style-type: none"> Spousal Affidavit form Copy of Page 1 of your most current federal tax return (cross out Social Security numbers and wage information) <p>OR</p> <p>Copy of marriage certificate AND one of the following:</p> <ul style="list-style-type: none"> Spousal Affidavit form Current joint bank account statement Current joint credit card statement Joint ownership of residence Sharing of household expenses (current utility bill, etc.) Designation of Power of Attorney Designation of one another as sole executor or beneficiary
<p>Definition of eligible child:</p> <ul style="list-style-type: none"> Natural child or step-child Adopted child Foster child or child under legal guardianship Unmarried child age 26 or older who is mentally or physically handicapped. Contact Employee Benefits for full details. 	<p>Required Verification Documents</p> <ul style="list-style-type: none"> Birth certificate Copy of adoption papers Copy of custodial papers or legal guardianship papers Proof of child's incapacity and dependency must be furnished

To ensure your family member is covered on January 1:

Email your documents to summabenefits@summahealth.org no later than November 30.

If you or your family member(s) reside outside the SummaCare 20-county service area:

Complete the Resident Outside SummaCare's Service Area Request form on the back page of this guide to validate residence status.

Summa Health reserves the right to conduct annual dependent audits to confirm dependent eligibility.

The Summa Health Employee Medical Benefit Plan



NewHealthConnect Summa Health Network



The Summa Health Employee Medical Benefit Plan is a comprehensive medical and prescription plan that includes levels – or Tiers – of coverage. You decide how to use your plan to save money when you choose services from **Summa +**, Tier 1 or Tier 2 providers and hospitals/facilities.

! WHAT YOU NEED TO KNOW

- If your spouse is eligible for group health insurance coverage through their employer, you may not enroll them on Summa's medical plan.
- It is your responsibility to notify Employee Benefits should your spouse's coverage status changes at any time.

Bi-Weekly Pre-Tax Deductions: The Summa Health Employee Medical Benefit Plan

Full-Time		Part-Time	
You Only	\$67.04	You Only	\$80.45
You + Spouse	\$158.45	You + Spouse	\$237.68
You + 1 or 2 Children	\$121.88	You + 1 or 2 Children	\$182.82
You + 3 or More Children	\$166.69	You + 3 or More Children	\$250.04
You + Spouse + 1 or 2 Children	\$192.71	You + Spouse + 1 or 2 Children	\$289.07
You + Spouse + 3 or More Children	\$224.83	You + Spouse + 3 or More Children	\$337.25

The Summa Health Employee Medical Benefit Plan

Features and Covered Services

Features and Services: NewHealthConnect Summa Health Network

Feature/Service	Summa +	Tier 1	Tier 2
Annual Deductible	Applies to Inpatient Hospital & Facility services only <ul style="list-style-type: none"> Individual \$500 Family \$1,000 	Applies to Inpatient Hospital & Facility services only <ul style="list-style-type: none"> Individual \$750 Family \$1,500 	Applies to Inpatient Hospital & Facility services only <ul style="list-style-type: none"> Individual \$1,500 Family \$3,000
Note: Tier 2 deductible expenses are applicable toward Summa + and Tier 1 deductible. Tier 1 deductible expenses are applicable toward Summa + deductible.			
Out-of-Pocket Maximum for the Calendar Year	Medical & Pharmacy combined <ul style="list-style-type: none"> Individual \$2,000 Family \$4,000 	Medical & Pharmacy combined <ul style="list-style-type: none"> Individual \$3,000 Family \$6,000 	Medical & Pharmacy combined <ul style="list-style-type: none"> Individual \$6,850 Family \$13,700
<ul style="list-style-type: none"> Note: Tier 2 out-of-pocket expenses are applicable toward Summa + and Tier 1 out-of-pocket maximum. Tier 1 out-of-pocket expenses are applicable toward Summa + out-of-pocket maximum. In-Vitro Fertilization and Weight Loss Surgery is excluded. 			

Covered Services: NewHealthConnect Summa Health Network

Covered Services	Summa +	Tier 1	Tier 2
Allergy Tests	N/A	\$35 Co-pay per visit	\$70 Co-pay per visit
Allergy Desensitization Treatment	\$0 Co-pay	\$0 Co-pay	\$0 Co-pay
Ambulance	\$0 Co-pay	\$0 Co-pay	\$0 Co-pay
Chiropractic Services	N/A	\$35 Co-pay per visit	\$70 Co-pay per visit
20 visits per calendar year			
Dialysis	N/A	\$0 Co-pay per visit	\$250 Co-pay per visit
Durable Medical Equipment	\$0 Co-pay through HomeLink		No coverage
Emergency Services	\$250 Co-pay per visit for all emergency service providers; Co-pay waived if admitted to the hospital.		
Facility Fee	Covered	Covered	Covered for office (including fees incurred at Crystal Clinic Orthopedic Center located at St. Thomas Campus)
Home Health Care	\$0 Co-pay at Summa Health at Home	\$20 Co-pay	\$40 Co-pay

Inpatient Hospital & Facility Services (including Maternity stays)	Applies to deductible • Individual \$500 • Family \$1,000 Facility fee covered	Applies to deductible • Individual \$750 • Family \$1,500 Facility Fee covered	Applies to deductible • Individual \$1,500 • Family \$3,000 Facility Fee covered
	Out-of-network coverage for emergency admissions only. Admissions will be covered at the Tier 2 benefit level.		
Inpatient Physician Services	\$0 Co-pay	\$0 Co-pay	\$0 Co-pay
In Vitro Fertilization	<ul style="list-style-type: none"> • 50% up to \$10,000 lifetime maximum • Services must be provided at Reproductive Gynecology, Inc. and are limited to specific authorized procedures 		
Lab/X-Ray & Other Diagnostic	<ul style="list-style-type: none"> • Lab \$0 Co-pay per visit • X-Ray & Other Diagnostic \$0 Co-pay per visit • High Tech Imaging \$50 Co-pay per visit Summa + Labs: Summa Facility Labs LabCare Plus	<ul style="list-style-type: none"> • Lab \$25 Co-pay per visit • X-Ray & Other Diagnostic \$55 Co-pay per visit • High Tech Imaging \$150 Co-pay per visit Tier 1 Labs: Akron Children's Hospital	<ul style="list-style-type: none"> • Lab \$50 Co-pay per visit • X-Ray & Other Diagnostic \$100 Co-pay per visit • High Tech Imaging \$400 Co-pay per visit Tier 2 Labs: University Hospital Mercy Medical Center
Observation Stay	100% after Emergency Room Co-pay		
Outpatient Surgery	\$150 Co-pay per visit Facility fee covered	\$300 Co-pay per visit Facility fee covered	\$500 Co-pay per visit Facility Fee covered
	Includes Hospitals and Ambulatory Surgery Center (ASC)		
Physical/Occupational Therapy	\$10 Co-pay per visit	\$20 Co-pay per visit	\$35 Co-pay per visit
	60 visits per calendar year (physical and occupational therapy combined)		
Office Visit - Physician (PCP) (Diagnostic)	\$0 Co-pay per visit		\$35 Co-pay per visit + 100% of any applicable facility charges
	Includes Mental Health and Substance Abuse Office Visits		
Office Visit - Specialist	\$25 Co-pay per visit	\$35 Co-pay per visit	\$70 Co-pay per visit + 100% of any applicable facility charges
Preventive Services	\$0 Co-pay; Preventive Services include: <ul style="list-style-type: none"> • Well child care visits • Specific women's preventive services • Counseling to prevent illness, disease, or other health problems • Immunizations • Adult preventive visits • Preventive lab work, tests and screenings 		
Radiation Therapy	\$0 Co-pay per visit	\$35 Co-pay per visit	\$250 Co-pay per visit
Skilled Nursing Facility	N/A	\$0 Co-pay per day	\$40 Co-pay per day
	100 days per calendar year		

Covered Services: NewHealthConnect Summa Health Network

Covered Services	Summa +	Tier 1	Tier 2
Speech Therapy	\$10 Co-pay per visit	\$20 Co-pay per visit	\$35 Co-pay per visit
	30 visits per calendar year		
Transplants	N/A		Applies to deductible <ul style="list-style-type: none"> • Individual \$1,500 • Family \$3,000
Urgent Care	\$40 Co-pay per visit at any Summa Health Urgent Care	\$60 Co-pay per visit at any non-Summa urgent care center	
Vision Care (medical)	\$25 Co-pay per visit	\$35 Co-pay per visit	\$70 Co-pay per visit
Weight Loss Surgery & Treatment	<ul style="list-style-type: none"> • Surgery = \$2,850 Co-pay • Non-Surgical services = covered at the applicable benefit based on services provided. • Services are only covered at the Summa Bariatric Center. Contact the Bariatric Center about covered procedures and services at 330.375.6554. 		
Women's Health	\$0 Co-pay; Services include: <ul style="list-style-type: none"> • Well-women's visits • Contraceptive methods/devices and sterilization • Breastfeeding counseling, support and pump • Preventive tests and screenings • Counseling to prevent illness, disease, or other health problems 		

**Medical Drug Benefit Covered Services (includes chemotherapy, infusions and injections):
NewHealthConnect Summa Health Network**

Feature/Service	Summa +	Tier 1	Tier 2
Office	\$0 Co-pay per visit	\$35 Co-pay per visit	\$70 Co-pay per visit
Home	\$0 Co-pay per visit	\$0 Co-pay per visit	\$0 Co-pay per visit
Center/Hospital (if drug is on the home infusion list)	\$150 Co-pay per visit	\$300 Co-pay per visit	\$500 Co-pay per visit
Center/Hospital (if drug is NOT on the home infusion list)	\$0 Co-pay per visit	\$35 Co-pay per visit	\$250 Co-pay per visit

The Summa Health Employee Medical Benefit Plan

Primary Care Physicians and Specialists

NewHealthConnect Summa Health Network

Feature/Service	Summa +	Tier 1	Tier 2
Primary Care Physicians (PCP)	<ul style="list-style-type: none"> Summa Health Medical Group NewHealth Collaborative Members NewHealth Collaborative Affiliates Akron Children's Hospital Physicians Pioneer Physicians Network Community Health Care Inc. Mercy Professional Care Corp 		<ul style="list-style-type: none"> University Hospital Mercy Health <p>Facility fee not covered</p>
Specialists	<ul style="list-style-type: none"> Summa Health Medical Group 	<ul style="list-style-type: none"> NewHealth Collaborative NewHealth Collaborative Affiliates Akron Children's Hospital Physicians 	<ul style="list-style-type: none"> University Hospital Mercy Health Other specialists in the Summa Health Network <p>Facility fee not covered</p>

How to Find a Summa +, Tier 1 or Tier 2 provider

- Go to summacare.com and click **Find Your Doctor**, then **Through My Employer**.
- From the drop-down, select **NewHealthConnect – Summa** and enter your search criteria.

Note: Medical providers may move from one coverage Tier to another. Although SummaCare's website reflects the current status of a provider, it is recommended that you periodically confirm your physician's continued active status and Tier level.



The Summa Health Employee Medical Benefit Plan

Hospitals and Facilities

Effective January 1, 2022

NewHealthConnect Summa Health Network

Summa +	Tier 1	Tier 2	Out-of-Network
<ul style="list-style-type: none"> • Akron Campus • Barberton Campus • St. Thomas Campus • Summa Rehab Hospital (Specialty) • Wadsworth-Rittman Medical Center • Digestive Health Center, LTC 	<ul style="list-style-type: none"> • Akron Children's Hospital • Akron Children's Hospital Beeghly Campus 	<p>Crystal Clinic Orthopedic Center Cleveland Clinic Mercy Hospital (Canton)</p> <p>Mercy Health</p> <ul style="list-style-type: none"> • Allen Hospital (Lorain) • Lorain Hospital • Willard Hospital • St. Elizabeth Youngstown Hospital • St. Elizabeth Boardman Hospital • St. Joseph Warren Hospital <p>University Hospitals</p> <ul style="list-style-type: none"> • Ahuja Medical Center • Bedford Medical Center • Cleveland Medical Center • Conneaut Medical Center • Elyria Medical Center • Geauga Medical Center • Geneva Medical Center • MacDonald Women's Hospital • Parma Medical Center • Portage Medical Center • Rainbow Babies & Children's Hospital • Richmond Medical Center • Samaritan Medical Center • Seidman Cancer Center • St. John Medical Center 	<p>There is no out-of-network except for:</p> <ul style="list-style-type: none"> • Services which have received prior authorization from SummaCare's Health Services Management Department • Urgent Care • Emergency Care

Summa Health's 2022 Wellness Works Program

Wellness Works (Employee Wellness) offers Wellness Challenges and Initiatives to help our employees have the best possible health.



Connect with others, participate in fun activities and feel the energy!

The Program focuses on forming wellness teams and educating employees about the healthy advantages of participating in certain wellness programs to foster a culture of wellness!

Go to the Wellness Works page on Summa@Work or call **330.375.7385** to learn more about 2022 challenges and initiatives.

The Summa Health Employee Prescription Plan



NewHealthConnect Summa Health Network

Prescription benefits are included in the Summa Health Employee Medical Benefit Plan.

	Summa+		Retail Pharmacies		Mail Order
	Summa Health Pharmacies, Acme, Giant Eagle, MAC Pharmacies		All other SummaCare network pharmacies		MedImpact Direct
	30-day supply	90-day supply	30-day supply	90-day supply	90-day supply
Tier 1	\$5	\$15	\$25	\$75	\$60
Tier 2	\$35	\$105	\$70	\$210	\$125
Tier 3	\$70	\$210	\$140	\$420	\$250
Specialty	\$150 Co-pay per 30-day supply. Specialty drugs are high cost drugs that require special storage of handling and close monitoring of a patient's drug therapy. Specialty drugs are noted on the SummaCare Drug Formulary with an asterisk (*), and are used to treat medical conditions such as cystic fibrosis and multiple sclerosis. These drugs must be obtained through SummaCare's specialty drug network.				

Find Your Prescription Drug Tier

Visit summacare.com and sign-in to Plan Central. Search for a prescription drug. View the newest list (formulary) of all covered drugs and their Tier level of coverage.

On occasion your prescription drug may change from one Tier to another so it is important that you look for up to date information on Plan Central.

Special \$0 Co-Pay Items

Under the Affordable Care Act, certain preventive prescription drugs and over-the-counter recommended items and services are required to be covered without cost when prescribed by a health care provider, as preventive measures.

Examples include:

- Aspirin to prevent cardiovascular disease for adults age 45 and older
- Oral fluoride for children ages 6 months through 5 years
- Generic oral contraceptives

Mail Order

MedImpact Direct offers custom delivery services for your maintenance medications – the ones you take regularly for chronic or long-term conditions. For more information, or to download a form, visit medimpactdirect.com or call toll-free 855.873.8739.

Summa + Pharmacies

Summa Health operates two conveniently located outpatient pharmacies on our Campuses. We're also partners with other pharmacies in the community. These patient-focused, community pharmacy partners offer services tailored to the individual patient's care.

Pharmacy Name	Address	Phone Number	Hours
Summa Health Retail	525 E Market, Akron (Enter at 70 Arch Street & turn right)	330.375.4911	M- F: 10- 6
Summa Health Retail	155 5th St NE, Barberton	330.615.3265	M- F: 10- 6
Summa Health Rootstown Pharmacy	4211 State Route 44, Rootstown	330.325.0589	M- F: 8- 6
Mac Pharmacy	One Park West Blvd Suite 140, Akron	330.556.4515	M-F: 8:30-5:30
Mac Pharmacy	879 E Exchange St, Akron	330.375 .5040	M-F: 9-7; Sat: 10-3; Sun. 10-3
Giant Eagle	All	Varies	Varies
Acme	All	Varies	Varies

For a full list of network pharmacies, visit summcare.com and sign in to Plan Central.

Summa + Labs

Summa Health and our partner, LabCare PLUS™, use the latest laboratory technology to provide you with prompt testing and accurate results.

Summa Health Labs Locations

Location	Address	Phone Number
Akron Campus	95 Arch St. Suite G-30. Akron. OH 44304	330.375.3308
St Thomas Campus	444 N Main St. Akron. OH 44310	330.375.3000

LabCare Plus Locations

Location	Address	Phone Number
Barberton	165 5 th Street SE, Barberton, OH 44203	330.753.3649
Chapel Hill - Akron	1260 Independence Ave, Akron, OH 44310	234.312.5202
Coventry Township	908 E Waterloo Rd, Akron, OH 44306	330.724.7782
Cuyahoga Falls	600 Portage Trail, Cuyahoga Falls, OH 44221	330.929.4842
Cuyahoga Falls	1860 State Rd, Cuyahoga Falls, OH 44223	330.922.4648
Fairlawn	4055 Embassy Pkwy #110, Akron, OH 44333	234.867.6825
Green Heritage Crossings	1835 Franks Parkway, Uniontown, OH 44685	330.899.2464
Green YMCA	3838 Massillon Rd, Suite 310, Uniontown, OH 44685	330.899.5530
Hudson	5655 Hudson Dr. Hudson, OH 44236	330.342.3731
Medina	3780 Medina Rd, Suite 160, Medina, OH 44256	330.723.0731
Mogadore	754 S Cleveland Ave, Suite 100, Mogadore, OH 44260	330.628.2356
Stow	3869 Darrow Rd, Suite 208, Stow, OH 44224	330.688.4531
Stow-Kent	3825 Fishcreek Rd, #140, Stow, OH, 44224	234.867.6962
Tallmadge	60 North Ave, Tallmadge, OH 44278	234.867.7757
Tuscora Park	201 5 th St NE, Suite 4, Barberton, OH 44203	330.615.5450
Village	1493 S Hawkins Ave, Akron, OH 44320	330.865.5320
White Pond	One Park West Blvd, Suite 130, Akron, OH 44320	330.835.4860

LabCare PLUS™ delivers fast, accurate results at each of our convenient locations by providing excellent patient experiences.



- No appointment necessary
- Convenient, free parking
- Early morning, lunch time and Saturday hours at some locations
- Professional, trained phlebotomists

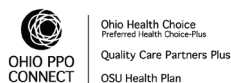
We accept all physician orders and most major insurances. When you arrive for testing services, please bring your signed physician's order with appropriate diagnosis, insurance card and photo ID.

For additional questions or assistance call **800.522.8318** or visit **labcareplus.org**.

Employee or Dependent Residence Outside the Service Area

Do you or your family member reside outside the SummaCare 20-county service area on a permanent or temporary basis? This includes any dependent child who may be residing outside the service area while attending school on a full-time basis.

If you apply, and are approved, for this exception, covered services are provided at the in-network Tier 2 coverage level when an approved network is utilized.



Note: You or your family member can utilize the **Summa +** and Tier 1 network at any time.



It is your responsibility to notify Employee Benefits of a change in residency status for you and/or your applicable family member(s) during the year.

To apply and be approved for this exception, complete and return the form on the back page of this Guide **no later than November 30**. The form will allow Employee Benefits to validate residence status and notify SummaCare of your/your family member's approved residency status exception. Scan and email your completed form to **summabenefits@summahealth.org**.

How to Find a Tier 2 Provider for Employees or Dependents Residing Outside the Service Area

1. Visit SummaCare's website at **summacare.com** and sign in to Plan Central.
2. Click [Find a Doctor or Hospital](#) on the main page; click [Healthcare Providers Outside of the SummaCare Primary Service Area](#).
3. For employees or family members in Ohio, select Ohio PPO Connect; for employees and family members **outside** Ohio, select FirstHealth Network.



Dental & Vision Insurance Plans

Dental Plans

We do dental. **Better.**

Delta Dental of Ohio is the largest dental carrier in the dental insurance market.

Choose from the **Delta Dental Standard Plan** or the **Delta Dental High Plan**. Both Plans offer access to the most extensive network of dentists in the nation through the Delta Dental PPO Network and the Delta Dental Premier Network. Select a dentist from either network; Delta Dental PPO Network providers offer lower out-of-pocket expenses and deeper discounted services.

Visit Delta Dental's website at deltadentaloh.com/summahealth to search for a network dentist or call Delta Dental at 800.524.0149 for more information.

Bi-Weekly Pre-Tax Deductions Full-Time & Part-Time

Delta Dental Standard		Delta Dental High	
You Only	\$8.50	You Only	\$16.59
You + Spouse	\$16.10	You + Spouse	\$31.46
You + Child/ren	\$18.85	You + Child/ren	\$35.70
Family	\$29.63	Family	\$56.54

Coverage by Plan

Feature/Service	Delta Dental Standard	Delta Dental High
Preventive & Diagnostic	100%	100%
Basic	50%	80%
Major	30%	60%
Annual Maximum	\$1,000	\$1,500
Deductible	\$50 / \$150 - does not apply to Preventive & Diagnostic or Orthodontic coverage	\$50 / \$150 - does not apply to Preventive & Diagnostic or Orthodontic coverage
Orthodontics: Child	50%	50%
Orthodontics: Adult	Not Covered	Not Covered
Lifetime Orthodontics Maximum	\$500	\$1,500
Orthodontics Age Limit	20 for dependent child	20 for dependent child
Out-of-Network Reimbursement	Claim payments will be based on Delta Dental's heavily discounted PPO fee schedule regardless of the provider used. You may be responsible for additional charges if you use a Premier or out-of-network provider.	Claim payments will be based on the respective fee schedule depending on the contracting status of the provider. You may be responsible for additional charges if you use an out-of-network provider.



Service Category

Feature/Service	Delta Dental Standard	Delta Dental High
Exam	Preventive	Preventive
Sealants	Preventive	Preventive
Brush Biopsy	Diagnostic	Diagnostic
X-Rays	Diagnostic	Diagnostic
Endodontics – root canal	Basic	Basic
Periodontics – to treat gum disease	Basic	Basic
Periodontal Surgery	Basic	Basic
Silver Fillings	Basic	Basic
Removal of Bony Impactions	Major	Major
Crowns	Major	Major

Value Added Features

White Fillings	Optional Treatment (posterior teeth only) The plan will only pay the applicable amount that it would have paid for an amalgam (silver) filling. White fillings are covered for anterior teeth.	White fillings are covered for anterior and/or posterior teeth.
Evidence-Based Dentistry	Members with specific at-risk health conditions may be eligible for additional prophylaxes (cleanings) or fluoride treatment. Member should speak with his/her dentist about treatment.	Members with specific at-risk health conditions may be eligible for additional prophylaxes (cleanings) or fluoride treatment. Member should speak with his/her dentist about treatment.
Implant Coverage	Not Covered (Including crowns over implants)	Covered – once per tooth in any eight year period. (including crowns over implants)

Vision Plan



VSP, founded over 60 years ago, offers high-quality, cost-effective eye care and eyewear to over 88 million members worldwide.



Choose from the VSP Standard Plan or the VSP High Plan.

Get personalized information about your plan, coverage, and exclusive member-only benefits by creating an account. Visit [vsp.com](https://www.vsp.com) to find Premier Program locations, or another in-network provider near you.



Bi-Weekly Pre-Tax Deductions Full-Time & Part-Time

VSP Standard Plan		VSP High Plan	
You Only	\$4.34	You Only	\$7.27
You + Spouse	\$7.64	You + Spouse	\$12.78
You + Child/ren	\$8.18	You + Child/ren	\$13.68
Family	\$12.11	Family	\$20.26

Did you know VSP offers:

- Extra money off featured frame brands
- Hearing Aid discounts through TruHearing
- VSP Simple Values discounts for savings on Health, Wellness, and Entertainment
- A VSP Diabetic eye care program

Coverage by Plan

Using a VSP Premier Program Provider

Feature/Service	VSP Standard Plan	VSP High Plan
WellVision Exam	<ul style="list-style-type: none"> • \$10 Co-Pay • Focuses on your eye health and overall wellness • Every plan year 	<ul style="list-style-type: none"> • \$10 Co-Pay • Focuses on your eye health and overall wellness • Every plan year
VSP Diabetic Eyecare Plus ProgramSM	<ul style="list-style-type: none"> • \$20 Co-Pay • 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 doctor for details. • As needed 	
Retinal Screening	<ul style="list-style-type: none"> • No more than a \$39 co-pay on routine retinal screening as an enhancement to a 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 	

Prescription Glasses and Contacts

Glasses and Sunglasses	<ul style="list-style-type: none"> • Extra \$50 to spend on featured frame brands. Go to vsp.com/specialoffers for details • 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam 	
Frame	<ul style="list-style-type: none"> • \$10 co-pay for prescription glasses • \$150 allowance for a wide selection of frames • \$200 allowance for featured frame brands • 20% savings on the amount over your allowance • Every other plan year 	<ul style="list-style-type: none"> • \$10 co-pay for prescription glasses • \$150 allowance for a wide selection of frames • \$200 allowance for featured frame brands • 20% savings on the amount over your allowance • Every plan year
Lenses	<ul style="list-style-type: none"> • Single vision, lined bifocal, lined trifocal lenses • Polycarbonate lenses for dependent children • Every plan year 	
Lenses Enhancement	<ul style="list-style-type: none"> • Standard progressive lenses; \$0 Co-Pay • Premium and Custom progressive lenses; \$80-\$160 Co-Pay • Photochromic lenses; \$62-\$76 Co-Pay 	<ul style="list-style-type: none"> • Anti-reflective Coating; \$37-\$75 Co-Pay • Average 35-40% savings on other lenses • Every plan year
Contacts (instead of glasses)	<ul style="list-style-type: none"> • Up to \$60 co-pay • \$140 allowance for contacts; copay does not apply • Contacts lens exam (fitting and evaluation) • Every plan year 	
VSP Easy Options	<ul style="list-style-type: none"> • N/A 	<p>You and each member on your plan can choose one of these enhanced eyewear options when purchasing your glasses or contacts:</p> <ul style="list-style-type: none"> • Upgrade to \$250 frame allowance OR • Fully covered premium or custom progressive lenses OR • Fully covered photochromic adaptive lenses OR • Fully covered anti-reflective coating OR • Upgrade to \$200 contact lens allowance

Group Term Life Insurance Plans

Disability Plans

Summa Health is proud to provide eligible full-time employees with **Short-Term** and **Long-Term Disability plans**. These plans are automatically provided; no enrollment is required.

	Short-Term Disability (STD)	Long-Term Disability (LTD)
Purpose	Designed to provide financial security for you and your family in the event you are unable to work due to a non-occupational short-term illness or injury.	Designed to provide financial security for you and your family in the event you suffer from a long-term disability due to a non-occupational illness or injury and you are determined to be “disabled” under the provisions of the Plan.
Eligibility	Regular full-time employees after successful completion of 90 days of continuous full-time employment.	Regular full-time employees after successful completion of the plan’s eligible waiting period for coverage.
Cost of Coverage	STD coverage is a self-insured and self-administered plan provided by Summa Health at no cost to you.	LTD coverage is a fully-insured plan provided by Summa Health at no cost to you.
Coverage Period	Approved benefits begin on the eighth (8th) day of the illness or injury and continue for up to 25 weeks or until you return to work, whichever is sooner. Note: If you are a Director, Vice President, Executive or Physician, your coverage period may continue up to a maximum period of 90 days or until you return to work, whichever is sooner.	Benefits pick up where STD left off, beginning after you have been out of work for 180 days up to age 65, under the terms of the Plan. Note: There is a 90-day (vs. 180-day) elimination period for Management-level employees.
Benefit Amount	Benefits are paid equal to 60% of your regular weekly earnings. Note: If you are a Director, Vice President, Executive or Physician, your benefit equals 100% of your regular weekly earnings. Your benefit may continue up to a maximum period of 90 days or until you return to work, whichever is sooner.	Benefits are paid up to 60% of your monthly earnings to a maximum of \$5,000 per month. Note: The monthly maximum benefit may vary based on job classification.

Group Term Life Insurance

Securian Financial offers an affordable way to provide financial protection for you and your loved ones during your working years.

Visit Securian Financial's LifeBenefits website to find [many](#) resources to help you understand your personal life insurance needs and determine the right coverage for you and your family. Connect with LifeBenefits at: [//LifeBenefits.com/plandesign/SummaHealth](https://LifeBenefits.com/plandesign/SummaHealth).

Your Summa-provided Basic life policy, and Supplemental life you may purchase, includes Accidental Death & Dismemberment (AD&D) coverage.

Common life insurance terms you should be familiar with:

Accelerated Death Benefit:

If an insured person becomes terminally ill with a life expectancy of 12 months or less, the insured may request early payment of up to 100% of the life insurance amount.

AD&D: An abbreviation for Accidental Death & Dismemberment. Generally, AD&D pays benefits for an accidental death and the loss of limbs, fingers, toes, sight and permanent paralysis.

Age Reduction: At age 65, life insurance starts reducing in face amount by certain percentages. Your life insurance (Basic, Supplemental, and Dependent Life) will reduce to 67% of the amount of life insurance in force at age 65; and at age 70, it will reduce again to 45% of the amount of the life insurance in force prior to your first reduction. Contact our designated Employee Benefit Specialist at 234.312.5082 for details.

Beneficiary: A person or entity named by you to receive life insurance benefits in the event of your death.

Dependent Life: Dependent Group Term life offers you peace of mind knowing you'll have financial help if your legal spouse or a dependent child dies.

EOI (Evidence of Insurability):

EOI, also known as proof of good health, is the documentation of the employee or spouse's health in order to be approved for certain levels of coverage.

If EOI is necessary, an applicant must confirm his or her physical fitness in writing through Securian's online EOI application process. After the close of open enrollment, if you have chosen an option that requires EOI, you will be notified by Securian in the mail.

Group Term Life: A type of life insurance offered to a group by an employer. In most cases, the cost of group coverage is less than individual coverage. Group term life builds no cash value and ends when you lose eligibility through your termination/retirement or transfer to a benefit ineligible position.

Imputed Income: Employer-provided group term life insurance in excess of \$50,000 is considered by the Internal Revenue Service (IRS) to be a benefit that is taxable as income. Summa Health is required to calculate taxable income to be reported on the employee's W-2. The amount in excess of \$50,000 is called imputed income.

Portability and Conversion: Summa Health's Basic Life, Supplemental Life, and Spouse Dependent Life include portability and conversion provisions. Should you lose coverage due to termination, retirement, or other circumstances, Securian will notify you of your options to port or convert some, or all, of your group term life insurance.

Special Notice: If you and your legal spouse both work for Summa Health and are both eligible for Basic Group Term Life Insurance, you cannot enroll your spouse for Dependent Life. Further, if you and your legal spouse both work at Summa Health and are both eligible for dependent life insurance, only one of you may enroll with Child Life Insurance for your eligible child(ren).

Supplemental: Supplemental life can provide additional financial protection for your family. Employees may purchase Supplemental Life and AD&D insurance to complement their Basic Summa-provided policy.

Supplemental rates are based on your age and will change as your age advances.

Waiver of Premium: If you become totally disabled according to the terms of your policy, life insurance premiums may be waived.

Employee Basic Life and AD&D

Am I provided life insurance through my workplace?

Yes.

Full-time, non-management employees are provided with a Basic Life and AD&D policy equal to one times annual salary, up to a maximum of \$50,000 at no cost! Part-time employees are provided with a Basic Life and AD&D policy equal to \$15,000 at no cost!

Employee Supplemental Life and AD&D

What is Supplemental Life and AD&D Insurance?

If you are interested in a higher amount of life insurance than the amount provided to you by Summa Health at no cost, you can increase the total amount of life insurance payable upon your death by purchasing Supplemental (or additional) Life and AD&D insurance.

How much Supplemental Life can I choose?

Select from the amounts below:

\$10,000	\$25,000	\$50,000	\$75,000
\$100,000	\$150,000	\$200,000	\$250,000
\$300,000	\$350,000	\$400,000	\$450,000
\$500,000			

What is the cost for Supplemental Life?

Your bi-weekly cost depends on your age and the amount of insurance you purchase. Your options and costs are displayed in the Lawson online enrollment system. As your age increases over time, you automatically move into the new age bracket with a new cost per-pay deduction. If your age increases on a January 1 birth date, the new cost per-pay deduction will increase for that year; if your age increases on January 2 or after, the new cost per-pay deduction will change on the following January 1.

What happens to my life insurance at age 65 and age 70?

At age 65, your life insurance (basic, AD&D, Supplemental and Spouse Dependent Life) will reduce to 67% of the amount in force prior to age 65. At age 70, your life insurance coverage will reduce to 45% of the amount in force prior to your first reduction.

After age 65, there can be no further increases in your life insurance coverage; however you can decrease your amount of coverage during annual enrollment by contacting Employee Benefits at **234.312.5082**.

Spouse and Child Dependent Life

What is Dependent Life Insurance?

Dependent Life Insurance offers you peace of mind knowing you'll have financial help if your legal spouse or dependent child passes away.

Who is eligible to be covered?

Eligible covered family members include:

- Your legal spouse
- Your natural, step, adopted, or foster children who depend on you for support and maintenance
- A child that resides with you on a permanent basis for whom you are the legal guardian
- Your child from live birth up to age 26

What Spouse and Child Dependent Life options are available to me?

The options and per-pay (after-tax) deductions are shown below:

Spouse Coverage Amount	Per-pay Deduction
\$10,000	\$0.78
\$25,000	\$2.58
\$50,000	\$5.16
\$100,000	\$10.33
Child* Coverage Amount	Per-pay Deduction
\$10,000	\$0.46
\$25,000	\$1.15

*Natural, legally adopted or stepchildren who are less than 26 years old. Children age 26 and over if physically or mentally incapable of self-support, were incapable of self-support prior to age 26 and are financially dependent on you for more than one-half their support and maintenance.



Visit [LifeBenefits.com](https://www.lifebenefits.com) to manage your beneficiary information. Once your designation is on file, click **View Beneficiary** to see your information and click **Update Designation** if you need to make changes.

2022 Supplemental Life and AD&D Chart

Supplemental Life and AD&D insurance is available in the amounts shown below. Deductions are taken per-pay on an after-tax basis.

As your age increases over time, you automatically move into the new age bracket with its new cost per pay deductions as follows: If your age increases on a January 1 birth date, the new cost per pay deduction will increase in the same year. If your age increases on January 2; and thereafter, the new cost per pay deduction will increase the following year.

For coverage amounts and associated per-pay deductions for age 65 and over, contact our dedicated life insurance specialist at **234.312.5082**.

Coverage Amount	Under Age 25	Age 25 – 29	Age 30-34	Age 35-39	Age 40-44	Age 45-49	Age 50-54	Age 55-59	Age 60-64
\$10,000	\$0.21	\$0.23	\$0.27	\$0.30	\$0.33	\$0.47	\$.80	\$1.53	\$1.66
\$25,000	\$0.53	\$0.58	\$0.68	\$0.75	\$0.83	\$1.18	\$2.00	\$3.83	\$4.15
\$50,000	\$1.05	\$1.15	\$1.35	\$1.50	\$1.65	\$2.35	\$4.00	\$7.65	\$8.30
\$75,000	\$1.58	\$1.73	\$2.03	\$2.25	\$2.48	\$3.53	\$6.00	\$11.48	\$12.45
\$100,000	\$2.10	\$2.30	\$2.70	\$3.00	\$3.30	\$4.70	\$8.00	\$15.30	\$16.60
\$150,000	\$3.15	\$3.45	\$4.05	\$4.50	\$4.95	\$7.05	\$12.00	\$22.95	\$24.90
\$200,000	\$4.20	\$4.60	\$5.40	\$6.00	\$6.60	\$9.40	\$16.00	\$30.60	\$33.20
\$250,000	\$5.25	\$5.75	\$6.75	\$7.50	\$8.25	\$11.75	\$20.00	\$38.25	\$41.50
\$300,000	\$6.30	\$6.90	\$8.10	\$9.00	\$9.90	\$14.10	\$24.00	\$45.90	\$49.80
\$350,000	\$7.35	\$8.05	\$9.45	\$10.50	\$11.55	\$16.45	\$28.00	\$53.55	\$58.10
\$400,000	\$8.40	\$9.20	\$10.80	\$12.00	\$13.20	\$18.80	\$32.00	\$61.20	\$66.40
\$450,000	\$9.45	\$10.35	\$12.15	\$13.50	\$14.85	\$21.15	\$36.00	\$68.85	\$74.70
\$500,000	\$10.50	\$11.50	\$13.50	\$15.00	\$16.50	\$23.50	\$40.00	\$76.50	\$83.00

Life Insurance at Age 65 and Age 70

At age 65, your life insurance (Basic, AD&D, Supplemental and Dependent Life) will reduce to 67% of the amount of life insurance in force prior to age 65. At age 70, your life insurance coverage will reduce to 45% of the amount of life insurance in force prior to your first reduction.

After age 65, there can be no further increases in your life insurance coverage; however, to decrease your amount of coverage during annual enrollment, contact the designated Employee Benefits representative at 234.312.5082.



Retirement Savings Plans



Plan Feature	Description
Overview	You are now eligible to take advantage of one of the best savings and investment opportunities available for retirement planning, the Summa Health 403(b) Retirement Savings Plan or the Summa Health 401(k) Retirement Savings Plan (for SMSO employees). Very shortly following your date of hire, you will receive an enrollment kit mailed directly to your home by Fidelity.
Eligibility	Summa Health, Summa Health Medical Group and Summa Management Services Organization employees who are at least 18 years of age and have completed one year of service, and are working at least 1,000 hours in an eligible position during the calendar year are eligible for matching contributions.
Key Features of your Plan, Tax and other Benefits	<ul style="list-style-type: none"> • There is no waiting period; you can enroll at any time through NetBenefits.com/Easy. • Through payroll deduction, you may contribute up to 50% of your eligible pay on a pre-tax basis, up to the 2022 annual IRS dollar limit of \$20,500; If you are age 50 or older, you are eligible for “catch up contributions” and your total IRS limit is \$27,000. • The Plan accepts rollovers from other eligible workplace retirement/savings plans. You may be able to transfer your balances, including IRAs, directly to your Summa Health 403(b) or 401(k) Retirement Savings Plan.
Summa Matching Contributions	<ul style="list-style-type: none"> • You are eligible for the Summa matching contributions after one (1) year of employment in which you worked at least 1,000 hours or more. • Summa matches 100% of the first 1% you contribute to the plan, and 50% of up to the next 5% - for a total match of 3.5% when you contribute 6% or more.
Investing Your Contributions	You are free to choose investments that work for you. Choose from numerous investment options offered through Fidelity Investments selected especially for Summa Health employees. You may call Fidelity at 800.343.0860 or visit fidelity.com for a free mutual fund prospectus. As a plan participant you also have access to Fidelity’s BrokerageLink® option, a self-directed brokerage account within the 403(b) or 401(k) plan.
Vesting	<ul style="list-style-type: none"> • You are immediately 100% vested in the monies you invest in your Summa Health Retirement Savings Plan and any returns you earn on your contributions. • You earn the right of ownership to your Summa matching contributions after completing three consecutive years of service in which you have worked at least 1,000 hours or more per year.
Managing Your 403(b) or 401(k) Account	<ul style="list-style-type: none"> • Online account access is available at netbenefits.com. With Fidelity NetBenefits® you can enroll, make investment elections, and name your beneficiary(ies). Fidelity’s customer service representatives are available at 800.343.0860, Monday through Friday from 8:00 a.m. to 12 a.m. ET (midnight). • Our dedicated Fidelity Workplace Planning and Guidance consultant is on site at Summa several times a month for one-on-one consultations. To schedule your personal planning consultation go to nb.fidelity.com/public/nb/default/fort to register online or call 800.642.7131 for assistance.
Enroll Today	Easy Enroll takes just 60 seconds, visit NetBenefits.com/Easy or call Fidelity at 800.343.0860 .

Visit [NetBenefits.com/Easy](https://netbenefits.com/easy) or call Fidelity at 800.343.0860 for more information.

Flexible Spending Accounts (FSA)

A Great Way to Save!

A FSA is a type of benefit account that allows you to set aside pre-tax dollars from your paycheck to help you pay for eligible out-of-pocket healthcare and dependent care expenses.



Summa Health offers two types of FSA plans:

- Health Care FSA (HCFSA)**
 Use your HCFSA account to pay for eligible medical, dental, and vision care expenses that aren't covered by your insurance plan or elsewhere.
- Dependent Care FSA (DCFSA)**
 Use your FSA monies to pay for child daycare expenses for children under age 13 or a tax-eligible dependent that can't care for him or herself or elder care for a spouse or other relative living in your home who is physically or mentally incapable of self-care and that you claim as a dependent on your federal tax return.

Considerations when choosing whether to enroll in an FSA:

- Do you anticipate having eligible out-of-pocket expenses, such as co-pays, deductibles, medical/dental/vision expenses not fully paid by your insurance plans?
- Do you currently pay daycare expenses for your child(ren)?
- If considering the DCFSA, have you consulted with your Financial Advisor to determine if it is best for your tax situation?
- If enrolling in an FSA, use the contribution calculator at [wageworks.com/employees/calculators/](https://www.wageworks.com/employees/calculators/) to help determine the appropriate contribution rate/amount to minimize having leftover balances that may be forfeited at the end of the year.

Plan Feature	Health Care FSA (HCFSA)	Dependent Care FSA (DCFSA)
How It Can Help You	This benefit account is a great way to save on income taxes while you budget for and help offset medical expenses that are not paid by your regular insurance for you and your eligible dependents.	For DAY CARE expenses for your children while you work; NOT for dependent medical expenses. To qualify: <ul style="list-style-type: none"> You and your spouse must work or attend school full-time AND Your child must be under 13 or a tax-eligible dependent that can't care for him or herself.
How Much You Can Contribute	<ul style="list-style-type: none"> Each plan year, you decide how much money you want to set aside for your qualifying out-of-pocket HCFSA expenses through regular bi-weekly pre-tax payroll deductions. The maximum amount you may contribute to the account is based upon IRS-defined limits. For 2022, you may contribute up to a maximum of \$2,750 per year per employee. 	<ul style="list-style-type: none"> Each plan year, you decide how much money you want to set aside for your DCFSA, through regular bi-weekly pre-tax payroll deductions. The maximum amount you may contribute to the account is based upon IRS-defined limits. For 2022, you may contribute up to a maximum of \$5,000 if single or married filing joint tax returns (or \$2,500 if you are married but filing separate income tax returns).

<p>Examples of Eligible Expenses</p>	<ul style="list-style-type: none"> • Medical, dental and vision deductibles, co-pays and coinsurance • Prescription contacts & eyeglasses, laser eye surgery • Hearing exams • Chiropractic care • Orthodontia (braces and retainers) • Prescription drugs (for non-cosmetic use) <p>For a complete list of expenses that are eligible for FSA reimbursement, refer to: wageworks.com/employees/support-center/healthcare-fsa-eligible-expenses-table/ or call 877.924.3967.</p>	<ul style="list-style-type: none"> • Care in a home or day care center for your children (up to age 13) you claim as a dependent on your taxes • After-school care program • Pre-school • Summer day camp <p>For a complete list of expenses that are eligible for FSA reimbursement, refer to: wageworks.com/employees/support-center/dcfsa-eligible-expenses-table/ or call 877.924.3967.</p>
<p>Reimbursement Process</p>	<ul style="list-style-type: none"> • During the year, you can use your HCFSA debit visa card or be reimbursed directly from your HCFSA with tax-free dollars for qualified medical services that are not covered by insurance. • You have access to the full amount you initially elected to contribute for the year, less any paid claims. 	<ul style="list-style-type: none"> • During the year, you can be reimbursed directly from your DCFSA with tax-free dollars for qualified dependent care expenses. • Provider's Social Security number (or taxpayer ID) and receipt may be required. • You will be reimbursed for eligible claims incurred and only up to the amount currently in your account.
<p>Important Deadlines</p>	<ul style="list-style-type: none"> • Eligible expenses for 2022 must be incurred by December 31, 2022. • You have until March 31, 2023 (2022 claim run-out-period), to file your eligible 2022 claims, as long as you are an active participant as of December 31, 2022. Do not use your 2023 health Equity/WageWorks health care debit card to pay for 2022 health care expenses during the claim run-out period. You must file a manual FSA claim form from wageworks.com to remit 2022 eligible expenses. • If your plan coverage terminates prior to December 31, 2022, you have 60 days from the plan termination date to remit your eligible claims for reimbursement. 	<ul style="list-style-type: none"> • Eligible expenses for 2022 must be incurred by December 31, 2022. • You have until March 31, 2023 (2022 claim run-out period), to file your eligible 2022 claims, as long as you are an active participant as of December 31, 2022. • If your plan coverage terminates prior to December 31, 2022, you have 60 days from the plan termination date to remit your eligible claims for reimbursement.
<p>Remaining Balance at End of Year</p>	<p>Up to \$500 of any remaining balance as of December 31, 2022, can be rolled over for use in 2023.</p>	<p>Any remaining balance as of December 31, 2022, is forfeited.</p>
<p>Learn More</p>	<p>To estimate your expenses and contributions or to learn more about FSAs, visit: wageworks.com or call WageWorks at 877.924.3967.</p>	

NOTE: As a newly eligible hired or transferred employee, your FSA is effective on the first of the month following your event date (i.e.: hire or transfer). Therefore, you should determine your eligible expenses based on your FSA effective date through the end of the Plan Year (December 31, 2022).



Visit HealthEquity/WageWorks website at wageworks.com or call **877.924.3967** for more information.

Identity Theft Protection



Opt-in to Cyber Safety

No one intends to be unsafe online. Help protect your identity and devices with Norton LifeLock Benefit Plans. Let us help you empower you and your family to live your digital lives safely.

Device Security

Anti-virus software and multilayered, advanced security helps protect devices against existing and emerging threats, including malware and ransomware.

Online Privacy

Norton Secure VPN protects devices and helps keep online activity and browsing history private. Privacy Monitor scans common public people-search websites to help you opt-out. And SafeCam alerts you and blocks attempts to access your webcam.¹

Identity

We monitor for fraudulent use of personal information, and send alerts when a potential threat is detected.[†]

Home & Family

Take action to monitor your child's online activity with easy-to-use tools to set screen time limits, block unsuitable sites, and monitor search terms and activity history.

Note: No one can prevent all identity theft or cybercrime.

[†] We do not monitor all transactions at all businesses.

¹ Norton Cloud Backup, Norton SafeCam, Norton Family, and Norton Parental Control features are not supported on Mac, Windows 10 in S mode, and Windows running on ARM processor.

Here are Just Some of the Features Norton LifeLock Offers You:

- LifeLock Identity Alert System
- Up to \$1 million in identify restoration
- Prior ID Theft Remediation
- 3 Bureau Credit Monitoring
- 3 Bureau Credit Reports + Scores
- Norton Secure VPN
- Privacy Monitor
- Home Title Monitoring
- Financial Account Activity Alerts
- New Checking & Savings Application Alerts
- Bank Account Takeover Alerts
- Dark Web Monitoring
- ID Verification Monitoring
- Lost Wallet Protection
- Norton Family Parental Controls
- Norton Device Protection
- 50 GB Online Backup
- Wi-Fi Security
- Password Manager

As an employee of Summa Health, you will receive special, reduced pricing. Choose from the coverage levels below:

Coverage Level	After-Tax Deduction Per-Pay
Employee Only	\$3.69
Family*	\$6.91

*Family includes eligible dependents who live within the employee’s household, or are financially dependent on the employee. LifeLock services will only be provided after receipt and applicable verification of certain information about you and each family member. In the event you do not complete the enrollment process for any family member, those individuals will not receive LifeLock services, but you will continue to be charged the full amount of the membership selected until you cancel or modify your plan at your employer’s next open enrollment period. Note that we will NOT refund or credit you for any period of time during which we are unable to provide LifeLock services to any family member on your plan after your benefit effective date, due to your failure to submit the information necessary to complete enrollment. If you do not complete the enrollment process for each family member, you may continue to pay more for LifeLock services than you otherwise would if you had selected a lower tier plan.

- **Take Action when you receive your LifeLock Welcome email to complete the enrollment process so that your coverage is active January 1.**
- **Have an Existing LifeLock Membership? Don’t forget to cancel your existing membership just prior to January 1.**

Required Terms & Conditions Acceptance

By submitting your enrollment in the LifeLock with Norton Benefit Plan, you represent that you have the authority to enroll those dependents indicated in the LifeLock with Norton Benefit Plan and you have read and agreed to the Terms and Conditions and Privacy Policy, which can be found at <https://www.nortonlifelock.com/content/dam/nortonlifelock/pdfs/eulas/licensing-agreement/customer-agreement-en.pdf> and <https://www.nortonlifelock.com/privacy>, on behalf of yourself and on behalf of any member of your family you are enrolling.

Required Disclaimers: No one can prevent all identity theft or cybercrime. We do not monitor all transactions at all businesses.

Voluntary Benefits

For more information contact a Voluntary Benefits Call Center Specialist at 888.317.3759.



Hospital Indemnity Insurance

Unum's Group Hospital Indemnity Insurance can complement your health insurance to pay for the cost of a hospital stay due to a covered accident or illness. This benefit can be used to help you pay for out-of-pocket medical expenses such as co-pays and deductibles. You do not need to be enrolled in Summa Health's Employee Medical Benefit Plan to enroll!

What's included?

- \$1,000 for each covered hospital admission – once per calendar year, per insured
- \$100 for each day of a covered hospital stay, up to 15 days, once per calendar year, up to a maximum of \$1,500

Who can get coverage?

- You (if you are actively working)
- Your legal spouse (ages 17-64)
- Your child(ren) until their 26th birthday regardless of marital or student status

What is my per-pay cost for coverage?

Choose from the following:

Employee	Employee & Spouse	Employee & Child(ren)	Employee, Spouse & Child(ren)
\$11.92	\$23.30	\$15.51	\$26.90



New for 2022!

UNUM will increase the child coverage under your Critical Illness benefit from 25% to 50% - at no additional cost!

Critical Illness Insurance

A critical illness can impact your family at any time. Unum's Critical Illness Insurance is designed to help pay for the costs associated with the initial occurrence of the following, as defined in the policy.

100%	<ul style="list-style-type: none">• Heart Attack• Major Organ Transplant• Invasive Cancer• Loss of Sight	<ul style="list-style-type: none">• Coma*• Occupational HIV• Stroke• End Stage Renal Failure• Paralysis
25%	<ul style="list-style-type: none">• Cerebral Palsy• Carcinoma in Situ (cancer)• Cystic Fibrosis	

*As a result of a severe traumatic brain injury

What benefit will I receive through Critical Illness Insurance?

You are paid a lump sum to help manage expenses (medical and/or non-medical related) so you can focus on recovery. You and your legal spouse can choose the level of coverage from \$5,000 to \$30,000 (in \$1,000 increments). Dependent children are automatically covered at 50% of the employee's coverage at no additional cost. Child coverage ceases at age 25. Some exceptions apply - see summary plan description for details.

- Guaranteed issue - no health questions asked!
- Your premiums will not increase as you age
- Coverage is portable; keep your policy even if you change jobs or retire
- \$50 Wellness Benefit - you and other covered family members can receive a valuable incentive just for participating in important annual tests or screenings

Note: Pre-existing condition limitations may apply.

Individual Whole Life Insurance

Whole Life Insurance is designed to pay a benefit upon your death. It can also gain cash value you can use while you are living. Whole Life offers an affordable, guaranteed level of premium that won't increase as you age. Coverage can continue when you retire or leave your employer since you own the policy.

- Coverage is available to eligible employees age 15 to 80 who are actively at work.*
- The policy accumulates cash value at a guaranteed rate of 4.5%. Once your cash value builds to a certain level, you can borrow from the cash value or use it to buy a smaller "paid-up" policy with no more premiums due.

Who is eligible for coverage?

You, your legal spouse, your dependent children, and grandchildren.

Individual spouse coverage can be purchased without purchasing employee coverage. The minimum policy amount is \$2,000. The actual benefit amount is based on the premium amount chosen, age at issue, and tobacco usage.

What policies are available for children?

You may purchase an Individual Whole Life policy, a Child Term Life benefit, or both.

Individual Child Whole Life coverage can be purchased without purchasing employee or spouse coverage. Each policy covers one child or grandchild. Coverage is available up to \$50,000; benefit amounts are based on issue age and premium selected. Your children can keep the policy, even if you leave your employer.

Child Term Life Benefit – You must purchase coverage for yourself to add the Child Term Life benefit. Each policy covers all eligible children. Coverage is available from \$1,000 to \$10,000 and ends when your policy ends or when the last child turns 25. Coverage will be canceled if employee coverage is canceled.

What additional features are offered?

- Living Benefit Option Rider – request up to 100% of the death benefit amount (to a maximum of \$150,000) if you are diagnosed with a medical condition that would be paid to your beneficiaries when you die.
- Long Term Care Rider – Allows you to use the death benefit to pay for limited long term care.

Other important facts:

*Eligible employees must be actively at work to apply for coverage. Being actively at work means on the day the employee applies for coverage, the individual must be working at one of his/her company's business locations. If applying for coverage on a day that is not a scheduled workday, the employee will be considered actively at work as of his/her last scheduled workday. Employees are not considered actively at work if they are on a leave of absence.

Paid Time Off (PTO) Program

Summa Health recognizes the need for employees to have reasonable amounts of time away from work for personal or family illness, child or elder care issues, vacations, national holidays and personal business. Refer to the PTO schedule below for details. Refer to the PTO schedule below for details or visit Human Resources>>Benefits>>Paid Time Off (PTO) on Summa@Work for more information.

PTO Plan – Non-Professional

Years of Service	PTO Factor	Maximum Annual Accrual	Year End Limit
0 < 5	.0808	168	120
5 < 15	.1000	208	120
15 < 20	.1192	248	120
20 +	.1385	288	120

PTO Plan – Management

Years of Service	PTO Factor	Maximum Annual Accrual	Year End Limit
0 < 10	.1173	244	120
10 +	.1462	304	120

PTO Plan – Professional

Years of Service	PTO Factor	Maximum Annual Accrual	Year End Limit
0 < 5	.0885	184	160
5 < 15	.1077	224	160
15 < 20	.1270	264	160
20 +	.1462	304	160

Note: Your PTO is aligned with your current position & subject to change if your position changes.

Employee Support Services

Bereavement Leave

As a regular full-time employee, you may be granted Bereavement Leave to attend the funeral and/or complete family business in the event of the death of an immediate family member. Bereavement Leave may be paid up to a maximum of 24 hours if previously scheduled to work. Part-time employees will be granted paid bereavement with the previous provisions, but only for previously scheduled work days that are requested as bereavement which fall on or before the day of the funeral.

Jury Duty Pay

Any full-time or regularly scheduled part-time employee who is called for jury duty and exhibits the jury summons to the supervisor shall be excused to perform such service and shall be paid the employee's hourly rate for hours previously scheduled to to work.

Additional Employee Support Services

- Employee Purchase Program through Purchasing Power
- Payroll Direct Deposit
- Ohio HealthCare Federal Credit Union
- Center for Corporate Health/Employee Health Services
- Tobacco-Free Initiative
- Employee activities and discount programs
- Service Awards
- Diversity Advisory Council
- Educational Assistance
- Auto & Home Discounts through Liberty Mutual

Enrollment Information

As you begin, here are some important things to know.

You must first activate your Lawson password and create a unique password by contacting Computer Support at **234.312.2222**.

Important Items to Remember When You Enroll:

Eligible Family Members

You must first create a record for each family member before you can add him/her to your medical, dental or vision plan(s). This is the first screen you will see when you begin enrollment. Review the Family Member Eligibility Guidelines on page 6 to make sure your family member meets the definition of eligible. When you have finished creating records for your family member(s), select **Continue**.

Enrollment Order

The system displays the list of each benefit plan for which you are eligible. Select **Continue** to move forward through the enrollment screens.

Note: Near the end of the enrollment process, the system will display a final summary of your chosen selections and associated costs.

Saving Your Elections

On the final enrollment screen, you will be prompted to select the **Save My Elections** button. Before you do so, make certain you have selected everything you want and that you have enrolled/attached the correct family member(s) to your medical, dental, and/or vision plan.

Save My Elections

When you select **Save My Elections**, your information is finalized and forwarded to Employee Benefits for final review and processing. **Your information will be lost unless you select "Save My Elections"**.



Contact Summa Health Employee Benefits at 234.312.6262 if you discover a discrepancy. After you have finalized your information, if you wish to make a change during your enrollment window, you must contact Employee Benefits.

Don't forget to print and/or email your personal Confirmation Statement when prompted.

Are You Ready to Enroll?

- Do you know your Lawson password? You cannot enroll for your benefits without it. Contact the Computer Help Desk at 234.312.2222 (telephone number in bold) for assistance.
- If you enroll from a home computer, open a browser that supports Lawson self-service. Chrome is the preferred web browser. (type in orange print) using other browsers may result in unwanted results. Contact the Computer help Desk for questions about your web browser or other technical issues at 234.312.2222 (telephone number in bold)
- You cannot use a tablet or mobile device to enroll online.
- If you enroll from a home computer, you must be registered with a DUO account (a second level of security). Email duosecurity@summahealth.org with questions.

1 Start Here

From a Work Computer

- Open Summa@Work and on the main page, click the **Lawson** icon under **Popular Links**. (See Figure 1)
- The Lawson Sign In page will open

From Your Home Computer

- Open your web browser (Chrome is recommended) and type in the website address:
summahealth.org/employeeemote
- Next, click **Remote Access** then **Lawson Employee Self-Service**. (See Figure 2)
- You will be directed to the Lawson Sign In page

Figure 1

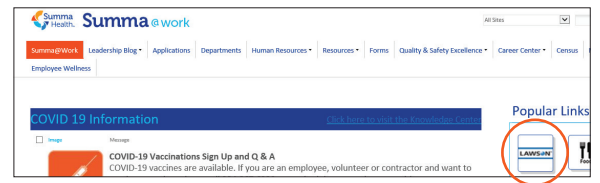
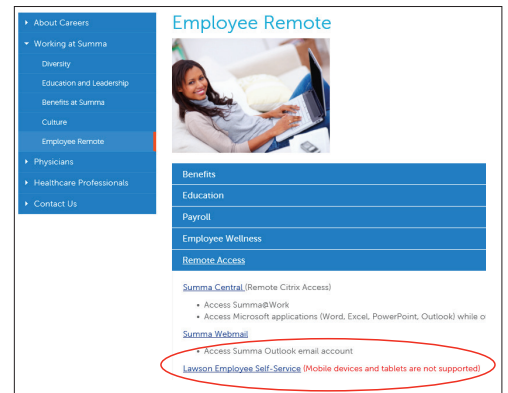


Figure 2



2 The Lawson Sign In Page

- Depending on your browser settings, you may see **Sign in with one of these accounts**. Select **Summa Health Account**. (See Figure 3)
- On the Sign In screen, enter your normal Lawson User Name and Password. (See Figure 4)

Figure 3

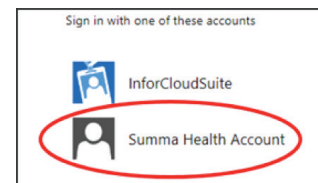
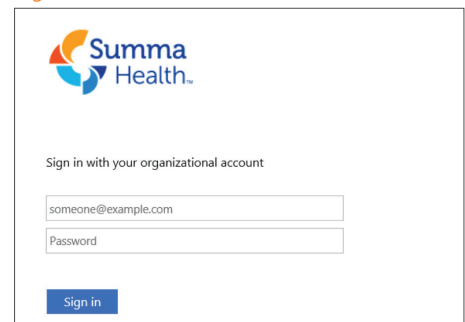


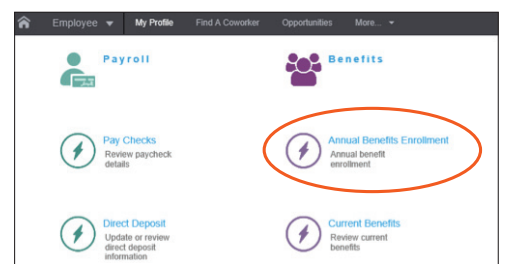
Figure 4



3 Entering Lawson Employee Self-Service

From your work or home computer

- When the Lawson screen opens, click **Annual Benefits Enrollment** found under **Benefits**.
- You can now begin



Helpful Hints

As you move through the enrollment screens, you will see action buttons **Add**, **Continue**, **Previous** and **Exit**.



Add – Select Add to save chosen selections and to add a family member record

Continue – Select Continue to move forward to the next screen

Previous – Select Previous to move back to the Previous screen

Exit – Only use Exit if you wish to stop and exit the online system without saving your chosen selections.

Your information will not be saved if you exit; you will have to begin the enrollment process over again.

Enrolling Your Family Members to Your Medical, Dental and Vision Plans

One of the first screens you see when you begin online enrollment is the Current Family Members screen.

- Listed family members include those you currently cover or have covered in the past. Once you move forward into the specific medical, dental, and vision enrollment screen, that is where you would attach – or enroll – your family member(s) to be covered on each plan.
- If your family member does not appear in the Current Family Members screen, you have to ADD his or her record before you move forward. On the Current Family Members screen:
- Be careful not to enter a family member more than once;
- Don't add yourself;
- Review your family member's information; if you find a discrepancy (name, birthdate, gender, SSN), contact Employee Benefits for a correction after you complete the enrollment process.

Click Save My Elections

Your online selections will not be saved unless you click the **Save My Elections** button when it appears.



Don't forget to email, review and print your confirmation statement when finished. This is your proof of enrollment.

If You Add a Family Member to Your Medical Plan

Proof - or copies of verification documents are required when adding a family member to your medical plan. See page 6 for the list of acceptable documents.

If your information is not submitted to Employee Benefits within 31 days of your benefit eligibility date, your family member's coverage may be delayed until a later date.



Don't wait... send to **summabenefits@summahealth.org** today. If documentation is received and approved within 31 days of your benefit eligibility date, coverage for your family members will begin without delay. Contact Employee Benefits at **234.312.6262** with any questions.

Benefit Addendums

Summa Health Medical Group – Physicians

Addendum to the New Employee Enrollment Guide

The following summary represents benefits unique to Summa Health Medical Group physicians. Please refer to your Employment Agreement for additional detail.

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

- Full-time physicians receive Group Term Basic Life/AD&D coverage at one times annual base salary, fully paid by Summa Health, to a maximum of \$300,000.
- Part-time physicians receive Group Term Basic Life/AD&D coverage, fully paid by Summa Health, in the amount of \$15,000.

Short-term Disability (STD)

STD is available to full-time physician employees after successful completion of 90 days of continuous full-time employment; who take a medical leave of absence for their own serious health condition that has been approved through Summa Health's Absence Management Department.

Upon approval, physicians will be paid STD at 100% of their regular weekly earnings for up to ninety (90) days beginning on the eighth day of an illness or injury, or until they return to work; whichever occurs first.

Physician employees are encouraged to reference their Employment Agreement for more information regarding this benefit.

Long-term Disability (LTD)

If you are a full-time physician employee, Long-term Disability (LTD) coverage is designed to provide financial security for you and your family in the event that you suffer from a disability lasting longer than 90 days.

Approved benefits begin after you have been out of work for 90 days due to a non-occupational illness or injury and you are determined to be "disabled" under the provisions of the Plan. The LTD coverage, which is fully paid by Summa Health, will provide you a benefit of 60% of your earnings up to a maximum of \$12,500 per month for the period of time which you continue to be disabled until you reach the later of your Social Security Normal Retirement Age or the Maximum Benefit Period, in accordance with policy provisions.

SummaMatch 403(b)

Physician employees of the Summa Health Medical Group are eligible for the Summa matching contributions after one (1) year of employment in which they work at least 1,000 hours or more. Summa matches 50% on the first 6% contributed by the physician each pay.

Summa Health 457(b)

Employees who are classified as a Vice President or above or a Physician with salaries greater than \$200,000 are eligible for the Summa Health 457(b).

Paid Time Off (PTO)

Refer to your Employment Agreement for details.

Summa House Staff Residents – Addendum to the New Employee Enrollment Guide

The following summary represents benefits unique to Summa House Staff Residents. Please refer to the Graduate Medical Education Policies and Procedures Manual for additional detail.

Plan Eligibility Dates

House staff resident's benefits are effective immediately upon hire.

Paid Time Off (PTO)

Refer to the Graduate Medical Education Policies and Procedures manual found on the Medical Education onboarding site for details regarding paid time off.

Short-term Disability (STD)

House staff residents are ineligible for short-term disability. Refer to the Graduate Medical Education Policies and Procedures manual found on the Medical Education onboarding site for details regarding resident leaves of absence provisions.

Summa Health System – Barberton Campus Union Employees Addendum

The following summary represents benefits unique to Barberton Campus Union employees based on the agreement between Summa Health – Barberton Campus and Local No. 2317. Please refer to the union agreement for additional detail.

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

Employees receive a Group Term Basic Life/AD&D benefit, fully paid by Summa Health, at \$12,000.

Supplemental Life /Accidental Death & Dismemberment (AD&D) Insurance

Employees are eligible to purchase Supplemental (additional) group term life and AD&D in the amount of \$12,000.

NOTE: If Basic Life and Supplemental Life and AD&D is elected, coverage will begin on the first of the month following the employee's completion of ninety (90) days of full-time service.

Spouse and/or Child Dependent Life Insurance

Employees are ineligible for Dependent Life Insurance.

Life Insurance at Age 65 and Age 70

Typically, there is a reduction in life insurance at the age of 65 and age 70; however, there is no life insurance age reduction for Union employees.

Vision Service Plan (VSP)

Employees are eligible for vision and hearing benefits offered through the AFSCME union; therefore, SBH union employees are not eligible for the Vision Service Plan (VSP) benefits.

UNUM Hospital Indemnity Insurance

Employees are ineligible for the Hospital Indemnity Insurance plan.

About This Guide

This Guide has been developed to provide Summa Health employees with a summary of the new employee enrollment process and to illustrate major plan provisions for comparison purposes. For additional information, you should refer to the appropriate plan booklet or Summary Plan Description for a more detailed explanation of services and/or supplies that are covered or excluded.

Benefit Eligibility

The information contained in this Guide pertains to full-time and part-time benefit eligible employees in positions of 20 hours per week or greater.

Coordination of Benefits (COB)

If a covered family member is also enrolled in another medical plan that is his or her "primary" payor of benefits, then benefits under Summa Health's medical plan are paid as "secondary", using the Non-Duplication of Benefits methodology of COB. Under this COB method, the secondary plan calculates its benefit as though it was primary; subtracts the payment already made by the primary plan; and then pays the balance, if any. Benefits payable under a secondary plan are determined on a claim-by-claim basis, with plan deductibles, co-insurance, co-payment and exclusions also being applied. If you have specific questions regarding the COB claims payment process, please contact SummaCare Customer Service at 330.252.5922 or 844.751.0436.

Making Benefit Changes During the Year

Outside of the annual enrollment period, you can only make changes to your existing benefits if you experience a **qualifying life status** event such as: marriage; birth of a baby; divorce; spouse's loss of coverage; employment or coverage status change for you or your legal spouse; child becoming newly eligible or ceasing to be eligible, etc.



Family member verification documents must be submitted to Employee Benefits within 31 days of the qualifying event or coverage for your legal spouse and/or child will be delayed until such documentation is provided. Once the information is provided, your spouse and/or child will be enrolled on the 1st of the month following receipt.

To ensure any benefit coverage changes you wish to make as a result of a qualifying event are permitted, you must take the following action steps.

1. Benefit Enrollment/Change Form – Complete this form, located on Summa@Work, and indicate any changes you wish to make to each benefit plan
2. Qualifying Event Documentation – Make a copy of the Qualifying Event document (Example: marriage certificate; divorce document; loss of coverage letter; newborn's birth certificate; etc.)
3. Family Member Verification Documentation – If adding a legal spouse or eligible child to your medical coverage, you must prove his or her relationship to you. Make a copy of the required acceptable verification documents, for each family member, as outlined on the Family Member Guidelines page 6 of this Guide.
4. Submit all documents along with your Benefits Enrollment/Change Form to Employee Benefits within 31 days of the Qualifying Life Status Event; email to:
summabenefits@summahealth.org

Caution: Failure to provide **all** required information as indicated above within the 31-day window will result in 1) a denial of your request and/or 2) delay or denial of coverage for your legal spouse and/or eligible child(ren).

Disclaimer: Summa Health Employee Benefits has made every attempt to ensure the accuracy and reliability of the information provided in this document for educational and information purposes. In case of any conflict between the provisions of the plan(s) and those provided in this document, the provisions of the plan document(s) shall take precedence. For more information, please consult the Summary Plan Description(s) available on Summa@Work or contact Employee Benefits. External website links, provider materials and information are maintained by the vendor; therefore, Summa Health is not responsible, nor does it guarantee, the accuracy, relevance, timeliness, or completeness of any such provider information.

Contact Information

Delta Dental of Ohio

800.524.0149

deltadentaloh.com/summahealth

Group Numbers:

Delta Dental Standard 2104-0001

Delta Dental High 2104-1000

Fidelity Investments

800.343.0860

NetBenefits.com/Easy

HomeLink

(Durable Medical Equipment)

844.358.2549

Impact Solutions

800.227.6007

myimpactsolution.com

Account Login: [summa](#)

LifeLock with Norton Benefits

During Open Enrollment, contact our Voluntary Benefits Call Center at 888.317.3759

- Once you enroll, keep your information updated, or report issues at LifeLock **800.607.91747**

Purchasing Power

(Specialty e-retailer offering consumer products)

866.670.3479

summa.purchasingpower.com

Securian Financial

800.843.8358

234.312.5082 for Summa Health Benefits

[//LifeBenefits.com/plandesign/summahealth](http://LifeBenefits.com/plandesign/summahealth)

Policy 70290

SummaCare

330.252.5922

summacare.com

Group # G011317DA

Summa Health's Wellness Works (Employee Wellness Program)

330.375.7385

wellnessworks@summahealth.org

Unum Voluntary Group Benefits (Critical Illness, Whole Life, and Hospital Indemnity)

888.317.3759

Summa Health's Voluntary Benefits Call Center

VSP

800.877.7195

vsp.com

Group Numbers:

VSP Standard Plan: 12337123-0003

VSP High Plan: 12337123-1000

HealthEquity WageWorks FSA

877.924.3967

wageworks.com

healthequity.com



- Visit the Virtual Benefits Fair (live on October 1)
summahealth.org/virtualbenefitsfair
- Email the Employee Benefits Team at summabenefits@summahealth.org
- Call Employee Benefits at **234.312.6262**



Resident Outside SummaCare's Service Area Request Form

Employee Name _____ Employee SSN _____ Employee ID# _____

Fully complete this form if you, and/or your legal spouse, and/or your dependent child/ren (up to age 26) have a residential address change and are requesting access to services using approved networks outside of the NewHealthConnect Summa Health 20-county service areas.

Please check the following to validate your understanding:

- The person(s) identified below do not live in one of the following SummaCare 20-county service areas for the Summa Health medical benefit plan.** The service area is exclusive of the following counties: Ashland, Ashtabula, Carroll, Cuyahoga, Erie, Geauga, Holmes, Huron, Lake, Loraine, Mahoning, Medina, Ottawa, Portage, Sandusky, Stark, Summit, Trumbull, Tuscarawas and Wayne.
- Covered services for myself and/or my dependents residing outside of the NewHealthConnect Summa Health service area are provided at the in-network Tier 2 coverage level if an approved network is utilized.** Approved networks include: Ohio PPO Connect (residence in Ohio) and First Health Network (residence outside of Ohio). Note: My dependent or I may opt at any time to come into the Summa+ or Tier 1 network and pay the associated Summa+ or Tier 1 co-pays for services.
- To find a Tier 2 Provider for myself and/or dependent(s) outside of the service area, I will need to:** Visit SummaCare's website www.summacare.com, click on the "Find a Doctor or Hospital" icon and select the option "Healthcare Providers Outside of the SummaCare Primary Service Area" or call (330) 252-5922.
- If approved by Employee Benefits,** the person(s) I've listed below will receive coverage at the Tier 2 coverage level, if an approved network is utilized; and are covered for ER & urgent care services only in accordance with the provisions of the plan.
- Approved coverage will continue for the remainder of this calendar year (12/31) or sooner if my or my dependent(s) residency status changes back to the covered service area. **I understand that I will need to submit a new "Resident Outside of the Service Area" form each annual open enrollment period or during the year should residency status change.**

Effective Date _____ End Date _____

Who lives outside of the service area? Please indicate below:

Employee Full Name _____ (Employee) Date of Birth _____

Resides on a (circle one) permanent/temporary basis in (County) _____ (State) _____

Legal Spouse Full Name _____ (Spouse) Date of Birth _____

Resides on a (circle one) permanent/temporary basis in (County) _____ (State) _____

Dependent Child Full Name _____ (Child) Date of Birth _____

Resides on a (circle one) permanent/temporary basis in (County) _____ (State) _____

Dependent Child Full Name _____ (Child) Date of Birth _____

Resides on a (circle one) permanent/temporary basis in (County) _____ (State) _____

Dependent Child Full Name _____ (Child) Date of Birth _____

Resides on a (circle one) permanent/temporary basis in (County) _____ (State) _____

I certify that the above information is true and accurate to the best of my knowledge. Further, I acknowledge that it is my responsibility to ensure access to SummaCare's approved network in order to receive coverage at the Tier 2 provider level. I understand I am responsible to report to Employee Benefits when I no longer need residence away status.

Employee Signature _____ Date _____

Return completed form to Summa Employee Benefits: summabenefits@summahealth.org



Corporate Office

1077 Gorge Blvd
Akron, OH 44310
p 234.312.6262
f 234.312.6449

summahealth.org



Employee Benefits

Our investment in you.

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