

Your Guide to Benefits Enrollment:

2021 Employee Benefits



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It's All Connected:

Meditation & Brain Health

Meditation has been shown to:

- Improve learning and memory
- Slow age-related brain atrophy
- Improve connections between parts of the brain
- Aid in addiction treatment



Enrolling in Benefits



When can I enroll in benefits?

- If you are a new hire, you have within 14 days of your hire date to enroll in your benefits.
- If you change status (you go from not being eligible for benefits to a benefits eligible position), you have within 31 days of your status change to enroll in your benefits.
- If you have a qualified life change, you have within 31 days of your event date to enroll in or make changes to your benefits.



How do I enroll?

To get started with online enrollment, log on to MyTHR.org and click the Benefits tile.



What do I need to be thinking about?

Here are some questions to ask yourself when thinking about benefits:

- *What family members do I need to cover?*
- *Which medical plan option works best for me and my family?*
- *If I enroll in a high deductible health plan, am I prepared to pay for all prescriptions and health care services I receive until I meet the deductible?**
- *When it comes to prescription drug coverage, do I need the High Rx plan or the Low Rx plan?*
- *Does my family need dental or vision coverage?*
- *What type of coverage do we need to provide some financial protection in case of serious illness, injury or death?*
- *Do I want to participate in a plan that gives me a discount on dependent day care or health care expenses by letting me pay for them with pre-tax money?*



Questions?

If you have questions about a benefit or enrollment, call Texas Health Benefits Support at **1-877-MyTHRLink** (1-877-698-4754), prompt 9, Monday through Friday, 8 a.m. to 5 p.m.

Medical

Selecting the right medical option is a three-step process:



1. Know who you're covering.

Learn more about eligible dependents on [BeHealthyTHR.org](https://www.behealthythr.org).



2. Pick a medical plan option.

Pages 5-12 can help you decide based on the network and costs.



3. Pick a prescription drug option.

Choose High or Low coverage. See pages 15-16 for details.

Each of these choices affects the amount that comes out of your paycheck and what you pay when you need care.

Your Options

You can choose from five medical plan options. Each of the plan options is named after their deductible, which is the amount you have to pay before the plan shares costs with you.

- Texas Health Aetna Select 3000 (High Deductible Health Plan*)
- United Healthcare Choice Plus 1500 (High Deductible Health Plan*)
- Texas Health Aetna Select 1000
- United Healthcare Choice 1000

* High Deductible Health Plans don't pay any portion of your medical expenses or prescriptions until you pay your full deductible.

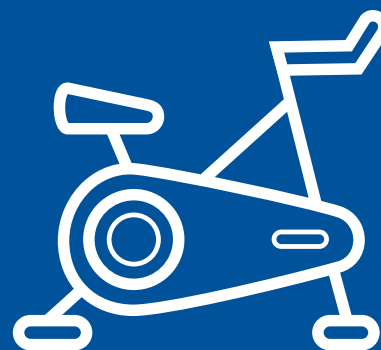
- United Healthcare Choice 500

It's All Connected:

Exercise & Energy

Exercise gives you more energy to go about your daily activities. In one study, 45 minutes of cycling increased participants' metabolism for 14 hours and gave them 37% more energy.

Start somewhere, even if it's a stretch break or short walk!



Compare Medical Plan Options

What You Pay for Care: Texas Health Aetna 3000 and UHC Choice Plus 1500

If you choose one of the high deductible health plans, **Texas Health Aetna 3000** or the **UHC Choice Plus 1500**, the costs for common services (and your out-of-pocket costs) are listed below if you see a provider in the network. The chart on page 8 shows how deductible amounts compare. See pages 9-12 for a breakdown of other costs.

To help you pay for eligible medical expenses or meet your deductible, you'll receive a **Health Savings Account (HSA)** with money put in for you through Texas Health when you enroll in one of these plan options. More information can be found on page 19.



Your Cost When You Need Care

Texas Health Aetna Select 3000 and UHC Choice Plus 1500


- Under the Texas Health Aetna Select 3000 option and UHC Choice Plus 1500 option, you pay the most when you need care.
- Both of these options are qualified high deductible health plans. Other than preventive care like checkups, these plans don't pay any portion of your bill or prescriptions until you pay your deductible.
- You pay 10% of the cost with your primary care physician, a specialist, and for care at in-network facilities after you meet your deductible.
- With the UHC Choice Plus 1500 option, you pay 10% at **Preferred Hospitals** (a select list of hospitals where the plan pays the most for care, meaning you pay the least) and 70% for UHC Choice Network Hospitals (hospitals covered in the UHC Choice Network but which are not on the Preferred Hospital list).
- The UHC Choice Plus 1500 option is the only option that covers out-of-network doctors and facilities, and the coinsurance amount at those facilities is 50% after your deductible is met.

What You Pay for Care: Texas Health Aetna 1000, UHC Choice 500 and UHC Choice 1000

If you choose the **Texas Health Aetna 1000**, **UHC Choice 500** or **UHC Choice 1000**, your initial out-of-pocket costs below are the same, as long as you see a provider in the network. The chart on page 8 shows how deductible amounts compare. See pages 9-12 for a breakdown of other costs.



Checkups
Free




Virtual Visits
Free




Doctor Visits
\$30 (\$50 specialist)



Urgent Care
(including DispatchHealth)
\$50



Emergency Room
\$100 copay plus your deductible, then 10% of the cost



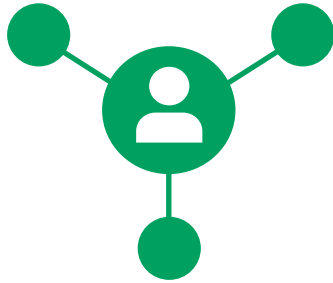
Inpatient Hospital
(preferred network)
Pay your deductible, then 10% of the cost

Your Cost When You Need Care

- Under the Texas Health Aetna Select 1000 and the UHC Choice 500 and UHC Choice 1000 plans, you pay a set amount (called a copay) for things like doctor and urgent care visits without needing to meet your deductible first.
- When you need hospital care or MRIs, CTs or PET scans, you must pay your deductible before the plan pays part of the bill (called coinsurance).
- After you meet your deductible, your coinsurance payment depends on the facility you choose.
 - In the Texas Health Aetna options, you pay 10% after deductible at in-network facilities. You pay the full cost if you go out of network.
 - In the UHC options, you pay 10% at **Preferred Hospitals** (a select list of hospitals where the plan pays the most for care, meaning you pay the least) and 70% for UHC Choice Network Hospitals (hospitals covered in the UHC Choice Network but which are not on the Preferred Hospital list). You pay the full cost if you go out of network.

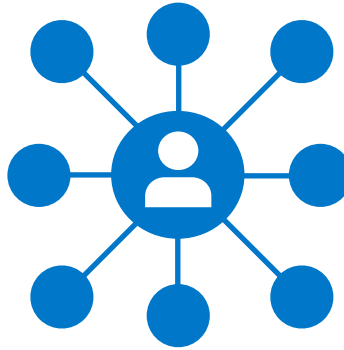
Where You Can Get Care

The medical plan option you choose determines what doctors and hospitals you can go to.



Texas Health Aetna Select 1000 and 3000

- A select and local network of providers (Open Access EPO Plus)*
- When you go outside the network, the plan won't pay any part of your bill, except for emergency care



United Healthcare Choice 500 and Choice 1000

- A larger network of providers
- You pay less at **Preferred Hospitals**
- When you go outside the network, the plan won't pay any part of your bill, except for emergency care



UnitedHealthcare Choice Plus 1500

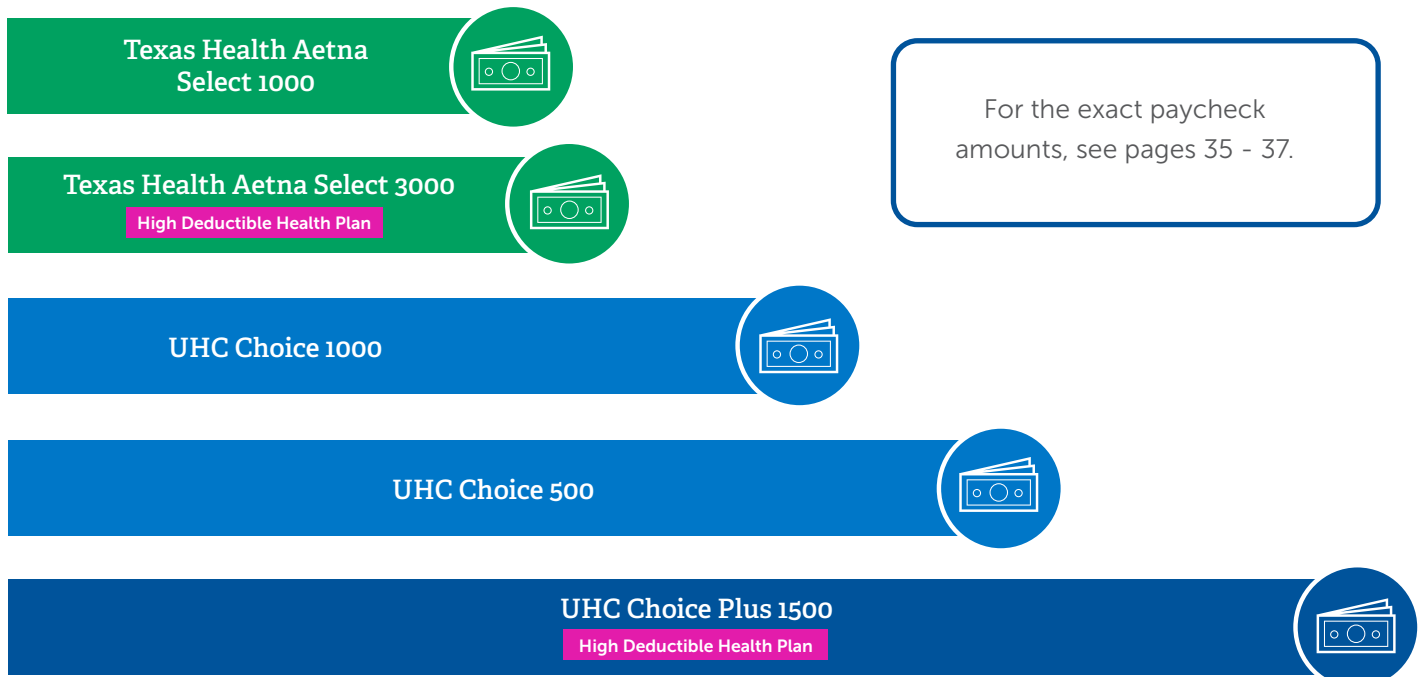
- You pay less at **Preferred Hospitals**
- Access to the same network as the other UHC plans, **plus** the ability to choose any provider (though you pay more of the bill when you use an out-of-network provider)

See page 17 to learn how to find out if your doctor or hospital is in-network.

* If you live outside the DFW Metroplex, check your ZIP code on BeHealthyTHR.org to see if you are eligible to enroll in Texas Health Aetna medical plan options. Use the Open Access EPO Plus Network when searching for providers on www.TexasHealthAetna.com.

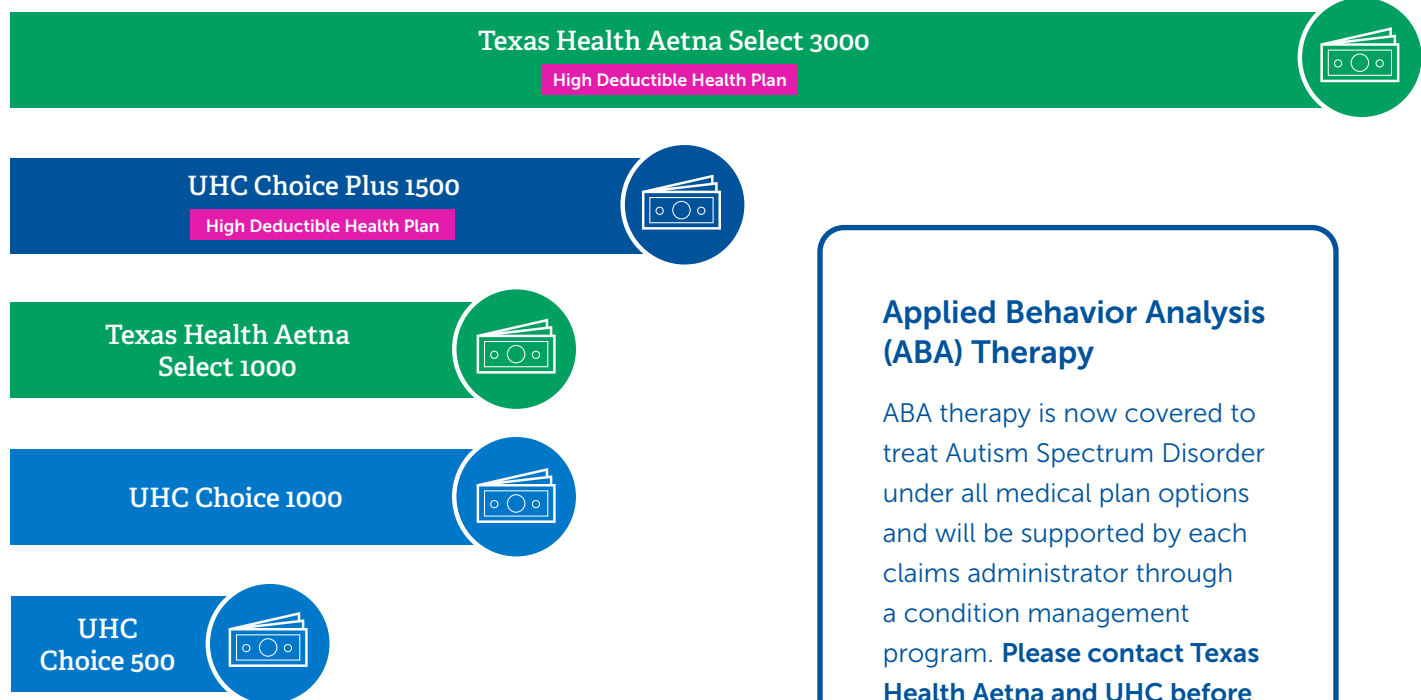
What Comes Out of Your Paycheck

Here's how the paycheck costs generally compare for employee only coverage.



Deductible Amounts

Here's how the deductibles compare.



Applied Behavior Analysis (ABA) Therapy

ABA therapy is now covered to treat Autism Spectrum Disorder under all medical plan options and will be supported by each claims administrator through a condition management program. **Please contact Texas Health Aetna and UHC before seeking treatment.**

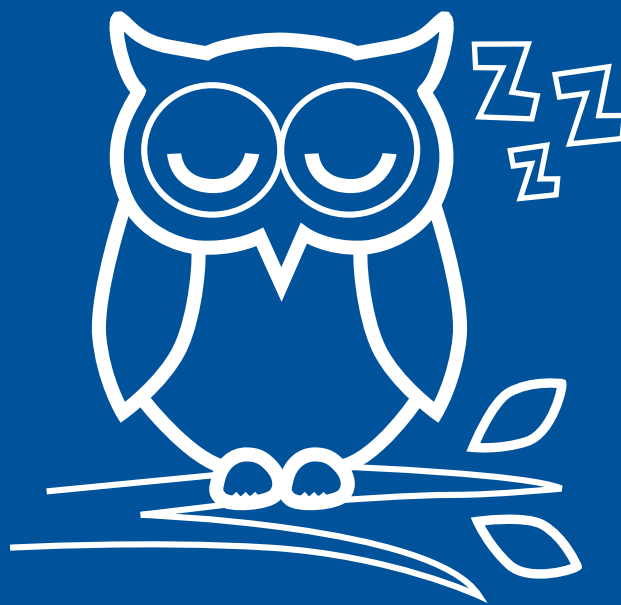
For the exact deductible amounts, see the charts on pages 9 - 12.

It's All Connected:

Sleep & Health

Getting enough sleep (7-8 hours) leads to:

- Sharper brain
- Mood boost
- Healthier heart
- Steadier blood sugar
- Germ fighting
- Weight control



Your Cost for Covered Medical Services

Texas Health Aetna Select 3000 (High Deductible Health Plan)

PLAN FEATURES	Texas Health Aetna Select Plan 3000
	Texas Health Aetna Open Access EPO Plus Preferred Network Doctors, Hospitals, and Free-Standing Facilities
Network	Local network with select providers called Open Access EPO Plus
Deductible	\$3,000 individual / \$6,000 family
Medical and Rx Out-of-Pocket Maximum ²	\$6,750 individual / \$13,500 family
HSA	Employer contributions (\$19.23 per pay period for Employee Only or \$38.46 for Employee + Family coverage) and employee contributions that may be used to pay for eligible health care expenses now or later ⁸
Office Visits	Full deductible, then 10%
Maternity Office Visits	Full deductible, then 10% for initial office visit, no cost for additional visits
Inpatient Hospital Care	Full deductible, then 10%
AnyTimeMD	\$0
Emergency Room	Full deductible, then 10%
Urgent Care Center	Full deductible, then 10%
Outpatient Surgery ¹	Full deductible, then 10%
Routine Physicals ³	\$0
Well-Woman/Man Exams ³ (Including Pap Test or PSA Test) ³	\$0
Well-Child Care ³ (Including Immunizations) ³	\$0
Colonoscopy ³	\$0
Mammography ⁴	\$0
Outpatient Diagnostic Lab & X-ray (Excluding MRI, CT, PET Scans) ¹	Full deductible, then 10%
MRI, CT & PET Scans ¹	Full deductible, then 10%
Outpatient Therapy ⁵	Full deductible, then 10%

See footnotes on page 18.

UHC Choice Plus Plan 1500 (High Deductible Health Plan)

PLAN FEATURES	UHC Choice Plus Plan 1500		
	UHC Choice Network Doctors, Preferred Hospitals and Free-Standing Facilities ¹	UHC Choice Network Hospitals ¹	Out-of-Network Doctors, Hospitals and Facilities ⁶
Network	National network with preferred hospitals		
Deductible ¹⁰	\$1,500 individual \$4,500 family	\$4,000 individual \$12,000 family	\$5,000 individual \$15,000 family
Medical and Rx Out-of-Pocket Maximum ²	\$6,750 individual \$13,500 family		\$18,000 individual \$36,000 family
HSA	Employer contributions (\$19.23 per pay period for Employee Only or \$38.46 for Employee + Family coverage) and employee contributions that may be used to pay for eligible health care expenses now or later ⁸		
Office Visits	Full deductible, then 10%		Full deductible, then 50%
Maternity Office Visits	Full deductible, then 10%		Full deductible, then 50%
Inpatient Hospital Care	Full deductible, then 10%	Full deductible, then 50%	
Virtual Visits	Full deductible, then 10%		
Emergency Room	Full deductible, then 10%		
Urgent Care Center	Full deductible, then 10%	Full deductible, then 50%	
Outpatient Surgery ¹	Full deductible, then 10%	Full deductible, then 50%	Full deductible, then 50% with notification ⁷
Routine Physicals ³	\$0		Not covered
Well-Woman/Man Exams (Including Pap Test or PSA Test) ³	\$0		Not covered
Well-Child Care (Including Immunizations) ³	\$0		Not covered
Colonoscopy ³	\$0		Not covered
Mammography ⁴	\$0		Not covered
Outpatient Diagnostic Lab & X-ray (Excluding MRI, CT, PET Scans) ¹	Full deductible, then 10%	Full deductible, then 50%	
MRI, CT & PET Scans ¹	Full deductible, then 10%	Full deductible, then 50%	
Outpatient Therapy ⁵	Full deductible, then 10%	Full deductible, then 50%	

See footnotes on page 18.

Texas Health Aetna Select 1000

PLAN FEATURES	Texas Health Aetna Select Plan 1000
	Texas Health Aetna Open Access EPO Plus Preferred Network Doctors, Hospitals, and Free-Standing Facilities
Network	Local network with select providers called Open Access EPO Plus
Deductible	\$1,000 individual / \$3,000 family
Medical and Rx Out-of-Pocket Maximum ²	\$6,850 individual / \$13,700 family
Office Visits	\$30 copay for PCP; \$50 copay for specialist
Maternity Office Visits	\$30 copay for initial office visit; no cost for additional visits
Inpatient Hospital Care	10% after deductible
AnyTime-MD	\$0
Emergency Room	\$100 copay, then 10% after deductible
Urgent Care Center	\$50 copay
Outpatient Surgery ¹	Office visit copay applies; 10% after deductible if not in doctor's office
Routine Physicals ³	\$0
Well-Woman/Man Exams ³ (Including Pap Test or PSA Test) ³	\$0
Well-Child Care ³ (Including Immunizations) ³	\$0
Colonoscopy ³	\$0
Mammography ⁴	\$0
Outpatient Diagnostic Lab & X-ray (Excluding MRI, CT, PET Scans) ¹	No additional charge if processed in doctor's office; 10% after deductible if not in doctor's office
MRI, CT & PET Scans ¹	10% after deductible
Outpatient Therapy ⁵	\$30 per visit

See footnotes on page 18.

UHC Choice Plan 500 and UHC Choice Plan 1000

PLAN FEATURES		UHC Choice Plans 500 and 1000	
		UHC Choice Network Doctors, Preferred Hospitals and Free-Standing Facilities ¹	UHC Choice Network Hospitals ¹
Network		National network with preferred hospitals	
Deductible	UHC Choice Plan 500	\$500 individual \$1,500 family	\$3,000 individual \$9,000 family
	UHC Choice Plan 1000	\$1,000 individual \$3,000 family	\$4,000 individual \$12,000 family
Medical and Rx Out-of-Pocket Maximum ²		\$6,850 individual / \$13,700 family	
Office Visits		\$30 copay for primary care doctor; \$50 copay for specialist	
Maternity Office Visits		\$30 copay for initial office visit; no cost for additional visits	
Inpatient Hospital Care		10% after deductible	70% after deductible
Virtual Visits		\$0 ⁹	
Emergency Room		\$100 copay, then 10% after deductible	
Urgent Care Center		\$50 copay	
Outpatient Surgery ¹		Office visit copay applies; 10% after deductible if not in doctor's office	70% after deductible if not in doctor's office
Routine Physicals ³		\$0	
Well-Woman/Man Exams ³ (Including Pap Test or PSA Test) ³		\$0	
Well-Child Care ³ (Including Immunizations) ³		\$0	
Colonoscopy ³		\$0	
Mammography ⁴		\$0	
Outpatient Diagnostic Lab & X-ray (Excluding MRI, CT, PET Scans) ¹		No additional charge if processed in doctor's office; 10% after deductible if not in doctor's office	70% after deductible
MRI, CT & PET Scans ¹		10% after deductible	70% after deductible
Outpatient Therapy ⁵		\$30 per visit	\$50 per visit

See footnotes on page 18.

Features of the Medical Plan Options

Texas Health Aetna Select 1000 & Texas Health Aetna Select 3000



Texas Health Aetna Anytime-MD

Chat with a doctor about any health concern, big or small, right from your computer or smartphone.

- Free
- For minor illnesses
- The doctor can help schedule an appointment with your doctor or send a prescription to a pharmacy.



Maternity Management

Get extra support for your pregnancy with the Maternity Management program.

- Speak with a Maternity Management nurse any time, and receive a \$100 *Be Healthy* reward for completing the program.



Holistic Care Team

Get help understanding and managing a chronic condition, like diabetes or heart disease.

- A locally based team of professionals will be assembled according to your specific needs.



AbleTo Virtual Counseling

Get help dealing with a medical condition via phone or video chat.

- Learn practical techniques to reduce depression, anxiety, and stress and focus on your medical recovery.



DispatchHealth

Get urgent care in the convenience of your own home.

- Available in eligible ZIP codes (visit www.dispatchhealth.com for eligible ZIP codes)
- Pediatrics and adults
- Details on services can be found at www.dispatchhealth.com.



Other Programs

- **Cancer Support Center:** Get extra guidance and support when dealing with certain types of cancer.
- **Applied Behavior Analysis (ABA) Therapy:** ABA therapy is covered to treat Autism Spectrum Disorder and will be supported by each claims administrator through a condition management program. Please contact Texas Health Aetna and UHC before seeking treatment.

You can learn more about all of these programs on BeHealthyTHR.org.

UHC Choice 500, UHC Choice 1000 and UHC Choice Plus 1500



Virtual Visits

Get a doctor's care 24/7 for minor illnesses by video chat.

- Free for the UHC Choice 500 and 1000 plan options
- For minor illnesses
- The doctor can send a prescription to your local pharmacy.
- Behavioral Health Virtual Visits are available at normal office visit costs.



Real Appeal

This weight loss and healthy living program can help you take small steps leading to big results.

- Free
- Available to you and your enrolled family members
- Participants must be 18 years or older with a BMI of 23 or higher.



Maternity Support Program

Get ongoing support for a pregnancy with the Maternity Support Program.

- Get answers to your questions, and receive a \$100 *Be Healthy* reward for completing the program.



Neonatal Resource Service

Receive extra support for your NICU baby.

- UnitedHealthcare NICU nurses provide inpatient and telephonic support to help coordinate discharge planning and care of NICU babies for at least the first 6 months of their lives



Other Programs

- **Health Advocate** helps you figure out how to use your insurance and get care 24/7.
- **Total Health Nurses** help you understand your complex and chronic condition and get the best care.
- The **Transition Support Program** provides support from the time you learn you need to be admitted to a hospital until after you get home.
- **Mental health and substance use disorder** care must be coordinated through United Behavioral Health (UBH).
- **DispatchHealth** lets you get urgent care in the convenience of your own home if you're in an eligible ZIP code. Details on services and a list of eligible ZIP codes can be found at www.dispatchhealth.com.
- **2nd Opinion Services:** You can get free, additional consultation on your treatment plan for musculoskeletal, cardiac, GI and women's health claims.
- **Applied Behavior Analysis (ABA) Therapy:** ABA therapy is covered to treat Autism Spectrum Disorder and will be supported by each claims administrator through a condition management program. Please contact Texas Health Aetna and UHC before seeking treatment.
- **Payment Integrity Program:** Helps prevent fraud and abuse in submitted medical claims.

You can learn more about all of these programs on BeHealthyTHR.org.

Prescription Drug Coverage

What Are Your Options?

After you choose a medical plan option, choose the prescription drug coverage that works best for you. You have two options to choose from: Low RX or High RX.



Low RX

- Less money out of your paycheck
- Higher cost at the pharmacy for preferred and non-preferred¹ prescription drugs.



High RX

- More money out of your paycheck
- Lower cost at the pharmacy for preferred and non-preferred¹ prescription drugs.

How It Works

The charts below show what you pay for prescription drugs.

Texas Health Aetna Select 3000 and UHC Choice Plus 1500

You pay the **FULL COST** of your prescription drugs until you reach your deductible.

After you pay your deductible, your insurance benefits kick in, and you pay the copay or coinsurance amount shown in the charts below. See pages 9-12 for deductible amounts.

Texas Health Aetna Select 1000 and the UHC 500 and 1000 Plan Options

You pay the copay and coinsurance amounts shown below.

LOW RX ² RETAIL: 31-day supply	
Generic	\$10 copay
Preferred	40% (\$20 minimum and \$150 maximum per prescription)
Non-Preferred ¹	50% (\$40 minimum and \$300 maximum per prescription)

HIGH RX ² RETAIL: 31-day supply	
Generic	\$10 copay
Preferred	25% (\$20 minimum and \$100 maximum per prescription)
Non-Preferred ¹	40% (\$40 minimum and \$300 maximum per prescription)

LOW RX ² MAIL ORDER: 90-day supply	
Generic	\$20 copay
Preferred	40% (\$40 minimum and \$300 maximum per prescription)
Non-Preferred ¹	50% (\$80 minimum and \$600 maximum per prescription)

HIGH RX ² MAIL ORDER: 90-day supply	
Generic	\$20 copay
Preferred	25% (\$40 minimum and \$200 maximum per prescription)
Non-Preferred ¹	40% (\$80 minimum and \$400 maximum per prescription)

¹ Applies only when an exception approval has occurred

² If you enroll in the Texas Health Aetna Select 3000 or the UHC Choice Plus 1500, you must pay the full cost of your prescriptions until you reach your deductible.

90-Day Refills for Maintenance Medications

A maintenance medication is a prescription drug you take on a regular basis. The first two times you fill the prescription, you may fill it at any pharmacy that is in network. After that, you must get a 90-day supply through Caremark's mail order, at the Texas Health Dallas, Plano, or Texas Health Resources Infusion retail pharmacies, or at your local CVS or Target pharmacy. If you don't, you will pay double the retail price after the second time you fill the prescription.

Steps to Take for Certain Medications

The plan has rules and limitations for certain medications. See the list of covered prescription drugs at [caremark.com](https://www.caremark.com) and look to see if these rules and limitations apply to something you are taking:



Prior Authorization means your doctor must call CVS/Caremark to discuss your condition to help decide whether it's necessary for you to have a particular prescription drug instead of a lower-cost one.



Step Therapy means you must try a lower-cost prescription drug before one that has a higher cost will be covered. If you try a lower-cost drug and it doesn't work well for you, your doctor must contact CVS/Caremark to discuss your situation.



Quantity Limit means only a certain amount of the prescription drug is approved for a 30-day or 90-day supply. If the approved dose doesn't work for you, your doctor must contact CVS/Caremark to discuss your situation.

Online Tools

- Caremark updates the list of covered prescription drugs each quarter. Before you fill a prescription your doctor has written for you, see if it's on the list at [caremark.com](https://www.caremark.com).
- At [caremark.com](https://www.caremark.com), you can order prescription refills, set refill reminders, check drug costs, check the status of your prescription order, check to see if your pharmacy is in-network, research drugs, view your past prescriptions, locate a pharmacy near you. You can also send an email to Caremark Customer Care if you have questions.

It's All Connected:

Food & Mood

A diet rich in vegetables and legumes and low in refined foods lowers the risk of depression 25-35%.



How To Use Your Medical Plan

With just a little bit of effort, you can get the care that's right for you and keep your costs down.

Tips for Holding Down Your Medical Costs



Use Free Virtual Visits: Feeling sick and think you might need a prescription? Most medical plan options come with free 24/7 service – **Texas Health Anytime-MD** or **UHC Virtual Visits**. Before choosing care that may cost you more, consider if virtual visits will meet your needs.



Choose in-network doctors and facilities.

Under all medical options but the UHC Choice Plus 1500, only in-network doctors and facilities are covered. When it comes to facilities, it's **most cost effective for you to use Preferred Hospitals, which are covered at 90%** under the UHC plan options. Some facilities are not covered at all, while some may only be covered at 30% or 50%.



Take advantage of BeHealthy programs: The best way to lower your medical costs is to **take great care of yourself**. Whether you want to improve your diet, lose weight, become more active, or manage a chronic condition, there's a *BeHealthy* program that can help. Visit [BeHealthyTHR.org](https://www.behealthythr.org) to learn more about our wellness programs.



To see a list of network doctors and hospitals, go to [texashealthaetna.com](https://www.texashealthaetna.com) for Texas Health Aetna plan options (choose the Open Access EPO Plus network) and [THR.WelcomeToUHC.com](https://www.thr.welcometouhc.com) for UHC plan options.

Check your hospital bill. When you go to a hospital for a procedure (such as surgery or childbirth), you may receive services from hospital-based physicians that you are not aware you have received. For example, if you have an MRI, you typically will not meet the radiologist who interprets the results.



Check if prior authorization is needed: Some procedures and surgeries require prior authorization, which means **your claims administrator has to approve coverage before you get the service**. Check with your medical carrier (Texas Health Aetna or UHC) before you schedule one.

For most patients with insurance, charges are often considered out-of-network for services provided by radiologists, anesthesiologists, pathologists and emergency physicians.



Ask Your Medical Carrier: Anytime your doctor requests additional procedures or services outside of your doctor's office, **call your medical claims administrator (Texas Health Aetna or UHC) before you get the service** to verify how much the plan will pay. Most of the time, your doctor's office doesn't know your costs are higher at certain locations where they normally send patients.

Under all medical plan options, **when you use an in-network hospital, Texas Health saves you money by covering hospital-based physician services as in-network**. Because most plans do not offer this same advantage, these claims are often processed incorrectly. When you receive your explanation of benefits from your medical carrier, you should carefully check your hospital charges to be sure you are not being charged out-of-network rates for these services. If you believe your bill is inaccurate, call your claims administrator (Texas Health Aetna or UHC) and ask for a review of the claim.

Your Claims Administrator Can Help

Call 1-877-MyTHRLink

(1-877-698-4754) and select prompt 1 for Texas Health Aetna or prompt 2 for UHC.

- I need to find a doctor in my network.
- I don't think this bill is right.
- I need help with my complex medical condition.

Contact Information/Resources

Texas Health Aetna

1-877-698-4754, prompt 1

www.texashealthaetna.com

To find a doctor or facility in the Texas Health Aetna network:

- Visit texashealthaetna.com
- Select *Click here to find a doctor* under the **Find a Doctor** section
- Enter your home location (zip, city, county, or state) and click **Search**.
- Under **Select a Plan**, choose *Employer Plan — Open Access EPO Plus* as your plan and click **Continue**

To get the most up to date information, please contact Texas Health Aetna member services at 1-877-MyTHRLink (1-877-698-4754), prompt 1.

UHC

1-877-698-4754, prompt 2

myUHC.com

To find a doctor or facility in the UHC Choice network:

- Visit <http://welcometouhc.com/thr>
- Scroll down to the plan options section
- Under the **Find a Doctor** section, click *Search the network*

To get the most up to date information, please contact UHC customer service at 1-877-MyTHRLink (1-877-698-4754), prompt 2.

- 1 When your doctor requests tests or services such as lab work, X-rays, MRIs, CT scans, physical therapy or rehabilitation at a free-standing facility that isn't affiliated with a hospital, you should check to make sure they are in-network, and if you are in a UHC medical plan option check the coinsurance level of that facility on your plan. Services performed at Preferred Hospitals or at a free-standing facility unaffiliated with a hospital are covered at 90% after deductible by the UHC Choice 500 and Choice 1000 plans, while care at non-Preferred hospitals, if you are in the UHC Choice 500 or Choice 1000 plans, is only covered at 30% after the deductible. Check with your insurance carrier to verify whether a facility and/or doctor is covered under your plan and to learn how much your co-insurance would be.
- 2 Maximum includes deductible, co-insurance, and copays for medical care and prescriptions.
- 3 Well exams are covered in full if the claims administrator determines the physical is for preventive care. Additional screenings or services will be considered diagnostic services and will be covered after you pay the applicable copay or deductible and coinsurance. At the time of your preventive care visit, if other services are performed that are not preventive services, as determined by the claims administrator, they will not be paid at 100% even if they are submitted as part of a claim for preventive care.
- 4 One per year is covered. You pay the coinsurance for additional mammograms.
- 5 Up to a combined total of 60 visits per year are covered for outpatient physical, occupational, and speech therapy. Pulmonary and rehabilitation services are covered up to 20 visits. Up to 36 cardiac rehabilitation visits are covered.
- 6 Whenever you use an out-of-network provider, you pay for services when you receive them and file a claim for reimbursement of eligible expenses.
- 7 \$1,000 penalty for failure to provide notification.
- 8 For the purposes of HSA enrollment, Employee + Family coverage includes Employee + Spouse, Employee + Children or Employee + Family coverage.
- 9 Normal office visit copays apply for Behavioral Health Virtual Visits.
- 10 The UHC Choice 1500 Plan option has a non-embedded deductible. This means the family deductible must be paid out-of-pocket before the plan starts paying for health care services for any individual member.

Health Savings Account (HSA)

For use with High Deductible Health Plan medical plan options only

The Texas Health Aetna 3000 and the UHC Choice Plus 1500 are paired with a Health Savings Account (HSA) administered by HealthEquity (formerly WageWorks). The account comes with employer contributions (\$19.23 per pay period for Employee Only or \$38.46 for Employee + Family* coverage) that will be added during the year that you can use to help pay your medical deductible or eligible health care expenses. You can look up eligible expenses at [WageWorks.com](https://www.wageworks.com).



What is an HSA?

An HSA is an account you can use to pay for approved medical, prescription, dental and vision expenses. You can use it to pay out-of-pocket medical expenses during the year or save it for future health care expenses.

You also have the ability to contribute your own money to the account through payroll deductions. The amount you set aside lowers your taxable income, so you pay less in federal income taxes. Unlike a health care spending account, HSAs allow you to keep your balance at the end of the year. Your money is always yours, even if you leave Texas Health.

How HSAs Work

You can contribute up to the IRS limit each year you participate in an HSA-eligible plan. For 2021, that's \$3,600 for an individual and \$7,200 for a family. If you are or will be 55 or older in 2021, you may contribute an additional \$1,000.

To participate in an HSA:

- You must elect the UHC Choice Plus 1500 or the Texas Health Aetna 3000 plan option
- You can't be covered by a secondary insurance plan (such as Medicare) and
- You can't use a health care flexible spending account (HCFSA), a.k.a health care FSA.

HealthEquity (formerly WageWorks) offers several ways to access your money:

- An online reimbursement process with direct deposit or check option
- HSA debit card
- Smartphone app

Keep your receipts. You may need them to get reimbursed or to prove your purchases are eligible.

See the box on the right for differences between an HSA and the Health Care Flexible Spending Account.

HSA \neq **HCFSA**
Health Savings Account Health Care Flexible Spending Account

HSA:

- Requires enrollment in Texas Health Aetna 3000 or UHC Choice Plus 1500
- Comes with employer contributions to use throughout the year
- You can put in additional money that will come out of your paycheck
- Rolls over year to year

HCFSA:

- Comes out of your paycheck
- Use it or lose it
- Full funds available when benefits are effective



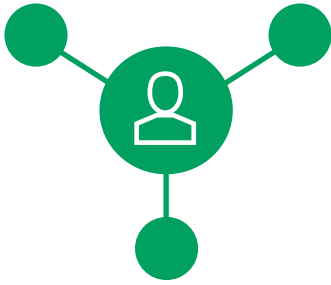
NOTE: The IRS does not allow you to have both a Health Care Flexible Spending Account and a Health Savings Account, meaning you cannot contribute to or receive reimbursements from these accounts at the same time.

*For the purposes of HSA enrollment, Employee + Family coverage includes Employee + Spouse, Employee + Children or Employee + Family coverage.

Dental

You Have Three Dental Plan Options

All are offered through Aetna and cover preventive care, basic care, major care, and orthodontia. The options include:



Aetna DMO



Aetna PDN Low



Aetna PDN High

SMALLER NETWORK
(fewer choices of doctors
and facilities)

LARGER NETWORK
(more choices of doctors
and facilities)

For a list of Aetna dental network providers, go to aetna.com.

Paycheck Cost

Aetna DMO



Aetna PDN Low



Aetna PDN High



For the exact paycheck amounts, see page 38.

No ID Card Needed! Just tell the office your name, date of birth and Member ID# (or your social security number). If you would prefer to have a card, you may print one at aetna.com.

What's Covered

The table below shows how each plan covers dental costs and what each plan pays. For more information, call Aetna at 1-877-MyTHRLink (1-877-698-4754) prompt 6, press 3.

PLAN FEATURE	Aetna Managed Dental Plan (DMO) In-Network Only	Aetna PDN (Low Option) In-Network and Out-of-Network ¹	Aetna PDN (High Option) In-Network and Out-of-Network ²
Deductible	None	\$50 per person \$150 per family	\$50 per person \$150 per family
Preventive Care: One visit every six months for routine checkups, X-rays, cleaning, and polishing	You pay a \$5 copay	You pay 20% with no deductible	You pay \$0
Basic Care: Fillings, extractions, root canal therapy, scaling of teeth, and basic oral surgery	You pay a fixed copay according to the plan's schedule	You pay 40% after deductible	You pay 20% after deductible
Major Care: Bridges, dentures, crowns, inlays, onlays, and complex oral surgery	You pay a fixed copay according to the plan's schedule	You pay 60% after deductible	You pay 50% after deductible
Maximum Annual Benefit	No limit	\$1,000 per person	\$1,500 per person
Orthodontic Care³	You pay a \$2,300 copay	50% with no deductible; \$1,000 lifetime maximum	50% with no deductible; \$1,250 lifetime maximum

¹ For the PDN (Low Option), fees are based on Aetna's fee schedule, so your out-of-pocket expenses will be higher than those under the PDN (High Option).

² Dental PDN network providers agree to charge discounted rates for their services. Although the coverage is the same for in-network and out-of-network care, out-of-network providers may charge higher fees than in-network providers, resulting in higher out-of-pocket expenses for you.

³ For eligible adults and dependent children. See the Aetna packet on BeHealthyTHR.org.

It's All Connected:

Gum Health & Memory




Good oral health can preserve your memory. Adults with gingivitis performed worse on tests of memory and other cognitive skills than those with healthier gums.



Vision

The Superior Vision plan pays benefits for annual exams and corrective lenses.

You can receive benefits for either eyeglasses or contact lenses in the same 12-month period, not both. The vision plan pays more when you use in-network providers.

	FEATURE	IN-NETWORK	OUT-OF-NETWORK
	Eye Exam	Covered in full after \$10 copay	Plan pays up to \$42 for ophthalmologist (M.D.) or \$37 for optometrist (O.D.)
	Standard Lenses	Covered in full after \$10 materials charge	Single vision — up to \$32 allowance Bifocal — up to \$46 allowance Trifocal — up to \$61 allowance Lenticular — up to \$84 allowance
	Standard Frames	Up to \$140 allowance	Up to \$53 allowance
	Contact Lenses (per pair, in lieu of eyeglasses)	Medically necessary — covered in full Cosmetic elective — up to \$140 allowance	Medically necessary — up to \$210 allowance Cosmetic elective — up to \$100 allowance

5 - 50% DISCOUNT:

Refractive Surgery – Lasik, Radial Keratotomy, or Photo-refractive Keratotomy (in-network only)

Learn More

- Find network providers and learn about discounts at SuperiorVision.com.
- Order contact lenses online at contactsdirect.com/superiorvision.

It's All Connected:

Self-Care & Caring for Others

Taking care of yourself gives you more energy and focus for caring for others.



Life and AD&D

Life insurance through Prudential pays money to whomever you choose if you should pass away. If you cover your spouse and/or children, you receive a payment if they should pass away.

Accidental death and dismemberment (AD&D) coverage pays money to whomever you choose if you have an accident that causes death or serious injury. If you cover your spouse and/or children, you receive a payment if they have an accident causing death or serious injury. See your Employee Benefits Handbook for details on what types of accidents and injuries are covered.

How It Works

Texas Health pays for your Basic Life Insurance and Basic AD&D, but you can enroll for additional coverage for yourself or for your eligible family members..

Plan	Who is Covered?	Who Gets the Money?	Who Pays the Cost?	Money to Be Paid
Basic Life Insurance	You	Whomever you choose (beneficiaries)	Texas Health	One times your annual base pay up to \$50,000
Additional Life Insurance	You	Whomever you choose (beneficiaries)	You	You choose 1 to 6 times your annual base pay (rounded to the next \$1,000) up to \$2,000,000 ¹ including Basic Life ^{2,6}
Spouse Life Insurance	Your Spouse	You	You	You choose coverage in \$10,000 increments up to \$50,000 ^{3,4}
Child Life Insurance	All of your eligible children; coverage begins at live birth	You	You	\$10,000
Basic AD&D	You	Whomever you choose (beneficiaries)	Texas Health	One times your annual base pay up to \$50,000
Additional AD&D	You	Whomever you choose (beneficiaries)	You	You choose 1 to 10 times your annual base pay, up to \$750,000 ⁶ including Basic AD&D
Family AD&D	All eligible members of your family	You	You	The maximum coverage is \$375,000 for your spouse and \$75,000 for each child. ^{4,5} (See the Employee Benefits Handbook for exact coverage level for dependents.)

¹ Medical underwriting or evidence of insurability is required for coverage over \$1,000,000.

² You may increase your coverage by only one level during the open enrollment period.

³ You may increase your spouse's coverage by \$10,000 during the open enrollment period. The cost of coverage for your spouse is based on the employee's age as of Jan. 1, 2021.

⁴ If your dependent is hospitalized or disabled, or if the employee is not actively at work at the time, a change or increase in the amount of

coverage may be delayed and subsequent claims will not be paid for the increased amount. The increase in coverage will not start until the hospitalization or disability ends or until the employee returns to work.

⁵ Eligible unmarried children can continue to be covered through age 24.

⁶ If you are absent from work because of sickness or injury on the date your Life and/or AD&D coverage (or increase in coverage) would otherwise become effective, the effective date of your coverage (or increase in coverage) will be deferred until you return to work.

Tips for Choosing Who Gets Money From Your Insurance Plans



Keep your information up to date. The people who may be paid by your plans are called beneficiaries. If you marry or divorce or have another life change, review and update your beneficiaries.



Prudential must pay your named beneficiary. Even if you have changed your will, that won't change who gets your insurance money. Keep your information up to date on [MyTHR.org](https://www.mythr.org).



Prudential cannot pay a child under age 18. If you want money to go to your children, consider setting up a trust to receive the money. That way your children avoid unnecessary court expenses and headaches.



Update Life and AD&D beneficiaries at [MyTHR.org](https://www.mythr.org).

- Select "Benefits." Then, from your Benefits Summary, select the benefit for which you want to add/change beneficiaries.



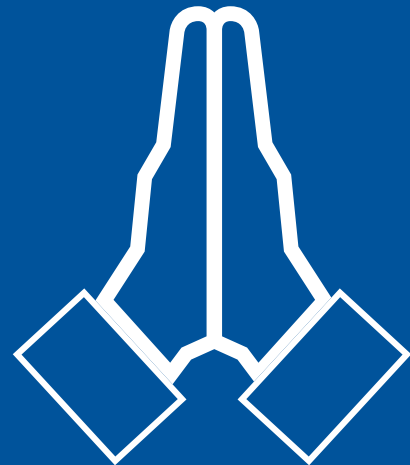
Update your 401(k) beneficiaries online at [netbenefits.com/thr](https://www.netbenefits.com/thr).

It's All Connected:

Spirituality & Well-Being

Prayer and spirituality have been linked to:

- Increased immunity
- Less hypertension
- Decreased stress and depression
- Improved well-being



Short Term Disability

Short Term Disability (STD)* will pay benefits if you are unable to work because of an illness, injury, or pregnancy. It replaces 60% of your base pay, up to \$1,700 per week if you enroll in this plan and become disabled while covered.

You may choose between two coverage options:

Benefit Plan	14-Day Option	30-Day Option
Waiting Period (How long you must be disabled before receiving replacement pay)	14 days	30 days
Maximum number of weeks that benefits will be paid	24 weeks	22 weeks
Premium Costs (see page 38)	More than the 30-day option	Less than the 14-day option

What to Know About STD



You must be getting proper care for your condition from a licensed doctor who is not you or a member of your family.



You will be eligible to receive STD payments **during the time period in which your doctor deems you disabled**. For example, the standard disability time period after childbirth is 6-8 weeks.



You may use Paid Time Off (PTO) pay while getting STD payments. However, your PTO and STD combined cannot be more than 100% of your base pay.



If you get any payments from Social Security, auto insurance, etc., the total will be subtracted from your STD benefit. STD does not cover work-related illnesses or injuries (which may be covered by workers' compensation).



If you have a condition or illness that started before you got your STD insurance, the plan may limit or deny claims that you file related to that illness – unless you enrolled for the plan as a new hire.



You must have active disability coverage on the date you become disabled to receive benefits. If you are absent from work due to illness or injury during the date your STD or LTD coverage would otherwise become effective, coverage becomes effective after you are actively at work for one full day. The requirement to be actively at work also applies to increases in coverage. Any changes to STD or LTD coverage would take effect upon your return to work.



For more information on Short Term Disability, see your Employee Benefits Handbook.

Paid Parental Leave

A three-week Paid Parental Leave is available for benefits-eligible employees who have or adopt a child or have a child placed with them. The leave start date must occur after Jan. 1, 2021, and the employee must have continuously worked for Texas Health for at least 6 months.

*Resident Interns are not eligible for Disability plans. Executives are not eligible for the STD plan.

Long Term Disability

Texas Health provides Basic Long Term Disability (LTD)* through Prudential at no cost to you. Basic LTD replaces 50% of your pay when you have an eligible disability lasting more than 180 days. You may enroll and pay for Additional LTD to receive 60% of your pay.

How It Works

Benefit Plan	Who Pays the Cost	What You Get	Wait Time Before You Get Any Money
Basic Long Term Disability	Texas Health	50% of your base pay, up to \$15,000 per month.	180 days
Additional Long Term Disability	You	An extra 10%, bringing your total up to 60% of your base pay, up to \$15,000 per month.	180 days

When Benefits Are Paid



What to Know About LTD



You must be getting proper care for your condition from a licensed doctor who is not you or a member of your family.



If you get any payments from Social Security, workers' compensation, etc., the total will be subtracted from your LTD benefit.



Unless you had LTD coverage in 2018, if you have a condition or illness that started before you got your LTD insurance, the plan may limit or deny claims that you file related to that illness



For more information on Long Term Disability, see your Employee Benefits Handbook.

If you are a physician employed by THPG, you have a separate LTD plan.

*Resident Interns are not eligible for Disability plans

Supplemental Benefit Plans

Supplemental benefits pay you cash to help you pay for bills or other expenses when you have a covered illness or injury.



Critical Illness Insurance

Get money if you or a covered family member is diagnosed with a covered illness



Hospital Indemnity Insurance

Helps you pay your bills when you are admitted to the hospital



Accident Insurance

Pays flat dollar amounts for many types of accidental injuries, from a cut requiring stitches to second-degree burns, loss of limb and death

For more information, visit BeHealthyTHR.org or call MetLife at 866-626-3705.

It's All Connected:

Exercise & Mood/Mind

Exercise raises your focus for 2-3 hours afterwards. It can even help prevent brain aging and Alzheimer's.



Health Care Flexible Spending Account

Enrolling in the Health Care Flexible Spending Account (HCFSA) is like getting a discount on health care expenses. With this benefit, you don't pay income taxes on the money you use to pay for doctor visits, prescription drugs, eyeglasses and other eligible expenses.

How It Works

- 1. Choose how much to put in** your account each pay period before taxes are taken out of your check. For the year, you can set aside as little as \$130 or as much as \$2,750.
- 2. Pay for eligible expenses:**
 - By using your HCFSA debit card or
 - By using a credit card, check or cash, then filing a claim at [WageWorks.com](https://www.wageworks.com) and paying yourself back with money from your account
- 3. Use the money in your account** prior to March 15, 2022. Any money you don't use, you lose, so estimate carefully.

HCFSA Q&A

Who can I spend the money on?

You, your spouse or your children (as long as you claim the kids on your federal tax return). You don't have to be enrolled in medical insurance with Texas Health to enroll, and neither do the people you are spending the money on.

What can I be reimbursed for?

When you pay out of your own pocket for health care (medical, dental, vision and hearing), most of those expenses are eligible. See [WageWorks.com](https://www.wageworks.com) for examples.

Where can I use my debit card?

Generally, you can use your debit card at doctor's and dentist's offices, pharmacies, eyecare stores, etc. – as long as they accept Mastercard. The debit card should only be used to pay actual expenses, not estimated expenses.

How much money can I take out of the account?

At any time during the year, you can pay bills or reimburse yourself from your HCFSA up to the full amount you choose to put in for the whole year – even if you have not contributed that much to your account yet.

Do I need to keep my receipts?

Yes, you'll need receipts and/or explanation of benefits (EOB) forms for filing claims, and to show as proof if HealthEquity sends you a Request for Documentation letter for your debit card purchases.

When is my last chance to use money in my account?

March 15, 2022 is the last day you can incur an expense (visit the doctor, pick up a prescription, etc.) and March 31, 2022, is the last date you can file a claim to pay yourself back.

What happens if I don't use all of the money?

You lose any money left in your account after March 31, 2022, so plan carefully.

What if I have questions?

Call 1-877-MyTHRLink, prompt 6, and press 6 or visit WageWorks.com.

How is an HCFSA different from an HSA?

The biggest difference between a Health Care Flexible Spending Account (HCFSA) and a Health Savings Account (HSA) is that HSAs may only be contributed to if you are enrolled in a high-deductible health plan (HDHP) – like the Texas Health Aetna Select Plan 3000 and the UHC Choice Plus 1500.

The next biggest difference is that you lose any money you don't use by the deadline with an HCFSA. With an HSA, you always keep your money.

The full amount of the HCFSA election is available to you when your benefits become effective. HSA funds are available to you as contributed.

Remember, an HCFSA is NOT the same as an HSA.

An HSA:

- Requires enrollment in Texas Health Aetna 3000 or UHC Choice Plus 1500
- Comes with employer contributions
- You can put in additional money that will come out of your paycheck
- Rolls over year to year

An HCFSA:

- Comes out of your paycheck
- Use it or lose it
- Full funds available when benefits are effective

It's All Connected:

Sense of Purpose & Life Expectancy

Knowing your sense of purpose is worth up to seven years of extra life expectancy.



Day Care Flexible Spending Account

Save money on your day care expenses by signing up for the Day Care Spending Account (DCFSA). With this benefit, you don't pay income taxes on the money you use to pay for dependent day care.

How It Works

- 1. Choose how much to put in** to your account each pay period before taxes are taken out. For the year, you can set aside as little as \$130 or as much as \$5,000. See the chart on the right.
- 2. Pay for eligible expenses:**
 - By using a credit card, check or cash, filing a claim at WageWorks.com, and paying yourself back with money from your account

IF YOU ARE:



Single



Married

filing a **joint** tax return



Married

filing **separate** tax returns

YOUR FAMILY CAN SET ASIDE UP TO:

\$5,000

\$5,000, your income, or your spouse's income, whichever is lowest

\$2,500, your income, or your spouse's income, whichever is lowest

DCFSA Q&A

Who can I spend the money on?

Someone who lives with you and relies on you for more than half of their financial support who is either:

- A child under age 13 whom you claim on your federal income tax return, or
- A disabled dependent of any age who lives with you more than half the year

When can I use this benefit?

When you pay for day care so you can work and your spouse (if you're married) can work, look for work or study as a full-time student

What types of care are eligible?

- Care in your home, someone else's home, or a licensed day care center
- Care provided by a relative who is not your spouse, child under age 19, or someone you claim as a dependent on your tax return

How much money can I spend?

You can spend as much as you have in your account when you submit a claim.

When is my last chance to use money in my account?

March 15, 2022, is the last day you can get eligible day care, and March 31, 2022, is the last date you can file a claim to pay yourself back.

What happens if I don't use all of the money?

You lose any money left in your account after March 31, 2022, so plan carefully.

What if I have questions?

Call 1-877-MyTHRLink, prompt 6, and press 6 or visit WageWorks.com

Free Benefits

Remember to take advantage of all of the free benefits Texas Health offers to you. Visit [BeHealthyTHR.org](https://www.behealthythr.org) for more information on these perks, including eligibility requirements that may apply.



Employee Assistance Program (EAP)

The EAP helps you and your family manage life's challenges with in-person, phone and web-video counseling sessions. You can also get referrals to more services related to child/elder care, financial and legal help, and identity theft.



Discount Program

The employee discount program can save you money and give you convenient access to a wide variety of products and services. Discounts/insurance options include pet insurance, auto/home insurance, identity theft/legal plan insurance, cell phone service discounts, car rental discounts, travel discounts, cord blood banking and more.



Adoption Assistance

If you are a benefits-eligible employee with one or more years of service, Texas Health will pay you back (up to \$2,000) for the cost of legally adopting a child. This offer excludes expenses for one spouse to adopt the other spouse's children.



Tuition Reimbursement

Texas Health will pay you back for tuition and fees for approved degree plans that benefit Texas Health or your position at Texas Health. Full-time employees can get up to \$5,250 reimbursed per year for clinical degrees and non-clinical degrees. Part-time employees can get up to \$2,625 reimbursed per year for clinical degrees and non-clinical degrees.



Quit for Life

Quit for Life can help you stop using tobacco with phone counseling, personalized Quit Guides, an interactive website, and nicotine replacement therapy. If your Quit Coach recommends, you can also get prescription medication Chantix or Bupropion (a 40% copay applies for participants not enrolled in the Total Health medical plan).



Student Loan Debt Repayment Program

A Student Loan Debt Repayment program (\$50 per month) is available to help eligible employees pay down their student loan debt.

Covering Family Members

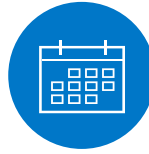
If you add a new eligible family member to medical, dental, or vision coverage during 2021 Benefits Enrollment, you'll need to send documentation showing their eligibility.



What to Send

- For a spouse, you'll send 1) proof of marriage (like your marriage license) and 2) proof of shared address (like your spouse's drivers license).*
- For a child, you'll send a birth certificate.

If you don't have the documents listed above, visit [BeHealthyTHR.org](https://www.behealthythr.org) for other things you can send.



When to Send

If adding a dependent during benefits enrollment:
Nov. 25.



Where to Send

Email your documents to
THRBenefitsSupport@texashealth.org.

You'll find full eligibility requirements and a list of **accepted documents*** in your Employee Benefits Handbook.

A Social Security number must be provided for every covered dependent over six months of age.

*If your spouse is a common law spouse, certification of common law marriage is required. Tax returns will not be accepted.

Making Changes After Enrollment

Federal laws govern when you may make benefits changes. You can make a change during the year only if there's a change in your life that meets certain requirements, called a **Qualified Status Change**.

Qualified Status Changes:



You marry or divorce



You gain or lose a child due to birth, adoption, placement for adoption, eligibility under a Qualified Medical Child Support Order (QMCSO), or death



You, your spouse, or child gets or loses a job that affects your ability to have benefits



You, your spouse, or child experiences a significant change in employment status (for example, change from full-time to part-time) that affects your ability to have benefits



You move to a new address or work location that causes you to lose the medical and/or dental plan coverage you selected



Your dependent is no longer eligible under the plan's rules



You or your spouse take (or return from) an unpaid leave of absence that affects coverage.



Make changes at MyTHR.org and provide documents within **31 calendar days** of the event.



Need help?
Call Texas Health Benefits Support at **1-877-MyTHRLink** (1-877-698-4754), option 9.

Deadline

To add coverage for a new spouse or child or to make changes to your coverage, you must enroll them and/or make changes within 31 calendar days of the event (such as marriage or birth), even if you already have family coverage.

Effective Date

Your changes will be effective the next pay period after you make the change online and send us documentation for the change. Coverage for birth and adoption is effective on the date of birth or adoption.

To Make Most Changes:

- Go to **MyTHR.org**.
- Click the **Benefits Tile**.
- Click **Life Change Event**.

Benefit Costs Per Paycheck

The table below and on the following pages show your benefit costs per paycheck.

Medical Coverage (paid before-tax)¹

PLAN NAME	Employee Only		Employee + Spouse		Employee + Child(ren)		Employee + Family	
	YOU PAY	Texas Health Pays	YOU PAY	Texas Health Pays	YOU PAY	Texas Health Pays	YOU PAY	Texas Health Pays
Full-Time Employees Who Earn Less Than \$25,000								
Texas Health Aetna Select 1000/Low Rx	\$24.08	\$320.63	\$73.85	\$650.04	\$50.42	\$594.20	\$95.61	\$928.18
Texas Health Aetna Select 1000/High Rx	\$24.85	\$327.13	\$79.97	\$659.19	\$53.11	\$605.10	\$107.31	\$938.07
Texas Health Aetna Select 3000/Low Rx	\$31.28	\$290.43	\$82.74	\$606.12	\$63.69	\$553.99	\$96.60	\$840.42
Texas Health Aetna Select 3000/High Rx	\$32.05	\$296.93	\$88.86	\$615.27	\$66.38	\$564.89	\$108.30	\$850.31
UHC Choice 500/Low Rx	\$30.10	\$342.12	\$129.71	\$651.94	\$80.12	\$615.92	\$172.28	\$933.19
UHC Choice 500/High Rx	\$30.87	\$348.62	\$135.83	\$661.09	\$82.81	\$626.82	\$183.98	\$943.08
UHC Choice 1000/Low Rx	\$27.31	\$323.83	\$83.77	\$659.18	\$57.19	\$604.38	\$108.45	\$942.27
UHC Choice 1000/High Rx	\$28.08	\$330.33	\$89.89	\$668.33	\$59.88	\$615.28	\$120.15	\$952.16
UHC Choice Plus 1500/Low Rx	\$67.34	\$294.49	\$299.91	\$458.04	\$220.11	\$458.99	\$383.31	\$672.85
UHC Choice Plus 1500/High Rx	\$68.11	\$300.99	\$306.03	\$467.19	\$222.80	\$469.89	\$395.01	\$682.74
Full-Time Employees Who Earn \$25,000 - \$49,999								
Texas Health Aetna Select 1000/Low Rx	\$29.90	\$314.81	\$95.76	\$628.13	\$85.69	\$558.93	\$149.59	\$874.20
Texas Health Aetna Select 1000/High Rx	\$32.22	\$319.76	\$104.70	\$634.46	\$89.61	\$568.60	\$166.93	\$878.45
Texas Health Aetna Select 3000/Low Rx	\$34.29	\$287.42	\$86.69	\$602.17	\$81.62	\$536.06	\$113.79	\$823.23
Texas Health Aetna Select 3000/High Rx	\$36.61	\$292.37	\$95.63	\$608.50	\$85.54	\$545.73	\$131.13	\$827.48
UHC Choice 500/Low Rx	\$47.97	\$324.25	\$198.43	\$583.22	\$172.52	\$523.52	\$322.13	\$783.34
UHC Choice 500/High Rx	\$50.29	\$329.20	\$207.37	\$589.55	\$176.44	\$533.19	\$339.47	\$787.59
UHC Choice 1000/Low Rx	\$33.92	\$317.22	\$108.62	\$634.33	\$97.20	\$564.37	\$169.68	\$881.04
UHC Choice 1000/High Rx	\$36.24	\$322.17	\$117.56	\$640.66	\$101.12	\$574.04	\$187.02	\$885.29
UHC Choice Plus 1500/Low Rx	\$114.79	\$247.04	\$420.22	\$337.73	\$353.34	\$325.76	\$637.54	\$418.62
UHC Choice Plus 1500/High Rx	\$117.11	\$251.99	\$429.16	\$344.06	\$357.26	\$335.43	\$654.88	\$422.87

1. If you are a part-time employee over age 55, Texas Health provides you with a subsidy for medical coverage equal to the difference between the cost of coverage for a full-time employee earning between \$50,000 and \$74,999 a year and a part-time employee's cost. When you enroll online, the premium amount you see will have the part-time over age 55 subsidy included. However, your paycheck will show the regular part-time premium amount on one line and the over age 55 subsidy on a separate line.

PLAN NAME	Employee Only		Employee + Spouse		Employee + Child(ren)		Employee + Family	
	YOU PAY	Texas Health Pays	YOU PAY	Texas Health Pays	YOU PAY	Texas Health Pays	YOU PAY	Texas Health Pays
Full-Time Employees Who Earn \$50,000 - \$74,999								
Texas Health Aetna Select 1000/Low Rx	\$31.00	\$313.71	\$98.91	\$624.98	\$90.13	\$554.49	\$153.24	\$870.55
Texas Health Aetna Select 1000/High Rx	\$34.11	\$317.87	\$109.25	\$629.91	\$94.87	\$563.34	\$173.38	\$872.00
Texas Health Aetna Select 3000/Low Rx	\$36.10	\$285.61	\$92.25	\$596.61	\$87.48	\$530.20	\$121.80	\$815.22
Texas Health Aetna Select 3000/High Rx	\$39.21	\$289.77	\$102.59	\$601.54	\$92.22	\$539.05	\$141.94	\$816.67
UHC Choice 500/Low Rx	\$49.11	\$323.11	\$209.08	\$572.57	\$186.69	\$509.35	\$340.68	\$764.79
UHC Choice 500/High Rx	\$52.22	\$327.27	\$219.42	\$577.50	\$191.43	\$518.20	\$360.82	\$766.24
UHC Choice 1000/Low Rx	\$35.16	\$315.98	\$112.19	\$630.76	\$102.23	\$559.34	\$173.82	\$876.90
UHC Choice 1000/High Rx	\$38.27	\$320.14	\$122.53	\$635.69	\$106.97	\$568.19	\$193.96	\$878.35
UHC Choice Plus 1500/Low Rx	\$118.91	\$242.92	\$442.64	\$315.31	\$376.90	\$302.20	\$673.76	\$382.40
UHC Choice Plus 1500/High Rx	\$122.02	\$247.08	\$452.98	\$320.24	\$381.64	\$311.05	\$693.90	\$383.85
Full-Time Employees Who Earn \$75,000 - \$99,999								
Texas Health Aetna Select 1000/Low Rx	\$34.86	\$309.85	\$132.91	\$590.98	\$121.02	\$523.60	\$218.01	\$805.78
Texas Health Aetna Select 1000/High Rx	\$38.73	\$313.25	\$147.81	\$591.35	\$127.62	\$530.59	\$239.60	\$805.78
Texas Health Aetna Select 3000/Low Rx	\$36.86	\$284.85	\$115.73	\$573.13	\$107.27	\$510.41	\$197.84	\$739.18
Texas Health Aetna Select 3000/High Rx	\$40.73	\$288.25	\$130.63	\$573.50	\$113.87	\$517.40	\$219.43	\$739.18
UHC Choice 500/Low Rx	\$62.97	\$309.25	\$310.24	\$471.41	\$256.47	\$439.57	\$494.25	\$611.22
UHC Choice 500/High Rx	\$66.84	\$312.65	\$325.14	\$471.78	\$263.07	\$446.56	\$515.84	\$611.22
UHC Choice 1000/Low Rx	\$39.54	\$311.60	\$150.76	\$592.19	\$137.27	\$524.30	\$247.29	\$803.43
UHC Choice 1000/High Rx	\$43.41	\$315.00	\$165.66	\$592.56	\$143.87	\$531.29	\$268.88	\$803.43
UHC Choice Plus 1500/Low Rx	\$162.34	\$199.49	\$650.29	\$107.66	\$546.38	\$132.72	\$1,008.92	\$47.24
UHC Choice Plus 1500/High Rx	\$166.21	\$202.89	\$665.19	\$108.03	\$552.98	\$139.71	\$1,030.51	\$47.24

1. If you are a part-time employee over age 55, Texas Health provides you with a subsidy for medical coverage equal to the difference between the cost of coverage for a full-time employee earning between \$50,000 and \$74,999 a year and a part-time employee's cost. When you enroll online, the premium amount you see will have the part-time over age 55 subsidy included. However, your paycheck will show the regular part-time premium amount on one line and the over age 55 subsidy on a separate line.

PLAN NAME	Employee Only		Employee + Spouse		Employee + Child(ren)		Employee + Family	
	YOU PAY	Texas Health Pays	YOU PAY	Texas Health Pays	YOU PAY	Texas Health Pays	YOU PAY	Texas Health Pays
Full-Time Employees Who Earn \$100,000 and above								
Texas Health Aetna Select 1000/Low Rx	\$45.91	\$298.80	\$182.02	\$541.87	\$163.77	\$480.85	\$296.59	\$727.20
Texas Health Aetna Select 1000/High Rx	\$50.64	\$301.34	\$197.29	\$541.87	\$171.62	\$486.59	\$318.18	\$727.20
Texas Health Aetna Select 3000/Low Rx	\$47.11	\$274.60	\$163.90	\$524.96	\$150.16	\$467.52	\$245.43	\$691.59
Texas Health Aetna Select 3000/High Rx	\$51.84	\$277.14	\$179.17	\$524.96	\$158.01	\$473.26	\$267.02	\$691.59
UHC Choice 500/Low Rx	\$84.06	\$288.16	\$418.27	\$363.38	\$346.78	\$349.26	\$673.24	\$432.23
UHC Choice 500/High Rx	\$88.79	\$290.70	\$433.54	\$363.38	\$354.63	\$355.00	\$694.83	\$432.23
UHC Choice 1000/Low Rx	\$52.07	\$299.07	\$206.47	\$536.48	\$185.76	\$475.81	\$336.42	\$714.30
UHC Choice 1000/High Rx	\$56.80	\$301.61	\$221.74	\$536.48	\$193.61	\$481.55	\$358.01	\$714.30
UHC Choice Plus 1500/Low Rx	\$212.87	\$148.96	\$757.95	\$0.00	\$679.10	\$0.00	\$1,056.16	\$0.00
UHC Choice Plus 1500/High Rx	\$217.60	\$151.50	\$773.22	\$0.00	\$686.95	\$5.74	\$1,077.75	\$0.00
Part-Time Employees¹								
Texas Health Aetna Select 1000/Low Rx	\$77.99	\$266.72	\$180.31	\$543.58	\$164.28	\$480.34	\$264.24	\$759.55
Texas Health Aetna Select 1000/High Rx	\$85.26	\$266.72	\$195.58	\$543.58	\$175.76	\$482.45	\$285.83	\$759.55
Texas Health Aetna Select 3000/Low Rx	\$80.56	\$241.15	\$180.27	\$508.59	\$167.66	\$450.02	\$246.27	\$690.75
Texas Health Aetna Select 3000/High Rx	\$87.83	\$241.15	\$195.54	\$508.59	\$179.14	\$452.13	\$267.86	\$690.75
UHC Choice 500/Low Rx	\$182.35	\$189.87	\$440.37	\$341.28	\$378.05	\$317.99	\$620.62	\$484.85
UHC Choice 500/High Rx	\$189.62	\$189.87	\$455.64	\$341.28	\$389.53	\$320.10	\$642.21	\$484.85
UHC Choice 1000/Low Rx	\$88.46	\$262.68	\$204.53	\$538.42	\$186.34	\$475.23	\$299.73	\$750.99
UHC Choice 1000/High Rx	\$95.73	\$262.68	\$219.80	\$538.42	\$197.82	\$477.34	\$321.32	\$750.99
UHC Choice Plus 1500/Low Rx	\$283.64	\$78.19	\$683.49	\$74.46	\$580.65	\$98.45	\$1,056.16	\$0.00
UHC Choice Plus 1500/High Rx	\$290.91	\$78.19	\$698.76	\$74.46	\$592.13	\$100.56	\$1,077.75	\$0.00

1. If you are a part-time employee over age 55, Texas Health provides you with a subsidy for medical coverage equal to the difference between the cost of coverage for a full-time employee earning between \$50,000 and \$74,999 a year and a part-time employee's cost. When you enroll online, the premium amount you see will have the part-time over age 55 subsidy included. However, your paycheck will show the regular part-time premium amount on one line and the over age 55 subsidy on a separate line.

Dental (Paid Before-Tax)

Coverage Level	Aetna Managed (DMO)	Aetna PDN (Low Option)	Aetna PDN (High Option)
Employee Only	\$6.88	\$9.17	\$21.53
Employee + Spouse	\$13.74	\$18.33	\$43.02
Employee + Child(ren)	\$18.39	\$24.52	\$57.57
Employee + Family	\$23.33	\$31.12	\$73.07

Vision (Paid Before-Tax)

Coverage Level	Superior Vision
Employee Only	\$3.50
Employee + Spouse	\$7.53
Employee + Child(ren)	\$5.67
Employee + Family	\$10.33

Additional Life* (Paid After-Tax)

Your Age*	Cost per pay period per \$1,000 of coverage
Under 30	\$0.016
30 - 34	\$0.020
35 - 39	\$0.028
40 - 44	\$0.036
45 - 49	\$0.056
50 - 54	\$0.087
55 - 59	\$0.131
60 - 64	\$0.171
65 - 69	\$0.254
70 - 74	\$0.345
75 - 79	\$0.496

Spouse Life* (Paid After-Tax)

Your Age*	Cost per pay period per \$1,000 of coverage
Under 30	\$0.026
30 - 34	\$0.035
35 - 39	\$0.040
40 - 44	\$0.044
45 - 49	\$0.066
50 - 54	\$0.102
55 - 59	\$0.190
60 - 64	\$0.291
65 - 69	\$0.560
70 - 74	\$0.908
75+	\$0.908

Child Life (Paid After-Tax)

Coverage	Cost per paycheck
All your children	\$0.270 for \$10,000 of coverage

Additional AD&D (Paid Before-Tax)

Coverage Level	Cost per pay period per \$1,000 of coverage
Employee Only	\$0.0055
Employee + Family	\$0.0102

* Additional and Spouse Life rates are based on the employee's age as of Jan. 1, 2021.

Cost of Disability Coverage

To calculate your premiums for disability, multiply your hourly base rate by the cost of coverage listed in the tables below. For example, if you earn \$11 per hour and you are electing STD with a 14-day waiting period, multiply \$11 x \$0.7643 = \$8.41 per paycheck.

If you are a part-time employee, multiply \$11 x \$0.7643 x (hours you are regularly scheduled to work ÷ 80).

STD (Paid After-Tax)

Waiting Period	Rate Multiplier
14 days	\$0.7643
30 days	\$0.5317

Additional LTD (Paid After-Tax)

Coverage	Rate Multiplier
Additional LTD ("Buy-Up" Plan)	\$0.3008

Calculating Premiums

Your premiums for medical, life, AD&D and disability benefits are based on your current salary. See the Calculation of Your Premiums FAQ on BeHealthyTHR.org for more details on how your premiums are calculated and how they may change during the year.

Hospital Indemnity

(Paid After-Tax)

Coverage Level	Low Option	High Option
Employee Only	\$5.83	\$10.54
Employee + Spouse	\$11.46	\$20.74
Employee + Child(ren)	\$8.30	\$15.02
Employee + Family	\$13.92	\$25.22

Accident Insurance

(Paid After-Tax)

Coverage Level	Low Option	High Option
Employee Only	\$3.15	\$4.74
Employee + Spouse	\$5.01	\$7.54
Employee + Child(ren)	\$6.29	\$9.46
Employee + Family	\$8.15	\$12.25

Critical Illness Insurance¹ (Paid After-Tax)

Your Age	Employee Only	Employee + Spouse	Employee + Children	Employee + Family
\$15,000 OF COVERAGE				
29 and Under	\$2.35	\$4.78	\$2.42	\$4.85
30-34	\$3.18	\$6.44	\$3.25	\$6.51
35-39	\$3.60	\$7.27	\$3.67	\$7.34
40-44	\$4.36	\$8.79	\$4.43	\$8.86
45-49	\$6.23	\$12.53	\$6.30	\$12.60
50-54	\$8.72	\$17.52	\$8.79	\$17.58
55-59	\$12.88	\$25.82	\$12.95	\$25.89
60-64	\$21.67	\$43.41	\$21.74	\$43.48
65 and Over	\$47.70	\$95.47	\$47.77	\$95.54
\$30,000 OF COVERAGE				
29 and Under	\$3.88	\$7.89	\$4.02	\$8.03
30-34	\$5.54	\$11.22	\$5.68	\$11.35
35-39	\$6.37	\$12.88	\$6.51	\$13.02
40-44	\$7.89	\$15.92	\$8.03	\$16.06
45-49	\$11.63	\$23.40	\$11.77	\$23.54
50-54	\$16.62	\$33.37	\$16.75	\$33.51
55-59	\$24.92	\$49.98	\$25.06	\$50.12
60-64	\$42.51	\$85.15	\$42.65	\$85.29
65 and Over	\$94.71	\$189.55	\$94.85	\$189.69

¹ Employee and spouse rates are based on the employee's age as of Jan. 1.

Quick Links



Enrollment Help

There is so much additional information online at [BeHealthyTHR.org](https://www.behealthythr.org), a site that is accessible from work, home, or mobile device. Click the links below to go directly to content you may find helpful while making your benefits decisions.

[BeHealthyTHR.org](https://www.behealthythr.org)

[MyTHRLink - Call carriers or Texas Health Benefits Support](#)

[Texas Health Aetna Network Information](#)

[UHC Preferred Hospital List](#)

[Know Who Is Covered](#)

[Summary of Benefits and Coverage \(SBC\)](#)

[Step-by-step Enrollment Instructions](#)

[Human Resources Phone Numbers](#)



Other Great Benefits

Don't forget about the other great benefits available to you. Click on the links below to learn more.

[Paid Time Off \(PTO\)](#)

[401\(k\) Retirement](#)

[Helping Hands](#)

[Employee Discounts](#)

[Employee Relief Fund](#)

[Tuition Reimbursement](#)

[Student Loan Repayment Benefit](#)

[Paid Parental Leave](#)



Be Healthy Rewards

To take care of yourself mind, body and spirit, Texas Health is proud to offer the *Be Healthy* Wellness Program. Whether you're just starting out or looking to up your game, we've got something for you.

Programs include:

[Wellness Credit Screenings](#)

[Health Check Survey](#)

[Cancer Screenings](#)

[Healthy Pregnancy](#)

[Virgin Pulse Activities](#)

You can even earn rewards up to \$300 in the form of gift cards for completing a yearly health check survey (\$75), a yearly wellness exam (\$75), and more.

Through our *Virgin Pulse* app, you have access to wellness at your fingertips.



Be Healthy Support

Our *Be Healthy* wellness program also provides tools and support to help you increase your focus, energy, strength and mood.

[Employee Assistance Program \(EAP\)](#)

[Blue Zones](#)

[Tobacco Cessation](#)

[Diabetes Care](#)

[Medical Nutrition Therapy](#)

[Be Healthy Breaks](#)

[Real Appeal](#)



Questions?

If you have questions about a benefit or enrollment, you can call Texas Health Benefits Support at 1-877-MyTHRLink (1-877-698-4754), prompt 9, Monday through Friday, 8 a.m. to 5 p.m.