2023 Essential Assist Medical Plan for Colleagues
Application Process

About the Essential Assist Medical Plan
Our Mission at Trinity Health calls us to treat the entire well-being of those in our care – and that includes our colleagues. To increase access to health care and treatment for all our colleagues, Trinity Health offers the Essential Assist medical benefit plan, with an employer-funded health reimbursement account (HRA).

The Essential Assist medical plan is structured the same as the Essential Plan option, but it includes a Trinity Health credited HRA that is established to assist eligible colleagues with paying for their medical and prescription drug costs.

Who Is Eligible?
You are eligible for the Essential Assist medical plan if you:

- Are a full- or part-time benefits-eligible colleague at the time of Open Enrollment (the annual period when colleagues may change their health benefits) or become newly benefits eligible; and
- Meet certain income requirements based on your household income and the size of your family (see below).

When Can I Enroll?
Eligible colleagues may apply for the Essential Assist medical plan during Open Enrollment or initial benefits eligibility. Assuming you remain eligible, you will need to recertify your eligibility each year during the annual Open Enrollment period. **This plan does not automatically carry over year to year.**

How the Essential Assist Medical Plan Works
At the beginning of the year, Trinity Health credits the following amount to a HRA:

- $1,000 (Individual Coverage Level) or
- $2,000 (Other Coverage Levels)

New for 2023, you choose when and how to use the HRA funds for qualified medical and prescription expenses. You will receive a debit card from HealthEquity. Claims are not processed automatically, and you **must** either pay out of pocket with your debit card or submit for reimbursement. After you use all the money in your HRA, you share any additional eligible expenses in accordance with the medical plan’s applicable deductible, co-payment or co-insurance. All colleague cost share (deductible, co-payments, and co-insurance) will accumulate towards your out-of-pocket maximum.

The out-of-pocket maximum is the most you will pay for eligible medical expenses during the plan year. If at the end of the year, you have a credit remaining in your HRA and you recertify and qualify for the Essential Assist medical plan at the next annual Open Enrollment period, the credit will rollover. There is no maximum to the amount that can rollover from year to year as long as you remain eligible to enroll in the Essential Assist medical plan. If you experience a qualified status change that requires a different coverage level (for example, you change from the Individual Coverage Level to a Family Coverage Level as a result of the birth of a baby or marriage), an additional prorated amount will be credited to your HRA upon your notification to Human Resources. In the event
you experience a qualified status change event in which you remove a dependent from the Essential Assist medical plan coverage due to ineligibility, Trinity Health will not reduce your HRA balance.

**Note:** The Essential Assist medical plan with HRA does not apply to dental or vision plan coverage. Any remaining money in the HRA is forfeited if you leave Trinity Health.

**Essential Assist Medical Plan Income Guidelines**

<table>
<thead>
<tr>
<th>Family Size*</th>
<th>Annual Family Income** Must Be Less Than…</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>$40,770.00</td>
</tr>
<tr>
<td>2</td>
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<tr>
<td>3</td>
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<tr>
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<td>$83,250.00</td>
</tr>
<tr>
<td>5</td>
<td>$97,410.00</td>
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<tr>
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<td>7</td>
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<tr>
<td>8***</td>
<td>$139,890.00</td>
</tr>
</tbody>
</table>

**Notes**

* Family size is based on the number of exemptions (yourself, spouse, dependents) reported on your most recent federal tax return.

** Based on 2022 IRS guidelines and the adjusted gross income amount indicated on your most recent federal income tax form 1040.

*** Use eight even if your family size is greater.

**How to Apply for the Essential Assist Medical Plan**

If you think you might qualify for the Essential Assist Plan you should first enroll in the medical plan that you think will be best for you – either the Traditional, Health Savings or Essential Plan. Then apply for the Essential Assist Plan by following the steps below.

1. Complete the certification statement below, and submit it along with a copy of your most recent federal income tax Form 1040, as follows:
   a. Submit documents to your local Benefit / HR representative.

2. The Benefit / HR representative will review your documents and confirm your eligibility. Once your eligibility is confirmed the Benefit / HR representative will move you into the Essential Assist medical plan option even if you elected a different medical plan option during Open Enrollment or initial eligibility.

3. Be sure to complete your application process prior to Nov. 25, 2022 for Open Enrollment or 30 days from your initial benefit eligibility date.
Colleague Certification Statement for the Essential Assist Medical Plan

By submitting an application to participate in the Essential Assist medical plan option for the 2023 plan year (Jan. 1, 2023 through Dec. 31, 2023), I understand and agree that, if my application is approved, I and my eligible dependents, if applicable, will be automatically enrolled in the Essential Assist medical plan effective Jan. 1, 2023, or my initial benefit eligibility date, even if I elected a different medical plan option during the Enrollment period. I further understand and agree that enrollment in the Essential Assist medical plan is automatic and irrevocable upon approval of my application and cannot be changed during the 2023 plan year without a qualifying event. I also understand that, in order to participate in the Essential Assist medical plan for any plan year after the 2023 plan year, I will need to recertify my eligibility during Open Enrollment for that plan year.

__________________________________________
Colleague Name (Please print)                    Employee ID

__________________________________________
Colleague Signature                           Date

__________________________________________
Human Resources Signature                    Date

Note: Any misrepresentation of material fact or false information provided as part of this certification is subject to the terms and conditions outlined in the appropriate Human Resource Policies and Procedures manual and can result in disciplinary action up to and including termination of employment.

Any dispute over eligibility for the Essential Assist medical plan option under the Trinity Health Welfare Benefit Plan is subject to the final and binding determination of the Plan Administrator in the Plan Administrator’s sole discretion. If you have any questions about the Trinity Health Welfare Benefit Plan and/or the Essential Assist medical plan, please contact your Human Resources department. Trinity Health reserves the right to modify or terminate the Trinity Health Welfare Benefit Plan and the Essential Assist medical plan option at any time. Income guidelines will be reviewed annually for possible revision.
Frequently Asked Questions: Health Reimbursement Account (HRA)

General

What the change and why is it happening?
Beginning Jan. 1, 2023, HealthEquity will administer the Health Reimbursement Accounts (HRA), previously managed through the medical TPA (i.e. BCBS, Aetna, etc.).

With this change, colleagues have the choice when to utilize their HRA funds. Medical claims will no longer automatically use the HRA funds as they are processed. Colleague will be able to use HRA funds for both qualified medical and prescription expenses, including over-the-counter prescription products.

What services can I use the HRA funds to pay for?
Examples of qualified healthcare and prescription expenses include deductible, copays, and certain over-the-counter pharmacy items. Once enrolled, please visit www.healthequity.com/wageworks to login into your account and view a complete list.

Dental and vision expenses are not eligible expenses under the HRA plan.

Who can utilize the HRA funds?
Funds can be used for any legal qualified dependent of the colleague enrolled. Dependents do not need to be enrolled in the medical plan in order to utilize the funds.

Accessing funds and important deadlines

How can I access the HRA funds?
HealthEquity has many options to access your HRA funds including:

- Swipe your HealthEquity debit card at time of service/purchase. Save your receipts as you may be asked to upload them to the website or mobile app to substantiate your claim.
- Pay providers directly online
- File a claim online to request reimbursement for paid eligible out-of-pocket expenses

What happens to my 2022 funds?
Your 2022 funds will remain with the medical TPA to pay any remaining 2022 claims that may still need to be processed through April 30, 2023.

If you are enrolled in the Essential Assist plan for 2023, any 2022 funds remaining after April 30, 2023 will be rolled into your HealthEquity HRA account to use going forward. 2022 funds should be available by mid- to late-May 2023.

What time period do I have to submit for reimbursement for 2023 claims?
Similar to flexible spending accounts, you have a time period to submit any receipts for reimbursement or to document a debit card purchase.

Please submit any reimbursement requests and documentation no later than March 31st of the following plan year.

Example: Any claims for plan year 2023 will need to be requested for reimbursement or submit documentation no later than March 31, 2024.

What happens to the funds if I terminate employment?
If you terminate employment, you will have the option to enroll in COBRA coverage at your expense. If you choose to enroll in COBRA, your HRA funds will move with that plan and will be available for use while enrolled for that calendar year. You will need to reapply for the HRA funds each calendar year while enrolled in COBRA.
If you do not choose to elect COBRA coverage, then your plan ends effective the end of the month in which your employment terminates. You will have 90 days from your termination date to submit any reimbursement requests or debit card documentation for service dates in which you were active in the plan.

What happens to the funds if I am no longer eligible for Essential Assist?
Similar to today, if you are no longer eligible for Essential Assist, your HRA funds are no longer eligible for use. You will have 90 days from plan termination to submit any reimbursement requests or debit card documentation.

HealthEquity debit card

When will I receive a HealthEquity debit card?
Debit cards will be mailed to colleague homes mid- to late-December 2022 for those enrolling during open enrollment. For colleagues enrolling mid-year, debit cards mail within the first 30 days of enrollment.

Can I get an extra debit card for a family member?
Colleagues may request an additional debit card for a spouse/eligible adult on the account by reaching out to HealthEquity at 877-924-3967 once enrolled.

Additional Resources

How do I track my account balance and reimbursements?
HealthEquity has both a website and mobile app to assist in tracking your balance and reimbursements.

- Phone: 877-924-3967
- Website: [www.healthequity.com/wageworks](http://www.healthequity.com/wageworks)
  - You can manage and check on your account through HealthEquity online. The “Claims and Activity” page online details all your account activity and will even alert you if any Card transactions are in need of verification.
  - For the latest information, visit [www.healthequity.com/wageworks](http://www.healthequity.com/wageworks) and log in to your account 24/7.
    - In addition to reviewing your most recent HRA activity, you can:
      - Update your account preferences and personal information.
      - Schedule payments to healthcare providers.
      - Check the complete list of eligible expenses for your HRA program.
      - Order additional HealthEquity Healthcare Cards for your family.
      - Manage your account while on the go via the HealthEquity mobile website.

- Mobile App: EZ Receipts
  - With the EZ Receipts mobile app, you can file and manage your reimbursement claims and card usage paperwork on the spot, with a click of your mobile device camera, from anywhere. To use EZ Receipts:
    - Download at [www.healthequity.com/wageworks/employees/go-mobile](http://www.healthequity.com/wageworks/employees/go-mobile)
    - Log in to your account.
    - Choose the type of receipt from the simple menu.
    - Enter some basic information about the claim or card transaction.
    - Use your mobile device camera to capture the documentation.
    - Submit the image and details to HealthEquity.

Who do I contact with questions?
For questions regarding the Essential Assist medical plan or eligibility, please reach out to the HRSC via the HR4U portal or your local ministry benefit representative.

For questions regarding HRA funds, reimbursements or debit cards, please reach out to Health Equity at 877-924-3967.