



Benefits Orientation

Medical and Pharmacy Benefits Part 1

Medical and Pharmacy Benefits: Part 1

- Clinically Integrated Networks
- Two Tiers of Medical Benefits
- Out-of-Pocket Medical Costs

Trinity Health benefits: medical plans



Three medical plans* give colleagues options to meet your diverse needs



Traditional Plan



Health Savings Plan



Essential Plan

- Trinity Health is self-insured. All three medical plans are administered by a Third-Party Administrator (i.e., Blue Cross/Aetna/etc.) and include pharmacy through OptumRx.
- The TPA performs certain administrative services, such as processing claims and customer service.

* Your ministry may offer other options. See your new hire information.

Trinity Health benefits: medical plans



Traditional Plan

- Pay more each paycheck, but less at the time of service
- Choose this plan if you are interested in lower costs at the time you use the insurance



Health Savings Plan (High Deductible Health Plan with Health Savings Account)

- Pay less each paycheck, but more at the time of service until you meet your deductible
- Trinity Health makes annual contribution to HSA based on coverage level you elect
- Choose this plan to contribute to the HSA, and maximize your tax advantage as you save for current and future health care expenses



Essential Plan (Assist plan with Health Reimbursement Account if you qualify)

- Pay the least amount each paycheck, but more at the time of service
- Choose this plan if you are interested in lower payroll contributions
- Essential Assist plan, including Trinity Health annual contribution to HRA based on coverage level. Available for colleagues who meet certain income requirements

Medical network tiers



PHYSICAL



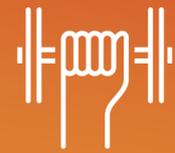
MENTAL

- Each plan offers two network tiers and offers choice in where to seek care
- You receive the highest benefits when you use the Tier 1 network and a market-competitive benefit when you use the Tier 2 network
- There is no coverage when seeking care outside of Tier 1 and Tier 2, except for limited exceptions (e.g., emergency care, network gap)

Tier Level	Definition
Tier 1	Trinity Health network facilities and aligned providers Highest/incentive benefit (lowest deductibles, copays)
Tier 2	Medical plan administrator's in-network providers (e.g. Aetna, BCBSM) Market-competitive benefit

When combined,
Tier 1 and Tier 2
provide a
comprehensive
network of services

How to search for providers



PHYSICAL



MENTAL

- Detailed instructions are available in AskHR:
<https://mytrinityhealth.sharepoint.com/sites/SO-WorkdayHelp>
- Visit the medical plan administrator's website (i.e., Aetna/Blue Cross Blue Shield of Michigan/etc.) or contact their customer service team
- In-network providers will be designated as Tier 1 or Tier 2. Other providers are considered out-of-network and offer no coverage.
 - Note: Mayo Clinic and City of Hope Comprehensive Care and Treatment Centers (formerly Cancer Treatment Centers of America) are considered out-of-network and are not covered providers.

Clinically Integrated Network



PHYSICAL



MENTAL

- Provides access to high-quality and cost-efficient care
- Includes local physicians and health care providers that have partnered with Trinity Health's Ministries to deliver services
- Focused on helping you access the right care, at the right time, in the right setting
- All providers are part of the Tier 1 network, so you pay the lowest deductibles, copays, etc.

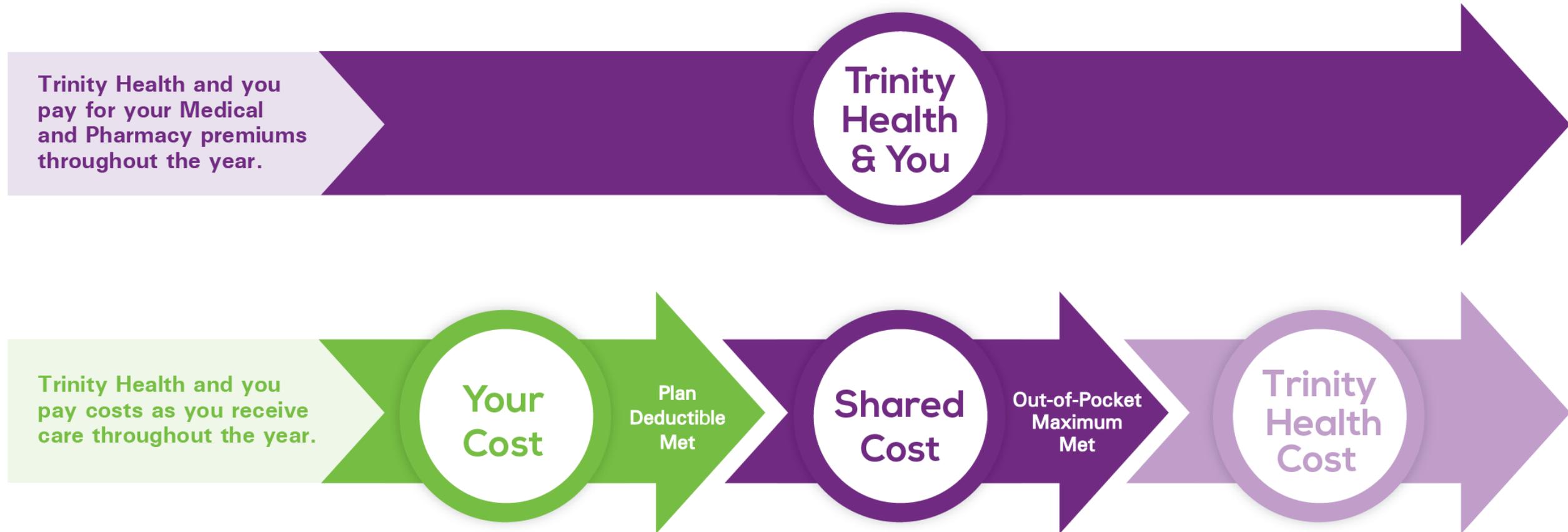
Shared medical and pharmacy costs



PHYSICAL



MENTAL



- Employee Premium Contributions
- Copays
- 100% of Medical Costs up to the deductible

- You pay 10%/20%* Coinsurance
- Plan pays 90%/80%* of costs

- Plan pays 100% of Medical Costs once out-of-pocket is met

* Dependent on the Trinity Health Medical Plan selected and the cost share for Tier 1 facilities or physicians.

Key terms to know



PHYSICAL



MENTAL

- **Premium:** amount paid for your medical plan. This is a shared cost.
- **Deductible:** amount you pay for covered health care services before your medical plan starts to pay
- **Coinsurance:** percentage of costs of a covered health care service you pay after you've paid your deductible
- **Copay:** a fixed amount you pay for a covered health care service
- **Out-of-Pocket Maximum:** the most you pay during a plan year before your medical plan starts to pay 100 percent for covered health benefits

Additional resources

AskHR, an HR and benefits experience made for you!

AskHR gets you the answers and help you need any time, on any device in Workday. Access knowledge articles, submit HR, payroll and benefits questions and get real-time help with the virtual Workday assistant tool.

To get started, click on the **AskHR icon** in your ZENworks window.

You can also access **AskHR** on your mobile device by downloading the Workday app or accessing:

<https://mytrinityhealth.sharepoint.com/sites/SO-WorkdayHelp>.



Ministries not on AskHR/Workday:

<https://www.trinity-health.org/my-benefits/health-welfare/>

Check out all the episodes in the video series

Comprehensive Total Rewards

- Medical and pharmacy
- Health Savings Account
- Essential Assist with Health Reimbursement Account
- Flexible spending accounts
- Dental and vision
- Life Insurance/AD&D
- Time Away from Work
- Voluntary benefits
- Retirement program
- Colleague well-being / Mental well-being benefit
- Other benefits
- Eligibility and enrollment



Important information

This presentation is only intended to provide an overview of the Trinity Health Corporation Welfare and your options thereunder. To the extent of any inconsistencies between this document and the official plan documents, the official documents control. You can access these documents at any time by visiting AskHR or, if your Health Ministry is not supported by HR Shared Services, the MyBenefits site at www.trinity-health.org/my-benefits/

For any plan or program in which you participate, you may request a printed copy of the summary plan description, any certificate of coverage, and/or the official plan documents from your employer or from the Trinity Health Human Resources Service Center at 20555 Victor Parkway, Livonia, MI 48152. There is no charge for printed copies.

Trinity Health group health plans provide care coordination, care management, utilization review, and referral services to help manage care. These services may be provided through independent third-party administrators, clinically integrated networks, or other health care providers, including those affiliated with Trinity Health. These service providers will have access to the personal health information (“PHI”) of you and your enrolled dependents, including health information you disclose through wellness programs, for purposes of treatment, care management, and care coordination. All access, use, or disclosure of PHI will comply with the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”) and any applicable state laws.



Trinity Health